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Research Paper

Parental stress, family quality of life, and family-teacher partnerships: Families of children with autism spectrum disorder



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ABSTRACT

Background: Reducing parental stress and improving family quality of Life (FQOL) are continuing concerns for families of children with autism spectrum disorder (ASD). Family-teacher partnerships have been identified as a positive factor to help parents reduce their stress and improve their FQOL. However, the interrelations among parental stress, FQOL, and family-teacher partnerships need to be further examined so as to identify the possible paths to help parents reduce their stress and improve their FQOL. The purpose of this study was to examine the interrelations among these three variables.

Method: A total of 236 parents of school children with ASD completed questionnaires, which included three measures: (a) the Beach Center Family Quality of Life Scale, (b) the Parental Stress Scale, and (c) the Beach Center Family-Professional Partnerships Scale. The structural equation modeling was used to analyze the interrelations among these three variables.

Results: Perceived parental stress had a direct effect on parental satisfaction concerning FQOL and vice versa. Perceived family-teacher partnerships had a direct effect on FQOL, but did not have a direct effect on parental stress. However, family-teacher partnerships had an indirect effect on parental stress through FQOL.

Conclusions and implications: Reducing parental stress could improve FQOL for families of children with ASD and vice versa. Strong family-teacher partnerships could help parents of children with ASD improve their FQOL and indirectly reduce their stress.

1. Introduction

Children with autism spectrum disorder (ASD) are characterized by their social interactions and communication challenges and restricted, repetitive behaviors (American Psychiatric Association, 2013). Because of these unique characteristics, caregiving of children with ASD may be stressful for parents, and further, negatively influence the entire family (Boehm, Carter, & Taylor, 2015; Fein & Dunn, 2007; Hutton & Caron, 2005; McStay, Trembath, & Dissanayake, 2014a; Meadan, Halle, & Ebata, 2010; Montes & Halterman, 2008;Rao & Beidel, 2009). Compared to parents of typically developing children and children with other disabilities, parents of children with ASD report higher stress levels and lesser well-being (e.g., Abbeduto et al., 2004; Brobst, Clopton, & Hendrick, 2009; Dabrowska & Pisula, 2010; Eisenhower, Baker, & Blacher, 2005; Hayes & Watson, 2013; Hoffman,

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Sweeney, Hodge, Lopez-Wagner, & Looney, 2009; Johnson, Frenn, Feetham, & Simpson, 2011; Phetrasuwan & Miles, 2009; Quintero & McIntyre, 2010; Robbins, Dunlap, & Plienis, 1991; Schieve, Blumberg, Rice, Visser, & Boyle, 2007). Thus, reducing parental stress and improving family quality of life (FQOL) are continuing concerns for these families (Mancil, Boyd, & Bedesem, 2009; McStay et al., 2014a; Meadan et al., 2010).

To help parents reduce their stress and improve their FQOL, factors (e.g., child behavior, parent coping style, family support) related to parental stress and FQOL have been identified in the literature (e.g., Boehm et al., 2015; Davis & Carter, 2008; Ekas, Lickenbrock, & Whitman, 2010; Gardiner & Iarocci, 2015; Hall & Graff, 2011; Lyons, Leon, Phelps, & Dunleavy, 2010; McStay et al., 2014a). Family-professional partnerships have been identified as a positive factor to help parents reduce their stress and improve their FQOL (e.g., Burke & Hodapp, 2014; Davis & Gavidia-Payne, 2009; Eskow, Chasson, & Summers, 2015; Gray, Msall, & Msall, 2008; McStay et al., 2014a; McStay, Trembath, & Dissanayake, 2014b; Summers et al., 2007). However, there was a lack of studies regarding the interrelations among parental stress, FQOL, and family-professional partnerships in the literature. The examination of these interrelations might have implications for professionals to identify the possible paths to help parents reduce their stress and improve their FQOL. Therefore, this study aimed to examine these interrelations. In the following sections, we present a brief overview of the literature concerning the relations of parental stress, FQOL, and family-teacher partnerships as well as the significance of the study to provide the background and rationale for this study.

