

LEARNING DISORDER OF THE MAIN CHARACTER AS REFLECTED IN *THE THEORY OF EVERYTHING* MOVIE

(A Psychological Approach)

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Abstract: *Nowadays, along with the times and technology, movies have become one of the most effective mass-communication media, which can be used as a place to share knowledge, tell stories, or provide certain information. One of them is to provide information about education, where during the learning process students may experience learning disorders, both students with normal physical and students with disabilities. This research aims to analyze how learning disorders occur in the main character and to analyze how the intrinsic motivation of the main character in The Theory of Everything movie. In this research used content analysis method. The object of this research is The Theory of Everything movie which describes Stephen Hawking's life until he achieved his success. Based on the analysis that has been done, the results of the research found are: the learning disorders occur in the main character of The Theory of Everything movie is caused by amyotrophic lateral sclerosis, such as: motor disorders and communication disorders. In motor disorders, the main character has developmental coordination disorder and stereotypic movement disorder. While on communication disorders, the main character has speech sound disorder, childhood-onset fluency disorder (stuttering), and unspecified communication disorder. In addition, the intrinsic motivation of the main character can be seen from all aspects of intrinsic motivation, they are: the needs to fulfil dissatisfaction when he has not completed his task, knowing his progress, and have aspirations or goals in his life.*

Keywords: *Learning disorder, Motivation, Theory of Everything*

INTRODUCTION

Movie is one of the most effective mass communication media that can be used as a place to share knowledge, stories, or certain information. Movie is a series of static images that are presented in front of the eyes in sequence at high speed (Wahyuningsih, 2019). As an educational medium, movies present spectacles that contain moral messages, history, biographies of figures, as well as solutions to themes that develop in society that can be used as learning resources. Learning is generally defined as a relatively permanent change in behaviour, skills, knowledge, or attitudes resulting from psychological or social experiences that can be described (Sutton & Seifert, 2008). Learning can be done by anyone, both normal people and people with disabilities. The difference is, people with disabilities have more individual and social barriers that cause them to experience obstacles in the learning process because of their disability, one of which they experience learning disorders. Students with disabilities who have strong motivation can accept their condition and follow the learning process well because it is possible that they have the potential for intelligence and special talents like normal people.

THEORETICAL UNDERPINNING

Psychology of Education

Learning disorders and the learning solutions associated with them. It should be linked to psychology of education. Psychology of education is the study of how people learn in educational settings, educational effectiveness, teaching psychology, and the social psychology of schools as organizations (Somashekar, 2012). Psychology of education studies child and adolescent development in learning and motivation, social and cultural influences on learning, and assessment (Woolfolk, 2016). Thus, psychology of education is a branch of psychology that studies, researches, and discusses as a whole about human behaviour in relation to learning and educational activities in general. Psychology of education deals with almost everything from adjustment to kindergarten to adult education. It is also involved with topics of motivation, intelligence, memory, cognition, intellectual development and evaluation and assessment.

Learning Disorders

Learning disorders is a term used for academic difficulties due to neurological-based problems (Silver & Silver, 2014). This is indicated by the existence of problems in the student's brain causing obstacles experienced during the learning process, such as difficulty concentrating, memory problems, reading disorders, writing disorders, language disorders, reading and writing disorders, and other disorders (Rohmah, 2020). Learning disorders related to brain problems are classified into two parts, namely: motor skills disorders and communication disorders (Silver & Silver, 2014).

Motor disorder is a malfunction of the nervous system that causes involuntary or uncontrolled body movements or actions. In DSM-V-TM, motor disorders are divided into three categories, they are:

1. Developmental coordination disorder (DCD), characterized by underdeveloped motor skills that affect daily activities and achievement at school (such as difficulty tying shoelaces, difficulty writing, difficulty descending stairs, frequent dropping of objects, frequent stumbling, walking unbalanced, difficulty holding small objects, and difficulties in other self-care activities) (Black & Grant, 2014);
2. Stereotypic movement disorder (SMD), characterized by repetitive motor behaviour (e.g. shaking or waving hands, body shaking, head banging, self-biting, body self-hitting) (Black & Grant, 2014);
3. Tic Disorders (TD) are disorders that occur where movement irregular, uncontrollable, unwanted and repetitive muscles that can occur in any part of the body (Black & Grant, 2014).

