

No 7 Coping As Mediator Of Role

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Research Article

COPING AS MEDIATOR OF THE ROLE OF OPTIMISM AND FAMILY RESILIENCE TO SUBJECTIVE WELL-BEING ON MOTHERS HAVING CHILDREN WITH INTELLECTUAL DISABILITY

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ABSTRACT

This study aims to examine theoretical coping model as a mediator of optimism roles and family resilience to subjective well-being in mothers with intellectually disabled children.

Subjects/respondents in the study were 210 mothers who had children with intellectual disability with the last minimum education junior high school. The variable on this study is subjective well-being, coping, optimism and family resilience. The validity and reliability of the whole scale used confirmatory factor analysis (2nd Order CFA). Structural Equation Model (SEM) with LISREL (Linear Structural Relation) program was used as the analysis of research data.

The results of the data analysis show that major hypothesis of "theoretical model of coping as mediator of optimism role and family resilience to subjective well-being in mothers with intellectually disabled children is a fit model with the empirical data". The result of hypothesis test shows that: 1) there is optimism role toward subjective well-being but there is no role of family resilience to subjective well-being, 2) there is role of optimism and family resilience with mediation of coping to subjective well-being.

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INTRODUCTION

Subjective well-being is a cognitive and affective evaluation of an individual's life (Diener, 2000). According to Diener, Lucas & Oishi (2005) there are two basic components of subjective well-being: life satisfaction as cognitive component and happiness as an affective component.

As with mothers with intellectually disabled children, every mother expects to have a healthy and happy child to be able to enjoy life fully without the conditions of disability. The mother who accepts the diagnosis of childhood disability experience difficult emotion (Kingston, 2007). Syafei (2007) states that having a child with intellectual disability is one of the internal constraints faced to live the role and responsibilities of the mother as a parent.

The term of intellectual disability in some references is referred as mental retardation, mental deficiency, weak memory, intellectual impairment, subnormal mental, mental disability, mind disability, weak seizure, or idiot. American Psychiatric Association (2013) uses terms such as mental retardation,

mental deficiency, mental defective, feeble-minded. In recent developments to give a more humane appellation, the term intellectual disability is then used.

For parents of children with disabilities, the experience of caring varies based on a number of factors, including the type and severity of disability and whether or not the obstacles are visible to others (O'Reilly, 2010). Williams & Wright states that many parents have negative thoughts when they know their children have deficiencies / disabilities, such as guilt and fear of the future. A mother is closest figure to the child, so it is very big responsibility to be a mother with intellectually disabled children (in Kingston, 2007).

Parents having children with special needs experience higher stresses than parents having normal children as stated in Feldman's findings, that about 20% of parents with children who have or are at risk of developing growth disorders have increased signs of depression (Purwandari, 2013). Anthony (2005) in his findings concluded there was a significant relationship between the degrees of parenting pressure and parents' expectation of their child.

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Nelson (2009) found that individuals who are in a positive mood condition exhibit greater affection, empathy, and sympathy to those who experience distress compared to individuals with a neutral and negative mood condition. Compassion is an attitude that every mother must have in performing her role, especially the role of caring and educating children. Prosperity is an important factor for every aspect of child welfare (UNICEF, 2007).

The results of interviews with four mothers with intellectually disabled children showed such a heavy burden to be a mother raising intellectual disability. Various problems faced by mothers with intellectually disabled children, ranging from the burden and the responsibility of raising children, feelings of self-blame, anger and anxiety about the future of children, difficulties to control emotions when facing children, feelings of desperate, being tired of parenting, keeping all deep inside their heart (Interview, 21-23 May 2017).

Mother is the first person to feel guilt for failing to give birth to a normal child. Mother's condition indicates a lack of satisfaction with life, it often affects negative feelings rather than positive affects / feelings. Amin and Dwidjosumarto (1979) argue that parents who have children with intellectual disability or disability usually feel unhappy because they have children with disabilities, not even a few parents feel ashamed to have children with disabilities, so there are some parents who hide their children from the others' attention.

The results of interviews indicate that mothers with intellectually disabled children are unhappy, Diener, Lucas & Oishi (2005) call happiness as subjective well-being that is said to be one measure of the quality of life of individuals and communities, as well as economic and social indicators, but the quality of life is also determined by one's feelings towards pleasure and displeasure, satisfaction and dissatisfaction. Diener, Suh & Oishi (2008) state that individuals who have high Subjective well-being often experience life satisfaction, feel joy, but rarely feel unpleasant emotions.

