

Coping Strategies and Support Needs of a Mother Raising a Child with Multiple Disabilities: Unseen Strength

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Abstract

Parents raising children with disabilities often face unique challenges. However, limited studies explore the coping mechanisms and support needs of parents of a child with multiple disabilities. This study aims to explore the experiences faced by a mother raising an 8-year-old child diagnosed with Global Developmental Delay, Attention Deficit Hyperactivity Disorder, and Level 1 Autism Spectrum Disorder. Focusing on the challenge, coping mechanisms, adaptive strategies employed by the mother, and existing support systems and support needs in managing the child. Using a qualitative case study design, data were collected through in-depth interviews and analyzed thematically. The study shows that the emotional, financial and practical challenges were mitigated through peer support, spiritual practices and community networks. The analysis of the data indicates the need for sensitive support systems in the family, community, and policy-driven resource allocation to improve the well-being of the caregivers.

Keywords: parenting, multiple disabilities, coping strategies, support systems and qualitative research.

Introduction

Parenting a child with atypical behavior needs much effort and resources. Mothers often assume primary caregiving responsibilities, confronting many challenges that may significantly affect their well-being

and ability to assist. Parents of children with many impairments manage difficult routines and specialized demands, experiencing everyday life in a somewhat different way than those of parents of generally developing children (Tigere and Makhubele, 2019). Constant treatment of developmental issues often results in major emotional and financial costs, thereby creating complex social and economic hurdles for primary caregivers (Bizzego et al., 2020).

Raising a child with multiple disabilities presents unique and often overwhelming challenges for families, particularly for mothers who are typically the primary caregivers. These challenges include managing the child's medical, emotional, educational, and social needs, all while balancing the demands of daily life. Multiple disabilities, defined as the co-occurrence of two or more disabilities such as intellectual disability, physical impairment, and sensory impairment, require complex and ongoing support (World Health Organization, 2021). Parents of children with various disabilities may face significant problems, including increased caring responsibilities, financial burdens, and social stigma (Reyes & Paragas, 2019). These obstacles may affect the health and well-being of both the child and the primary caregiver, typically the mother (Pérez-Marfil et al., 2021). Parents can cultivate resilience and adapt to the specific challenges of raising a child with multiple disabilities by employing effective coping strategies, including seeking social support, practicing acceptance, and utilizing problem-focused methods (Vernooij et al., 2019; Bawalsah, 2020).

Studies indicate that children with multiple disabilities in the Philippines necessitate enhanced specialized healthcare, education, and social support (Manalo & Tan, 2022). Coordinated and comprehensive caregiving strategies are essential due to the intricacy of multiple disabilities in children, which often burdens families in managing the intricate needs of various impairments.

Given the complexity of many disabilities in children, which often burden families in managing the several demands associated with the combination of impairments, coordinated and comprehensive caregiving measures are very necessary. The possibility of more social stigma and prejudice against these children and their caregivers aggravates the difficulties of living with several disabilities (Ocampo et al., 2020). Agustin and Aguilar (2020) claim that moms of children with disabilities suffer emotionally and psychologically from a lack of social acceptance, specialized schooling, and easily available healthcare. This stress may lead to both physical and psychological problems, which emphasizes the need for focused support systems (Vera, 2021). Fewer studies have explicitly examined the experiences of mothers and the coping strategies they use, either internally or externally, despite the numerous studies on the more general challenges faced by families of children with disabilities.

This study aims to explore the experiences faced by a mother raising an 8-year-old child diagnosed with Global Developmental Delay, Attention Deficit Hyperactivity Disorder, and Level 1 Autism Spectrum Disorder. By looking at the mother's point of view, this study seeks to better understand the unseen strength and resilience displayed by a parent throughout challenging circumstances.

Research Objective

- To explore the challenges faced by a mother raising a child with multiple disabilities.
- To examine the coping mechanisms and adaptive strategies employed by the mother in managing a child with multiple disabilities.
- To identify the mother's existing support systems and support needs in this caregiving role.

