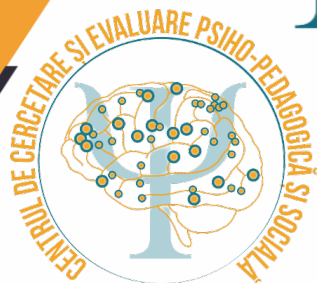




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## **Social representations and personality traits of parents of children with CES**

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**Abstract.** This paper explores the social representations and personality traits of parents of children with autism spectrum disorder (ASD). The study delves into the complex interplay between societal perceptions and the intrinsic personality characteristics of these parents, providing insights into how these factors influence their coping mechanisms and parenting strategies. Through a mixed-method approach, involving qualitative interviews and quantitative assessments using established personality inventories, the research captures the varied experiences of parents navigating the challenges of raising children with ASD. The findings indicate that parents exhibit a spectrum of social representations, ranging from viewing ASD as a distinct aspect of their child's identity to considering it a condition that necessitates specialized intervention. These representations are influenced by cultural, social, and informational backgrounds. Concurrently, the personality traits of the parents, such as resilience, openness, and conscientiousness, were found to have a significant impact on their adaptation to the demands of parenting a child with ASD. Moreover, the study highlights the correlation between certain personality traits and the propensity for parents to engage with various social support systems and advocacy movements. The research also identifies the need for tailored psychological support for these parents to bolster their mental health and well-being. In conclusion, the paper underscores the importance of understanding the subjective experiences of parents of children with ASD. It emphasizes that social representations and personality traits are crucial determinants that affect the parenting experience, mental health outcomes, and the overall family dynamics. This understanding is vital for developing effective support systems and interventions that are responsive to the unique needs of families affected by ASD.

**Keywords:** autism spectrum disorder, social representations, personality traits, parenting, resilience, coping strategies, family dynamics.



## **Introduction**

The project titled "Social Representations and Personality Traits of Parents of Children with Special Educational Needs (SEN)" stems from an initial academic assignment given in the first semester of the second year of university studies to student Roșu Cristina-Luiza. The freedom to choose the research topic was capitalized upon by addressing an issue of genuine personal interest. The initial investigative endeavor, entitled "Family Adaptation to the Presence of a Child with Disabilities," was inspired by observations of a known family, parents of a child with ADHD, whose behavior did not signal an effective adjustment to their specific life conditions. This initial curiosity aimed to explore the differences in spiritual well-being and parent-child relationship dynamics between families with typical children and those with children with SEN, starting from the direct knowledge of the aforementioned case.

Contrary to preliminary hypotheses, the research findings did not reveal significant disparities, a finding that contradicted my initial assumptions and altered my preconceived perspective. This prior research experience has imposed a new framework for the current study, accepting the results obtained as true reflections of reality, regardless of expectations.

The current investigation can be considered an extension or even an advanced iteration of the previous one, taking advantage of a more generous timeframe to conduct a thorough study on essential concepts. As the title suggests, the study focuses on analyzing the social representations and personality characteristics of parents of children with SEN, with particular concentration on mothers. It aims to examine the coping methods employed by these individuals in stressful contexts and to explore the five superordinate personality factors according to the Big Five model from a social psychology perspective.

## **1. Social Representations**

Social representations pertain to various types of collective cognitions, common sense, or thought systems of societies or groups of people. They are invariably linked to the social realm, encompassing social, cultural, and/or symbolic objects, representing entities or phenomena. There is no singular, universally accepted definition amongst scholars, and Moscovici himself has offered several explanations:

"Social representations [...] refer to the content of everyday thought and the reservoir of ideas that provide coherence to our religious beliefs, political notions, and the connections we establish as effortlessly as we breathe. They enable the categorization of people and objects, the comparison and explication of behaviors, and their objectification as part of our social framework. While representations are often situated in the minds of men and women, they can be equally identified 'in the world,' thus allowing for their separate examination" (Moscovici, 1988).

"A social representation is a system of values, ideas, and practices with a dual function: firstly, to establish an order that enables individuals to orient themselves within their material and social world and to master it; secondly, to facilitate communication among community members, providing them with a code for social exchanges and a language for naming and classifying unambiguously the various aspects of their world and the history of their individual group." (Moscovici, 1973).

