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Mother's Parenting Patterns in Forming the Independence of Cerebral Palsy Children at the Foundation for the Development of Disabled Children Jakarta

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#### **Abstract**

The limitations of cerebral palsy sufferers mean that the child cannot fulfill his own needs and must get help from other people. Meanwhile, parents have high hopes for their children's independence. The research was conducted to find out and get a specific, detailed and clear picture of how mothers' parenting patterns shape the independence of children with cerebral palsy? Qualitative research using qualitative methods, as well as using source trangulation techniques, that each subject is able to act as the five roles, however, among the five parenting styles, there are parenting patterns that are the most dominant and those that are not dominant for each subject.

Keywords

Parenting style, independence, special children

#### **INTRODUCTION**

In the life cycle, childhood is a phase where children experience growth and development according to their growth which can also determine their future. There is a need to optimize children's development, because apart from being crucial at that time, children also need attention and love from parents or family so that basically children's rights and needs can be met properly.

However, sometimes there are certain things that result in children not developing and growing according to their parents' expectations. These "special" children are also called children with special needs. There are various types of children with special needs, one of which is cerebral palsy. Cerebral palsy sufferers tend to have difficulty moving and carrying out daily activities.

According to Hinchcliffe (2003) cerebralmeans "related to the brain", while palsy means "paralysis" or "unable to move". So, CP means a type of paralysis that results from damage to the brain. In practical terms, CP is part of a syndrome that includes motor dysfunction, psychological dysfunction, paralysis (seizures) and emotional and behavioral disorders due to brain damage. There are several types of cerebral palsy, one of which is spastic type cerebral palsy, which is cerebral palsy which causes stiffness in the muscles throughout the body. Spastic type cerebral palsy children are children who have physical abnormalities or are disabled, have difficulty living life, such as daily activities (self-care, personal hygiene, eating, drinking, dressing) which gives rise to a feeling of dependence on other people (Abdul Salim, 2007).

The limitations of cerebral palsy sufferers mean that the child cannot fulfill his own needs and must get help from other people. Meanwhile, parents have high hopes for their children's independence. Steinberg (2002) believes that independence is the ability to carry

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out and be responsible for the actions one takes and to establish supportive relationships with other people.

The results of initial observations carried out at YPAC showed that parents did not allow their children to carry out their own activities. Both parents and nurses still help with activities such as feeding the child while eating. The results of parent interviews with children showed that parents were worried about being able to apply independence to their children, "who will take care of my child later? If my father and I are gone, we will no longer be able to take care of him." The results of observations in the teaching and learning process at YPAC show that some children are not yet able to pick up their own writing utensils, are not able to color pictures on paper and are not yet able to write letters or numbers, when attaching green beans to the word ALLAH only a few can do it themselves.

The results of the researcher's observations on the first subject aged 11 years (spastic diplegia type cerebral palsy), the subject was close to the mother. It was seen during the interview that the subject's mother said that "as much as possible the subject was taught to be independent, even though the subject often sought the mother's attention when at home." the subject walks alone without the help of others, the subject is able to eat alone, even if only a few bites. Subjects are still assisted in carrying out several activities such as carrying out assignments from the teacher Mrs. S.

The results of the researcher's observations on the first subject aged 13 years (cerebral palsy spastic hemiplegic type), the subject looked more like his mother than his father, because of the activities at school of the subject's mother who took the time to come to school even though the subject's mother worked. The subject can carry out activities without the help of other people, is able to walk alone, can decide or choose something that the subject wants. However, the subject is unable and unwilling to eat without being fed.

The third subject is 7 years old. In daily life, the subject is not yet able to behave independently. The subject is closer to his mother because he spends more time with her. The subject's mother pampers the subject at home, as can be seen from the subject's mother's opinion regarding the subject being small and being treated special, one of which is being pampered. The subject still has to be guided to walk, fed to eat, helped by the teacher in doing school assignments, and is not yet able to decide or choose what he wants. It can be said, the subject still needs help in carrying out most of his activities.

Seeing the various phenomena that exist regarding the role of maternal parenting in shaping the independence of children with cerebral palsy, researchers are interested in conducting this research in more depth, especially to find out and get a specific, detailed and clear picture of how maternal parenting forms the independence of children with cerebral palsy?

#### **METHOD**

Researchers use qualitative research with phenomenological methods. Data collection techniques use interview, observation, checklist collection methods. The data collection technique uses data analysis and interpretation methods. Researchers use source triangulation in combining various data collection techniques and data sources.

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#### RESULTS AND DISCUSSION

The research was conducted on 3 subjects, the first subject (FS) worked as a teacher. The second subject (RG) is private employees, the third subject (YG) is civil servant. Research was also carried out on informants with the aim of making the resulting data stronger. Each informant was taken from 2 people closest to the three subjects.

