

## Lived Experiences of Parents of Learners with Special Educational Needs (LSEs) in Kasiglahan Village Elementary School

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**Received:** 10 December 2021  
**Available Online:** 9 March 2022

**Revised:** 18 February 2022

**Accepted:** 28 February 2022

**Volume I (2022), Issue 1, Online ISSN: 2945-3577**

### Abstract

**Aim:** This study aimed to understand and depict the lived experiences of parents of Learners with Special Educational Needs (LSEs) in Kasiglahan Village Elementary School.

**Methodology:** A qualitative research methodology was used to gain a better understanding of the lived experiences of parents. Specifically, a phenomenological approach was used to collect rich and in-depth information through a one-on-one interview with six (6) parents in KVES who were selected via purposive sampling technique.

**Results:** Based on the findings of the study, the following results were drawn: 1) The challenges faced by the parents in terms of financial expenditures are maintenance medicines, vitamins, therapy, and doctor's check-up; 2) The coping mechanisms of parents from the challenges are internet surfing, reading books, doctor's advice, a therapist's advice, and learned experience; 3) The social supports available for the parents are support from family members, support from relatives, support from friends, support from neighbors, support from local government, and support from organizations; and 4) The hopes and dreams of parents for their children are to become independent, to finish studies, to get a job, to find a lover, and to build their own family.

**Conclusion:** The results showed that these parents' primary challenge in parenting learners with special educational needs revolves around the financial aspects. Parents indicated different coping mechanisms to overcome different challenges. Despite the struggles, all of them are receiving social support from the community. Parents visualized diverse hopes and dreams for their children.

**Keywords:** Learner's with Special Educational Needs, Parenting, Social Support, Coping Mechanism

### INTRODUCTION

Parenting is a challenging task under any circumstances. However, when a child is born or diagnosed with special needs, parents or their primary caregivers can face even more unexpected challenges (Ding et al., 2010). There is a need for parents of Learners with Special Educational Needs (LSEs) to be represented in the literature as it may give other struggling parents the knowledge that they are not alone in their experiences and challenges. It will provide empowerment and advocacy to other parents. Oftentimes, families and others who care for these children also experience a lack of support as they struggle to care for their children and themselves with limited resources (Bingham, 2017). Parents from first-world countries have the advantage of various special education institutions and experts, therefore having the opportunity for support (Anderson, 2007). However, the Philippines being a third-world country, there is no vast amount of special education specialists as well as institutions. The site of the study, which is Kasiglahan Village, is a suburban community. The practice and policies of special education have a lack of supervision from the experts.

*Challenges in Parenting Children with Special Needs.* The daily challenges faced by the parents included: physical, emotional, and monetary stress

(Ekas et al., 2010). Jackson (2004) added different challenges faced by parents of Learners with Special Educational Needs (LSEs) such as (a) initial diagnosis; (b) identities and roles; (c) caregiving; (d) level of disability; (e) availability of necessary services; (f) education; (g) financial stresses; (h) decisions about guardianship; and (i) family functioning and relationships. Many children distressed by impairments are incapable of doing things on their own that are stereotypically taken for granted, such as bathing, dressing, eating, moving, following directions, and communicating (Dardas & Ahmad, 2015). The availability and access to necessary services are challenging factors in parenting Learners with Special Educational Needs. Standard services needed by parents include respite care, occupational therapy, physical therapy, speech therapy, and educational and recreational services (Rocque, 2010). Particular diets, equipment, medical care, and special transportation are everyday expenses among children with special needs (Tucker, 2009). Parents also find themselves concerned about their child's future well-being after they die, especially those whose children are unable to live independently (Sencar, 2008).

