

## **Stress among Single Parent Families of Mentally Retarded Children**

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Parents of mentally retarded children face stress and the support from the spouse is an important factor in reducing such stress. Single parent families (widows and widowers) lack such support from the spouse and hence experience a greater level of stress. Present study compares the level of stress among widows and widowers to that among families where both parents are alive. Stress among 77 single parents (58 widows and 19 widowers) was compared with that of 77 families (matched group) where both the father and the mother were alive. Test developed by Girmaji S.R. Shobha Srinath, Shekhar Sheshadri & Subba Krishna D.K. (1999) for measuring stress and coping in families having retarded children (FISC-MR) was used to evaluate the experienced stress. Results showed that single parents differed significantly regarding total stress and in all four areas of stress (care, emotional, social and financial stress). Stress was high in emotional and social areas compared to care and financial stress. Widows and widowers showed similar care stress. They differed significantly in their social, financial, emotional and total stress. Single parent families of mentally retarded children experience higher levels of stress (total and in all areas) compared to such families where both parents are alive. Total, social, emotional and financial stresses, were higher than the care stress among widows compared to widowers.

**Key words:** Single parent families, mental retardation, stress

Several studies have highlighted the stress of having a mentally retarded child in the family. Hewett(1975) noted that the moment of crisis starts as soon as the parents learn that their child is permanently handicapped. Begab and Richardson (1975) observed that trauma of having a retarded child presents a serious disruptive force to the family life style. Hannam (1975) reported that the presence of mentally retarded child alters the normal chores of the family. Holroyd and Guthrie (1979) found that mothers generally feel burdened and the family members deprived of normal family life because of the presence of a handicapped

child. Byrne and Cunningham(1985) suggested that it is not the presence of a child with retardation which leads to stress, but rather the unmet service needs of families. Hodapp and Zigler (1993) opined that additional help need to be given to families with mentally retarded children to avoid making families with handicaps into "handicapped families". It is true that when there is support, the stress experienced by parents is less.

In the studies reviewed here, it is noticed that main support comes from the spouse. So, when a parent is single (we had only widows and widowers and no divorcee or

separated were there), naturally the lack of support from the spouse makes them more stressed. This study aims at studying the difference between single parent families and families where both of the parents are alive.

Grant and Whittell (2000) found that many couples adopted a sharing caring together approach, which highlighted the importance of fathers and other males in coping roles. Beckman (1983) observed that friendship networks were significantly smaller for parents of mentally retarded children when compared with parents of normal children. Where as, family network size was equivalent and more closely knit among parents of retarded children. Mothers faced reduced degree of stress when both parents were present at home.

Cullen, Maclead and Williams (1992) investigated variables influencing the functioning of families with mentally retarded person. Results demonstrated the importance of characteristics of fathers to maternal coping skills in two parent families. Although mean maternal coping scores were not statistically different between both parents and single parent households; single mothers showed strong negative associations with both the number of children in the house and age of the mother. Single parent mothers also appeared to be considerably more dissatisfied with family functioning. In a study on stress in different types of family: Duis, Summers and Summers (1997) found that parents of children with Down syndrome or with developmental delays; experienced more stress in comparison to the single and two parent families who did not have children with disabilities. Simerman, Blacher and Baker (2001) assessed the extent of father involvement in the lives of their young children with severe intellectual disability, as well as their satisfaction with that involvement. The extent of fathers help was the highest in the areas of playing nurturing, discipline and deciding services. Most mothers were satisfied

with the extent of father's help and this satisfaction was related to indicators of family well being. Booth and Booth (2002) examined the role played by men in the lives of mothers with intellectual disabilities and opined that men's contributions came in the form of increments to their family's human capital in addition to the traditional bread winner role. Gandotra (1985) found that problems were more with the young, single and low income families. Moudgil, Kumar and Sharma (1985) noticed that those parents who get maximum social and emotional support from spouse and family members, parents, relatives and friends; experience less stress and problems.

## Method

### Sample

The total sample of 154 families having a mentally retarded child, attending Karnataka Institute of Mental Health, Dharwad was studied. There were two groups; 77 single parent families and 77 double parent (both father and mother alive) families. 77 single parent families (58 widows and 19 widowers) were selected during 2002 and 2003. Out of 77 families 58 had male and 21 had female child. 33 families had income less than 10 thousand per year. 10 families were urban. By matching child's age, IQ, presence of associated problems like epilepsy and behavior disorder, mother or father's age, education, income and urban-rural status; 58 mothers and 19 fathers coming from double parent families; in total 77 families were selected during 2004 and 2005, which constituted the comparison group. The mean age of MR children was 16.7(SD=6.8) in single parent group and it was 15.7(SD=6.2) in double parent group. Mean IQ was 31.3 (SD=10.2) in single parent group and it was 29.4(SD=10.5) in double parents group. Mean age of parents (widows and widowers) was 45.3 (SD=7.1) in the single parent group and it was 43.0(SD=6.5) in the double parents group.

**Tool**

The two groups of parents were assessed for their perceived stress by using the FISC-MR: family interview for stress and coping in mental retardation, a tool developed by Girimaji et al. (1999) at NIMHANS, Bangalore, to study stress and coping in families of children with mental retardation. This scale has two parts namely perceived stress in family and mediators or coping strategies. Only the first part has been used here. Interview has been done in Kannada language for all cases. The maximum level of stress reported by any one of the parents is taken as the family stress score.

Part I- Perceived stress- This part has 11 subscales covering 4 areas.

Area I - Daily care: Subscale 1-extra inputs of care, 2-decreased leisure time, 3-neglect of others and 4-disturbed behavior.

