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A.Emel Sardohan Yıldırım¹, Rabia Vezne²

¹Akdeniz University,  0000-0002-2393-299X

²Akdeniz University,  0000-0002-0137-3613

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A Family Education Intervention for Parents Having Children with Multiple Disabilities during COVID-19

A.Emel Sardohan Yıldırım^{1*}, Rabia Vezne¹

¹Akdeniz University

Abstract

During the COVID-19 pandemic, it has been observed that the education stakeholders including families are caught unprepared. For this reason, it is thought that determining families' educational needs regarding their children with multiple disabilities in the isolation period are essential. This study aimed to determine the contribution of "Family Education Intervention in Pandemic" (FEIP) Training to families and their multiple disabled children. In the research, a multiple case study approach was used. Four mothers participated in the study. Virtual training in the study was carried out in eight sessions. The data were collected with multiple sources and analysed inductively by the triangulation method. In the research, it was revealed that FEIP supported mothers to realize their children's strengths, increase their positive parenting skills, and feel competent in their children's daily routines during the COVID-19 period.

Keywords: Multiple disabilities, COVID-19, Virtual family education, Adult education, Virtual intervention

Introduction

The World Health Organization (WHO) officially declared Coronavirus (COVID-19) as a global epidemic (WHO, 2020), and COVID-19, spreading rapidly across the world, has affected the world in the political, economic, and social contexts. One of the most important sectors affected by COVID-19 is education because the closure of schools and the start of virtual education brought unprecedented challenges to governments, ministries responsible for education, teachers, students, careers, and the parents (Can, 2020; Chang and Yano 2020; Daniel, 2020). Lockdown has placed people under great duress; for those whose life situations are inherently complex, this situation has conspired to create environments that are volatile, potentially damaging to relationships, and likely to induce feelings of helplessness. Therefore, it is timely and valuable for educators in these unprecedented times to consider how models of support might be brokered on behalf of those families where one or more members are multiply disabled. Especially, the virtual education programs applied for typically developing children could not be benefited by students with special needs because these programs were not adapted for them. Therefore, families had to undertake both teaching and parenting duties at the same time. In addition, there is so much uncertainty for families and children because they do not know when the pandemic will end (Daniel, 2020). Since not only typically developing children and their families, but also children with special needs (Courtenay, 2020; Courtenay & Perera, 2020) and their families (Reimers & Schleicher, 2020) were adversely affected in the pandemic.

It is a fact that parents having children with multiple disabilities (C/MD) may experience more difficulties due to their child's multiple disabilities than parents having a child with a single disability. The most important reason for this is that an individual with multiple disabilities has more than one disability at the same time. Mednick (2007) described individuals with multiple disabilities as physical, cognitive, communication, sensory and affective difficulties, and emphasized that multiple disability is an umbrella term and one disability affects another. Therefore, they need much more intense education interventions in the fields of communication, education, and social life (Nakken & Vlaskamp, 2007; Van Timmeren et al., 2016), and the planning of these education interventions for individuals with multiple disabilities requires special expertise.

* Corresponding Author: *Rabia Vezne, rabiavezne@akdeniz.edu.tr*

Before COVID-19, parents having C/MD also had many difficulties related to their children's educational needs. Foremost among them, their children cannot receive regular special education services. One of the difficulties is the lack of systematic expert support for them and their children (Wang & Michaels, 2009). In addition, their children's lack of motivation for learning (Eldeniz Çetin & Sönmez, 2018), insufficient family activities and consequently missed learning opportunities (Axelsson et al., 2013), insufficient knowledge of families to strengthen their child's skills (Majnemer et al., 2013) and parents' diminished hope of becoming a family (Bourke-Taylor et al., 2015) are other difficulties that can be listed. It is thought that families who have these difficulties before the COVID-19 period might feel inadequate on some issues and might be in need of education and support to fulfil their responsibilities during the pandemic evermore. Therefore, it has been revealed that the quality of life decreases because of all these difficulties (Luijckx et al., 2019).

