

Parenting Stress, Anxiety and Depression among Parents of Children with Disabilities



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Abstract

Stress, anxiety, depression and social adjustment are vital aspects of parental life. Experiencing an optimal amount of stress, anxiety and depression during parental life is as normal as other life situations. Physiological and intellectual development of the child also have an impact on these aspects of parental life. It is seen that parents of children with mental retardation and physical disabilities are likely to experience more of these aspects like stress, anxiety and depression than parents of children with non-disabilities. It is also seen that parents of children with disabilities are less capable of coping with stress, anxiety and depression than parents of children with non-disabilities. Lack of enough social support and resources also lead to parenting stress. The present study aims to find out the level of stress, anxiety and depression among the parents of children with disabilities and non-disabilities. The findings have been discussed at the end of this paper.

Keywords: Parental Stress, Anxiety, Depression, Stress, Disabilities.

Introduction

Stress

Stress is simply a reaction to a stimulus that disturbs our physical or mental equilibrium. In other words, it is an omnipresent part of life. A stressful event can trigger the "fight-to-fight" response, causing hormones such as adrenaline and cortisol to surge through the body. A little bit of stress, known as "acute stress", can be exciting- it keeps us active and alert. But long-term, or "chronic stress", can have detrimental effects on health. We may not be able to control the stressors in our world, but we can alter our reaction to them. There are many strategies to cope with stress like avoidance oriented strategy, emotional oriented strategy, problem focused strategy. Also nowadays many stress management techniques have been developed to deal effectively with stress.

Anxiety

Anxiety is an unpleasant state of inner turmoil, often accompanied by nervous behavior, such as packing back and forth, somatic complaints and rumination. It is the subjectively unpleasant feelings of dread over anticipated events, such as the feeling of imminent death. Anxiety is not the same as fear, which is a response to a real or perceived immediate threat; whereas anxiety is the expectation of future threat. Anxiety is a feeling of fear, worry, and uneasiness, usually generalized and unfocused as an overreaction to a situation that is only subjectively seen as menacing. It is often accompanied by muscular tension, restlessness, fatigue and problems in concentration. Anxiety can be appropriate, but when experienced regularly the individual may suffer from an anxiety disorder.

Depression

Depression is more than just a low mood. Sadness, moody or low from time to time are indicators of depression. Depression is characterized by persistently depressed mood or loss of interest in activities causing significant impairment in daily life. While we all feel sad, moody or low from time to time, some people experience these feelings intensely for long periods of time or without any apparent reason.

Disabilities

Disability is the consequence of an impairment that may be physical, cognitive, mental, sensory, emotional, developmental, or some combination of these. An individual may also qualify as disabled if they have had an impairment in the past or is seen as disabled based on a personal or group standard or norm. Such impairments may include

physical, sensory, and cognitive or developmental disabilities. Mental disorders and various types of chronic disease may qualify as disabilities.

Conditions causing disability are classified by the medical community as:

1. Inherited (genetically transmitted);
2. Congenital, meaning caused by a mother's infection or other disease during pregnancy, embryonic or fetal developmental irregularities, or by injury during or soon after birth;
3. Acquired, such as conditions caused by illness or injury; of unknown origin.

Parenting Stress

Parenting stress is a normal part of the parenting experience. It arises when parenting demand exceed the expected and actual resources available to the parents that permit them to succeed in the parent role. Hypotheses regarding the formation and maintenance of parent-child relationships, and regarding daily "hassles", predominate in theories of parenting stress.

Statement of the Problem

To study parenting stress, anxiety, depression among parents of children with disabilities.

Review of Literature

Beth M. Lessenberry, Ruth Anne Rehfeldt in 2003 conducted a study on Evaluating Stress Levels of Parents of Children with Disabilities. They provided an overview of the different assessment instruments currently used to evaluate stress in parents of children with disabilities, and make recommendations for further research and/or professional use of each instrument.

Samuel Bauman, 2004, conducted a study on Parents of Children with Mental Retardation: Coping Mechanisms and Support Needs. The purpose of this research was to explore the subjective experiences of families of children with mental retardation, specifically the sources of stress and coping of these families

RabiaTabassum and Naum Mohsin conducted a case study on Depression and Anxiety Among parents of Children with Disabilities from developing world in an International Journal of Environmental, Ecology, Family and Urban Studies (IJEEFUS). The study aimed to find out the relationship between depression and anxiety among parents of children with disabilities and to compare the parents' depression and anxiety with the type of disability among children.

