DEPRESSION AND ANXIETY AMONG PARENTS OF CHILDREN WITH DISABILITIES: A CASE STUDY FROM DEVELOPING WORLD

RABIA TABASSUM¹ & NAEEM MOHSIN²

¹Lecturer in Psychology, Government Islamia College for Women, Faisalabad, Pakistan
²Director of Distance Learning in Government College University, Faisalabad, Pakistan

ABSTRACT

The current study aimed to find out the relationship between depression and anxiety among parents of children with disabilities and to compare the parent’s depression and anxiety with the type of disability among children. Sample was comprised of 80 parents among which 58.12% were mothers and 41.875% were fathers having one or more disabled children with the age range of 4-18 years. Purposive sampling technique was used to select the sample. Depression, Anxiety and Stress Scale, DASS (Lovibond & Lovibond, 1995) with 42 items was used.

Pearson Product moment correlation was used to find the relation among depression, and anxiety. Independent sample t-test was used for comparison among parents having children with different disabilities. The results of this study showed that a highly significant positive correlation was found between depression and anxiety with \( r = .833, p < .01 \). A significant difference was found on depression subscale of DASS among parents with disabled boys than disabled girls with \( t(158) = 2.301, p < 0.01 \).

KEYWORDS: Anxiety, Depression, Disabilities, Parents

INTRODUCTION

All parents always plan for perfect, healthy and normal babies. They never expect or think about disabled children. But if they confront with such situation in their lives, usually seen many emotional problems i.e., grief, loss, disbelief, guilt, rejection, helplessness, denial, sham, anxiety, anger and depression for a long period. [22]

A study on perceptions of lives of intellectual disabled children was conducted by [14] and found six themes that are emotional reactions i.e. accept the challenge to handle disabled child, anxiety related to child’s future, sorrowful/painful emotional series of reactions, health issues related to mothers and struggle related to child’s and oneself well being, inappropriate support from society and family.

All parents develop many expectations from their children according to the standard and established norms which set by a society or a family. Parents always feel proud when their child gets progress in life stages one by one progressively and constructively.

Parents observe their child with pride as well as with anxiety when they do something thing new. But when child may not meet the experimental standard or deviate it. Family’s crises begin, because every child’s characteristics have an effect on a family. Transitions between infancy to adulthood have a strong impact on a family and if it is with a disabled child then parents usually suffered with more pressures, stresses and demands. In these situations, parents should learn how to deal with these crises [22]
All of us have many dreams and whenever a person loses his dream, it brings major changes in his personality and in his environment. Parents have many dreams about their children and when a disabled child born, parents go through dramatic changes, a state of grieving that effect on parent’s health, attitude, personality, priority, values & beliefs, along with it change their routine activities.

It is commonly observed that if one child is disabled in family, parents usually suffer with different emotional and psychological problems. The reasons of parental depression, anxiety and stress were explained by [9] i.e. society considers parenting is a positive thing, but it views the birth of a disabled child negatively. This attitude by society produces stress among family members. The marital relationship may suffer excessively due to the stresses of guilt, shame, blame and anxiety.

In Pakistan, 2.49 % population is with some sort of disabilities. (National Census Report, 1998). It seems that this estimate presented by national census report is not correct because the disability labels are not well defined and 43.33 percent are not classified at all (Mohsin, 2009). According to World Health Organization (WHO) as referred by Shahzadi (2001) about 10 % of the total population of developing countries is suffering from some sort of disabilities.

There is a great need to identify at an early stage which parents are at poor mental health and facing psychological problems, so that successfully targeted those parents to modify their thinking style and living patterns.

The purpose of this research was to aware the educated society, government and non-government agencies that work positively for the counseling, therapy, or rehabilitation of people having disabled children.