In addition, communication disorders are characterized by difficulties in language, speech, and communication. In DSM-V-TM, communication disorders are divided into five categories, they are:

1. Language disorder (LD), characterized by difficulties in language acquisition and use, due to deficits in the production or understanding of vocabulary, discourse, and sentence structure. Symptoms include persistent difficulty in mastering and using various forms of language leading to reduced vocabulary, limited sentence structure and disturbances in discourse (Black & Grant, 2014);
2. Speech sound disorder (SSD), a disorder in which children have persistent difficulty pronouncing words or sounds correctly. Symptoms include persistent difficulty in producing speech sounds that interfere with the clarity of one's speech; limitations in communication that interfere with social participation, academic achievement, or job performance, both individually and in groups (Black & Grant, 2014);
3. Childhood-onset fluency disorder (stuttering) (COFD) is a disorder in the fluency of the tempo of speech that is not appropriate for the age and language ability of the individual persists over time. Symptoms are speech disorders characterized by repetition of sounds and syllables (e.g., "I-I-I took it"), broken words (pauses in one word), prolongation of consonants and vowels, etc (Black & Grant, 2014);
4. Social (pragmatic) communication disorder (SCD) is a disorder characterized by difficulties with pragmatics, or the use of language in social communication. Symptoms include persistent difficulties in social use of verbal and nonverbal communication, and the disorder causes limitations in social communication (Black & Grant, 2014);

5. Unspecified communication disorder (UCD), a communication disorder that does not meet the more specific diagnostic criteria for communication disorders. Symptoms have a significant impact on social, occupational, educational, and interpersonal functioning (Black & Grant, 2014).

Motivation

Motivation is a reason behind an individual's actions. Motivation is a change that occurs in a person that arises from feelings, psychological and emotional symptoms that encourage individuals to do something because of needs, desires and goals (Dayana & Marbun, 2018). It can be said that motivation is a very strong desire or urge that arises in a person when he wants to get, obtain, or achieve something. In general, motivation is divided into two types, they are:

1. Intrinsic motivation is the drive that arises within the individual to do something without any external stimulation (Davidson-Shivers et al., 2017; Herijulianti et al., 2002). The factors that affect a person's intrinsic motivation, such as: the need, knowledge of his own progress, and aspirations or ideals (Fathurrohman & Sulistyorini, 2012);
2. Extrinsic motivation is an encouragement or stimulation from outside the individual to do something (Davidson-Shivers et al., 2017; Herijulianti et al., 2002).

Learning disorders that occur in students when they are studying are similar to the story of Stephen Hawking, who is a person with a physical disabilities and a genius scientist. Flashback story of his life made into a movie entitled *The Theory of Everything*.

It is a biographical movie that contains flashbacks of the life story of Stephen Hawking who has Amyotrophic Lateral Sclerosis (ALS), a motor neuron diseases that makes he has physical limitations. It makes he has learning disorders during his learning process. However, with strong motivation, physical limitations did not stop him from completing his education and continue to share his knowledge with others.

Based on the description above, the writer is interested in analyzing the learning disorders that occur in the main character of *The Theory of Everything* movie using a psychological approach. This study was conducted by focusing on the following two objectives: to analyze how the learning disorders occur in the main character and to analyze how the intrinsic motivation of the main character is.

