

## STRESS AND COPING AMONG PARENTS WITH MENTALLY HANDICAPPED CHILDREN

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### ABSTRACT

#### OBJECTIVE

To measure the difference in Stress and Coping of parents with mentally handicapped children.

#### STUDY DESIGN

Cross sectional

#### PLACE AND DURATION OF STUDY

The data were collected from special education institutes of Faisalabad in duration of 6 months.

#### SUBJECTS AND METHODS

The sample consisted of ninety parents of mentally handicapped children (45 fathers & 45 mothers) from different government and private institutes of special education in Faisalabad. Standardized Urdu versions of the Brief COPE and Parental Stress Scale were administered on participants.

#### RESULTS

The results indicated a significant difference in stress and coping of parents with mentally handicapped children. Fathers of mentally handicapped children had a high stress level and used more problem focused coping style than mothers. Mothers of mentally handicapped children used more emotion focused coping as compared with fathers.

#### CONCLUSION

The results indicated a significant difference in stress and coping strategies among parents with mentally handicapped child.

#### KEY WORDS

Parental Stress, Coping Strategies, Intellectual disability.

### INTRODUCTION

Lazarus and Folkman suggested the transactional nature of stress. Stress is a two way procedure; the surroundings generate stress and the people find out solutions to deal the stress. In cognitive appraisal a person considers two major factors that mostly play an important role in his reaction to stress; stress' tendency to threaten the individual and the appraisal of resources required minimizing, tolerating or eradicating the stress it created.<sup>1</sup> Personal as well as situational factors impact coping strategies such as personal/social support and high self esteem can bring better adjustment at psychological levels.<sup>1,2</sup>

There are two types of coping strategies, namely problem focused and emotion focused. The person tries to deal constructively in problem focused strategies where cognition and behavior, both efforts are used while in emotion focused strategies the person tries to deal with his own fears or internal state so that the psychological distress is reduced.<sup>3</sup>

Stress is decreased by any strategy that aims at solving the problem and defensive coping strategies always increase the stress<sup>4</sup>. In a study denial was used by 98.18% mothers of handicapped children, 96.36% used rehearsal of outcomes, 85.45% were looking for emotional support and 50.91% were using information seeking to cope their stress. When mothers used problem focused coping, their children's behavior was observed to get improved and behavioral disturbance of child reduced<sup>5</sup>.

A research was conducted on parents of mentally handicapped children and normal children to compare the stress experienced by parents and coping strategies. For this purpose 60 parents of school going children were selected as a research participant. Research showed that there was a significant difference in stress levels and coping among parents of handicapped and normal children. Parents of handicapped children showed more stress than normal children. Parents of normal children were much better in coping strategies than handicapped children<sup>6</sup>.

Sajjad found in his study that mothers of handicapped child experienced more stress and its impact on their daily life routine. In Pakistan mothers showed extreme stress because their handicapped child showed unsuitable behavior, could not afforded assessment/therapy services and had no social contact with their intellectual handicapped children. Mothers had a feeling of loneliness, anger, depression due to the stress that had a negative impact on their families. Mothers of handicapped children could not pay more attention to their normal children because their handicapped child required more time and attention from them<sup>7</sup>.

The basic aim of our study is to find out and compare the level of stress level and difference of coping styles used by fathers and mothers of the handicapped children. Moreover the study also aims at creating awareness about the coping styles that are used in our culture. Given the variety of demands of the environment of mentally handicapped children, parents need more information, knowledge, skills and attitudes to cope successfully with

the demands of these children. Additionally, results of this study would help to broaden the repertoire of effective coping strategies in relation to stress and expectations for the benefit of all concerned.

**SUBJECTS AND METHODS**

**Participants**

A sample consisted of ninety research participants in which 45 were fathers and 45 were mothers (N=90). The participants were selected by purposive sampling technique from different government institutes of special education located in people colony, Ameen town and Ghulam Muhammadabad in Faisalabad. The age range of the research participants was from 25 to 50 years. They were belonging to middle socioeconomic status.

**Instruments**

**Brief Cope<sup>8</sup>**

To measure the Coping of Parents with Mentally Handicapped Children a scale of 28 items with 4-point Likert scale translated into Urdu was used. The Brief Cope consists of 14 subscales of two items each and their alpha coefficient ranges from .50 to .90. The Brief COPE takes 10 to 15 minutes to complete. Scoring and profiling take about 5 minutes. A low score signifies a low level of coping and a high score signifies a high level of coping.

**Parental Stress Scale<sup>9</sup>**

To measure Stress level of parents with mentally handicapped children, translated version of "Parental Stress Scale" was used. It has items with 5 point likert type scale. This is relatively short and easy to administer in less than 10 minutes. A low score meant low level of stress, and high scores indicated high level of stress. Reliability was described as adequate, with a alpha coefficient of 0.83. Test-retest reliability was found to be 0.81

**Procedure**

After taking institutional permission and informed consent, Brief COPE and Parental Stress Scale were administered on 90 participants (45 mothers & 45 fathers) of mentally handicapped children. SPSS version 19 was used to analyze the data.

