POSITIVE AND NEGATIVE PARENTAL ATTITUDES FACING OF CHILD’S DISABILITY

INTRODUCTION

The term “attitude” appeared for the first time in psychological literature. It was defined by Herbert Spencer and Alexander Bain (Strelau, 2002). The concept of “parental attitudes” appeared in the literature over 30 years ago, although the intensification of research in this area is evident in the last decade. In Polish pedagogical and psychological literature, the term of parental attitudes is defined as activities directed towards the child. In the approach, there is a clear emphasis on the emotional aspect of the attitude, referred to as the emotional attitude of the person to a specific unit. Defining attitudes vary due to the fact that researchers point to equal components of parental attitudes.

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THE THEORETICAL MEANING OF ATTITUDES

Every single parent has a different attitude towards someone or something. Its character depends on our attitude. “An attitude can be coming up from the emotions experienced in the past in relation to its object, from the beliefs of a man about his properties and his own behavior towards this object” (Strealau, Doliński, 2008, p. 269). From an early age, people learn on the basis of observations to learn about the world or specific types of behavior. Parental attitudes that are interesting to us W.W. Szewczuk (1998) called an integrated set of attitudes and ways of acting towards a child, which manifests itself as internalized in individual behavior and with the life of an individual. Parents’ attitudes towards children depend on their attitude to themselves, others, norms, and values. Children imitate adults. Proper parental attitudes give the child the opportunity to acquire socially accepted behaviors. In the literature of the subject, especially social psychology, three components of attitude are distinguished:

- emotional component – it is showed in descriptions and terms of a child, in the mood of speech, but also in non-verbal behavior, the way of speaking, gestures, and how they are passed on to a child with a disability is important. This component is one of the most important because it sets the type of behavior of parents;
- cognitive component – this symptom of attitude refers to information about a child with a disability and their regularity. This has a special resonance in opinions and views about the child;
- behavioral component – determines the action of parents towards the child with disabilities, including how parents are able to engage in these lives. If these actions are recorded, they can trigger specific types of interaction between the child and the parent (Bonar, 2008).

TYPOLOGY OF PARENTAL ATTITUDES

How do parental attitudes develop? Why do parents behave in a different way to their children? L. Kanner, A. Roe, M. Ziemska, M. Plopa, are some couple of many authors who have attempted to present parental attitudes. The authors referred to the typology of attitudes with raising a child and the functioning of the family environment, which plays a particularly important role in the context of the parents’ attitudes towards their child with a disability. One of the most popular classifications of parental attitudes made Maria Ziemska, who pointed out eight parental positions by classifying them as appropriate and inappropriate. According to the above classification, among the correct parental attitudes were the following:
1. **The attitude of acceptance** – it is the adoption of a child with all its dispositions, features of the external appearance, abilities and possibilities in some areas, and restrictions in others. Accepting parents show their child’s approval and sympathy, and their contact with him makes them happy.

2. **The attitude of cooperation with a child** – it manifests in a parent’s interest in playing with a disabled child, interacting with him. In accordance with the child’s development, parents involve them in household and family matters.

3. **The attitude of giving reasonable freedom** – it is in providing the child with even greater, rational freedom. With the development of the child, his physical independence appears from the parent, a growing psychic bond between the child is clear. The increased scope of freedom does not weaken the parent’s authority and they are still able to guide it as needed.

4. **The attitude recognizing the rights of the child** – this attitude excludes both underappreciation, as and overestimating the role of the parent in the family. The attitude of a parent in this attitude is free. The above attitudes are related to the surrounding of a child with a disability, care for his needs, patience, understanding, and ease of contact, which gives the parent great satisfaction.

Many authors emphasize the existence of a strong relationship between the parental acceptance of a child with a disability and the proper development of his personality (Plopa, 2008). You can also indicate abnormal reactions of children as incorrect reactions of children to incorrect parents’ attitudes:

1. **Rejection attitude** – parents do not accept their child. They often redirect their care to other, substitute environments, and taking care of a child causes them aversion.

