

“Parenting” as the Enhancer of Subjective-Educative Experiences: Case Study on Parental Process of Children with Intellectual Disability

Sopingi Sopingi

Department of Non-formal Education, Universitas Negeri Malang, Malang, Indonesia

Email: sopingi.fip@um.ac.id

Abstract: From adults' learning perspectives, parenting children with intellectual disabilities is considered a social reality interestingly researched, particularly related to the challenges and experiences during the parenting process encountered by parents who lack knowledge and understanding of intellectual disabilities. This research aims to (1) describe the configuration of parenting challenges in-depth and (2) explore the subjective-educative experiences derived from the challenges. This research was conducted using a qualitative approach with a phenomenological method. The data was derived from in-depth interviews with parents of children with moderate intellectual disability. The data were analyzed following the stages of the phenomenological method consisting of (1) description, (2) reduction, and (3) discovery of the main structure of meaning. The results show that (1) The challenges of the parenting process of children with intellectual disability require a high level of competence, encompassing both knowledge and technical parenting and psychological aspects, and (2) Various challenges in parenting children with disability lead to diverse subjective and educative experiences for parents. Based on the findings, this research recommends that parents continually improve parenting practices for children with intellectual disability by adhering to educational principles.

Keywords: Children with intellectual disability; subjective-educative experience; parenting.

INTRODUCTION

The existence of physically and mentally healthy children has become every family's dream. However, in reality, many children are born with physical and/or mental disabilities. One term for children with mental disability is Children with Intellectual Disabilities, or called CID. Children with intellectual disability are confirmed as those with limitations in intellectual functioning and adaptive behavior (APA, 2013), such as difficulties in communication (Schalock et al., 2021), work skills (Siahaan et al., 2023), and self-care (Wayanshakty et al., 2020).

The presence of CID in a family can significantly impact the life and harmony of a family (Singh et al., 2017). Generally, parents lack adequate knowledge and understanding of CID (Trihastuti et al., 2023). This condition would also impact parenting approaches and processes (Dreyfus & Dowse, 2018). The level of family readiness to accommodate CID varies in terms of understanding, acceptance processes, and treatments (Gusrianti et al., 2018). While many families require time to acclimate to CID, some are adequately prepared (Rahmatika et al., 2020). This lack of preparation causes parental stress (Kumar et al., 2018; Savari et al., 2021). Some factors that frequently lead to stress when providing care for a child with CID are (1) The carer's long-term, heavy burden; (2) Financial concerns associated with providing care; (3) Emotional problems resulting from the child's behavior; (4) Worries about education and anxiety regarding the child's future (Lutfianawati et al., 2019); and (5) The lack of a lack of technical knowledge on how to properly care for the children (Aunos & Pacheco, 2020) and a lack of sensitivity to the children's behavior and attitudes (Scherer et al., 2019).

The preliminary study from some parents caring for children with CID in Malang results. First, parents generally lack knowledge and understanding of their children. Although parents can eventually accept their children, the process varies. Some parents initially experience confusion but then fully accept their children's condition. Second, from various acceptance processes of CID within families, a phenomenon has been observed where parents begin to develop the awareness to learn more about their children while they parenting as they can. These findings indicate that (1) Some family members start to learn how to organize themselves to accept the children's presence; (2) Some family members learn to understand what, how, and why their children behave as they are; and (3) Some families start to learn how to properly care for their children with intellectual disability. This demonstrates that the caregiving process positively affects their parenting competency.

Some preliminary studies regarding parenting experience towards CID were conducted by several researchers, such as Staunton et al. (2023), Rogers et al. (2021), Embregts et al. (2021), Neece et al. (2020), and Lanjekar et al. (2022). These studies show that, particularly during the COVID-19 pandemic, parenting a regular child is not as difficult as raising a child with CID. As a result, parents who were caring for someone with CID felt more psychological pressure (Staunton et al., 2023). In addition, Rogers et al. (2021) observed that although parents experienced considerable stress and responsibilities when caring for CID, the pandemic enhanced the intensity of parent-child interactions. During the COVID-19 pandemic, drastic changes are indicated in many aspects, especially in parenting patterns: Parents became more conscious of providing safety and comfort to their children, emphasized the importance of healthy living, and truly experienced living together as a family (Embregts et al., 2021). Although parents could not provide all services effectively during the pandemic, it strengthened family bonds and relationships (Neece et al., 2020). Furthermore, parents became increasingly aware of the importance of proper knowledge and skills in parenting CID and tried to adopt more cooperative and supportive caregiving practices (Lanjekar et al., 2022).

