

The Importance of Parenting Social Support Systems in Special Education

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Abstract

This paper discusses the importance of parenting social support systems and investigate the limitation of social support given to children with special needs. The recent study explored the social networks of children with IDD, which is stand for Intellectual and Development Disabilities. The importance of the issues and phenomena of the parenting social support system to special education is highlighted as it involves a group of children with special needs who require attention, cares differently than normal children in terms of their mental characteristics, emotional capacity, communication ability, behaviour, and emotion as well as physical characteristics. This question becomes an issue because family inability in the social support system of parenting poses problems and disciplines when the parenting support system becomes loose.

Keywords: Social support system, parenting, special education, disabilities

1. Introduction

According to Noelle A. Cauda, (2017), report from Center for Disease and prevention, there is an approximately 1 in every 33 babies is born with a birth defect, and in about 1 children is born with a developmental disability. Therefore, birth defects can cause structural changes in human biologist and affect other parts of the body such body parts, heart, brain and foot. This defect can also be defined as an imperfect member of one's body especially for those who want to work. This impairment of the affected limbs greatly affects one's well-being and personality. The condition depends on the severity of the limb. The most significant impact of life expectancy is on those with this disability. Whereas in the Americans With Disabilities Act, (1990) report, there are different definitions of physical or mental

disabilities that will affect their main living activities such as self-management, behavior, emotions, learning, employment and other socialization movements in daily life.

So rising a behavior of children with disabilities can help overwhelming but emotional experience can be pose many difficulties for parents. Benson (2012), explained the long-term care of child with the chronic disability frequently affects various areas in a parent's life domains (e.g., marriage, career, relationship, which can lead to stress, and often affects the overall functioning of the family. In addition, parents work to balance their marriage with demands that accompany having a child with special health care needs. Because children with disabilities may require continuous medical support to meet their needs, a parent's career is then effected because of a hing rate of absences and reduced work hours. Equally important, relationship with

family and friends can become fragmented by the continuous demands of having a child with a disability, leaving little or no time for fostering such relationship. Moreover, research has shown that parents of children with disabilities experience higher levels of stress and are at higher risk for mental issue than those with typically developing children (Trute, Hiebert Murphy, & Levine, 2007).

So, the concept of parenting is very important in maintaining its function as a happy and prosperous family. In building a happy and prosperous family it requires dynamic, proactive and committed family management in the development of children's socialization. If parents' involvement in supporting their children's learning is positive, then the children's positive attitude and behaviour will be positive.

In addition, parents are very important and important position for most members of the community. Parenthood is a position without the formal appointment of anyone. Everything comes from the responsibilities that every parent must hold. Child development physically, socially, emotionally, mentally (cognitively) and intellectually is strongly influenced by the interaction between mother, father and children. Some parents must work to support their family members. In addition, the require three sets of expertise to fulfil their parenting responsibilities, parenting attitudes, parenting knowledge and parenting skills (Rusnani Abdul Kadir, 2000).

According to Russel (1995), parents who have children in need of special treatment should rely only on the quality of education and programs already in place, rather than having them involved in the children's educational process. Family involvement is important because of the many benefits and benefits that parents can have as they play a part in their children's activities, Children will have self-confidence because of the strong support of their parents. Parents should show interest not only in the home but also in the school. With the involvement of parents in the school whether in the field of activities or knowledge of the curriculum or the co-curriculum, these children will eager to participate in developing their talents.

2. The Concept of Parenting Social Support Systems to special education

2.1 The Concept of Parenting

In the concept of parenting explaining how parents' attitudes towards helping and assisting with social development for children with disabilities are under their care. While researchers like Ule, Zivoder, & du Bois-Reymond (2015) also stated that parents are increasing involved in their

children's development and education, and are generally ready to invest emotional, social, and economic resources in their lives. According to Joyce Epstein's Theory, there are six types of parent involvement: parenting, communicating, volunteering, learning at home, decision making, collaborating with community.

