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Single Parenting and Childhood Visual Impairment: Coping, Caregiving Burden, and Implications for Family Support Systems An Interpretative Phenomenological Analysis

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Abstract

Single parents raising children with visual impairments face persistent caregiving demands involving emotional strain, economic vulnerability, and limited institutional support. Although parenting stress in disability contexts has been widely documented, limited attention has been given to how coping strategies are shaped by systemic caregiving conditions, particularly in single-parent households. This study employed an Interpretative Phenomenological Analysis (IPA) approach to explore the lived experiences and coping strategies of single parents raising children with visual impairments in a resource-constrained context. Three single parents aged over 40 years were recruited through purposive sampling. Data were collected through semi-structured interviews and non-participant observations and analyzed thematically following IPA procedures. The findings indicate that caregiving stress is strongly influenced by structural factors, including financial pressure, limited access to specialized educational services, and the absence of a caregiving partner. Participants adopted problem-focused coping strategies such as restructuring the home environment, systematic daily caregiving planning, and consulting special education teachers when support was partially available. Emotion-focused coping strategies, including acceptance and positive reframing, were used to manage long-term stressors beyond individual control. Overall, coping among single parents emerged as contingent upon the interaction between individual capacities and systemic support availability. These findings highlight the need for integrating caregiver-focused support within special education services and strengthening community-based support networks to improve family well-being and educational outcomes for children with visual impairments.

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Introduction

Globally, visual impairment remains one of the most prevalent sensory disabilities among children, with an estimated 19 million children affected worldwide, including 1.4 million who are permanently blind (World Health Organization, 2023). Beyond clinical and educational consequences, childhood visual impairment constitutes a long-term social care challenge that places sustained demands on family systems. Families are required to provide continuous support related to mobility, learning, and social adaptation, often compensating for limited institutional services. In many low- and middle-income countries, families function as the primary unit of care, assuming roles that extend beyond emotional support to include daily educational facilitation and life management (Gilbert & Foster, 2020; Goodley, 2016).

Within this broader social care landscape, families headed by a single parent experience compounded vulnerability. Single parenthood, whether due to divorce or spousal loss, intensifies caregiving demands by concentrating emotional, economic, and decision-making responsibilities on one individual. Empirical studies consistently show that single parents face higher risks of psychological distress, emotional exhaustion, and economic strain compared to two-parent households (Cooper, 2009; Cairney, 2014). When combined with the long-term caregiving demands associated with childhood visual impairment, single parenthood produces a caregiving context characterized by chronic stress, role overload, and limited recovery resources (Berry, 2019; Becker, 2013).

From a global social management perspective, caregiving in such contexts can be conceptualized as a form of micro-level resource management. Families—particularly single-parent families—operate as *micro-organizations* that must continuously allocate limited resources, including time, income, physical labor, and emotional energy, to meet competing caregiving and livelihood demands. Unlike formal organizations, these family systems operate without structural buffers, role specialization, or financial security, making caregiving decisions highly sensitive to scarcity and trade-offs. Family stress and adaptation models emphasize that such resource constraints fundamentally shape caregiving strategies and outcomes (McCubbin & Patterson, 1983; Walsh, 2016).

Economic instability represents a critical but often under-theorized dimension of caregiving for children with disabilities. Parents of children with visual impairments frequently face additional expenses related to specialized education, assistive devices, transportation, and therapeutic support, while simultaneously experiencing reduced employment flexibility due to caregiving responsibilities (Allen et al., 2019; Meral, 2020). For single parents, this economic vulnerability is intensified by reliance on a single income source, informal employment, or unstable labor conditions. Financial strain has been shown to directly influence parenting stress, limit coping options, and affect the quality of parent–child interactions (Masarik et al., 2019; Smith & Grzywacz, 2014). Despite its central role, economic instability is often treated as a background variable rather than as an integral component of the caregiving experience.

