

## **Stress, Anxiety and Depression among Parents of Children with Special Needs**

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### **ABSTRACT**

*Stress among parents of children with special needs is known to be evident. Parents have known to experience hopelessness, non-acceptance, anxiety and even depression as evident through several research studies conducted across various impairments and disabilities, age groups of children and parents, gender, socioeconomic status, and racial/ethnic groups. These affective states thereby direct their conduct and treatment toward their children in a more dysfunctional manner as compared to parents who have normal functioning children born to them. Research literature has identified various sources of stress while emphasizing on the types of stress most commonly experienced by the primary caregivers. This study thereby examines perceived stress, anxiety and depression among parents with and without children with special needs with the scope of providing preventive intervention strategies to build acceptance, competency and resilience in the parents. The scope of this study may expand to application in educational curriculum implementing life-skills building programmes for primary caregivers of children with special needs.*

**KEY WORDS:** *perceived stress, trait anxiety, depression, preventive strategies, life-skills*

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### **I. INTRODUCTION**

Parents of children with intellectual disabilities often find that childrearing is a significant challenge. Nevertheless, parenting as a role is quite challenging in itself, let alone for children with special needs. Recent research shows the association of learning impairments with higher incidences of mental health problems. Decisions regarding regular schooling or institutional schooling is yet another challenging aspect of parenting which leads to increased mental, emotional and financial taxing. Education and training procedures involve identifying target areas of improvement. These include personal grooming, social behavior, basic academic skills and simple occupational skills. Each of these skills have a simple and complex component. A simple component involving learned and reinforces behaviors laying foundation for developing more complex components of these skills. It becomes challenging to decide whether mainstreaming of children with special needs should be encouraged.

Most studies have confirmed the dire need of helping the parents as well as the children with special needs in areas of self-care, resilience building, life-skills training and developing emotional competencies while leading a challenging and overwhelming life of a parent.

Stress, Anxiety and Depression among primary caregivers of children with special needs has been studied under the research eye for identifying its role as an associated factor, causal factor, protective factors or a mere consequence of raising a child with special needs. Special needs begin right from the prenatal environment, care to avoid complications at child-birth, nutritional requirements during infancy and added medical attention, patient interaction and acceptance of differential learning pace compared to their counterparts and last long upto the adolescent and adulthood as most of these children spend their entire lives with parents or in institutions designed for their holistic care and development.

Parents of children with special needs tend to be faced with a persistent barrage of overwhelming and challenging situations ranging from societal isolation, discriminatory behavior, stereotypical attitudes, financial burden, to name a few. These circumstances if addressed in the right spirit can contribute to healthier cognitive and emotional health of parents and thereby even the children who share environmental surroundings with them. If such environmental insults continue, neurochemistry in the brain may get disrupted. The neurotransmitters essential for pleasure seeking stimuli may get abnormally inadequate in secretion level. If the absolute or relative depletion is prolonged, the brain may begin to permanently alter the production of these neurotransmitters. This may act as a barrier in recovery to normal level of functioning. The longer an individual is exposed to stressors or negative emotions or stimuli, the greater the complications in coping with the difficulties while upbringing children with special needs. As mentioned earlier, the symptoms of depression may not be readily evident in parents and caregivers, which is why they have to be all the more vigilant of other red flags as they are the sole responsible adults of their children.

A study by Jaspreet Kaur and colleagues have identified several associating factors for anxiety and depression among parents of children with special needs. Aged parents, parents of daughters, anxious parents, mothers with trait anxiety, parents with lower socio educational status, and lack of social support tend to show greater parenting difficulties than those with considerable social support, moderate educational background, informed positive parenting skills and lesser discrimination from the society.

## **II. REVIEW OF LITERATURE**

It has also been found that mothers of children with sensory-motor mental and chronic physical problems tend to experience more stress in comparison with mothers of children who have psychological disorders. These mothers also tend to score higher on a stress scale administered by Awat Feizi, et al. on parent-child dysfunctional interaction. The difference was significant in terms of stress experience too. Children with special needs have restrictive and limiting conditions for the long-term of their lives. This particularly leads to stress among family members residing with these children. At times the circumstances become difficult and stretch beyond the adaptation ability of the children and parents. It has a spillover effect on every aspect of the family lives, thereby leading to nonadaptive responses.