"[...] dynamically viewed, social representations emerge as a 'network' of ideas, metaphors, and images that are more or less interconnected" (Moscovici, 2000).

In 1961, Serge Moscovici began to advance the social psychology of representations. Considering that Durkheim's propositions offered relatively little scope for the interactions between the individual and the collective, he proposed the substitution of the concept of collective representation with a more nuanced concept of social representation. According to Moscovici himself, this involved the "...transposition to modern society of a concept that seemed reserved for traditional societies" as a response to the "...need to make representation a bridge between the individual and the social world, and to then associate it with the perspective of a changing society..." (Moscovici, 1961). This evolution is characterized by two fundamental shifts from Durkheimian views. On one hand, Moscovici posits that representations are not products of society as a whole, but rather the constructs of the social groups that compose that society. On the other hand, he focuses on communication processes, which are believed to elucidate the emergence and dissemination of social representations.

D. Jodelet (1984) introduced the term "social representation" to delineate a specific type of knowledge that can be seen as a scientific form of common sense. This knowledge encompasses the understanding and interpretation of the world, exerting influence upon and justifying social behavior.

According to N. Ficher (1987), social representation entails a cognitive process of perceiving and mentally processing reality, which transmutes social elements such as individuals, contexts, and situations into symbolic constructs like values, beliefs, and ideologies. This transmutation endows them with cognitive significance and enables us to comprehend various facets of everyday life by linking our own behavior to the internal mechanisms of social interactions.

In the perspective of P. Moliner (1992, 1996), social representations pertain to categories of knowledge that serve social purposes. They act as the means through which individuals integrate into communities and possess the potential to direct their actions within the social domain.

W. Doise (1990) has drawn a connection between cognitive organization and social relations. His findings suggest that social representations operate as orienting principles that influence individuals' positions within a network of social relationships.

J.M. Seca (2001) posits that social representations comprise complex collections of evaluations and behaviors accessible to a group, serving as a foundation for attitudes, actions, and practices.

## **2. Personality**

Drawing from Allport's definition of personality, it can be viewed as the dynamic organization within an individual of those psychosocial systems that determine their characteristic thoughts and behaviors. In simpler terms, a confluence of factors coalesce to shape each person, predisposing them to think and act in predictably certain ways. However, given the intricacy of human life, these predictions can often prove elusive. Theodore Millon (1996; Millon & Grossman, 2005), a renowned clinician and theorist in personality disorders, sought a sufficiently comprehensive definition of personality to encompass both normal and abnormal dimensions. Millon delineates the modern view of personality as a complex pattern of psychological characteristics that are deeply ingrained, largely unconscious, and resistant to change. These intrinsic and pervasive traits emerge from a complex matrix of biological features and experiential

learning and manifest automatically in nearly all facets of an individual's life: their perceptions, affections, cognition, impulse control, and behavior (Millon, 1996).

Psychologists have variously defined personality, yet have not succeeded in explaining it entirely, in a clear and definitive manner, due to the highly complex nature of human behavior, and the fact that personality is not a static element but a dynamic totality, continually evolving through interactions with the surrounding environment.

American psychologist Gordon Allport (1937), who dedicated much of his research to the study of personality, defines it as: „the dynamic organization within the individual of those psychophysical systems that determine their unique adjustments to the environment”.

What are the particular components that constitute an individual's personality? Traits and patterns of thought and emotion play a crucial role, alongside these core personality features:

- Consistency: Behaviors generally follow a pattern of recognizable order and regularity. Essentially, people tend to act in similar or the same ways across different situations.
- Psychological and physiological aspects: Personality is primarily a psychological construct, but research indicates that it is also shaped by biological processes and needs.
- Impacts on behaviors and actions: Personality not only influences how we behave and respond to our environment, but it also propels us to act in specific ways.
- Varied manifestations: Personality is evident not only in our behavior but also in our thoughts, emotions, close relationships, and other social interactions.

### **3. Parents - The Paramount Actors in the Harmonious Development of Children with Special Educational Needs**

„When a child with special needs is born, or when a child requires special education due to an accident, illness, etc., the life balance of the parents is disrupted” (Soubhi, Lima, Aitdaoud & Talbi, 2016).

