Parenting Styles of Mothers in Shaping Independence of Children with Special Needs

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Parenting Styles of Mothers in Shaping Independence of Children with Special Needs

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Abstract: Independence is the ability to control oneself to deal with situations around them without depending on others. Consequently, appropriate parenting styles are necessary to train independence in children, especially children with special needs. This research aims to describe the parenting style of mothers in shaping the independence of children with special needs. This qualitative research used a phenomenological approach. The object of this research was children with special needs aged 12-17 years. While the research subjects were four mothers with children with special needs in the categories of autism, mental retardation, deafness, and ADHD. Data collection methods used structured interviews conducted in-depth with the research subjects. Subsequently, the data analysis used content analysis techniques. The results showed that the mother's parenting pattern of the four subjects in the formation of independence in children with special needs was through democratic parenting. The democratic parenting pattern is characterized by the provision of direction and guidance from parents, especially mothers, in developing children's independence abilities.

Keywords: Children with special needs, Independence, Mother's parenting style
A. Introduction

Children are born into the world with different privileges. However, some children experience various obstacles in their growth and development. These children are commonly known as children with special needs (ABK) with different characteristics from children in general and experience obstacles in growth and development (Atmaja, 2018). Meanwhile, Heward (2003) explained that children with special needs have special characteristics that are different from children in general without always showing mental, emotional, or physical disabilities. Therefore, children with special needs are different from normal ones because they have obstacles or disabilities from a physical or psychological perspective.

Data on the population with special needs in Indonesia, according to Supas (in the Center for Data and Information of the Ministry of Health of the Republic of Indonesia, 2019), is based on the category of 10 years and over, namely; 6.36% difficulty seeing, 3.35% difficulty hearing, 3.76% difficulty walking/climbing stairs, 1.30% difficulty using/moving hands/fingers, 2.81% difficulty remembering/concentrating, 1.40% behavioral and/or emotional disturbances, 1.52% difficulty/speech disturbance and or understand/communicate with others, and 1.02% have difficulty taking care of themselves. These data show that the category of ABK having difficulty seeing has the most presentation of 6.36% compared to the other categories, while ABK is the least in the category of difficulty taking care of itself with 1.20%. Furthermore, the Riskedas data (in the Data and Information Center of the Indonesian Ministry of Health, 2019) records ABK grouped into age categories, finding 3.3% of children aged 5-17 years and 22.0% aged 18-59 years. Based on these data, it can be concluded that the number of children with special needs in Indonesia is quite a lot.

This condition certainly requires attention from the surrounding environment because children with special needs need the same services and guidance as normal children in general, one of which is related to parental rights. This is stated in Law 8 of 2016 article 5 paragraph 3, concerning the rights of persons with disabilities. It is stated that they have the right to receive treatment and care for a family or a substitute family for optimal growth and development.

Parenting is a method carried out in caring for, looking after, and educating children continuously from time to time as a manifestation of parents' sense of responsibility towards children. In addition, parents must also fully know the characteristics possessed by children. The role of parents is so big in helping children to be able to carry out daily activities in helping themselves. This is where the concern of parents as teachers is first and foremost for children. You have to do something for your beloved child as a parent. However, if the parenting style is wrong, it will negatively impact their children, like parents who care for their children by spoiling them too much. As a result, children become dependent on their parents and cannot do it on their own without the help of others.

According to Tridonanto (2014), parenting is an interaction between parents and children, where parents encourage their children to form good behavior, knowledge, education, and values that are considered good and appropriate so that later the child becomes an independent, growing and develop optimally while being healthy, have self-confidence, strong curiosity, and success-oriented. Parenting is a method used by parents to grow their children into socially mature individuals (Santrock, 2003).
Parenting styles greatly influence the independence of children's attitudes, and there is a very high relationship between parenting styles and child development. Therefore, parenting provided by parents is very important regarding the formation of attitudes and child development because if a child is raised inappropriately, it will also affect his development process (Thaibah et al., 2020). Diana Baumrind, in a book by Santrock (2002), mentions three types of parenting: authoritarian, authoritative/democratic, and permissive.