Karen Auyeung, Julie Burbidge, Patricia Minnes, 2011, studied Perceived Parental Stress: The Realative Contributions of Child and Parent Characteristics, in a Journal on Developmental Disabilities. The purpose of the study was to explore the experiences of stress reported by parents of individuals with intellectual disability in two age groups: high school students and adults.

ErjonaDervishali (2013) examined the existing research on stress in families of children with disabilities, highlighting different variables related to stress. Through a literature review and conceptual framework the aim of this article is to help professionals to a better understanding of variables

related to stress, and to create some basis and guidelines for further empirical research in Albania. Suggestions for research in the future are discussed.

Muhammad WaqarAzeem, Imtiaz Ahmad Dogar, and Imran Ijaz Haider, carried out this study to assess the level of psycho pathology i.e. anxiety, depression and both anxiety and depression together among parents of children with intellectual disability.

Rationale of the Study

Severity of child's disability is an important predictor of parenting stress, anxiety, depression. Also there are differences in the amount of stress, anxiety and social adjustment of parents of children with disabilities and those of children with non-disabilities. It is important to improve the healthcare of the parents of children with disabilities along with the children with disabilities. Proper investigation in to the difference between the amount of stress, anxiety, depression and social adjustment of parents of children with disabilities and those of children with non-disabilities may help to find out the coping skills for the parents of children with disabilities. The study may help in drawing the experience and perspectives of parents of children with disabilities.

Research Question

Is there any difference between the parents of children with disabilities and non-disabilities in terms of anxiety, depression and stress.

Objectives of the Study

1. To investigate the amount of stress experienced by parents of children with disabilities and children with non-disabilities.
2. To investigate the amount of anxiety among the parents of children with disabilities and non-disabilities.
3. To investigate the amount of depression among the parents of children with disabilities and non-disabilities.

Hypotheses

Taking into account the literature available and based on the independent variable of the study, the following hypotheses were formulated for empirical verifications. These are:

H1

There will be no significant difference between the parents of children with disabilities and parents of children with non-disabilities in terms of anxiety, depression and stress.

H2

There will be significant difference between the fathers and mothers of children with disabilities in terms of anxiety, depression and stress.

H3

There will be significant difference between the fathers and mothers of non-disabilities in terms of anxiety depression and stress.

Variables under Study

Dependent Variables

Stress, Anxiety, Depression.

Independent Variables

Parents of children with disabilities, Parents of children with non-disabilities.

Sample

The sample size for this study is 120

The samples were collected from Kamrup district which will include both urban and rural area.

120 samples have been collected of equal No. each of both the sexes. They were selected randomly by using Purposive sampling technique from Kamrup metro and Kamrup rural. Their age ranges from 25 to 45 years. Their socio-economic status and educational level are not controlled.

Method of Matching Sample

Even though there will be variations among the students based on caste, class, creed, language, religion, economic condition, parental educational level, institutional back ground, affiliation to, yet these are not considered. The sample would be matched only on following conditions.....

Age

Sex

Duration of the Study

The present Research study was conducted over a period of two years. The sample are collected within the state of Assam.

Procedure of Test Administration

Before administering the test, the Researcher visited Special schools and normal schools situated in and around Guwahati, according to the purpose of the study and applied for collecting data. The Principal or the Head of the institution were approached. The researcher demonstrated the purpose of the study, about the two tests, their administering procedures etc. Then finally they gave permission to administer the tests in department which was mentioned in the application.

Ethical Consideration

Before administering the tests, the subjects were informed clearly about the purpose of the research. Then they were informed about the aim of the two tests. Then they were asked if they were interested. Consent was taken from those who were interested. Finally the subjects were instructed to go ahead and were allowed to stop at any time, if they find difficulty in responding to an item. The subjects were not forced to give response.

Tools and Techniques for Data Collection

The following tools were used for the study: "Anxiety, Depression and Stress Scale" developed by Pallavi Bhatnagar, Megha Singh, Manoj Pandey, Sandhya and Amitabh.

General Description of Anxiety, Depression and Stress Scale

Name of The Test

Anxiety, Depression and Stress Scale

Authors

Pallavi Bhatnagar, Megha Singh, Manoj Pandey, Sandhya and Amitabh

Table-1: Significance of difference between the parents of children with disabilities and parents of children with non-disabilities in terms of anxiety, depression and stress.

