

Life Satisfaction on Dwarfism

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Abstract. Dwarfism or Short Stature has a physical difference from normal conditions which makes it has different psychological dynamics with normal people related to their life satisfaction. The purpose of this study was to find out the life satisfaction experienced by individuals who experience dwarfism in young adult. Life satisfaction is explored through its aspects, which refers to the desire to change lives, current, past, and future satisfaction, also about other people's appraisal. In addition, it was discussed in depth about the factors that influence life satisfaction in dwarfism. The research method used is qualitative, by deep interviewing to dwarfism with different backgrounds of life. Data analysis used was discourse analysis using interpretative validation. The result showed that the background of life can affect the life satisfaction of dwarfism. The factor of balance of hope and achievement also determined the depiction of life satisfaction in dwarfism. The background of life led to life satisfaction factors, to obtain a conception of life satisfaction and then the perceived life satisfaction had an impact on the subject's self-adjustment which later could be constructive or destructive.

Keywords: Dwarfism, life satisfaction, young adult

Introduction

Dwarfism is a phenomenon that still sounds strange in society. Talking about dwarf people, of course, can be traced or revealed not only about its health, but we can also relate it to the psychological side of the dwarf people. Including how the person responds to perceived life satisfaction. Dwarfism is people who have special characteristics that are different from people in general. This particular characteristic is related to one's height. Humans are said to be dwarfism syndrome and has a height of less than 147 cm, so it looks smaller than people in general.

According to the concept of life satisfaction, a people will feel satisfied with their way of life if things happen, past, present, and future planning, in accordance with their expectations. More details, self satisfaction according to Biswas-Diener (2008) defines that life satisfaction is a cognitive assessment of how well and satisfying things that have been done by individuals in their lives as a whole and over the main areas of life that they consider important.

The individuals with dwarfism have a tendency to develop physical, social, as well as problems in the field of education, which will affect various psychological aspects of a person (Siegel, 1991). Therefore, it is important to examine life satisfaction and other psychological aspects so that the meaning of life in dwarfism is better.

Literature Review

Life satisfaction

Life satisfaction is a cognitive assessment of how well and satisfying things that have been done by individuals in their lives as a whole and on the main areas of life that they consider important (domain satisfaction) such as interpersonal relationships, health, work, income, spirituality and leisure activities (Diener and Biswas-

Diener, 2008). In addition, it stated that to have high satisfaction in life, individuals must motivate them, continue their lives, refrain from negative thoughts that can interfere with themselves, and never feel discouraged (Palmer, Donaldson and Stough, 2002).

The components of life satisfaction include the desire to change lives, satisfaction with life today, life satisfaction in the past, satisfaction with life in the future, assessment of others towards one's life. While individuals who have good life characteristics include having family and close friends who are supportive, have a romantic partner, have valuable work and retirement activities, enjoy their leisure time, have good health, have no problems with alcoholism, medicine or gambling, and have important goals in her life and succeed in achieving these goals.

Some factors that can affect life satisfaction in an individual is health that allows individuals at any age to do activities. While poor health or physical disability can be a barrier to achieving satisfaction for individual wants and needs; The type of work, the more routine the nature of work and the less opportunity for autonomy in work, the less satisfying; Work status, both in the field of education and work, the more successful a person performs the task the more it is linked to prestige, the greater satisfaction is generated; Living conditions, If the pattern of life allows a person to interact with other people, both in the family and with friends and neighbors in the community, then such conditions will increase life satisfaction; Balance between expectations and achievements, If expectations are realistic, the individual will be satisfied and happy when the goal is achieved.

Dwarfism

Dwarfism is a condition where individual growth is very slow or delayed, so that in less than normal adult height. Regarding the pituitary refers to the pituitary gland, which regulates the production of certain chemicals called hormones. Therefore, pituitary dwarfism decreases

body growth mainly due to hormonal problems. The end result is a person who is slightly less proportional, because of the height and growth of all other structures of the individual decreases.

Familial Short Stature (FSS), short stature due to hereditary factors. Children follow a short growth curve but have normal growth speed and normal bone age; the growth curve is parallel to the normal curve and the final height corresponds to the midparental height. Laboratory tests, all within normal limits. Bone maturation is late compared to chronological age but all are within normal limits.