The family, as defined by the World Health Organization (WHO, 1978), is a social group residing together, connected through biological ties, marriage, or adoption. According to this definition, the family constitutes a unique social entity that has evolved in tandem with the changing social dynamics of various eras. Moreover, the family itself wields significant influence and plays a transformative role within the larger community to which it belongs. Essentially, the family can be seen as the fundamental unit of society, serving as a "socio-biological" entity.

The family is the core from where everything begins: with the birth of a child and subsequently, their harmonious development. A positive family climate is the first optimal condition for a child beginning to take steps in the challenging life that may follow. The family influences the child's reactions, behavior in certain situations, and even thoughts. The influence parents have can be discerned from actions, and they must serve as role models. “Parents are the first true mentors in a child's life, providing the initial orientation points in the world, the first information and teachings about things and phenomena in nature and society, the first advice, norms, and rules of conduct. (Călin M.F., Rus M. & Sandu M.L., 2021)” Expectations are not set at the level of perfection because perfect people, perfect lives do not exist, but an ideal environment is one that is positive, filled with love and forgiveness. „The importance of the family increases in the case of individuals with special needs” (Seltzer, Floyd & Hindes, 2004; Nuri, Akcamete &

Direktor, 2019). For these reasons, parents have been named the most important actors in the harmonious development of children.

A child with special needs is one who requires special care for physical, mental, emotional, or health reasons. As each child is unique and has unique needs, there is no singular approach to caring for children with special needs that can be applied to all, even those with the same disability or need. Each child is a special person, but some may require particular care due to physical, emotional, health, or developmental needs. The types of needs vary widely. They can include learning disorders, developmental delays, diagnosed disabilities, or serious illness.

The World Health Organization offers the following definition of disability: Disability is an umbrella term, covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by a person in executing a task or action; while a participation restriction is a problem experienced by a person in involvement in life situations. Thus, disability is a complex phenomenon, reflecting an interaction between the features of a person's body and the features of the society in which they live. Disability refers to a reduced capacity to perform tasks that one would normally do at a certain stage of life and which may lead to the stigmatization and discrimination of the person with disabilities.

The initial caregiving tasks within the family are fulfilled by parents, who tend to the fundamental needs of their child. The mother takes care of feeding the child and creating a safe living environment. The active presence of one or both parents satisfies the child's needs for sensory stimulation, including visual, auditory, olfactory, and tactile experiences. To allow children to progress naturally and develop their consciousness and skills, it is essential to satisfy their basic emotional needs, such as love and security. These needs become increasingly important as the child grows and becomes more reliant on the mother, as stated in Attachment Theory (Goldberg, Muir, Kerr, ed., 2000). The attachment relationship of the child to their parents develops their awareness of belonging and the entity of their self. The child's integration into the family system is a determining factor for the development of self-acceptance. This system of internal equilibrium will determine their later malleability to the social system in adult life. Another necessity is exposure to new experiences, which plays a vital role in forming cognitive intelligence. By involving children in stimulating games, they can improve their motor skills, linguistic competencies, and socialization abilities, while simultaneously gaining valuable experiences. To ensure a natural progression in the child's development, it is important to respond to their basic emotional needs. These needs include the child's independence and empowerment. Psychological studies have shown that if parents fail to recognize and support this need in their child, it can lead to the child's inability to take responsibility as they grow and face social demands. This, in turn, can lead to deviant or delinquent behavior and cause suffering for both the child and the parents (Munteanu, 2006). Therefore, it is essential that, considering their age and aspirations, children take responsibility for meeting their own requirements for freedom and decision-making. According to Maslow's hierarchy, meeting basic human needs ensures the child's survival and growth (Lester, 2013). Research conducted by Fitzgerald et al. indicates that a child's ability to recover, both cognitively and mentally, through changes in the developmental environment is directly related to their age. For instance, when a child reaches the age of 2 years, removing them from a traumatic



environment significantly increases their chances of full physical and mental recovery, although developmental delays are still frequent in most cases (Veugelers & Fitzgerald, 2005).

