



POSTTRAUMATIC GROWTH FROM THE PERSPECTIVE OF MOTHERS WITH SPECIAL NEEDS CHILDREN: A QUALITATIVE STUDY

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Abstract

This study aimed to conduct an in-depth analysis of post-traumatic growth experiences based on the perception of mothers with children with special needs in primary school. As a qualitative research method, the phenomenological design was used because the study focused on how the participants made sense of this growth process. Eight volunteer mothers of children with special needs participated in the study. The data were collected through three-stage semi-structured interviews and analyzed with the phenomenological analysis technique carried out in five stages. The findings of the mothers' post-traumatic growth experiences were collected under five sub-themes with 28 codes, including relationships with other individuals, personal strength, spirituality-religion, appreciation of life, and life opportunities.

Keywords: Posttraumatic growth, individual with special needs, trauma.

INTRODUCTION

Throughout their lifetime, individuals may encounter unexpected difficult life events that no one wishes to experience. According to the data of 2019-2020 of the National Education Statistics Formal Education report, the number of students with special needs (including sight, hearing, physical, mild mental disability and the first grade of the special education school) in primary school was 12.831 (Ministry of National Education, 2020). The results and implications of this statistical data concern not only the individual but also the family and even the society. Such painful experiences, which have the power to reconstruct life, are handled around the title of trauma.

According to Briere and Scott (2016), trauma is a challenging experience that exceeds an individual's resources for a short time and leads to psychological and emotional symptoms that spread over time. A traumatic event can be experienced in various ways. Accordingly, trauma can also be experienced by direct exposure, as a witness, by learning that it happened to a family member or close friend, and by repeated exposure to the unpleasant details of the traumatic event related to professional necessity (American Psychiatric Association, 2013). Based on this information, it can be said that mothers who have children with special needs experience trauma. Although traumatic experiences are defined as painful experiences and matched with negative outcomes, not every traumatic experience results in maladjustment or negative outcomes. When a trauma is reconstructed successfully, it may even turn into a positive transformation (Altinsoy, 2020; Levine & Frederick, 2013). Accordingly, painful experiences can be the initiator of radical changes in the individual through integration with inner experiences. In the psychology literature, such experiences are termed as 'posttraumatic growth'.



Posttraumatic growth is defined as “positive changes in the functionality of the individual as a result of combating traumatic life crises” (Calhoun & Tedeschi, 2006; Linley & Joseph, 2004). The individual literally reconstructs his/her life story of change as a result of combating the traumatic event (Jayawickreme & Blackie, 2016). In this sense, the individual discovers deep meanings about life, establishes more intimate social relationships, experiences spiritual and existential changes, opens new windows of opportunity by reviewing life priorities, appreciates life better, and realizes personal power by reviewing self-perception (Tedeschi & Moore, 2016).

The concept of post-traumatic growth is examined by applying various models. Tedeschi and Calhoun's post-traumatic growth approach based on "Functional Descriptive Model" is one of the models that have been successful in explaining the concept in various aspects. This model was first introduced into the literature by Calhoun and Tedeschi in 1995 and then revised in 2004 and has become the most widely recognized growth model in psychology literature (Tedeschi & Calhoun, 1996; Werdel & Wicks, 2012). According to this model, post-traumatic growth represents a five-dimensional structure. These dimensions are relating to others, new opportunities, personal strength, appreciation of life, and positive spiritual and existential change (Tedeschi, Cann, Taku, Şenol-Durak, & Calhoun, 2017).

The related research literature has focused on the function of the concept of post-traumatic growth in individuals with disabilities or their relatives. For example, in a study conducted with nursing college students with a congenitally disabled parent, family resilience and ego strength were found to predict post-traumatic growth (Li, Bai, Lou, & Cao, 2019). Another study examining the spiritual change dimension of post-traumatic growth in individuals with disabilities found that individuals discovered a spiritual meaning (Shariati, Naeimi, & Kalantar Hormozi, 2019). In a qualitative study conducted with athletes with disabilities, participants reported that they experienced post-traumatic growth (Day, 2013). In another qualitative study conducted with individuals with physical disabilities, the participants reported having experienced post-traumatic growth (Hammer et al., 2019).

