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## Emotional difficulties experienced by parents of children with disabilities versus parents of typical children

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### Abstract

This study aimed to discover whether parents of children with disabilities report higher levels of depression, anxiety and stress compared to parents of typical children, but also whether having a child with special needs influences the parent's job. By applying the DASS and PSS questionnaires, we concluded that these parents are more stressed, depressed and anxious, but also that they give up their jobs to take care of the disabled child.

**Keywords:** kids with disabilities, parents, stress, anxiety, depression, job

### Introduction

A personal experience as a parent of a disabled child, the experience of other parents, the connection with the academic world related to psychopedagogy special and deeper understanding of the role of parents in the recovery of children with disabilities, led us to research more about the specific situation of these parents, about the challenges they face, about the emotional difficulties that they encounter in everyday life.

Specialized studies carried out at the international level show several aspects faced, from an emotional point of view, by the parents of children with disabilities. Mothers of children with neuromotor, mental problems and chronic diseases are more stressed than mothers of children with psychological disorders, for example (Feizi et al., 2014). Regarding the families of children with multiple disabilities (in particular complex disability in children diagnosed with cerebral palsy), studies show that caring for such a child can affect both physical health and balance emotional of these parents. (Raina et al., 2005).

Studies go as far as shows that these parents who care for children with neurodevelopmental disorders and behavioral problems face a greater number of problems health and psychosocial (Lach et al., 2009). We researched the literature, but we also did some research ourselves in February 2021, which took shape in the article "Challenges of parents of children with disabilities during the COVID-19 pandemic", article published in Journal of Psychopedagogy.

In international studies, but also in the article mentioned above, depression, anxiety and stress are the most common emotional difficulties faced by those who gave birth to atypical children. So we wanted to investigate if in the case of these three emotional difficulties, parents of children with

disabilities register higher levels. And, starting from the idea that a mother takes care of 6 hours daily by a child with a disability (almost 3 times more time compared to a typical child), if having a disabled child influences your occupation.

The specialized literature makes certain important clarifications in the context of the most common causes of emotional disturbances in parents of typical children compared to the emotional disturbances of parents who have children with disabilities. Hoyle et al. (2021) state that in the United States, approximately 9% of children have a disability. Starting from this idea, the authors conducted a research which hypothesized that parents of children with special needs may be more prone to begin to develop a mental or emotional disorder than those parents of typical children. This study shows very clearly that parents of children with disabilities have recorded higher levels of stress, depression and anxiety in parents of children with special needs compared to parents of typical children.

Last but not least, the parents who have children with disabilities are 7 times more likely to develop mental disorders in the future compared to other parents. The website <https://online.regiscollege.edu/> notes that currently most common emotional imbalances in parents, respectively in their children are: anxiety disorders (panic attacks, phobias, anxiety disorder generalized, social anxiety, acute stress), depression, acute stress, stress disorder post-traumatic – reliving a traumatic episode.

Another study by Uskun and Gundogar (2010) measured stress in parents of children with disabilities in relation to different variables and in comparison with parents who have healthy children. Thus it was concluded that financial problems and lack of close relationships are predictors of stress for parents with atypical children and increase the stress level of parents with typical children. Financial problems have an effect significantly also on parental anxiety, in both groups of parents. In this study it was concluded that the anxiety of a disabled parent tends to increase then when he is faced with the negative reactions of society regarding his child.

Merkaj et al. (2013) compared two groups of 70 participants in the context of symptoms caused by stress, anxiety and depression. The two groups have represented parents who had children diagnosed with autism, respectively parents who they had typical children. The results showed that parents with children diagnosed with autism have reported significantly higher levels of stress, anxiety, and depression than parents from the control group. So, we made the research on anxiety, depression and stress, as being the most common emotional difficulties experienced by parents of children with disabilities.

