



Case of Social Interaction Problems in Children Related to Changes in Family Conditions Following Parental Divorce at SDN X

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ABSTRACT

Social interaction problems in children can affect their ability to build relationships with peers, engage in group activities, and adjust to school. This study aims to obtain an overview of social interaction problems in children related to changes in family conditions after parental divorce. The study used qualitative and quantitative approaches with assessment methods in the form of interviews, observations, and psychological examinations using the Wechsler Intelligence Scale for Children (WISC) and House Tree Person (HTP). The subject of the study was a child aged 11 years and 8 months. The assessment results showed that the subject experienced social interaction problems characterized by a tendency to be alone, refusing invitations to play from peers, low involvement in group activities, limited responsiveness in communication, and the emergence of emotional responses such as tension and crying when in certain interaction situations. The WISC results showed that the subject's intellectual capacity was in the average category (FSIQ = 93), so the problems found were more prominent in the emotional and social aspects than intellectual capacity. The interview results showed feelings of sadness and limited interaction with both parents after the divorce, while the HTP results indicated emotional dynamics and the possibility of limited emotional closeness within the family. Based on George Herbert Mead's social interaction perspective, these conditions indicate obstacles in the process of gesture, response, social act, and interpretation of social situations. Changes in family conditions after divorce are seen as a contextual factor related to the subject's emotional state and social interaction patterns. These findings demonstrate the need for consistent emotional support and school and family involvement to help increase children's comfort and engagement in social interactions.

INTRODUCTION

Problems in social interactions in children are an important aspect that requires attention, as the ability to build relationships with peers plays a crucial role in supporting their social and emotional development in the school environment. Positive interactions with peers can help children develop communication skills, cooperate, adapt, and build self-confidence. Conversely, persistent barriers to social interactions can impact a child's involvement in school activities and their adjustment to the social environment. Based on preliminary information obtained from the sixth-grade homeroom teacher, changes in the social interaction patterns of children with special needs (DPP) have been observed over the past year. These changes are characterized by a tendency for DPP to withdraw more often in class, refuse invitations to play with peers, and demonstrate relatively low involvement in group activities. This indicates a change in DPP's social engagement patterns compared to previous levels and is a concern for the school.

The tendency to withdraw from peer interactions requires further understanding, considering various possible underlying factors. This condition may be related to the child's social experiences, the characteristics of the school environment, relationships with peers, or internal factors that influence the child's comfort in interacting. Therefore, an assessment process is necessary to gain a more comprehensive understanding of the conditions of children with disabilities (DPP), including social interaction patterns, factors contributing to behavioral changes, and their impact on the DPP's activities and adjustment in the school environment.

The assessment is conducted to objectively identify the conditions and needs of children with disabilities (DPP) so that they can form the basis for determining appropriate forms of support or intervention. The assessment results are expected to provide a picture of the dynamics of DPP's social interaction problems and assist schools and the immediate community in providing appropriate support for the child's social and emotional development.

During learning activities, the DPP appeared to be quiet and looked down when asked to speak in front of the class or express an opinion. During breaks, DPP was often seen sitting alone in a corner of the classroom and not responding to friends' invitations to play, indicating difficulties in interacting with peers. The teacher also reported that when invited to communicate, DPP sometimes did not respond or showed difficulty in interacting, resulting in suboptimal communication. On several occasions, DPP appeared to cry when approached by the teacher, indicating discomfort in the interaction.

Furthermore, the teacher reported that there were no significant impairments in DPP's academic performance. However, in learning activities involving social interaction, such as group discussions, DPP appeared uncomfortable, tended to be passive, and did not engage optimally. Based on these conditions, it is clear that there are problems with DPP's social interaction, so the school requested psychological services to gain a more comprehensive understanding and support the child's social development.

