

Psychological Dynamics of Mother Acceptance Phase of the Presence of Children with Special Needs

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ABSTRACT

This study examines the psychological dynamics of the mother's acceptance phase of children with special needs. This study uses a qualitative research method with a phenomenological study approach. Data was collected through interviews with tools to 4 informants who have children with special needs-data analysis using interactive data analysis. The results showed that the four informants of this study were generally described in several phases. The shock phase is the feeling experienced by the four informants feeling disappointed and sad, the attitude of rejection shown to the presence of children with special needs and informants, husbands, extended families, or the environment. The reaction phase, the mother's acceptance phase, is shown when dealing with children with special needs, some accept, and some do not, but among them, three informants tried to explain the conditions experienced by their children so that others would not guess. In the adaptation phase, the four informants did not know their talents and asked children with special needs, but the tendency to like something had been shown, but they were still not sure whether it was their interest or not. After receiving information on how to teach children with special needs, the four informants can already be introduced to their children and continue to seek to develop their children's abilities. In the orientation phase, the four informants tried to find schools and places of therapy for their children and hoped that the informants' children could develop better.

Keywords: Psychological Dynamics, Mother's Acceptance Phase, Children with Special Needs

INTRODUCTION

According to Tumbage et al.(2017) the role of a mother towards the family is the responsibility in educating children and the most influential in educating children because the mother is always close to the child. Agree with Apreviadizy & Puspitacandri (2014), saying that mothers' role is very influential in educating children because the first socialization for children is the mother. According to Wardhani, Rahayu, and Rosiana (3), the pressure felt by mothers when they have children with needs will be more significant because they will be required to perform roles that are different from the roles of mothers in general. Agree with what Ajeng (cited in Levianti, 2013) found, among the roles of parents in a family who are more susceptible to being affected by stress when they find out that their child with special needs is the mother rather than the father.

Smith (cited in Lidaniel, 2014) explains that the presence of children with special needs in the family will pose various challenges, and the impact will be felt by the mother and all members of the family. Agree with Neely-Barnes & Dia (cited in Lidaniel, 2014), said that if there is a family that has a child with special needs where the family lives in rural areas where the majority of the people have low education,

the economy is also low and social status is also low then will give rise to bad and detrimental labeling.

Cunningham and the Foundation for the Education of Children with Disabilities (cited in Vani et al., 2015) said that when mothers find out that children born with disabilities cause various kinds of emotions and maternal reactions are shown, there are several stages, the first phase is the shock phase. The second is the reaction phase, the third is the adaptation phase, and the fourth is the orientation phase. Also agree with what Duncan and Moses (cited in Vani et al., 2015) explained, that the response given by parents when having a child with a disability will experience three phases. The first is the primary phase (shock, denial, grief, depression), the second phase secondary (ambivalence, guilt, anger, shame, shame), and the third tertiary phase (bargaining, adaptation, reorganization, acceptance, adjustment).

Based on the results of previous research, Kusumastuti(2014) in a study entitled stress of single mothers who have autistic children stated that the picture of stress in mothers who have children with special needs (autism) by showing an inability to respond to the problems faced in their lives related to child care. The difficulties she faces, such as socializing, experiencing obstacles, and feeling ashamed of her life circumstances, result in negative thoughts towards her environment to accept the mother's condition.

Lestari & Mariyati (2016) conducted a study on three mothers (parents) with the title "Resilience of Mothers with Down Syndrome Children in Sidoarjo" and the result is that the resilience of these three mothers has different effects, factors The difference is personality, economic background, work, education, support, and the role of the environment and family in motivating. For subjects with less education and only as housewives, the initiative to seek information tends to take a long time. Subjects whose economies are well-

established are quicker to find ways to improve their children, such as therapy, etc. For subjects who have a middle economy, it is rather challenging to do this. Based on the discussion above, the discoverer of the dynamics within the subject does indeed exist. In the process of resilience, there is a dynamic or change from the subject before having children, after knowing his child has Down syndrome, and the process of resilience.

Destination this study describes the psychological dynamics based on the acceptance phases of mothers who have children with special needs. Does this research focus on how psychological dynamics are based on mothers' acceptance phases with children with special needs?

MATERIAL AND METHODS

This type of research is qualitative research with a phenomenological approach. Qualitative research is a method that reveals a reality that exists correctly through a few words following data collection techniques based on the natural social situation.

The participants in this study were four housewives who had children with special needs. We limit children with special needs undergoing therapy at a therapy house in Central Java, Indonesia. Table 1 This shows that participants are aged 34 to 48 years. The types of children with special needs from the participating children are Down syndrome (participant 1), autism (participant 2 and participant 4), motoric development barriers (participant 3).