Trauma affects the immediate environment of these individuals as well as the individuals who are directly exposed (Levine & Frederick, 2013). Although there very limited amount of research conducted with parents with children with special needs, a few studies on the subject have been published. For example, a qualitative study conducted with the mothers of children with physical disabilities reported post-traumatic growth related to self-perception, relationships with other individuals, life philosophy, and spirituality (Konrad, 2006). Another study conducted with mothers of children with special needs, found that they experienced post-traumatic growth, and the participants reported that self-efficacy and religious and problem-focused coping facilitated their post-traumatic growth (Byra, Żyta, & Ćwirynkało, 2017). In another study conducted with the mothers of mentally retarded children, it was observed that the participants experienced both post-traumatic growth and post-traumatic stress disorder (Bargiel-Matusiewicz, Kiełb, & Pisula, 2019). In a qualitative study conducted with parents with children with special needs, the participants reported having experienced post-traumatic growth (Young, Shakespeare-Finch & Obst, 2020). The studies conducted with mothers with children with Down syndrome (Counselman-Carpenter, 2017) and mothers with autistic children (Zhang, Yan, Barriball, While & Liu, 2015) found that these mothers experienced post-traumatic growth in terms of life philosophy, appreciation of life, relationships with other individuals, personal strength, and spiritual change. These studies show that the trauma experienced by parents can trigger positive radical changes.

Trauma affects not only the individual but also the close social network of individuals and restructures their assumptions about life. Considering that there were 12.831 students with special needs in primary school in the 2019-2020 academic year in Turkey (Turkish Ministry of National Education, 2020), how mothers with such special needs children make sense of their difficult life experiences and how this system functions in the individual is an important question that needs to be answered. The current study is expected to shed light on the effects of trauma experienced by families and contribute



to the field of trauma counseling. Thus, the current study aims to examine the post-traumatic growth experiences of mothers who have primary school children with special needs.

METHOD

Research Design

The study focuses on the post-traumatic growth experiences of mothers who have children with special needs in primary school. The phenomenological research design (Johnson & Christensen, 2014; Patton, 2002; Yıldırım & Şimşek, 2016), a qualitative research method, was used in this study because the study deeply discusses how the participants make sense of the experiences related to growth after the traumatic event they have experienced.

Participants

The participants of the study include eight mothers who have children with special needs in primary school. The participants were determined using the criteria sampling technique (Patton, 2002). These criteria are having a child with special needs in primary school and agreeing to voluntarily participate in the study. An above-average score from the Posttraumatic Growth Scale (PTGS) (Tedeschi et al., 2017) was another criterion used. The scale consists of 25 items and is a 6-point Likert type scale. The score range that can be obtained from the scale is 0-125. The reason behind reaching out to mothers is that mothers are the primary care providers of special needs individuals and take responsibilities that will require radical changes in their lives. As such, the participants of the study included eight mothers who met these criteria. The detailed information about the participants is presented in Table 1.

Table 1. Participant Profiles

Participants	Age	Mother Education Status	Child's Special Needs Type	PTG Scale Score
P1	37	Primary school	Language and Speech	108
P2	32	Middle School	Language and Speech	98
P3	43	Primary school	Language and Speech	106
P4	31	High school	Mental, Physical Insufficiency	103
P5	40	No Graduation	Language and Speech	115
P6	34	High School	Mental Insufficiency	73
P7	43	High School	Learning Difficulty	92
P8	38	High School	Learning Difficulty	99

Researcher Roles

Researcher roles and personality traits are important in studies conducted by applying qualitative research methods. In this sense, the researcher who conducts the qualitative study is himself/herself a data collection tool rather than someone that records the phenomena experienced by the participants as it is (Creswell, 2013). Accordingly, the roles and demographic characteristics of the researcher have an important function.