According to Bhatia (in Lestari & Sopingi, 2018), independence means self-directed behavioral activity without expecting direction from others, trying to solve problems on your own without asking for help from others, and managing yourself. Independence is a process of growth and development of a child towards maturity as well as children with special needs who have obstacles in their growth and development.

The research conducted by Lestari & Sopingi (2018) on the relationship between parenting styles and the independence of autistic children found a positive relationship between parenting styles and the independence of autistic children. In the authoritarian parenting style, the independence of the child tends to be very low. In the permissive parenting pattern, the child's independence tends to be moderate, and in the authoritative parenting pattern, the child's independence tends to be high.

According to Thaibah et al. (2020), previous studies found that in implementing parenting styles for children with special needs, parents have implemented several parenting styles, namely permissive, authoritarian, and democratic, depending on the types of obstacles and the level of awareness of parents in educating children. A permissive parenting style is where parents are very involved but have little or no control over children. Authoritarian parenting tends to prioritize anger and demands on children compared to love. Parents control all aspects of a child's life, from small things to other important things, because parents think that parental knowledge is the best for children to follow. Meanwhile, democratic parenting encourages children to be independent but still sets limits and controls on their actions.

Many things must be taught by parents who have children with special needs, but one of the things that parents must teach is about taking care of themselves from an early age. Given the two underlying aspects of Children with Special Needs (ABK), children must be taught and trained for independence. There are two basic backgrounds with several aspects, including aspects of independence related to health and children's sociocultural maturity. In daily routine activities, several skills should be taught to children, such as eating, bathing, brushing their teeth, and going to the toilet, which are very closely related to children's health (Fauziah & Pradipta, 2018).

One of the efforts to improve the independence of children with special needs is through Activity of Daily Living (ADL) skills. As stated by Snell (Widijaya et al., 2019), he explained that the ability to help oneself (self-care) includes: 1.) The ability to eat and drink (eating), including the ability to swallow food, the ability to use fingers to hold food, the ability to use a spoon to eat, the ability to use a fork for eating, and the ability to use a cup/glass for drinking; 2.) Dressing, such as the ability to take off trousers or skirts, wear trousers or skirts, take off and put on socks, take off and put on clothes, take off and put on shoes; and 3.) Using the toilet, such as the ability to identify the urge to urinate or defecate, control the urge to urinate...
or defecate, go to the bathroom, take off your pants/skirt, sit on the toilet, flush the toilet, and leave the bathroom.

The research results by Rudita et al. (2021) entitled The Relationship between Parenting Styles and Awareness of Self-Development Children with Mental Disability found a positive relationship between parenting styles and awareness of brushing the teeth of mentally retarded children. Thus that parenting style influences the awareness of brushing the teeth of mentally retarded children at SLB Kedungkandang, Malang. In authoritarian parenting, the child's awareness tends to be low. In permissive parenting, the child's awareness tends to be moderate, while in democratic or authoritative parenting, the child's awareness tends to be high.

One of the best ways to provide proper parenting for children with special needs is to understand the situation as it is (the child's positive and negative conditions, as well as their strengths and weaknesses). By understanding the child's situation, parents will be able to see the positive side of the child's existence and be able to act warmer whenever they are with the child. A positive parental attitude usually makes children more open. With the direction given by the child's parents, they can develop in a more positive direction as well. Conversely, the attitude of parents who tend to be negative towards children will usually produce children with special needs who are difficult to direct, foster, and educate.

However, many parents still do not apply appropriate parenting styles for their children because they rely on other people, such as nannies, helpers, siblings, and grandparents to take care of their children and have almost no time to care for them. As a result, a lack of independence for children with special needs to care for themselves without the help of others (Thaibah et al. 2020).

Adolescence is the most difficult phase of life and is also when most life skills are developed. The development of life skills in children is necessary to save children from decline and to develop children's potential and independence to the fullest. This will direct children to a successful and happy life (Paul & Babu, 2020). Based on the background above, the researcher is interested in conducting in-depth research on maternal parenting in shaping the independence of children with special needs in their teens. The studies should contribute to the field of family psychology, especially in the context of the parenting style of mothers with children with special needs.