According to the homeroom teacher, changes in DPP's social interaction began to appear around the past year, coinciding with changes in family circumstances resulting from his parents' divorce. Previously, DPP was known as a more active child who interacted easily with peers. These changes persisted for approximately 12 months and were consistently visible until the assessment. The homeroom teacher reported that DPP often withdrew during recess, approximately 4–5 times a week, and declined playtime invitations from peers approximately 2–3 times per week, indicating difficulties with social interaction.

During learning activities, DPP almost always appeared tense and reluctant when asked to speak or express opinions in front of the class. Furthermore, when invited to communicate, DPP sometimes did not respond or showed difficulty interacting with the teacher or peers. On several occasions, DPP appeared to cry when approached by the teacher, further hindering the child's involvement in social situations at school. In terms of intensity, DPP appears more withdrawn, avoids eye contact, and provides minimal responses unless directly questioned. When the teacher approaches, DPP often exhibits behaviors such as lowering their head, biting their lip, or holding back tears, reflecting discomfort in interactive situations. In social situations, such as group activities or class discussions, DPP appears stiff, passive, and displays discomfort compared to their peers. This condition indicates problems in social interaction experienced by children with DPP.

Social interaction problems in children with DPP are understood based on George Herbert Mead's (1934) social interaction theory, which states that social interaction is a process of exchanging meaning between individuals through a series of gestures, responses, and social acts that develop into symbolic communication. In this process, individuals not only respond to each other but also interpret the meaning of interactions that occur within a social context. Based on this framework, the behaviors exhibited by children with DPP indicate obstacles in the process of social interaction, particularly in the aspects of providing and responding to social stimuli, engaging in reciprocal interactions, and understanding the meaning of social situations. Thus, the temporary assumption shows that DPP children experience problems in social interactions related to limitations in the process of reciprocal interaction in the school environment.

FRAMEWORK OF THINKING

The problems experienced by children with PPD include difficulties in social interaction, characterized by limitations in establishing relationships with the social environment and the emergence of discomfort in interaction situations. This condition is part of the psychological dynamics that develop within the context of the child's life experiences. The psychological dynamics of PPD were analyzed based on assessment results that included interviews, observations, and psychological examinations using the social interaction theory framework of George Herbert Mead (1934), which views social interaction as a process involving gestures, responses, and social acts that develop into meaningful communication. Based on the results of the intellectual examination using the WISC, PPD has an intellectual capacity in the average category (FSIQ = 93). This

indicates that cognitively, PPD has adequate abilities to participate in the learning process at school. Thus, the problems experienced are not related to intellectual factors, but rather psychosocial aspects, particularly in social interaction. The results of interviews and observations indicate that PPD tends to be alone, refuses invitations to play, and is less involved in group activities. Furthermore, the DPP appeared to avoid eye contact, provided minimal responses in communication, and exhibited emotional reactions such as tension and crying in certain interaction situations.

Within Mead's framework, these conditions indicate a barrier to social interaction, particularly in the provision and response to social stimuli (gestures and responses), as well as engagement in reciprocal interactions (social acts). The child appeared to have difficulty responding adaptively to social situations and tended to withdraw from interactions in his environment. Furthermore, interviews revealed that the DPP expressed sadness related to his parents' divorce. The child also expressed discomfort interacting with peers and a tendency to prefer solitude. Furthermore, the DPP expressed a fear of making mistakes and a feeling of discomfort in social situations due to the feeling of disturbing others.

These emotional experiences influence how children interpret social interactions (meaning), resulting in the social environment being perceived as uncomfortable. This leads to a tendency to avoid interactions, limit involvement in social activities, and provide minimal responses in social communication. Therefore, social interaction problems in children with ADHD can be understood as limitations in the social interaction process, including gestures, responses, and social acts, influenced by the child's emotional experiences related to family circumstances. This condition results in children's low engagement in social interactions in the school environment. Based on these dynamics, interventions are focused on increasing children's comfort in social interactions and providing positive relationship experiences. A supportive counseling approach is used to help children feel safer and more comfortable in interactions through empathetic, warm, and non-judgmental relationships.

