The Effect of Social Support on the Social-Emotional Ability of Children with Special Needs Mediated by Parental Acceptance of Children

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Abstract

The purpose of this study was to determine the effect of social support received by parents on the social-emotional ability of children with special needs through the role of parental acceptance of children. The sample comprised 291 parents of children with special needs from various regions in Indonesia. The results revealed that social support in the form of emotional and companionship support indirectly affect the social-emotional ability of children with special needs. Social support in the form of real and information support directly affect the social-emotional ability of children with special needs. The results revealed that various forms of social support parents receive can help enhance the social-emotional skills of children with special needs directly and indirectly.

Keywords: children with special needs, mediation, social-emotional, social support, parental acceptance

Introduction

All children, including those with special needs, are born with various conditions. Children with special needs usually suffer various forms of developmental physical, cognitive, and/or social-emotional delays. Greenspan, Wieder, and Simons (1998) argued that social-emotional aspects of development comprise the foundation for the development of cognition, language, and adaptive skills in everyday life. Accordingly, Magee (2012) stated that when the social-emotional aspects of the foundation are solid, children can enjoy positive interactions with others, enjoy success in school, and enhance their mental and physical health. Conversely, when the foundation is not solid, negative outcomes may emerge including failure at school, mental problems, and crime.

Five domains, namely, self-awareness, social awareness, self-management, relationship management, and responsible decision-making are outlined in the social-emotional framework posited by the Collaborative for Academic, Social, and Emotional Learning (CASEL) (Zhou & Ee, 2012). Varying modestly from CASEL, the Child Trends and Tauck Family Foundation formulated five social-emotional abilities that are directly related to children’s academic success including self-control, persistence, social ability, orientation to skills, and self-efficacy (Scarupa, 2014). Social-emotional aspects are imperative so that individuals can understand themselves and build positive relationships with their surrounding environment. Children’s mastery of ability of social-emotional aspects are of paramount importance when children start school and are expected to be more independent including managing interactions with others.

Various studies have revealed that children establish social-emotional ability from the time they are born and form attachments with their parents (Mahoney & Perales, 2003; Magee, 2012; Case-Smith, 2013; Hartshorne & Schmitt, 2016). Later in children’s development, parents play a significant role in assisting children to regulate themselves, enjoy social interaction, engage in learning processes, solve problems, and delay pleasure (Boris & Page, 2012). For example, when a child experiences discomfort due to factors such as fear and stress, the brain and body exhibit primitive encouragement and actions including hitting, biting, screaming, and running thus emphasizing the importance of assistance from parents so that the child can reduce this urge (Malik, 2012). According to Han, Yang, and Hong (2018), the role of parents is more significant in special needs children because special needs children tend to require more attention, care, and assistance in their development process in comparison to typical children. Special needs children also tend to depend on their parents for a longer period of time.

Although parents’ role in assisting special needs children is considered to be of paramount importance, in reality this role is difficult because of the numerous challenges it encompasses. Auriemma (2016) noted that various studies have revealed that parents with special needs children tend to have higher levels of stress in comparison to those with typical children. The stress parents with special needs children encounter is initiated when they realize they have a child with special needs. Solnit and Stark (1961, in Silverstein, 2015) compared the birth of a child with special needs to the loss of a loved one because parents experience the loss of a normal child before they are finally able to accept the condition of their child. Silverstein (2015) noted that initially when parents realize their child has special needs, most reject that reality. Subsequently, they may engage in bargaining, exhibit anger, and experience depression until they finally accept the reality.

Rohner and Khaleque (2002) stated that parents who accept their children exhibit affection and warmth verbally and nonverbally when caring for and raising them. Falik (1995) noted an accepting and positive response from parents thus enabling them to facilitate their child’s self-development as well as to receive help from the surrounding environment. Conversely, rejecting and negative responses from parents make it difficult for them to facilitate their child’s development; furthermore, such parents tend to resist environmental involvement that may help their children. Rohner, Khaleque, and Cournoyer (2012) also argued that while parental acceptance leads to warm and affectionate behavior, comfort, care, and support from parents, parental rejection is exhibited by the absence of feelings and loving behavior as well as the emergence of emotions and painful physical and psychological behavior toward their children. Thus, it is imperative that parents accept their children with special needs. Only parents
who accept their children’s condition will subsequently help their development including the mastery of expected age-related social-emotional ability.