B. Research Method

This study used qualitative research with a phenomenological approach. The phenomenological study focused on describing the subject's experience of the mother's upbringing in forming the independence of children with special needs. Sources of research data were mothers who have children with special needs, independent children, and children aged 14-19 years.

An overview of parenting styles was obtained by conducting in-depth interviews with four mothers with children with special needs who are independent and aged 14-19 years. The
interviews conducted were guided by a structured list of research questions. Furthermore, the process of collecting interview data was recorded using a tape recorder with the permission of the research subject. The results were then transcribed verbatim and proceeded to analysis.

The results of the interviews were analyzed using phenomenological data analysis techniques using content analysis (Creswell, 2015). The content analysis includes 1) Reading the entire text and then looking for units of meaning in the text that has been transcribed, 2) Next draw the unit of meaning which is formulated in descriptive meaning, 3) The descriptive meaning is interpreted in an interpretive form, namely formulating sentences to become more abstract, 4) Clustering interpretative meanings into conceptual themes, and 5) Reading the meaning of the phenomenon that we examine is adjusted to the research objectives.

C. Results and Discussion

1. Children Independence

Subject 1 is a mother who has a child with an autistic disability with the initial S. Currently, S is 17 years old and is still studying at an SLB. Based on the results of interviews with Subject 1, it was found that independence S developed well with age. Even though in his daily activities, S still needs the help of others. However, in some daily activities, S can do it independently. This was expressed by Subject 1 through the following statement:

“...he's actually a neat person, ma'am. Her things in her room were arranged neatly in their places. It's like that at school, too. He's usually the last to leave because he's tidying up the classroom desks and chairs until they're neat, and then he comes home.”

This shows that S has a habit of tidying up and putting the things he has in their places, either at home or school. Subject 1, namely S's mother, realized that S had limitations, so she could not do many things like normal children of her age. However, according to Subject 1 (Mrs. S), the important thing to teach S was the ability to take care of herself. This was conveyed by the statement of Subject 1 (Ms. S) as follows:

“...she can bathe herself, eat herself, wear her own clothes.”

At his age, S was able to carry out daily activities, such as bathing, brushing his teeth, eating, and drinking, and he did it himself. The independence possessed by S cannot be separated from the role of Subject 1 (mother S) as a parent in accompanying children and providing education through special schools. Subject 1 (Mrs. S) said that the process of caring for and raising children with special needs requires high enthusiasm and patience.

Subject 2 is a mother with a child with the initials R with a mental disability who is 16 years old. The interview results with Subject 2 (R's mother) showed that her independence was in a fairly good category because R was able to carry out activities such as eating and bathing on her own even though she was not tidy or clean. This is illustrated in the statement of Subject 2 (Mrs. R) as follows:

“...he knows how to eat by himself. However, it has to be prepared for him to eat by himself. Also, he can take a shower alone, ma'am. It's just that it's not clean.”
Besides that, Subject 2 (R's mother) also said that R was able to put on and take off her own shoes. The interview result showed that the form of independence for R's child lies in daily activities. However, since R is not clean when bathing, sometimes he still needs help from his mother.

Subject 3 is a mother who has a child with the initials H with the disability ADHD (Attention Deficit Hyperactivity Disorder) and is 12 years old. The results of the interview found that Subject 3 (Mrs. H) also showed that the child's independence was still in the quite independent category because the independence that was exercised was still limited to independence in daily activities such as eating alone and bathing alone. According to the presentation of Subject 3 (Mrs. H), H must be supervised and given directions in carrying out her daily activities. The statement of Subject 3 (Ms. H) is as follows:

"After a while, he can do it alone even though he still has to be supervised. For example, he can bathe himself while being monitored which parts have not been cleaned, and then he will be told, and the child will do it."

According to Subject 3 (H's mother), the formation of independence taught to H is the skill to carry out daily activities such as taking food, finishing food, and carrying dirty dishes to the kitchen. In addition, Subject 3 (H's mother) wanted to focus on educating H to be able to carry out these daily activities consistently and regularly.