Theoretical Framework

Based on the Family Stress Model (Boss, 2002), the study is based on theory. In the context of having kids with unusual habits, this study looks at the stress that families feel when they have to take care of kids who need more help than they can give. Families' ability to adjust to their caring responsibilities may depend on their capability to communicate, solve difficulties, and seek social assistance as well as other coping strategies this model emphasizes. According to Ocampo et al. (2020), mothers' support networks significantly impact their stress management strategies and the tools they need to correctly execute their responsibilities as caretakers.

Resilience Theory (Walsh, 2016) guides our research since it shows how people and families cannot only overcome obstacles but also flourish among them, therefore offering another perspective for our study. Mothers raising children with different disabilities clearly show this resilience in how they use social networks, cultural resources, and their talents. Notwithstanding its challenges, the theory argues that giving care can enable one to grow personally and strengthen their sense of direction (De Guzman & Erfe, 2021).

Another theoretical perspective to direct the study is provided by the Social Support Theory (Cohen & Wills, 1985). This study investigates how several types of support emotional, informational, and instrumental might enable individuals to remain free from stress. Although restricted access to official support systems such as social services and healthcare can raise stress levels, in the Philippines informal support systems like family, friends, and religious communities are essential in enabling moms with caring responsibilities. This concept explains how familial relationships and cultural norms impact mothers' use of social assets and their support needs (Lopez et al., 2023). Support systems like healthcare and social services can increase stress levels. In the Philippines, informal support systems, including family, friends, and religious communities, play a vital part in supporting mothers with caregiver duties. This concept discusses the effect of cultural norms and family dynamics on mothers' employing community resources and the support needed (Lopez et al., 2023).

Review of Related Literature

Raising a kid with many impairments provides unique difficulties for women who often act as main caregivers who need large emotional, physical, and social resources. The many coping mechanisms women use and their support needs throughout this difficult yet fulfilling experience are investigated in this research review.

Multiple Disabilities

A person with many disabilities is characterized as having two or more disabilities, which could include sensory, cognitive, physical, and/or developmental ones. Combining many impairments might provide a special set of difficulties for the person that can complicate the fulfillment of their needs and the release of suitable solutions. A person with many impairments is characterized as having two or more disabilities that seriously affect their capacity to study and carry out other necessary living activities (Zascavage, V., & Keefe, C. H., 2015). These limitations may include physical, cognitive, communication, sensory, or behavioral difficulties. The World Health Organization (2021) defines multiple impairments as the concurrent presence of two or more disabilities, such as intellectual disability, physical impairment, and sensory impairment, that necessitate complex and ongoing support.

Ramachandran and Justice (2019) defined multiple disabilities as the concurrent presence of two or more substantial impairments in an individual, which results in extensive support requirements across multiple functional domains. These may include a variety of conditions, including neurodevelopmental, physical, sensory, medical, and/or emotional-behavioral, that necessitate coordinated service delivery systems and integrated intervention strategies. The presence of two or more disabilities that impede an individual's capacity to learn and function independently is defined as multiple disabilities by Turnbull, A., Turnbull, R., Wehmeyer, M. L., and Shogren, K. A. (2020). These disabilities may encompass a diverse array of health conditions, sensory impairments, physical disabilities, and intellectual disabilities. Multiple disabilities are defined as the simultaneous presence of two or more impairments or disabilities that significantly affect an individual's learning, development, and functioning. The classification of disabilities may include intellectual, sensory, physical, and health-related limitations. Hewitt, A. S., & Heller, T. (2016).

In addition to limited or repetitive patterns of behavior, interests, or activities that appear in early childhood, autism spectrum disorder (ASD) is characterized by persistent challenges with social communication and engagement. (American Psychiatric Association, 2022). Given the variety in ASD, people might run into varying degrees of difficulties in several spheres, including sensory processing, cognitive capabilities, language acquisition, and adaptive functioning capacity (Lord et al., 2020). The fact that some people may require significant help in their daily lives while others may show amazing skills in particular domains, such as pattern recognition, memory, or concentrated interests highlights the need to know ASD as a spectrum instead of a single condition (Lai et al., 2020).