**REVIEW OF RELATED LITERATURE**

Parents with children having intellectual disability faced more psychological problems as compare to parents of normal children. Mothers suffered in psychological problems more than fathers [1]

Choudhary et al, (2011) identified that there was no relationship with the type of mental retardation with the sibling’s effects. Parents have many emotional disturbances and suffer in worries (mentally disturbance) due to having a mental retardation child.

Chovatiya et al, (2011) revealed that 70 % mothers were suffering with mild to moderate level of depression and it affected on their QOL.

Sousa & Singhvi (2011) identified that 71% mothers of children with cerebral palsy were depressed. The reported contributing factors of depression were poor spousal support, low education, unemployment and increasing age.

Al-Eithan et al proved that that mothers of disabled children in Saudi Arabia showed higher scores of anxiety, depression, and total HADS.

Dogan, (2010) conducted a comparative study to assess the psychological problems in terms of stress, depression and anxiety among parents of children with and without hearing loss. Sample was n=230 parents with children of hearing loss and n=230 without hearing loss. The results of this study revealed that parents of children with hearing loss, especially mothers are at greater risk to develop psychiatric/psychological problems (depression, stress and trait anxiety).

Gupta & Kaur, (2010) concluded that parents of children having (ID) experienced higher stress. However, all the participants experienced higher level of mental stress than physical one.
Qittner, et al. (2010) evaluated stress among parents of young deaf and hearing children. Sample was 181 deaf children and 92 with normal hearing. The major findings of this study revealed that child’s hearing problems, language delays due to deafness and behavioural problems increase stress among parents than the parents of normal children.

Gallagher et al, (2009) proved that Parental stress is associated with developmental disabilities of children and poor sleep quality among parents of these children.

Hill & Rose (2009) found that on the Regression analysis predicted 61% stress among parents. This stress was found on the variables of cognition of parents. It indicated the value of cognition in experiencing stress by mothers of adult children having intellectual disability.

METHODOLOGY

Participants

Sample was comprised of 80 parents among which 58.12% were mothers and 41.875% were fathers having one or more disabled children with the age range of 4-18 years. Purposive sampling technique was used to select the sample.

Instrumentation

In the current study data was collected through Demographic Information Form and “Depression, Anxiety, Stress Scale” (Lovibond & Lovibond, 1995).

Demographic Information Sheet: Demographic information Sheet was used to collect information about age of parents, educational background, gender of parents, no of children, no of disabled children, type of disability, gender of disabled child, age of disabled child, class of disabled child, SES.

Depression, Anxiety, Stress Scale (DASS): “DASS is a self report inventory developed by Lovibond & Lovibond. (1995). It has 42 items and three sub scales of depression, anxiety and stress. Each scale consists of 14 items, each reflecting a negative emotional symptoms. Each of these is rated on a four-point Likert scale of severity of the participant’s experiences over the previous week with the intention of emphasizing states over traits.

Hypotheses

Keeping in view the objectives of the study, following hypotheses are designed.

- There would be a positive relationship between the depression and anxiety among parents of children with disabilities.
- Parents of children with mental retardation would have more depression and anxiety as compare to parents of children with physical disability.
- The depression and anxiety would be higher among the parents of mental retarded children as compare to the parents of children with visual disability.
- Mothers of children with disabilities would have higher level of depression as compare to fathers of children with disabilities.

Procedure

Firstly permission was granted from principals of different special education centers and rehabilitation centers. Special education centers and rehabilitation centers were visited on monthly basis when school administration held meeting
with parents. The participants were instructed to make sure not to leave any item of the administered scale unmarked. The demographic sheet was attached to gather data about variables such as age, gender, education and socio economic status, no of children, no of disabled children, type of disability, gender of disabled child, age of disabled child, Class of disabled child.

After collecting informed consent and demographic information, the only scale i.e. Depression, Anxiety, Stress Scale (DASS) with 42 items was presented to the participants. The participants were instructed that express their feelings, thinking and conditions according to the scale of intensity of 0,1,2,3. The scoring was conducted according to the manual of the scale. The quarries of the participants were handled before, during and after the form completion. In the end, participants were thanked for their valuable contribution in the study.