One of the researchers who conducted this study completed her undergraduate, graduate and doctoral studies in the "Guidance and Psychological Counseling" department, and during this period she also took courses on qualitative research. She also wrote her doctoral thesis on the subject of post-traumatic growth. The researcher also continues her therapy education in different schools and



conducts qualitative research in the field. In addition, she maintains group and individual psychological counseling sessions.

The other researcher received her undergraduate degree in the field of “Guidance and Psychological Counseling”, earned her master's degree in the field of psychology, and continuing her doctorate studies in the same field, and is conducting qualitative research in this field. In addition, she maintains group and individual psychological counseling sessions.

Collection and analysis of data

The data were collected through interview sessions held in three stages. The volunteer participants were reached in line with the criteria determined in the first step of the study. The participants were given detailed information about the content of the study, the procedure to be followed, and the protection of confidentiality. Then, the informed consent was obtained from the participants who volunteered for the study. In addition, the participants were informed about the ethical principles of the research. In the second stage, a semi-structured interview session on post-traumatic growth experiences was conducted with mothers who have children with special needs. While preparing the draft of the interview form, the growth areas of the "Functional Descriptive Model" axis approach that deals with post-traumatic development (Calhoun & Tedeschi, 2006) and the findings of the literature were used as well. In addition, the interview form was finalized by consulting three experts working on qualitative research methods. The participants were asked the following questions during the interviews:

1. After this event, what have you discovered/experienced in a positive sense related to your other self-perception (personality traits)? Can you explain with an example?
2. What has changed positively in your relationships with other people after this event? Can you explain with an example?

In order to get to the essence of the phenomenon examined in the current study, in-depth information was obtained with probes and open-ended questions. At the last stage, participant confirmation was received regarding the findings based on participant opinions. The interviews were conducted in the school's psychological counseling service. Interviews lasted approximately 45-60 minutes.

The data was transcribed and sorted. The data were inductively analyzed by using the phenomenological analysis technique in five stages. Phenomenological analysis is a technique based on describing experiences related to phenomena that participants have directly experienced (Moustakas, 1994). The steps of the analysis are determining the important structures, grouping the common expressions, theming the meaning units, creating the structural and textural descriptions, and combining these descriptions in the last step (Moustakas, 1994). The codes and themes obtained after the analysis process carried out in stages were submitted to the approval of the participants and then the findings were finalized. In this study, twenty-eight codes and five sub-themes were obtained from the transcribed participant statements.

Validity and Reliability

In this phenomenological study, a number of methods were applied to ensure validity and reliability (Creswell, 2013; 2017; Yıldırım & Şimşek, 2016). Participant confirmation was sought to ensure internal validity. For this purpose, the participants were interviewed again to make sure that the data were understood correctly by the researchers, and all the participants confirmed the accuracy of the codes and themes obtained. In addition, expert opinion was sought and the findings were reviewed in line with the feedback. Detailed description was also used for the external validity of the study and quotations of participant statements were included. For external reliability, the data and the findings obtained from these data were compared to make sure that they were consistent. In addition, detailed profile information of the participants is presented under the heading titled as participants. For internal

reliability, consistency analysis was applied to examine whether the research activities were consistent or not.

RESULTS

The findings obtained as a result of interviews with mothers who have children with special needs in primary school constitute the five dimensions of the phenomenon of post-traumatic growth. The dimensions reached regarding this phenomenon are appreciation of life, life opportunities, relating to others, personal strength, and spiritual- existential change. The sub-themes and main theme reached in this study are presented in Figure 1.