Rupu (2015) noted seven factors that influence the process of parents’ acceptance of special needs children, namely, social support, family economy, strong religious background, education level, marital harmony status, parents’ age, and supporting facilities. Rohner and Khaleque (2008) stated that one of the factors most related to parental acceptance is social support from the immediate environment. Similarly, Luong, Yoder, and Canham (2009) revealed that 90% of the main reasons parents have ascribed to the difficulties of accepting autistic children include feelings of isolation from their own families because they perceive a lack of support to raise children. According to Sarafino (1998), social support includes the comfort, care, self-esteem, and/or assistance available to individuals from those around them. Sarafino classified four forms of social support, namely emotional support, real/instrumental support, information support, and companionship support such as that from the community.

This social support is relevant in Indonesia because of the country’s social and cultural conditions that tend to prioritize togetherness and interaction with extended families. Rupu (2015) revealed that 82.4% of parents with mentally retarded children who have good social support accept their child’s condition. Rahayu (2014) found that the factors that influenced fathers’ acceptance of children with autism include social support and/or the environment’s responses to fathers.

Accordingly, it is known that social support may have an effect on parental acceptance of special needs children. Furthermore, this acceptance may affect special needs children’s social-emotional ability. Thus, parental acceptance of their children may act as a mediator between social support received by parents and the social-emotional ability of children with special needs. Although several studies on the effect of social support on the parental acceptance of special needs children in Indonesia have been conducted, none of these studies have included social-emotional ability as a measure. The other two dimensions were not included in the measurement because they need to be assessed by children. In this study, 19 items with CFA results $\chi^2 (149) = 366.062$, $p = 0.000$, CFI = 0.847, RMSEA = 0.071 [90% CI 0.063, 0.079], SRMR = 0.079 were employed thus ensuring the validity of the instrument. The item loading factor ranged from 0.375 to 0.743 and the reliability was 0.872 with correlations between items ranging from 0.331 to 0.612.

### Social-Emotional Ability

The participants included 291 parents, mother or father, of elementary school children with special needs, either developmental or physical needs, in Indonesia. The researcher found the participants by contacting communities that may have comprised samples with predetermined characteristics such as inclusion elementary schools, special elementary schools, and communities of special needs parents. In addition, the researchers also digitized research instruments to be disseminated through links that potential participants who met the research criteria could complete.

### Instruments

#### Social-Support Measurement Tool

A modified version of the Elementary Students Social-Emotional Skills Measurement compiled by Child Trends and Tauck Family Foundation-Teacher Version (Scarpuc, 2014) was employed to assess social-emotional ability. This measurement tool comprises three dimensions of social-emotional ability, namely, persistence, self-control, and social competence. The other two dimensions were not included in the measurement because they need to be assessed by children. The 30-item instrument was originally developed to examine the social support parents of children with Down Syndrome received. The researcher modified this instrument to adapt it for parents with children who have general special needs. The modified instrument comprises 25 items in four dimensions; more specifically, there are seven items in the emotional dimension, five in the real/instrumental dimension, seven in the information dimension, and six in the companionship dimension. Tests on each dimension demonstrated that this measurement tool is valid and reliable (Table 1).

### Parental Acceptance

The Parental Acceptance-Rejection Questionnaire (PARQ) - Parent Version developed by Rohner (2005) was modified for use in this study. The measurement tool was translated into Bahasa and adapted to the context of this study. The CFA result of the PARQ is $\chi^2 (90) = 133.564$, $p = 0.002$, CFI = 0.924, RMSEA = 0.041 [90% CI 0.028, 0.052], SRMR = 0.061. It comprises 15 items that proved to be reliable and valid. Each item had a loading factor that ranged from 0.306 to 0.802. The reliability of the PARQ is 0.844 and the correlation between items and the total score ranges from 0.335 to 0.670.

### Data processing

Data processing was conducted by employing IBM SPSS version 22 and Rstudio version 1.1.383. The researcher tested the reliability and total item-score correlation on SPSS and subsequently determined the
validity of each measurement tool with CFA in the Rstudio program. After determining the validity and reliability, the researcher conducted a mediation test by employing the SEM technique in the Rstudio program.

