



Formal support – expectations of parents of children with disabilities

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Introduction. Parents of children with developmental disabilities receive many different forms of support, including formal support provided by professionals from different systems. *Aim.* The aim of this study was to examine the differences in expectations of the type of formal support by parents of children with developmental disabilities with regard to their sociodemographic characteristics. *Methodology.* In total, 152 parents participated in the study, out of which 63.8% were female and 36.2% were male. The participants' average age was 38 years. Data was collected using a questionnaire specifically designed for the purpose of this study, which is a component of a large-scale research study on early support provided to children with developmental disabilities and their parents. The first part of the questionnaire concerns sociodemographic characteristics, while the second part deals with the parents' expectations of the type of formal support. *Results.* The results of this study show that there is a statistically significant difference in the expectations of the type of formal support by the parents of children with developmental disabilities with regard to two sociodemographic characteristics, namely the self-evaluated financial wellbeing and the level of education. *Conclusion.* This study shows that parents with higher levels of education and better financial wellbeing have different expectations of the type of formal support than parents with lower levels of education and lower income. These differences should be, therefore, taken into account during the processes of planning and providing support.

Keywords: parents, children with developmental disabilities, formal support

Introduction

Families of children with developmental disabilities need support from the environment to be able to adequately respond to all the demands that

occur. Parenting support represents complex activities that include a number of measures aimed at different areas of parental activity (Camović, 2018).

Social support is a key concept in the study of family functioning and may include support from a spouse, support group, neighbors, friends, professionals, and/or grandparents (Milić Babić, 2012). Social support focused on the parents' needs strengthens their feeling of competence, which in turn allows improvement of child development (Keen et al., 2010). Parental competence increases the likelihood that the parents will treat their children in a way which allows optimal child psychosocial development (Trivette & Dunst, 2005).

Social support for parents implies the availability of resources for providing support both in everyday life and in crises (Dobrotić & Laklija, 2012). Parents' satisfaction with immediate social support can oftentimes help improve the quality of family life by improving the sense of security and strengthening family bonds between the members (Greer et al., 2006, as cited in Lovell & Mason, 2012). Kraljević (2011) points out that high-quality social support can help the improvement of parental competence and skills necessary to overcome the hurdles of parenthood. Social support to parents can be provided in both formal and informal ways. Informal support includes the social network of friends, family, and various sources of information (media, literature, the Internet). It is based on solidarity and emotional relationships. Moreover, it complements the support provided by the formal services (Žganec, 1995; Wall et al., 2001). On the other hand, formal support includes a network of professionals and legislation, which should efficiently and promptly meet the parents' needs (Redmond et al., 2002). Furthermore, formal support is defined as a professional relationship wherein the professionals provide support to parents based on experience and education (Jones et al., 2009).

Parents can intensively use informal sources of support because this does not violate the privacy of the family, as with the entry of professionals into the family home (Borges & Pereira, 2019). However, once parents feel that informal support is insufficient to overcome the challenges they face, they seek formal support from professionals. Vlah et al. (2019) stated that parents of children with developmental disabilities first seek support from informal sources when faced with a new situation. But since they encounter different challenges when seeking appropriate help, parents often start looking for support from formal sources. In accordance with this, Akister and Johnson (2004) have found that parents most often look for support in solving problems (71%), advice (57%), action (21%), and information (21%) from professionals. The availability of sources of formal and informal support can be a protective factor in the prevention of negative outcomes for individual family members (Milić Babić, 2019). The formal and informal support that parents of children with developmental disabilities expect can facilitate acceptance of the new situation and empower parents to make important decisions (Vučinić et al., 2022).

In a system that is so often focused on the disability itself, it is important to shift the focus to the strength of the family. Family ideas and opinions are important for improving collaboration with professionals and providing better service to the child because there is no effective early support without an established connection with the parents (McWilliam, 2010). Quality network of social support should be provided by different systems in the society: educational system, health system, and social security system, by cooperation with other members of the society, such as different associations and religious groups, along with others who partake in the development of a certain local community (Leutar & Oršulić, 2015).