Subject 4 is a mother who has a child with hearing impairment and ADHD (Attention Deficit Hyperactivity Disorder) with the initials J and is currently 15 years old. Based on interviews conducted with Subject 4 (J's mother), it can be said that J has been able to demonstrate his independence quite independently. Subject 4 (Mrs. J) said that when at home, J was able to carry out her daily habits quite regularly, such as taking a bath alone, eating alone, placing towels after bathing, and making the bed. This is based on the statement of Subject 4 (Mrs. J) as follows:

"Slowly, I will give an example to his father, for example, trivial habits like returning the towels after taking a shower or tidying up the bed every time I wake up. The process took quite a while for Jovan to understand what he had to do on his own. Even now, he still has to be reminded, directed, but now he understands better because maybe he's used to it."

Based on the interviews with the four subjects, some independence has been formed in children, such as 1) independence in caring for and personal hygiene, which is characterized by children being able to bathe, brush their teeth, take and put towels in place without their mothers' help, 2) independence in dressing marked by being able to choose uniforms according to the day's schedule, wearing own clothes, wearing socks and shoes correctly, and 3) independence in eating and drinking activities characterized by the child's ability when taking food, eating activities without the help of another person.
2. Mothers’ Parenting

The results of the interviews with the four subjects were based on the aspects of parenting described by Baumrind (2004), strictness, supervision, acceptance, and involvement. Strictness is the level of firmness of parents in making many rules to regulate children's behavior. Supervision is the level of parental surveillance of children's behavior and activities. Acceptance is the level of parental acknowledgment of children's behavior. Involvement is the level of parental engagement in the child's life.

The results of interviews with Subject 1 show that the parenting style to establish children's independence is democratic parenting. In training children's independence activities, mothers tried to give examples of daily activities supporting S's independence. Subject 1 admitted that this was not easy because S often did not want to do the things being taught. However, Subject 1 did not force and scold S because the mother was aware of her child's condition and limitations. The following is a statement from Subject 1 regarding how to teach S about independent activities:

“Yes, I usually give an example in front of him. Sometimes I teach too. For example, washing dishes and sweeping. But he doesn't want to. He doesn't like it. So he never goes into the kitchen. However, he can bathe himself and eat alone.”

Acceptance and understanding of the condition of children, especially children with special needs, is important for parents. The acceptance process experienced by Subject 1 was not easy and required a long time. Subject 1 realized that educating children with special needs cannot be done by force or violence. So, in the process of caring for Subject 1, try to be patient and keep learning to see the potential that S has that can be developed. Currently, Subject 1 is sincere and tries to facilitate S with activities she is interested in, such as beauty and makeup (grooming). In addition, in applying the rules, Subject 1 does not apply rigid and hard rules. Even in some cases, Subject 1 had to be firm and raise her voice so that S paid attention to the message that the mother wanted to convey. The statement of Subject 1 is as follows:

“I have completely accepted my child's condition. Hence I'm happy. If she asks me to buy him something, while it's still reasonable and I can fulfill it, I'll buy it. That's why, when she was in school, she majored in beauty because she liked it. At home, I also facilitate, for example, if he wants to buy eyelashes or mascara. In fact, she used to go to school wearing eyelashes. I'll just let her be.”

The parenting style applied by Subject 2 has similarities with Subject 1, namely by trying to model daily activities that will support R's independence. Subject 2 also admits that this requires patience because R often cannot be forced when he has to do something. Because if forced, RW tends to ignore his mother's orders or advice. The following is a statement from Subject 2 regarding independent activities:

“Well, at least daily activities at home. He already knows how to eat alone but needs to be prepared first. Also, he can take a shower by himself, despite that it's not completely clean, since his hands and feet's motoric capabilities are quite weak.”
R’s condition, which has a mental retardation disability, makes R’s physique look weak. Thus, Subject 2 is very careful in applying or teaching daily independent activities to R because he gets tired easily.

The parenting style applied by Subject 3 to child H also has similarities with the previous subject. Subject 3 said that in training the independence of child H, it is necessary to be told repeatedly and consistently. When H's child does not want to do the activity himself, Mrs. H will not scold or hit. Mrs. H chooses to explain to H's child and tightens her tone. This is adapted to the emotional state of H's child. When at home, Subject 3 tries to fill in activities that make H comfortable at home, such as drawing activities. This was conveyed by Subject 3 through the following statement:

“Every time his father and I have had time to condition H with activities that make him feel comfortable at home, like drawing, any activities that don’t make him angry. When he gets angry, many things are broken. When conditioning, I have to be patient.”