2. **Avoiding attitude** – the characteristic of this attitude is the limitation of warmth and closeness. Such behavior causes loneliness and withdrawal of the child.

3. **Overly protective attitude** – it leads into idealizing the child. The parent treats the child like a person who needs care without a break. He does not believe that the child will manage to be able to face any difficulty alone. The parent does not realize that the child has a need for autonomy and the manifestations of independence. The consequence of this is the passivity of the child, delayed emotional and social development, lack of initiative and various fears or strongly demanding attitude, uncritical look at self, unhealthy selfishness (Plopa, 2008).

4. **An excessively demanding attitude** – it turns out that the child’s abilities resulting from the development phase as well as its individual characteristics are not considered. In this attitude, the child is deprived of the opportunity to express his autonomy. The parent wants to shape a child according to a strictly defined and carefully planned pattern. He puts the child in exor-
bitant demands, he does not count with his real possibilities and abilities or his autonomy. The parent considers to be the authority in all matters, not tolerates opposition. This attitude results from the specific understanding of the child’s wellbeing by the parent. Excessive demands create personality traits such as lack of faith in one’s own strength, uncertainty, fearfulness, oversensitivity, difficulty concentrating (Pecyn, 1998).

5. **An inconsistent attitude** – the parental attitude towards a child depends on mood, wellbeing or other factors. Lack of stability in the conduct of the parent means that the child feels insecure, does not know what to expect from him (what was banned yesterday, today is allowed), there is no support in the parents. Therefore, he or her distances emotionally from parents conceals problems, reluctantly confides in them. Tries to seek support or emotional stability in his or her relationship. Consequences of educational attitudes. Mothers of children with disabilities are often overtired by performing their duties, they are often forced to give up their professional work or other personal plans (Plopa, 2008).

**THE METHODOLOGICAL CONCEPT OF TEST**

The research was of diagnostic and explanatory nature. It shows the attitudes of parents of children with intellectual disabilities presented including the division into positive and negative attitudes. The research was carried out in the Rehabilitation Center in Rusinowice. A total of 69 parents were examined. A questionnaire was used for the measurement. The following two fundamental research problems were formulated:

1. Which family systems based on positive relationships create parental attitudes?
2. Which family systems based on negative relations create parental attitudes?

The age of the children of the examined parents and the type of child’s disability are presented below.

![Figure 1. Age of child]

Source: author’s study.
The biggest is a group of six-year-old children — 25% and eight-year-olds — 23% and nineteen-year-olds — 12%. Other age groups are similar. The children of the examined parents are of different ages. The age range is wide. They are people from the third to the thirteenth year of life. Some of them are children, and some are adults.

![Kind of disability](image)

**Figure 2.** Kind of disability  
**Source:** author’s study.

The above graph presents the type of disability of the examined children, which are shaped as follows: the most among children suffers from Cerebral Palsy (MPD). This group is (63%). With Autism, Fetal Alcohol Syndrome-FAS and Mutism, 10% of children. Down syndrome presents 7% of children. The research group has a high degree of differentiation of disabilities.

**FAMILY SYSTEMS BASED ON POSITIVE RELATIONSHIPS VS PARENTED ATTITUDE**

Family systems are a set of elements connected with each other in such a way that they constitute a whole capable of functioning in a certain way. In the family system theory, one of the subsystems is parent-child. For a person, the characteristic position in the whole system considered are relationships but for parents, it will always be the child (Plopa, 2008). Positive attitudes can be seen as the free contact of the parent with a child, knowledge of needs, satisfying them. Parents who accept their children are closely related to interacting in different situations, such as fun, conversation. Parents who have adopted the right or positive attitudes accept their child, give them trust, give a reasonable freedom and interact with it.