Parents should actively participate in early childhood development services, alongside professionals and with the support of those who make policy and financial decisions. Also, it should be possible to flexibly combine work and family life (Milić Babić, 2019).

The high rate of involvement of parents and children in the support programs contributed to the fact that it was then that the children made the most progress (Moeller, 2000).

It is the responsibility of the system to adapt the types of support according to the expectations, needs, and backgrounds of the family.

Despite the fact that professionals and the general public frequently warn about the importance of the family environment for the upbringing of children, as well as the difficulties and challenges that modern families frequently face, very little is known about the types of formal support that parents receive, and the degree to which the received support meets the expectations of parents of children with disabilities. It is probable that the parents' expectations are largely associated with certain sociodemographic characteristics of the family.

The association between providing formal support and sociodemographic characteristics of the family has been studied through various research papers. However, the majority of those studies are focused on parents who do not have children with disabilities. As this study deals with some of the sociodemographic characteristics, it's very interesting to provide an overview of such studies. Pećnik (2013) states that parents from Croatia with a primary level of education, parents with middle socioeconomic status, and parents from Slavonia and Northern Croatia rarely choose professionals as the most desirable providers of support for parenting. There are relatively more fathers, parents with primary levels of education, and parents younger than 25 years of age that have no need for professional guidance. Addis and Mahalik (2003) report that there are clear gender differences which show that women are more likely to look for support than men. Research also shows that men are less likely to look for professional support than women when they are faced with difficult life situations (Addis & Mahalik, 2003; Lu & Argyle, 1992). As far as the level of education is concerned, research shows that parents with higher levels of education (BA or MA degree)

have thought about professional advice more than parents with primary levels of education. Parents who are more educated are probably more adept at finding new sources of information and are more focused on getting information about their child's disability and methods of working with their child. According to Pećnik (2013), parents of children with developmental disabilities, who are well informed about the existence of support services for children and parents, will use them more often. It is hypothesized that parents who are more informed about the services of early support are more likely to use that information to look for professional advice and support.

The main problem of this study is focused on the expectations of the type of formal support held by parents of children with developmental disabilities. The authors of this study were concerned whether there are any differences in expectations of the type of formal support by the parents of children with developmental disabilities with regard to certain sociodemographic factors (child's age, parents' gender and age, financial wellbeing, the level of education, and the place of residence). In this study, the type of formal support refers to the prompt communication of diagnosis and information on the child's health condition; providing information about the rights of the child and family and the ways to exercise those rights; referring parents and children to various support services and professionals; informing and educating parents to recognize child's strengths, abilities and needs; recommending treatments and methods of working with the child, and proposing individualized work with the child.

The aim of the study was to examine the expectations of the type of formal support held by parents of children with developmental disabilities with regard to the aforementioned sociodemographic characteristics.

According to that, it is hypothesized that mothers will have different expectations of the type of formal support needed by their children, as they are more involved in the process of providing the support than fathers. Furthermore, parents living in urban areas will have different expectations than those living in rural areas, as they have fewer available services in their local communities. Parents of older children will have different expectations as they already have a certain amount of experience in receiving support. Also, it is assumed that younger parents will have more information about the types of support because Internet sources are more available to them than to older parents, so their expectations are bound to be different.

Also, it is assumed that parents with better levels of education and better financial status have more available information about the needs of their children, as well as information about sources of support, new knowledge, and various types of training, and thus their expectations from the type of formal support will be different from parents with lower levels of education and lower financial status.

Methodology

The interest in examining this hypothesis arise from the assumption that there is a statistically significant difference in the expectations of parents of children with developmental disabilities regarding the type of formal support with regard to the parents' sociodemographic characteristics.

Hypothesis

A hypothesis can be put forward from the set research aim of this study:

There is a statistically significant difference in expectations of the type of formal support by the parents of children with developmental disabilities regarding sociodemographic characteristics: age and gender of the participants, self-evaluated financial wellbeing, achieved level of education, age of their child, and place of residence.