METHOD

In this study, the writer used qualitative data analysis techniques. The writer analyzes the movie based on the content analysis method because the writer analyzes the thoughts and behaviour of the main character (Stephen Hawking). Content analysis is a method for analyzing phenomena based on the content the writer wants to see. The writer

observes the content and the writer understands the content of the movie; the writer analyzes the context and relates it to the scenes and dialogues of the movie. Then the writer relates what she has discussed with psychological theory (Krippendorf, 2004). In analyzing the data, the writer uses coding inter-orientations; it means the writer analyze the data by interpreting the data (Krippendorf, 2004).

To obtain reliable data, the data that has been obtained must first be tested for data validity or data validity. In this case the writer uses triangulation. Triangulation is a verification process that increases validity by incorporating multiple points of view and methods, which refers to the combination of two or more theories, data sources, methods or researchers in a study of a single phenomenon to converge on a single construction (Rahman, 2012). Three types of triangulation are data triangulation, investigators triangulation, and theoretical triangulation (Denzin, 2017). The writer uses data triangulation and theoretical triangulation as the right type to obtain the validity of the data in this study.

FINDINGS AND DISCUSSION

In this section, the writer tries to answer research questions, regarding learning disorders and the main character's intrinsic motivation (Stephen Hawking) to complete his studies and continue his theoretical research with all his limitations in *The Theory of Everything* movie. The writer also includes her ideas and thoughts and relates them to the psychological theories in discussing the research findings. The results of the study can be seen as follows:

1. Learning Disorders Occurs of the Main Character in *The Theory of Everything* Movie

The learning disorders are conditions that refer to neurological disorders associated with differences in the workings and differences in the structure of a people's brain (Pierangelo & Giuliani, 2008). Learning disorders in the learning process on Stephen Hawking can be seen in the following table:

Table 1. Learning Disorders Occur of the Main Character

Classifi- cation	Explanation	Scene
Motor Disorder	DCD: <ul style="list-style-type: none"> - Stephen seems to trip over his own feet while walking - Stephen uses canes to help him walk - Stephen goes down the stairs on his back - Stephen uses a wheelchair - Stephen has trouble knocking on the door of 	Scene 1 & scene 2 Scene 3 & Scene 4 Scene 5

	<p>the room</p> <ul style="list-style-type: none"> - Stephen has difficulty holding a pen to write 	<p>Scene 6</p> <p>Scene 7</p> <p>Deleted Scene 1</p>
	<p>SMD:</p> <ul style="list-style-type: none"> - Stephen has shaking fingers 	<p>Scene 8</p>
	<p>TDr:</p> <ul style="list-style-type: none"> - (not found) 	<p>-</p>
<p>Communication Disorder</p>	<p>LD:</p> <ul style="list-style-type: none"> - (not found) 	<p>-</p>
	<p>SSD:</p> <ul style="list-style-type: none"> - Stephen speaks with unclear pronunciation 	<p>Scene 9</p>
	<p>COFD:</p> <ul style="list-style-type: none"> - Stephen speaks with the slow tempo 	<p>Scene 10 & Scene 11</p>
	<p>SCD</p> <ul style="list-style-type: none"> - (not found) 	<p>-</p>
	<p>UCD:</p> <ul style="list-style-type: none"> - Stephen lost his voice after pneumonia surgery 	<p>Scene 12</p>

a. Motor Disorder

Based on table 1, it can be seen the exists of three types of motor disorders, two of them are experienced by Stephen Hawking, there are DCS and SMD.

First, the type of motor disorder experienced by Stephen Hawking is DCD. characterized by underdeveloped motor skills that affect daily activities and achievement at school (such as difficulty tying shoelaces, difficulty writing, difficulty descending stairs, frequent dropping of objects, frequent stumbling, walking unbalanced, difficulty holding small objects, and difficulties in other self-care activities) (Black & Grant, 2014). The scenes that show symptoms of this disorder, especially on the feet and hands of Stephen Hawking, are found in scene 1 to scene 7 and deleted scene 1. In scene 1 to scene 4 are the excerpts of scenes that show the symptoms of disturbances that occur in Stephen Hawking's leg. In **Scene 1** and **Scene 2**, there are excerpts of the

