

Social Support in relation to Self-Efficacy and Loneliness among Mothers of Children with Special Needs

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Abstract:

The present study aimed to explore the extent to which social support influences Self-efficacy and loneliness among mothers of children with special needs. The sample for the study was a randomly chosen one consisted 193 mothers of Children with Special Needs. The data were collected using Multidimensional Scale of Perceived Social Support (MSPSS), General Self-Efficacy Scale and (UCLA) Loneliness Scale. The data were subjected to statistical analysis using Pearson Product Moment Correlation. The study concludes that social support has a decisive role in increasing self- efficacy and reducing loneliness among the mothers.

Key words: Social Support, Self-Efficacy and Loneliness.

A child is special in his or her own way for every parent. They want their child to be perfect in always. The birth of a baby with an impairment can have profound effects on their parents and also for the entire family. The first response of the parents to a child with defects is guiltiness and confusion. The crisis aroused by the first declaration or diagnosis that their child has something wrong is apparently the parent's most painful and dreadful experience.

Changes in style of living are necessary in order to maintain the best care for a child, which have powerful effects on family functioning. The hardships faced by parents dealing with a disability of his/her child and their family relationships have been indicated as a source of anxiety, overprotection, rigidity (Lardieri, L. A., Blacher, J., & Swanson, H. L., 2000). Parents of children with special needs experience greater stress and a larger number of parenting challenges, such as more health issues, greater feelings of confinements, and higher levels of parental dejection than parents having normal children. Some families experience hardships in financial support or claimed on ineffectual support, others had the feeling of lack of synchronisation between different agencies, social departments and accredited workers (Freedman and Boyer, 2000).

Magana and Smith (2006) observed that there is an important association between children's impairment and parent physical health and it may be because of the heavy caregiving burden. Caring for disabled child for their daily activities as well as the lack of time to take care of one's own health may take a certain role on parent physical health Smith, L. E., Greenberg, J. S., & Seltzer, M. M. (2009) suggests that compared to parents of normal children, parents of children with a disability or impairment show different patterns of cortisol expression the whole day.

There is a series of ongoing social adjustments which they have to make, beginning with the immediate family, relatives and then extending to the wider social circle of friends and school. One of the most crucial factors that challenge the parents of special children is the stigma they face. One of the greatest protective factors that allow people to deal with almost any crisis, whether physical, psychological, social, and financial or any other, is undoubtedly social support. Cohen and Wills (1985) found that social support contributes directly as well as through a process of protecting the person against some effects of stressful events.

Birch (1998) claims that there are four types of social support that are fundamental to gaining the support that one is ultimately looking for. There is emotional support, informational support, material support and appraisal support. Emotional support is the offering of care or sympathy - just listening to someone or just being available to them. Informational support is the sharing of knowledge and telling people where to go to look up critical information. Material support is providing money or other assistance and appraisal support is providing feedback, praise or suggestions. Scherer (2002) says that social support comes in many forms ranging from the expression of positive affect between people, social reinforcement, giving of the actual or symbolic aid of some kind, or providing guidance or information. Social support is a huge component when it comes to coping and dealing with a child with special needs.

Albert Bandura (1982) defined the term self-efficacy as the perception of one's ability to competently perform a task. He believed that self-efficacy would directly affect behaviour and individuals with high self-efficacy will be more likely to persist at difficult tasks. Self-efficacy was more predictive of future success and failure than the person's actual capability because a person's beliefs help determine what that individual does with their knowledge and skills (Bandura, 1986).

Parenting self-efficacy is defined as the beliefs or judgments about one's ability to be successful in the role of a parent (Hess, Teti, & Hussey-Gardner, 2004). One way a person develops parenting self-efficacy is through perceived success or father failure at a parenting task (Goodnow, 1988). Parents also learn about parenting self-efficacy through their own childhood experiences with their parents (Grusec, Hastings, & Mammone, 1994; Deutsche, Ruble, Fleming, Brooks-Gun, & Stangor, 1988). According to Bandura's model, parents who possess a high sense of parenting self-efficacy believe they have the skills and qualities necessary to have a positive influence on their children's behaviour and development and will persist in difficult parenting situations. Parents with low parenting self-efficacy are at risk for experiencing anxiety, depression, stress, and have poorer outcomes for their children in therapy. Parents of children with disabilities may face unique challenges in regards to developing parenting self-efficacy (Shapiro 1983; Hastings & Brown, 2002). Parenting a child with any type of disability adds additional challenges of expense, time, adaptations, and less time for other relationships. A child's disability impacts parents' level of stress and the entire family system (Holroyd & McArthur, 1976). Children with disabilities respond differently to typical parenting strategies and often exhibit difficult problem behaviour. If children exhibit challenging behaviour parents may experience more perceived failure and thus have lower parenting self-efficacy.

Ertem (2012) report that the most frequent problems experienced by parents of children with disability were sadness, anger and loneliness. Loneliness is a scary part of special needs parenting. Parents of children with any impairment may have higher levels of depression, anxiety, loneliness than parents of children with no disabilities. Because of social stigma

towards children with special needs, parents, especially fathers, can feel shame and embarrassment in taking their child to social and family gatherings. This can lead to social isolation for the whole family, contributing to further stress.