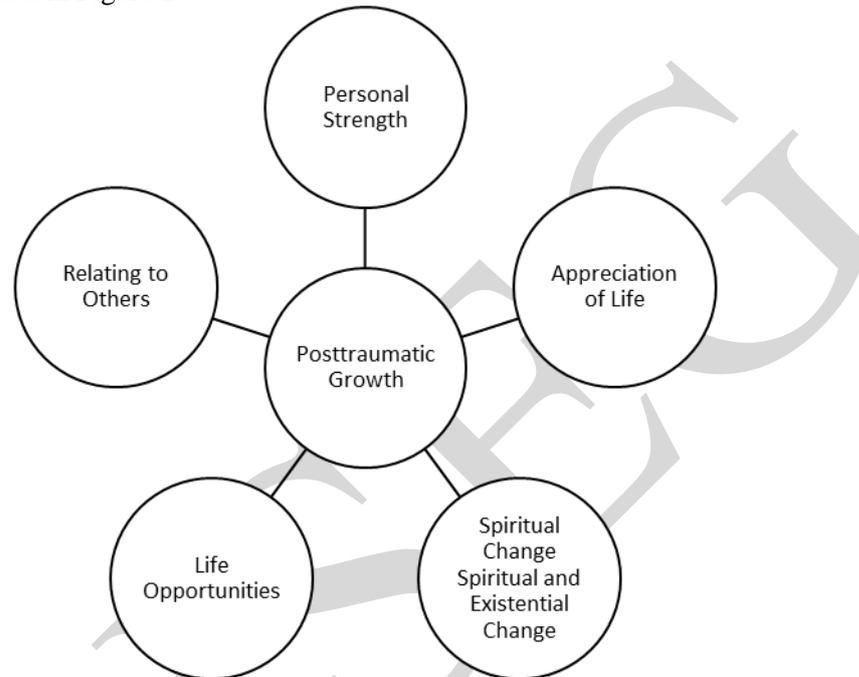


Figure 1. The main theme of the elements that constitute the post-traumatic growth experience of mothers with special needs children in primary school

Mothers who have children with special needs in primary school reported positive changes (family support, empathic understanding, etc.) they experienced in their relationships with other people in the theme of relating to others. Regarding the theme of personal strength, the participants stated the positive changes (self-confidence, survivors, etc.) they noticed in themselves. In the sub-theme of life opportunities, they expressed different life possibilities that they had not explored before. Concerning the spiritual and existential change, they talked about the changes they experienced on the meaning of life. Finally as regards the subtheme of appreciation of life, they reported that they felt the meaning of life with a deeper understanding.

Relating to others

The mothers who have children with special needs in primary school stated what the positive changes they had experienced in their relationships with other individuals were. The codes emerging in this dimension are classified as family support, tolerance in relationships, stronger family solidarity, teacher support, and empathic understanding. Some participant statements regarding the positive changes they experienced as a result of the traumatic experience in their relationships with other individuals are given below.

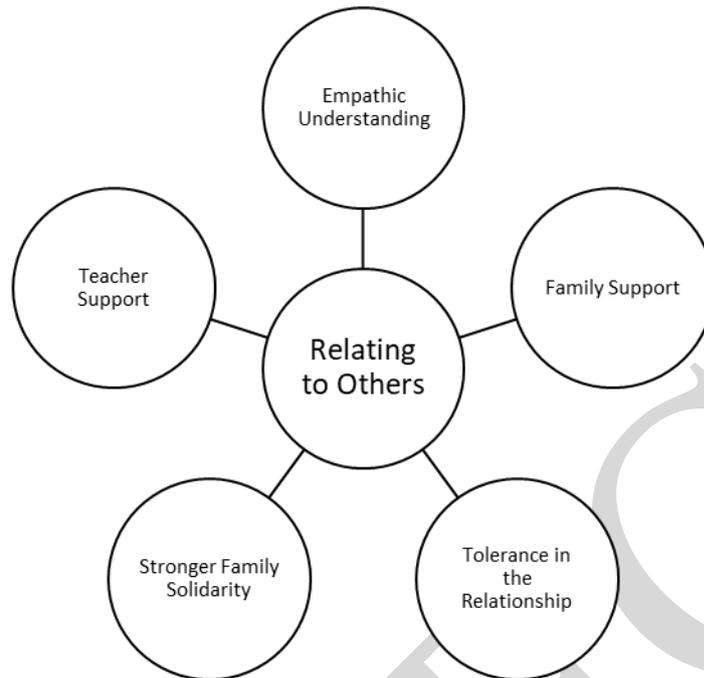


Figure 2. Relating to others subtheme and codes

“We are closer with my husband now, since Ahmet (nickname) is small and my husband can come home every day, he cares for the child, and we are closer. Since he was a truck driver while living in Istanbul, he could not come home every day, he could not see other children (of ours) growing up. But we are raising Ahmet together (P5).”

