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Research in Developmental Disabilities



Parent stress, parenting competence and family-centered support to young children with an intellectual or developmental disability

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ARTICLE INFO

Article history:

Received 18 August 2008

Accepted 20 August 2008

Keywords:

Family-centered practice
Disability
Parent outcomes
Help-giving practices

ABSTRACT

A family-centered approach to the support of families with a young child with an intellectual or developmental disability has been widely adopted in the last decade. While some of the foundational assumptions of family-centered theory have been tested, there remain considerable gaps in the research evidence for this approach. While parenting stress and competence have been examined in the general family support literature, these variables have received little attention in the family-centered support literature. This pilot study examined the relationship between parent stress and parenting competence and family-centered support. The results suggest that important components of family-centered practice are significantly associated with parent stress, but that a meaningful association between parenting competence and family-centered practice is yet to be demonstrated.

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In recent decades, the nature of the support provided to families with a young child with a disability has assumed crucial importance. In particular, how that support is provided has been shown to be just as important as what support is provided in producing positive outcomes for families (Newson & Schultz, 1998). Family systems theory advocates a whole-of-family approach and a commitment to family choice and decision making achieved through a respectful partnership

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established between professional and parent (Turnbull, Blue-Banning, Turbiville, & Park, 1999). Family-centered approaches based on family systems theory have been widely adopted in various contexts involving children with disabilities (Esdaile & Olson, 2004; Keyser, 2007; Murray & Mandell, 2006). While there is growing support for the family-centered approach in the research literature, this support is limited to evidence of links between family-centered practices and a narrow range of positive outcomes for families (Dempsey & Keen, 2008; Dunst, Trivette, & Hamby, 2007). This is particularly so in relation to the outcomes of reduced parenting stress and enhanced parenting competence; two variables that are hypothesised to be either directly or indirectly related to family-centered support.

Before discussing the reduction of parent stress and the enhancement of parenting competence as desirable outcomes from family-centered support, it will be helpful to overview the family-centered philosophy and the theoretical models that seek to explain the interaction between crucial variables in this approach. Central to the family-centered approach is the strengthening of family functioning to permit parents to display the knowledge and skills necessary for effective interaction with their child, as well as the development of essential parenting roles (Allen & Petr, 1998; Dunst, Trivette, & Deal, 1988). While it is not the only means for the achievement of these outcomes, family-centered support is an approach that is well suited for use by a wide range of helping professionals who assist families and children with a disability. In this regard, family-centered support can be considered as a vehicle by which support staff may facilitate the development of positive outcomes for families and their children.

Family-centered theory argues that the way support is provided can either enhance or impede the intended outcomes from that support (Trivette & Dunst, 2007). For example, while building a positive relationship with families is essential in a supporting role, it is not enough on its own to maximise results from that support. Also important is a support approach that encourages participation by families in the support intervention. That participation may take many forms, but can include opportunities for decision making by parents, learning new skills, developing awareness about the options that may be available to the family and strengthening the family's informal support networks.

Several recent reviews of the family-centered research permit some conclusions to be drawn about explanatory models for the approach and to identify some gaps in the research evidence for family-centered support (Dempsey & Keen, 2008; Dunst et al., 2007). These reviews provide support for a number of direct and indirect relationships between family-centered support and a variety of variables. Briefly, family-centered practices are significantly associated with variables that are most closely related to the support provided. Variables such as satisfaction with support, appraisals of personal control and self-efficacy are examples. Further, these variables may mediate the interaction between family-centered practices and child and parent outcomes such as parenting competence and child development. Finally, positive outcomes from family-centered support is moderated by a range of program and participant details such as the nature of service delivery and the extent of child behaviour problems.

These research reviews have also helped to clarify the implications for future research. Among other things, the recommendations from the reviews prompt the need to include a wider range of parent and child functioning measures, the use of longitudinal studies to examine changes in variables over time, and the use of measures of family-centered support with subscales to clarify how aspects of that support impacts on desirable child and parent outcomes. The present study attempted to address some of these recommendations by including measures of parent stress and parenting competence, and by including a measure of family-centered practice that identifies components of that practice. Our current understanding of these variables as they relate to families with a child with a disability is now discussed.

It has frequently been reported that parents of children with disabilities experience higher levels of parenting stress than parents of typically developing children (Boyd, 2002). This is of concern due to the potentially negative impact of parenting stress on family functioning and on parent and child outcomes (Brinker, Seifer, & Sameroff, 1994; Llewellyn, McConnell, Thompson, & Whybrow, 2005; O'Connor, 2002). For example, Osborne et al. found that high levels of parenting stress counteracted the effectiveness of early intervention for children with autism (Osborne, McHugh, Saunders, & Reed, 2008).

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