

Coping With Stress For Mothers Who Have Children With Speech Delay

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ABSTRACT

Speech delay is a common developmental disorder in preschoolers aged 3 to 5 years, significantly affecting their cognitive, emotional, and social development. This study aims to explore the mechanism of *coping stress* applied by mothers of children with speech delays. This study uses a qualitative method, in-depth interviews were conducted with three mothers at Panglima Semesta Kindergarten, Medan Tuntungan. The findings showed that the *coping* mechanism of each mother was different, some used *emotion focused coping* and some used *problem focused coping*. Every mother also experiences obstacles such as the absence of support from family and difficult access to services.

Keywords:

Speech Delay, Coping Stresss Mother

1. Introduction

Children are a gift that God entrusts to parents. Children are also the next generation of the nation so that they continue to develop. Every child needs to get the best education for their growth and development from an early age. All parents definitely want the presence of children in their families. Parents also want their children to be born and have a body without any physical or mental disturbances. This is in line with what was said by (Munisa et al., 2022) Basically, every parent's desire is to have a healthy child, both physically and mentally. They hope that the child born does not have disorders or abnormalities, either congenital or disorders that occur during their development. They make various efforts to care for and raise children in healthy conditions. For this reason, parents need to observe the development of children's physical and mental abilities during their growth period. Parents have an important role in the growth and development of children. Parents must be ready to be the best role models and educators for their children (Widya et al. 2020).

Child development is one of the important aspects in their growth and development starting from an early age. At that age, there are several developmental aspects that need to be considered. Namely cognitive, motor, social-emotional, religious and moral development, as well as language development. Language and speech development is one of the important aspects of a child's growth that can reflect their health and cognitive and social development. Language is a way to communicate with others, so that it can produce information (Nofianti, 2021).

Children's speaking skills usually develop gradually according to their age. However, not all children experience optimal language development, so that speech delays appear. A developmental disorder that is often encountered in preschool-age children is speech delay or better known as *speech delay*. Speech delay is the main complaint that parents often worry and complain about to preschool teachers (Rosida et al., 2022). This phenomenon is increasingly found among parents, including in early childhood education environments such as in Panglima Semesta Kindergarten.

Children with *speech delays* are generally unable to reach milestones in speech development according to their age, such as difficulty understanding language, saying words, or communicating effectively. This speech delay disorder has an impact on children in developing social skills and when building social relationships with others (Nilawati and Suryana. 2018).

Speech delay refers to a developmental disorder that is common in children. Preschool-aged children aged 3 to 5 years show a wide range of language skills, with some experiencing speech delays. This can be seen as difficulty maintaining focus, slow response to questions, or inability to understand commands, indicating that each child's growth follows its own path (Ritonga, 2024).

The impact of *speech delay* itself where children find it difficult to express their desires and feelings to others, if it continues to occur, it will affect the development of emotions and feelings of the child himself, so that sometimes children are a bit difficult to put the right emotions in life with their environment, so that they are unable to absorb lessons, cognitive learning development is hampered, become a grumpy child, inability to speak clearly, and lack of vocabulary mastery that makes the child different from other children his age (Ardiansyah, 2020).

Speech delay in children can be caused by various factors, both biological, environmental, and psychological. Biological factors include neurological disorders or certain health conditions, while environmental factors include a lack of verbal stimulation from parents or caregivers. In addition, psychological factors, such as parenting that is less responsive to children's communication needs, also play a role in speech delays. This condition is often a source of anxiety for parents, especially for mothers who have a major role in accompanying the development of their children. As added by Yulianda (2019), *Speech Delay* in early childhood is influenced by several factors, namely; 1) Internal factors. Includes genetics, physical disability, neurological dysfunction, prematurity, gender. 2) External factors. Includes the order of children, physical disabilities, parental education, economic status, family functions, bilingual.

This condition can cause deep concern in parents, especially mothers. God's unitary and strong creature is the right nickname to describe a mother who is full of gentleness but strong, seemingly simple but extraordinary. There are hardly enough words to define a mother. The home is like a child before being born for nine months is the mother. The irreplaceable role of mothers makes them extraordinary (Sinaga, 2020).

Mothers who have children with speech delay often face various emotional and psychological pressures, such as anxiety, stress, and frustration. Stress is a state of pressure on a person, which can come from within or outside him (Mukhtar, 2021). According to (Hidayati and Harsono 2021), stress is a feeling of depression and mental tension experienced by every human being. Stress is divided

into two types, namely positive stress and negative stress. Positive stress can be an important factor in motivating a person, helping them adapt, and responding to the environment. On the other hand, negative stress can cause various problems, both biological, psychological, and social.