*Coping Mechanisms of Parents to the Challenges in Parenting Children with Special Needs.*

Parenting for Learners with Special Educational Needs (LSEs) is a life-long commitment and necessitates excellent time and resources from the family. Families must learn to cope and adapt to everyday activities that require physical, emotional, social, and financial resources that are always available (Siller et al., 2013). Families repetitively acquired and relied on extended family members and close friends for support and as a method of coping (Tway et al., 2007). Using extended family members, maintaining a positive outlook, reframing, seeking advice from families in similar situations, and inquiring about family doctors were all identified and used as active coping strategies (Montes & Holterman, 2007). In addition, passive coping strategies such as watching television were identified approaches to lessen the stress of the families (Montes & Holterman, 2007). The most used coping strategies were the use of treatment services and support from family (Gray, 2006). Overall, as seen in the literature, the mainstream of the families feel that they are successful in coping, and parents show incredible strengths and adaptation when living with Learners with Special Educational Needs (LSEs).

*Social Supports to Parents of Children with Special Needs.* Parental stress from caring for a child with special needs is frequently lowered once the parents receive social support from other relatives and close friends (Lyons et al., 2010). After being provided with social support systems, mothers knew that they were not alone, and they felt a slight sense of relief (Rocque, 2010). The social support theory suggests that families of Learners with Special Educational Needs (LSEs) need to have social support from family, peers, and the wider community to assure that child's necessities are met, in addition to the necessities of the parents (Sencar, 2008).

Receiving social support resources is substantial in decreasing the stress levels for the caregivers (Unluer, 2009). These resources include other family members, neighbors, peers, colleagues, professionals, and the wider community (Kaner, 2009). Social support is classified as informal support or formal support. Formal social supports are reinforcement from professionals in special education, while informal support is given by relatives or friends who are a part of a family's daily life (Tucker, 2009). Researchers reported that informal support is more effective than formal support for protection against negative stress (Boyd et al., 2012). Support from relatives and friends is good emotional support for caregivers, and formal support from professionals is crucial, as it showed exactly what the caregivers and parents are required to do to guarantee proper parenting and caring for Learners with Special Educational Needs (Brown et al., 2009).

When caregivers of Learners with Special Educational Needs (LSEs) were given the essential support, they felt a sense of relief, discerning that

someone was there for them (Tucker, 2009). There are four types of social support. First, emotional support is when other individuals offer empathy, concern, and affection to parents. This permits parents to know that they are valued. Second, tangible support involves the establishment of financial assistance, material goods, and services. Third, informational support involves others providing advice, guidance, and suggestions. Lastly, compassionate support involves others making the distressed individual feel a sense of belongingness (Wills, 1991).

*Hopes and Dreams of Parents for their Child with Special Needs.* Fear of the future is a significant concern found in the literature experienced by parents of Learners with Special Educational Needs (Miller & Reynolds, 2009). In the final transition from elementary to high school, there were a concentrated increase in caregiving, and parents became increasingly worried about the future of their child (Hoogsteen, 2010). The transition to adulthood and the likelihood of independent living were the greatest concerns of parents (Tucker, 2009). Moreover, parents conveyed feelings of apprehension over their child's "social survival," deliberating if their child will fit in or whether their child will fall into despair or depression. Fears of parents were associated with independent living, finding a partner, concerns about the child being victimized by others, and skill insufficiencies by their child in areas such as reading, writing, and communicating (Tucker, 2009). Overall, parental concerns regarding the future of their child with disabilities are documented in the literature.

### **Objective**

This study determined the lived experiences of parents of Learners with Special Educational Needs (LSEs) in Kasiglahan Village Elementary School.

Specifically, it answered the following questions:

1. What are the challenges faced by parents of Learners with Special Educational Needs?
2. How do the parents cope with the challenges of parenting Learners with Special Educational Needs?
3. What are the available social supports for the families of Learners with Special Educational Needs?
4. What are the hopes and dreams of the parents for their child?

