

RESEARCH ARTICLE

The Role of Spiritual Moderation in Well-Being in The Relationship between Parenting Stress and Resilience in Parents Who Have Children with Special Needs

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ABSTRACT

This study aimed to investigate the moderating role of spiritual well-being in the relationship between parenting stress and resilience among parents of children with special needs. Using a quantitative correlational design, data were collected from 30 parents through validated questionnaires, analyzed using Pearson Product–Moment Correlation test and SEM-PLS. The results showed a significant and very strong positive correlation between parenting stress and resilience ($r = 0.908$, $p < 0.001$). Spiritual well-being significantly moderated this relationship, with a beta value of 0.893 and a t-statistic of 2.477 ($p < 0.05$). Parents with higher spiritual well-being demonstrated better stress management and resilience. The findings highlight the novelty of spiritual well-being as a resource for reframing parenting challenges positively. Practical implications include the development of spirituality-based support programs, such as mindfulness and prayer practices, to strengthen resilience in parents. Policymakers and mental health practitioners are encouraged to integrate spiritual components into educational and family support initiatives to better address the needs of this population.

Keywords: Parenting stress; resilience; spiritual well-being; psychological support; moderation effect

1. Introduction

Children are a source of hope and joy for most parents, often providing motivation and purpose in life. For many families, having a child with sound physical and mental health is a cherished dream and a blessing [1]. However, not all children are born in ideal conditions. Some experience physical, psychological, or social limitations that require special care and attention. These children are commonly referred to as Children with Special Needs (CWSN), including those with autism spectrum disorder who require specific parenting approaches [2]. According to the World Health Organization (WHO), children with disabilities are those who have long-term physical, mental, intellectual, or sensory impairments which, in interaction with various environmental barriers, may hinder their full and effective participation in society on an equal basis with others. This definition emphasizes that disability is not solely a medical condition but results from the interaction between individual impairments and social or environmental obstacles. In this context, Children with Special Needs (CWSN) encompass children who require additional support and accommodations in

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health, education, and social domains to achieve optimal development and participation.

In Indonesia, the prevalence of children with special needs is substantial and represents an important public health and social issue. Data from the Basic Health Research (Riskesdas) conducted by the Ministry of Health in 2007, 2013, and 2018 indicate that 3.3% of children aged 5–17 years experience disabilities [3]. Several provinces report higher prevalence rates, such as Central Sulawesi (7.0%) and North Kalimantan and Gorontalo (5.4%), while lower rates are found in West Sulawesi, Lampung, and Jambi (1.4% each). These figures underscore that the challenges associated with children with special needs extend beyond individual families and require attention from broader social and policy perspectives.

For parents, raising a child with special needs is often accompanied by significant psychological and practical demands. Initial reactions may include shock, sadness, stress, and denial [4]. Parenting challenges, such as managing behavioral difficulties, supporting developmental needs, and facilitating social adaptation can intensify emotional strain. Research indicates that parents of children with special needs are more vulnerable to experiencing stress compared to parents of typically developing children, with reported stress prevalence reaching 11% [5]. This stress may also affect family functioning and marital relationships, increasing the risk of conflict and separation [6].

In this context, resilience becomes a critical psychological resource that enables parents to adapt and maintain functioning despite ongoing challenges. Resilience refers to an individual's ability to recover from adversity, trauma, or stressful life events [7]. Parents with higher resilience tend to interpret difficulties more constructively and maintain stronger family relationships. Previous research identifies resilience as a protective factor against stress, supported by elements such as social support, positive cognitive appraisal, and proactive coping strategies [8]. Within families of children with special needs, resilience allows parents to accept their child's condition while sustaining hope and long-term caregiving commitment.

Alongside resilience, spiritual well-being (SWB) represents an important dimension influencing parents' psychological adjustment. SWB reflects a harmonious relationship with God, oneself, others, and the environment, and provides meaning and purpose in life [9]. It encompasses both religious and existential components, where the religious dimension relates to faith and spiritual practices, and the existential dimension concerns life purpose and meaning [10]. Empirical findings show that SWB contributes positively to happiness, mental health, and overall quality of life [11].