The Transactional Model of Stress and Coping proposed by Lazarus and Folkman offers a foundational framework for understanding how individuals appraise and respond to stressful situations (Lazarus & Folkman, 1984). The model conceptualizes coping as a dynamic process shaped by cognitive appraisal and perceived controllability of stressors. However, most applications of this framework emphasize intrapsychic processes and underemphasize how structural and material constraints shape appraisal and coping selection. In contexts of chronic caregiving and economic scarcity, perceived controllability is not solely a cognitive judgment but is embedded in access to financial resources, social support, and institutional services (Lazarus, 1993; Thoits, 2011).

Existing literature has documented elevated stress levels among parents of children with disabilities and among single parents as separate populations. Studies focusing on visual impairment highlight parental concerns related to children's safety, independence, and future autonomy (Kef, 2002; Sacks, 2014), while research on single-parent families emphasizes emotional exhaustion, economic strain, and reduced social support (Cooper, 2009; Cairney, 2014). However, these bodies of research largely remain fragmented and predominantly quantitative, offering limited insight into how single parents subjectively experience and manage the combined demands of disability caregiving and economic vulnerability in everyday life (Green, 2007; Hastings, 2002).

In Indonesia, where access to specialized educational and rehabilitation services for children with visual impairments remains uneven, families play an even more central role in caregiving (Ministry of Social Affairs, 2022; SLB Netra Nasional, 2021). Single parents in this context are required to navigate caregiving responsibilities amid limited institutional support and heightened economic uncertainty. Despite this reality, qualitative research exploring how single parents construct meaning, allocate limited resources, and sustain coping strategies over time remains scarce. This gap is particularly salient when viewed from a global social care and family management perspective, as it limits understanding of how micro-level caregiving practices interact with broader structural constraints (Creswell & Poth, 2018; Willig, 2013).

Therefore, this study aims to explore the lived experiences and coping strategies of single parents raising children with visual impairments using an Interpretative Phenomenological Analysis (IPA) approach. By conceptualizing caregiving as both a psychological and resource-management process, this study seeks to extend the Transactional Model of Stress and Coping by situating coping within conditions of economic instability and micro-organizational family dynamics. The findings are expected to contribute to theoretical refinement in stress and coping research and to inform the development of more context-sensitive educational and social support systems for single-parent families caring for children with visual impairments (Smith et al., 2009; Eatough & Smith, 2017).

Method

This study employed a qualitative research design using Interpretative Phenomenological Analysis (IPA), which is appropriate for exploring in-depth lived experiences within small, information-rich samples. Participants were selected using purposive sampling based on theoretically driven criteria: (1) being a single parent due to divorce or spousal loss, (2) having primary caregiving responsibility for a child with visual impairment, (3) a minimum of one year of caregiving experience, and (4) residing in District X. The inclusion of three informants was consistent with IPA methodological principles, which prioritize idiographic depth over demographic representativeness; the selected participants were considered analytically sufficient because they reflected shared structural caregiving conditions in District X, including limited access to specialized services, economic vulnerability, and reliance on informal support systems, thereby providing contextual saturation at the experiential level. Data were collected through semi-structured in-depth interviews and non-participant observations conducted in participants' homes. To ensure procedural rigor and minimize researcher bias, a systematic bracketing process was applied throughout data collection and analysis. Prior to fieldwork, the researcher documented pre-existing assumptions related to single parenthood, disability caregiving, and coping strategies in a reflexive journal. During observations and interviews, the researcher engaged in conscious suspension of these assumptions by focusing on participants' verbal accounts and observed behaviors as presented, rather than interpreting them through preconceived theoretical lenses. Reflexive notes were maintained after each data collection session to differentiate descriptive observations from emerging interpretations. Data analysis followed established IPA procedures, including multiple readings of transcripts, initial noting, development of emergent themes, and cross-case analysis, with ongoing reflexive engagement to ensure that interpretations remained grounded in participants' meaning-making processes rather than researcher expectations.

Results and Discussion

Results

This chapter presents the results of research on single parents' coping strategies in raising blind children based on *Interpretative Phenomenological Analysis* (IPA). The findings are organized into themes and subthemes obtained from in-depth interviews and non-participant observations at the informants' homes.