Parenting is the interaction related to the process of nurturing and educating children, carried out daily to foster children's growth, development, and well-being (Bornstein et al., 2018). It is a constellation of behaviors and mindsets that parents believe to help their children learn, grow, and discover a wider view of life and build trust in them (Berggren & Bergman, 2022). Parenting is a dynamic social interaction (Schickedanz et al., 2018). This process is affected by several factors, including the family's access to social and financial resources (Ilhan et al., 2019) and the accumulation of parental experience (Čolić et al., 2019). They need to know their children's developmental stages (Branje, 2018) and the capacity to decipher a variety of nonverbal cues from their children (Mooney-Doyle et al., 2015). Parenting is the act of actively participating in the children's daily life (involvement) (Koehn & Kerns, 2017), giving complete and sincere support (autonomy support) (Matthews et al., 2021), and showing warmth and responsiveness (Asghari & Besharat, 2011).

Engaging in any daily activity allows individuals to learn and acquire meaningful and relevant life experiences (Illeris, 2018). Categorically, experiences can be classified into (1) educational experiences and (2) non-educational experiences (Dewey in Pugh et al., 2020). Educative experience is seen as an experience that can enhance an individual's future capability according to past experiences. Several types of educational experience include (1) Experiences that can strengthen critical thinking, (2) Experiences that can accelerate self-regulation, and (3) experiences that reinforce a zest for life (Gokgoz & Kabukcuoglu, 2022).

Educative experiences derive from meaningful experiences, which can only be encountered in an active and productive life (Anshen & Fromm, 1948). This meaningful experience is reached out from what and how the experience is lived (Ceballos et al., 2021; Teherani et al., 2015). Frankl (2020) elaborates on three significant ways to find meaningful subjective experiences: work or deeds, loving something or someone, and suffering. Parenting CID presents distinct challenges and issues compared to raising a typical child due to their differences in characteristics (Jenaro et al., 2020), the diversity in family knowledge and acceptance (Anggraini, 2020), variations in social support (Gusrianti et al., 2018), and other differences typically associated with the characteristics of CID. This condition means that parenting, with its challenges and complexities, can potentially lead to meaningful or educational experiences for parents.

Expanding upon the results of pilot studies and other research on the experiences of parents taking care of CID, a compelling area for further investigation that has not yet been fully investigated by other researchers is the challenge that could start the development of parents' subjective and educative experiences remain a compelling area for future research that has not yet been thoroughly explored by other researchers. Therefore, this research aims to (1) investigate the challenges parents have when parenting their CID, and (2) investigate the subjective and educative experiences parents have during this process.

METHOD

Research Design

Every research originates from basic questions regarding the reality that constitutes its focus. The subjective educative experiences of parents within parenting CID are considered as the consequence of behavior from the construction of social reality, specifically the practices and processes of parenting CID undertaken amidst numerous challenges. As a behavioral conception, subjective-educative experiences are viewed as the expressions arising from parental awareness that lead to meaningful experiences. Based on the reality of this research, the appropriate research design for this study is a qualitative approach with a phenomenological method. Phenomenology is designed to study certain phenomena as they appear to the human sense in subjective experience (Assingkily, 2019). Therefore, this qualitative research focuses on an in-depth and systematic analysis of a single phenomenon in a real-life context, identified as parents' experiences in CID parenting.

Research Subject

The social reality that forms the focus of this research is the subjective educative experiences of parents during parenting CID processes. This research subject is parents with moderate CID and has been parenting for at least five years experience. This duration ensures that parents have acquired a variety of experiences. The selection of research subjects (informants) was conducted using snowball sampling. Five informants from families with CID who met the established criteria were selected. The research was conducted in Malang, East Java.

Data Collection and Analysis Data

The primary data of this research is derived from the subjective educative experiences narrated by parents in the practice and process of parenting CID. Therefore, the appropriate method for data collection within this research is an in-depth interview with parents who meet the established criteria. In line with the phenomenological research design, the collected data are analyzed through the steps of (1) Description (Deeply describing the

subjective-educative experiences of parents in caregiving for CID); (2) Data reduction (Understanding the subjective-educative experiences narrated by parents as they are, without any interpretation or judgment from the researcher; (3) Research essence identification: Identifying the essential structure of meaning in the form of the texture of parents' subjective-educational experiences, which leads to distill the intersubjective meaning.