Furthermore, Attention-Deficit/Hyperactivity Disorder (ADHD) is a neurodevelopmental disorder that is frequently encountered. It is distinguished by persistent patterns of impulsivity, hyperactivity, and inattention that impede daily functioning and development (Faraone et al., 2021). These symptoms typically manifest before the age of 12 and can be present in a variety of combinations, resulting in three primary presentations: predominantly inattentive, predominantly hyperactive-impulsive, or combined type. Academic, social, and vocational functioning as well as other aspects are much affected by this kind (Cortese & Coghill, 2018). Studies indicate that environmental and genetic elements both impact ADHD; evidence points to many brain networks, including those related to executive functioning, reward processing, and attention control. This may lead to difficulties with task completion across the lifetime, organization, and self-regulation across the board (Franke et al., 2018).

Children under the age of five who show significant delays in reaching age-appropriate milestones across multiple developmental domains, including gross/fine motor skills, speech/language, cognition, social/personal development, and activities of daily life, are diagnosed with Global Developmental Delay (GDD). The diagnosis necessitates performance that is substantially below the age-expected level in at least two developmental domains, which is typically defined as performing at least two standard deviations below the mean for chronological age (Myers et al., 2017). Healthcare providers must conduct comprehensive developmental assessments and implement early intervention strategies to optimize developmental outcomes, as some children may exhibit uniform delays across all domains, while others may exhibit varying patterns of delay, with some areas more severely affected than others (Mithyantha et al., 2017).

Impact of Caregiving

Taking care of children with many impairments presents moms with great emotional, psychological, and social difficulties. Because of the demanding nature of their work, research shows that these caregivers can suffer from increased degrees of anxiety, despair, and stress. For example, partly owing to caring responsibilities and a lack of resources, a 2017 research by Wang et al. indicated that moms of children with developmental impairments experienced more psychological stress than mothers of generally developing children.

Likewise, Lopez et al. (2023) found that the great demands of caring and the limited availability of suitable mental health support services cause Filipino moms to feel overwhelmed and lonely most of the time. This also fits results from Wong et al. (2016), who underlined the great degrees of psychological discomfort and emotional tiredness experienced by caregivers, especially in the absence of suitable social and professional support networks.

The stigma associated with disabilities frequently makes caring for others more emotionally stressful, especially in cultures with strong traditional family values. In their study of Filipino mothers' experiences navigating social stigma, De Guzman and Erfe (2021) showed how cultural norms of shame and shared humanity affect how they view and deal with their child's impairment. Similar to this, Lalvani (2015) discovered that mothers usually hide their child's illness due to social shame and judgment, which breeds guilt and social isolation. This theme is present in a variety of cultural contexts.

Despite these challenges, resilience is a recurring theme in caregiving literature. Walsh's (2016) Resilience Theory emphasizes the ability of mothers to harness personal and community resources to adapt to adversity. De Guzman and Erfe (2021) found that mothers of children with multiple disabilities often develop new coping strategies, deepen their sense of purpose, and derive strength from their caregiving roles. Gallagher et al. (2019) have complementary results showing that caregivers who actively participate in support groups and community networks report better psychological well-being and more ability to negotiate caring difficulties. Furthermore observed by Guralnick et al. (2020) moms who interact with community-based services and support networks generally report improved well-being, suggesting that social support is a vital component in building resilience.

Coping Strategies

Mothers with children with many impairments deal with great difficulties and use different coping mechanisms to control their responsibilities of care. Research by Kishore (2016) and John and Roblyer (2017) has shown that handling the demands of caring depends critically on acceptance, positive reframing, religion, support networks, and problem-solving. Still, one should also consider how socioeconomic status affects coping strategies and the availability of resources.

Many studies have looked at differences in parental well-being and coping depending on gender. Mothers in Spain showed higher rates of anxiety and depression than fathers; nonetheless, Vilaseca et al. (2015) found that good impressions of the child linked with lower levels of anxiety and depression in both sexes. spiritual activities. Some things that make it hard to cope are shame, not having enough money, and not getting good professional help. This year: Chukwu et al.

Several reviews of the literature and personal studies have helped us learn more about the stress, grit, and coping of moms of disabled children. Peer and Hillman (2015) discussed resilience's protective elements

such as social support, self-efficacy, acceptance, and a sense of meaning for events. They underlined the need for family-centered approaches and humanitarian campaigns. Examining the experiences of 27 immigrant mothers in Norway caring for children with complex medical requirements, Kvarme et al. (2016) found Mothers with challenged children in the Philippines may manage their responsibilities with assistance from their families, religious rites, and local networks. Like church and extended family, these personal support groups provide financial and emotional assistance. They help to reduce the tension of looking after others. Particularly significant was the concept of bayanihan, or group collaboration because neighbors and extended relatives provided mental support and assisted with care. Many mothers resorted to their religion for solace, managing their mental strain through religious organizations and routines.