“My husband was very supportive, we researched (this problem) together. We stood together in solidarity (P1)”

Appreciation of Life

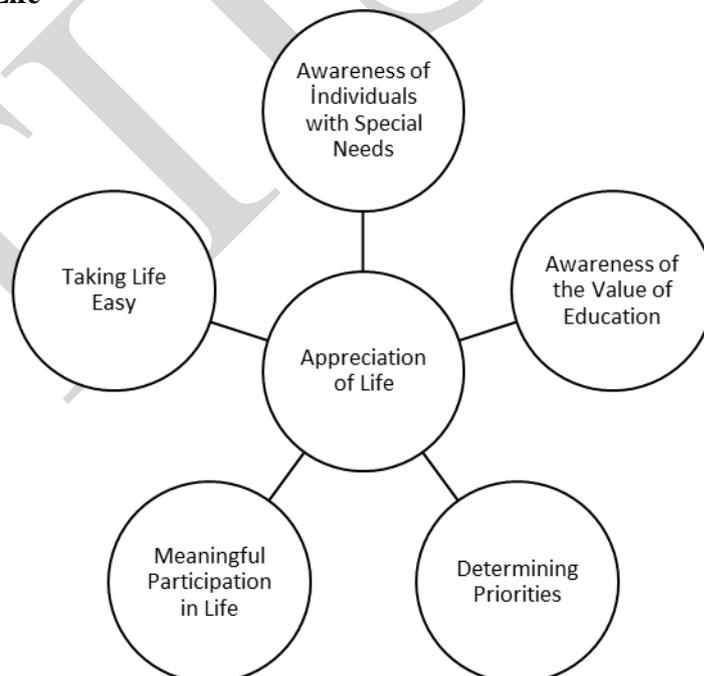


Figure 3. Appreciation of Life sub-theme and codes

The participants reported their experiences of positive changes in the appreciation of life sub-theme. The codes reached in this sub-theme are classified as awareness of the value of education, determining priorities, meaningful participation in life, taking life easy, and awareness of individuals with special needs. Some direct quotations related to positive change in appreciating life are given below.

“A lot has changed. I had a few dreams. I understood that everything is through education, even motherhood is through education. I discovered the importance of research and education. I want to study at high school, university. My diploma is in Kütahya. I made my application, I will start when my application is approved (P1).”

“I don't mind everything now. I do not feel sorry for everything. Things I used to cry about seem meaningless now (P2).”

“I used to eat (only) if they brought me something to eat. I would travel (only) if they took me somewhere. I grew up like that. They would drop me off at the open market by car and I would do my shopping there, they would pick me up from the same spot. I couldn't do anything on my own. ...Now I'm taking care of them. My view of life and my role have changed, I got stronger. Now I can do whatever I want (P4).”

Personal strength



Figure 4. Personal strength sub-theme and codes

The mothers who have children with special needs in primary school stated what the positive changes they experienced regarding self-perception were. The codes obtained under this subtheme were classified as patience, psychological hardiness, being extroverted and inquisitive, gaining an egalitarian approach in interpersonal relationships, gaining self-control, and a positive response to the environment. Some direct quotations reported by the participants regarding the positive changes in their self-perceptions are presented below.

“I saw that I was patient, Ali (nickname) taught me patience. Waiting for it to develop taught me patience because it is hard to wait for him to develop, to learn (P2).”

"I realized that I wouldn't feel sorry for things and shy away, I learned to fight. I learned that there is no such thing I cannot bring or buy. I can do anything. I learned to fight (P3)."

"My sensitivity towards different children has increased. When we were in high school, we had a friend, we would not take him into our group, we did not want to sit next to him. I am thinking of finding him and asking for his forgiveness (P6)."