Stress experienced by mothers can stem from a variety of factors, including uncertainty about the child's development, social responses, and the need to accompany the child in therapy or other interventions. In this context, *coping* mechanisms or how mothers manage stress are very important to maintain their mental well-being and the quality of interaction with children. A *coping* strategy is an effort to manage a stressful situation, expand efforts to solve life problems and try to overcome or reduce stress (Saefudin, 2020).

In (Nadhiyatul, 2020) Lazarud said that *coping stress* is grouped into 2 types, namely *emotion focused coping* and *problem focused coping*. *Emotion focused coping* is an effort to control negative emotional responses that occur when facing problems or stress. In this case, *emotion focused coping* is divided into several types, namely: 1) adapting to the problems that occur, 2) staying away or not wanting to be involved, 3) responding to problems religiously or religiously, 4) rejection of problems by preoccupying themselves with other things, 5) acceptance of responsibility. The *problem focused coping* is the management of stress that focuses on the problems faced. *Problem focused coping* is divided into several types, namely: 1) seeking support to get information and advice, 2) making decisions directly, 3) analyzing every problem that occurs to get a solution.

According to (Nurul Lita and Handayani 2022), *coping stress* is an effort made to overcome, minimize, or reduce stressful situations. In line with that, (Andriyani 2019) explained that *coping stress* is the process of recovering individuals from the effects of stress, both in the form of physical and psychological reactions that cause discomfort. Thus, *coping stress* is an important step for individuals in dealing with the stress they experience. *Stress coping* or stress management strategies refer to the various efforts, both cognitively and behaviorally, that individuals use to deal with stressful demands. Every individual, including mothers and children with speech delays, has a different way of dealing with this stress.

The stress experienced by mothers in dealing with children with speech delays can have an impact on their emotional state and psychological well-being. Various *coping* strategies or self-adjustment mechanisms are carried out by mothers to overcome the stress that arises. Some mothers may apply *problem-focused coping* strategies, namely by looking for active solutions such as consulting professionals or providing additional stimulation to the child. Meanwhile, other mothers may be more likely to use *emotion-focused coping*, such as trying to accept the child's condition and seeking support from family or the surrounding environment.

In this case, the author conducted a study at Panglima Semesta Kindergarten related to mothers who have children with speech delays at the age of 3 to 4 years. In the results of interviews with several mothers, the researcher found two working mothers and one mother working as a housewife. From different work backgrounds, mothers experience various conditions in raising children who have speech delays.

Working mothers tend to focus on *emotion focused coping*, namely *denial*, and feel that their children are fine. This includes the rejection of circumstances so that the mother does not pay attention to the growth and development of the child and is more busy with the work she is doing. Meanwhile, housewives focus more on *problem focused coping*, namely finding out the causes and appropriate actions for their children who experience *speech delay*.

In this case, mothers also need various aspects of support to continue to be able to manage the stress they experience. Managing maternal stress or *Coping stress* is one of the important things to pay attention to because this affects the growth and development of the child who is cared for by the mother. Mothers will experience various responses, both negative and positive, when they find out that their child has a *speech delay*. Positive and negative feelings and responses from family and the environment affect *maternal coping stress*. Therefore, families, especially fathers, must continue to support in the care and development of children who experience speech delays.

Based on this phenomenon, this study aims to explore the *Coping stress* strategy applied by mothers who have children with speech delays at Panglima Semesta Kindergarten. By understanding the *coping strategies* used, it is hoped that the results of this study can provide insights in supporting the psychological well-being of mothers and optimizing children's development with speech delay

2. Methods

This study is qualitative because this study reveals and understands the phenomenon that occurs in *coping stresses* of mothers who have children with *speech delay*. This study aims to explain *the coping stresses* of mothers who have children with *speech delays*. In this study, there are two types of data, namely primary and secondary data. Primary data is research data obtained directly by researchers through *in-depth interviews* with determined informants (Sulung and Muspawi, 2024).

In order for the data obtained to be scientifically responsible, the validity of the data was checked in this study. The technique for checking the validity of the data used is the *triangulation technique*, namely by crossing information obtained from sources so that in the end only valid data is used to achieve research results (Susanto et al. 2023). The data analysis technique used in this study is an inductive analysis technique. The subjects in this study are 3 mothers who have children with Speech Delay with the condition of 2 working mothers and 1 mother as a housewife. The location of this research is located at Panglima Semesta Kindergarten which is located at Jalan Stella Raya No.130 Simpang Selayang, Medan Tuntungan District.