This study involved three informants who were single parents with a blind child, selected based on the criteria of a minimum age of 40 years, more than one year of caregiving experience, and status as a single parent due to the death of a spouse or divorce. The first informant, with the initials IR, is 45 years old, female, and became a single parent after her husband died three years ago. IR has a 10-year-old child with total blindness and works as a home-cooked food vendor. The second informant, MH, is 42 years old, female, and has been divorced for five years. MH has a 12-year-old child with low vision and works as a casual daily laborer. The third informant, DS, is 50 years old, male, and became a single parent after his wife died four years ago. DS has a 9-year-old child with total blindness and works as a daily motorcycle taxi driver. All three informants live in Regency X and carry out independent care with limited support from family or the surrounding community. This demographic information provides an overview of the socio-economic context and living conditions that underlie the dynamics of parenting and the coping strategies they employ on a daily basis.

Research findings indicate that all informants experienced significant emotional burdens in living as single parents. These burdens stemmed from the loss of a partner, the psychological stress of significant caregiving responsibilities, and constant concern for the safety and future of their blind child. Informants described the experience as " *draining* " and " *taking a significant portion of their mental strength* ."

IR described how the loss of her partner left her feeling " *left alone* " in caring for a blind child who needed intensive support. She said:

> *"Sejak suami saya meninggal, rasanya seperti dunia runtuh. Tiba-tiba saya harus jadi dua orang sekaligusibu dan ayah. Kadang saya merasa tidak punya waktu untuk bernapas."*

MH describes his emotional burden as feeling trapped in a mentally exhausting routine. He says:

> *"Capek itu bukan cuma badan, tapi pikiran. Waktu pulang kerja, saya sudah habis tenaganya, tapi tetap harus fokus untuk anak. Kadang saya duduk lama di teras sendirian karena rasanya lelah sekali."*

DS experienced emotional burdens in the form of persistent worries about her child's future when she was no longer able to be there for her. She said:

> *"Saya sering terbangun malam karena mikirin masa depannya. Kalau nanti saya sakit atau tidak ada, siapa yang bantu dia? Itu yang paling berat buat saya."*

Observations revealed several indicators of emotional stress, such as repetitive facial rubbing, changes in voice intonation when discussing the deceased partner, and a blank stare when describing concerns about the child's future. This emotional burden triggers the use of emotion-focused coping strategies such as self-acceptance and reframing, especially when the loss of a partner becomes a source of chronic stress.

All informants stated that caring for a blind child requires extra support in daily activities. These daily challenges relate to the child's mobility, environmental safety, therapy routines, time management, and the informants' work demands.

MH often feels overwhelmed when it comes to managing morning activities, especially getting ready for school. He explains:

> *"Masuk kamar mandi saja dia tidak bisa sendiri. Saya harus memastikan semuanya aman. Pagi hari itu paling capek karena saya harus ikut ke sekolah dulu baru ke tempat kerja."*

IR added that the daily routine felt tough because his child needed constant guidance to recognize the surroundings and objects in the house:

> *"Saya harus bilang setiap langkahnya. 'Ini meja, ini kursi, ini tangga'. Kadang saya sampai serak karena harus terus mengingatkan."*

DS describes her difficulties in maintaining a childcare routine while working:

> *"Kalau saya tinggal kerja, saya khawatir terus. Kadang saya bolak-balik ke rumah. Tapi kalau tidak kerja, siapa yang kasih makan?"*

Observations showed that all informants consistently remained close to their children, frequently held their children's hands while walking, and stopped household activities upon hearing the child's movements, indicating heightened vigilance as part of routine challenges. Household operational challenges and children's mobility triggered the use of problem-focused coping strategies such as environmental planning and organization.

Problem-solving-based coping strategies appeared to be the dominant strategies used by informants to deal with the demands of caregiving. They engaged in planning, organizing space, seeking information, and seeking instrumental assistance from family or school.