Within the Indonesian cultural context, spirituality and religious beliefs play a central role in shaping coping processes. Spiritual practices such as prayer, religious reflection, and community support often help parents interpret caregiving challenges as meaningful life experiences. Studies have demonstrated that spirituality is positively associated with psychological resilience and reduced depressive symptoms [12]. Spiritual well-being also improves health-related quality of life among parents of children with learning disorders [13], while spiritual coping strategies, such as prayer and reliance on faith have been shown to alleviate parenting stress and enhance spiritual health. Furthermore, social support rooted in spiritual and community networks contributes to improved quality of life and stress buffering [14]. Additional research highlights the role of spirituality in sustaining hope and resilience during crises and severe stressors [15], [16]. Collectively, these findings suggest that spiritual well-being not only provides emotional comfort but also strengthens adaptive capacities among parents.

The present study is grounded in the Stress-Buffering Theory proposed by Cohen and Wills in 1985, which posits that protective factors, such as social support and spiritual resources can mitigate the negative effects of stress on psychological outcomes. In the context of parenting children with special needs, parenting stress may weaken resilience; however, spiritual well-being has the potential to function as a

buffering mechanism that reduces the impact of stress and supports adaptive coping. This framework provides a basis for understanding how spiritual dimensions, including religious commitment and meaning-making, contribute to resilience among parents facing chronic caregiving demands.

Although previous studies have examined parenting stress, resilience, and spiritual well-being, several limitations remain. First, much of the existing research treats spirituality primarily as a direct predictor of well-being rather than examining its role as a moderating variable that shapes the relationship between stress and resilience. Second, empirical integration of these three constructs: parenting stress, resilience, and spiritual well-being remains limited, particularly in non-Western and culturally religious contexts. Third, studies conducted in Indonesia have largely been descriptive, focusing on levels of stress or coping without critically analyzing the mechanisms through which spirituality strengthens resilience.

Therefore, this study extends existing literature by positioning spiritual well-being as a moderating factor in the relationship between parenting stress and resilience among parents of children with special needs. By focusing on the Indonesian socio-cultural context where religious values and spiritual practices are deeply embedded in daily life this research offers a more contextually grounded understanding of how spirituality functions as a psychological buffer. Specifically, the study aims to clarify the mechanism through which spiritual well-being attenuates the negative impact of parenting stress and enhances resilience. Through this integrative approach, the research is expected to contribute theoretically by refining the stress–resilience framework and practically by informing spirituality-based interventions to support parents of children with special needs. The conceptual model illustrating the relationships among variables is presented in **Figure 1**.

This study aims to examine the relationship between parenting stress and resilience in parents of children with special needs, with spiritual well-being as a moderating factor. This research is expected to contribute significantly to the local Indonesian context, particularly in assisting families facing similar situations.

In line with the objectives of the study, the following hypotheses were formulated:

H1 Parenting stress is significantly related to resilience in parents of children with special needs (CWSN).

H2 Spiritual well-being moderates the relationship between parenting stress and resilience, enhancing parental resilience in managing the challenges of raising children with special needs.

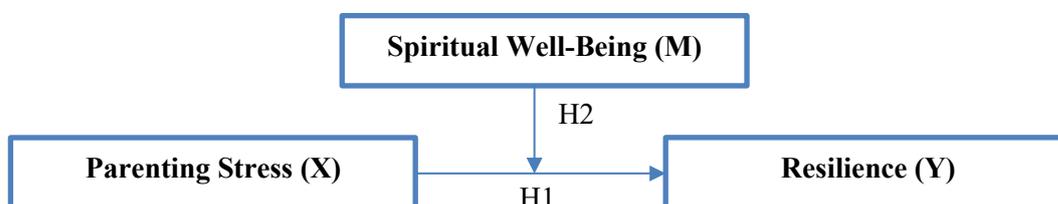


Figure 1. Research Design

2. Materials and methods

2.1. Research Approach

This study employs a correlational research design with a quantitative approach, focusing on examining the relationship between two or more variables, namely the role of spiritual well-being moderation in the relationship between parenting stress and resilience in parents of children with special needs. Correlational research is chosen as it allows for the exploration of the degree and direction of association among the

variables under study ^[17]. The primary aim is to test the hypotheses by determining the nature and strength of the relationship between parenting stress, resilience, and spiritual well-being as a moderating variable.