2.2 The Concept of Social Support Systems

Social support generally leads to a wide range of support for an individual. Social support contributes to the well-being of human life. In order receive support from others members, good relationship are essential. This concept is also considered as a psychological support need involving emotional support, guidance and advice, series reassurance, affection, appraisal and feedback.

2.3 The Concept of Special Education

Special education can be defined as special educational needs for children with disabilities in managing their own needs. Therefore, specializing in parenting and education techniques for the special needs requires a specific pattern for them to do their job very well. Education is specifically used for people with disabilities in self-management such as mental, disorders, physical problems, hearing problems and learning problems. In addition, children with disabilities also have different categories such as down syndrome, epilepsy, hyperactivity, dementia, autism and the like, which is why special support is needed especially for parents, teachers and the surrounding community. According to Hallahan & Kauffman (2006), researchers point out that the concept of special education is a form of education provided to meet the needs of children with special needs.

3. Issues and Problems

3.1 Increased Medical Cost

These children require a disproportionately large percentage of health care resources and service when compared to children without disabilities. To maintain the optimal level of well-being for the child with a disability, ongoing specialty care and therapies are required. Parents find their private health insurance and social service programs, such a medicate, do not cover all of the expenses incurred by the child with a disability. According Parish and Cloud (2006), 5% of family income will be spent on managing the care and health of children with disabilities.

3.2 Socioeconomic disparities

According Newacheck & Kim (2005), the socioeconomic disparities also contribute to the financial burden of families

caring for a child with a disability, especially when the child has special health care needs. There was an approximately 11 times of families of children with special care needs are from households below 200% of the federal poverty level. In addition, approximately 10% of children with a disability do not have medical insurance (Newacheck & Kim, 2005). For those with insurance, costs associated with health care needs for the child with disability are reported to be a large barrier to receiving appropriate care for those with lower incomes (Galbraith, Wong, Kim, & Newacheck, 2005).

3.3 Negative effect on employment

The very obvious effect mothers of children with disabilities is they may miss their work because of the caregiver requires for children with lower mental, motor, and adaptive functioning or chronic medical concerns and of children who require adaptive equipment. This becomes an increasingly vital concern, as 15.1% of children under 18 years of age in the United States, or approximately 11.2 million children, are estimated to have special health care needs (U.S. Department of Health and Human Services, 2013). Additionally, 23.0% of U.S. households with children have at least one child with special health care needs. According to Witt, Gottlieb, Hampton, and Litzelman (2009), parents with new or continuous health care needs had lost most of their workdays as compared to parents of children with fewer health care issues. In addition, the severity and type of disability also influenced the work outcomes and decisions that need to be done by the mothers (Leiter, Krauss, Anderson, & Wells, 2004; Warfield, 2005). For parents of children with developmental disabilities, work outside the home provides not only income, but also a sense of identity and opportunity to develop a social network. However, demands of work and family life can be a significant stressor for parents of children with developmental disabilities (Parish & Cloud, 2006).

In a national survey, Leiter et. al., (2004), found about half of the mother of children with disabilities were employed. In addition, of these working mothers, they need to reduce more than half time of their work hours to take care for their children with disabilities. Besides mother with chronic condition who did not work reported that their unemployment was mainly because of their children's medical care goods needs, significant time requirement and also lack of affordable child care. The long-term effect on part-time employment or loss of one parent's salary can be financially significant. On the whole, parents placed in difficult to balance work and life demands (Leiter et. al., 2004).