Furthermore, psychoeducation for teachers is provided to increase understanding of the child's condition and support the creation of a more supportive environment at school. Teachers are expected to provide consistent, patient responses and positive reinforcement to every interaction attempt made by the child. Through these interventions, it is hoped that children will gradually improve their ability to respond to social situations and engage in social interactions in the school environment.

RESEARCH METHODS

This study uses a qualitative and quantitative approach using assessment methods, namely observation, interviews, and psychological tests using the WISC test tool and the HTP (House Tree Person) projective test with the research subject being one child aged 11 years and 8 months.

RESEARCH RESULT

The results of the assessment phase of the study were based on interviews with the DPP's homeroom teacher using a semi-structured interview method, lasting approximately 60 minutes. Based on the interview results, the homeroom teacher reported that DPP displayed a tendency to withdraw from social interactions with peers. This behavior was particularly evident during recess, where DPP frequently spent time alone, approximately 4–5 times per week. Furthermore, DPP also reportedly declined invitations to play with peers several times, approximately 2–3 times per week.

During learning activities involving group work, DPP appeared less engaged in interactions with his peers. DPP tended to be quiet and showed limited participation during the activity. The homeroom teacher also reported that on several occasions DPP was seen crying when approached or when communicated with by others. This situation indicates an emotional response that arises in social interaction situations and is one of the issues that needs further understanding through the assessment process.

Meanwhile, interviews with DPP's parents were not possible during the assessment process because the parents could not be contacted. Thus, information regarding the DPP's condition within the family environment and their behavior outside the school environment cannot yet be obtained directly. Therefore, the interview results at this stage primarily describe the DPP's condition based on observations and information provided by the homeroom teacher within the school environment. The interview with the Principal (DPP) was conducted on Monday, February 3, 2025, in the classroom and teachers' lounge at SD XX, using a semi-structured interview method for approximately 60 minutes. Based on the interview results, the Principal expressed feelings of sadness related to his family situation, particularly after his parents divorced. He explained that his parents currently live separately and are quite far apart. Furthermore, both of his parents are busy working late into the night, limiting opportunities for direct interaction and communication with his parents.

In his daily life, the Principal explained that he is primarily cared for by his grandmother at home. This situation, he perceived as limiting his ability to receive attention and emotional closeness from his parents. This family situation also contributed to his emotional experiences, with the child expressing feelings of sadness and a tendency to withdraw more. In the context of social interactions, the Principal revealed that he feels uncomfortable interacting with others, both peers and adults. He stated that he tends to avoid situations that require interaction and prefers to remain silent when spoken to. The child also revealed that when communicating with others, he tended to give brief responses and did not engage much in conversation.

The DPP also stated that he felt more comfortable alone than when having to participate in activities involving social interaction. Therefore, based on the interview results, the DPP demonstrated a tendency to withdraw from social interactions, accompanied by discomfort in communication and a preference for solitude. This condition also emerged in the context of the child's emotional experiences related to changes in family circumstances and limited interaction with both parents. These interview findings need to be considered alongside

observational data and other assessments to obtain a more comprehensive picture of the DPP's condition.

Furthermore, observations of the DPP were conducted on February 3–5, 2025, in the classrooms and school environment of SD XX. Observations were conducted in three sessions, each lasting approximately 60 minutes, using a non-participant direct observation method. During the observations, the DPP appeared to isolate himself from his peers and often sat alone. He was also seen lowering his head several times and making limited eye contact when interacting with his surroundings. The DPP's response to surrounding social activities and stimuli appears relatively minimal.

During learning activities involving group activities, the DPP appeared to be more silent and tended to wait for direction from their peers before engaging in activities. He also demonstrated limited involvement in group activities and took few initiatives to communicate or interact with other group members. This situation appears consistent with his tendency to be more passive in situations involving social interaction. A different response was observed when the teacher approached him. On several occasions, he appeared to display tension when the teacher approached. He also displayed a sudden crying response several times when approached or interacted with. These responses indicate an emotional reaction to certain interaction situations in the school environment.