### **METHODS**

#### **Research Design**

The phenomenological research design was used to gain rich and in-depth information from the parents of Learners with Special Educational Needs (LSEs). A phenomenologist relies heavily on interviewing rather than observing the participants (McCaslin & Wilson Scott, 2003). Most interviews are in-depth because they are often detailed and

descriptive. The use of video recording devices is very common because they permit the capturing of all the details. The aim is to gain an understanding of the phenomenon through the consciousness of the participants. The major thrust of phenomenological research is to question what a phenomenon is really like or what it is like to experience the phenomenon.

This phenomenological study was conducted to understand and describe the meanings of the lived experiences of parents of Learners with Special Educational Needs (LSEs). The parents in Kasiglahan Village were interviewed using open-ended questions based on their experiences as primary caregivers to Learners with Special Educational Needs (LSEs). Phenomenological research depends upon the participant's ability to articulate vividly and with some depth his or her experiences about the phenomenon under study.

### Population and Sampling

Creswell (2007) states that in the phenomenological study, the participant may be located at single or multiple sites based on: accessibility, rapport, and willingness to participate. In this study, the locale is only one site. The study was conducted at Kasiglahan Village Elementary School; it is located in Montalban, Rizal, Philippines.

The participants in any phenomenological study are recruited from a population living the experience of the phenomenon being studied (Parse et al., 1985). The participants in this study were recruited from a group of parents of Learners with Special Educational Needs (LSEs) in Kasiglahan Village. Parse (1990) was more specific about participant selection when she suggested that 2 to 10 participants is an adequate number for a phenomenological study when data redundancy is sought.

The researchers employed a purposive or judgmental sampling technique through which they intentionally selected six (6) parents of Learners with Special Educational Needs (LSEs) in Kasiglahan Village. The inclusion criterion for the parents includes: 1.) must be the child's biological parent, 2.) must be a primary caregiver of the child, 3.) the child must have a diagnosis and assessment as a learner with special needs, 4.) the child must be between the ages of 5-12 years old, 5.) the parent must be able to understand the English language, 6.) the parent must be residing at Kasiglahan Village, and 7.) the parent must voluntarily sign the informed consent form for research participation. In this study, the participants all have experienced the exact phenomenon of parenting of a learner with special needs.

The researchers screened each parent to ensure they met the criteria. Parents who met the inclusion criteria were given a consent form to review. The form was reviewed, questions were answered, and the consent was signed on the day of the interview. The consent form outlined the goals and

method of this study. It stated that there were no incentives, and they could withdraw at any time from the study. The interviews were held face-to-face at a mutually agreed upon location that can ensure privacy.

As to limitations, the demographics of the parent-participants are a very homogenous group. They belong to one classroom section. They are all living in sub-urban, and socio-economic statuses are under lower or middle brackets income. These factors may limit the representation of multiple viewpoints.

### Instrumentation

Multiple source triangulation was used, such as interview transcriptions (Interview Guide), observation (Observation Protocol), and documents (Document Analysis) from participating parents of Learners with Special Educational Needs.

*The Interview Protocol.* It consists of four (4) central questions that were supported by follow-up or probing questions that lead to a description and understanding of the lived experiences of parents of Learners with Special Educational Needs (LSEs) in Kasiglahan Village. The interview protocol was developed from the researchers' initial interview with the parents and from the literature review and findings based on research regarding the parents' lived experiences. After the interview, the language expert translated the Filipino interview transcriptions to English.

*The Observation Protocol.* The content of the observation protocol is the participant's name, site, date, time, and length of activity in minutes. There is also a table provided for descriptive and reflective notes.

*Construction and Validation of the Interview Protocol.* To validate the research instrument, a series of consultations were done with the experts in special education, language, and research. Their comments and corrections were incorporated in the final draft of the interview protocol. The interview protocol was designed to determine the lived experiences of the parents of Learners with Special Educational Needs (LSEs).

*Conducting the Observation.* The researchers conducted the observation while interviewing the parents, wherein the researchers are participant-observers. The participant-observer role gives the researchers the privilege to participate, interact and observe the participants of the study.