2.2. Participants

The population of this study comprised all parents of children with special needs enrolled in SLB ABA schools, totaling 30 individuals. Given the relatively small population, a total sampling technique was applied in which all eligible parents were included as respondents to minimize sampling bias and capture the full variability of the population. Participants consisted of fathers and mothers serving as primary caregivers, with demographic characteristics collected including age, gender, marital status, educational background, and employment status. Additional information was obtained regarding the children's conditions, such as autism spectrum disorder, intellectual disability, and other developmental disorders and the duration since diagnosis, which ranged from newly identified cases to several years. Inclusion criteria included parents or primary caregivers of children with formally recognized special needs enrolled in SLB ABA, willingness to participate voluntarily, and ability to complete the questionnaire independently. Exclusion criteria included non-primary caregivers, parents of children without confirmed special needs classification, and incomplete questionnaire responses. Recruitment was conducted through coordination with SLB ABA school administrators, followed by the distribution of informed consent and online questionnaires via Google Forms, ensuring confidentiality and voluntary participation.

2.3. Data Collection Instruments

Data collection in this study utilized a survey method through an online questionnaire distributed via Google Forms ^[18]. The instruments used in this study did not have officially validated Indonesian versions; therefore, an adaptation process was conducted. The adaptation involved translation and back-translation procedures carried out by bilingual experts to ensure semantic equivalence, followed by a review for cultural appropriateness. After adaptation, reliability testing was conducted using Cronbach's alpha based on the data obtained from the current sample to ensure internal consistency within the Indonesian context.

Parenting Stress is measured using the Parental Stress Scale (PSS) developed by Berry and Jones ^[19]. This instrument consists of 18 items that evaluate various domains of parenting stress, including rewards, stressors, loss of control, and satisfaction. After adjusting the scoring for eight reverse-scored items, the total composite score ranges from 18 to 90, with higher scores indicating higher levels of parenting stress. The PSS demonstrates strong reliability, with an overall alpha coefficient of 0.84. The reliability for each subscale is as follows: Parental Rewards ($\alpha = 0.74$), Parental Stressors ($\alpha = 0.85$), Loss of Control ($\alpha = 0.61$), and Parental Satisfaction ($\alpha = 0.71$) ^[20]. In this study, the adapted PSS demonstrated good internal consistency, with a Cronbach's alpha of 0.88.

Resilience is assessed using the Adolescent Resilience Scale developed by Oshio et al. ^[21], consisting of 21 items. This instrument evaluates three key dimensions of resilience: novelty seeking, emotional regulation, and positive future orientation. The scale demonstrates high reliability, with an overall alpha coefficient of 0.85 and subscale reliabilities as follows: Novelty Seeking ($\alpha = 0.79$), Emotional Regulation ($\alpha = 0.77$), and Positive Future Orientation ($\alpha = 0.81$). These dimensions capture the adaptive capacity of parents to cope with stressors effectively and maintain psychological well-being. The reliability analysis in this study showed a Cronbach's alpha of 0.90, indicating strong internal consistency.

Spiritual Well-Being is measured using the Spiritual Well-Being Scale (SWBS) developed by Bufford et al. ^[22]. The SWBS comprises 20 items divided into two dimensions: Religious Well-Being (RWB) and Existential Well-Being (EWB). The RWB dimension focuses on the individual's relationship with God, while the EWB dimension explores life satisfaction, purpose, and direction. The SWBS demonstrates

excellent internal consistency, with alpha coefficients ranging from 0.82 to 0.94 for RWB, 0.78 to 0.86 for EWB, and 0.89 to 0.94 for the overall scale, based on previous studies [22]. The reliability analysis for the current sample yielded a Cronbach's alpha of 0.92, demonstrating excellent internal consistency.

2.4. Data Analysis

Data analysis was conducted through several systematic stages to ensure the credibility and transparency of the findings. The analysis was clearly divided into three main components: (1) normality testing, (2) correlation analysis, and (3) moderation analysis. All results were presented in clearly labeled tables to enhance clarity and replicability. The normality test was conducted using the Kolmogorov–Smirnov test to determine whether the data were normally distributed. The results of the normality test were presented in Table 1. If the significance value was greater than 0.05, the data were considered normally distributed, and the Pearson Product–Moment Correlation test was used to examine the relationship between parenting stress and resilience. The correlation results were presented in **Table 2**, including the correlation coefficient (r) and significance value (p).