Rationale of the study

Caring for a child with a disability brings multiple challenges to mothers, such as additional financial burdens for treating their child's condition, dealing with the child's problematic behaviour, and social stigma associated with disabilities. Consequently, mothers of a child with a disability often experience more physical health symptoms, negative effects, and poorer psychological well-being than mothers with a child without a disability. The present study is initiated to understand how social support of mothers influences their Self-efficacy and loneliness.

Method:

A brief description of the method adopted for the study is presented below:

Participants:

The Participants for the present study was a randomly chosen one and consisted of 193 mothers of differently abled children. The participants were the mothers who regularly visiting BUDS/Special Schools from Thiruvananthapuram district of Kerala.

Instruments:

Study Variable namely, Social Support, Self-Efficacy and Loneliness were measured using the following instruments:

1. Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet, & Farley, 1988): This is a 12-item self-report questionnaire with three subscales family support, friends support, and support from significant others. The score is summed up to get the total score on the three dimensions. The reliability of the test through Cronbach's alpha coefficient was found to be 0.81 and has adequate construct validity.

2. General Self-Efficacy Scale (Schwarzer, R., & Jerusalem): This is a 10 item scale created to assess a general sense of perceived self-efficacy. The reliability of the test through Cronbach's alpha for the GSE was between 0.78 and 0.87 and the validity is also satisfactory.

3. The UCLA Loneliness Scale (Russell, Peplau & Cutrona, 1980): This is a 20-item Likert scale designed to measure one's subjective feelings of loneliness as well as feelings of social isolation. The reliability of the test through Cronbach's alpha for UCLA-LS is 0.93 and showed high validity in this study.

Statistical Techniques:

The data were analysed using Pearson Product Moment Correlation.

Results & Discussion:

The present study was initiated to explore the influence of social support on self-efficacy and loneliness among mothers of children with special needs. To assess the relationship among the study variables Pearson Moment Correlation Method was employed. The details were given in Table 1.

Table 1. Results of Correlation Analysis

variables	Perceived Social Support	Family Support	Friends Support	Significant others	Self-Efficacy	Loneliness
Perceived Social Support	()					
Family Support	0.63*	()				
Friends Support	0.78*	0.21*	()			
Significant others	0.79*	0.35*	0.39*	()		
Self-Efficacy	0.55*	0.29*	0.32*	0.59*	()	
Loneliness	-0.47*	-0.31*	-0.34*	-0.36*	-0.46*	()

P<0.001*

The table shows that there is a significant positive correlation between the Perceived social support (0.55) and Self-Efficacy. This infers that social support is an important aspect to enhance self-efficacy, the more social support a person receives, the higher their self-efficacy is.

The table also indicated that there is a significant positive relationship between the subscales of Social Support and Self-Efficacy namely family support (0.29), social support of friends (0.32), and social support of others (0.59) respectively.

Previous research has shown that self-efficacy among mothers is positively related to satisfaction with parenting (Coleman & Karraker, 2000). Mothers with low self-efficacy tend to experience more distress and reporting higher levels of parenting stress (Sevigny & Loutzenhiser, 2009) and depression (Kuhn & Carter, 2006; Le & Lambert, 2008). So social support is an important resource that can help individuals cope with stress, enhance self-confidence and improve self-efficacy. Cultivating and improving one's social support system has a positive effect on alleviating their work pressure and enhancing their self-efficacy (Guay, 2009).

The result also shows that there is a significant inverse relationship between the Perceived social support (-0.47) and loneliness. Dyck & Holtzman (2013) reported that if a person improves their quality of interpersonal relationships and availability of social support leads to better psychological wellbeing and fewer depression symptoms. So from this study, we can state that one's social isolation decreases with their increase in social support.

The result also shows that there is a negative correlation between the subscales of social support namely Family Support (-0.31), support of friends (-0.34), social support of others (-

0.36) respectively in relation to loneliness among the mothers of children with special needs. Wang et al. (2011) studied the relationship between loneliness and social support, and he found a negative relationship between family function and social support and loneliness. Lagana (2004) explored that the received social support and perceived social support from friends is related to the feeling of belonging to a group, and the scarcity of support may cause disaffection, devastation and loneliness. Support provided by friends and family has been shown to be effective in reducing stress among mothers of children with Special needs. This study also emphasized that mothers of autistic children who perceive receiving higher levels of support, especially from partner, relatives and friends, report lower levels of depression-related somatic symptoms and fewer marital problems (Dunn, M. E., Burbine, T., Bowers, C. A., Tantleff -Dunn, S, 2001).

The table also indicated that self-efficacy is negatively associated with loneliness (-0.46). The study concluded that greater loneliness is related to lower self-efficacy. Hermann (2005) who have reported that there is a significant negative relationship between loneliness and self-efficacy. Correspondingly the findings of this study also showed that loneliness and self-efficacy were negatively associated.

Conclusion:

The present study concluded that Social Support and self-efficacy are critical predictors of Parent's loneliness. If parents of disabled children didn't get enough support from family and others, then their self-efficacy decreases, they may have poor self-confidence and social skills required for initiating and developing relationships; factors that are related to loneliness.

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