A child with special needs due to developmental, neurological, psychomotor or emotional impairments needs to be taken care of by a team of caregivers. This team may continue to work in congruence even when the children grow up into adulthood. This need turns into constant incompatibility of parents thereby adding to the financial burden, emotional pressures of being shamed and name calling by others. Personally too, they experience a heavy sense of guilt and inadequacy.

Researchers have found this association between stress and parenting to be quite attractive and essential for gathering empirical evidence. Parents' dysfunction is also closely related to parenting pressures more so among the mothers who get divided in their responsibilities of child bearing, child-rearing, home making and even financial responsibilities. Lower levels of education, lower social support is also associated with increased parental stress as noted by Shin and Nhan. Having a child with delayed cognitive abilities is also a strong predictor of parental stress.

The severity of the impairment of the child is also an important predictor of stress experienced by mothers. This brings about a change in the parent-child interactions and relationships. As noted by Mahoney and Perales, higher the levels of stress among mothers, lower the quality of lives lived by them.

With respect to developmental conditions delayed in children, autism has been researched quite extensively. Mothers of children with autism have reported higher levels of stress and poorer mental health as compared to mothers of children without autism. Mothers with social support while raising a child with autism facilitates smoother family functioning. Defects and delays in the social relationships of children is related to parenting stress, problems in parent-child relationships and even parental distress. Hoof man et al. have shown research support for the same.

Attention Deficit Hyperactivity Disorder when diagnosed in children have an impact on the parents with increased levels of stress compared with parents of children with HIV positive status, asthma, or even normal development. Research studies have been conducted to identify agreement between parents and teachers to be lower and associated with parental stress. Parent's depressed mood, parenting stress are all associated with raising children having special needs. Parental depressed mood was not associated with disagreement between parents and teachers on ADHD and ODD symptoms. All and all sufficient research evidence is available for parental stress in parents of children with special health care needs. These throw an insight on how parental stress can be considered while diagnosing ADHD in children.

A meta-analysis was conducted by Singer GH. of comparative studies of depression in mothers of children with and without developmental disabilities was used. The effect sizes were determined for 18 studies conducted between the year 1984 and 2003. For mothers of children with developmental disabilities, a

weighted effect size of .39 was an indicator of elevated depression. This as an elevated risk of depression leaves a scope for promising interventions in future.

As noted by Davis NO, Carter AS, parenting stress elevates among mothers of children with Autism Spectrum Disorder (ASD). This has been found to be true of parents with older children. What is yet to be known is about parents with children who are newly-diagnosed with ASD. Davis and Carter examined the association between child behavior and parenting stress in both sets of parents of 54 toddlers with ASD. What was found showed elevation in stress among parents. Children with deficits and delays in social relatedness were associated with parental stress. It impacted the parent-child relationship. The scope of further studies involve clinical assessment of parental stress, differential parenting experiences for mothers and fathers. A study by Aaron Resch and colleagues found that family satisfaction, problem solving abilities, and physical health influence the appraisal process of depression among these parents.

### **III. METHODOLOGY**

This study is a literature review of research studies conducted to assess, measure and emphasize how instrumental parental stress, anxiety and depression is in manifestation of the genetically predisposed impairments.

### **IV. CONCLUSION**

This study lays the foundation for further longitudinal and observational studies that aim at identifying contributory variables, risk factors and protective factors in the development and maintenance of impairment among children. The findings of such studies will pave a pathway to development of intervention strategies for helping positive parenting modules facilitating healthy parent-child interaction, improved social functioning of the children and enhanced quality of lives of the families.

The study also provides a scope for parents and public health sectors to innovate methods in helping parents become self-reliant while identifying signs of anxiety or depression and creating an inventory of possible interventions and professional services to be increased and offered to parents and other primary caregivers of children with special needs.

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