Development will be affected if any of the child's needs within the family are unmet. When a child is not stimulated with new life experiences, this leads to deprivation of sensory, social, and emotional aspects. The stimulation provided must be age-appropriate and proportional to the child, as excessive stimulation due to frequent changes in the surrounding environment forces the child to rapidly and repeatedly adapt to unfamiliar situations. This can have disorienting effects and distort their perception of reality, leading to feelings of anxiety, fatigue, apathy, and abandonment. Encouragement and appreciation from others are essential for every child. If the need for responsibility is not satisfied, the child will struggle with self-control and planning abilities, ultimately becoming irresponsible. When parents fail to meet their child's needs, they instill feelings of distrust, which has consequences on the family, their group, and the community they are part of.

Parental support is pivotal for children with special needs as they deserve protection, and their close relations should be invested in their future prospects. Parents harbor numerous aspirations regarding the future of children with special educational needs (SEN) because they wish for them to live lives comparable to those of typically developing individuals. The nature of the disability, the extent of knowledge, socioeconomic status, age, and the level of support received by the children, all shape parental emotions and behaviors (Aysan & Ozben, 2007; Nuri, 2017).

#### **4. Research methodology**

##### **4.1. Objectives**

Objective 1: Identify the behavioral dimension of coping in a social context and the levels of personality factors in parents of children with CES and parents of typical children.

Objective 2: Identify correlations **between coping strategies and personality factors**.

##### **4.2. Hypotheses**

Hypothesis 1: It is assumed that there are significant differences in the behavioral dimension of coping in the social context of parents of children with CES and parents of typical children.

Hypothesis 2: It is assumed that there are significant differences in terms of personality in the two categories of parents.

Hypothesis 3: It is assumed that there is a correlation between the coping strategy – cautious action and the personality factor – agreeableness.

##### **4.3. Study participants**

Given that the population encompasses 80 individuals, we determined the sample size to be 60 female subjects, with an average age of 36 years, and of varied marital statuses: married, divorced, separated, or unmarried. These 60 subjects are divided into two categories. The first category consists of 30 mothers of children with special educational needs (SEN), while the second comprises 30 mothers of typically developing children. This division was made to facilitate comparative analysis.

For the sampling method, we employed stratified random sampling, with the sampling technique being judgmental evaluation.

In order to complete the questionnaire, we secured the consent of each subject involved in the study. The questionnaire was filled out individually in a physical format, and the personal data of the participants were secured through the coding of their identities. The respondents agreed to the utilization of the general results of the research in a scientific study/article.

#### 4.4. Research tools

For this study we used the Strategic Coping Approach Scale (SACS) and the 5-Factor Personality Questionnaire (CP5F).

#### 5. Data analysis and processing

**Hypothesis 1:** It is assumed that there are significant differences in the behavioral dimension of coping in the social context of parents of children with CES and parents of typical children.

Test Statistics <sup>a</sup>		
	AINS	AANTI
Mann-Whitney U	400,500	374,000
Wilcoxon W	865,500	839,000
Z	-,735	-1,128
Asymp. Sig. (2-tailed)	,462	,259

a. Grouping Variable: Nivel formare copil (1-tipic, 2-CES)

According to the table referenced above, it is observable that the sig (2-tailed) value exceeds 0.05. Given that significant differences were noted in only one of the nine subscales, specifically the Avoidance scale, Hypothesis 1: "It is presumed that there are significant differences in the behavioral dimension of coping in the social context between parents of children with special educational needs (SEN) and parents of typically developing children," is not substantiated.

Parents manage issues and stressful situations in various ways, either behind the scenes while prioritizing their own interests, or in a rapid and unexpected manner. The other scales, where significant scores were obtained, highlight the following characteristics. Regarding the Assertive Action scale, individuals who score highly on this scale approach issues with decisiveness, honesty, and directness. They openly express their emotions and thoughts and act accordingly, while also considering their own desires and plans, without harming others. Studies by Folkman and Moskowitz in 2004 indicate that this strategy is effective in reducing emotional stress. In terms of the Social Engagement scale, individuals rely on the support of others to cope with stressful situations. They actively engage in problem-solving, taking into account the needs of those involved. Hobfoll and Schroeder (2001) highlight the positive impact that frequent use of this strategy can have on emotional well-being. The Prudent Action scale emphasizes the careful evaluation of options and the taking of necessary precautions to ensure personal safety. This approach also involves considering the needs and feelings of others before acting. On the Instinctive Action scale, individuals rely on intuition when addressing stressful situations.