In the COVID-19 period, individuals with special needs could not perform their daily activities, their routines changed (Turk & McDermott, 2020), and current education and social support systems failed (Esentürk, 2020; Qi & Hu, 2020; Yıldırım et al., 2020). Furthermore, the experts could not give support at home because of the rapid spread of the virus (Courtenay, 2020). It was also found that the daily routines of individuals with special needs are disrupted, their unwanted behaviors occurred more because of the limited interpersonal and social relationships (Zhang et al., 2020), their levels of stress and anxiety increased (Courtenay & Perera, 2020), and psychosocial problems occurred (Ansari & Yousefabad, 2020; Narzisi, 2020; Pfefferbaum & North, 2020). These adverse situations affect the individual with special needs and all the family members. In the Ecological System Theory, Bronfenbrenner (1979) states that the child lives in a microsystem (e.g., home environment, family environment, classroom), which directly affects his or her own development. The adoption of the Bronfenbrenner Model to highlight the interaction between the contexts in which people live and the personal attributes of individuals provides a tangible representation of how in times of extreme change the dynamics of life might play out. While family members (mother, father, siblings, etc.) directly affect the child's development, the child also affects other members in the microsystem. Therefore, experts intending to work with children with special needs and their families should manage the process from this holistic perspective. Thus, instead of focusing on "correcting" the child, an approach towards meeting the needs of the child and his family should be adopted (Çelebi, 2019). Moreover, the families' needs, routines, and dynamics and the limitations brought by the COVID-19 period should be taken into account while organizing the education for parents having C/MD. According to the literature review, it has been seen that especially at the beginning of and during the pandemic, there is no study done about virtual training for parents having C/MD. Therefore, this study will fill a gap in the literature.

Research Questions

In the literature, there is a lack of research related to the educational needs of families having C/MD in a pandemic period. Since it is essential to determine the educational needs of families having C/MD and provide education interventions in line with these needs in the pandemic, the researchers developed an education intervention for families with C/MD according to the needs analysis at the beginning of the research. This study aimed to analyse the effectiveness of "Family Education Intervention in Pandemic" (FEIP), which is planned according to the educational needs of families having C/MD. In this context, answers to the following questions were sought.

1. How did the FEIP intervention affect the dynamics of family life?
2. What are the behavior changes in family members after the intervention?
3. What are mothers' opinions regarding the quality and provision of the intervention?

Research Method

Research Design

A multiple case study of the qualitative research method was used in this study. More than one case study is included in the research in a multiple case study. The researchers focus on a topic or problem and select more than one case that exemplifies similar processes to reveal and identify possible different views, perceptions (Creswell, 2013; Yin, 2014). In this study, four mothers who exemplified similar processes were included in the research process.

Participants

Criterion sampling method, one of the purposeful sampling technique was used. The participants of the study were four mothers living in Antalya, whose children are between the ages of 12-20 and diagnosed with multiple disabilities. In this study, participants were selected according to having C/MD, unlimited internet, smartphone, and WhatsApp application.

Before the start of the research, six mothers having C/MD were asked to participate in the research but two of them refused to participate and said their problems with their spouses increased in the isolation period and therefore they did not feel ready for a systematic and organized education intervention because of their negative emotions (Researcher diary, 20.10.2020, p. 2). Table 1 shows the demographic features of the participants.

Table 1. Demographic features of participating mothers.

Mother	Age	Educational Status	Number of Children	Number of C/MD	Age and Type of the C/MD Disability of	Average Monthly Income*
Mother 1	41	Literate	4	3	17; Moderate Intellectual Disability (ID) and chronic (kidney failure) disease, 18; Mild ID, mild hearing impairment, 20; Moderate ID and mild hearing impairment	2,943 TL.
Mother 2	44	Undergraduate	2	1	19; Autism Spectrum Disorder and chronic illness (Epilepsy)	5,700 TL.
Mother 3	36	High School	1	1	12; Down Syndrome, Autism Spectrum Disorder and chronic (heart problem) disease	4,500 TL.
Mother 4	54	Primary School	2	1	12; Down syndrome and chronic (heart problem) disease	3,600 TL.