Area II-Family emotional stress: Subscale 5-personal distress, 6-marital problem, 7-other interpersonal problems and 8-effects on sibs and other family worries.

Area III-Social life: Subscale 9-altered social life, 10-social embarrassment.

Area IV-Financial stress: Subscale 11-financial implications.

Scoring - score 0 to 4 (0-nil, 1-low, 2-moderate, 3-high and 4-very high).

Part II- Mediators or coping strategies consists of 5 areas – awareness and misconceptions, expectations and attitudes, child rearing practices, social support and global adaptation (9 subscales covering these 5 areas). This part is not used in the present study.

Reliability and validity of this tool- Cronbach's Alpha, a measure of internal consistency evaluated for the whole sample (N=155, data for 2 cases missing) separately for section I and II was 0.9 and 0.67 respectively. Inter rater reliability was 0.81 for any one rater and average for all 3 raters was 0.93. Test-retest reliability was 0.71 and 0.36 for section I and II respectively. Concurrent validity was 0.63. Construct validity was 0.51. Test-retest reliability for Kannada version for part I is 0.722 and for part II is 0.627 (estimated by the present researchers in their pilot study).

Scores on areas of stress were equated in all areas by considering scores out of 16 in each area and thus the total is out of 64 (care and emotional stress were both out of 16, social stress was out of 8 and so multiplied by 2, and financial stress was out of 4 and so multiplied by 4 and then the total score was calculated). To see the significance of difference between the two groups and also between widows and widowers, "t" test has been applied.

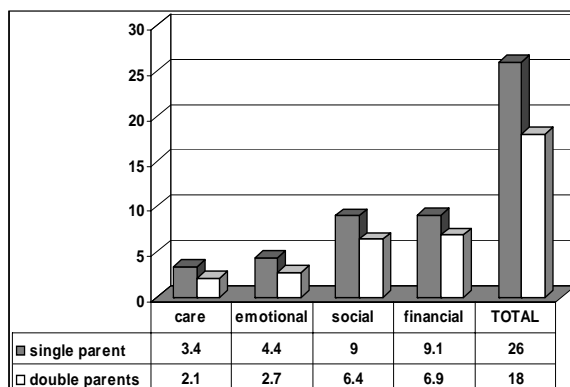
**Results**

**Table -1: Significance of difference between single and double parents (N=77 in each group)**

Variables	Mean		SD		t-Value
	Single	Double	Single	Double	
Care Stress	3.403	2.052	2.347	1.580	4.19***
Emotional Stress	4.403	2.688	1.016	5.680	12.92***
Social Stress	9.013	6.429	2.463	1.464	7.92***
Financial Stress	9.143	6.857	3.300	2.818	4.62***
Total Stress	25.96	18.03	6.447	4.224	9.03***

\*\*\* p<0.001

**Figure -1: Mean stress scores in 4 areas and total for single and double parents**



When the total stress score is considered; the two groups differ significantly (at 0.001 level), single parents (widows and widowers) being more stressed than the double parents families. Also, in all areas of stress (care, emotional, social and financial) single parent families show more stress compared to the double parent families. (Table 1 and Figure 1)

**Table -2: Significance of difference between Widows (N=58) and Widowers (N=19)**

Variables	Mean	SD	t-Value
Care Stress W	3.621	1.851	
Ws	2.463	2.737	1.43
Emotional Stress W	4.534	0.977	
Ws	4.000	1.054	2.03*
Social Stress W	9.552	2.587	
Ws	7.368	2.186	3.61***
Financial Stress W	9.793	2.919	
Ws	7.158	3.671	3.20**
Total Stress W	27.50	6.036	
Ws	21.26	5.404	4.01***

\*  $p < 0.05$ ; \*\*  $p < 0.01$  \*\*\*  $p < 0.001$

Further, widows (n=58) and widowers (n=19) were compared to find whether they differ significantly from each other. Table 2 shows that there is significant difference (at 0.001 level), when the total stress scores are considered. Widows have more stress compared to widowers. The mean stress for widows is 27.50 and it is 21.26 for widowers. Widows have more social stress (difference is significant at 0.001 level) and financial stress (difference is significant at 0.01 level). Emotional stress is slightly more for widows (significant at 0.05 level). There is no significant difference in care stress.

### Discussion

Single parents (Widows and widowers) show higher levels of total stress and in all areas of stress compared to families where both parents are alive. This is evident as the single parent families lack the support of the spouse. Compared to widowers, widows have higher levels of social and financial stress. In general widows experience more problems in our society compared to widowers. Once a woman becomes single, she loses the social status, which she enjoyed earlier and also, after losing her spouse she gets into financial problems. Similarly, emotional stress is more among widows than among widowers. A man probably gets more sympathy after losing his spouse and so he feels supported better emotionally compared to widows. Finally care stress does not show any significant difference, because caring for the MR Child would be equally strenuous for both widows and widowers.

In an earlier study Beckman (1983) observed that mothers faced reduced degree of stress when both parents were present at home. Gandotra (1985) found more problems in single families. Moudgil, Kumar and Sharma (1985) noticed that support from spouse reduces stress and problems experienced by the parents. Results of the present study are

supported by these studies. Cullen, Maclead and Williams (1992) found dissatisfaction with family functioning in single mothers. Simmerman, Blacher and Baker (2001) observed that most mothers were satisfied with the extent of father's help and this satisfaction was related to indicators of family wellbeing. In the present study, single mothers showed higher emotional stress and the findings are fairly similar to earlier studies.

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