IR explains that he uses daily planning as a way to reduce feelings of overwhelm:

"Saya tulis semua kegiatan supaya besok tidak kaget. Kalau tidak saya rencanakan, saya bisa lupa dan malah tambah panik."

MH mentioned that he often asks SLB teachers for practical advice on dealing with certain parenting issues:

"Guru SLB banyak bantu. Mereka kasih contoh cara melatih kemandirian. Saya ikuti itu dan lumayan berhasil."

DS shows a form of coping in the form of arranging the home environment to make it safer for children:

"Saya rapikan rumah supaya dia bisa jalan lebih aman. Barang-barang tajam saya jauhkan biar tidak bahaya."

Observations showed that there were schedule notes stuck on the walls, furniture arrangements that avoided sharp corners, and simple orientation aids used by the children.

Informants also used emotional coping strategies to maintain psychological stability. These strategies included acceptance, lowering self-expectations, reframing the family situation, and self-talk to calm themselves.

DS explains how he built acceptance over time:

"Saya belajar menerima bahwa hidup saya berubah total. Dulu saya banyak marah, tapi sekarang saya lebih pasrah dan fokus saja sama apa yang bisa saya lakukan."

IR describes the process of lowering expectations to reduce personal stress:

"Saya dulu pengen anak saya cepat mandiri, tapi sekarang saya sadar semua ada waktunya. Saya tidak mau menekan diri saya sendiri terus." (IR)

MH uses reframing as a way to regulate emotions:

"Saya mencoba melihat kondisi ini sebagai ujian untuk menguatkan saya. Kalau saya lihat dari sisi itu, rasanya lebih ringan."

Observations show behavior such as lowering the head while taking a deep breath, a small smile when talking about efforts to survive, and softening intonation when saying the words "accept" or "strengthen yourself."

While not a primary strategy, social support emerged as a crucial element in helping informants maintain emotional resilience. Support came from close family, neighbors, and the special needs school community.

IR stated that family support in the form of advice often helped him reduce his anxiety:

"Keluarga saya mungkin tidak bisa bantu tenaga, tapi mereka sering kirim pesan semangat. Itu sudah sangat membantu."

MH said that neighbors often become a place to share stories:

"Kadang saya cerita ke tetangga. Mereka bilang saya kuat, dan itu saja sudah cukup bikin saya merasa tidak sendiri."

DS feels the benefits of parent-teacher meetings at SLB:

> *"Bertemu orang tua lain yang senasib itu rasanya bikin dada lega. Ada yang bisa mengerti tanpa saya jelaskan panjang lebar."*

Observations revealed the presence of special needs school activity brochures, contact numbers for families and teachers posted on the walls, and community meeting schedules. Social support acts as an external resource that facilitates coping, not as an independent variable.

Overall, the results indicate that coping among single parents raising children with visual impairments is deeply intertwined with economic positioning and identity reconstruction. Participants' experiences demonstrate that emotional coping, problem-solving strategies, and daily caregiving routines collectively function to sustain their identity as sole providers operating within unstable economic conditions. This interpretative layer highlights that coping is not only a response to stress, but also a mechanism through which parents actively manage family survival and continuity.

Discussion

The findings of this study demonstrate that coping among single parents raising children with visual impairments is deeply shaped by structural and economic constraints rather than being solely determined by individual psychological appraisal. Recent global research consistently shows that caregivers of children with disabilities experience compounded stress arising from emotional burden, financial strain, and limited access to formal support systems, particularly in low- and middle-income settings (BMC Pediatrics, 2024; Slopen et al., 2025). In this context, the experiences of participants in District X reflect broader global caregiving patterns, where families function as the primary providers of care in the absence of adequate institutional infrastructure. This finding reinforces the argument that caregiving stress must be understood as a socially embedded phenomenon influenced by structural determinants rather than as an isolated psychological response.