3.4 Effect on marriage

There are several researchers who have examined the story like between the marital quality and parenting stress when they raise a child with a special need. Kersh, Hedvat, Hauser-Cram, and Warfield (2006) found a better quality of marriage predicted lower parenting stresses and fewer depressive symptoms for both mothers and fathers raising children with developmental disabilities. Paternal involvement was also one of factor in determining marital quality for the partners who have child with a disability. In Bragiel and Kaniok's (2011), study of 243 Polish fathers, the involvement of fathers in their children's lives, rehabilitation and the children's education was positively corresponded with the fathers' report of their marital satisfaction. Communication and foundational expectations, are the other factors that contributed to the marital success. Parents open discussion of any topics with their children, other feelings and concern, and their preparedness to fulfill responsibility are very helpful in maintaining their marriages (Ramisch, Onaga, & Oh, 2014). Fathers who were involved earlier in parent-child interventions enriched family relations. This paternal support helped alleviate the all-consuming mother-child interaction, which helped maintain marital relations (Mount & Dillon, 2014). In addition, mothers' perceptions of their children with autism spectrum disorder (ASD) were associated with marital adjustment (Lickenbrock, Ekas, & Whitman, 2011). Mothers who reported higher levels of positive perceptions regarding their children also reported high levels of marital adjustment. Moreover, the marital relationship was also found to relate to the mothers' well-being (Noelle A. Cauda, 2017).

Divorce rates in parents of children with disabilities have been reported higher than those who have do not have children with disabilities (Freedman, Kalb, Zablotzky & Stuart, 2012; Harper, Dyches, Harper, Roper, & South, 2013; Hartley et. al., 2010; Witt, Riley, & Coiro, 2003). In the larger study to date, Witt et. al., (2003) compared divorce rates in 5,089 families of children with disabilities and more than 24,000 families of children without disabilities. The prevalence of divorce was higher in the children with disabilities group (14.3%) than the children without disabilities group (11.4%). Additional insight comes from studying marital quality and divorce rates during a longer period of time. In a more recent study, researchers examined the prevalence of divorce in parents of children, adolescents, and young adult with autism spectrum disorder. Parents of children with autism spectrum disorder had a higher rate of divorce (23.5%) than did the comparison group (13.8%) of perents of children without disabilities. The rate of divorce for parents of children with autism spectrum disorder remained high throughout childhood, adolescence, and early adulthood, whereas divorce decreased when children were older than 8 years in the comparison group (Hartley et al.,

2010). The vulnerability to divorce can be explained by the high level of parenting demands and stress of having a child with a disability and the subsequent decrease in receptiveness to the needs of one's spouse during these times (Noelle A. Cauda, 2017).

Marital distress is also affected by the characteristic of the child. When comparing fathers to mothers, the fathers' satisfaction with the marriage was unrelated to the child's skills or behaviors, whereas the mother marital satisfaction was moderately correlated with the child's behavior. The researcher also found marital quality for mother was associated with efficacy as a parent, while fathers derived their self-perception of parenting ability from sources external to the marriage. However, both parents noted social support correlated with their marital satisfaction, indicating factors outside of the immediate family structure may influence marital quality (Kersh et al., 2006).

3.5 Effect on siblings

Several researches have reported adjustment problems in children with siblings with disabilities (Petalas, Hastings, Nash, Lloyd, & Dowey, 2009). Petalas et al. (2009) conducted a study in which they compared siblings of children with intellectual disabilities with and without autism. Siblings described different ways they were affected by having a brother with autism, which included becoming socially isolated, changing their behavior to deal with their brother's odd or aggressive behavior, and decreases in family leisure and recreational time. Siblings of children with both intellectual disabilities and autism had more emotional problems than siblings with intellectual disabilities alone. Thus, the findings of Petalas et al. Suggest autism has more significant effect than intellectual disabilities on the emotional problems of siblings (Noelle A. Cauda, 2017).

As with parents behavior problems play a considerable role in how children were affected by siblings with intellectual disabilities. Mothers and fathers reported siblings were more negatively affected by having a brother or sister with a mental disability than were siblings of typically developing children. However, when behavior problems were accounted for, a significant relationship no longer existed between child intellectual status and the effect on the sibling (Neece, Blacher, & Baker, 2010).