Phenomenological qualitative research using a guide interview data collection tool. An interview guide was made based on the acceptance phases of parents when they found out their child had special needs. Data collection was carried out directly with a personal approach, and all of the participants gave consent before we conducted the interviews. The results of the interviews were then transcribed and continued with interactive data analysis.

Table 1: Participants

Participant	Age	Sex	Special needs Children Category
participant 1	48 years old	P	Down Syndrome
participant 2	34 years old	P	Autism
participant 3	37 years old	P	Barriers to gross motor development
participant 4	34 years old	P	Autism

RESULTS AND DISCUSSION

According to Lestari (cited in Rachmawati & Masykur, 2017), children with special needs can be a source of stress that will later be experienced by both mothers, fathers, brothers/sisters, grandmothers, grandfathers, or cousins. As Hidayati (2011) explained, it is a heavy and significant responsibility for each family member when faced with children with special needs. And will experience stages from rejection to acceptance by providing facilities for their children to develop better.

Duncan and Moses (cited in Vani et al., 2015) that the response given by parents when they have children with disabilities will experience three phases, the first is the primary phase (shock, denial, grief, depression), the second phase is secondary (ambivalence, guilt, anger, shame, embarrassment), and the three tertiary phases (bargaining, adaptation, and reorganization, acceptance, adjustment). Meanwhile, Safaria (cited in Rachmawati & Masykur, 2017) and Ros (cited in Faradina, 2016) explained that the stages of parental reaction in accepting the presence of a child with special needs, namely rejection, angry, bargaining, depression, and acceptance. The four subjects who were interviewed went through these phases.

Based on the findings that have been described, the four informants had different experiences when faced with the presence of children with special needs because all of the informants faced this problem with other actions.

The shock phase

Based on the findings from this study, it can be seen that in the shock phase, each family has different feelings and actions. In the shock phase, the informant felt sadness and disappointment after hearing the doctor's diagnosis, experienced a

feeling of rejection from the informant's husband, family, or surrounding environment, and three of the four informants blamed themselves for what happened to their child. The following is an excerpt from an interview with participant 1:

"Yes, I'm is a mother, yes, that's sad.
My son was sentenced like that...
Yes, I just surrendered to God"

Participants 1

The surprised phase shown by the four informants was reinforced by Janet W. Lenner and Frank Kline (cited in Mahabbati, 2009). The surprised phase or it could be said that the shock phase was the feeling of shock that mothers felt when they heard a child with special needs. Folkman et al., (1986) explain that a person's attitude of rejection is one way that can reduce burdens, control stress, and psychological pressure. Somantri, (2012) said, a closed rejection or open rejection by a mother.

Reaction Phase

Based on the findings of this study, it can be seen that the responses shown by the families were different. In the reaction phase, the family's reaction is when the informant informs that the child of the informant with special needs is sad, disappointed, confused/surprised, shocked until it finally raises a sense of rejection in the family. However, some feel affection and support in the end on reception. The way for the informant to respond to negative responses is through one explanation. The following is an excerpt from an interview with participant 2:

"At first, we refused. Is this child autistic? We are still avoiding it, right... after a long time, the husband will confirm that if this is a deposit like this, we have accepted it."

Participant 2

The reacting phase shown by the four informants was strengthened by the opinion of Cunningham and the Foundation for the Education of Children with Disabilities (YPAC) (cited in Vani et al., 2015), the reacting phase is that parents easily express feelings of deep sadness (disappointed, panicked, anxious, and anxious). Feelings of failure) so that parents ask for help from others to help their children live well, at least in terms of independence.

The Adaptation Phase

Based on the findings of this study, it can be seen that the responses shown by the families were different. In the adaptation phase, the problems they are currently facing are communicating with their children or their gross and fine motor development. The four informants do not yet know their children's talents and interests because they have not been seen, but the tendency to like something has been shown but is still not convincing. Whether that's his interest or not. So that all informants are still confused about how to channel their talents and interests of children with special needs, but currently, all informants focus on finding their talents and interests first. To develop their child's abilities. The following is an excerpt from an interview with participant 4:

“Incidentally, at my child's school, there is a therapy house named Yasmin. Finally I tried to ask questions, I signed up for Yasmin's therapy”

Participants 4

The phase experienced by the four informants was strengthened by the opinion expressed by Sarasvati (Santoso, Wibhawa, & Ishartono, 2018). The adjustment phase, or the bargaining phase, is one of the ways a mother tries to entertain herself and starts thinking about what efforts will be made so that her child gets healed.