Consistent with contemporary extensions of the Transactional Model of Stress and Coping, participants employed problem-focused coping strategies when they perceived opportunities to stabilize daily functioning, and emotion-focused strategies when stressors were chronic and uncontrollable. However, recent empirical evidence suggests that perceived controllability itself is significantly constrained by socio-economic conditions, such as unstable employment and informal labor arrangements (Allen et al., 2019; Masarik & Conger, 2019). In line with this literature, the present study shows that coping flexibility among single parents was not freely chosen but bounded by economic necessity. Participants prioritized coping strategies that allowed them to remain operational as caregivers and income earners, supporting recent findings that low-income caregivers tend to adopt pragmatic, continuity-oriented coping rather than disengagement or avoidance strategies (Meral, 2020; Sustainability, 2023).

A key contribution of this study lies in its global contextualization of social support. Research from Global North contexts highlights the role of institutionalized welfare systems, professional respite care, and structured parental support programs in mitigating caregiving stress (Children, 2025; Journal of Child & Family Studies, 2025). In contrast, participants in this study relied predominantly on informal social networks, including neighbors, extended family, and school communities. Recent cross-national studies indicate that while informal support can provide emotional validation, it lacks the reliability and instrumental capacity of formal support systems (Child Indicators Research, 2025). Thus, social support in the Indonesian context functioned as an intermittent coping facilitator rather than a stable resource, reinforcing the need to interpret coping strategies within culturally and structurally specific care regimes.

Building on these findings, this study proposes a refined *Resource-Constrained Coping* framework specific to single-parent disability caregiving. Recent family stress and social determinant models emphasize that caregiving outcomes are shaped by the interaction between stressors and available resources (Slopen et al., 2025). Extending this perspective, the Resource-Constrained Coping model conceptualizes coping as a form of micro-level management, where single parents continuously allocate limited time, income, and emotional labor to sustain family functioning. Within this framework, emotion-focused coping preserves psychological endurance in situations where structural change is unattainable, while problem-focused coping is selectively applied to domains requiring minimal resource investment but yielding functional stability. This interpretation aligns with recent findings from caregiving studies in resource-limited contexts, which emphasize endurance, vigilance, and routine management as dominant adaptive strategies (Discover Psychology, 2024).

From a policy perspective, these findings suggest that interventions focused solely on enhancing individual resilience or emotional regulation may be insufficient. Contemporary policy-oriented research underscores the importance of integrating economic and institutional support with psychosocial interventions to effectively reduce caregiving burden (BMC Pediatrics, 2024; Sustainability, 2023). In line with this evidence, the present study highlights the need for caregiver-oriented policies embedded within special education systems, including accessible guidance for home-based caregiving practices, flexible support mechanisms for single-parent households, and community-level programs that provide both emotional and instrumental assistance. Recognizing single parents as micro-level managers of care and resources is essential for developing responsive and sustainable social support systems.

Overall, this study contributes to the international literature by situating coping within a broader ecology of resource constraint, social support structures, and caregiving governance. By integrating psychological theory with recent evidence on economic instability and social care management, the findings offer a more globally relevant and theoretically refined understanding of coping among single parents raising children with visual impairments.

Conclusion

This study demonstrates that coping among single parents raising children with visual impairments is a structurally conditioned process shaped by economic instability, role consolidation as sole providers, and limited institutional support. Coping strategies function not merely as psychological responses but as ongoing resource-management practices aimed at maintaining family functioning under persistent constraints. From a management and policy perspective, the findings indicate that Indonesia's social care framework requires greater integration between disability support and livelihood assistance. Based on participants' experiences, three policy priorities emerge for the Indonesian Ministry of Social Affairs: recognizing single parents as dual-role caregivers and income earners within social assistance schemes; formalizing community-based support through coordinated partnerships among social services, special education institutions, and local organizations; and shifting interventions from resilience-focused narratives toward resource-oriented support that enhances caregivers' capacity to manage time, labor, and financial constraints. By reframing coping as a form of micro-level governance, this study contributes to social management literature and highlights the need for policies that align psychological support with economic and institutional resources. Such an integrated approach is essential for developing sustainable and context-sensitive disability care systems in resource-limited settings.

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Authors' Note

The authors declare that there is no conflict of interest regarding the publication of this article. The authors confirmed that the paper was free of plagiarism.

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