*1 Euro is 9.7418 TL (INFOEURO, November 2020)

Data Collection Tools

In this study, four different data collection tools have been used to obtain a picture of the ecology of each family. These tools are a ‘family demographic information form’, a needs assessment form, a researcher diary, and a semi-structured interview form. The family demographic information form included 14 items containing various demographic information about the mother and C/MD.

The needs assessment form, developed by the researchers, was used to determine the different needs of the mother regarding C/MD. There were five questions including the areas where the child is strong, the routines of the family, the educational needs of C/MD and social needs of C/MD, and the expectations from the researchers. The researchers took the answers to the questions as notes and grouped the needs. The questions were asked to the families during virtual meetings in the two groups on the date of 21.10.2020. On 23 October, 2020, a confirmation meeting was held with families about their needs and researchers began preparing intervention content according to adult learning principles.

The researcher's diary, kept by the researcher who gave the education, was a journal starting from the planning phase of the research (20.10.2020), until the end of reporting (31.12.2020) and it was a small notebook of 23 pages. The journal included impressions and self-evaluations of the researcher about the process, family education sessions, and participants.

Semi-structured questions were prepared by the researchers and the opinions of three experts in the field of special education and one expert in the field of Turkish Language were taken. Semi-structured interviews, individually and virtual, were conducted with the mothers after the intervention to evaluate the FEIP. With these interviews, it is aimed to reveal the opinions and suggestions of the mothers who participated in the study on the changes in the dynamics of life following the FEIP, the behavioural changes following the FEIP and the quality and provision of the FEIP. At the beginning of the interviews, the expert who made the interview explained the purpose of the interview and the process to each mother and obtained permission to record it.

Process

The research process had five stages including meeting the families and identifying needs, confirming the needs, preparing FEIP, implementing FEIP and evaluating FEIP. First, one of the researchers organized a virtual meeting with the families and identified their needs about their children. Second, families were asked to approve the needs stated in the previous interviews and add additional needs if emerged. Then, FEIP content was prepared by using the national and international literature about multiple disability, COVID-19, and principles of adult education. Moreover, one of the researchers who is an expert on adult education designed the intervention according to the learning characteristics of adult learners and principals of adult education using the adult education literature (Cercione, 2008; Merriam & Caffarella, 1999). Family education was carried out using the video chat feature of the WhatsApp Program for eight weeks. The details of the education sessions can be seen in Table 2.

Table 2. FEIP plan

Name of the Session	Content of the Session	Duration	Date
Giving Information about FEIP	FEIP content, mutual expectations, duties, and responsibilities	47' 41'	24.10.2020 27.10.2020
Adaption to the Pandemic	Problems of C/MD during the pandemic	76' 85'	31.10.2020 03.11.2020
Creating Teaching Opportunities	The strategies that will support mothers to spend quality time with their children during the isolation period	81' 65'	07.11.2020 10.11.2020
Creating In-Home Routines (Session 1)	Identifying daily routines	67' 78'	14.11.2020 17.11.2020
Creating In-Home Routines (Session 2)	The points to be considered in the usage of instructions	52' 65'	21.11.2020 24.11.2020
Strengthening Domestic Relations	The strengths of the child and reinforcing the weaknesses	94' 108'	28.11.2020 01.12.2020
Strengthening Domestic Relations	Qualified parent-child and child-sibling communication	87' 93'	05.12.2020 08.12.2020
Summing Up FEIP	Reviewing the sessions	47' 53'	12.12.2020 15.12.2020

Individual semistructured interviews were conducted with mothers virtually to collect data on the impact of FEIP on mothers' lives and C/ MD to assess the sustainability of learning outcomes after 22 days.

Data analysis

In order to provide data diversity and create data that strengthens the research, different data collection techniques have been used and data diversity has been provided (Creswell, 2013). The analysis of all data was done by the inductive analysis method. The analysis process was carried out in the form of creating categories, codes, and themes by researchers and a specialist in the field of special education independently from each other. Then, the categories, codes, and themes were compared, and the reliability was calculated with the inter-rater reliability (Inter-rater reliability = consensus/consensus + disagreement x 100). According to this calculation, the reliability coefficient was 87.05%. Finally, the researchers and the expert came together and discussed the categories, reached a consensus, and the researchers reported the final version.