*Analyzing Documents/ Artifacts.* The researchers analyzed the assessment reports and Individualized Educational Plan (IEP) of the child. Then, the researchers scrutinized the documents and compared them to the findings of interviews and observation.

### Ethical Consideration

The ethical consideration centered on the conditions portrayed solely from the participants' experiences, interactions, and actions observed. The

researchers sought permission from the school principal. The content of the interview guide was validated by experts in the field of special education, language, and research. The researchers also provided an agreement that included obtaining informed consent, ensuring confidentiality, time and place commitments, permission to record, and detailing the ethical principles of research. The researchers reported authentic findings and conclusions.

### Data Collection

In gathering the appropriate data for the study, a one-on-one interview was used. The one-on-one interview is a type of interview that has developed as one of the most familiar strategies in collecting qualitative data. An interview is a qualitative method of inquiry that merges a predetermined set of open questions with the privilege for the researchers to explore particular responses further and is used to understand the real-life experiences of the parents of Learners with Special Educational Needs (LSEs). It also allows researchers and participants to ask follow-up questions for clarification. Researchers used video recordings, note-taking, and dialogic form interviews to reach more profound responses of the participants.

### Data Analysis

Once data collection was completed, the analysis was conducted. The interview transcripts were transcribed verbatim, and each participant was assigned a code, such as Parent 1, Parent 2, and so on.

The data were analyzed using the phenomenological framework of Moustakas (1994) as reformed by Creswell (2007). First, the researchers went through bracketing, the first step to consider in which they set aside all preconceived thoughts and experiences they had to understand best the experiences of the participating parents of Learners with Special Educational Needs (LSEs). After conducting interviews, the researchers performed horizontalization, by which they built data considering the central questions and probing questions in the interview guide. This was done by going through the data of the interview transcriptions, and highlighting significant statements, which were sentences or quotes that provided an understanding of how the participants manifested and developed their lived experiences as a parent of Learners with Special Educational Needs (LSEs). Then the researchers developed clusters of meaning from these significant statements into themes and then used them to write a textual description of the participants' lived experience. They also used these significant statements to describe the context or setting that influenced how the participants experienced the phenomenon.

## RESULTS and DISCUSSION

### Challenges faced by parents of Learners with Special Educational Needs

Table 1: Individual Interview about the challenges faced by the Parents of Learners with Special Educational Needs (LSEs) - Financial Expenditures

Theme	Verbal Transcription	Coding
Challenges faced by Parents of Children with Special Needs - Financial Expenditures	"Our entire budget was spent on him. He has no maintenance medicine. We are also spending money during his check-up and therapy. He failed to attend speech therapy due to lack of money that is why he cannot speak." -Parent 1	MAINTENANCE MEDICINES
	"Aside from his basic needs, vitamins are the only thing that I am spending for him. Regarding his assessment, the Doctor is not telling when to go back. So we go to the hospital whenever we want." -Parent 2	VITAMINS
	"There is no prescribed medicine for him, but I always have Ritalin, which is his medicine to make him calm. He stopped in attending therapy sessions, but before we are attending twice a week." -Parent 3	
	"My child has no maintenance medicine. However, he is taking his vitamins regularly. He has therapy twice a week. His occupational and speech therapy is synchronized. The therapists are teaching us some activities to do at home." -Parent 4	THERAPY
	"She has a daily medicine to avoid her seizure. She also has her vitamins, and we do regular check-ups." -Parent 5	DOCTOR'S CHECK-UP
	"We go to the Doctor for check-up, twice a year. That is 200 pesos per check-up." -Parent 6	

Based on their responses, the challenges of parents of Learners with Special Educational Needs (LSEs) in terms of financial expenditures are as follows: 1) maintenance medicines 2) vitamins 3) therapy 4) doctor's check-up. These words had essence and nature defined by the informants. It was found that among the experiences of the informants, the most common among them is Doctor's check-up because the Doctor's certificate is the pass to acquire other services like special education and other therapy sessions. As also revealed by the informants, when the Doctor's advice was followed, the improvement of the child was very evident.