**Results**

The researcher conducted a mediation test by treating each dimension of social support as an independent variable, parental acceptance as a mediator, and the social-emotional ability of children with special needs as the dependent variable. The fit criteria of the research mediation model are presented in Table 2.

According to Hu and Bentler (1999), the model fit is considered good if the comparative fit index (CFI) indicator is greater than 0.95, but remains acceptable if it is greater than 0.90 and the root mean squared error of approval (RMSEA) is less than 0.06. However, Browne and Cudeck (1993) recommended that an RMSEA number of less than 0.05 indicates that the model fit is good and an RMSEA value between 0.05 and 0.08 remains acceptable. Hu and Bentler (1999) added that a root mean squared residual (SRMR) indicator of less than 0.08 demonstrates that the model fit is good. They further noted that the model may be regarded as a good fit if at least two indicators are met. Consequently, the four mediation models were considered to have good fit and the results of the model tests could be further analyzed (Table 3).

Although the results revealed that each dimension of social support had a significant influence on parental acceptance of children (LoS 0.05), not all of these dimensions had an effect on the social-emotional ability of special needs children through parental acceptance. Only social support in the form of emotional and companionship had a significant influence thereof. Therefore, the indirect effect of the two models revealed significant results thus demonstrating that social support in the form of emotional and companionship affects the social-emotional ability of special needs children through parental acceptance of children. Accordingly, the first and fourth hypotheses were supported.

**Table 1. Statistical test results for each dimension of Social Support**

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Confirmatory Factor Analysis Criterion</th>
<th>Reliability</th>
<th>Item-total Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CFI</td>
<td>RMSEA</td>
<td>SRMR</td>
</tr>
<tr>
<td>Emotional</td>
<td>0.977</td>
<td>0.042</td>
<td>0.038</td>
</tr>
<tr>
<td>Real</td>
<td>0.937</td>
<td>0.090</td>
<td>0.047</td>
</tr>
<tr>
<td>Information</td>
<td>0.944</td>
<td>0.061</td>
<td>0.050</td>
</tr>
<tr>
<td>Companionship</td>
<td>0.971</td>
<td>0.065</td>
<td>0.056</td>
</tr>
</tbody>
</table>

**Table 2. Fit criteria of the research mediation model**

<table>
<thead>
<tr>
<th>Dimensions of Social Support</th>
<th>CFI</th>
<th>RMSEA</th>
<th>SRMR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional</td>
<td>0.833</td>
<td>0.046</td>
<td>0.071</td>
</tr>
<tr>
<td>Real/instrument</td>
<td>0.839</td>
<td>0.045</td>
<td>0.072</td>
</tr>
<tr>
<td>Information</td>
<td>0.830</td>
<td>0.046</td>
<td>0.071</td>
</tr>
<tr>
<td>Companionship</td>
<td>0.840</td>
<td>0.046</td>
<td>0.075</td>
</tr>
</tbody>
</table>

**Table 3. Mediation test results**

<table>
<thead>
<tr>
<th>Parental Acceptance (M)</th>
<th>Social-Emotional Ability (Y)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct effect</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional support</td>
<td>a 0.411 0.502 0.000* c' 0.182 0.167 0.052</td>
</tr>
<tr>
<td>Parental acceptance</td>
<td>- - - b 0.234 0.176 0.021*</td>
</tr>
<tr>
<td>Real support</td>
<td>a 0.523 0.510 0.000* c' 0.130 0.313 0.004*</td>
</tr>
<tr>
<td>Parental acceptance</td>
<td>- - - b 0.418 0.100 0.219</td>
</tr>
<tr>
<td>Information support</td>
<td>a 0.393 0.534 0.000* c' 0.192 0.215 0.030*</td>
</tr>
<tr>
<td>Parental acceptance</td>
<td>- - - b 0.211 0.144 0.081</td>
</tr>
<tr>
<td>Companion support</td>
<td>a 0.221 0.340 0.000* c' 0.272 0.152 0.080</td>
</tr>
<tr>
<td>Parental acceptance</td>
<td>- - - b 0.130 0.207 0.005*</td>
</tr>
</tbody>
</table>

* significant at LoS 0.05
In contrast, real/instrumental support and information support did not have a significant influence through the parental acceptance of children. Thus, hypotheses 2 and 3 were not supported. However, it is noteworthy that both these forms of social support had a direct significant effect on children’s social-emotional ability (LoS 0.05).