Validity and Reliability

For the validity and reliability of the research, three different field experts' opinions and suggestions related to the data collection tools and the content of FEIP were received, and the final versions of both the data collection tools and the content of FEIP were given. With the data collected from more than one source, it was possible to verify the research from more than one direction. The reliability was calculated with the inter-rater reliability (Inter-rater reliability = consensus/consensus + disagreement x 100). According to this calculation, the reliability coefficient was 87.05%. To protect the private lives of the mothers participating in the research, code names were used in the research report (such as Mother 1, Mother 2). Participants were informed about the research, the data collection techniques, and tools used, and informed consent forms were signed by mothers.

Findings

This study aimed to analyse the contribution of FEIP to mothers having C/MD during the COVID-19. Findings are presented in three subheadings, including changes in the dynamics of family life, behavioural changes after the FEIP, and mothers' opinions about the quality and delivery of the intervention. The emerging themes and subthemes can be seen in Table 3.

Table 3. Themes and sub-themes

Themes	Sub-themes
Changes in the Dynamics of Family Life	Organised and better home life
Behaviour Changes after FEIP	Creating Routines Strengthening Family Relations
Opinions Regarding the Quality and Provision of the FEIP	Application Process Researcher Suggestions

Changes in the Dynamics of Family Life

The mothers participating in the research stated that they felt better after the intervention they participated in; they could have free time for themselves; their home life became organized; and they realized the strengths and weaknesses of C/MD. In this context, they learnt the areas that should be supported in their children and they planned their activities accordingly. Moreover, they underlined that they were able to be more tolerant to C/MD. Mothers also stated that they did not used to spending long hours at home with all family members in normal life, so they had difficulty in getting used to staying at home for long hours with all family members during the pandemic. Mothers added that they had better relationships with their spouses, they started a planned and routine life at home, and the FEIP made it easier for them to get used to spending long hours at home with C/MD and the whole family.

After identifying the needs of the mother, the researcher wrote in her diary that;

“The mothers' process of getting used to home will also be difficult, they seem tense and unhappy, they have never stayed together with their children for so long and without support, and they liken themselves to fish that came out of the water, in isolation period” (Researcher's diary, October 23, 2020).

Regarding the changes, one of the mothers (Mother 2) said:

“I consider the isolation period differently before and after this education. Previously, I saw myself as someone inadequate, unable to reach anything, unhappy, and shouting at home with everyone. It was very difficult to manage everyone in the house at the same time. But with this education, I gradually learned to live peacefully and calmly together, even my husband became calmer”...

Finally, a mother (Mother 3) expressed her opinions with these words:

“I realized that I never had free time for myself, I see even the smallest things to myself a lot. I was always in a mess, but with this training, my life became more organised. For example, I could not find time to drink coffee before, now I make coffee time for myself....”

Behaviour Changes after FEIP

Under this theme, two sub-themes including creating routines and strengthening domestic relations were identified.

Creating Routines

Mothers stated that their children spend all day at home with the closure of schools due to the pandemic and no instruction, no homework, or no follow-up schedule came from the schools where the children were registered. The mothers added that there was no distance education suitable for their children. Their children were disconnected from the lesson. They were constantly playing games on the tablet, watching TV and music channels during this period. They also said that the bedtime changed, and breakfast and meal times have changed with the change of the bedtime. This situation negatively affected their lives and there were constant turmoil and endless work at home. They emphasized that an irregular lifestyle made their children nervous, unconcerned, and purposeless. Mothers stated that they adjusted their children's bedtime after FEIP and that their children were happier and calmer because they got enough sleep. They also added that they created daily routines according to their family dynamics, they supported the routines with visuals, children did not have problems in the transition from one activity to another, and their children followed the instructions with the help of FEIP. They emphasized that the time children spend on the tablet and television decreased to a maximum of 2 hours a day. Mothers also underlined that they could have spare time at home and managed to do all the work at home on time after FEIP.