To test the moderating role of spiritual well-being, Structural Equation Modeling–Partial Least Squares (SEM-PLS) was employed. All constructs were treated as reflective indicators, and the interaction term (Parenting Stress \times Spiritual Well-Being) was generated using the product indicator approach. The analysis was conducted in two stages: evaluation of the measurement model (outer model) and evaluation of the structural model (inner model). Convergent validity was assessed through factor loadings (> 0.70) and Average Variance Extracted (AVE > 0.50), while reliability was evaluated using Cronbach's alpha and Composite Reliability (CR > 0.70). Discriminant validity was examined using the Fornell–Larcker criterion and cross-loadings. The structural model was evaluated using path coefficients (β), bootstrapping procedures (5,000 resamples) to test significance ($t > 1.96$; $p < 0.05$), coefficient of determination (R^2), effect size (f^2), predictive relevance (Q^2), and multicollinearity through Variance Inflation Factor (VIF < 5). Although SEM-PLS can be applied to small samples, the limited sample size ($n = 30$) was acknowledged as a constraint, and all statistical assumptions were carefully tested to ensure robustness and credibility of the findings. The moderation results were presented in Table 3, including beta coefficients, t-statistics, and p-values.

By addressing the limitation of a small sample size through comprehensive statistical validations and robust analytical techniques, this study aims to provide reliable insights into the complex interplay between parenting stress, resilience, and spiritual well-being. Furthermore, the methodological improvements strengthen the study's contribution to the literature, particularly in the context of parents of children with special needs in Indonesia.

3. Results

3.1. Normality Test Results

The normality test in this study used the Kolmogorov–Smirnov Test. The normality test was conducted to test the normality of the distribution of research data. The results of normality testing using a data processing application, IBM SPSS Statistics 26, can be seen in the **Table 1**.

Table 1. Normality Test Result
One-Sample Kolmogorov-Smirnov Test

		Unstandardized Residual
N		30
Normal Parameters ^{a,b}	Mean	.0000000
	Std. Deviation	.30893887
Most Extreme Differences	Absolute	.127
	Positive	.097
	Negative	-.127
Test Statistic		.127
Asymp. Sig. (2-tailed)		.200 ^{c,d}

- a. Test distribution is Normal.
- b. Calculated from data.
- c. Lilliefors Significance Correction.
- d. This is a lower bound of the true significance.

Based on **Table 1**, the significance value obtained is 0.200 (> 0.05). Therefore, it can be concluded that the data in this study are normally distributed. Accordingly, the subsequent analysis used the Pearson Product–Moment Correlation test.

3.2. The Relationship between Parenting Stress and Resilience

The test of the relationship between parenting stress and resilience in parents who have children with special needs is presented in **Table 2**. The results of the Pearson Product–Moment Correlation analysis showed a p-value of 0.00 ($p < 0.05$), indicating that parenting stress is significantly associated with resilience. The correlation coefficient obtained was $r = 0.908$, which reflects a very strong positive relationship. This positive direction indicates that higher levels of adaptive stress management tendencies are associated with higher levels of resilience among parents. Thus, parents who report better regulation and interpretation of parenting stress also tend to report higher resilience. However, given the cross-sectional design of this study, these findings should be interpreted strictly as associations rather than causal relationships.

The very high correlation coefficient ($r = 0.908$) warrants careful consideration. Methodological factors may partly explain this strong association. First, both parenting stress and resilience were measured using self-report questionnaires administered at the same time point, which increases the possibility of common method variance. Second, conceptual overlap between the constructs may have contributed to the high correlation. Resilience involves adaptive coping and emotional regulation, while parenting stress includes perceptions of stressors and loss of control; therefore, some dimensions may conceptually intersect, particularly in how individuals cognitively appraise and respond to challenges. Additionally, the relatively small sample size ($n = 30$) may inflate correlation estimates and reduce variability, which can result in stronger observed associations.

Table 2. Correlation between Parenting Stress and Resilience Test Result

Variable	Parenting Stress	Resilience
	Pearson Correlation	Sig. (2-tailed)
Parenting Stress	1	.908**
Resilience	.908**	1

**Unstandardized Residual

Table 3. The test of role of Spiritual Moderation in Well-Being in the Relationship between Parenting Stress and Resilience

	30	Normal Parameters	Mean
.0000000	.893	Standard Deviation	.30893887

	30	Normal Parameters	Mean
Most Extreme Differences	Absolute	.127	.016
Positive	.097	2,293	Negative

The test of the moderating role of spiritual well-being in the relationship between parenting stress and resilience is presented in **Table 3**. The SEM-PLS analysis produced a positive beta value ($\beta = 0.893$) with a t-statistic of 2.477 ($t > 1.96$) and a p-value close to the significance threshold ($p = 0.052$). These findings indicate that spiritual well-being is statistically associated with the strength of the relationship between parenting stress and resilience. Specifically, higher levels of spiritual well-being are linked to a stronger positive association between parenting stress and resilience among parents of children with special needs.