	Category	N	Mean	Std. Deviation	t	df	Sig. (2-tailed) (P value)
Anxiety	Parents of non-disabled	60	4.17	3.609	-.970	118	.334
	Parents of disabled	60	4.68	1.996			
Depression	Parents of non-disabled	60	2.80	2.815	-4.800	118	.000**
	Parents of disabled	60	4.93	1.982			
Stress	Parents of non-disabled	60	3.88	3.157	-2.579	118	.011*
	Parents of disabled	60	5.10	1.838			

Year of Publication: 2005

This scale of 63 items followed by "yes" and "no" was developed(25 items for anxiety, 19 items for depression and stress each) in English. After that back translation method was used to translate the items in Hindi with the help of four professionals (2 psychologists, one linguist and one social worker) and they were requested to again translate it into English. Those items which maintained the same meaning after the back translation were retained. Thus of the 63 items, 48 items (19 for anxiety, 15 for depression and 14 for stress) which carried similar meaning and context with the original items were retained. Clarity and comprehensibility of the expression was one of the major criterions of development of the items.

A pretry out of 48 items was undertaken on a sample of 20 people (10 males and 10 females) to explore the comprehensibility and endorsement of items and all 48 items were retained.

Interview Schedule

A semi structured interview schedule was used to collect the demographic information and other related personal data about the subject.

Sources of Data

At present, data were collected from different rehabilitation centers, special schools and normal schools.

Procedure for Data Collection

In the present study, two standardized tools was used for data collection. Initially, the selected subjects were called individually one by one. Prior to actual administration of test, a rapport was established with the subjects. Then the subjects will be instructed according to the instructions led down by the author of the test/scale. Ascertaining that, all the subjects cleared the instructions, the actual test will be conducted one by one with small interview between two tests. Finally, the filled copies of test will be collected and subjected for further procedure.

Statistical Treatment

Initially, the data will be treated by descriptive statistics i.e. mean and standard deviation. Later on it will be treated by t-test to search the significant differences among the four classified groups.

Analysis

120 data were collected. Among them 60 were male and 60 were female. Two standardized psychological scales, namely Anxiety, Depression and Stress scale was used and scorings were done following the scoring methods mentioned in the manuals respectively. The data was analyzed by using SPSS.

Significant level is at **P<0.01

The result reflected in Table 1 shows that there is no significant difference between the parents of children with disabilities and non-disabilities in terms of anxiety since the p-value of anxiety is .333. But there is significant difference between the parents of

children with disabilities and non-disabilities in terms of depression and stress since the p-value of depression is .000 which is significant at 0.01 level and the p-value of stress is .011 which is significant at 0.05 level.

Table-2: Significance of Difference between The Fathers and Mothers of children with Disabilities in terms of Stress, Anxiety and Depression

	Cat_gender	N	Mean	Std. Deviation	T	df	Sig. (2-tailed) (P Value)
Anxiety	Father of disabled	30	3.83	1.913	-3.622	58	.001**
	Mother of disabled	30	5.53	1.717			
Depression	Father of disabled	30	4.27	1.799	-2.746	58	.008**
	Mother of disabled	30	5.60	1.958			
Stress	Father of disabled	30	4.70	1.896	-1.713	58	.092
	Mother of disabled	30	5.50	1.717			

Significant level is at **P<0.01

The result reflected in table 2 shows that there is significant difference between the fathers and mothers of children with disabilities in terms of anxiety and depression since the p-value of anxiety is .001 which is significant at 0.01 level and the p-value of

depression is .008 which is also significant at 0.01 level. But there is no significant difference between the fathers and mothers of children with disabilities in terms of stress since the p-value of stress is .092.

Table-3: Significance of Difference between The Fathers and Mothers of Children with Non-Disabilities in Terms of Anxiety, Depression and Stress

	Non-disability	N	Mean	Std. Deviation	T	df	Sig. (2-tailed) (P value)
Anxiety	Father of non-disabled	30	4.10	3.791	-.142	58	.888
	Mother of non-disabled	30	4.23	3.481			
Depression	Father of non-disabled	30	2.60	2.724	-.547	58	.586
	Mother of non-disabled	30	3.00	2.936			
Stress	Father of non-disabled	30	3.63	3.378	-.610	58	.544
	Mother of non-disabled	30	4.13	2.956			

The result reflected in table 3 shows that there is no significant difference between the fathers and mothers of children with non-disabilities in terms of anxiety, depression and stress since the p-value of anxiety, depression and stress are .888, .586 and .544 respectively which are not significant at any of the level of confidence.

Summary

1. That there is no significant difference between the parents of children with disabilities and non-disabilities in terms of anxiety. But there is significant difference between the parents of children with disabilities and non-disabilities in terms of depression and stress.
2. There is significant difference between the fathers and mothers of children with disabilities in terms of anxiety and depression. But there is no significant difference between the fathers and mothers of children with disabilities in terms of stress.
3. There is no significant difference between the fathers and mothers of children with non-disabilities in terms of anxiety, depression and stress.

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