#### **Subject Characteristics**

Subject Personal Data	Subject 1	Subject 2	Subject 3
Name (initials)	F. S.	RG	WHICH
Gender	Woman	Woman	Woman
Age	38 years old	39 years old	33 years old
last education	S1	S1	S1
Ethnic group	Batak	Java	Sunda
Work	Middle school teacher	Creative Managerin Retail Business	Civil servants
Religion	Islam	Islam	Islam
Child's condition	Cerebral	Cerebral Palsyspastic	Cerebral Palsyspastic
	Palsyspastic type of diplegia	hemiplegic type	type of diplegia

#### **Characteristics of Subject Informants 1**

FS informant				
Personal data	DS informant	WS informant		
Gender	Man	Woman		
Age	47 years old	50 years		
Last education	<b>S</b> 1	S1		
Ethnic group	Sunda	Java		
Work	Teacher	Teacher		
Religion	Islam	Islam		
Relationship to Subject	Husband	Homeroom teacher		

#### **Characteristics of Subject Informants 2**

RG subject informant				
Personal data	EF informant	NA informant		
Gender	Man	Woman		
Age	43 years old	33 years old		
Last education	<b>S</b> 1	S1		
Ethnic group	Batak	Java		
Work	Private employees	Teacher		
Religion	Islam	Islam		
Relationship to Subject	Husband	Homeroom teacher		



#### **Characteristics of Subject Informants 3**

YG subject informant				
Personal data	AR informant	AC informant		
Gender	Man	Man		
Age	32 years	33 years old		
Last education	<b>S</b> 1	<b>S</b> 1		
Ethnic group	Java	Sunda		
Work	BUMN employee	Teacher		
Religion	Islam	Islam		
Relationship to Subject	Husband	Homeroom teacher		

#### **Intracase Analysis**

#### 1) Intracase Analysis of FS Subjects (Maternal Parenting Patterns)

Based on the results of interviews with subject FS, informant DS and informant WS, the role of subject FS in caring for the child is quite good. The FS subject is able to provide the best care for the child even though the FS subject is also busy at work. FS subjects also try to teach activities that support the child's independence. FS subjects can teach children independence very well and diligently. Being a companion for your child in his busy life is not an easy thing. FS subjects must be able to manage their time between family and work. The FS subject also realized that the care of the child would have been better if the FS subject had been cared for until now, but because the FS subject had to work and required him to spend time at school, the FS subject found it difficult to meet his child. The children of FS subjects are currently spending their time at YPAC, however, if there are activities at school such as pensions or taking report cards, then FS subjects will spend as much time as possible coming to school. FS subjects also do not limit the child to interacting with the surrounding environment. This is because the FS subject actually wants the child to be able to socialize a lot in the surrounding environment despite all the limitations he has.

The child's independence is still quite far from perfect. The independence that can be seen from the child is that he is able to take off his own shoes, take off his own socks, take off his trousers, take off his diaper, he can also eat and drink by himself. All of this is not yet at the maximum level. As much as possible, FS subjects will teach independence to the child. The right time for FS subjects to teach independence is on weekends. Training independence in children requires habituation. This is because the process when the FS subject trains the child to be independent requires quite a long process, so consecutive repetition is needed to maximize this independent activity. The subject's independence is currently still on a scale of five, which means there are still many things that must be maximized to support the child's independence.

#### 2) Intracase Analysis of RG Subjects (Maternal Parenting Patterns)

Based on the results of interviews with subject RG, informant EF and informant NA, subject RG tries to be a mother as well as a friend or friend to her child. RG subjects do not want their children to experience a lack of love from their parents, especially from RG

# SINOMICS JOURNAL

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subjects. In caring for the child, the RG subject involves a lot of communication, sharing and building trust between the RG subject and the child. This was done so that RG subjects could more easily provide effective care for their children. The most appropriate time to spend time alone between the RG subject and the child is when he is about to sleep. At that time, the subject RG and the child both shared stories with each other. RG subjects apply a parenting style that is based on self-confidence. RG subjects believe that children's self-confidence depends on the parents' self-confidence. The way the RG subject raises his child starts from the concept of religion, then teaches him why the child has a mother and father like this and finally introduces who we really are. This kind of parenting style is the basis for RG subjects in caring for their children.

The independence of the RG subject children is quite visible, although there is still a lot that needs to be maximized. Starting from emotional independence, the child must be able to reduce his sense of selfishness, must be able to control his emotions and must be able to interact more with the surrounding environment. After that, independence in behavior, the child must maximize the attitude of independence that has begun to appear in the child, the child must learn to focus on developing his independence. Finally, if explained based on independent values, the child is able to give opinions, make suggestions, assess and choose for himself whatever decision he makes. That is quite a good thing in applying independent values with all the limitations that the child has.

#### 3) Intracase Analysis of Subject YG (Maternal Parenting Pattern)

From the results of interviews conducted with subject YG, informant AR and informant AC, subject YG tries to accompany the child in his daily life, however, because subject YG works, the child spends more time with his parents and uncle. Currently the child of the YG subject also spends time at YPAC. Even so, the child is used to getting special treatment from the people in his house. It is the people in the house who pamper the child too much so that the child finds it difficult to be independent. In providing care to the child, YG subjects are quite rare in teaching independence to the child. Actually, subject YG realized that he and the people at home were pampering their child too much. Subject YG also explained that one of the appropriate parenting styles for the child's condition is how we as parents can let the child explore himself with the surrounding environment without limiting his activities.