Compared to mothers with normal children, mothers with intellectually disabled children who can ultimately achieve high subjective well-being are required to be able to withstand problems, requiring a strong personality, resistant to the pressure experienced in accompanying their intellectual disabled children. When subjective well-being cannot be achieved, it will affect the treatment of disabled children who are supposed to be noticed, loved and cared for, and affected by parents, especially mothers.

Being a mother with intellectually disabled children is demanded to be able to accept the pressure and other unpleasant things that must be compromised by developing various forms and ways of adjusting to the environment. The adaptation and handling strategies of new problems and situations are known as coping. Coping is defined as the behaviors to master, tolerate, and reduce internal and external pressure among individual and his environment (Lazarus & Folkman, 1984). Transactionally, coping is connected to concepts of judgment and transactions with relevant pressures on the individual's environment (Lazarus, 1993).

The ability of mothers who have intellectually disabled children to face various problems and achieve the desired subjective well-being also requires resilience to face difficulties, misfortunes referred to as resilience. Resilience is not only about strong physical strength or temperament, but it is also as the results from individual perceptions, judgments, approaches and abilities to cope with the pressures and challenges of life (Bunce & Anna, 2004).

Positive relationships among family members can be one of the keys to deal with various situations. The ability of families to organize problems can help each family member to rise up and adapt to the situation, so that it can develop in a more positive direction. Walsh (2006) calls it family resilience. Family resilience is a condition in which the family is able to adapt and succeed through pressure, both in the present and subsequent times (Hawley & DeHaan, 1996).

Based on the description above, then the problem formulation is "Is the theoretical model of coping as a mediator of optimism role and family resilience to subjective well-being in mothers with intellectual disabled children a fit model with empirical data?" Therefore, the purpose of the research is to test the fit (compatibility) theoretical model of variables that play a role to subjective well-being of mothers with intellectually disabled children by empirical data, and to test the hypothesis of structural relationships among research variables.

RESEARCH METHODS

Research subject

Research subjects or respondents in this study are mothers who have intellectual disabled children, biological mother of children who go to SLB (Primary School for Exceptional Children) type C Banyumas and SLB C Purbalingga, Central Java. The number of research subjects was 210 mothers with intellectually disabled children. Research subjects were mothers of students who studied at SLB C Yakut Purwokerto, SLB Kuncup Mas Banyumas, SLB Negeri Purbalingga and SLB Purba Adhi Suta Purbalingga.

Research Instruments

There are five instruments used in the research namely; subjective well-being scale, coping scale, optimism scale and family resilience scale. The estimation of reliability for coping scale, optimism scale and family resilience scale used alpha Cronbach coefficient while subjective well-being scale used alpha stratified coefficient because the scale of subjective well being is multidimensional. The coefficient of alpha stratified reliability introduced by Cronbach & McKie (1965) is useful for estimating instrument reliability consisting of several subtests (in Widhiarso, 2009).

The subjective well-being scale is adapted by researchers from SWLS (Satisfaction With Life Scale) from Diener *et. al.* (2010) and SPANE (Scale of Positive and Negative Experience) from Diener & Biswas (2009). In this experiment, a test tool that shows the reliability value was 0,81. Coping is measured using Ways of Coping Scale from Folkman, *et. al* (1986) that was adapted by researcher. In this research, a test tool that shows the reliability value is 0,863. The optimistic scales were compiled by researchers based on the optimism component of

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Seligman & Martin (2008) which includes indicators of permanence, personalization and pervasiveness. In this research, a test tool that shows the reliability value is 0,697. Resiliensi family measured using family resilience scale from Suwartono & Widyawati (2016), Wals (2006) opine that there are 3 (three) components in family resilience that is family belief system, organizational patterns and communication process. In this research, a test tool that shows the reliability value is 0,909.

Data analysis technique

The data analysis technique used in this research is Structural Equation Modeling (SEM). The processing is done using Lisrel (Linear Structural Relation) 8.7 to test the suitability of the measurement model with the available data in the field, whether or not it fits and to test the hypothesis proposed by the researcher. Structural Equation Modeling (SEM) has two main objectives in its analysis, namely to determine whether or not the model fits based on the data held and to test the various pre-built hypotheses (Ghozali & Fuad, 2014).