According to Parent 1, check-ups and therapy consume much money. She added that "If you wanted free therapy, you need to travel a distant". That is why Parent 1 decided to stop the therapy of his son due to a lack of budget. She was affirmative when she expressed her statements. On the other hand, Parent 2 is concerned only with the vitamins of his son, and going to the hospital is not regular. Parent 2 is calm and comfortable while sharing his experience. According to Parent 3, his son has a maintenance medicine, and the child also stops attending therapy due to a lack of budget. She responded slowly to the questions, and there was a regretful tone in her voice while saying that "He has maintenance medicine, and he needs to attend therapy". As shared by Parent 4, her son regularly takes his vitamins, and the therapy sessions are also attended twice a week. Parent 4 exudes a positive aura, and she is confident and sincere while sharing her experience. Accordingly, Parent 5 emphasized that her daughter has a maintenance medicine for her seizure, is taking vitamins, and regularly visits the Doctor for a check-up. Her body language seems so hesitant to disclose personal information, but still, she managed to sincerely express herself when the interviewer showed his interest in her lived experience. Moreover, Parent 6 revealed that a doctor's check-up twice a year was her financial challenge as a parent of Learners with Special Educational Needs (LSEs). At first, parent 6 is quite shy, but she managed to tell all she wanted to share. The participants' answers were verified through scrutinizing their Doctor's assessment, Doctor's prescription, therapist's notes, and pupils' educational programs.

Similar to the research findings of Ekas et al. (2010), stating that daily challenges faced by parents included monetary stress. The notion is also supported by the study of Jackson (2004), emphasizing that the challenges faced by the parents of learners with special educational needs include the availability of services and financial stresses. The study of Rocque (2010) supported the findings of the current study by implying that access to necessary SPED services is a challenging factor in parenting learners with special educational needs.

### On how parents cope with the challenges of parenting Learners with Special Educational Needs

Table 2: Individual Interview about the coping mechanisms of the Parents of Learners with Special Educational Needs (LSEs)

Theme	Verbal Transcription	Coding
Coping Mechanisms of the Parents of Children with Special needs	"I never had a chance to surf on the internet. The doctors told us what to do with our child. They have a lot of programs there. Some of my strategies, I learned it through experience." -Parent 1	INTERNET

	"The Doctor is the one who is giving me advises on how to discipline my child. I also learned from my experiences, and I can perceive the strategies that are effective in disciplining him." -Parent 2	SURFING
	"I am searching on the internet; I also have an ADHD book. I always read for me to understand him more. The Doctor told me to give the child what he wants and to tour him in zoos and parks. Sometimes, I am ignoring him, and after that he will stop his tantrums, then everything seems all right, as if nothing happens." -Parent 3	READING BOOKS
	"The Doctor is teaching us how to treat my child, Jerome has younger brother, and I treat them equally. His speech therapist advised me to teach Jerome in front of the mirror, so that he could see the movements of my mouth. There are times when he wants to study, so I need to teach him. There were times that he is not in his mood to study, and then I was not forcing him. I need the right timing to teach him." -Parent 4	DOCTOR'S ADVISE
	"The Doctor told me always to teach what is right. The Doctor also told me to give my daughter nutritious foods." -Parent 5	THERAPIST'S ADVISE
	"I can communicate to him through invented sign language. I had never attended any seminar." -Parent 6	LEARNED EXPERIENCES

Based on the parents' responses, their coping mechanisms are as follows: 1) internet surfing 2) reading books 3) Doctor's advice 4) Therapist's advice 5) learned experiences. It was found out that among the parents' experiences, the most common among them is the Doctor's advice.