Sample

For the purpose of this study, a convenience sample of 152 participants (63.8% mothers and 36.2% fathers) was used. The participants were parents of children with developmental disabilities whose age range spans from newborns to school goers, coming from two counties in Croatia, Brod-Posavina County (68.4%) and Istra County (31.6%). The aforementioned counties were chosen according to the degree of development, with Brod-Posavina County being less developed than Istra County. Both parents from certain families partook in the study. The average age of the participants was 38 years ($M= 37.6$, $SD= 6.3$), and the majority of participants who took part in the study were between the ages of 31 and 40. As for the level of education, the majority of the participants achieved the high school level of education (55.9%), while the fewest participants (2%) had neither level of education achieved, i.e., they were classified as unskilled workers. What is more, 26.3% of the participants had an MA degree, 10.5% of the participants had a BA degree, and 2.6% had a post-graduate/doctoral degree. The same percentage of participants were with the primary level of education. Half of the participants were parents of children between six to eight years old (50.4%), and 40.8% of the children were diagnosed at the earliest age (up to one year of age). The majority of the participants had their own housing bought with a loan (38.2%), while some had their own housing bought without a loan (36.2%), and the fewest were those who were tenants (8.6%). More than half of the participants (60.5%) considered their housing arrangements to be adequate, whereas 4.6% considered their housing arrangements to be absolutely inadequate for living. The same percentage of the participants (46.1%) stated that they sometimes or never had financial issues, while 7.9% stated that they had serious financial issues. As it was mentioned before, both parents from certain families partook in this study Hence the number of parents is not equal to the number of children.

The majority of parents (91.4%) requested support from formal sources, and additional analysis revealed that 50% of parents with secondary school education and

37% of parents with higher education received formal support. Most parents under the age of 40 (49.3%) indicated that they received formal support. Regarding gender, 57.9% of mothers and 33.6% of fathers received formal support.

Research instrument

For the purpose of this study, which is a component of large-scale research on early support provided to children with developmental disabilities and their parents, a questionnaire intended for the parents of children with developmental disabilities was specifically designed – Questionnaire on informedness, satisfaction, and expectations of the early support for the children with developmental disabilities and their families (Šarčević Ivić-Hofman, Wagner Jakab, Kiš-Glavaš, 2015). The first part of the questionnaire was used to accumulate data about sociodemographic characteristics of the participants (gender, age, place of residence, employment status, level of education, marital status, number of children in the family, number of members of the household, housing arrangements, financial status, children's age, children's age when they were diagnosed, and the type of disability). The second part of the questionnaire collected data on: perceived social support, information, satisfaction and expectations of parents from early support services for children with developmental disabilities and their families.

The part of the questionnaire on formal support included the question:

“What type of support do you expect from professionals?” Possible answers were: prompt communication of diagnosis and information on the child's health condition; providing information about the rights of the child and family and the ways to exercise those rights; referring parents and children to various support services and professionals; informing and educating parents to recognize child's strengths, abilities and needs; recommending treatments and methods of working with the child, and proposing individualized work with the child.

From six offered answers, parents had the opportunity to choose three that suited them best. The results are shown as the total number of choices for each answer offered.

Procedure

The Ethics Committee of the Faculty of Education and Rehabilitation Sciences approved this study, and therefore, the study was conducted in accordance with the Code of Ethics of the University of Zagreb (2009). Data about the number of parents of children with developmental disabilities was collected from multiple sources, such as the Croatian Institute of Public Health, kindergartens, NGOs, and the Administrative Department for Health and Social Welfare. After receiving data on the number of children with developmental disabilities, the directors of preschool institutions and heads of non-governmental organizations received a request for the participation of parents of children with developmental disabilities who are involved in the services of their institutions in the research. They were also asked to forward the questionnaires and consent forms to the parents of children with developmental disabilities.

The purpose of the research was explained to all participants through a written consent form.