Orientation phase

Based on the findings of this study, it can be seen that the responses shown by each family are different. In the orientation phase, all informants try to find schools and places of therapy for their children. The informants' expectations for their children are long life, more independence, and development to be better. The following is an excerpt from an interview with participant 3:

"Hopefully, the first important thing is to stay healthy so that the future can be better... providing therapy as well..."

Participant 3

The phase experienced by the four informants is reinforced by Cunningham and the Foundation for Education for Children with Disabilities (cited in Vani et al., 2015). The orientation phase is when parents begin to seek and facilitate their children's physical and mental development needs, such as being sent to school and treated. Agreeing with Safaria (cited in Rachmawati & Masykur, 2017) and Ros (cited in Faradina, 2016), the acceptance stage is that parents begin to accept their child's condition and try to provide facilities that can maximize their child's abilities.

Agree with what was stated by Safaria (cited in Rachmawati & Masykur, 2017) and Ros (cited in Faradina, 2016), the orientation phase, or what can be called the acceptance stage, is that parents begin to accept their child's condition and try to provide facilities that can maximize their abilities. His son

CONCLUSION

This study concludes that, in general, there are similarities and differences between the four informants in experiencing the shock phase, reaction phase, adaptation phase, and orientation phase. In the shock phase, the origin of the children with special needs in this study was due to illness and a period of slow development, the feelings experienced by

the four informants both felt disappointed and sad, the attitude of rejection shown to the presence of children with special needs and informants, husband, extended family, or the environment. In the reaction phase, the family's emotional reactions are shown when dealing with children with special needs, some accept, and some do not. However, among them, three informants will try to explain the conditions experienced by their children so that other people don't guess. In the adaptation phase, children with special needs have not yet shown talents and interests, but the tendency to like something has been shown, but they are still not sure whether it is their interest or not. The four informants, after receiving information on how to teach children with special needs, can already be introduced to their children and continue to seek to develop their children's abilities. In the orientation phase, the four informants tried to find schools and places of therapy for their children and hoped that the informants' children could develop better.

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REFERENCES

1. Tumbage SME, Tasik FCM, Tumengkol SM. Peran ganda ibu rumah tangga dalam meningkatkan kesejahteraan keluarga di desa allude kecamatan kolongan kabupaten talaud. *Acta Diurna Komun.* 2017; 6(2).
2. Apreviadizy P, Puspitacandri A. Perbedaan stres ditinjau dari ibu bekerja dan ibu tidak bekerja. *J Psikol Tabularasa.* 2014;9(1).
3. Devina G, Penny H. Gambaran proses penerimaan diri ibu yang memiliki anak disleksia. *IJDS Indones J Disabil Stud.* 2016; 3(1):44-52.
4. Levianti M. Penerimaan Diri Ibu Yang Memiliki Anak Tunanetra. *J Psikol.* 2013; 11(1):39-49.
5. Lidanial L. Problematika yang dihadapi keluarga dari anak dengan intellectual disability (studi etnografi). *J Penelit Pendidik.* 2014; 14(2).
6. Vani GC, Raharjo ST, Hidayat EN. Pengasuhan (good parenting) bagi anak dengan disabilitas. *Pros Penelit dan Pengabd Kpd Masy.* 2015; 2(1).
7. Kusumastuti AN. Stres ibu tunggal yang memiliki anak autis. *J Psikol.* 2014;7(2).
8. Lestari FA, Mariyati LI. Resiliensi ibu yang memiliki anak down syndrome di Sidoarjo. *Psikologia J Psikol.* 2016;3(1):141-55.
9. Rachmawati SN, Masykur AM. Pengalaman ibu yang memiliki anak down syndrome. *J Empati.* 2017;5(4):822-30.
10. Hidayati N. Dukungan sosial bagi keluarga anak berkebutuhan khusus. *Insan.* 2011; 13 (1):12-20.
11. Faradina N. Penerimaan diri pada orang tua yang memiliki anak berkebutuhan khusus. *Psikoborneo J Ilm Psikol.* 2016;4(1).
12. Mahabbati A. Penerimaan dan kesiapan pola asuh ibu terhadap anak berkebutuhan khusus. *J Pendidik Khusus.* 2009; 5(2):75-82.
13. Folkman S, Lazarus RS, Gruen RJ, DeLongis A. Appraisal, coping, health status, and psychological symptoms. *J Pers Soc Psychol.* 1986; 50(3):571.
14. Somantri S. Psikologi anak luar biasa. Bandung: PT. Refika Aditama; 2012.

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