Particularly for grandparents and siblings, social support networks are very vital for mothers in supporting them, relieving the mental and physical load of caring, offering respite, and thus promoting a good quality of living. But particularly in rural locations, professional help including counseling, special education, and healthcare services is often seen as insufficient or hard to get.

The examined research highlights the many coping mechanisms utilized by moms of children with several disabilities, problem-oriented, emotional, and meaning-making techniques among others. Development and evaluation of culturally sensitive, all-encompassing treatments that meet the particular difficulties and support requirements of mothers tending to children with many impairments in various environments is still much awaited. Professionals may help moms and their children be more resilient and healthy by knowing and supporting these coping mechanisms.

Supports Needs

Mothers of children with multiple impairments must overcome numerous challenges and seek various forms of assistance to meet their needs. Studies have revealed that women need knowledge, social support, financial help, and respite care. Alsayyari (2017), then Dewan (2018). Promoting positive results for children with special educational needs depends mostly on parental participation. Dewan (2018) and including mothers in intervention planning guarantees the success of support initiatives. Smith & Elder, 2015.

Mothers of children with specific impairments, such as autism spectrum disorders and cerebral palsy, face unique psychological challenges and require different forms of support. Alaei and associates (2015). Studies have shown obstacles and support requirements associated with these disorders, societal stigma, financial pressure, and lack of assistance. Casagrande and Ingersoll (2017) have noted unmet needs in the United States in areas like information, respite care, and parent training.

Moreover, cultural aspects significantly influence how Filipino women view support and caring. Shared identity and communal cooperation are the cornerstones of Filipino compassion as well as emotional and social resilience. However, these cultural standards by themselves are unable to satisfy the complex needs of mothers raising children with various disabilities. The absence of institutionalized services and governmental policies that meet the requirements of children with various impairments demonstrates the limitations of relying solely on unofficial support networks. Stated by Lopez et al. (2023).

Religion has significant importance in Filipino culture, and many mothers get comfort and strength from it. De Guzman and Erfe (2021) assert that religious perspectives may assist with both psychological and pragmatic challenges. Many mothers seek support, guidance, and a feeling of community via church groups or religious organizations. This cultural element showcases the spiritual power of Filipino caregivers, yet it also emphasizes the need to supplement these informal networks with more organized and structured assistance.

Furthermore, government support systems such as mental health care, social assistance programs, and health care services are required, but they are not always sufficient or easily accessible. Manalo and Tan's (2022) research revealed that women heavily depend on their extended families and religious communities, yet they frequently face challenges in obtaining professional medical treatment and additional educational support. The lack of governmental support systems aggravates the stress of parenting as people have to take care of their children without much outside help.

Mothers in rural areas deal with additional challenges, including not being able to afford medical treatment, living far from medical facilities, and ignorance of the available options. Services that are more coordinated and easily accessible are required to better satisfy the needs of mothers and their children with different impairments. Ocampo et al. (2020)

METHODOLOGY

This study followed a case study approach within a framework for qualitative research. Cohombs, 2022 Using a case study as a research technique helps one to fully grasp a modern issue or occurrence within a given context. Aimed at revealing insightful analysis of real-world events, a case study is an in-depth investigation of a person, company, or event. This design is appropriate as it gathers information about the experiences of a mother raising a child with multiple disabilities.

Key Informants. The informant of this study was a parent (mother) of an 8-year-old child with multiple disabilities.

Data Collection. For this case study, the researchers used a semi-structured interview to collect data regarding the experiences of parenting a kid that has multiple disabilities. We modified the research questions in this case from related studies like Laufer's (2017) Raising a Child with a Disability: Coping Mechanism and Support Needs.

Research Design. This study implemented Yin's qualitative descriptive single-case research from 2003. Creswell (2014) defines this as a design in which the researcher conducts a comprehensive examination of a program, event, activity, process, or one or more individuals. This method addresses the research objective of identifying the challenges faced by mothers who are responsible for the care of children with multiple impairments and identifying the coping mechanisms and support networks that these women employ. The researchers would like to describe the experiences of a mother raising a child with multiple disabilities and her coping mechanisms and support needs.