scene when Stephen tripped over his own feet while walking to catch the train and headed for a place on campus. While, **Scene 3** and **Scene 4**, there is a scene where Stephen uses a stick to help him walk. Next, in **Scene 5** is an excerpt of the scene when Stephen descends the stairs of his room by using his back slowly. And then, **Scene 6** shows Stephen using a wheelchair assisted by Jane pushing the wheelchair he was sitting in out of the elevator. Professor Sciama was waiting for them, then he helped push Stephen's wheelchair into the tutorial room. Furthermore, the scene excerpts showing the symptoms of this disorder occurring in Stephen Hawking's hand are found in Scene 7 and Deleted Scene 1. **Scene 7** shows Stephen having difficulty knocking on the door of the room when he arrives in front of the seminar room, then he knocks on the door using one of his sticks. Meanwhile, **Deleted Scene 1** shows Stephen having difficulty opening the pen cap with his hands. He also had difficulty holding a pen and writing the materials he needed. Another motor disorder is a SMD. It characterized by repetitive motor behaviour (e.g. shaking or waving hands, body shaking, head banging, self-biting, body self-hitting) (Black & Grant, 2014). The scene excerpts that show this disorder are in **Scene 8**. It can be seen in Stephen's fingers shaking after the chalk he used to write mathematical formulas on the blackboard fell to the floor.

From the explanation above, the motor disorder causes physical limitations that affect Stephen Hawking's performance in carrying out daily activities, especially his learning activities. Related to psychology, physical limitations can cause mental health problems and can increase the complexity of challenges and difficulties for individuals with these limitations (Backe et al., 2017). The perceived challenge is in the form of self-acceptance of the reality that occurs. In the process of self-acceptance, someone unconsciously tries to reconcile that person with the reality of actual events or with other expectations (Ritchie, 2014). As Stephen Hawking saw, after accepting the fact that he had amyotrophic lateral sclerosis and being diagnosed with only 2 years of survival, he was able to continue his studies and develop his research despite his physical limitations.

b. Communication Disorder

In addition to motor disorders, the effects of amyotrophic lateral sclerosis on Stephen Hawking also affect his communication system. Based on table 1, the existing five types of communication disorders, three of them are experienced by Stephen Hawking, there are SSD, COFD, and UCD.

First is SSD, a disorder in which children have persistent difficulty pronouncing words or sounds correctly. Symptoms include persistent difficulty in producing speech sounds that interfere with the clarity of one's speech; limitations in communication that interfere with social participation, academic achievement, or job performance, both individually and in groups (Black & Grant, 2014). From this explanation,

Scene 9 belongs to this type. It can be seen when Stephen says “*irrelevant in physics*” with unclear pronunciation when answering Jonathan’s question, then Jane repeats what Stephen said to make it clearer.

Next is COFD is a disorder in the fluency of the tempo of speech that is not appropriate for the age and language ability of the individual persists over time. Symptoms are speech disorders characterized by repetition of sounds and syllables (e.g., “*I-I-I took it*”), broken word (pauses in one word), prolongation of consonants and vowels, etc (Black & Grant, 2014). Based on the explanation, **Scene 10** can be classified as this type of disorder. It can be seen when Stephen explains his theory of black holes to other professors with a slow tempo of speech. It is the same way with **Scene 11** when Stephen is also speaking at a very slow tempo, said “*Tha-t was my P-h-D the-sis. My new project dis-proves it.*” to answer Jonathan’s question about the theory that proves the universe had a beginning of its own.

Last is UCD, a communication disorder that does not meet the more specific diagnostic criteria for communication disorders. Symptoms have a significant impact on social, occupational, educational, and interpersonal functioning (Black & Grant, 2014). It is communication disorders that occur do not have a general symptom diagnosis like other types of communication disorders. From this explanation **Scene 12** can be classified as this type of disorder. It can be seen when Stephen could not speak because he had to lose his voice after a tracheotomy operation to save his life due to pneumonia as a continuation of ALS disease. Loss of voice impacted every aspect of his life.