According to data obtained from professional services of preschool institutions and heads of non-governmental organizations, the authors sent 211 questionnaires to parents of children with developmental disabilities. Out of a possible 211 participants, 152 participants agreed to participate in the research and filled out the questionnaires. The deadline for completing the questionnaire was two weeks. The completed questionnaires were forwarded to one of the authors of the paper by preschool institutions and non-governmental organizations via e-mail or ground mail.

Data analysis

In order to test the assumed differences in the parents' expectations, the nonparametric *Chi-squared* and *Mann Whitney* test were used to test the set hypothesis of the study.

Results

Descriptive data on the expectations of parents of children with developmental disabilities regarding the type of formal support

In this research, parents stated their expectations about the type of formal support, which is shown in Table 1.

Table 1

Parents' expectations about the type of formal support

TYPE OF FORMAL SUPPORT	f	%
Prompt diagnosis	115	75.7
Information on children's and family rights	71	46.7
Referral to various support systems	80	52.7
Information and education on recognizing child's needs	36	23.6
Recommendations of treatments	73	48.0
Individualized work with the child	81	53.3

Descriptive data from the study indicated that 75.7% of parents expected *prompt diagnosis*; 53.3% expected *individualized work with the child*; 52.7% expected *referral to various support systems*; 48% expected *recommendations of treatments*, and 46.7% expected *information on children's and family rights*. Only 23.6% of parents expected *information and education on recognizing their child's needs*.

Results of testing differences in expectations of parents of children with developmental disabilities regarding the type of formal support with regard to sociodemographic characteristics

Mann Whitney test was used to examine the differences in parents' expectations of the type of formal support with regard to the *parents' and children's age*. Chi-squared test was used to examine the differences in parents' expectations with regard to different sociodemographic characteristics (*gender, self-evaluation of financial wellbeing, level of education, the place of residence*).

Table 2

Differences in the expectations of the type of formal support by the parents with regard to self-evaluation of financial wellbeing: Chi-squared test (N=152)

Formal Support	Self-evaluation of financial wellbeing												χ^2 (df=2)	p
	SFI*				OFI**				NFI***					
	No expectations		informed Ness		No expectations		informed Ness		No expectations		informed Ness			
f	%	f	%	f	%	f	%	f	%	f	%			
Prompt diagnosis	4	33.3	8	66.7	17	24.3	53	75.7	16	22.9	54	77.1	.61	.74
Information about children's rights	1	8.3	11	91.7	39	55.7	31	44.3	44	62.9	26	37.1	12.32	.00
Referral to the early support services	7	58.3	5	41.7	38	54.3	32	45.7	27	38.6	43	61.4	4.10	.13
Information and education about recognizing child's needs	10	83.3	2	16.7	48	68.6	22	31.4	58	82.9	12	17.1	4.31	.12
Recommendation of treatments	7	58.3	5	41.7	37	52.9	33	47.1	35	50.0	35	50.0	.33	.90
Individualized work with the child	8	66.7	4	33.3	33	47.1	37	52.9	30	42.9	40	57.1	2.34	.31

Legend: *Serious financial issues; **Occasional financial issues; ***No financial issues

Mann Whitney test showed that there were no differences in the parents' expectations of the type of formal support with regard to the age of the parents and the age of the child, and the results of the Chi-squared test showed that there were no differences in the parents' expectations of the type of formal support with regard to the parents' gender and the place of residence in relation to *the prompt diagnosis, information on children's and family rights, referral to the early support services, information and education about recognizing child's strengths, abilities and needs, recommendations of treatments, and proposals of individualized work with the child*.

The findings of this study indicated that there were statistically significant differences in the expectations of the type of formal support by the parents of children with developmental disabilities with regard to certain sociodemographic characteristics, such as self-evaluation of financial wellbeing and the level of education. The following parts of this paper present tables containing results that indicate a statistically significant difference in the expectations of the type of formal support with regard to the self-evaluation of financial wellbeing and the level of education.