According to Parent 1 and Parent 2, Doctor's advice and learned experiences are their coping mechanisms. They do not have the proper background in handling children with special needs, so they heavily relied on the Doctor's advice. Through following the Doctor's instructions, parents also learned their strategies in handling the challenging behaviors of their child. Parent 1 is confident with her answers because she exemplified her long-time experience in handling her son. On the other hand, parent 2 is unsure of his answers because he still cannot handle his son's behavior properly. Furthermore, Parent 3 has two unique answers, and

she said that she is searching on the internet and reading books, and she also learned a lot from her experiences. The world of the internet and books offers much information about children with special needs. Parent 3 is confident in answering the question; she quickly responds after hearing the question. On the other hand, Parent 4 said that the Doctor's advice, the Therapist's advice, and learned experiences are her coping mechanisms; their advice somehow eases the challenges of parenting children with special needs. Parent 4 is assertive in sharing her answers; she explained her experience while her eyes were sparkling with ease and contentment. Parent 5 said that Doctor's advice is her coping mechanism, the programs that the Doctors have given them are helpful. She answered the question hesitantly; it seemed that she could not compose the right words she wanted to say. Lastly, Parent 6 expressed that it is solely her learned experiences are her coping mechanisms; they do not have the chance to seek advice from other professionals. Parent 6 is reasonably reluctant in answering the questions; because she heavily relied on her first-hand experience. The participants' answers were cross-checked through member checking. Strict confirmation over the phone was conducted to make sure that the researchers' interpretations of participants' answers, beliefs, and perspectives were accurately portrayed.

Research findings are similar to the study conducted by Montes and Holterman (2007), confirming that family doctors were identified and frequently used as active coping strategies. Furthermore, Montes and Holterman (2007) also found out that using multimedia platforms were also identified approaches to lessen the stress of the parents or families; however, it is a passive coping strategy.

### Available social supports for the families of Learners with Special Educational Needs

Table 3: Individual Interview about the available social supports for Families of Learners with Special Educational Needs (LSEs)

Theme	Verbal Transcription	Coding
Available Social Supports for Families of Children with Special Needs	"My son is the one who is supporting me. Some of my friends are giving me advice; my friends are also parents of children with special needs. I cannot let my neighbors take care of him. Though, he is always with me wherever I go. The local government is a big help for us. In Makati, there is free hospital assistance and free medicine because we have a yellow card. I am a member of an organization, the name of the organization is SAMAKAPA, which means Samahan ng Magulang at Anak na may Kapansanan." -	SUPPORT FROM FAMILY MEMBERS

Parent 1	"Sometimes my relatives give me help, but that is very rare. My friends told me that my child needs regular therapy. When Kurt escapes, the barangay men were the ones who always helped us to find him. I am a member of an organization, the name of the organization is Unbound Foundation, and they are giving me money or groceries." -Parent 2	SUPPORT FROM RELATIVES
	"My friends give me some advice. My neighbors also make some adjustments; whenever my child tends to hurt other kids, they can understand my child that it is not his intention to hurt others. I am now filing a membership application to CDP or Child Development Program." - Parent 3	SUPPORT FROM FRIENDS
	"My friends give me some advice, like do not treat your child as special, treat him as if he is normal. Sometimes when the need arises, my neighbors took care for my child." -Parent 4	SUPPORT FROM NEIGHBORS
	"My relatives advised me to take care of my child so that she will think that she is loved. My relatives sometimes give me some monetary support. My friends told me to accept our children about their condition. When my child is in the hospital and undergoing some operations, the municipal office gives us three thousand pesos. I am also a member of 4P's." - Parent 5	SUPPORT FROM LOCAL GOVERNMENT
	"Sometimes, my brother gives me monetary support. Sometimes my mother-in-law also supports us. My friends teach me some sign language. My neighbors can take care of him." -Parent 6	SUPPORT FROM ORGANIZATIONS

In this study, the responses of the participants regarding social support to families are as follows: 1) support from family members 2) support from relatives 3) support from friends 4) support from neighbors 5) support from local government 6) support from organizations. The most common is the support from family members and friends. It is not verbatim in their statements, but in the previous questions, they revealed that 5 of them are full-time caregivers of their child, meaning to say it is their partner or their son is the one working to finance their needs.