Participants of the study. This study investigates a mother who is the primary caregiver for a child with Level 1 Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder, and Global Developmental Delay. Purposive selection ensured that the respondent met the specific requirement of having personal, daily care responsibilities. Her individual experiences will provide important insights into her coping mechanisms, the challenges she encounters, and the support she requires. This study seeks to provide a comprehensive assessment of each respondent's life experience, focusing on the patience and natural resilience necessary to nurture a kid with multiple needs.

Sampling Procedure

This study employed purposive sampling to select the participants. Purposive sampling is a non-probability sampling method where the units of investigation are selected by the investigator. According to the specific criteria set forth, the participant was identified using school records and recommendations from a special education teacher. First a screening interview was conducted to ensure the selected candidate felt comfortable talking about her personal experiences and could clearly present them. Once a qualified candidate is chosen, a thorough knowledge of the goals, techniques, and ethical concerns of the study will be provided before receiving her informed consent to participate. The team effectively employed limited resources to collect an important amount of data through the utilization of this sampling strategy. The selected participant was identified to provide important knowledge, experiences, and perspectives relevant to the study through purposive sampling. The insights obtained from this participant would significantly enhance the understanding of the research problem.

Research Instrument

To investigate the experiences, coping mechanisms, and support needed by the mother who is raising a child with multiple disabilities. This study utilizes eight adapted interview questions from Laufer's (2017) study, that will be delivered during a 60-90-minute semi-structured interview. The researchers follow the rules that Creswell and Poth made for qualitative study (2018). The answers will be recorded on tape and then translated and typed up with the help of a professional. The study will look at moms' experiences in several important areas, such as resilient factors, coping strategies, support system use, and the processes of change. The research method, which is based on interpretative phenomenological analysis by Smith and Osborn (2015), includes listening to and reading transcripts of interviews to track down important themes.

Data Gathering Procedure

The data-collecting approach of this research will consist of several phases that ensure an extensive examination of the life experiences of the participants. We showed the subject a consent form before the interview to obtain informed consent. The permission form asked the participants to authorize participation in the interview and described the objective of the data collection. The participant received assurances that her identity would remain private and under protection.

Second, the participant chooses a comfortable environment for the interview. We employed eight open-ended questions, drawing inspiration from Laufer's (2017) *Raising a Child with a Disability: Coping Mechanisms and Support Needs*. The mother found it challenging to manage her hyperactive child, social situations, her personal and family responsibilities, and her child's ongoing medical and therapy needs. The mother faced personal challenges such as initial confusion, emotional stress, loneliness, acceptance of the illness, and marital issues. These problems show that caring for someone has many sides, including mental, physical, and financial ones.

We handled the audio-recorded interview and all other obtained data with the utmost confidentiality to ensure its safety. We concealed, safeguarded, and kept the identities of the participants anonymous throughout the entire research procedure. Only the approved researchers who participated had access to the safely stored data. This study aims to analyze a woman who serves as the primary caregiver for a child with Level 1 Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder, and Global Developmental Deficit Disorder.

Ethical Considerations

This study focuses on ethical consideration in maintaining confidentiality and guaranteeing protection of the respondent's privacy. The informant was approached for her informed consent first, ensuring she was fully briefed on the study's objectives. Throughout the data collection process through the interview, respect for privacy was maintained to create a comfortable environment for the participant to share her experiences. Assuring the anonymity of their identities in any publications or presentations. With these ethical considerations, we could prevent potential harm and protect gathered information from unauthorized access to preserve the integrity of the research.

Results

Inspired by interpretive phenomenological analysis (IPA), the narrative analysis explores the participant's actual experiences as a parent of a kid with many disabilities. It emphasizes her difficulties, coping techniques, and support systems. The evolving topics are listed here:

1. Discovery and Adaptation

Here are some of the transcribed responses of the participants.