The results of the Chi-squared test shown in Table 2 indicated a statistically significant difference in the expectations of the type of formal support with regard to *providing parents with information about the children's rights* ($\chi^2(2) = 12.32, p = .00$) in relation to the self-evaluation of financial wellbeing. The majority of parents with serious financial issues expected to be informed about their children's rights and ways in which they can use those rights.

Table 3

Differences in the expectations of the type of formal support by the parents with regard to the level of education: Chi-squared test (N=152)

Formal Support	The Level of Education												χ^2 (df=2)	p
	AD*				HSL**				PSL***					
	No expectations		Expectations		No expectations		Expectations		No expectations		Expectations			
f	%	f	%	f	%	f	%	f	%	f	%			
Information about children's rights	39	65.0	21	35.0	45	52.9	40	47.1	0	-	7	100.0	11.13	.00
Prompt diagnosis	7	11.7	53	88.3	24	28.2	61	71.8	6	85.7	1	14.3	20.25	.00
Referral to the early support services	27	45.0	33	55.0	43	50.6	42	49.4	2	28.6	5	71.4	1.48	.50
Information and education about recognizing child's needs	44	73.3	16	26.7	66	77.6	19	22.4	6	85.7	1	14.3	.72	.70
Recommendation of treatments	31	51.7	29	48.3	43	50.6	42	49.4	5	71.4	2	28.6	1.13	.60
Individualized work with the child	33	55.0	27	45.0	36	42.4	49	57.6	2	28.6	5	71.4	3.23	.20

Legend: *AD (academic degrees – doctoral degree, master's degree or bachelor's degree); **high school level of education; ***primary school level of education (includes unskilled workers as well)

The results of the Chi-squared test shown in Table 3 indicated a statistically significant difference in the expectations of the type of formal support with regard to *providing parents with information about the children's rights* ($\chi^2(2) = 11.13, p = .00$) and *receiving a prompt diagnosis* ($\chi^2(2) = 20.25, p = .00$) in relation to the parents' level of education. The majority of parents with academic degrees expected to be given prompt diagnoses from professionals. What is more, the results showed that all parents with primary levels of education expected to be informed about their children's rights.

In conclusion, according to the results, the following can be accepted: There is a statistically significant difference in expectations about the type of formal support of parents of children with developmental disabilities with regard to self-assessment of financial wellbeing and the level of education of the participants.

Discussion

The study was conducted using a sample of 152 participants (parents of children with developmental disabilities). The majority of participants were mothers. However, a certain number of fathers (36.2%) also took part in the study. The average age of the participants was 38 years, and the majority of the participants had a high school level of education, with an adequate income and financial wellbeing. The results show that the majority of the participants with serious financial issues expect the professionals to inform them about children and family rights and the ways in which they can use those rights (Table 2). Iversen et al. (2003) point out that parents of children with developmental disabilities express the need to be better informed about the systems of support services offered in the community, and Brajša-Žganec et al. (2011) state that insufficient information among parents is the result of the lack of an adequate early intervention network in Croatia.

The financial wellbeing of the family is of major importance because children with disabilities and their families receive most of the early support services from private clinics, which normally charge a fee for their services (Milić Babić & Leutar, 2013). It is to be expected that parents of children with developmental disabilities who are facing major financial difficulties will seek information about the rights that are regulated in Croatia, because realizing their rights could help to alleviate their already difficult financial situation. The problem is that information in Croatia is not systematically, up-to-date, and continuously regulated, but instead relies on the knowledge, information, and goodwill of the professionals that parents meet, or on the networking of parents who pass on information to everyone else.