3. Results And Discussion

From the results of interviews conducted at Panglima Semesta Kindergarten, the researcher found *that the coping stress* process was different, both *emotion focused coping* and *problem focused coping* from 3 mothers who had children with *speech delays*. *Emotion focused coping* in mother I when told by the *daycare staff* where her child was entrusted that her child experienced *speech delay*, which is prone to rejection and *denial* of her child's growth and development. Mrs. I feels that her child has been fine without any problems in the child's growth and development. However, after being given an understanding by the *daycare staff* where her child was entrusted, it turned out that her child

was far behind in her language development. Mrs. I initially experienced rejection from the environment and family because her child could not speak. As a result of this negative response, Mrs. I felt embarrassed and withdrew from her environment. Mrs. I also sought various support from friends because she wanted to be noticed for what happened to her so that Mrs. I did not realize that her child also needed attention and appropriate action on her child's problems.

Emotion focused coping in Mrs. II tends to avoid and refuse, Mrs. II insists that her child is fine and she thinks that her child is naturally unable to speak even though *the daycare staff* where her child is entrusted tells the child's problem. Mrs. II only met her child at night because Mrs. II gave all her child's affairs to the daycare. Mother II turned out to be less concerned about the development of her child. When she realized that her child was experiencing speech delay, Mother II did not accept the condition of her child said to be speech delay, and she also occupied herself with other things such as being more busy working than focusing on her child's language development. As time went by, Mrs. II felt that her son did not speak and only cried. Mrs. II began to accept the child's condition with various supports and advice from her family so that Mrs. II felt responsible for the child's growth and development.

Meanwhile, mother III who works as a housewife tends to emotion *focused coping* to control herself to accept all the circumstances experienced by her child. Mrs. III responded to her problem religiously that everything that happened was qadha and qadar from God. Support from family is also one of the reasons why Mrs. III can accept her child who has a *speech delay* patiently and continue to strive to provide the right treatment for her child's growth and development.

In responding to the problem when knowing that their child has a *speech delay*, it is known that mothers I, mothers II, and mothers III respond in different ways. Mrs. I began to accept that her child experienced *speech delay* when her child's age condition continued to increase so she realized that her child could not speak like children his age. This made Mrs. I begin to accept and provide treatment such as consulting a pediatrician. Mrs. II began to accept her child's condition because of the support from her family, making her open to her child's condition. Mrs. II immediately took action and took her child for therapy. Meanwhile, Mrs. III immediately found out what the cause and the right action for her child was.

In this case, the initial response of these three mothers is different. Mother I and Mother II initially focused too much on *emotion focused coping* rather than *problem focused coping*, resulting in delays in handling their children who experienced speech delay with the condition of their children still in the treatment period and could only mention 1 and 2 vocabulary. Meanwhile, Mrs. III immediately focuses on problem focused coping by providing action to her child, so that her child who has *speech delay* continues to experience changes and can speak well. According to the results of research conducted by (Khodijatus 2022) which stated that mothers who focus on *emotion focused problems* on rejection and avoidance will feel more stressed because the problems they face are not handled.

Every mother who has a child with *speech delay* experiences its own obstacles. Mrs. I experienced obstacles in handling her child's language development because she lived far from the

treatment area for speech therapy. Mrs. I also experienced obstacles in education about speech *delay* children because she was too busy with her work. Meanwhile, Mrs. II was too busy to work, which in the end she had to entrust her child to daycare. Mrs. III experienced obstacles in adjusting activities and attention to her child who was *speech delayed* because she had a child who was still a toddler.

These three mothers have handling in managing their sters. However, in the process of managing stress, mothers will continue to strive to be able to regulate the emotions and pressures experienced by mothers. These three mothers believe that with the right treatment for their children will result in changes to the language development of their children. In fact, mothers who experience stress will know their strategies or how to deal with their own stress according to the conditions that occur.

4. Conlusion

The study revealed that mothers who have children with speech delays face significant emotional, cognitive, and social challenges. To overcome stress, mothers apply various coping strategies, both *emotion-focused coping* and *problem-focused coping*. Mother I and Mother II initially focused too much on *emotion focused coping* , resulting in delays in handling their children. Meanwhile, Mrs. III immediately focused on problem focused coping so that her child could quickly speak again.

Support from various parties is one of the things that affects mothers in overcoming the sters they experience. Both this support is in the form of attention or appropriate handling of the problems that mothers experience. Choosing the right coping is not only focused on overcoming the stress that exists in the individual but also in handling the problems that occur.

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