1.1. Relations between parental stress and FQOL

Parental stress is the stress associated with the role of being a parent (Berry & Jones, 1995). It is the imbalance between the demands of parenting and available resources perceived by an individual parent (Raphael, Zhang, Liu, & Giardino, 2010). However, stress has a negative connotation that may miss potential positive or neutral impacts of disability on the family (Taunt & Hastings, 2002). Therefore, FQOL is advocated as a way to capture a comprehensive index of family outcomes (Summers, Poston et al., 2005). FQOL means "[c]onditions where the family's needs are met, and family members enjoy their life together as a family and have the chance to do things which are important to them" (Park et al., 2003, p. 368). The concept of FQOL is extended from the quality of life of an individual (Davis & Gavidia-Payne, 2009; Hoffman, Marquis, Poston, Summers, & Turnbull, 2006; Rillotta, Kirby, Shearer, & Nettelbeck, 2012), which is based on the perception held by an individual concerning various aspects of life experiences, including personal characteristics, objective life conditions, and perceptions of significant others (Cella, 1994; Felce & Perry, 1995; Schalock, 1994).

Over the past few decades, many researchers have examined various factors related to parental stress in parents of children with ASD (e.g., child characteristics, social support), and suggested many different types of intervention services for professionals to help parents reduce their stress (e.g., Davis & Carter, 2008; Ekas et al., 2010; Hall & Graff, 2011; Lyons et al., 2010; Tomanik, Harris, & Hawkins, 2004). However, little is known about the effect and impact of FQOL on parental stress for these families. Lee, Hwang, Chen, and Chien (2009) examined the relations among parental stress and quality of life of caregivers of preschool children with very low birth weights. Using structural equation modeling, quality of life of the caregivers was directly related to parental stress. Recognizing that the quality of life of the caregivers of preschool children with very low birth weights directly affects their parental stress, this indicates that parental satisfaction concerning FQOL might also affect parental stress in family of children with ASD.

Although the focus on FQOL within the field of ASD is a recent concept, several studies have examined various factors related to FQOL of children with ASD (e.g., behavior problems, family hardiness, marital adjustment), and recommended several ways for professionals to help these families enhance their FQOL (e.g., Boehm et al., 2015; Iarocci, 2015; McStay et al., 2014a,b; Pozo, Sarriá, & Brioso, 2014). However, no research was found that examined the effect and impact of parental stress on FQOL for these families. Lee, Lopata et al. (2009) investigated the physical and mental health-related quality of life of parents of children with high-functioning ASD. The findings indicated that compared to parents of typical children, parents of children with high-functioning ASD reported higher stress. In addition, parental stress was a significant predictor for both physical and mental health-related quality of life. Recognizing that parental stress is a significant predictor for health-related quality of life for parents of children with high-functioning ASD, this indicates that parental stress might then have an effect on FQOL for families of children with ASD across a broader range of the spectrum. From the aforementioned statement, parental stress and FQOL might have a bidirectional relation for families of children with ASD.

1.2. Relations of professional partnerships to parental stress and FQOL

The collaborative partnership between family and professionals has been recommended for decades to provide effective services for children with disabilities (Blue-Banning, Summers, Frankland, Nelson, & Beegle, 2004). This concept has been incorporated in one of six principles of the Individuals with Disabilities Education Act (2004) in developing and implementing special education programs (Blue-Banning et al., 2004; Summers et al., 2005). Summers et al. (2005, p. 66) defined family-professional partnerships as "mutually supportive interactions between families and professionals, focused on meeting the needs of children and families, and characterized by a sense of competence, commitment, equality, positive communication, respect, and trust." They considered these partnerships as multidisciplinary collaboration, service, integration, and family/parent involvement. It is imperative to foster these mutually supportive interactions between teachers and families of students with disabilities so that the needs of all participants (i.e., students with disabilities and their families) are met (Blue-Banning et al., 2004; Summers et al., 2005; Summers, Hoffman, Marquis, Turnbull, & Poston, 2005). Many researchers believe that professional support for families of children with disabilities that targets

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