Furthermore, the findings of this study show that all participants with lower levels of education expect to be informed about children's rights as a type of formal support (Table 3). Participants with lower levels of education and lower

income expect to be informed about children and family rights, presumably because they can use their rights from the social welfare system in various ways, such as: personal disability allowance, care and assistance allowance, the status of parent caretaker, psychosocial support, and early development support (NN 46/22). According to data from the Office of the Ombudsperson for Children (Ombudsperson for Children, 2019), parents are inadequately informed about their rights from the health and social care system, which can be exercised based on the degree of difficulty of the child, and also point to the lengthy duration of procedures for exercising a certain right. The family's capacity to provide appropriate support for the child's development improves as a result of the rights and services provided as part of early intervention (Ljubešić, 2004). The very first step in the process of becoming informed is parents' research of preferred information sources and their ability to find appropriate information when making decisions about their children. What is also required are service providers who have specific communication strategies and can recognize the parents' need for assistance (Tracey et al., 2018).

The findings of our study also show that participants with an academic degree(s) expect to receive a prompt diagnosis as a type of formal support (Table 3).

According to the findings, parents most often expect specialists to provide a quick diagnosis for their child. It can be assumed that parents will seek additional early support services based on the child's timely diagnosis, and that they will expect professionals to provide them with available information and practical assistance. We assume that parents with an academic degree(s) are better informed and thus more likely to seek information from various sources so that their child can be included in the diagnostic process as soon as possible. However, quite often, several years pass before the diagnosis is determined. A diagnosis provides a framework for understanding the child's difficulties and provides access to the support system (Chamak & Bonniau, 2013). Early diagnosis enables children to receive support services sooner. According to Jurin's research findings (2021), 53.4% of mostly highly educated parents of children with autism spectrum disorder stated that their children received a diagnosis within 6 months, while 24.8% of highly educated parents stated that their children received a diagnosis within a year. The author explains that because the parents were informed about the disorder and the location of the diagnostic procedure, the diagnostic process proceeded more quickly. Additionally, it was mentioned in line with our presumption that parents with higher levels of education are more knowledgeable about their child's difficulties as well as who to contact for support and diagnostic processes. Tway et al. (2007) reported similar findings, in which 66% of highly educated parents with higher socioeconomic status who were aware of their child's disorder reported waiting at least six months or a year (91%) from the appearance of suspicion

to the final diagnosis. Also, parents are more aware of the necessity of early support for the child and its positive effect on the child's development. Parents often notice the deviations in their child's development themselves, and find the age at which the child was diagnosed very important, so as to begin with the early support services as soon as possible, but also to be able to take the child's diagnosis on board (Midence & O'Neill, 1999).

Clinical practice in Croatia has shown that parents frequently seek diagnostics outside of their place of residence (UNICEF, 2018), further complicating their financial situation because, in addition to financing the diagnostic process themselves, they must also cover travel and lodging costs. Due to the lack of team cooperation or the uncertainty of the diagnostician, parents are often referred to a team treatment in larger centers in the Republic of Croatia, most of which are located in the capital, which is very time, organizationally, and financially demanding for families who live far away from the capital, especially in dislocated areas (islands).

Conclusion

The findings of this study indicate that the level of education and the self-evaluation of financial wellbeing show a statistically significant correlation with the expectations of the type of formal support held by the parents of children with developmental disabilities. Parents with an academic degree(s) are more likely to expect some type of formal support, such as prompt diagnosis, while all parents with a lower level of education expect some type of formal support, such as information about children and family rights and how to use these rights. The majority of parents with serious financial issues expect to be informed about children and family rights and the ways in which those rights can be realized. In order to realize the rights of children with disabilities and their families, the parents must be provided with prompt and verified information about the child's developmental profile, sources of information, available forms of support, information about their rights, opportunities for early and preschool education inclusion and inclusion in further education, along with the support in parenting. For all the aforementioned to be successfully realized, there must be cooperation between parents and professionals from different systems. So as to achieve a collaborative relationship, open and equality-based communication is necessary.

The primary goal of this study was to determine what parents of children with developmental disabilities expect from formal support, and certain guidelines emerged from this.