The child's independence is currently still far from optimal. Even the child's independence is still at a low level. This is because parenting that is too pampering makes it difficult for the child to be independent. The child's independence needs to be developed further, considering that currently the child is still young enough to practice his independence. The child's emotional independence is still unstable and sometimes the child becomes moody, for this reason efforts are still needed to control the child's emotions. The child's behavioral independence is also not fully optimal, in fact the child has only trained his independence a little so far. The child's independence value still needs to be optimized considering that the child gets quite a lot of special treatment and tends to be pampered by his family.

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#### **Intercase Analysis**

From the results of interviews conducted with subject FS, subject RG and subject YG, it can be explained that apart from being a mother, each subject can also act as a companion (as Aids), resource (as Resourches), advocate, teacher (as Teacher) and diagnostician, however, of the five roles, each subject has a different dominant role. The FS subject has a dominant role as a companion (as Aids) and as a teacher (as Teacher), this is because the FS subject is very close to the child, the FS subject will always try to accompany his child in the midst of his busy life. So far, the FS subject has also provided quite a lot of teaching to the child to train his independence. The RG subject has a dominant role as an advocate, this is because with the child's abilities, the RG subject wants the child to be able to maximize it. The focus of the RG subject so far is to make the child a child who is useful to others by maximizing the abilities he has, even if he has to send him to school abroad. The YG subject has a dominant role as a diagnostician, this is because the YG subject will try to fulfill all the needs both in general and in particular that are needed by the child, if that is what is best for the child however, of the three subjects they all have a role, which is not very dominant, namely as a source (as Resources), this is because the three subjects work together so that the three subjects are less than optimal in their role as sources (as Resources) for their children.

In terms of independence, the three subjects can equally shape the child's independence both in terms of emotions, behavior and values. The same thing with parenting styles, children from the three subjects also have different dominant forms of independence. Children of FS subjects have a dominant form of independence, namely behavioral independence, this is due to the most dominant role of FS subjects, one of which is as a teacher who teaches the child to practice his independent attitude. FS subjects will try as much as possible to maximize the child's independence. Children from RG subjects have a dominant form of independence, namely emotional and behavioral independence, this is because so far the child has been able to reduce his emotional instability, the child's behavior has so far been quite normal compared to other CP children so that the child does not need a lot of help in carrying out activities. Subject YG's child does not yet have the most dominant form of independence, this is because until now the child is still treated specially by the people around him in the sense that the child is still too pampered in any way. That is why the child does not yet have the ability to behave independently.

#### **CONCLUSIONS**

Based on the results of this research, it was concluded that each subject was able to play the five roles, however, among the five parenting patterns, there were parenting patterns that were the most dominant and those that were not dominant for each subject.

The first subject named FS has the most dominant parenting style, namely as a teacher and companion, this is because the FS subject teaches the child more behaviors that build independence, even though they tend to be repeated continuously. Apart from that, the subject's most dominant role is as a companion because the child is closer to the FS subject than his father. Subject FS also played more of a role in parenting than his father. The least

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dominant parenting style is as an advocate. This is because, so far, the appropriate education according to the FS subject is at YPAC, so the FS subject is currently only focused on sending their child to school at YPAC.

The second subject named RG has the most dominant parenting style, namely as an advocate. This is because the subject will do anything so that the child can get an education that can help maximize his abilities. The least dominant parenting style is diagnostic. This is because, so far there are not many special needs that must be met by RG subjects for the child. The child's physical condition is still considered normal compared to other CP children.

The third subject named YG has the most dominant parenting style, namely as a diagnostician. This is because the YG subject is trying to meet the special needs of the child, starting from tools to make it easier for him to carry out his activities to general needs such as pampers, strollers and so on. The least dominant parenting style is as a teacher. This is because currently there are not many things taught by YG subjects to shape the child's independence. Apart from that, it is also supported by the parenting style of people at home who pamper the child too much, so that the child will find it difficult to implement independence within himself. Subject YG also felt that because the child was still quite young, it was not yet time to teach the child independence.

The child of the first subject named FS has the most dominant independence, namely behavioral independence. This is because the child's behavior is now starting to move towards independence because it is inseparable from the mother's role in teaching the child independent behavior, which has had much more intensity during this time. Apart from that, the independence that is least dominant in the child is value independence. This is because so far, the child has not been able to maximize his right to have an opinion or choose.

The child of the second subject named RG has the most dominant independence, namely emotional and behavioral independence. This is because, currently the child's emotions are much better than before. In the past, the child was famous for his excessive moodiness, but now he has been able to reduce this moodiness. Apart from that, the most dominant independence is behavioral independence due to demands from teachers and parents who want the child to be independent which makes big changes to the child's behavioral independence. Apart from that, the independence that is least dominant in the child is value independence. This is because the child's ability to think and judge things is still not optimal.

The child of the third subject named YG does not yet have the most dominant independence in the sense of balance. These three types of independence are not yet within the child so maximum teaching is still needed to form the child's independence. This is due to a lack of support from family or those closest to them in forming the child's independence.

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