



MICROMODULE SYLLABUS

Family Support

Lesson 2: Some psychological characteristics of parents of children with disabilities

Introduction:

This module introduces the psychological difficulties of parents, especially when parents discover their child has a disability and raise a child with a disability. From there, the module shows the need to support parents and families of children with disabilities.

The aim of this learning task is:

- To be able to explain the difficulties that parents face when having children with disabilities.
- To be able to state the psychological difficulties of the mother in the case study.

Task instructions:

- Draw a model/diagram of the psychological development of parents with disabled children.
- Discuss with your group and answer the questions:
- 1. What difficulties does the mother's confession in the case study show?
- 2. How can parents quickly move to the adaptation and re-initiation stage?
- 3. What should do to help parents of children with disabilities reduce stress in raising and caring for their children?

Module information:

Parents of children with disabilities have very notable psychological

characteristics, which lead to unique needs in the process of raising and caring for children, performing parental functions, operating activities and values in the family. At different developmental stages of children with disabilities, parents and families have different psychological characteristics and needs but all aim to adapt to their children's developmental needs.

According to Drotar et al (1975), after receiving the children's diagnosis result, parents of children with a disabilities, have gone through different reaction stages in dealing with the children's care and development process. In general, there are 5 stages of parental reaction:

- Shock stage:

When learning that their child has a disability, parents first fall into a state of "shock" (that is: a psychological condition when people experience an unforeseen event related to work, family, or other unforeseen events). This is a common reaction of parents. Parents ask a lot of questions: why? Why? Why? What will my child be like? There are parents who are shocked when they hear that their child has autism and can only hug their child and cry, filled with suffering and despair, remaining in that vicious circle and not knowing where to get out" (Do Thi Thao, 2019).

- Denial stage:

According to Drotar (1975) and Do Thi Thao (2019): "After a state of "shock", parents may fall into a denial stage (not admitting, not believing it is true) that their child is not disabled. (He is just slower than his friends, He just doesn't know how to play with his friends, doesn't interact much, or just has some unusual behaviors, my son is completely normal) and find the reason to explain why their children have these symptoms. Parents deny the existence of the disabilities and

try to find out one who can say their child is typical development. Which leads them to take their children from hospital to hospital, find doctors and specialists to say their child is normal"

- Depression stage:

"When denial state fails, the parents' psychology gradually shifts to another stage. A period of sadness and anger. At this stage, parents are sad, stuck and ignore everything, blaming themselves, blaming themselves for not caring, blaming themselves for not paying attention to teaching their children, so they are angry with themselves" (Drotar, 1975; Do Thi Thao, 2019).

- Adaptation and re-initiation stage:

Over time, parents will gradually adapt to their child and the disability he or she has. Psychological problems of shock, denial or sadness will gradually decrease. Adapting and re-initiating children's abnormalities helps parents understand their children better, pay attention to change and help their children adapt to their lives. From there, parents will be ready to find suitable educational methods.

In the process of recognizing and adapting to their children's disabilities and strange behaviors, there are always two opposing psychological conditions in parents including accepting and denial. These two attitudes are intertwined like a spiral pattern. The process of accepting a child's disability is often very long for parents.

- Stress, tension, reduced mental health quality:

Parents of children with disabilities, especially very young aged children with disabilities, often experience a lot of stress (Nguyen Thi Mai Huong, 2020) and are at high risk of mental health problems such as anxiety and depression

(Bromley et al. al., 2004), at even higher risk, more often than parents of children with other disabilities (Catalano et al., 2018). Even though they are intervening or not intervening for their children, parents still feel very tired with the above psychological states. In particular, behavioral problems of children with autism are the biggest cause of stress, reducing the quality of life in children's families (Walsh et al., 2013). Parents of children with disabilities have high needs in health care, of which social support is considered an effective means.

Thus, the general tendency of parents of children with disabilities is confusion, constant worry, acceptance, then denial, then disappointment. This makes the process of intervention and therapy for children face many obstacles and take a lot of time because parents are struggling to make decisions related to their child's development direction. At the same time, although many parents want support, and help their children, they lack understanding and skills in supporting their children play, communicating with them, and have difficulty in economic conditions (Nguyen Thi Mai Lan, 2013) and especially the lack of a place to ask for advice. During the process of their child's learning and intervention, parents also lack information to coordinate and support their child. Most parents of children with autism suffer from stress and fatigue (Nguyen Thi Mai Huong, 2020).

It can be seen that when parent go through mentioned psychological stages, early counseling and early support for parents plays a very important role, it can change the parents' emotions, behaviors and attachment status with their children. (Drotar, 1975).

Case studies:

Ms. Nga is the mother of a child named Thao. Her daughter was born on February 8, 2020. After her child was diagnosed with autism, Ms. Nga was very shy when someone asked about her daughter. Ms. Nga expressed her embarrassment and shyness by sharing:

"When I learned that my child had signs of a disorder, I took her to the doctor but was shocked to hear that she had this strange syndrome. At that time, I was very sad and thought that everything had collapsed, thousands of questions "why?" appears around the my head. I was even more devastated when the eyes of everyone around my child looked at her like she is allien. Everyone in the family blamed the me for not caring for my child carefully, causing her to be like that. Being a first-time mother, I don't have much knowledge and experience in taking care of children, and I don't have any knowledge about autism. My feeling is always confused and I don't know who to share it with. Sometimes I sits and looks at my daughter in hopelessness, while she doen't know anything and still innocently play alone with laughter that tears my heart."

References:

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- 7. Walsh, C.E., Mulder, E., & Tudor, M.E. (2013). Predictors of parental stress in a sample of children with ASD: Pain, problem behavior, and parental coping. *Research in Autism Spectrum Disorders*, 7 (2), 256-264.