Communication disorders that occur in Stephen Hawking are a follow-up effect of ALS disease. Based on the explanation of the research findings above, before experiencing the disease, Stephen was able to communicate well. Gradually, it makes the ability to speak decrease. Disruption of the communication process can affect a person’s psychology, in this case, Stephen Hawking.

Communication disorders refer to the inability to receive, send, process, and compare verbal or nonverbal language (Gupta, 2015). It may be seen in auditory, language, and speech processes and can range in severity from mild to severe (Gupta, 2015). In psychology, the inability to communicate properly can interfere with the processes of conveying information, feelings, or emotions, as well as impeding speech development and the development of self-control, which may increase impulsive behaviour (Amerongenm & Mishna, 2004). Based on **Scene 9**, **Scene 10**, and **Scene 11**, Stephen Hawking has difficulty speaking to convey information about his theory to others. This difficulty in speaking is caused by a decrease in the function of the speech muscles in him. Meanwhile, in **Scene 12**, Stephen cannot speak because he lost his voice after a tracheotomy operation due to pneumonia as a continuation effect of ALS disease.

2. Intrinsic Motivation of the Main Character in *The Theory of Everything* Movie

Motivation is a change that occurs in a person that arises from feelings, psychological and emotional symptoms that encourage individuals to do or act something caused by needs, desires, and goals (Dayana & Marbun, 2018). Stephen's intrinsic motivation can be seen in the following table:

Table 2. Intrinsic Motivation of the Main Character

Classification	Explanation	Scene
Intrinsic Motivation	Need: - Stephen has to do the assignment questions from his lecturer	Scene 13
	Knowledge of own progress: - Stephen answered 9 out of 10 questions from his assignment - Stephen got his Doctoral degree	Scene 14 Scene 15 & Scene 16
	Aspirations: - Stephen wants to continue research to prove his theory - Stephen wants to write a new book	Scene 17 Scene 18

Things that affect the motivation of students to learn come from internal and external factors of the students themselves. Especially with strong intrinsic motivation despite all the physical limitations, students still try to continue to learn and complete their studies. Intrinsic motivation is identical to the call of the soul, namely an impulse that arises from within and is already part of the inner self (Herijulianti et al., 2002). In the movie *The Theory of Everything*, the intrinsic motivational aspects found in the main character (Stephen Hawking) in dealing with learning disorders during the study process caused by his illness are described as follows:

a) Need

Needs are conditions in which a person will feel a lack of dissatisfaction with something in himself so that actions are taken to fulfil the deficiency or dissatisfaction (Fathurrohman & Sulistyorini, 2012). In **Scene 13**, it is described by the dissatisfaction that Stephen shows when he has not done his task, he immediately answers the questions of the task. At that time, Brian entered Stephen's room and asked Stephen's answer to the questions given by Professor Sciama, Stephen answered that he had

not done it. After Brian left his room, Stephen got up from his bed. He saw the question of the question and answered it.

Dissatisfaction with not completing the task makes Stephen have the desire to complete the task. The desire to complete a task can be said to be a need. The needs can be referred to as motives, where motives can simply be interpreted as a desire, urge, or urge to achieve a certain goal, with that motive someone does what he wants to do (Filgona et al., 2020). In the school context, motives affect the inner psychological drive that leads to actions to participate in the learning process (Filgona et al., 2020). Here, Stephen has the drive and need to complete his task as a feeling of dissatisfaction if he has not completed the task.