Regarding this sub-theme, Mother 4 has explained her thoughts with these words:

“Zeliha is my second child, I do not remember how I raised my other daughter, but Zeliha exhausted me when the school was closed. She did not drop the tablet from her hand, when I told her not to lay with the tablet, she was obstinate with me, shouted at me, but I learned how to talk to the children with this education. We decided on the rules in the house together and she followed all the rules. She warned me when I didn't follow the rules”.

Strengthening Family Relations

The mothers who participated in the study stated that their spouses could not look after their children because they worked very hard in their normal life and came home late. Therefore, they added that the children's communication with their fathers was less, they could not spend quality time together, and they only spent time watching TV and eating. After FEIP, mothers explained to their spouses how to communicate with their children and how to do activities together. The mothers asked the fathers to do activities according to the interests of their children and stated that the fathers did all the activities they chose (for example; making bread, mini farming on the balcony, etc.) with their children. Three of the mothers (Mother 1, Mother 3 and Mother 4) emphasized that when they said to their spouses that the researcher wanted these activities to be done with fathers and children, the fathers never objected and the whole process was easier. Mothers also stated that they started to get to know their children better, their communication with their children was stronger, they were more affectionate, and children's unwanted behaviours such as stubbornness and yelling decreased. Mothers added that they organised mother and child time on a subject that has a common interest for them and their children, started to love their children more and feel like mothers rather than teachers or carers.

The researcher has stated in her diary about this sub-theme that;

“As mothers get to know their children better, their discourses and behaviours change. The message we want to give to the mothers by determining the routines together is that the child will be more compatible and more participatory if you let them express their ideas and opinions about the activity that the child will participate in”. (Researcher's diary, December 8, 2020)

Regarding the sub-theme, mother 2 said:

“When I took the tablet from her hand, she would yell... As the girl shouted, her father shouted more. I was straddling the fence, but now everything has a time and order. I explain everything clearly, and she understands. I used to be angry with myself. It turns out that I did not know how to speak. I always accused the child. She understands when I explain it properly”.

When it comes to sibling-C/MD interaction, mothers stated that they do not have a normal sibling relationship and the siblings always act as a mother and carer. After FEIP, they started to play box games together, spend time in the kitchen, and the normally developing children started to introduce C/MD to their friends.

Regarding the issue, Mother 1 said:

“I knew that my normal daughter was my biggest assistant because there are three disabled children at home. However, it turned out that my daughter was like the mother of my disabled children, so I regretted putting such a burden on her at that age. With this education, I also assigned tasks to my disabled children at home. Even though they did not know exactly, they played monopoly with their older sisters, even this is so beautiful”.

Opinions Regarding the Quality and Provision of the FEIP

Under this theme, three sub-themes including the application process, researchers, and suggestion.

Application Process

The mothers stated that they were very surprised when they learned that their education was prepared according to their own needs. They said that they were very nervous and stressed at the beginning because they would attend a virtual education for the first time. They emphasized that since the activities were understandable, organized according to their level and could be implemented with the materials available at home, their motivation to participate in education increased. Moreover, they said that the education hours were planned at a convenient time for all mothers, which increased participation. Mothers stated that it is very beneficial to participate in the education with groups of two since they could talk to each other about their children and gave suggestions. They also added that it might be more effective to use learning resources such as brochures, printed materials, booklets instead of online materials sent via WhatsApp.

Regarding this sub-theme, the researcher has stated in her diary that:

“We just completed the 5th Session... Mothers learned how to decide the routines and plan the day with their children. In the question and answer part at the end of the session, they talked about how they would implement what they learned that day and gave each other... With each new information they learn, the smile on their faces increases”. (Researcher's diary, November 21, 2020)

Mother 2 expressed her thoughts about FEIP with these words:

“My problems are solved on the day and time I am available by the expert ... what more could I want, everything is special for me”. Mother 3 expressed her thoughts about learning resources with these words: *“We were not used to reading anything from the phone, I wish we had a book, it would have been better”.*

Researcher

Regarding the researcher, it was stated that the researcher was very punctual, took notes for everything, and followed up the tasks and activities given to the families. In addition, it was emphasized by the mothers that the researcher sometimes spoke about the problems she experienced during the isolation period and this made the families not feel alone. Another underlined point by the mothers was that the researcher asked the mothers

whether any issues were not understood or desired to be repeated after each session, and they said that this showed the fact that the researcher did this job in a loving and disciplined manner. Furthermore, the mothers stated that the researcher was an objective and thoughtful person since the researcher acted in accordance with the education levels of the mothers and the socio-cultural structures they had.