**RESULTS**

The age range of the research participants was from 25 to 50 years. They were belonging to middle socioeconomic status. Independent sample t- test was used. Results indicated that fathers of mentally handicapped children experienced more stress as compared with mothers,  $t(88) = 9.041, p = 0.00$  (see table 1). Results showed that there was a significant difference in use of coping styles between mothers and fathers of mentally handicapped children,  $t(88) = 2.263, p = 0.026$  (see table 2). Results indicate that there was a significant difference in use of emotion focused coping between mothers and fathers of mentally handicapped children,  $t(88) = -2.741, p = 0.007$  (see table 3). Results showed a significant difference in use of problem focused coping between mothers and fathers of mentally handicapped children,  $t(88) = 3.403, p = 0.001$  (see table 4).

**Table 1**  
Difference in stress level among the Parents of Mentally Handicapped Children

Parents	M	S.D	df	t	p
Father (n=45)	63.51	7.25	88	9.041	0.00
Mother (n=45)	46.93	9.91			

**Table 2**  
Difference in coping styles among the Parents of Mentally Handicapped Children.

Parents	M	S.D	df	t	p
Father (n=45)	71.62	6.21	88	2.263	.026
Mother (n=45)	67.75	9.62			

**Table 3**  
Emotion focused coping among the Parents of Mentally Handicapped Children

Parents	M	S.D	df	t	p
Father (n=45)	24.13	4.178	88	-2.741	.007
Mother (n=45)	26.60	4.360			

**Table 4**  
Emotion focused coping among the Parents of Mentally Handicapped Children

Parents	M	S.D	df	t	p
Father (n=45)	23.02	3.285	88	3.403	.001
Mother (n=45)	20.51	3.702			

**DISCUSSION**

Family can be a beginning of great pleasure and as well as tension. Parenting of child is a highly stressful task, and parenting of mentally handicapped child is the most stressful life event that can happen. The parents' reaction to this stress depends on individual abilities and factors related to family and environment<sup>10</sup>. Handicapped children require supplementary items such as special clothing, tackle, communication devices, and bathroom aids. Although Handicapped children may have supplementary requirements, regardless of their disabilities they are children first<sup>11</sup>.

It was clear from table 1 that on the Parental Stress Scale fathers of mentally handicapped children scored more as compared with mothers of mentally handicapped children. The fathers of mentally handicapped child might think mentally handicapped child as sources of financial burden. Government of Pakistan is unable to provide facilities which are necessary for handicapped children. Fathers of mentally handicapped children often need to be absent from the job on the account of treatment of these children. Hence resultant workload also builds up and may increase stress. They need

to put great efforts to cope with the financial expenses that may be the source of stress we found out in fathers. The present findings are consistent with some other researchers as well. Gray (2003) found that high level of stress was because fathers of mentally handicapped children wanted to see their children independent. It was shown that the fathers of mentally handicapped considered that they could sacrifice for their children through work hard to meet the extra demands of the family<sup>12</sup>.

In the light of the current findings, mothers of handicapped children tended to focus on emotion focused coping in order to get a relief from the stress they faced. Mothers had a tendency to find expression for their feelings and had a wider variety of emotional expression, feeling sorrow and unhappiness in addition to irritation and crying. Mothers of mentally handicapped children get rid from emotional distress through talking to friends and family. Shin (2002) conduct a research to compared 38 American and 40 Korean mothers of mentally handicapped children and concluded that mother of mentally handicapped experience less level of stress in the presence of social support<sup>13</sup>.

Fathers were found using more problem focused coping in the current findings. Folkman and Moskowitz (2000) stated that problem focused coping can be defined as the thoughts and actions to solve the causes of grief<sup>14</sup>. It is more commonly used at that time when personal control over the result is higher. In order to take good care of a mentally handicapped child, it is instrumental that someone provides support and autonomy to the child and helps him/her out in performing daily tasks<sup>15</sup>. This trend of focusing on problems in order to cope was seen in fathers of handicapped children; it may be taken as an effort to solve the problems faced by the children. It can be assumed that the fathers took their mentally handicapped children as extension of their self and the tendency to adopt a problem focused coping style was a way of directly or indirectly focusing on the problems of their children.

### CONCLUSION

Difference in stress, problem focused coping and emotion focused coping were found among parents of mentally handicapped children. It was found that mothers of mentally handicapped children used more emotion focused coping as compared with the fathers of mentally handicapped children while fathers used more problem focused coping.

### LIMITATION AND RECOMMENDATIONS:



Although this research has provided some valuable results, so far a number of limitations were identified during the research and recommendations are made for improvement in the future researches.

1. The research was restricted to Schools of only one city therefore, its result cannot be largely generalized.
2. Demographic variable may also be considered as confounding factors in future study.

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