4. Discussion

This study examined the normality of the data, the relationship between parenting stress and resilience, and the moderating role of spiritual well-being in this relationship among parents of children with special needs. Normality Test Results were conducted using the Kolmogorov-Smirnov Test to determine whether the data distribution was normal. Based on the analysis using IBM SPSS Statistics 26, the significance value was 0.200 (> 0.05). This indicates that the data in this study are normally distributed. Therefore, subsequent analyses used the Pearson Product–Moment Correlation test.

4.1. The Relationship between Parenting Stress and Resilience in Parents Who Have Children with Special Needs

The research findings demonstrate a significant relationship between parenting stress and resilience in parents of children with special needs, supported by the Pearson Product–Moment Correlation test results. The analysis revealed a p-value of 0.00, indicating a statistically significant relationship, and a correlation coefficient of 0.908, which reflects a very strong positive relationship. This indicates that effective management of parenting stress leads to higher levels of resilience in parents. These findings align with Unvanli's study ^[23], which highlights the positive link between psychological resilience and self-esteem in parents of children with special needs, suggesting that increased self-esteem contributes to greater resilience. Additionally, Şanlı's ^[12] research emphasizes the importance of parental attitudes toward psychological assistance, revealing that parents who seek psychological help tend to display higher resilience levels. This supports the notion that psychological support acts as a buffer against parenting stress, further underscoring the impact of stress management on parental resilience.

Furthermore, Kara and Yildirim ^[24] highlighted the critical role of social support in enhancing psychological resilience, noting that fathers' involvement in parenting positively correlates with mothers' resilience. This finding underscores the importance of collaborative parenting in reducing stress and improving resilience. Ilias et al. ^[25], in their systematic review, also established a connection between parenting stress and psychological well-being among parents of children with Autism Spectrum Disorder (ASD). They found that parents who effectively managed stress exhibited higher psychological well-being, reinforcing the significance of stress management in building resilience. These findings, in combination with the results of this study, emphasize that managing parenting stress effectively is essential for enhancing psychological resilience, enabling parents to navigate the unique challenges associated with raising children with special needs.

In addition to the primary interpretation, alternative explanations should be considered. The very strong association between parenting stress and resilience may also be influenced by contextual factors such as social support, spousal involvement, and collectivistic cultural norms that emphasize shared family

responsibility. Kara and Yildirim [24] found that fathers' involvement is positively correlated with mothers' psychological resilience, suggesting that family dynamics may shape how stress and resilience are experienced simultaneously. In the Indonesian context, which is largely collectivistic and family-oriented, support from extended family and community networks may play a substantial role in shaping both perceived stress and resilience. Furthermore, Ilias et al. [25] noted that the psychological well-being of parents of children with special needs is often influenced by environmental and systemic factors. Therefore, the strong relationship observed in this study may reflect not only individual psychological characteristics but also broader social and cultural influences surrounding parents.

4.2. The Role of Spiritual Moderation in Well-Being in the Relationship between Parenting Stress and Resilience in Parents Who Have Children with Special Needs

The findings of this study, which analyzed the moderating role of spiritual well-being in the relationship between parenting stress and resilience, revealed that spiritual well-being significantly strengthens this relationship. With a positive beta value of 0.893 and a t-statistic of 2.477 ($p < 0.05$), the results indicate that parents with higher levels of spiritual well-being are better equipped to manage parenting stress effectively, which in turn enhances their resilience in coping with the challenges of raising children with special needs. These findings align with prior research suggesting that spiritual well-being provides meaning and purpose in life and promotes the use of adaptive coping strategies, such as prayer and seeking spiritually-based social support [13].

Research by Mohammadchenari et al. [13] supports this by demonstrating a significant positive relationship between spiritual well-being and health-related quality of life (HRQOL) among parents of children with specific learning disabilities. Their findings suggest that spiritual practices can cognitively aid parents in addressing challenges and stress, reinforcing the current study's results that spiritual well-being acts as a buffer against parenting stress. Similarly, research by Góngora et al. [26] highlights that spirituality can reduce psychological distress and enhance individual resilience, further confirming that spiritual well-being contributes to parents' adaptability in managing parenting stress.