Spiritual and Existential Change

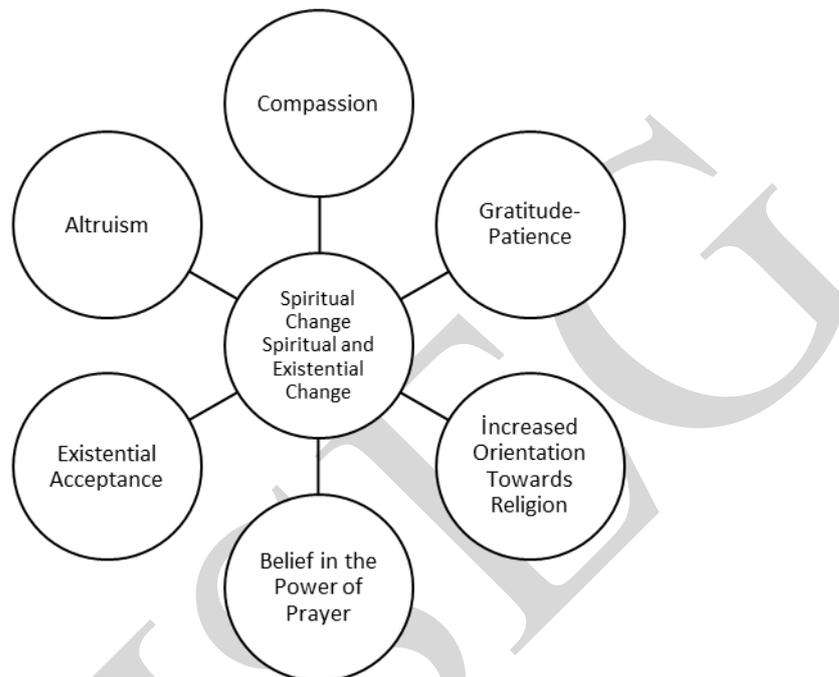


Figure 5. Spiritual and Existential Change sub-theme and codes

The participants stated what the positive changes they experienced in the spiritual and existential sphere were. The codes obtained in this dimension are gratitude-patience, increased orientation towards religion, belief in the power of prayer, compassion, existential acceptance, and altruism. Some sample statements from the participants about the spiritually and existentially positive changes they had are presented below.

"I saw worse ones. When we attend support education, you thank God, I am ashamed to tell the troubled mothers there what I came for. You are getting closer to God (P1)."

"You gravitate towards spirituality because everything comes from God, and you pray more because you already need it, but you realize that you are even needier (P2)."

"I never rebelled, I thought everything was at the discretion of God. I learned to be patient and to fight (P2)."

Life Opportunities

The participants reported the gains they had regarding the life opportunities. The codes obtained under this dimension are gaining self-efficacy, being open to innovations, developing coping strategies, knowing oneself, enhancing knowledge and education, and gaining job skills related to child development. Some statements expressed by the participants regarding this sub-theme are presented below.