According to Parent 1, her son, friends, relatives, neighbors, local government, and organizations supported her journey as a parent. She confidently expressed that she is one of the eldest members in terms of age and length in the organization she belonged. On the other hand, Parent 2 said that he rarely receives support from his relatives. His son has a tendency to escape, and the child was lost so many times, whenever they needed to find the child, he asked for the assistance of barangay officials. Parent 2 is relatively shy because he is on his own bringing up his child. The friends and neighbors of Parent 3 extend their help and understanding whenever her child hurts his playmates and classmates. She is now filing a membership application to CDP or Child Development Program. Even though Parent 3 is a newbie in the world of special education parenthood, she is confident that she will find her way to becoming an active advocate for her child. Furthermore, Parent 4 gets some advice from her friends to treat her child as expected. Sometimes when the need arose, her neighbors took care of her child. The relatives of Parent 5 advised her on becoming a hands-on parent so that her child will feel that she is loved, which is very vital to one's developmental process. Lastly, Parent 6 received monetary support from her family; her friends taught her sign language.

The study of Lysons et al. (2010) affirmed the findings of the current study, concluding that social support from relatives and friends can lower the stress of parenting learners with special educational needs. Likewise, Tucker (2009) accentuated that formal support coming from professionals and informal support coming from friends and families is both effective in decreasing the stress levels of the parents.

### Hopes and dreams of the parents for their child

Table 4: Individual Interview about the Hopes and Dreams of the Parents for their Child

Theme	Verbal Transcription	Coding
Hopes and Dreams of Parents of Children with Special Needs	"Yes, I am looking forward that he can be independent. As of the moment, I am still teaching him. Nevertheless, he can use the comfort room, can take a bath, can dress, and can eat all alone. The problem is, he always stays at home. He only gets outside when he is about to go to school. My dream for him is to take away his hyperactivity. I think he can work at the restaurant because in his school he can do table setting. I think he cannot find a lover because it is hard for him to look for work and he is disabled." -Parent 1	TO BECOME INDEPENDENT
	"Yes, I hope that someday he can be independent. I do not think if he can find a job and	TO FINISH STUDIES

find a lover." -Parent 2	TO GET A JOB
"Yes, I think he can be independent someday. Right now, he can groom himself. He can buy mineral water. He can count the change to him. So, I think he can be independent. He is good in school; the only problem is his reading skills. He said he wanted to become a soldier. He is attracted to some girls. I am not sure if he can find a lover, but we are always here to support him." -Parent 3	TO FIND A LOVER
"I want him to become independent. Moreover, I know that he can be independent. I want him to finish his studies until college. I think he can find a lover. Boys will be boys. But he will be having a hard time in finding his lover." - Parent 4	TO BUILD THEIR OWN FAMILY
"I want her to become independent. However, I doubt if she can be independent because she is too dependent on me. Though, I am teaching her to dress and undress. I am teaching her to eat on her own. She is childish. Right now, she is here in SPED department, and I do not know what is next for her. I do not know if she can get a job soon. If her actions changes, maybe there is a chance that she will find a lover, because, at first sight, she looks normal." - Parent 5	
"Yes, I know that he can be independent. I can let him stay at home on his own, he knows what to do. He is still in the process of learning some sign language, but I know he can finish his studies. He is enjoying his studies, and his hobby is drawing. I think he can be an architect because he loves drawing the things around him. I think he can find a lover soon." -Parent 6	

Based on the parents' responses, their hopes and dreams for their child are as follows: 1) to become independent 2) to finish studies 3) to get a job 4) to find a lover 5) to build their own family. The most common answer is to become independent. Most of them did not see their child finishing their studies and building their own family since they had already accepted the condition of their children.