Children needs are shaped depending on age, and limitations because of disability. Knowledge of the parent’s needs gives them the opportunity to satisfy them. The chart below shows whether the parents of children with disabilities are oriented to the needs of their children. When asked about the knowledge of the needs of your
child, parents in the majority of people because 57 know these needs. Not really, this is the answer given by 12 people. To this question, where the answer to the choice was ignorance of the needs, none of the asked persons answered.

![Figure 3. Do you know your child needs? Source: author’s study.](image3)

Knowledge of the needs of a child with a disability allows to eliminating the atmosphere of nervous tension. Ignorance of the problem of this dysfunction gives a sense of fear, uncertainty. “Parents of children with disabilities are not able to learn,
see the all therapists’ workshop, that is full of professional knowledge and skills” (Kielin, 2003, p. 77). Meeting the child’s needs can bring effects such as progress in development, positive the effects of rehabilitation and the sense of security they feel. In a family who knows the needs of their child, it provides a warm and kind atmosphere, a child with a disability develops the best (Szeligiewicz-Urban, 2008). In response to whether the surveyed parents strive to meet the needs of their children with intellectual disability, the answers are as follows: 99% of parents responded positively. One person answered in the negative, which means that the parent does not seek to satisfy these needs.

According to S. Kawula, parents who present positive attitudes to the child, have a very good chance of faster acceptance, because “the essence of the pedagogical aspect of implementing this function consists in conscious organization of the care process in the family according to the directions, methods, and principles conducive to educational achievement, in the case units deviated from the norm” (Kawula, 1998, p. 14). In the chart presented, the majority of respondents, or 65% (45 persons), accept the disability of their child. 35% of respondents answered negatively. In advocating for the above-presented answers, this situation means that the parents have accepted the attitude of acceptance. Parents accept their children with both their abilities and, above all, their limitations as well. Parents accept their children both with their abilities and limitations.

**FAMILY SYSTEMS BASED ON NEGATIVE RELATIONSHIPS VS PARENTED ATTITUDE**

The family as a system is a complex structure that consists of interacting. Groups and people sharing a story with each other share emotional experiences together and share a common bond. The phenomenon of emergence is the basic property of family systems. This phenomenon means that the family is a structure that forms an integral whole (Plopa, 2008).

![Figure 6. Answer “Do you…?”](source: author’s study.)
The results of the above graph present one of the negative attitudes – excessively demanding. For this attitude, the characteristic is a sacrifice to the child with disabilities a lot of attention and time. In this attitude, the parents match their child to the vision they have created. Children in the attitude adopted by their parents have limited freedom. Parents want to accelerate the child’s development at all costs. 51 parents give their child a lot of time and attention, and 16 parents have their own vision of the child to whom he wants to match the child. Only 2 respondents set requirements that exceed the child’s capabilities.

![Parent's expectation](image)

**Figure 7.** Parent’s expectations  
**Source:** author’s study.

The above data shows that the respondents are shaped differently about the needs of the children. The overwhelming number of respondents, 58%, puts high needs on their child. Very high needs are placed on children by 22% of respondents. 20% puts too little needs on their child. On the chart, the respondents present an excessively demanding attitude. Parents do not take into account the possibilities of their children resulting from their disability and individual characteristics. In this attitude, children are put out of their autonomy by their parents. As a result of limitations caused by disability, they can not make choices themselves.

![Describe relation with child](image)

**Figure 8.** Describe relations with child  
**Source:** author’s study.

The analysis above respondent answers indicates a typical feature of parents presenting an over-protective and protective attitude. Regular compensation for child’s disabilities may result in building incorrect contact with him. Parents should be familiar with the weaknesses of the health and life of the child, as well as believe in the
strength and abilities of their children. 59 respondents compensate for the disability of the child with presents, 6 parents show one of the features of an overly protective attitude by not placing any demands on the child. For 3 people see being with a child is difficult and tiring, one person has a problem with showing the child that is loved.

**CONCLUSIONS**

Based on the tests and the results it can be concluded that a variety of interactions occur between the parent and the child with intellectual disability. There are various factors and a life situation that affect ongoing relationships and typical behaviors.