b) Knowledge of own progress

During the learning process, students who already know of progress or setbacks in themselves will affect their learning motivation. Students who know there is a setback in themselves will try to increase the intensity of their learning so that their achievement also increases. And students who know there is progress in themselves will try to maintain or even increase the intensity of their learning so that their achievements remain or improve (Fathurrohman & Sulistyorini, 2012). Based on this explanation, **Scene 14** can be classified as this factor. It is illustrated when Stephen arrived late when Professor Sciama was checking the answers of 4 other students, then he asked Stephen to give his answers. Stephen confidently handed out his answer sheet and said that he was only able to do nine questions. Professor Sciama was surprised at his answer and said the results were amazing. Stephen knows he can answer these questions, even though not all of them. Next is in **Scene 15**, when Stephen comes to meet Professor Sciama to tell him the title of his research subject. Stephen entered the room while Professor Sciama was giving lectures, he said the subject of his research was about time. Also in **Scene 16**, it is depicted when Stephen can complete his doctoral studies. With all his physical limitations, he walked to the seminar room and stood there using the help of a cane. He faced three professors, they are: Professor Sciama and two other professors, who were reading the thesis or the result of his research. Then, Professor Sciama called Stephen a Doctor as a sign he had completed his doctoral studies.

From Scene 14, Scene 15, and Scene 16 above, it can be seen that Stephen Hawking knows his progress when he gets praise after answering 9 out of 10 questions from Professor Sciama correctly. It made increasing of Stephen's self-confidence. Self-confidence can be called the belief that a person can succeed in a task, based on whether they have performed the task in the past or not (MTD Training, 2013). In psychology, self-confidence is a valuable feeling that a person feels towards himself, this level of self-confidence can have a positive or negative impact on many components in a person's life (Sari et al., 2015). Knowing that there was progress in himself made increasing the

level of Stephen's confidence. He knew he was able to complete his studies despite his physical limitations and needed help from others.

c) Aspirations

In learning, aspirations are the life goals of students. It is the impetus for all daily activities and the impetus for all learning activities. The success of achieving this goal depends on the level of the human age itself. Maybe a child doesn't have ideals yet, but the older a person gets, the clearer and firmer he is and the more he knows his true identity and desired goals (Fathurrohman & Sulistyorini, 2012). Based on the explanation, **Scene 17** can be classified into this aspect. It can be seen when Stephen gets a question from Professor Sciama about what he will do next after completing his doctoral research on singularity theory (black hole theory). He planned to continue to prove the singularity theory in his thesis with one equation that time had a beginning. Then, the same way in **Scene 18** when Stephen says he wants to publish a new book. At that time Stephen who was sitting in a smart wheelchair said that he wanted to write and publish a book about time to Jane.

The aspirations that Stephen Hawking conveyed are about what he wants to do after completing his doctoral studies and the desire to publish a new book. In psychology, aspirations are an important psychological factor that determines future academic and work success (Kołodziej, 2010). By having aspirations, people are motivated to improve themselves and do everything to achieve their goals. Likewise, Stephen Hawking, his physical limitations did not prevent him from developing his knowledge and achieve his aims.

CONCLUSION

Based on the analysis carried out by the writer in the research findings and discussion about the learning disorders of the main character as reflected in *The Theory of Everything* movie, the writer can conclude as follows:

- a. There are two types of learning disorders that occurred of the main character (Stephen Hawking) as a result of amyotrophic lateral sclerosis diseases, such as: motor disorder and communication disorder. In motor disorder, Stephen has developmental coordination disorder and stereotypic movement disorder. While in communication disorder, Stephen has speech sound disorder, childhood-onset fluency disorder (stuttering), and unspecified communication disorder.
- b. The intrinsic motivation of the main character (Stephen Hawking) can be seen from all aspects of his intrinsic motivation, there is: the need to fulfill dissatisfaction when he has not done his assignment. He also knows his progress which increases his self-confidence. And lastly, he has goals or aims in his life that are to continue research to prove the singularity theory in his thesis with other equations and the desire to publish a new book. Physical limitations

do not make the main character (Stephen Hawking) give up on pursuing education and developing his achievements.