“Yung mga sinasabi nila hindi ko naiintindihan. Sarado pa ang utak about sa mga ganoong bagay kasi hindi ako aware sa mga ganyan”. “ang alam ko lang na hyper siya”

Translation: "I don't understand what they're saying. My mind remains closed to such matters due to my lack of awareness. "My only knowledge is that he is very energetic." This initial confusion correlates with the results of Young et al. (2020) about the challenging transition stage parents have while handling their children's developmental issues.

“One month, gabi gabi umiiyak ako tapos, kasagsagan yun nung time na unti unti mo palang pag-aralan ang intindihin ang sitwasyon ng bata” para akong mabaliw nun Ma’am dahil sa stress, isip ng isip.

Translation: For a month, I cried every night, and then, at the height of that time, you were just slowly learning to understand the child's situation," Ma'am, I felt like I was going crazy because of the stress, thinking about it. This experience mirrors findings from Pérez-Marfil et al. (2021) regarding the psychological impact on primary caregivers during the diagnosis period.

“Pero nung napa Assess ko na, doon ko na medyo maintindihan, nung pina-intindi sa akin ang result.

Translation: "But when my kid was assessed, I understood a little bit, when they explained the results to me."

May mga parents na akong nakakausap na may mga anak rin na merong special needs katulad ng anak ko, then ang instructor na nag gaguisakin, then nag start na ako mag search, gumamit ng multimedia para mas maintindihan ng sitwasyon ng anak ko."

Translations: "I've talked to parents who have children with special needs like my child, and the teacher who guided me, then I started searching, using multimedia to better understand my child's situation."

During the session, a mother gradually learns about her child's impairments. She first did not know about her child's disabilities. The diagnosis caused uncertainty and concern even if one took the stage of development of the kid into account. The mother was surprised and confused herself, but she finally embraced the diagnosis. Important events included the early findings, concerns over iPad use, professional intervention, an official diagnosis of autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), and generalized developmental disorder (GDD).

The participant initially experienced emotional conflict and confusion after learning her child had a disease. Her path of insight started with tests and talks with other parents in the same circumstances. Bizzego et al. (2020) claim that lack of resources causes major difficulties for carers in underdeveloped nations, which fits the participant's first sentiments of being unprepared and unsupported. Her ultimate acceptance emphasizes how peer support and education help to build resilience (Walsh, 2016).

2. Daily Challenges in Caregiving

Here are some of the transcribed responses of the participants.

"Nahirapan kami sa finance. Sa budget namin ngayon, humihingal kami, gumagapang kami. Daddy niya lang ang may work kasi ako full time ako sa bata at my magasto pa ang Therapy, mga kailangan rin namin sa bahay".

Translation: We have financial troubles. With our budget now, we're struggling, we're crawling on the budget. Only his dad has a job because I'm full-time with the child and there's still money for therapy, we also need things here at home."

"Minsan sinasabi ko nalang sa kanila na kahit kumain nalang tayo na walang ulam" basta makakain lang tayo" Translation: "Sometimes I just tell them that even if we eat without a side dish, "as long as we can eat"

- "It's hard because therapy costs a lot, and sometimes we just make do with what we have for food to prioritize Kid's needs."

Translation: It's hard because therapy costs a lot, and sometimes we just make do with what we have for food to prioritize Kid's needs." Financial hardship emerged as a significant challenge, consistent with findings from Tigere and Makhubele (2019) regarding economic challenges faced by primary caregivers.

"Isa pa ang nahihirapan ako kapag nag tatantum siya pero hindi ko siya maintindihan. 'takot ako' baka masaktan ko siya kapag nag tantrum siya kasi hindi ko makontrol ang emotion ko. Gusto ko malaman paano maging kalmado para sa kanya kasi ayoko ko siyang saktan (pisikal)

Translation: "Another thing is that I have a hard time when he has a tantrum and I don't understand him. I'm 'afraid' that I might hurt him when he has a tantrum because I can't control my emotions. I want to know how to be calm for him because I don't want to hurt him (physically)." This aligns with research by Bizzego et al. (2020) regarding the complex challenges faced by caregivers in developing nations with limited access to support resources

The mother experienced difficulties with managing her child's hyperactivity and social interactions, while also balancing caregiving with personal and family responsibilities, sustaining therapies and healthcare needs.

Personal challenges covered initial confusion, emotional stress, feelings of isolation, acceptance of the diagnosis, and marital tension. The challenges underscore the multifaceted dimensions of caregiving, which include emotional, practical, and financial components.