Furthermore, Yavuz and Dilmaç [27] emphasize the positive correlation between spiritual well-being and psychological resilience, indicating that individuals with higher levels of spiritual well-being tend to experience greater hope and purpose in life. This finding supports the argument that spiritual well-being not only aids in stress management but also enhances individuals' capacity to recover from challenges. Parents who find meaning in their parenting experiences through spirituality demonstrate higher resilience. Overall, the results of this study underscore the critical role of spiritual well-being as a moderating factor in the relationship between parenting stress and resilience. These findings are consistent with recent literature, highlighting spiritual well-being as an essential resource for managing stress and fostering psychological resilience, particularly among parents of children with special needs.

Beyond the interpretation that spiritual well-being is associated with a stronger relationship between parenting stress and resilience, cultural and religious contexts may also contribute to the observed pattern. Indonesia is widely recognized as a highly religious society, where spiritual beliefs and practices are deeply integrated into daily life and coping processes. Şanlı [12] reported that spirituality is positively associated with psychological resilience and lower levels of depressive symptoms, while Yavuz and Dilmaç [27] highlighted the link between spiritual well-being, hope, and meaning in life. Within this context, spirituality may function not only as an individual psychological resource but also as a socially reinforced value system that encourages acceptance, patience, and positive reinterpretation of life challenges. Moreover, Mohammadchenari et al. [13] demonstrated that spiritual well-being is associated with parents' quality of life,

suggesting an interaction between religious, social, and psychological dimensions. Thus, the moderating relationship identified in this study may reflect a complex interplay between individual spirituality and the broader socio-religious environment, rather than a purely individual-level mechanism.

4.3. Limitations and Suggestions for Future Research

This study has several limitations that warrant careful consideration. First, the small sample size ($n = 30$) substantially limits the statistical power of the analyses and the generalizability of the findings. With such a limited number of participants, correlation coefficients and moderation effects may be unstable and potentially inflated. Second, the sampling frame was restricted to parents from a single SLB ABA school context, which limits representativeness and may not reflect the broader population of parents of children with special needs in different regions, educational settings, or socio-economic backgrounds. Third, the use of self-report, online survey-based questionnaires raise the possibility of response bias, including social desirability bias, common method variance, and inaccuracies in self-perception. Given that parenting stress, resilience, and spiritual well-being are sensitive constructs, participants may have responded in ways that align with perceived social or religious expectations. Additionally, the cross-sectional design prevents conclusions regarding directionality or causality among variables. Other relevant factors, such as social support, coping strategies, severity of the child's condition, and demographic characteristics, were not included in the model and may also influence the observed relationships.

Future research should address these limitations by recruiting larger and more diverse samples across multiple schools or regions to improve external validity and statistical stability. Longitudinal designs are recommended to better understand the dynamic relationships among parenting stress, resilience, and spiritual well-being over time. Incorporating mixed-method or qualitative approaches could also provide richer insight into how parents interpret spiritual experiences in the context of caregiving. Furthermore, future studies should integrate additional variables, such as social support, family functioning, and cultural values, to develop a more comprehensive explanatory model.

Based on the preliminary evidence from this study, several tentative practical implications may be considered. For example, spirituality-based support programs, such as structured reflection groups, faith-informed coping workshops, or guided prayer and mindfulness sessions could be explored as potential interventions for parents of children with special needs. Training programs for educators, school counselors, and mental health professionals may also include modules on culturally sensitive spiritual coping and family resilience. However, it is important to emphasize that these recommendations remain provisional and should be interpreted as exploratory suggestions grounded in initial findings. Further empirical validation with larger and more rigorous designs is required before implementing such programs on a broader scale.

5. Conclusion

The findings of this study reveal a significant and very strong relationship between parenting stress and resilience in parents of children with special needs. Furthermore, spiritual well-being plays a crucial moderating role in strengthening this relationship. These results emphasize the importance of addressing spiritual well-being as a key factor in enhancing parental resilience. To translate these findings into actionable steps, it is recommended that programs focusing on spirituality, such as mindfulness practices, prayer groups, or workshops on spiritual coping strategies, be developed to support parents of children with special needs. Additionally, these insights can inform the formulation of educational policies and mental health services by incorporating spiritual well-being components into training programs for educators and healthcare providers working with this population. By integrating these practical applications, the findings

can contribute to creating a more holistic support system for parents facing the challenges of raising children with special needs

Author contributions

Author contribution. Sandra Adetya designed the study, conducted data collection, and drafted the manuscript. Tri Ratna Murti provided critical revisions and theoretical insights. Kuncono Teguh Yunanto contributed to data analysis and interpretation. All authors reviewed and approved the final manuscript.

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Conflict of interest

The authors declare no conflict of interest.

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