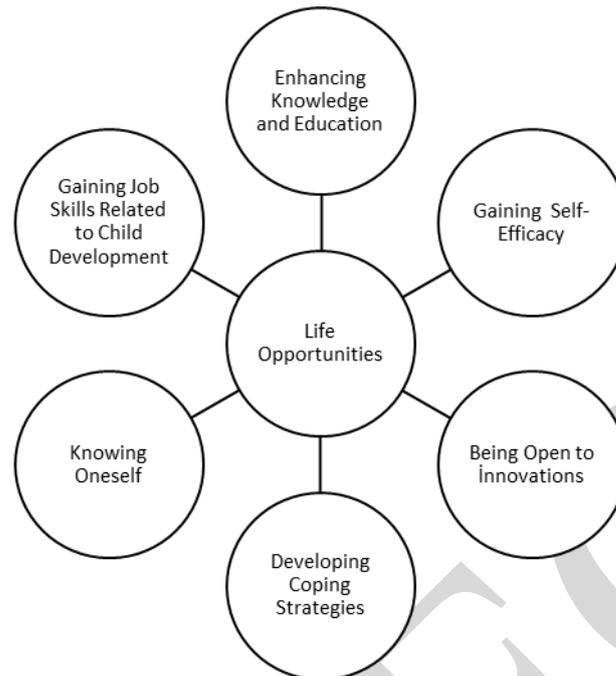


Figure 6. Life Opportunities sub-theme and codes

“First of all, people should be open to new things. You learn that the more things happen to you, the more you have to move forward. I am a primary school graduate. I urged my husband to study, and made my husband finish high school, who used to be middle school graduate. Why did not I apply to study at high school (I wish I did), now I am experiencing this regret. I noticed it with Ahmet (nickname) while I was busy taking care of him. Why didn't I do it? I learned to demand better (things) for myself (P2).”

“I am a child development (program) graduate. In this sense, my child development knowledge and practice skills have improved. I intend to start working in kindergartens after the children grow up a little (P6).”

“Gaining a love of reading, making education plans were opportunities that I have taken advantage of (P2).”

DISCUSSION and CONCLUSION

The mothers with special needs children are observed to have experiences regarding post-traumatic growth in all five dimensions. These themes are personal strength, relating to others, appreciation of life, existential and spiritual change, and life opportunities. This finding confirms the post-traumatic growth dimensions proposed in the Functional Descriptive Model (Calhoun & Tedeschi 1998; Calhoun & Tedeschi, 2006; Tedeschi & Calhoun, 1996). In addition, the findings also support the literature findings conducted with individuals with special needs (Bargiel-Matusiewicz, Kielb, & Pisula, 2019; Can, 2018; Day, 2013; Hammer et al., 2019; Konrad, 2006; Li, Bai, Lou, & Cao, 2019; Shariati, Naeimi, & Kalantar Hormozi, 2019). These studies confirm that individuals with special needs or their parents experience post-traumatic growth. The results of the present study were consistent with the findings reported in the literature and contributed to the expanding on these findings. The literature has been enriched with these new findings by presenting evidence that mothers with children with special needs can experience post-traumatic growth in Turkish culture as well.



The dimension of relating to others emphasizes deepening of relationships and empathy, appreciation of family and friends, and social support (Altınsoy, 2021; Linley & Joseph, 2004; Tedeschi, Park, & Calhoun, 1998; Tedeschi & Calhoun, 1995). In the present study, the mothers with children with special needs were found to experience post-traumatic growth in the dimension of relating to others. The participants defined the positive changes they had in relating to others as family support, tolerance in relationships, increase in family solidarity, teacher support and empathic understanding. The studies conducted with parents of children with various disabilities report growth gains in relationships with others, increased family resilience, and increased attachment to others and social support (Counselman-Carpenter, 2017; Konrad, 2006; Li, Bai, Lou, & Cao, 2019; Zhang, Yan, Barriball, While & Liu, 2015). These results support the findings in the current study regarding the sub-theme of relating to others. The findings can be interpreted to indicate that the participants strengthened their relationships with both family members and other individuals over time and restructured their relationship dynamics.

The dimension of personal strength emphasizes positive changes in self-perception as a survivor, the idea that difficulties can be overcome, and self-confidence (Calhoun & Tedeschi, 2006; Tedeschi, Park, & Calhoun, 1998). In the present study, the participants defined personal strength as patience, psychological hardiness, being extroverted and inquisitive, gaining an egalitarian approach in interpersonal relationships, gaining self-control, and a positive response to the environment. The studies conducted with individuals with different types of disabilities and their parents have found positive self-transformations, developing various internal resources, viewing the self as a survivor, strengthened self-efficacy, acquiring coping skills, and improvements in self-perception (Byra, Żyta, & Ćwirynkało, 2017; Counselman-Carpenter, 2017; Hammer, et.al., 2019; Konrad, 2006; Li, Bai, Lou, & Cao, 2019; Young, Shakespeare-Finch & Obst, 2020; Zhang, Yan, Barriball, While & Liu, 2015). Based on these findings, it can be said that the findings regarding the personal strength dimension have been consistent. The findings can be interpreted as that the difficulties arising from the painful experience of the participants made them stronger and having a special child helped them gain a more egalitarian perspective towards all people.