Family systems based on positive relationships:

- In children, the needs are shaped by age and limitations due to disability.
- Parents of children with disabilities are oriented to the needs of their children.
- 57 parents know the needs of their children. 12 people do not know them. To this question, where the answer to the choice was ignorance of the needs, none of the persons asked answered.
- Satisfying the child’s needs can bring effects such as progress in development, positive effects of rehabilitation and the sense of security they feel.
- 99% parents strive to meet the needs of their children. One person answered negatively, which means that the parent does not seek to satisfy these needs.
- 65% (45 persons) accept the disability of their child. 35% of respondents answered negatively. Agreeing for the above-presented answers, this situation means that the parents have agreed with the attitude of acceptance. Parents accept their children with both their abilities and, above all, their limitations as well.

In addition to the positive attitudes adopted by the parents of children with intellectual disabilities, the analysis of research has shown that the majority of attitudes are negative attitudes.

- Parents take a negative attitude of parents – excessively demanding. 51 parents give their child a lot of time and attention, 16 parents have their own vision of the child to whom he wants to match the child. Only 2 respondents set requirements that exceed the child’s capabilities.
- Another characteristic feature of a negative attitude, presented in the analysis of examinations, 58% place high demands on your child. Very high demands are placed on children by 22% of respondents. 20% puts too little demands on their child. Among respondents, no one indicated that he organizes family life while excluding his disabled child. The answers indicate that parents of these children produce an incorrect picture of a child who deviates from the actual one.
Another negative attitude resulting from the analysis of research is an overly protective and protective attitude. 59 respondents compensate for the disability of their child with gifts. 6 parents present one of the features of an overly protective attitude by not setting any requirements for the child. It is difficult for 3 people to be with a child and tiring, and for one person the problem is to show the child that he is loved.

The analysis of the conducted research clearly shows that the parents of children with intellectual disabilities present negative attitudes. These attitudes are too protective and excessively demanding. Despite the care and parental love that children experience with intellectual disability, the results of the research have clearly indicated this. One can assume why this is happening. Caring for a sick child, or how to speak at work for an intellectually disabled person is greater than for a healthy child. Cases of children of parents taking part in the study are difficult, limiting their functioning. Then the parent takes control of the child by limiting his autonomy. Most often, the parent is unaware that if he or she carries out the child in the basic activities of everyday life, it can affect them negatively and thus limit the possibility of progression.

**BIBLIOGRAPHY**


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**Keywords:** disability, attitudes, positive and negative parental attitudes

**Abstract:** Parental attitudes are considered in a positive or negative context. Parents with correct attitudes have a greater ability to objectively assess the child as a result of an appropriate, moderate attitude towards him and the acceptance of his or her personality. Psychological research on erroneous educational attitudes determines the directions in which the behavior of the child may develop. Negative parental attitudes cause such strong and permanent damage to the child's moral and social development that the educational methods used by the school are no longer able to remove these distortions.

POZYTYWNE I NEGATYWNE POSTAWY RODZICIELSKIE W OBLICZU NIEPEŁNOSPRAWNOŚCI DZIECKA

**Słowa kluczowe:** niepełnosprawność, postawy, pozytywne i negatywne, postawy rodzicielskie

**Streszczenie:** Postawy rodzicielskie rozpatrywane są w kontekście pozytywnym lub negatywnym. Rodzice o prawidłowych postawach mają większą zdolność do obiektywnej oceny dziecka na skutek odpowiedniego, umiarkowanego stosunku do niego i akceptacji jego osoby. Badania psychologiczne na temat błędnych postaw wychowawczych określają kierunki, w których może kształtować się zachowanie dziecka. Negatywne postawy rodzicielskie wywierają tak silne i trwałe szkody w rozwoju moralno-społecznym dziecka, iż metody wychowawcze stosowane przez szkołę nie są już w stanie usunąć tych zniekształceń i wypaczeń.