

A Sociological Investigation About the Stress and Family Adjustment Among Parents of Intellectual Developmental Disability Students

By

Faiza Ramzan

Research Scholar

The Islamia University of Bahawalpur

&

Abdul Waheed

Researcher Scholar

The Islamia University of Bahawalpur

Abstract

The study was designed to collect the information necessary to understand the families of children with Intellectual developmental disability. It was descriptive research for data collection researcher used questionnaire as a tool. The population of the present study was the parents of intellectual developmental disability (IDD) children from the special schools in Bahawalpur City. A sample of 50 parents was selected from different socio-economics status and educational background in Bahawalpur city. Parents were suitably available. The parents were seeing after the children with intellectual developmental disability (IDD) of different severity levels. Data was collected by using questionnaire and analyzed in SPSS. Major findings revealed that majority of parents were satisfied with their current life.

Key Words

Intellectual Developmental Disability, Stress, Family Adjustment

Information

“Parental fear occurs when they could observe they did not meet and balance the parenting demands because of shortage of enough resources to meet the children need, these needs are compulsory to give the child for a good life survival” (Deater-Deckard, 2004). “According to literature low parental intelligibility and low certainty has also been developed the high stress among parents of mentally challenged and their children” (Burnham, 2011).

This study was based on intellectual developmental disabilities (IDD) children to analyze difficulty level, stress and family adjustment with their parents. The children with intellectual developmental disabilities move betterment due to proper medical care. Those families have children with mentally challenges how they adjust and how they cope with different situation. The children with mentally challenges were describing in ambiguous behavior, psychological and social adjustment problem and self-observation.

The family of children with intellectual disability is associated with mother good well-being and strong behavior to cope their and psychological level and maintain

positive and strength behavior in daily life activities. The findings of this study provide support for the expand-and-build theory that explains the role of positivity in mothers' coping and adjustment to childhood disability (Trute, Benzies, Worthington, Reddon, & Moore, 2010).

Family suffer and adjustment problem when the system of family occur in any stressor situation, medical illness, disability and other problems, because this difficult situation effects the family system. A parent can observe and recognize a child's strengths and weaknesses in order to guide them better. The child has the opportunity to express his thoughts and feelings. Parent and child form a stronger bond.

The mentally challenges children and their parents both are suffer due to stress situation. Parental stress effects the child brought up. It can contribute to parents being less receptive and kind to their children. This decline in parenting quality can lead to a variety of negative outcomes for children, such as:

1. Feelings of rejection
2. Reduced self-esteem
3. Disruptive and aggressive behavior
4. Social withdrawal

“Role of Parents in education and training of children with special needs is very important, parents play vital role for their betterment. No one can understand special children expect their parents” Wade and Moore (1992) concluded:

“We have no doubt that parents' views are critical to making decisions about their children, as only parents have access to key information and insights about their children's needs. Parents also have the primary responsibility for supporting their children's development and maximizing their potential.”

The committee of National Society for study of Educational has described exceptional as:

“Those children have less mental and physical capacity to take more time to learn new things. They also required maximum capacity for educational and social service. The mentally challenges children always faced difficulty to learned new things” (Chintamani Kar, 1992).

Objectives of the Study

1. To evaluate the stress of parents of persons with IDD.
2. Explore the adjustment of parents in family of students with IDD.
 - 1.1 Research Questions
 1. What is the importance of family adjustments for student with IDD?
 2. What is the stress level of parents of IDD students?
 3. How disability influences the life of parents of IDD students?
 - 1.2 Significance of the Study

The successful achievement of the study will be helpful to the parents and institutions in the following ways.

1. Parenting skill will be improved, as parents will be able to understand better their situations with their offspring with IDD and the causes of stress and stress that they undergo.
2. This study will be helpful for the improvement of institution for children with IDD in terms of services and facilities, assessment and evaluation, curriculum needs for children with IDD.

Literature Review

According to psychologists, parenting stress is the stress you feel when you feel like you're not coping as a parent. Your demands are too high. Parental stress is a specific type of stress that occurs when parents' perceptions of parenting demands exceed their resources. A common view of describing parental stress distinguishes between two main components: the child domain, which arises directly from the child's traits, and the parent domain, which is more strongly influenced by the parent's function (Anderson, L.S. (2008). More than other types of stress, parental stress is associated with parenting practices (e.g., Anderson, L.S. (2008). (Kazdin, 1995). High levels of parental stress can affect child adjustment in a number of ways, including making it difficult for parents to use optimal parenting strategies (Whiteside-Mansell et al., 2007). For example, increased stress can reduce parental warmth levels and increase rates of demanding parenting (Haskett, Ahern, Ward, & Allaire, 2006).