Appreciation of life emphasizes reconstructing the meaning of life such as discovering deep meanings about the value of life, knowing the value of life, and developing priorities (Calhoun & Tedeschi, 2006; Tedeschi & Moore, 2016). The participants explained the sub-theme of appreciation of life as awareness of the value of education, determining priorities, meaningful participation in life, taking life from easy, and awareness of individuals with special needs. The studies conducted with individuals with different disabilities and their parents have reported the discovery of deep and new meanings about life, knowing the value of life and reviewing priorities (Counselman-Carpenter, 2017; Day, 2013; Konrad, 2006; Young, Shakespeare-Finch & Obst, 2020; Zhang, Yan, Barriball, While & Liu, 2015). When the findings obtained from these studies are considered, it can be said that common codes have been reached. The finding obtained from the life appreciation dimension can be interpreted as that trauma helps participants to reconsider the meanings they attribute to life and create new schemas regarding the value of life.

The life opportunities dimension includes actions such as making discoveries that will change the direction of life, seeing new possibilities in life, developing new interests, and developing hidden skills (Altınsoy, 2021; Calhoun & Tedeschi, 2006; Tedeschi & Calhoun, 1996). The participants explained this sub-theme as gaining self-efficacy, being open to innovations, developing coping strategies, improving self-knowledge, enhancing knowledge and education, and gaining job skills related to child development. The research conducted with individuals with different disabilities and their parents has reported that individuals discover new opportunities for life, gain new skills, gain maternal skills and ensure personal growth (Counselman-Carpenter, 2017; Konrad, 2006; Young, Shakespeare-Finch & Obst, 2020; Zhang, Yan, Barriball, While & Liu, 2015). Overall, the findings obtained from these studies appear consistent. The findings can be interpreted as the new



responsibilities brought by having a child with special needs contributed to the development of various skills that the participants had not experienced before.

Change in the spiritual and existential sphere includes actions such as positive changes in the belief system, belief in the existence of a transcendent power, existential questioning, and facing death (Tedeschi & Calhoun, 1996; Tedeschi & Moore, 2016). The participants defined this sub-theme as gratitude-patience, increased orientation to religion, belief in the power of prayer, compassion, existential acceptance, altruism. In studies conducted with different disability groups and the parents of individuals in these groups, the participants stated that they found new meanings in spiritual sense, experienced spiritual development, reviewed their belief system, and examined existential issues (Counselman-Carpenter, 201; Konrad, 2006; Shariati, Naeimi, & Kalantar Hormozi, 2019; Young, Shakespeare-Finch & Obst, 2020; Zhang, Yan, Barriball, While & Liu, 2015). These can be interpreted as similar gains in common themes regarding spiritual and existential change. The finding obtained in the sub-theme of spiritual change can be interpreted as that the participants made radical changes in their belief systems.

Limitations and Suggestions for Further Research

Even though conducting the study only on mothers might be considered as a limitation, the current study obtained some important findings about how parents make sense of the trauma they experienced, and how they achieved positive changes beyond the acceptance stage by passing through the stages of shock and denial. Focusing on the experiences of mothers who provide primary care to individuals with special needs in particular has revealed some significant findings on the effects of these traumatic life experiences on mothers. The findings of this study can be used in counseling processes with individuals with special needs and their parents, both with individuals and groups. For example, in intervention programs, individuals can be assisted to make sense of trauma by adding components related to self-perception, relationships with other individuals, spirituality, new possibilities, and appreciating life. In addition, policy makers and practitioners can benefit from these findings in the improvements to be made regarding the teaching environments at the primary education level. The findings show that mothers achieved positive gains in five areas with their growth experiences. In order to further expand these findings, changes in mothers' growth perceptions can be examined with longitudinal studies.

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