**Statistical Analysis**

Pearson product moment correlation and independent sample t-test was used to analyze the data.

**FINDINGS**

**Hypothesis 1**

It was hypothesized that there would be a positive relationship between depression, anxiety and stress among parents of children with disabilities. The hypothesis 1 was tested by checking the correlation between depression and anxiety among parents of children with disabilities through Pearson product moment correlation.

**Table 1: Correlation of Depression and Anxiety of Participants Parents**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Depression</th>
<th>Anxiety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>-</td>
<td>.833**</td>
</tr>
<tr>
<td>Anxiety</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Table 1 shows highly significant correlation between parent’s depression and parent’s anxiety with disabled children on DASS subscale, i.e. (r.833), and the hypothesis is accepted.

**Hypothesis 2**

It was hypothesized that parents of children with mental retardation would have more depression and anxiety as compare to parents of children with physical disability. This hypothesis was tested by comparing the means of depression and anxiety among parents of children with mental retardation and physical disability through independent sample t-test.

**Table 2: Difference between Parents of Children with M. R. and Physical Disabled**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Type of Disability</th>
<th>M</th>
<th>SD</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>M.R. Physical Disability</td>
<td>14.7</td>
<td>11.68</td>
<td>6.922</td>
<td>2.872**</td>
</tr>
<tr>
<td>Anxiety</td>
<td>M.R. Physical Disability</td>
<td>13.9</td>
<td>9.93</td>
<td>5.65</td>
<td>3.448***</td>
</tr>
</tbody>
</table>

`df =83, **p<.01, ***p<.001`

Table 2 shows that a highly significant difference was found in the mean scores between depression and anxiety among parents of children with mental retardation and parents of children with physical disability. Parents of children with
mental retardation have significantly higher level of depression and anxiety as \( t(83) = 2.872, p < 0.01 \) and \( t(83) = 3.448, p < 0.001 \) than parents of children with physical disability.

**Hypothesis 3**

It was hypothesized that the depression and anxiety would be higher among the parents of mental retarded children as compare to parents of children with visual disability. This hypothesis was tested by comparing the means of depression and anxiety among parents of children with mental retardation and visual disability through independent sample t-test.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Type of Disability</th>
<th>M</th>
<th>SD</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>M.R</td>
<td>14.76</td>
<td>1.72</td>
<td>11.68</td>
<td>8.32</td>
</tr>
<tr>
<td></td>
<td>Visual Disability</td>
<td>3.92</td>
<td>12.1</td>
<td>9.93</td>
<td>.914</td>
</tr>
</tbody>
</table>

**df = 93, **\( p < 0.01 \)**

Table 3 shows that no significant difference was found among depression and anxiety between parents of children with mental retardation and parents of children with visual disability.

**Hypothesis 4**

It was hypothesized that mothers of children with disabilities would have higher level of depression as compare to fathers of children with disabilities. This hypothesis was tested by comparing the means of depression between mothers of children with disabilities and fathers of children with disabilities through independent sample t-test.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Groups</th>
<th>M</th>
<th>SD</th>
<th>t</th>
<th>( p )</th>
</tr>
</thead>
<tbody>
<tr>
<td>depression</td>
<td>Fathers</td>
<td>6.11</td>
<td>5.22</td>
<td>7.22**</td>
<td>0.0001</td>
</tr>
<tr>
<td></td>
<td>Mothers</td>
<td>15.44</td>
<td>9.58</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**df=158, ****p<.0001,**

Table 5 shows that a highly significant difference in the mean scores was found on depression subscale of DASS between mothers with disabled children and fathers with disabled children as \( t(158) = 7.67, p < 0.0001 \). Mothers \( M = 15.44, SD = 9.58 \) were having more depression than fathers \( M = 6.11, SD = 5.22 \). The hypothesis is accepted.