FINDING AND DISCUSSION

Finding(s)

1. Parenting and Technical-Psychological Maturity

Parenting CID involves deliberate actions and attitudes by parents, characterized by active engagement in the children's daily lives, providing wholehearted and genuine support, and responsiveness and sensitivity with warmth. Given their limited knowledge and technical skills in caregiving for CID, parents face various significant challenges. These parenting challenges generally arise due to the behaviors and characteristics of CID of slow response, quick fatigue and boredom, weak memory, difficulty concentrating, short attention span, and a psychological condition that tends to be unstable and unpredictable. The important findings related to the existing challenges are categorized into two main domains such as (1) technical challenges and (2) psychological challenges.

First, technical challenges are related to caregiving for CID, which stems from the aforementioned behaviors and attitudes. According to the statements from parents, several technical challenges have been identified and can be categorized as (1) Persuading or convincing children to do or not to do certain activities; (2) Self-care skills training for children to develop abilities for personal hygiene and other self-care activities; (3) Guiding and encouraging independence for children to perform daily activities. These technical challenges arise because parents often find that their methods or techniques do not work as intended and cannot be easily implemented in caregiving. Children may be unable or unwilling to follow parental guidance or instructions due to physical or psychological barriers.

Second, psychological challenges are the challenges related to psychological dynamics experienced by parents while caring for CID, whose behaviors and attitudes differ significantly from typical children. The various obstacles in parenting CID affect the psychological well-being of parents. According to the statements from parents, several psychological challenges have been identified (1) Parents feel that their level of patience is being tested; (2) The sincerity and consistency of parents' willingness to make sacrifices for their child are frequently disrupted; (3) Parents' ability to consistently provide attention and affection to their child is challenged; and (4) Maintaining a positive outlook towards their child can be intermittent and unstable. These psychological dynamics occur because parents are frequently confronted with the reality that their children's behaviors and attitudes deviate from their expectations.

2. Parenting and Subjective-Educative Experience

Parenting CID gives parents unique experiences. After navigating the various challenges inherent in parenting, parents uncover several significant and impactful experiences that are both subjective and educative. These experiences are subjective because they are felt individually by parents during the caregiving process, and each parent may have different subjective experiences. Subjective-educative experiences are subjective insights that provide educational values discovered by parents through the parental process. These

educational values are intertwined within the practice and process of caregiving and can only be identified when parents engage in parenting consistently with full awareness.

Several findings regarding subjective-educative experiences, as reported by parents, are categorized into the domains of (1) Parents recognize the strengths and weaknesses of the parenting techniques they have employed; (2) Parents gain specific insights needed for parenting, such as the way of correcting mistakes in previously applied techniques; (3) Parents discover the right moments for parenting, including aspects of timing, method, and duration; (4) Parents accurately identify the children's behaviors and actions and can interpret verbal signals and non-verbal cues from their movements or behaviors; (5) Parents find renewed motivation in facing the ongoing challenges of parenting within the family. These various findings on subjective-educative experiences are subjective expressions constructed by each parent based on the obstacles encountered during the parenting practice and process.

Discussion(s)

1. Parenting and Technical Psychological Maturity

Research findings indicate two main categories of challenges in parenting CID: technical and psychological. These challenges arise due to specific behaviors and characteristics of CID, including slow response, quick fatigue and boredom, weak memory, difficulty in concentration, short attention span, and a psychological state that tends to be unstable and unpredictable. These technical and psychological challenges often persist because parents generally lack the knowledge, understanding, and appropriate technical skills needed for raising CID, as well as the psychological maturity essential for parenting.

Parenting should not be conducted haphazardly or carelessly, as it bears an educational mission (Mijah, 2017), and its mechanisms are based on societal norms, roles, and moral conduct (Janssens & Deković, 1997). Proper CID parenting requires more resources and energy than a typical child (Sari, 2020). These resources and energy are manifested in what is known as parenting competency (Maltby et al., 2003). Parenting competency refers to the ability to effectively manage parenting tasks (Ngai et al., 2007). This competency is only inherent in parents with extensive knowledge, deep understanding, mature technical mastery in parenting, strong self-confidence (Huus et al., 2017), and resilience in various challenges in caregiving practices (Jones & Prinz, 2005).