Extrinsic causes include environmental and social factors and nutrition. Psychosocial factors are caused by torture, neglect and emotional deprivation, which causes intake and/or depressive compliance, some children experience transient deficiencies of GH or other anterior pituitary hormones.

Life satisfaction on dwarfism

Limitations possessed by dwarfism provide behavioral responses and even perceptions about life that is different from normal people in general. Physical abnormalities possessed by dwarfism even become things that make it "weird" among normal people. This could affect the psychological dynamics of patients with dwarfism, in this study will be associated with life satisfaction, where life satisfaction can be viewed from its aspects so that the pattern of psychological dynamics in each subject appears.

Method

The design in this study used qualitative research with phenomenological design. The subjects of this study were dwarfisms who were in early adults (21-40 years). This age was chosen because according to Hurlock's theory, at this time someone is important to experience social integration (expansion of certain activities with the social environment) and social support (the state of one's environment that is used to overcome stress). In addition, it was during this early adulthood that adjustment was made to the role expected by the social environment. It has a height of less than 147 cm.

Data collection methods used in this study were interviews, observation, and documentation studies, and also the Life Satisfaction Questionnaire developed by (Pavot & Diener, 1993) is used to determine the level of life satisfaction owned by the subject.

Data analysis techniques can be explained by several important points in qualitative research. Creswell (in Herdiansyah, 2010) stated that qualitative data analysis can be carried out simultaneously with the process of data collection, data interpretation, and other narrative writing (Discourse Analysis). Ensuring that the qualitative data analysis process that has been carried out is based on the data reduction process and interpretation. Changing the data that is reduced into matrix form. Identification of coding procedures is used in reducing information into existing themes or categories. The results

of data analysis that has passed the reduction procedure converted into a matrix that has been coded, then adjusted to the qualitative model chosen.

Validity in this study used interpretive validity, namely the level of validity of accurate descriptions of the deepest subjective meanings expressed by participants (Hanurawan, 2016). It related to the level of accuracy of the researcher's understanding of the perspective, understanding, feelings and experiences of participants.

Results

Components of life satisfaction, namely the desire to change lives, satisfaction with life today, life satisfaction in the past, satisfaction with life in the future, as well as other people's assessment of one's life. The description of dwarfism life satisfaction was examined based on factors that influence a person's life satisfaction. So that at the end of the discussion, it was obtained the dynamics of life satisfaction in early adult dwarfism. The following were the results of research on life satisfaction in dwarfism:

Life changing desire

Subjects I and R seemed to have different judgments about the desire to change their lives. Subject I had acceptance and was quite satisfied with the wishes she was living now so that there was no desire to change the life he had.

"Ooohh, if it's not there, I am already satisfied with what I am doing now. What I'm grateful for now is that I can go to college, I can prove to my parents that I am more capable than my brothers."

Subject R had another assessment, which was to change her life she was currently living, because she felt that there were attitudes and habits that she should change to be better, subject R wanted to be more diligent and did not want to be lazy and inactive in organizations and associations social.

"I have no words for that, hahah. I just want to be more diligent, because I sometimes get really lazy. And Im regretting that I didn't join the organization of the School organization".

Satisfaction with life today

In connection with the present life by reflecting on the desire to change lives, the subject I and R also had different opinions. Subject I was satisfied with what she was living at this time. Despite self-limitation, she had a family that loves her with a good enough life because she came from a family with middle to upper socioeconomic. *"If you're sure to be happy happy, and you will be happy, because you can live, because there are still many weaknesses in another people, I can walk, thank God, there are still many people below me physically disabled ..."*

It was different with the subject R who initially stated that she was quite satisfied with her current life even though sometimes she felt sad and insecure. Coupled

with the death of her father who added to her life burden due to existing socio-economic demands. Subject R often felt sad and insecure.

"If I just enjoy it now".

"If you can already accept it, maybe you'll feel inferior at first, take the positives, there are more above me, there are those below me, I'm grateful for it".

Past life satisfaction

Regarding past life satisfaction, subjects I and R had the same view. That was quite satisfied with past lives. Subject I and R had experience given views and were convinced by their parents, that even though there was an obstacle to them, there were still many who were less fortunate than them. The view was always instilled by the family, so that the subject I and R remained passionate about living their lives.

The following was a subject I experienced in his past life.

"Many people ask me, how come I am not inferior, how come I still have many friends, and the teacher is also braving not shy, quite active in class".