Discussion

This study revealed that social support provided to parents of children with special needs has both a direct and indirect effect on the social-emotional ability of such children. These results concur with Helman (2002) who demonstrated the importance of social resources and social support for parents of children with special needs so that such parents can conduct their functions properly and ultimately encourage the development of children with special needs. The interrelationship between the three variables is in accordance with Bronfenbrenner’s Bio-ecological model, which proposes that individuals are influenced by several structures including microsystem, mesosystem, exosystem, and macrosystem (Bronfenbrenner, 1979, in Berns, 2013). The social support parents receive from various parties will ultimately affect their circumstances and the care they provide to their children with special needs. Subsequently, such care affects the social-emotional ability of children with special needs.

The results of testing the first hypothesis revealed that social support in the form of emotional support can affect the social-emotional ability of children with special needs through the role of parental acceptance of children. This occurs because of the pressure that parents experience. Silverstein (2015) revealed that most parents exhibited rejection initially when they realized they have children with special needs. Subsequently, they attempt bargaining, exhibit anger, feel depressed, and finally, accept the reality. Helman (2002) conducted interviews with parents of children with special needs to explore their past reactions when they realized that their children had special needs. The results revealed that the parents’ most common reactions comprise emotionally negative reactions including depression, anger, shock, denial, fear, self-blame, guilt, sorrow, grief, confusion, and emotional breakdown. Thereafter, Helman (2002) conducted interviews to examine the current condition of parents who had been caring for children with special needs for several years. The findings demonstrated that most parents related endless emotional and/or physiological fatigue. Accordingly, parents certainly need support and in particular, emotional support from their surrounding environment to ensure they can manage their emotions and not blame themselves or other parties for their child’s situation. Ikromah (2015) revealed that social support affects parents’ self-acceptance. They accept the fact that they have special needs children and accordingly, tend not to emphasize their own opinion of their children’s condition, which is unlike that of most other children.

Similar to emotional support, companionship support, which refers to support from the community, had an influence of the social-emotional ability of the special needs children through parental acceptance of children. García, Areces, & Marsh, (2019). In such circumstances, emotional and companionship support would be more relevant to the participants’ needs in this study.

In contrast, social support that is provided in the form of real/instrumental and information support has a direct effect on the social-emotional ability of children with special needs. Although forms of social support affected parental acceptance of children, parental acceptance did not act as a mediator that influenced the social-emotional ability of children with special needs. In other words, these two forms of social support may have an influence on the social-emotional ability of children with special needs through other variables. Lara and Pinos (2017) stated that the existence of education, more specifically, professionals’ provision of information to parents of children with special needs may increase parents’ sense of competence. It is recommended that in a future study the parental variable of self-efficacy be treated as a mediator of social support in the form of information on the development of the emotional-social ability of children with special needs.

Conclusion

Social support is an important factor that assists parents to accept the condition of their children with special needs. It is also imperative that the development of social-emotional ability of children with special needs be facilitated, directly or indirectly.

This study revealed that only social support provided in the form of emotional support and companionship support has an effect on the social-emotional ability of special needs children through parental acceptance of children. However, social support provided in the form of real/instrumental support and information support tends to have a direct influence on the child without the mediation of parental acceptance of the child.

This study has implications for people who deal with children with special needs because such individuals may assist in enhancing the children’s social-emotional ability by providing various forms of support to their parents. Furthermore, this study can provide information for parents of children with special needs in that their openness to receive support from the social environment not only has a positive impact on themselves, but may also have a positive impact on their children’s social-emotional ability.

This study is limited in that controlling the demographic factors may have had an impact on the results of the study. It is recommended that further research controls these demographic variables better. Second, it is recommended that further research regard the parental variable of self-efficacy as a mediator between social support and emotional-social abilities of children with special needs.

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Declarations of conflicting interest

The authors have declared that there is no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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