The diagnostic areas to which the following severity is assigned are in the areas of social and repetitive behaviors. There are three levels of his, from request for assistance to critical assistance request to exceptional critical assistance request (APA, 2013). In the diagnostic domain of social behavior, these levels range from deficits in social communication that are harmful if help is not available, to marked deficits in verbal or nonverbal social communication, social verbal and It extends to severe deficiencies in nonverbal social communication. In communication and repetitive behavior, levels range from behavioral rigidity that limits independence and causes problems in one or more situations to rigidity in everyday life. Such a notice and Observed in all attitudes.

Intellectual and Developmental Disability (IDD) – This term is used for the mentally challenges children those children are less in mental abilities or physical activities. They are socially and emotionally are weak. The American Association for Intellectual Developmental Disabilities (2013) classifies IDD as mild, moderate, severe, and pervasive. Below is a description of each classification.

Mild: The person with mild level problem performs daily activity but need little help like shopping, house grocery and other activities.

Moderate: The person with moderate level need personal helper to daily living activities like eating, cleaning personal self and perform other duties.

Severe: The person with severe level problem needs all the time helper to assist how to perform all activities like dressing, eating and bathing. Only about 3 or 4% of people diagnosed with intellectual disability fall into the severe category. This category of people only communicates very basic level, not explain things in detail. Most people in this category cannot live independently and must live in group accommodation.

Profound: Dependent on others for all aspects of routine physical care, health, and safety, but may participate to some extent in disability-dependent activities (American Association on Intellectual and Developmental Disabilities, 2013).

Intellectual developmental disorders (IDD), the mentally retardation is known that problem with brain the person with this problem have below-average intelligence and also faced problem to perform all activities, they are poor daily living skills that is compulsory to perform, they perform activities but take a long time as compare to average person intelligence. There are different levels of mentally challenges person are varying for each other's from mild to profound (Bhandari, 2016).

There are many different signs of mentally challenges children. But it is not

compulsory to appear all sign during infancy or may be not notice able until a child age of school going. It is also dependent on the level of problem may be sever to notice in early age before school going age. Some of the most common signs of intellectual disability are:

- turns, sits, crawls, or walks slowly
- speaks slowly or has trouble speaking
- learns to dress or eat late
- has difficulty remembering things
- has difficulty remembering things Behaviors with Impossible Consequences
- Problematic behaviors such as explosive tantrums
- Difficulties with problem solving and reasoning (Blacher, 2001).

Methodology

2.1 Type of Research

This study was based on quantitative research, further researcher used questionnaire as a tool for data collection.

2.2 Population of the Study

Following schools were conveniently selected for population of this study:

1. Govt special education center Yazman district Bahawalpur.
2. Govt devolved special education center for MCC Bahawalpur.
3. Govt special education center Sadar Bahawalpur.
4. Govt Shadab Training institute Bahawalpur Chak 10BC.

2.3 Sample of the Study

A sample of 50 parents was selected from different socio-economic status and educational background.

2.4 Too of data collection

The questionnaire was developed as an instrument for data collection.

2.5 Data Analysis

Data was analyzed by using statistical package for social sciences (SPSS).

Table 2.5.1

Paired Samples Statistics

	Mean	N	Std. Deviation	Std. Error Mean
Pair 1 Tpasaf	62.9000	50	7.17208	1.01429
Tpss	42.2000	50	4.99387	.70624

The mean of scale of parenting and family adjustment scale is higher than the that of the parent’s stress scale which means that parents stress is always going to be less than the score of the parents’ adjustment scale

Table 2.5.2

Paired Samples Test

Pair 1	T	Df	Sig. (2-tailed)	T
Tpasaf –Tpss	15.771	49	.000	

The cutoff value for determining statistical significance is corresponds to a 5% (or less) chance of obtaining a result like the one that was observed if the null hypothesis was true. Significance value clearly shows that there is a significance difference between the means of both scales hence we can reject the null hypothesis.