REFERENCES

Amerongenm, M., & Mishna, F. (2004). Learning disabilities and behavior problems. *Psychoanalytic Social Work*, 11(2), 33-53. https://doi.org/10.1300/J032v11n02_03.

Backe, I. F., Patil, G. G., Nes, R. B., & Clench-Aas, J. (2017). The relationship between physical functional limitations, and psychological distress: Considering a possible mediating role of pain, social support and sense of mastery. *SSM - population health*, 4, 153–163. <https://doi.org/10.1016/j.ssmph.2017.12.005>.

Black, D. W., & Grant, J. E. (2014). *DSM-5 guidebook: The essential companion to the diagnostic and statistical manual of mental disorders (5th ed.)*. Washington, DC, United States: American Psychiatric Pub.

Davidson-Shivers, G. V., Rasmussen, K. L., & Lowenthal, P. R. (2017). *Web-based learning: Design, implementation and evaluation (2nd ed.)*. Midtown Manhattan, New York City: Springer.

Dayana, I., & Marbun, J. (2018). *Motivasi kehidupan*. Bogor, Indonesia: Guepedia.

Denzin, N. K. (2017). *The research act: A theoretical introduction to sociological methods*. New York, NY: Routledge.

Fathurrohman, M., & Sulistyorini. (2012). *Belajar & pembelajaran: Meningkatkan mutu pembelajaran sesuai standar nasional*. Yogyakarta, Indonesia: Penerbit Teras.

Filgona, J., Sakiyo, J., Gwany, D. M., & Okoronka, A. U. (2020). Motivation in Learning. *Asian Journal of Education and Social Studies*, 10(4), 16-37. <https://doi.org/10.9734/ajess/2020/v10i430273>.

Gupta, S. K. (2015). Management of communication disorders: A clinical perspective. *International Journal of Psychology and Psychiatry*, 3(1), 80-93. <https://doi.org/10.5958/2320-6233.2015.00006.1>.

Herijulianti, E., Indriani, T. S., & Artini, S. (2002). *Pendidikan kesehatan gigi*. Indonesia: EGC.

Kołodziej, S. (2010). The role of achievement motivation in educational aspirations and performance. *General and Professional Education*, 2010, 42-48.

Krippendorff, K. (2004). *Content analysis: An introduction to its methodology* (2nd ed.). Thousand Oaks, CA Sage Publications.

MTD Training. 2013. *Personal confidence & motivation*. UK England: Bookboon.com.

Pierangelo, R., & Giuliani, G. A. (2008). *Teaching students with learning disabilities: A step-by-step guide for educators*.

Rahman, K. F. (2012). 'Triangulation' Research Method as the Tool of Social Science Research. 1. 154-163.

Ritchie, T. D. (2014). Denial. In Lavine, T. R. (Ed.) (2014), *Encyclopedia of deception*. (Vols. 1-2). Thousand Oaks, CA: Sage Publications, Inc. <https://www.doi.org/10.4135/9781483306902>.

Rohmah, N. (2020). *Psikologi pendidikan*. Jawa Timur, Inonesia: Jakad Media Publishing.

Sari, I., Ekici, S., Soyer, F., & Eskiler, E. (2015). Does self-confidence link to motivation? A study in field hockey athletes. *Journal of Human Sport and Exercise*, 10(1), 24-35. <https://doi.org/10.14198/jhse.2015.101.03>.

Silver, L. B., & Silver, D. L. (2014). *Guide to learning disabilities for primary care: How to screen, identify, manage, and advocate for children with learning disabilities*. NC, United States: Lulu Press, Inc.

Somashekar. (2012). *Educational psychology & evaluation*. Bangalore, India: Sapna Book House (P) Ltd.

Sutton, R., & Seifert, K. (2008). *Educational psychology*. Canada: University of Manitoba.

Woolfolk, A. (2016). *Educational psychology* (13th ed.). New York: Pearson Education.