Some researchers have discussed both the positive and negative reactions to having a sibling with a disability, based on the parents' own perspective. Mulroy, Robertson, Aiberti, Leonard, and Bower (2008) assessed parents' perception of siblings of children with down syndrome or Rett Syndrome. Parents reported positive effect and several disadvantages. The positive effects related to personality

characteristics, an understanding of tolerance and awareness of differences, a caring and compassionate nature, an increase in maturity when compared to their peers, and an appreciation of their own health and capabilities. Some disadvantage noted by parents included limited normal recreational activities and family outings, embarrassment and exclusion by their peers, and an increased burden of responsibility to assist with caring for the sibling with a disability (Mulroy et al., 2008).

4. Discussion

It should be that the involvement of parents towards the children can stimulate the well-being and happiness of the family. The basics of childlike normalcy and disabilities should be avoided so that children's psychology can be shaped holistically. So give love in the form of moderation and not overdo it in order to strengthen family relationship.

4.1 Can shape the child's personality

The importance of parental social support systems such as interaction and communication, parenting practices, willingness, openness and acceptance are important factors in the development of special visitors. In addition, the involvement of parents at home and in the school also contributes to development of children's personalities. Therefore, the success of special education children depends on the ability of student's own family. Parents should not only play a role as school partners in enhancing KPM's educational success but parents also need to ensure the quality education of their children as a catalyst for first-class human capital in achieving the 4.0 industry revolution. Therefore, parents need to be prepared and prepared to respond to the challenges of government transformation and position themselves as global players in front of borderless world or globalization challenge for the building of a harmonious society and harmonious national life.

4.2 Can increase parents' motivation

Parental involvement in the education of special education children should be recognized by the classroom teachers for their efforts. For example, the recognition as "Exemplary Dowager". This recognition can serve as an example and stimulus to other students' parents, especially special education to continue to strive and guide their children so that they can master some of the weaker subjects. Thus, the involvement of parents in this regard can ease the task of a teacher.

4.3 Can change people's perception

Public perception of students with special needs to change. Society has a streak of students with special needs in the sense that these special children are a nuisance to society. Parents and teachers need to ensure that students with special needs are ready to be present in the community such as communicating, socializing and working together on matters of self-reliance. Therefore, special needs children should be considered as the same as normal pupils.

4.3 Spend a lot of time with your kids

Many parents have to work because of the necessities and demands of life. However, time is needed to spend time with family, especially during the school year-end. School holidays are long vacations. It can foster love and foster relationships if it is a healthy practice in the family. Children also need to be given the freedom to choose what they want to do with their parents. For children with special needs, they perceive that value parenting is very important in their lives. With the attention and support of parenting, children can share the joys and sorrows of living the increasingly challenging life. The more communications that occurs, the higher the instinct and desire for children to live with their parents. Therefore, wise parents taking advantage of the school holidays can help alleviate the psychological effect of special needs children.

5. Important and Suggestions

So Urie Bronfenbrenner Model Theory (1979) is well-suited for parenting social support systems. The model emphasizes the five main components: the Microsystem Layer (Immediate Environment), the Mesosystem Layer (Connection), the Exosystem Layer (Indirect Environment), the Macrosystem Layer (Social and Cultural Values) and Chronosystem Layer (Changes Over Time). Understanding of these concepts and theories are great importance to researchers as they provide the strengths and approaches used in parenting social support for special children in

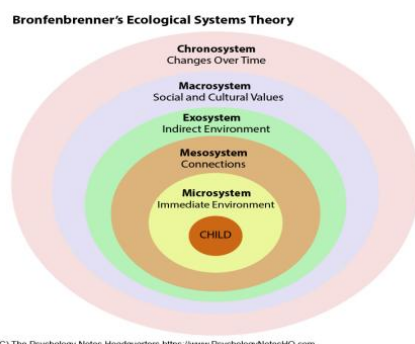
Markides, Boldt and Ray (1986) in their study found that the family was the dominant source of advice and assistance for all generation. Therefore, the relationship between the adult child and the parent also affects their psychological well-being is a condition in which individuals are less stressed.