These research findings also indicate that parents generally lack preparedness and psychological maturity when confronted with the attitudes and behaviors of CID. These psychological challenges often exacerbate the burden on parents in taking care of CID. This is corroborated by previous research. Effective family cohesiveness (Naufal & Rahmandani, 2020), strong self-efficacy or self-confidence (Purbasafir et al., 2018; Rakap et al., 2023), and robust, positive social support from parents, all family members, and the surrounding environment (Gusrianti et al., 2018) are essential for parents to strengthen their psychological maturity in parenting. This is crucial given the more diverse challenges in parenting CID (Normasari et al., 2021).

Regarding parenting competency for CID, parents must have adequate knowledge and understanding of the characteristics of CID (Marsh et al., 2020). To prevent malpractice in the parenting process, parents must continuously enrich their knowledge and understanding of the stages of child development (Rositas et al., 2023).

2. Parenting and Subjective-Educative Experience

The research identified five categories of subjective-educative experiences reported by parents with their educational values intricately woven into the parental processes and practices for CID, which are inherently challenging. This finding is affirmed by Goldthorpe (1971), who stated that through tangible actions, individuals acquire subjective sense. Similarly, Rapport & Overing (2000), Schutz (in Jesus et al., 2013), and Berger & Luckmann (1966) emphasize that an individual's experiences are closely related to surrounding events and open to various subjective experiences for those involved (Rapport & Overing, 2000). These experiences are examined when connected to previous experiences and interactions with others (Schutz in de Jesus et al., 2013). The subjective nature of these experiences means they differ between individuals, even when similar events are encountered (Berger & Luckmann, 1966).

Subjective-educative experiences, such as "recognizing the strengths and weaknesses of parenting techniques used" or "discovering the right moments (in terms of timing, method, and duration) for parenting," are not easily acquired. These experiences are obtained through long-term parenting practices that involve complex and challenging processes. This is corroborated by Roth & Jornet (2014), Dewey (2009), and Fox (2008), who assert that subjective-educative experiences leave a deep impression after an individual undergoes either pleasant or distressing circumstances (Roth & Jornet, 2014). Such experiences integrate the mutual influence of various physical-practical, intellectual, and affective aspects of human life (Dewey, 2009). Fox (2008) further asserts that experiences are entities that closely relate to both internal elements (emotions, awareness) and external elements (physical and social environments), making them integral parts of the experience. Experiences emerging from social interactions are termed impressions by (Orehek et al., 2010), which can influence an individual's behavior and cognition (Williams & Bargh, 2008).

Subjective-educative experiences, such as "gaining specific insights needed for parenting processes," "honing the ability to read and understand the behavior and actions of CID accurately," and "identifying the children's behaviors and actions and able to interpret verbal signals and non-verbal cues from their movements or behaviors," are also educational experiences acquired by parents through prolonged and challenging caregiving practices. These educational experiences align with the findings of Dewey (in Pugh, 2020), Jandrić & Kurtović (2021), and Garrison (2001) and are further supported by Roth & Jornet (2014). According to Dewey (in Pugh et al., 2020), the crystallization of an individual's experiences is categorized as educational experiences. In addition, knowledge, understanding, and skills learned from past experiences serve as effective instruments for comprehending future situations (Jandrić & Kurtović, 2021). Educational experiences are functional transactions between the subject and the environment where activities occur (Garrison, 2001), and these experiences happen within and across spaces and times (Roth & Jornet, 2014).

Another significant and intriguing subjective-educative experience is the discovery of parents of a renewed sense of purpose and vigor in facing the ongoing and escalating challenges of parenting. The family, as a social reality, has dynamic facts within. It can be a source of complex problems and challenges that are difficult to resolve (Geuze et al., 2022). However, it can be a wellspring of inspiration, motivation, and a driving force to achieve goals (Gokgoz & Kabukcuoglu, 2022). Wong (2007) asserts that educational experiences invigorate the individuals' lives. According to Wong (2007), educational experiences are categorized into (1) strengthening or reinforcing self-regulation and (2) enhancing vitality and life enthusiasm. Therefore, it is logical that the parenting processes for CID can be highly

educational for parents when undertaken with full awareness and resilience. Based on the discussion above, it can be concluded that parenting CID can provide parents with subjective and educational when conducted with full awareness and navigated through numerous challenges.

CONCLUSION

The study findings are compared, and conclusions are derived from this process. First, having mature parenting competencies—which include thorough knowledge and technical abilities in parenting and the psychological maturity that is continuously needed during the parenting processes—is crucial to effectively parenting CID. Second, parents receive subjective and educative experiences from raising CID despite the many hurdles involved.

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