**DISCUSSIONS**

The results revealed that a highly significant correlation between parent’s depression and parent’s anxiety having disabled children on DASS subscales. Literature review also supports the results. This study in line with the studies of Gundogar & Uskun, study (2010) in Turkey, The conclusion of this study was that financial problems are the most important factors that affected on parents of disabled children. Parents also experienced high levels of stress, as a result of their child disability.

Another comparative study in Pakistani and U.S. parents with disabled children was done by Baxter et al (2007) to assess the parent-child relationship. The major findings of this study showed that Pakistani parents expressed more negative relationships to their disabled children than U.S. parents. However educated parents had less self blaming and better parent-child relationship.
In Pakistani society parents of children with disability suffered from many psychological and emotional disturbances because they showed strong shame and guilt feelings with the birth of such children. Another reason of it might be societal and economical pressures due to which they become stressed.

Parents of children with mental retardation would have more depression, anxiety and stress as compare to parents of children with physical disability. The findings of the study support stated hypothesis partially, as on depression and anxiety subscales of DASS parents of children with mental retardation showed significant difference from parents of children with physical disability. Literature reviews support the stated findings. Parents of children with intellectual disability had higher depression and anxiety than parents of other type of disability. And guilt was found as a route cause for depression and anxiety.

The reasons behind these results in Pakistan might be that parents of mental retarded children feel helpless when their child is sitting among family physically but not mentally, due to their lacks of mental capacities.

The results also revealed that no significant difference was found on depression and anxiety subscales of DASS. Literature review supports it but with separate comparison among parents of MR children with normal ones and separate studies available on parents of children with visual disability. The comparison between the stated two groups is a new comparison.

This study is in line with the study of Gupta & Kaur, (2010) had conducted a research on stress among parents of children having intellectual disability. The conclusions of this research were that parents of children having (ID) experienced higher stress. However, all the participants experienced higher level of mental stress than physical one.

In Pakistani society, parents experienced more depression and anxiety with disabled children due to strong guilt feelings. However mental retarded child is considered more stressful for parents than other disabilities. The reasons behind it might be mental retarded child is always consider burden on family because visual disabled child could progress in his/her life than MR Child.

The study also revealed that highly significant difference was found on depression subscale of DASS. Literature reviews also support it. There are many studies are available on it. The study in line with the studies of Olsson & Hwang (2001) in which expressed that fathers of children with disabilities have more depressive symptoms than fathers of normal children but they have less depressive symptoms than mothers of children with disabilities.

Bumin et al (2008) investigated the relationship between depression and anxiety with quality of life in mothers having disabled children in Turkey. The conclusion was that mothers of disabled children had depression and anxiety. Increased depression and anxiety influenced poorly on mother’s health and quality of life. Sloper & Turner (1993) conducted a study in which find out that fathers of children with physical disabilities experienced little psychological distress as compare with mothers.

**CONCLUSIONS AND SUGGESTIONS**

The current study explored the relationship of depression and anxiety among parents of children with disabilities. The findings of this study revealed that there are highly significant correlation among depression and anxiety of parents with disabled children. Furthermore, significant difference was found on depression and anxiety scores among mothers of children with disabilities than fathers of children with disabilities. Another finding of this study showed that parents of mental retarded children having significantly higher level of depression and anxiety than parents of children with physical and visual disability. However, no significant difference was found between parents of disabled boys and parents of
disabled girls in the mean scores of depression and anxiety. The demographic variables i.e. education also sowed it’s impact on parents of children with disabilities as uneducated to class five parents showed more depression and anxiety than highly educated parents. This study suggest that the level of depression and anxiety is different in mothers and fathers with one disable child and with more than one disabled children. Therefore the need still exists to examine these differences among parents with the no of children with disability. This study was that this study assessed equally single mothers or fathers with both parents. So, further researches are required to assess it separately.

REFERENCES