The guidelines refer to the following:

- provision of timely and comprehensible information about the child's condition (disorder) by professionals so that parents are informed in which services they should include the child,

- timely informing parents about the rights of a child with developmental disabilities and their family, with a focus on families with a lower socioeconomic status,
- obtaining a timely diagnosis so that a child with developmental disabilities can be included in early support services as soon as possible, which means providing more places and professionals who can provide quality diagnostics and are not centralized in the capital but are located in other cities and regions of Croatia,
- providing free early support services to parents of low socioeconomic status,
- investing in various programs at the local community level (workshops, playrooms, programs of non-governmental organizations) so that they are accessible to families with a lower socioeconomic status.

Parents' expectations about the needed forms of support provide important insight for professionals during the process of planning the support, which allows better ways of meeting the parents' needs. This approach improves the cooperation between parents of children with developmental disabilities and professionals and results in more efficient support.

Ensuring the conditions for the development of early support services opens up the possibility of more accessible and timely early support services in the local community. Prompt support and high-quality services help children with developmental disabilities to further their abilities and to partake in everyday life more easily.

According to the author's knowledge, there is not enough recent research related to social support, and there is insufficient research on parents' expectations of formal support, although there are recent studies on parents' expectations of informal support (e.g., Vučinić et. al., 2022). In the Ombudsperson for Persons with Disabilities Report (2021), in 2020, UNICEF presented the results of the first comprehensive "Analysis of Early Intervention Services in Croatia" conducted by the RISE Institute (USA) with the support of the Ministry of Health. According to them, 24169 children between birth and the age of five are potential beneficiaries of early childhood support services in Croatia, and only 1 out of 8 actually receives this service. These data show that not all children with disabilities are still included in early support services and open the possibility of further research in this direction.

Therefore, this study can be an incentive for further research across the entirety of Croatia or even further, so as to accumulate more precise data on the expectations of the formal support held by the parents of children with developmental disabilities.

The study has certain methodological limitations because the generalization of the results is limited by convenience sampling – the size and type of the sample. Due to the fact that the study covered only two counties

in Croatia, the representation of other counties cannot be commented on. Moreover, mothers are far more prevalent in the study than fathers, and the same goes for parents with higher financial status. Future research should also include other Croatian counties, fathers, parents with lower financial status, parents from urban and rural regions, and those who come from dislocated parts of the country.

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Formalna podrška – očekivanja roditelja dece sa smetnjama u razvoju

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Uvod: Roditelji dece sa smetnjama u razvoju primaju različite oblike podrške, a jedan od ovih oblika je i formalna podrška koju pružaju stručnjaci iz različitih sistema. *Cilj:* Cilj istraživanja bio je da se ispituju razlike u očekivanjima vrste formalne podrške roditelja dece sa smetnjama u razvoju, s obzirom na njihove sociodemografske karakteristike. *Metode:* U istraživanju su učestvovala 152 roditelja, od čega je 63.8% ženskog, a 36.2% muškog pola. Prosečna starost roditelja bila je 38 godina. Podaci su prikupljeni korišćenjem anketnog upitnika osmišljenog za potrebe ovog istraživanja, koje je deo šireg istraživanja o uslugama rane podrške deci sa smetnjama u razvoju i njihovim porodicama. Prvi dio upitnika odnosi se na sociodemografske karakteristike, dok se drugi deo bavi očekivanjima roditelja o vrsti formalne podrške. *Rezultati:* Rezultati ovog

istraživanja pokazuju da postoje statistički značajne razlike u očekivanjima roditelja dece sa smetnjama u razvoju o vrsti formalne podrške s obzirom na dve sociodemografske karakteristike, a to su samoprocena materijalnog stanja i stepen obrazovanja. *Zaključak:* Ovo istraživanje pokazuje da roditelji s višim stupnjem obrazovanja i boljim materijalnim stanjem imaju različita očekivanja o vrsti formalne podrške u odnosu na roditelje s nižim stupnjem obrazovanja i lošijim materijalnim stanjem. Ove razlike treba uzeti u obzir tokom procesa planiranja i pružanja podrške.

Ključne reči: roditelji, deca sa smetnjama u razvoju, formalna podrška

PRIMLJENO: 07.11.2022.

REVIDIRANO: 19.04.2023.

PRIHVACENO: 09.5.2023.