Financial strain was a recurring issue, with therapy and medical needs placing a heavy burden on the family's budget. Reflecting results by Reyes and Paragas (2019), which highlight the financial challenges experienced by carers of children with various impairments, the participant frequently gave her child's needs priority above personal or family costs. Emotional difficulties include social contact and controlling outbursts additionally hampered caring. The research conducted by López et al. (2023) highlights the emotional burden of caregiving in environments with restricted access to mental health resources.

3. Coping Mechanisms

I joined Facebook groups for Autism (Autism Philippines). Aking isinasagawa, gabi-gabi ako'y nagbabasa, sapagkat dito maraming nagtatanong at maraming sumasagot, nagkakaroon ako ng ideya at mas nauunawaan ko na ang kalagayan ng aking anak.

Translation: "I became a member of the Facebook groups for Autism (Autism Philippines)." I do that, every night I read and read because there are many people asking questions, many people answering, I get ideas and I understand my son's situation better"

The participant employed multiple coping strategies, consistent with the multi-faceted approach identified by John and Roblyer (2017). Her engagement with online support groups and information seeking through social media ("I joined the Facebook groups for Autism") demonstrates the modern adaptation of traditional support systems, as noted by De Guzman and Erfe (2021).

"Nakikipag-usap rin ako sa mga parents na merong anak na may special needs". Lalo na sa teachers. Minsan naman, kapag stress na talaga ako ay kumakain sa labas kasama friends, talk with friends. Punta ako sa salon, manicure, pedicure, massage at nagpapa ear candling.

Translation: "I also talk to parents who have children with special needs." Especially teachers. Sometimes, under stress, I dine out with friends and chat with them. "Speaking with other parents gave me ideas and helped me realize I wasn't alone," says the salon's manicurist, who also does ear candling.

Translation: "Talking to other parents gave me ideas and helped me realize I wasn't alone."

Important coping strategies turned shown to be self-care activities involving personal care and social outings: "Sometimes I dine out with friends and chat with them when anxious. I go to the salon..." This corresponds with research on the need of self-care in preserving carer well-being published by Gallagher et al. (2019).

"When I see him make even small progress, it makes all the effort worthwhile."

Translation: "Even a small bit of progress he makes makes all the effort worthwhile."

These techniques underline her adaptability and fortitude in negotiating her path of treatment.

The participant found courage in small achievements such as her child's development achievements and social interactions. She obtained her perseverance mostly from her identity and aspiration as a mother. This

demonstrates the transformative potential of compassion, which transforms challenges into opportunities for growth and satisfaction. She also had difficulties due to her child's health; yet, she used a variety of coping mechanisms, including spiritual, practical, and social methods. She established a support structure that included her kindergarten teacher, other parents, educational resources, professional therapeutic assistance, and independent research.

The mother used many coping mechanisms such as; emotional processing, open communication, professional support, therapeutic services, and treatments. Despite limited means, she acquired advocacy skills, and better communication, and gave treatment priority. The story stresses the significance of a good system and of asking for assistance when required. The participant took care of herself, asked parents and instructors for guidance, and joined internet support groups. Celebrating little accomplishments and positive reframing kept drive intact. As Vernooij et al. (2019) pointed out, the mother's proactive attitude to recognizing and handling her child's demands was clear in problem-oriented and acceptance-based coping strategies.

4. Support Systems

The mother built a support system that included kindergarten teachers, parents who were going through similar things, teaching tools, personal study, and professional treatment help. Institutional support systems, such as therapy and school-based solutions, were used but weren't always effective because of costs and access. Her burden was lessened in great part by unofficial help from family and neighborhood networks.

- When I am confused, "Prayer" is my tool; I consult the Pastors. Talk to them about this.

My one line of action when I'm confused is asking the Pastor for a prayer. I share my problem with them.

The participant's experience demonstrated the interaction between official and informal support networks. Her reliance on religious support ("Prayer is the only thing... I asked for a prayer over to the Pastor") is reminiscent of the cultural aspects of Filipino caregiving that Lopez et al. (2023) noted, where caregivers primarily depend on religious organizations.

Ang Teacher niya, maraming impormasyon na sinabi regarding sa sitwasyon ng anak ko. Napaka understanding.