RESULTS AND DISCUSSION

Results

The result of the model test is obtained by chi square = 69,77, df = 64, p-value = 0,289, root mean square error of approximation (RMSEA) = 0,021, comparative fit index (CFI) = 1,00, normed fit index (NFI) = 0,98 (> 0,90), non-normed fit index (NNFI) = 1,00 (> 0,90), goodness of fit index (GFI) = 0,95 (> 0,90), adjusted goodness of fit index (AGFI) = 0,93 (> 0,90). This means "Theoretical model of coping as a mediator of the role of optimism and family resilience to subjective wellbeing in mothers with intellectually disabled children is a fit model with the empirical data. Optimism and family resilience play a direct, positive and significant coping, also play an indirect, positive and significant role to subjective well-being through coping. This means that there is a role of coping as a mediator of optimism and family resilience toward subjective well-being.

The next stage is to test the hypothesis among variables to see the relationship among variables, whether it is significant or not significant using T-value score of each variable. Hypothesis test results relation among variables both direct and indirect can be seen in table 1.

Table 1 Test results of structural relationships among variables

Variable	Direct	Indirect	T-Value	Description
coping → subjective well-being	0,26	-	3,79	Significant
optimism → coping	0,27	-	4,02	Significant
family resilience → coping	0,34	-	5,00	Significant
optimism → subjective well-being	0,30	-	4,46	Significant
family resilience → subjective well-being	0,07	-	1,25	Not Significant
optimism → coping → subjective well-being	-	0,07	2,78	Significant
family resilience → coping → subjective well-being	-	0,09	3,08	Significant

Based on the results of model tests and hypothesis testing, it can be summarized to hypothesis test results in table 2.

Table 2 Conclusion hypothesis test result

No	Hypothesis	Description
1	Theoretical model of coping as a mediator of the role of family optimism and resilience to subjective well-being in mothers with intellectually disabled children is a fit model with the empirical data	Fit
2	There is a direct role of coping toward subjective well-being of mothers with intellectually disabled children	significant
3	There is a direct role of optimism towards coping of the mother with intellectually disabled children	significant
4	There is a direct role of family resilience to the coping of the mother with intellectually disabled children	significant
5	There is a direct role of optimism to subjective well-being of mothers with intellectually disabled children	significant
6	There is a direct role of family resilience to subjective well-being of mothers with intellectually disabled children	No significant
7	There is an optimism role for subjective well-being mediated by the coping of the mother with intellectually disabled children	significant
8	There is a role of family resilience to subjective well-being mediated by the coping of the mother with intellectually disabled children	significant

DISCUSSION

This study focuses on coping as a mediator of the role of optimism and family resilience to subjective well-being. The model test results show that the proposed research model is fit with empirical data. In general, the model built by researcher in this study is well tested, because it meets the criteria of conformity. The research model is one of the novelty models in subjective well-being research by involving several influential variables that are mediated by coping.

Model testing is used to see the role of optimism and family resilience through coping showed significant results. This means optimism and family resilience contribute significantly to subjective well-being with positive direction, and coping contribute positively to subjective well-being.

Coping in this study has a positive contribution to subjective well-being (β = 0,26, t = 3,79), meaning the faster and more precise individuals trying to get out of problems/coping problem means the higher the subjective well-being. The role of coping on subjective well-being occurs because the coping used by the individual really affects on their own to make adjustment. Mothers with intellectually disabled children in this study used social support coping which was marked by finding support sources in the form of information support, social support, and emotional support. Mothers with intellectually disabled children also use positive reappraisal coping by having positive things that happen to them by linking to religiosity. Coping used by mothers who have intellectually disabled children allows mothers to be able to adjust to the environment so as to facilitate in achieving subjective well-being characterized by the existence of life satisfaction in general that is accepting the child with intellectual disability sincere and having life satisfaction of seeing the child can be independent. Subjective well-being of mothers with disabled children is also characterized by frequent positive feelings of being able to accept fate, being happy and comfortable with their intellectually disabled children, rarely experiencing negative feelings of being disappointed to have intellectually disabled children.

The optimism in this research has a direct role to coping of mother who has intellectually disabled children ($\gamma = 0,27$, $t = 4,02$), it means that optimism has a direct, positive and significant role to coping. The results showed that mothers with intellectually disabled children who have optimism on their children's ability is characterized by the belief in the autonomy and the talent possessed by their child, these will affect the coping used by the mothers when facing the problem. The level of intellectual disability experienced by the child is on the level of light, so that mothers are more likely to have optimism towards the autonomy and the talent that can be developed by their intellectually disabled children.