The statement above illustrates that H's emotional condition is still unstable. When H gets angry and goes berserk, he usually takes it out by breaking things in the house. So far, Subject 3 is trying to be patient and trying to learn to understand how to condition children. In addition, Subject 3 also consulted with his therapist regarding the problems he experienced, especially in controlling children's emotions. Subject 3 conveyed in a statement as follows:

“I always communicate with psychologists and therapists about any incidents that happened and how I should handle them.”

The parenting style adopted by Subject 4 in establishing child independence is also a form of democratic parenting adopted by the mother and other family members. In the interview, Mrs. J said that it was done by exemplifying the independence activities she wanted to form when training J's child's independence.

“...slowly I will give an example, his father, his older brother too, for example, trivial habits like returning the towel after taking a shower or tidying up the bed every time you wake up.”

Therefore, it can be illustrated that all family members always give an example to child J regarding daily habits, so that child J is able to absorb and apply them to himself. Even though the independence possessed by J's child is quite good, sometimes J's child does not do it. Realizing J's child's limitations, Mother always understands, supports, and gives gentle warnings so that J's child remains motivated to develop his independence.

From the four subjects, the parenting style applied in establishing the independence of children with special needs is democratic parenting. This parenting style provides space for children to manage their independence according to their needs of children and parents never force children to be able to do something, as in the questions asked regarding the efforts made by parents in encouraging children to carry out their daily activities. They answered almost all the same: the mother provides encouragement and motivation repeatedly so that the child wants to do the task himself. Children are reminded and allowed to do it themselves or by inviting and doing it with their parents. Parents do not scold their children when children make
mistakes. Then when the child succeeds in doing something, the parents will appreciate their children by giving praise.

**Table 1.** Thematic analysis of mother's upbringing on the formation of independence of children with special needs

<table>
<thead>
<tr>
<th>Aspects</th>
<th>Transcripts</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strictness</strong></td>
<td>I rarely punish my child. I'll pinch him or get angry at him if he's difficult to manage. Usually, if I snap after that, I will definitely tell him why so he understands.</td>
<td>Mothers apply rules to children but not strictly while considering the child's character.</td>
</tr>
<tr>
<td></td>
<td>It was really difficult at first. I try to be firm with my son.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes, ma'am. Yes, I was told how to do it like this by explaining it. I told him if this was allowed or not or if this was good or bad.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No, it doesn't have to be strict. Take it easy because if I'm being too loud, he doesn't want to do anything else and gets stressed easily.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Certain rules cannot be applied considering the condition of the children since not all of them understand what should be done.</td>
<td></td>
</tr>
<tr>
<td><strong>Supervision</strong></td>
<td>We usually just walk, eat together or go to the beach. If not, just stay at home. Sometimes she's busy playing with her cell phone or sometimes coloring her nails with nail polish.</td>
<td>Building closeness by gathering with family.</td>
</tr>
<tr>
<td></td>
<td>Well, at least I just watch TV at home. We rarely go out.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>In particular, there are no activities for going out together, yes, mostly in public housing facilities, most playing around. Or when I have extra money, I will take them to places to play.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If I have free time, we usually go for a walk to a place to play, like a playground near my house, or to go on a nature tour. Let him explore the outside world.</td>
<td></td>
</tr>
<tr>
<td><strong>Acceptance</strong></td>
<td>My husband and I have accepted my child's condition. Hence I'm happy.</td>
<td>Accept all the shortcomings sincerely and understand the strengths of children, so parents can focus on developing their potential.</td>
</tr>
<tr>
<td></td>
<td>I think everything comes from God, so I just accept it.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I never compare myself with other people's children. Just go with what is there, and I continue to follow the instructions of H's</td>
<td></td>
</tr>
</tbody>
</table>
therapists.

From the start, my husband and I were both committed to being able to accept whatever was in my child, Miss. Yes, it's our responsibility.

The advantage is that a child like this has a strong memory. If he puts things somewhere, he always knows and remembers.