However, this intuitive response often involves impulsivity and a lack of consideration for consequences. Consequently, the needs and well-being of others may be given less priority in this approach.

From the results obtained, we can conclude that both categories of parents approach and cope with stressful situations in a similar manner, with the exception of their confrontation tactics (active-passive dimension). Parents of children with SEN tend to avoid situations that cause them discomfort. They prefer to withdraw and let things resolve on their own, thus reducing effort and abandoning the pursuit of their goals or the removal of stressors. In the 2004 studies by Folkman and Moskowitz, avoidance is deemed an ineffective approach. Typically, individuals who exhibit a significant inclination towards this strategy tend to experience high emotional stress and present symptoms related to psychopathology.

**Hypothesis 2:** It is assumed that there are significant differences in terms of personality in the two categories of parents.

Independent Samples Test										
		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
DS	Equal variances assumed	3,811	,056	3,987	58	,000	4,867	1,221	2,423	7,310
	Equal variances not assumed			3,987	56,055	,000	4,867	1,221	2,421	7,312
SE	Equal variances assumed	1,147	,289	-1,864	58	,067	-4,933	2,646	-10,230	,364
	Equal variances not assumed			-1,864	56,376	,067	-4,933	2,646	-10,233	,367
AU	Equal variances assumed	6,399	,014	2,064	58	,043	5,367	2,600	,163	10,570
	Equal variances not assumed			2,064	53,599	,044	5,367	2,600	,154	10,580

In the table above, it is noted that the significance threshold value (2-tailed) exceeds 0.05 for the personality factor of emotional stability. The other two personality factors exhibit significant differences. Higher scores are found among parents of typically developing children. According to the Autonomy scale, these individuals behave differently from others, demonstrating creativity and



a resistance to being led by others. High scores highlight a personality characterized by a rich imagination, creativity, originality, curiosity, a penchant for freedom, and a preference for variety, with routine being the greatest adversary. Lower scores are indicative of individuals who are realistic, conventional, lacking in creativity and curiosity, without strong personal convictions, and who accept whatever they are told. The scores for the Social Desirability scale fall within the "average" range, according to the questionnaire's interpretation, which lends credibility to the subjects' responses. Both categories of mothers have answered the questionnaire items sincerely.

**Hypothesis 3:** It is assumed that there is a correlation between the coping strategy – cautious action and the personality factor – agreeableness.