Here was the subject of the R statement about life's satisfaction in the past,

"It uses to be so insecure that it continue to run out until it is bought by a rich supplementary body supplement, so my father and I continue to run out of it, but add but only a little, not as expected."

Satisfaction with life in life future

Life satisfaction in the future could be explored through the readiness of the subject to face his future. Based on the results of interviews, there were differences in preparedness for the future between the two subjects. Subject I felt ready to face her future, although it could be said that subject I had more severe limitations compared to subject R.

"Well, I'm a business major in the university, and I think I will continue my father's business".

Besides that, subject R felt quite worried and anxious in facing her future.

"Actually, to see the future there is a little bit scared."

Assessing someone else's life

In line with the results of other aspects of life satisfaction, as a result of other aspects of life satisfaction, the assessment of others about one's life could also be a predictor of one's life satisfaction. It seemed that subject I also showed a more positive assessment of the surrounding environment or others to her. This could be evidenced by the antusism of the surrounding people (subject teacher I) who conducted interviews and made autobiographies in the form of books about the life of subject I. This was because the subject I had tremendous confidence, even though there was a real lack of self, subject I could still go to school, made an extensive friendship, and be quite prominent in her class and school.

"I use to have been there when I am at the end of high school; I had written my life with my teacher".

Unlike subject I, subject R seemed to have an ordinary assessment of the people around them. Subject R claimed there were positive and negative ratings from the people around her. The positive assessment was, subject R was a submissive person in her family. While the negative assessment was more towards the pattern of social relations, namely subjects who tended to be less able to socialize with their environment, preferring to be at home or at boarding rather than having relationships with people around.

"I rarely go out, if you really need it again, you will be hanging on to your neighbors".

Discussion

Life satisfaction discussed in this study started from the background of the subject, whether it was a biological or social background. After that, data processing linked to factors that could affect a person's life satisfaction in this case of dwarfism. Based on the background and factors, it got a picture of the subject's life satisfaction. After examining the subject's life satisfaction either through interviews or simple questionnaire supported as a support, it got a picture of the adjustment of dwarfism about the satisfaction of her life, whether it led to constructive behavior or led to destructive behavior.

As a summary of the description of life satisfaction in each subject, Subject I had a genetic problem and a great family support for her recovery. Subject I. In life satisfaction factors, Subject I had a good relationship with her social environment and then there was no significant different between desire and what she achieved. While for the description of life satisfaction, Subject I had nothing to be and felt satisfied with what was being lived at this time, nothing regrettable in the past and there was no concern about the future. So that, Subject I had a good constructive individual self-adjustment by maximizing what she had without worrying about the past.

Subject R had a genetic problem as well as Subject I. Subject R had a good family support for her recovery, good fostering and modeling patterns but Low in socioeconomic. Subject R had experienced bronchitis and felt not good with their social environment. There was a gap between what was desired and what was being lived at this time. For the description of life satisfaction, there were several things that wanted to be changed from the subject's past; there was something regrettable in his past and future. So that, subject R had a constructive individual self-adjustment by looking positively and appreciating what he had now even though sometimes destructive self-adjustment that was less able to do good social relations

Based on the results of existing research, it seemed that subject I had a more constructive adjustment than subject R. This can be sued through the sequence of life based on the factors that exist in each subject. Both subjects had an etiology of dwarfism disorders due to different biological abnormalities, in which subject I experienced biological disorders were not the result of

heredity, but genetic disorders due to mutations. As with the subject R which had hereditary factors that make her had a below-average height, namely Familial Short Stature (FSS), short stature was caused by hereditary factors.

Besides, a quite striking difference between the two was the socioeconomic level. Socio-economic level seemed to affect the factor of one's life satisfaction, namely about employment. According to Hurlock (1980), some factors could influence life satisfaction related to socioeconomic status of work, type of work, and current subject conditions. Subject I had more readiness regarding the work and type of work in the future because indeed from families who had several business assets that can be forwarded later. As for the subject, R does not have anything as a preparation for her future. It had an impact on the process of dynamics of the next person's life satisfaction.