This such optimism affect the coping used by mothers with intellectually disabled children, such as seeking social support and positive reappraisal characterized by finding a source of support either in the form of information support, social and emotional. Mothers who have optimism use positive reappraisal coping which is characterized by creating positive things that happen to him by connecting to the belief that everything granted to her is a form of trust.

The results are in line with Carver & Scheier's findings (1999), it is suggested that individuals with high optimism can enjoy critical situations and take advantage of a variety of conditions and become stronger to face challenges. In line with Risinger's findings, *et. al.* (in Chang, 2002), he states that optimism is negatively correlated with denial and escaping trial from problems. This means that optimist individuals will not tend to use escape avoidance coping. The research findings are in line with the findings of Ningrum (2011), stated that there is a high positive and significant relationship between optimism and coping stress. This means optimistic individuals are faster and more precise in coping with stress.

Optimism in research has a role to subjective well-being of mothers who have intellectually disabled children ($\gamma = 0,30$, $t = 4,46$), it means that optimism play directly, positively and significantly to subjective well-being. The results of this study indicate that if mothers with intellectually disabled children have optimism characterized by positive response to recent success, they will experience subjective well-being more easily in the future.

A very important finding is coping that serves as a mediator of optimism toward subjective well-being ($\gamma = 0,07$, $t = 2,78$). The results of this study indicate that there is a role of optimism towards subjective well-being with coping mediation. This means that optimism can take a role on subjective well-being indirectly with the mediator of coping. The result of the research shows that optimism have both direct role and indirect role to subjective well-being, so it can be stated that the relationship between variables is partial mediation, because the direct role of optimism toward subjective well-being of mothers who have children with intellectual disability is greater than if mediated by coping. This means that individuals with good or fine wellbeing could be directly because of the influence of optimism and the individual with a good subjective well-being could be due to the influence of optimism through coping.

The results show that the role of optimism to subjective well-being is through coping mediator, because individuals who

have high optimism will evaluate themselves positively and finally can control the important aspects of life, so they can get along with the social environment well and see the future with positive expectations and hopes. Individuals are able to deal with various conditions, physically and mentally have strong energy (Luthans, 2002). The findings (Luthans, Avolio, Walumbwa & Li, 2005), stated that optimism can be a positive influence in very powerful situations to influence coping in pressing situations and the overall aspect is needed in achieving subjective well-being.

The results showed that mothers with intellectually disabled children had optimism characterized by the belief of self-reliance and talent possessed by children using social support coping which was characterized by finding sources of support (information, social and emotional). The optimistic mother also uses positive reappraisal coping which is characterized by creating positive things happening to her by connecting to the belief that everything that is granted to her is a form of God's trust. Both coping used by mothers who have intellectually disabled children make them easy to achieve subjective well-being that is characterized by the satisfaction of life in general. In addition, the satisfaction of life could be about the ideals of their children who are expected to be independent and not bother others, feeling happy and comfortable with the environment around the limitations of their children, and being able to accept the fate of the children's condition.

The family resilience in research has a role to coping mother with intellectual disability ($\gamma = 0,34$, $t = 5,00$), it means that the family resilience has a direct, positive and significant role to coping. The results showed that the family resilience of mothers who have children with disabilities, are characterized by a good family system, organizational patterns or family relationships in accordance with their respective functions as parents (father and mother) and communication processes that run well and effectively in problem solving/coping. The results of this study are in line with the findings of Boerner & Jopp (2010) which states that there are several factors that contribute to individual resilience: coping, interpersonal skills and intrapersonal skills.

Family resilience in the study has no direct role to the subjective well-being of mothers with intellectually disabled children ($\gamma = 0,07$, $t = 1,25$), individuals who have family resilience characterized by being able to rise from adversity have no role to subjective well-being. This means that individuals who tend to have high family resilience do not necessarily have good subjective welfare.

Mothers with children with intellectual disabilities have largely served their children from infants to the present (children aged 11-16). Based on O'Reilly (2010) findings about children who have mild intellectual disabilities, it is suggested that experience in caring varies by a number of factors such as the type and severity of the disability and the apparent absence of the obstacle seen by others. It means that the lighter the intellectual disability level of the child the easier the mother rise from the pressure she experiences (resilient), especially mother has served and accompanied child from infant up to present.