**Table 6. Correlations**

		AAS	RS	CSS	AP	E	AANTI	AAG	DS	C	SE	AU	AM
AAS	Pearson Correlation	1	,181	-,172	-,083	-,245	,205	-,254	,246	,043	-,198	-,018	,059
	Sig. (2-tailed)		,166	,188	,528	,059	,116	,050	,058	,745	,128	,891	,652
	N	60	60	60	60	60	60	60	60	60	60	60	60
RS	Pearson Correlation	,181	1	,065	,164	,211	,045	-,061	,205	,108	-,098	,060	-,160
	Sig. (2-tailed)	,166		,623	,209	,106	,733	,644	,117	,411	,457	,651	,223
	N	60	60	60	60	60	60	60	60	60	60	60	60
CSS	Pearson Correlation	-,172	,065	1	,116	-,183	-,097	-,062	-,180	-,122	-,143	-,218	-,098
	Sig. (2-tailed)	,188	,623		,379	,161	,461	,640	,169	,354	,276	,094	,456
	N	60	60	60	60	60	60	60	60	60	60	60	60
AP	Pearson Correlation	-,083	,164	,116	1	-,009	-,103	,239	,009	,148	-,069	,033	,268*
	Sig. (2-tailed)	,528	,209	,379		,944	,433	,066	,947	,261	,603	,805	,038
	N	60	60	60	60	60	60	60	60	60	60	60	60
E	Pearson Correlation	-,245	,211	-,183	-,009	1	,133	,254*	-,055	-,021	-,019	-,082	-,184
	Sig. (2-tailed)	,059	,106	,161	,944		,312	,050	,677	,876	,887	,533	,159
	N	60	60	60	60	60	60	60	60	60	60	60	60
AANTI	Pearson Correlation	,205	,045	-,097	-,103	,133	1	,193	-,122	-,135	-,118	,056	-,197
	Sig. (2-tailed)	,116	,733	,461	,433	,312		,139	,352	,305	,370	,669	,132
	N	60	60	60	60	60	60	60	60	60	60	60	60
AAG	Pearson Correlation	-,254	-,061	-,062	,239	,254*	,193	1	-,152	-,081	-,102	,053	,073
	Sig. (2-tailed)	,050	,644	,640	,066	,050	,139		,247	,540	,438	,687	,578
	N	60	60	60	60	60	60	60	60	60	60	60	60
DS	Pearson Correlation	,246	,205	-,180	,009	-,055	-,122	-,152	1	,473*	,060	,093	,211
	Sig. (2-tailed)	,058	,117	,169	,947	,677	,352	,247		,000	,650	,478	,105
	N	60	60	60	60	60	60	60	60	60	60	60	60
C	Pearson Correlation	,043	,108	-,122	,148	-,021	-,135	-,081	,473*	1	-,146	,172	,500*
	Sig. (2-tailed)	,745	,411	,354	,261	,876	,305	,540	,000		,266	,188	,000
	N	60	60	60	60	60	60	60	60	60	60	60	60
SE	Pearson Correlation	-,198	-,098	-,143	-,069	-,019	-,118	-,102	,060	-,146	1	-,043	-,095
	Sig. (2-tailed)	,128	,457	,276	,603	,887	,370	,438	,650	,266		,742	,471
	N	60	60	60	60	60	60	60	60	60	60	60	60
AU	Pearson Correlation	-,018	,060	-,218	,033	-,082	,056	,053	,093	,172	-,043	1	-,109
	Sig. (2-tailed)	,891	,651	,094	,805	,533	,669	,687	,478	,188	,742		,409
	N	60	60	60	60	60	60	60	60	60	60	60	60



AM	Pearson Correlation	,059	-,160	-,098	,268*	-,184	-,197	,073	,211	,500*	-,095	-,109	1
	Sig. (2-tailed)	,652	,223	,456	,038	,159	,132	,578	,105	,000	,471	,409	
	N	60	60	60	60	60	60	60	60	60	60	60	60

\*. Correlation is significant at the 0.05 level (2-tailed).

\*\*. Correlation is significant at the 0.01 level (2-tailed).

The table above shows us that there could be correlations between: prudent action and kindness, social desirability and conscientiousness, kindness and conscientiousness.

#### Correlations

			AIND	AINS	EXTRA
Spearman's rho	AIND	Correlation Coefficient	1,000	-,054	,060
		Sig. (2-tailed)	.	,680	,646
		N	60	60	60
	AINS	Correlation Coefficient	-,054	1,000	,019
		Sig. (2-tailed)	,680	.	,884
		N	60	60	60
	EXTRA	Correlation Coefficient	,060	,019	1,000
		Sig. (2-tailed)	,646	,884	.
		N	60	60	60

#### 1. Prudent Action (NSAIDs) and Kindness (NSAIDs):

The Spearman correlation coefficient between AIND and NSAIDs is -0.054. The significance value is 0.680 (greater than 0.05), which indicates that the correlation is not significant. This suggests that there is no significant correlation between prudent action and kindness.

#### 2. Kindness (NSAID) and Social Desirability (EXTRA):

The Spearman correlation coefficient between NSAIDs and EXTRA is 0.019. The significance value is 0.884 (greater than 0.05), indicating a poor correlation.

There is no significant correlation between agreeableness and social desirability.

#### 3. Prudent Action (AIND) and Conscientiousness:

The Spearman correlation coefficient between AIND and Conscientiousness (EXTRA) is 0.060. The significance value is 0.646 (greater than 0.05), indicating that the correlation is not significant.

This suggests that there is no significant correlation between prudent action and conscientiousness.