As could be illustrated in the question of life satisfaction as additional data of this study, subject I had more confidence with item items that support the answer of subject I had motivation, confidence, and enthusiasm, and confidence to face the future, even though the subject will sometimes disappointed if what was obtained was not in accordance with reality, but I was able to make a pretty good social adjustment. The result of the subject questionnaire R showed her confidence in accepting and being satisfied with what she was currently living. But this result was contrary to the future preparation that she will face. She had weak confidence in facing the future with her current shortcomings.

It seemed that the two subjects lacked of enthusiasm in discussing the future regarding this matter. As with future preparation related to careers, it seemed that subject R was better prepared to face the future with regard to love, this was because the subject has a physical deficiency that was lighter than subject I. Subject I never felt a special relationship with any man.

Based on the description of aspects of life satisfaction by Diener and Biswas-Diener (2008), subject I emphasized more aspects of current life satisfaction, and future life satisfaction in terms of employment, as a major component in the life satisfaction that she lived. Subject I felt that what she had now was a gift that not necessarily someone else's, especially with regard to the socio-economic aspects she had. Social adjustment of dwarfism showed a good process with self-acceptance of physical appearance and self-dissatisfaction (Siegel, 1991).

Both subjects had a good support from their families, although material support was more acceptable to subject I, but both had families that always reinforce what the subject did and experiences as social support for them. Social support according to Sarafino (1994) was the acceptance from people around which results in the individual feeling that she was accepted, loved, and cared for, and helped. This social support was very important for the subject's belief in her days.

Treatment related to physical dwarfism also affects the psychological dynamics of individuals with dwarfism in adulthood. Subject I got a more intense treatment because there was more material support, so now Subject I had better success beliefs than subject II. The earlier the treatment is physically given to dwarfism, the individual became more successful because she had a self-awareness of her weaknesses and was better able to prepare for the future (Kusalic, 1975).

Negative self-image and low self-esteem exacerbated social adjustment by realizing withdrawal and isolation. In addition, to maximize the ability of individuals with dwarfism, there were another way that could increase the life satisfaction of individuals, namely with the support and positive perceptions of the surrounding environment (Kim, etc, 2015).

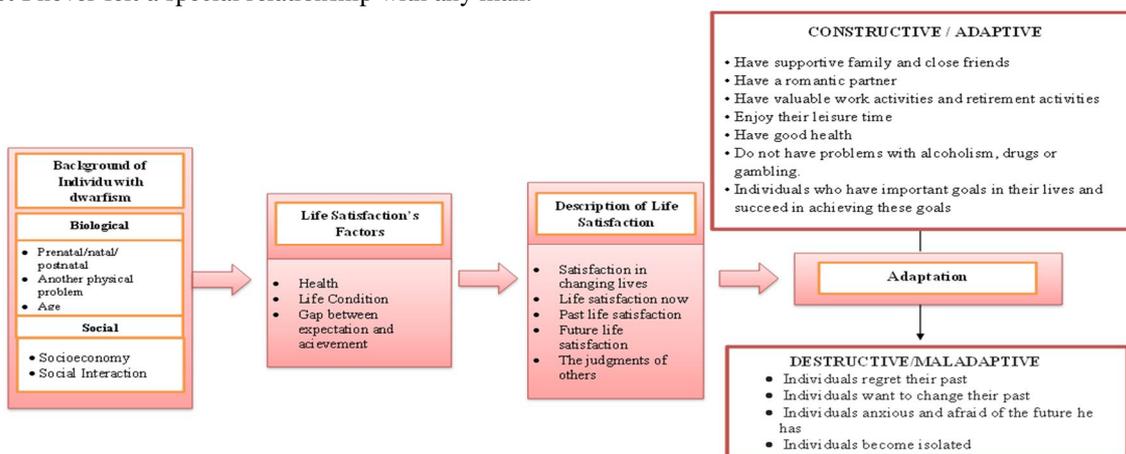


Figure 1. Dynamics of life satisfaction in early adult age dwarfism

The support and positive perceptions of the surrounding environment among others, it was about the same process of sexuality, between normal individuals with dwarfism, then about the nearest environment, and related to the work of individuals with dwarfism (Yusnita, 2011).

Conclusion

Based on the results of the discussion, the factors influenced the life satisfaction of dwarfism in early adulthood were health, current living conditions, and the presence or absence of the gap between the desire and what it was currently living. For work and employment status, it seemed less to be dominant because early adulthood was an age where sometimes someone was still dependent on parents, especially the subject was still a student so what she did now aimed at giving the best effort in her education.

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