Overall, observations indicate that the DPP tended to withdraw from social interactions, characterized by a tendency to sit separately from peers, limited eye contact, minimal response to the environment, and low participation in group activities. Furthermore, he exhibited tension and crying responses in certain interaction situations, particularly when approached by the teacher. These observational findings need to be integrated with interview results and other assessment data to gain a more comprehensive understanding of the DPP's condition.

Furthermore, psychological testing using the Wechsler Intelligence Scale for Children (WISC) found that the child's intellectual capacity was average (FSIQ = 93), with relatively balanced verbal and nonverbal abilities. The child had adequate ability to understand simple information and reason, but still had weaknesses in understanding more complex verbal skills and tasks that required planning, speed, and precision. In general, cognitive abilities were adequate for learning, so the problems that arose were more related to emotional and social aspects.

The House Tree Person (HTP) test results found that the child's family held a significant position in his life and self-perception. The house, as a symbol of family, reflected the subject's attention to the family environment. However, the rigid and closed shape of the image indicated a possible emotional distance in family relationships, particularly with the mother figure. The mother figure was perceived as being assertive, less expressive, and relatively difficult to approach emotionally. This condition could be related to the subject's limited experience in gaining or expressing emotional closeness in relationships with the mother.

Meanwhile, the tree, representing the father figure, was depicted with a relatively strong structure. This indicates that the subject tends to view the father as a strong and reliable figure. The presence of additional elements in the drawing may also indicate that the subject perceives the father figure as having a particular burden or responsibility within the family. Thus, the father figure appears to hold a significant position in the subject's perception of security and support within the family.

Overall, the assessment results indicate emotional dynamics within the family environment that may influence the subject's self-understanding and relationship building. The subject appears to have difficulty openly expressing feelings and needs, accompanied by a possible tendency toward emotional regression and withdrawal when faced with social situations. The simplicity of the drawing may also reflect limitations in representing oneself and broader social relationships. These findings suggest that changes or dynamics in the family environment are potentially related to the subject's social interaction patterns, particularly in terms of emotional openness, interpersonal closeness, and the ability to build relationships with those around them.

Therefore, based on the overall assessment data obtained through observation, interviews, and psychological testing, the DPP indicates consistent problems in social interaction. These problems are manifested through a tendency to withdraw from social environments, low involvement in group activities, and limitations in initiating and maintaining interactions with peers and teachers in the school environment. DPPs also tend to show minimal social responses and prefer to be in a passive position when in situations involving other people. This pattern indicates that DPPs are experiencing obstacles in building optimal social relationships within the school environment. This condition is not only evident in the low frequency of social interactions but also in the limitations in openly expressing needs, feelings, and responses to others. Thus, the primary problem seen in DPPs relates to their ability and comfort in social interactions, particularly in building closeness and engagement with the social environment at school.

DISCUSSION

Based on the overall assessment results, it was found that the DPP exhibited social interaction problems characterized by a tendency to withdraw, low involvement in group activities, limitations in initiating and maintaining interactions, and the emergence of emotional responses in certain social situations. These findings were consistently obtained through interviews with the homeroom teacher, interviews with the DPP, direct observations in the school environment, and were supported by psychological examination results. The consistency of findings across various assessment methods indicates that DPP's social interaction problems do not only appear in specific situations but have become a behavioral pattern evident in his daily life at school.

The interviews with the DPP suggest that these social interaction problems are related to emotional experiences experienced following his parents' divorce. DPP expressed sadness over his family situation, particularly as his parents currently live separately and are quite far apart. This situation is further

exacerbated by the busy schedules of both parents, who work late into the night, limiting DPP's opportunities for direct interaction and communication with his parents. DPP is primarily cared for by his grandmother. This situation can be understood as a significant change in the child's relational experiences, particularly related to reduced opportunities for direct presence, attention, and emotional closeness from both parents.