In conclusion, the data show that there are no significant correlations between these variables. This means that variances in prudent action, agreeableness, social desirability, and conscientiousness do not appear to be significantly related to each other in this data set.

Even if the above table shows us three possible correlations, they are not confirmed by the cloud of points, so Hypothesis 3: "It is assumed that there is a correlation between the coping



strategy - prudent action and the personality factor - kindness." is not confirmed. We can say that coping strategies and personality factors have nothing in common and neither is a trigger, cause or effect for the other.

Although both coping strategies and personality factors influence an individual's response to stress or adversity, they operate at different levels. Coping strategies are more situational and context-dependent, reflecting immediate reactions and coping mechanisms used in response to specific stressors. In contrast, personality factors represent broader and deeper patterns of behavior and emotion that persist across situations and are less likely to change in the short term. It is important to note that coping strategies can be influenced by an individual's personality traits. For example, a person who is high in neuroticism might be more likely to use avoidance or emotion-focused coping strategies to cope with stress. However, this does not imply a direct causal relationship or common underlying mechanisms between coping strategies and personality factors. Furthermore, coping strategies can be learned, modified, and improved through various interventions, such as therapy or stress management programs, regardless of the individual's personality traits. Similarly, individuals with different personality profiles may use similar coping strategies depending on the specific stressor and resources available to them.

In conclusion, although coping strategies and personality factors are related to an individual's response to stress and adversity, they are distinct constructs that operate at different levels. Coping strategies are situational and can be influenced by a number of factors, including personality traits, while personality factors represent enduring patterns of behavior and emotion that are less malleable in the short term. Therefore, we can conclude that coping strategies and personality factors do not have common points and are not causally related as triggers, causes or effects of each other.

Even if there are studies, research (see Bolger & Zuckerman, 1995; Derryberry, Reed, & Pilkenton-Taylor, 2003) that confirm and talk about the existence of some relationships between coping strategies and personality factors, the research carried out does not outline the same results.

### **Conclusions**

Because of the importance that parents have on children, especially those with special educational needs, it is important to know them from a social and personality point of view. Features, elements that need improvement or gaps that need to be filled may be discovered. This process helps both parents and children at the same time. It helps parents because it can offer them a general state of well-being, a happier life and free from worries, possible "imaginary" problems. We specify that we used the term "imagination" from a personal perspective and do not minimize the importance of the real challenges faced by parents. We strictly refer to scenarios where people see more of the problem than the solution and thus get lost. Children are helped by this process of getting to know their parents, because the environment in which they live can be changed. It is known that the family is the most important influencing factor in children's development. Because of this, it is vital for optimal development, from birth to adulthood, that this family environment is a positive one, full of warmth and wisdom for the child. For various reasons, this positive atmosphere is not found in all families, but it is not impossible to achieve if parents want the best for their child.



From the obtained results we can conclude that between the parents of children with CES and the parents of typical children there are differences only in terms of personality.

In stressful situations and the problems they encounter, they use the same coping strategies, the only difference being that parents of children with CES lean more towards avoidance than the other category. Berszan (2017), Cantwell-Barti (2018) and Tway et al. (2007) conducted research similar to the one presented, but with unvalidated instruments, with small sample sizes and using only qualitative data. Even with these limitations, studies have suggested that parents of children with disabilities use avoidance strategies more than parents of children without disabilities.

From a theoretical point of view, other variables could be taken into account that could explain possible differences beyond the diagnosis, such as the level at which the child needs educational requirements, the presence of disruptive behaviors, social communication problems, participation in parent training programs, the environment they come from – geographic location.

Returning to the personality factors, we found that mothers from both categories show significant differences. Those who have a child with CES recorded lower scores on the personality factors: Social Desirability, Extraversion, Conscientiousness, Autonomy and Kindness. No differences were identified on the Emotional Stability scale, which means that the delicate situations that the parents of children with CES went through did not change to a great extent the control they may have had before over their emotions and thoughts. Another idea would be that it was the situation they were put in that made them that way, but this cannot be confirmed for two reasons. The first reason is that the present research does not follow this aspect which is present in a background of the subjects and the second reason is that the results of typical parents could contradict this idea.

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