FINDINGS

3.1 Findings of Adjustment of Parents in Family of Students with IDD

The first objective of the study was to explore the adjustment of parents in family of students with IDD indicate is given below.

- I. A larger proportion (86%) of respondents said they leave their child to do the task by themselves.
- II. Only (14%) of the respondents go for alternative ways to deal with their children.
- III. (86%) of respondents said they reward their good behavior for motivation. Only (14%) of the respondents said they do not do this.
- IV. Only (6%) of the respondents said they follow through with consequences.
- V. (86%) of respondents said they threaten their child with something, but they don't follow through.
- VI. (40%) of respondents said they shout and get angry when their child misbehaves.
- VII. (86%) of respondents said they praise their child's good behavior. Only (14%) of the respondents said they do it sometimes.
- VIII. (98%) of respondents said they give more attention to their children when they behave well.
- IX. (96%) of respondents said they never/very little spank their child when they misbehave or. Only (4%) of the respondents said they do it more often.
- X. (74%) of respondents said they counsel their children about their behavior.
- XI. (84%) of respondents said they never respond to the child's bad behavior in the same way, but they change their strategy.
- XII. (90%) of respondents said they fulfill their child's need immediately if they start misbehaving. Only (10%) of the respondents said they do it sometimes.

3.2 Findings Determine the Reasons for Family Adjustment of Students with IDD

The 2nd objective of the study was to determine the reasons for family adjustments of students with IDD. Frequency, percentage, means score and standard deviation on each item.

- I. All the respondents said they talk to the child about their behavior or other things.
- II. (86%) of respondents said they feel proud of their child. Only 7(14%) of the respondents said they sometimes feel proud.
- III. (86%) of respondents said they enjoy spending time with their children. Only (14%) of the respondents said they sometimes enjoy their time with their children.
- IV. (86%) of respondents said they have a good understanding with their children. Only (14%) of the respondents said they do not have a good understanding with their kids.
- V. (76%) of respondents said they satisfied with their child's behavior. Only (24%) of the respondents said they are somewhat satisfied of their children behavior.
- VI. (76%) of respondents said they go through emotional stress of being a parent. Only (24%) of the respondents said they sometimes feel stressed.
- VII. (86%) of respondents said they have a good healthy and supportive behavior among their family members. Only (14%) of the respondents said they somewhat have a supportive behavior.
- VIII. (88%) of respondents said they have good understanding among their

family members. Only (12%) of the respondents said they do not have good understanding among their family members.

IX. (52%) of respondents said their fight and argue. (48%) of the respondents said they do not fight or argue at all.

X. (84%) of respondents said their family member never criticize make other one feels bad. Only (16%) of the respondents said they do.

3.3 Findings Stress of Parents of Persons with IDD

The 3rd objective of the study was to explore the stress of parents of persons with IDD indicate in Tables given below. Frequency, percentage, means score and standard deviation on each item is given below.

I. (90%) of respondents agreed that they are satisfied and happy in their role as parents. Only (10%) of the respondents said they are not happy.

II. (90%) of respondents agreed that they would try to make their children's life better as much as they can. Only (10%) of the respondents disagreed.

III. (90%) of respondents agreed that they have friendly relationship with their children. Only (10%) of the respondents were undecided.

IV. (86%) of respondents agreed that they enjoy spending time with their children. Only (14%) of the respondents were undecided.

V. (38%) respondents agreed that they optimistic about their children and their future together and (38%) disagreed to this statement and 12(24%) of the respondents were undecided/unsure.

VI. (98%) of respondents agreed that they are burdened financially by having kids. Only (2%) of the respondents disagreed.

VII. (50%) of respondents agreed that they are unable to balance other responsibilities with having a child. 5(10%) of the respondents were undecided. (40%) of the respondents said they are able to balance other responsibilities with having a child.

VIII. (60%) of respondents agreed that they are embarrassed due to their child's behavior. (36%) of the respondents were undecided. (4%) of the respondents said that their child's behavior is not embarrassing to them.

IX. (52%) of respondents agreed that if they are given a chance to live their life again them might choose not to have kids. (48%) of the respondents said if they are given a chance to do it over again, they will have kids.

X. (84%) of respondents agreed having kids is the burden of responsibilities. (16%) of the respondents said that they do not consider it burden.

XI. (84%) of respondents agreed having kids is the burden of responsibilities. (16%) of the respondents said that they do not consider it burden.