The needs of parents raising a child with a disability are often overlooked, as the child and his or her condition become the primary focus. Limited research exists regarding parents' and caregivers' perspective to guide theory and practice pertaining to family stress and resiliency in families raising children with disabilities. This researcher found that coping behaviors are not sufficient in decreasing parental distress; therefore, additional supports are needed. These finding underscore the lack of knowledge that can help parents adapt to stressful situations that arise from rising a child with a disability can be affected by the level resources and support provided. Consequently, it is imperative that health care providers engage in more effective approaches to support parents' needs. Parents with effective resources and support may feel empowered to cope with and adapt to their situations, thus lessening their risk for mental health issues and strengthening the family as a whole (Noelle A. Cauda, 2017).

Most studies show that time constraints have made parents less aware of their role and more likely to let their children learn at home without guidance and supervision (Lareau, 2000; Abd Razak & Noraini, 2011). This statement was supported by Alma Harris & Janet Goodall (2008) in their study which found that busyness was an obstacle for parents to engage in children's learning, especially for single parents.

Therefore, Knollman et. al., (2007) argues that parents can help improve children's ability to complete homework by prioritizing child work, showing interest in child work, knowing about children's work requirement, setting children's time and place of study and completing assignments, supervising daily tasks as well as reviewing tasks as well as reviewing tasks completed by the child. The findings of this study were made by Christina Andin (2014), by explaining that verbal, behavioral and rewarding support has shown significant parental support for children. The findings showed that adolescents like the support most in terms of behavior (min 1.35), followed by verbal support (min 1.40). While support in terms of reward is least expected with mean value (1.83). Therefore, the overall mean value of 1.52 indicates that adolescents expect supportive feedback from their parents (Christina Andin, 2014).

According to Bolu-Steve F.N. et. al., (2017), counseling can actually helps an individual to live in a



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Bronfenbrenner's Ecological Systems Theory

balanced, well adjusted and a more meaningful life. In fact, the major goal of counseling profession is to resolve problem whereby counselors are expected to help in training student with special needs on the various coping strategy skills. Individual and group counseling can also be organized for students who faced some major challenges. Other than that, counselors can also encourage and advise parents of students with disability to seek medical attention rather than confirming to explanations of the illness. In another study done by, Bolu-Steve F.N. et. al., 2017, the educational psychologist who is concerned with the psychologist well-being of the individual will do a lot to deal with the self-concept and other related problem within the educational setting. For example in Nigeria, a school name Kwara State school, for the Handicapped was found to be derogative and insulting in terms of discrimination. Because of that, the name of school was changed to Kwara State School for Special Needs. Currently, the school occupies about 450 across the various units. It comprises of three units which are the Visual Impairment, Hearing Impairment, Hearing Impairment and Intellectual Disability Units.

6. Conclusion

For Cooley (1994), social support has two function: formal and informal. The researcher explains that support is the relationship of family, friends, and parents of children with disabilities. Informal supports play an important role helping caregivers reduce the feelings of isolation and helplessness often associated with raising a child with a disability. While a formal supports are provided through an organization or agency, such as medical professionals, school staff, and day care providers (Boyd, 2002; Bromley, Hare, Davidson & Emerson, 2004; Schopler & [Mesiboy, 1984). Such supports are usually best provided on a cohesive continuum of support, rather than distinct and separate from one another (Cooley, 1994).

It also explains that the parenting social support system is now very important in helping special education students manage their stress levels as well as having a positive relationship with their students' environment. Special education student need to understand their attitudes and education when indoors or outdoors in order to achieved the satisfaction of living as a teenager. This not only helps them but also controls and manages emotional control and the need for independence when outside of the parenting social support system. This non-functioning need to be studied to explain why this phenomenon occurs in special visitors students.

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