Translation: His instructor provided me with a lot of very helpful material and was quite sympathetic.

This remark is consistent with the results of Manalo & Tan (2022) on the need for educational help in the Philippines for children with several impairments.

This subject underlines how official and informal assistance interact to improve the quality of care given. Stress-related to caring was much reduced by support systems. Informal networks include family and religious groups to enhance official institutions like therapy and school-based treatments. However, limits on cost and accessibility reduced the value of official help. This result is consistent with the research of De Guzman and Erfe (2021), which emphasizes the need for informal networks in caregiving situations without institutional assistance.

Findings

The research reveals a complex mechanism of handicap acceptance, acknowledgment, and adaptation within a family context. Beginning with a lack of awareness in early infancy, the process moves to other diagnoses including ASD, ADHD, and GDD, and is entwined with complex parental emotional experiences. With tension, anxiety, and spiritual coping mechanisms, the process consists of going from denial and ambiguity to eventual acceptance. It is important to build strong support systems including peers' help as well as educational experts. Family interactions change significantly, marked by early marital strife, poor communication, and financial burden from medical treatments. To empower carers and enhance their well-being, future initiatives should give financial help, and respite care top priority as well as educational programs.

The studies expose a difficult path of disability discovery, acceptance, and adaptation within a familial environment. It starts with early childhood ignorance and proceeds to many diagnoses including ASD, ADHD, and GDD, and is entwined with difficult parental emotional experiences. The process consists of moving from denial and uncertainty to slow acceptance, tension, worry, and spiritual coping strategies. Development of efficient support networks including peer assistance and educational professionals is very vital. Family dynamics change dramatically from first marital conflict, poor communication, and financial demands from therapeutic procedures. Active information searching, developing support networks, interacting with professional services, and keeping spiritual practices help one to be in adaptation.

The study emphasizes the emotional trip parents of children with many impairments take, which is shaped by professional support systems—particularly in school environments. Diagnosis and continuous help depend much on teachers and experts. Managing everyday tasks depends on family dynamics and support systems; parents create different coping mechanisms but they are not enough. The research underlines the need for early intervention and thorough support services as effective management calls for a whole strategy including educational experts, healthcare providers, family members, and peer support networks. Emphasizing the need to integrate professional help with personal coping methods, this diverse support system addresses both emotional and pragmatic challenges. The findings reveal how dynamic challenges, coping strategies, and support networks interact depending on the Resilience Theory (Walsh, 2016) and the Family Stress Model (Boss, 2002). This emphasizes the need for all-encompassing treatments addressing the social, psychological, and economic aspects of giving therapy. One may be better adaptable through proactive knowledge acquisition, developing support networks, including professional services, and preserving spiritual habits.

The study emphasizes the emotional experiences of parents of children with various impairments, developed in particular educational environments under the influence of professional support networks. In evaluation and ongoing support, experts and teachers are essential. Navigating daily challenges depends on family bonds and support networks as parents have different coping mechanisms. The study emphasizes the importance of early

The research emphasizes the journey that parents of children who have multiple disabilities, formed by professional support systems, especially in schools. Effective management calls for a complete plan including medical professionals, family members, educational specialists, and peer support networks. This emphasizes hence the need for early intervention and thorough support services. This intricate support system emphasizes the need to combine professional help with personal coping strategies to handle emotional as well as pragmatic problems. In line with the Family Stress Model (Boss, 2002) and Resilience Theory (Walsh, 2016), the outcomes show the dynamic interplay among challenges, coping strategies, and support systems.

This underlines the need for comprehensive solutions including the social, psychological, and financial sides of healthcare components of medicine.

Recommendation

A multi-faceted strategy is advised to help families with children with various impairments, including healthcare professionals, educational entities, family assistance agencies, lawmakers, parents, and community organizations. Healthcare professionals must establish explicit communication protocols and start early screening programs, while educational institutions should improve teacher training and develop efficient parent-teacher communication mechanisms. Policymakers must provide funding for special education services, execute community awareness activities, and institute early intervention programs, while family support services should focus on counseling, spouse education, and awareness among extended family members. Parents have to sustain transparent contact with specialists, pursue expert help, engage in support networks, and actively participate in educational programs.

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