Discussion

The first objective of the study was to explore the adjustment of parents in family of students with intellectual development disability. And the findings show that majority 86% of respondents said they let their child to do the task by themselves. According to these findings parents of disabled students want their children to be self-independent, because it will help them to gain more confidence in every filed of their lives. While the other side of coin is also showing that there are multiple reasons about this may be the parents have less time for their children or they must do many other important tasks, so they let their children to do the tasks themselves. Further (86%) of respondents said they reward their good behavior for motivation. These findings show that parents are motivating their children, and they are rewarding them in different ways so they may not feel inferior.

Motivation leads to enjoy life activities as the normal children are enjoying in their lives.

The 2nd objective of the study was to determine the reasons for family adjustments of students with intellectual development disability. All the respondents said they talk to the child about their behavior or other things. Further majority 86% of respondents said they feel proud of their child. According to these findings parents of special children are seen much satisfied about their children and this shows that special children are also feeling easy in their lives, and they are doing the life tasks in better way, so their parents are feeling proud to them. The 3rd objective of the study was to explore the stress of parents of persons with intellectual developmental disability. Majority 90% of respondents agreed that they are satisfied and happy in their role as parents. These finding show that parents of special children are not feeling burden regarding their special children that means they are happy and satisfied as parental role. Further findings show 90% of respondents agreed that they would try to make their children's life better as much as they can. This shows that majority of parents are also trying to make efforts in making their children's' live better.

Conclusion

This was quantitative research by nature. This study was conducted in Bahawalpur city. Population of this study was four schools of Bahawalpur City those were conveniently selected. Further researcher used SPSS for data analysis. In this article researcher draws findings and conclusion on base of response by the respondents. According to findings many of the parents agreed that they feel proud on activities of their children. They also agreed that they work for motivation of their children. They also agreed that they motivate their children to do work independently and they let their children to make decisions according to own wills. Some parents claimed that the current condition of their life is excellent. They feel close to their children. Children gives them a more certain and positive view for the future. They find their children pleasant. There was little or nothing they would not do for their children if it was necessary. It shows that majority of the parents of children with IDD are more concerned about their children.

Reference

- Anderso, L. S. (2008). Predictors of parenting stress in a diverse sample of parents of early adolescents in high-risk communities. *Nursing research*, 57(5), 340.
- Bashir, R. A., Bhandari, V., Vayaltrikkovil, S., Rabi, Y., Soraisham, A., Tang, S., ... & Lodha, A. (2016). Chorioamnionitis at birth does not increase the risk of neurodevelopmental disability in premature infants with bronchopulmonary dysplasia. *Acta Paediatrica*, 105(11), e506-e512.
- Blacher, J. (2001). Transition to adulthood: Mental retardation, families, and culture. *American Journal on Mental Retardation*, 106(2), 173-188.
- Burnham BR. Perceived self-efficacy and well-being in fathers of children with autism [Master's dissertation]. Retrieved from <http://csuchico.dspace.calstate.edu/handle/10211.4/260>, 2010.
- Deater-Deckard K. Parenting stress. New Haven, CT: Yale University Press, 2004.
- Haskett, M. E., Ahern, L. S., Ward, C. S., & Allaire, J. C. (2006). Factor structure and validity of the parenting stress index-short form. *Journal of Clinical Child & Adolescent Psychology*, 35(2), 302-312.
- Kāra, C. (1992). *Exceptional children: Their psychology and education*. Sterling

Publishers Pvt. Ltd.

Kazdin, A. E. (1995). *Conduct disorders in childhood and adolescence* (Vol. 9). Sage.

Trute, B., Benzie, K. M., Worthington, C., Reddon, J. R., & Moore, M. (2010). Accentuate the positive to mitigate the negative: Mother psychological coping resources and family adjustment in childhood disability. *Journal of Intellectual and Developmental Disability*, 35(1), 36-43.

Wade, B., & Moore, M. (1992). *Patterns of educational integration: International perspectives on mainstreaming children with special educational needs*. Symposium Books Ltd.

Whiteside-Mansell, L., Ayoub, C., McKelvey, L., Faldowski, R. A., Hart, A., & Shears, J. (2007). Parenting stress of low-income parents of toddlers and preschoolers: Psychometric properties of a short form of the Parenting Stress Index. *Parenting: Science and Practice*, 7(1), 26-56.