As for the weakness, yes, it's hard to manage. He tends not to focus when spoken to.

I think he's weak in the hands and feet. He couldn't run or write because his grip couldn't hold a pencil.

He doesn't have a certain talent, at most, he can eat by himself, but we have to put it on a plate first.

Understand the strengths and weaknesses of children. Mothers are able to see the advantages of children in the midst of their limitations. Mothers are able to feel the benefits of the advantages of these children.

Mothers are able to feel the benefits of the advantages of these children. Mothers play a more dominant role in accompanying children's activities.

3. Discussion

This study found that democratic parenting was considered capable of training the independence of children with special needs. This is in accordance with Aftasony's research (2015), which says that authoritative or democratic parenting can train mentally retarded children to be independent. In addition, Wiryadi (2014) also said that democratic parenting can prioritize children's interests but does not hesitate to control children's desires. Parents will behave and be rational and understand the ins and outs of the needs of their children. Parents who have children with special needs are realistic about their children's abilities and do not expect too much from their abilities compared to normal children (Widadi & Rahman, 2019). Parents provide reinforcement by treating their children warmly, such as hugs and caresses when children can do something better or achieve things.
According to Wiryadi (2014), the family parenting style has four functions: 1) forming the child's personality, 2) forming the children's character, 3) forming the children's independence, and 4) forming children's morals. Education and training for children with special needs start from the time the child wakes up until bedtime (Darmono, 2013). According to Devi (2015), children should not be allowed to play alone and do whatever they please. These children need to be trained and guided consistently and continuously.

Democratic parenting can be demonstrated by parents providing encouragement that can awaken and encourage children when doing their own tasks. The mother will give a patient and gentle reprimand and adjust to the situation experienced by the child. When the child feels bored with the activity, the mother will give many choices so that the child can choose. When it rains heavily or at night, Mother provides understanding and understanding to eliminate fear and anxiety.

According to Mardiyah (2020), the family plays important roles in the biological, educational, religious, protection, socialization, affection, economic, and recreational functions. Specifically, it provides places for children to learn, affection, protection, comfort, guidance or care in terms of religion and social life, which can ultimately foster self-confidence and later make it easier for children to deal with the problems they face independently.

The patience that mothers apply to their child's parenting pattern is in line with research conducted by Evanurul Marettih & Wahdani (2017), which states that patience in living everyday life with autistic children is necessary because they do need special treatment throughout their lives. According to Fatmawati et al. (2021), what children need most is understanding, time, and family praise, especially from their parents. When the child has tried to do something serious but still does not get good results, then parents can give praise, and this is the best step to provide motivation and confidence for children to try to improve again. The best step that parents can take in these circumstances is to give adequate attention to their children. Good study habits and self-discipline must be instilled as early as possible. This is also in line with Sunarti's opinion (2015), which states that parenting styles of mothers that can develop and increase children's independence are democratic parenting styles where in this parenting the mother gives encouragement to the child to do something, and the mother and child listen to each other. With this, children become more confident in doing something new, especially regarding independence in their daily lives.

D. Conclusions

The mother's parenting style of the four subjects in the formation of independence in children with special needs applies democratic parenting. This democratic parenting pattern is marked by the provision of direction and guidance from parents, especially mothers, in developing children's independence abilities. The four subjects of children with special needs were found to have enough independence in carrying out daily activities such as eating, bathing, and cleaning their own rooms without the help of their mothers. This independence occurs because it is trained and exemplified by parents, especially mothers. The four subject mothers educate and train children's independence gently and firmly, accompanied by
explanations that are easy for children to understand, and continue to supervise and accompany children's activities. Thus, the role and parenting style of the mother determines the process of forming the independence of children with special needs. From this study, the democratic parenting applied by mothers was proven to be able to form children's independence in terms of independence in daily activities, including independence in caring for and personal hygiene, independence in dressing, and independence in eating and drinking.

In an effort to realize the independence of children with special needs, guidance and training are necessary, which must be carried out repeatedly, routinely, free from any pressure or coercion, carried out in a relaxed manner, and not harmful so as not to overly impose their limitations. In addition, attention and affection from the mother are needed in caring for children with special needs so they can achieve independence.

References


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