Regarding this sub-theme, Mother 4 said:

“We are doing whatever she (researcher) says; she is like an invisible hand in our home. Even when my husband was reluctant, I told him that the teacher wanted us to do it, then it is indisputable, and now home is peaceful”.

Suggestions

Mothers stated that FEIP sessions were progressing systematically. They got all the necessary information during the isolation period and could transfer it to their lives after the education was over. However, mothers needed a permanent person who could support them on issues they could not solve or give approval for the activities they did. In addition, mothers suggested that other interventions should be organized for different subjects, such as helping their children with their lessons, communicating with the teacher, and legal matters.

Regarding the sub-theme, mother 4 expressed her thoughts with these words:

“I continue the activities even if the education is over, but I think it will be good if our teacher says you are doing it right or it will be better to do this way”.

Discussion

This study aimed to identify the contribution of FEIP to the mothers having C/MD during the COVID-19. In other words, this multiple case study implemented in a region located in Turkey investigates the potential of a support model called FEIP aimed at promoting the educational, organizational, and behavioural management skills of four mothers forced by circumstances into undertaking a role that in the modern world is largely delegated to educators. In this part, the findings are compared with the literature and discussed.

Although determining the needs of the families having children with special needs has been important for all times (Cavkaytar et al., 2014), it has been seen that it is essential, especially during the pandemic. According to this research finding, it was revealed that the mothers did not know what to do with their C/MD all day at home during the isolation period, they were unhappy and nervous, and they had uncertainties about the process. These findings are in line with the findings of the study of Hawryluck et al. (2004) on the SARS virus and the study of Brooks et al. (2020) on the compilation study with COVID 19. The long and uncertain isolation period can cause psychosocial problems in all individuals (Li et al., 2020; Mesa Vieira et al., 2020; Sood, 2020). This situation is more intense and complicated when there is an individual with special needs in the family. In this period, families try to find activities for their individual needs. These activities and efforts also depend on some variables. Some highlighted variables are the socio-cultural and economic levels of families, their physical and psychological health, the number of people at home, the technological knowledge of the person who will conduct home education, and the availability of the necessary technological infrastructure at home (Fisher et al., 2020; Ghosh & Parish, 2013). The mentioned variables affect family members' daily, social, and business lives, so it becomes evident that families should be supported in times of crisis (Hart et al., 2020). FEIP has been planned in the COVID-19 period within the framework of all measures and the dynamics that have the potential to affect the intervention process (Hanson & Espinosa, 2016). It was revealed that the mothers' life flow changed positively, their positive parenting skills improved by receiving systematic education, they realized their children's strengths, and they coped with the difficulties more easily. These findings are in parallel with the results of several studies done by Sardohan Yıldırım (2017) and Yates (2012). As a result, systematic family education is essential to ensure parents' effective participation in the education process in extraordinary situations like pandemics. Consequently, it is revealed that the difficulties experienced in educating students living with multiple disabilities in 'normal' times have been exacerbated by the complex challenges for parents endeavouring to educate their children at home over the last nine months.

Mothers made suggestions to each other and made comparisons in intervention sessions. This helped mothers increase their motivation, implement the activities they learned, and continue the activities even after the intervention ended. The relevant literature (Tomris & Diken, 2021; Kaiser & Hancock, 2003; Sardohan Yıldırım,

2017) states that all families have learned current and effective strategies and methods to support their children's developmental processes, but that some of these families may not be ready and volunteer to implement the learned strategies and methods. In this study, the mothers showed high motivation to participate in the intervention and volunteered to apply what they learned. Education providers should keep in mind that while it is difficult for all learners and families to implement the curricula provided online in many countries around the world, the current existential situation during the period COVID -19 has highlighted the enormous challenges of providing a differentiated curriculum for students with learning disabilities, the challenges of which are many. Finally, FEIP, which was effective for the mothers, can help to lessen these challenges.

