Mothers of children with developmental disabilities: Stress in early and middle childhood

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ABSTRACT

Using a sample of 219 families of children with (n = 94) and without (n = 125) developmental disabilities, this study examined the longitudinal perspectives of maternal stress in early (ages 3–5) and middle childhood (ages 6–13) and its relationship to mothers' and children's characteristics. Multivariate latent curve models indicated that maternal stress remained high and stable with minimal individual variation in early childhood, but declined with significant individual variation in middle childhood. Maternal stress at the beginning of middle childhood was associated with earlier maternal stress, as well as children's behavioral problems and social skills. The trajectory of maternal stress across middle childhood was related to children's behavioral problems. Implications for interventions are discussed.

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1. Introduction

Over half a century of research suggests that mothers of individuals with developmental disabilities (DD) report more stress than mothers of individuals with typical development (TD) (Blacher & Baker, 2002; Griffith, Hastings, Nash, & Hill, 2010; Yoong & Koritsas, 2012). However, a majority of this research ignores middle childhood, uses one point in time, and is linked to children's behavioral problems. There are no studies to our knowledge that investigate the longitudinal perspectives of maternal stress in differential developmental periods, and the relationship between maternal stress and the characteristics of mothers and children. The objective of the present study was to examine maternal stress in early and middle childhood in relation to the demographic characteristics of mothers and the functioning levels in their children.

1.1. The trajectory of maternal stress

Research on maternal stress and DD is primarily conducted without consideration of developmental stage (Murphy, Christian, Caplin, & Young, 2007), often with a singular focus on families of young children (Estes, Munson, Koehler, Zhou, & Abbot, 2009), adolescents (Embregts, Grimbels de Bois, & Graef, 2010), or young adults with intellectual disabilities (Yoong & Koritsas, 2012). Nearly all of these studies were conducted using data from one point in time. As the field of DD evolved, studies moved to examine pre- and post-measures of maternal stress. For example, in 123 families of young children with DD, stress was stable from the initial assessment to the 12-month post assessment (Herring et al., 2006).

With the advent of more sophisticated statistical techniques, studies emerged which examined the longitudinal perspectives of maternal stress. For example, Crnic, Gaze, and Hoffman (2005) examined stress in 125 mothers with children...
with TD and reported that daily hassles and major life stress were relatively stable across the preschool period. More recently, Neece, Green, and Baker (2012) examined the developmental trajectory of maternal stress and reported that after accounting for behavioral problems, there was an increase in stress over time (ages 3–9) for mothers of children with DD. The present study overlaps to some extent with Neece et al. (2012) because both studies examined maternal stress over time in families of children with and without DD. However, the present study used additional time points separated into early and middle childhood periods, other child and mother characteristics, a more complex model and analytic technique, and a specific ethnic composition.

It is important to examine maternal stress in early and middle childhood because these stages represent particular benefits and challenges for parents. For example in early childhood, mothers are spending a lot more time with their young children, many of whom are newly identified as having developmental delays (Battaglia & Carey, 2003). Therefore, it is likely that maternal stress would be high in early childhood (Baker, Blacher, Crnic, & Edelbrock, 2002; Baker et al., 2003; Tervo, 2012). However in middle childhood, children are faced with a longer and more structured school environment. This may result in decreases in parenting stress because parents are spending less time with their children, while at the same time children are receiving school-based services (Blacher, Baker, & Eisenhower, 2009). On the other hand, this may give parents an opportunity to make more peer comparisons and realize how far behind their child is, leading to more maternal stress in the elementary years (Neece et al., 2012; Webster, Majnemer, Platt, & Shevell, 2008).

1.2. Predictors of maternal stress

The theoretical literature on stress suggests that there are four components to the stress process: (1) an external causal event or agent, (2) a cognitive appraisal of the event or agent, (3) coping mechanisms to reduce the impact of the event or agent, and (4) the stress reactions (Lazarus, 1993). Children’s characteristics may be causal agents of maternal stress (Neece et al., 2012). The majority of research on maternal stress and DD has been linked to children’s behavioral problems. Several studies indicated that children’s behavior problems, much more than their cognitive delay or disability type, accounted for maternal stress (Baker et al., 2002, 2003; Blacher & McIntyre, 2006; Griffith et al., 2010; Herring et al., 2006; Neece et al., 2012).

Relative to behavioral problems, there is limited research examining the relation between maternal stress and children’s social skills. For example, Peters-Scheffer, Didden, and Korzilis (2012) reported that when behavior problems were entered into the regression analyses, social skills (e.g., initiating social interactions) no longer predicted maternal stress. However, other studies have suggested that children’s social skills and behavior problems both predict maternal stress. Specifically, there could be a multiplicative effect, such that high levels of behavior problems and low levels of social skills put mothers of children with DD at the most risk for high stress levels (Neece & Baker, 2008).

There are several maternal characteristics that also may be covariates of stress. When faced with an external agent of stress (i.e., child characteristics), there may be individual differences in mothers’ cognitive appraisal of the event (Deater-Deckard, 1998). For example, when children’s misbehaviors were attributed to an internal locus of control, there was an enhanced stress reaction. However, in Latino families, mothers’ attributions often focused on an external locus of control (Chavira, Lopez, Blacher, & Shapiro, 2000). Several studies have shown that Latino families may be less connected to disability service systems and less able to access services such as respite care because of financial, linguistics, and/or cultural barriers (Eisenhower & Blacher, 2006; Shapiro, Monzo, Rueda, Gomez, & Blacher, 2004). Despite these difficult circumstances, Blacher and McIntyre (2006) reported no differences in maternal stress for Latino mothers, relative to Anglo mothers of low-functioning young adults with intellectual disabilities.

Along with mothers’ ethnic background, socio-economic characteristics may be related to maternal stress, specifically with regard to the coping mechanisms used in the stress process. Unfortunately, some families of children with disabilities face financial demands that result in economic hardship (Murphy et al., 2007). This is a robust finding supported by studies conducted by Emerson and his colleagues (Emerson et al., 2009, 2011).

A closer examination of the literature elucidates how child and maternal characteristics may fit together. First, there is a well-established link between socio-economic status (SES) and the prevalence of ID/DD. According to Emerson et al. (2011), exposure to socio-economic disadvantage may account for most or all of the risk of poorer mental health among mothers of children with ID. SES is often manifested in the neighborhoods in which families reside. Some immigrant Latino families live in low-income neighborhoods that are viewed as relatively dangerous by its inhabitants (Reese, 2002). For many Latino parents, the family is the primary mechanism for teaching ethnic values, since la calz (literally meaning the street, but referring more generally to outside of the home) may be a source of danger to children (Halgunseth, Ispa, & Rudy, 2006; Reese, 2002). For Latino parents, important childrearing goals are to raise a child who will become a “good person” (persona de bien) and follow the “good path” (i.e., el buen camino) (Goldenberg & Gallimore, 1995). Therefore in Latino families, especially those living in low SES neighborhoods, social skills and behavioral competency are highly valued in children, and as such, may be related to maternal stress in middle childhood above and beyond maternal stress in early childhood.

1.3. Limitations of previous research and contributions of present study

To date, there are no studies that examined maternal stress in both early and middle childhood, especially within Anglo or Latino families. There is limited research examining the relationship between disability status (i.e., having a child with DD vs.
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