Changes in family circumstances after divorce can be emotionally stressful for children. Divorce not only alters the relationship between the parents but can also bring about changes in parenting patterns, residence, daily routines, and the intensity of the child's interactions with each parent. In DPP, these changes appeared to be accompanied by feelings of sadness, a tendency to withdraw, and discomfort when interacting with others. Therefore, the post-divorce family situation in this case can be seen as an important context related to the emergence of changes in DPP's emotional responses and social interaction patterns, although the relationship cannot be understood as causal.

DPP's tendency to withdraw is also evident in the school environment. According to the homeroom teacher, DPP often spends recess alone, approximately 4–5 times a week, and has repeatedly declined invitations to play with peers, approximately 2–3 times a week. These findings align with observations showing that DPPs tend to sit separately from their peers, are often quiet, have limited eye contact, and respond minimally to social situations. In group activities, DPPs also show little initiative in communicating and tend to wait for direction from their peers. This pattern suggests that DPPs not only have limited opportunities for social interaction but also show a tendency to reduce active involvement in social situations.

Withdrawing from social environments can be a child's response to emotional discomfort. In the case of DPPs, a preference for solitude can be understood as a way for children to gain a sense of security or reduce the emotional demands that arise from interacting with others. This is evident in DPP's statement that he feels more comfortable alone than when participating in activities involving social interaction. DPPs also tend to give short responses and prefer silence when spoken to. Thus, DPP's withdrawal behavior can be understood not solely as a lack of social skills but also as a response to emotional discomfort experienced in interpersonal situations.

In addition to interactions with peers, interaction barriers were also evident in the DPP's relationship with teachers. Observations revealed that on several occasions, the DPP appeared tense when teachers approached and even cried when approached or interacted with. The homeroom teacher also reported similar symptoms when the DPP was approached or communicated with by others. The emergence of crying responses in interaction situations indicates that certain social demands can elicit quite strong emotional reactions in the DPP. This is important to note because interactions with teachers are fundamentally a vital part of a child's school experience. If interactions with adult figures are also perceived as uncomfortable, the child's opportunities for social support in the school environment can be further limited.

The WISC assessment revealed that the DPP's intellectual capacity was average, with an FSIQ of 93 and relatively balanced verbal and nonverbal abilities. The DPP's cognitive abilities were generally adequate to meet the demands of learning. Although there were weaknesses in more complex verbal comprehension and tasks requiring planning, speed, and precision, these results did not indicate an intellectual disability that could directly explain the overall social interaction problems identified. Therefore, the problems seen in the DPP are more prominent in the emotional and social aspects than in the intellectual capacity aspect. This finding also reinforces the understanding that the DPP's low involvement in group activities cannot be simply viewed as a result of low cognitive abilities.

Meanwhile, the HTP results provide insight into how the DPP interprets the family environment and parental figures. The house, as a representation of family, indicates that family plays a significant role in the DPP's psychological experience. However, the rigid and closed characteristics of the drawing may indicate experiences of limited emotional closeness, particularly with the mother figure. Meanwhile, the tree, representing the father figure with a relatively strong structure, may indicate that the father is perceived as a strong and reliable figure, while additional elements in the drawing may point to the possibility that the DPP perceives a certain burden or responsibility on the father figure. The HTP results should be understood as supporting data illustrating the possible dynamics of the DPP's perceptions and emotional experiences, not as sole evidence to determine psychological conditions or causal relationships.

When integrated, the HTP and interview results indicate congruence in the importance of parental figures for the DPP, as well as experiences of limited emotional closeness following changes in family circumstances. The DPP verbally expressed sadness because his parents lived apart and had limited time to interact with him. At the same time, the HTP results suggested a possible emotional distance in family relationships. The alignment between these two sources of information suggests that changes in family structure and interaction patterns likely have emotional significance for the DPP and may be related to how he responds to interpersonal relationships in other settings.