The mothers received the support of their family members while planning and implementing the activities and asked other family members to lead the practices. Since mothers got the support of their family members, they both felt more competent and self-confident and saw the impacts of the activities faster. Family lives have been positively affected in this context, and communication, interactions, and harmony in family relationships have increased. As it is known, the higher the harmony and quality interaction in families, the higher the harmony, family well-being, and family functions in the family. In the COVID-19 period, problems such as domestic violence, incompatibility, and inequality between women and men emerged more frequently (Fisher et al., 2020; Kumar & Casey, 2020). This period has evidently placed primary caregiver/s under enormous strain, typically mothers whose workload has increased manifold, often causing a level of domestic chaos affecting the lives of all family members. Based on these findings, FEIP revealed that changes in mothers could affect the well-being of all family members and prevent negative situations such as domestic violence and psychosocial crisis. In crisis periods such as COVID-19, it is recommended to carry out technology-based development of preventive practices, which will be implemented, by governments and staff working in the field of health and education (Zhou et al., 2020). The family members except for mothers who participated in the research did not receive any education before and after FEIP, so FEIP helped the mothers increase their positive parenting skills, feel competent and successful, and cope with maternity stress.

During the COVID-19 period, the routines were broken, the children became uncertain with the closing of their schools, became aimless, and did not know what to do. Mothers emphasized that the bedtime of their children who spend their entire day at home changed and they became addicted to the screen. These unwanted behaviours are also mentioned in several studies in the literature (Courtenay, 2020; Turk & McDermott, 2020). The FEIP revealed that C/MD had a certain routine, their screen dependency decreased, and they had positive interactions with their fathers and siblings. The positive changes in C/MD are reflected in the family life. At this point, it is important to identify the family dynamics and the issues that they have difficulties in order to make their lives easier and create new routines. Parallel to the findings of other studies in the literature (Buzzi et al., 2020; Courtenay & Perera, 2020), it is revealed that children adapted the new routines easily with the help of the routines created according to the COVID-19 restrictions in this research.

During the implementation of FEIP, mothers worked in collaboration with the researcher. The researcher prepared the needs assessment form to understand and have good communication with the mothers. Moreover, the researcher asked the parents about their children's interests, strengths, and issues in a manner that the mothers will understand clearly without prejudice. Similar to the findings of this research, Brody (2015) also underlined that respecting families will make them feel valuable, make them strong, and improve their positive parenting skills. Similarly, Hanson and Espinosa (2016) underlined that this kind of interventions should be carried out with mutual respect, sensitivity to cultural values, open communication, awareness of individual differences, and competencies.

Bronfenbrenner (1979) stated that human existence is largely determined by its systems and the way these systems interact with each other. Therefore, the development of the child is affected by a process based on the relationship and interaction within the context itself, and the relations and interactions between these contexts. The findings highlighted some crucial issues that surfaced through the intervention, notably the significance of the research, the opportunities for mothers to engage in dialogue, the promoting of the women's competence, the issue pertaining to sustained support, and the relationship of the intervention to enabling the family fabric to be more cohesive. In short, it can be concluded that the application of the model made a significant difference. Moreover, it is thought that this study potentially had an important contribution to make in considering how mothers might be enabled to maintain a balanced lifestyle despite the pressures of sustaining educational access for their children, particularly for those who live with multiple difficulties.

Recommendations for Future Research

In further research, more mothers having children with different disabilities can participate. Fathers and siblings can also be included in the research. Similar interventions can be planned for different needs of families, such as health, psychology, sociological needs of the families for their children with special needs

Conclusion

Mothers realized the strengths of their children with MD. Mothers' positive parenting skills increased. Mothers felt competent in their children's daily routines during the COVID-19 period. Mothers learnt rules that C/MD should follow during the isolation period.

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Author(s) Contribution Rate

The authors confirm equal contribution to the paper.

Conflict of Interest

Authors have no conflict of interest to report.

Ethical Approval

Ethical approval was taken from Social and Human Sciences Scientific Research and Publication Ethics Board of Akdeniz University (Decision Date: 16.10.2020, Decision Number: 200).

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