Field findings indicate that the mother who escorted and waited for her child at school has a group or community that can be used as a place to share stories of love and sorrow in serving and nurturing their own children, mothers feel to have the same 'fate' with friends who have intellectually disabled children. In the group mothers can feel the warmth of the relationship of destiny and shelter and can feel happiness. This group allows mothers with intellectually disabled children to be more easily subjected to subjective well-being. This means that group support affects subjective well-being of mothers with intellectually disabled children. This field findings are in line with Daulay's findings (2015), he states that there is an effect of social support on subjective well-being.

A very important finding is also coping that serves as a mediator of family resilience to subjective well-being ($\gamma = 0,09$, $t = 3,08$). This means there is an indirect role of family resilience to subjective well-being. The results showed that with the mediation of coping, the role of family resilience to subjective well-being is greater, so it can be stated that family resilience plays a role toward subjective well-being mediated by coping. This means that family resilience has an indirect role to subjective well-being, in other words the relationship between variables is full mediation, because the direct role of family resilience to subjective well-being of mothers who have children with intellectual disability is less than if mediated by coping.

The results showed that family resilience may contribute to subjective well-being of mothers with intellectually disabled children if through coping. The resilience of the mother's family is characterized by determination in facing challenges, being swift or nimble and strong in resolving various situations, getting closer with family members, being able to communicate well about the condition of the child to family members in serving and assisting intellectually disabled children. When the resilience of this family can be owned by the mother then it affects in an effort to overcome the problems of the child, making it easier for the mother to achieve subjective well-being.

The results of the study are in line with findings of Diener, Suh & Oishi (2008), stated that the relationship in the family is consistently correlated with subjective well-being; Diener (1998), stated that the satisfaction of the family associated with life satisfaction. Family resilience has three components: family trust system, organizational pattern and communication process. So that the results of research can be stated in line with findings Joronen & Kurki (2005), that communication in the family is one of the factors that determine subjective well-being (in Silalahi & Meinarno, 2010).

The study findings contradict the findings of Boerner & Jopp (2010), which suggest that there are several factors that contribute to individual resilience: coping, interpersonal skills and intrapersonal skills. This means that coping strategy can affect resilience whereas this study results that individuals who have family resilience are more easily to deal with and solve the problem, making it easier to achieve subjective well-being.

CONCLUSION

1. Model test is accepted, it means that coping as mediator of optimism role and resilience of family to subjective

well-being of mother with intellectually disabled children fits with empirical data.

2. Structural relationship test among the variables involved in the research as a whole is accepted (significant). However, it is found that hypothesis 6 is not significant. It means that family resilience does not play a direct role to subjective well-being of mothers with intellectually disabled children.
3. Family resilience plays an indirect role in subjective well-being with coping mediation. This means that family resilience has a contribution means that subjective well-being can be achieved through coping, so mediator coping functions fully (full mediation).
4. This study also confirmed that coping becomes a partial mediator in the results of research that the optimism play directly and indirectly (coping mediation) to subjective well-being.
5. Family resilience is the variable that significantly contributes to and takes a role to coping with the greatest role. All of these variables contribute to coping of the mothers who have intellectually disabled children in order to achieve subjective well-being.
6. Optimism is the variable that significantly takes the greatest role and contributes to subjective well-being.

Suggestion

Theoretical suggestions

Theoretically this research supports various factors that influence subjective well-being which include coping, optimism and family resiliency. Therefore, in the development of subjective well-being materials, other variables which may also contribute positively to subjective well-being, such as the factorial/spiritual, cultural (territory) and classification of intellectual disability, intellectually disabled children home (not school) should be considered.

The suggestions were based on the findings that there is a positive relationship between religion and measurement of health, well-being, marital satisfaction (Seybold & Hill, 2001), Kirby's findings, Coleman & Daley (2004) stated that religious or spiritual beliefs significantly predict Krause's well-being and findings (2004), it is stated that religion is closely related to satisfaction and well-being (in Papalia *et al.*, 2009). The suggestion is also based on Diener's (2000) findings on students from 17 countries indicating that the happiness and satisfaction of life are both important and more important than money in every country, although there are intercultural variations.

Practical Tips

For Parents (mothers)

Parents, especially mothers, are advised to continue to maintain their subjective well-being, in order to remain happy accompanying and serving intellectually disabled children both at home and when waiting for children at school.

For Institutions (SLB)

It is suggested some efforts to achieve good subjective well-being for both parents and parents of students of SLB, namely:

1. Establishment of "parent group support" so that mothers with intellectually disabled children still experience subjective well-being.
2. Positive Parenting Program (triple P) should be existed, this program can involve father as parent whose role is also needed to accompany child intellectual disability together with the mother.

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