This situation can be understood from a child development perspective, where the family is the primary environment for children to gain a sense of security, emotional support, and learn to build interpersonal relationships. When significant changes in family structure and relationship patterns occur, children may need time and support to adjust to the new situation. In the DPP, this adjustment process is evident through feelings of sadness, a tendency to be alone, limited emotional expression, and increased discomfort in social interactions. Therefore, changes in family conditions after divorce can be a relevant context for understanding the emergence of DPP's social interaction patterns at school.

However, the assessment findings do not indicate that parental divorce is the sole cause of the child's social interaction problems. A child's social interactions are the result of various interrelated factors, including emotional experiences, parenting styles, the quality of relationships with parents, personality characteristics, experiences with peers, and the school environment.

In the case of the child, limited information from parents due to the inability to interview them constitutes a limitation of the assessment. Therefore, interpretations of the family's circumstances must be carefully considered and based on the information available from the child, the homeroom teacher, observations, and the results of psychological examinations.

Overall, the assessment results indicate that the child experiences obstacles in establishing and maintaining optimal social interactions in the school environment. These obstacles are evident in withdrawal, low participation in group activities, minimal communication initiative, a tendency to respond curtly, and emotional responses such as tension and crying in certain interaction situations. At the same time, the child experiences changes in family circumstances following the child's divorce, accompanied by limited direct interaction with both parents and subjective experiences of sadness and reduced emotional closeness. Based on the integration of all data, these changes in family circumstances can be viewed as a contextual factor related to the emotional state and social interaction patterns of the DPP. The primary issue identified is not intellectual capacity, but rather emotional and social aspects, particularly the DPP's ability and comfort in engaging, communicating, and building close relationships with others.

CONCLUSION

Based on the assessment results, which included interviews, observations, and psychological examinations, the DPP demonstrated problems in social interaction. These problems were characterized by a tendency to be alone, refusal to play with peers, low involvement in group activities, and limited communication skills within the school's social environment. These conditions indicate difficulties in establishing and maintaining social relationships, both with peers and teachers. These problems impacted the DPP's involvement in learning activities, particularly those requiring social interaction, such as discussions and group work.

Based on the perspective of George Herbert Mead's social interaction theory, the problems experienced by the DPP can be understood as limitations in the social interaction process, which includes the ability to receive and provide social stimuli (gesture), provide appropriate responses (response), and engage in reciprocal interactions with others (social act). Furthermore, the DPP also demonstrated a tendency to interpret social interaction situations as uncomfortable (meaning), resulting in low participation in social relationships. These conditions are thought to be influenced by emotional experiences related to changes in family circumstances resulting from parental divorce, which influenced the DPP's perception and response to the social environment. As a result, DPP children tend to avoid interactions, withdraw, and show limited involvement in their social environment.

Based on the results of the assessment, the current condition of DPP children can be categorized as doubtful with a tendency to improve, but shows potential for improvement with appropriate and sustained psychological intervention. This potential for improvement is supported by several factors,

including the child's average cognitive capacity, which enables them to understand directions and follow the intervention process well. Furthermore, support from the school environment, particularly the attention and involvement of teachers, is a crucial factor in helping children feel more comfortable in social interactions in the classroom.

On the other hand, there are inhibiting factors stemming from the family environment, namely changes in circumstances due to parental divorce and the child's perceived limited emotional support. These conditions have the potential to impact the child's sense of security in social relationships, which in turn can lead to discomfort in interactions and a tendency to withdraw from the social environment. If these inhibiting factors are not balanced with consistent emotional support from the family environment, the process of improving the child's social interaction skills is at risk of being suboptimal. Therefore, continuous involvement between the school and the family is needed so that the interventions provided can take place effectively and provide optimal results.

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