According to Parent 1, she hopes that her child can be independent and get a job. She is very emotional and regretful about the situation of his son. She firmly expressed that if she only had the resources for the therapies of her son, maybe his son would be on better well-being at the moment. Parent

2 is also looking forward that his son will be independent someday; however, he is doubtful if his son will finish his studies, can get a job, and find a lover. Parent 2 explained that the condition of his son is neurological, so his son's development is stagnant. He answered the questions right away without a doubt; he fully accepted his child's condition. Parent 3 hopes that her child can be independent, as it shows much development in grooming skills. She hopes that her son can achieve his dream to become a soldier. She is full of hopes and enthusiasm while saying her answers. Accordingly, Parent 4 also wants her child to become independent. She also claimed that her child could do it. Parent 4 is also optimistic that her son can finish college and find a lover. Nevertheless, she also recognizes that it would not be an easy journey for his child. Parent 5 also wants her child to become independent; along with this dream is her doubt if her daughter can do it. Finishing studies, getting a job, and finding a lover is also an uncertain dream for Parent 5. Since the son of Parent 6 is a child with deafness, she responded positively regarding the dreams and hopes for her child. She assures that her son can live independently, can finish studies, can find a job, and can build his own family.

The result agrees with the research findings of Hoogsteen (2010); the study found out that their parent-participants were worried about the future of their child regarding independent living, so they hoped that their child could develop their independent living skills. Furthermore, Tucker (2009) discovered that the primary concern of the parents over their child is "social survival" parents are hoping that their child could overcome the insufficiencies in independent living and finding a life partner.

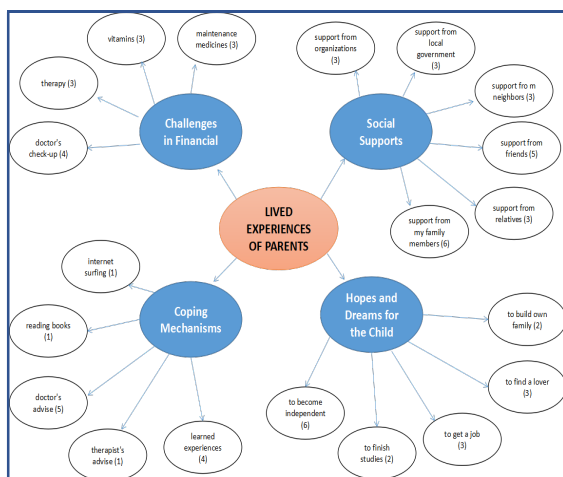


Figure 1: Map of the Participants' Responses

Figure 1 shows the theme of each question (in light blue) directed to the lived experience of parents and the themes of responses (in white) obtained upon interviewing. Numbers in parenthesis indicate the frequency of responses.

### Conclusion

Based on the results of the study, the following conclusions are drawn:

Parenting Learners with Special Educational Needs (LSEs) was expressed as rewarding and challenging. The challenges faced by the parents in terms of financial expenditures are as follows: 1) maintenance medicines 2) vitamins 3) therapy 4) doctor's check-up.

In this study, the coping mechanisms of parents of Learners with Special Educational Needs (LSEs) are as follows: 1) internet surfing, 2) reading books, 3) Doctor's advice, 4) Therapist's advice, 5) learned experiences.

The social supports available for the parents of Learners with Special Educational Needs (LSEs) are as follows: 1) support from family members 2) support from relatives 3) support from friends 4) support from neighbors 5) support from local government 6) support from organizations.

The hopes and dreams of parents of Learners with Special Educational Needs (LSEs) are as follows: 1) to become independent, 2) to finish studies, 3) to get a job, 4) to find a lover, 5) to build their own family.

The results showed that these parents' primary challenge in parenting learners with special educational needs revolves around the financial aspects. Parents indicated different coping mechanisms to overcome different challenges. Despite all the struggles, all of them are receiving social support from the community. Parents visualized diverse hopes and dreams for their children.

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