## Method

We set the goal of this paper - especially after we have crossed the two years of the pandemic with additional challenges - to find out if the parents children with disabilities score higher on the most common difficulties emotional feelings felt by parents (anxiety, depression, stress) in relation to the results obtained by parents of typical children. Because stress is the most common emotional difficulty - and at parents of children with disabilities and parents of typical children, we applied two questionnaires with the same variable (stress) - and DASS and PSS, to observe from two sources which is the stress situation in the two types of parents. Moreover, as a novelty in studies in the field, we wanted to find out if between there is a correlation between the occupation of the parent and the type of the parent. For example, if the parents of children with disabilities have - mainly - the occupation of taking care of the child.

Therefore, **the objectives of the present paper are:** to find out if the levels of anxiety, depression and stress are higher in some parents of children with disabilities than the levels recorded by some parents of typical children. The second objective: to check if the stress level is different (possibly more high) in some parents of children with disabilities compared to the stress level in some parents of typical children (and from the PSS questionnaire). The third objective: to see if there is a difference between the occupations of some parents of children with disabilities versus the occupations of parents of typical children. The independent variables that we took into account in the research are: *type of parent* (parent of a child with disabilities or special needs or parent of a typical child or child without disabilities), *gender* (male and female) and *occupation*. Regarding the independent variable occupation we divided it into two categories: the occupation of having child care (in this category we have included personal assistant, housekeeper, leave child care) and other types of job (in this category we have included the occupations found at respondents such as psychologist, real estate project manager, police officer, bank advisor teacher, scientific researcher, personal development counselor, school principal, lawyer, public relations specialist, journalist, manager or engineer). The dependent variables are the *level of anxiety*, depression and stress according the DASS questionnaire and the *stress level* according to the PSS questionnaire (Perceived Stress Scales).

We applied the **DASS R-21 and PSS (Perceived Stress Scale) questionnaires** to one number of **208 subjects: 104 parents of disabled children and 104 parents of typical children**. The questionnaire made in Google Forms included the 21 questions from the DASS 21-R questionnaire and the 14 questions from the PSS questionnaire (Perceived Stress Scale) and was sent as a link in groups of parents of children with needs special, but also in groups of parents of typical children, on Messenger FB, on mail, on WhatsApp. The questionnaire was self-administered by the 208 subjects. The age of the 208 parents varies between 25 and 59 years, grouping like this: age group 25-35 years 54 parents, i.e. approximately 25.4%, age group 36-45 years 117 parents, i.e. approximately 56.2%, age group 45 + 38 parents, i.e. approximately 18.2%.

Regarding the environment of origin, 198 are parents who live in Romania and 10 in European countries (Italy, Austria, England, Czech Republic, Denmark, Portugal, Netherlands, Republic of Moldova). The batch is divided: 190 respondents come from the urban environment. Only 18 respondents come from rural areas, with a percentage of approximately 8.6% rural and 91.4% urban.

The group of respondents was divided according to the independent variables' type of parentage, gender and occupation.

From the point of view of the type of parent (parent of a child with a disability and parent typical child), the group of subjects was divided into 104 parents of children with disabilities (50%) and 104 parents of typical children (50%).

As for the gender of the 208 respondents, it is distributed percentageally as follows: 90.4% women (mothers) and 9.6% men (fathers).

Regarding the occupation, we have divided the occupations into two types: those that presuppose child care and others assimilated to this occupation (personal assistant for the child severely disabled, child care leave, child care leave 3-7 years, if the minor has a disability - accentuated or serious -, maternity and housewife leave) and others types of jobs (other than those mentioned above that involve child care). The subjects in the surveyed group had as occupations (in addition to childcare), the following: economist, journalist, counselor, engineer, psychologist, specialist marketing & PR, teacher, doctor, lawyer, civil servant, nurse, lawyer, kitchen helper, visual artist,

fashion designer, policewoman, real estate project manager, scientific researcher. Of the 208 respondents, 65 had childcare as their job (ie about 31.3%) and 143 had other occupations (about 68.7%).

The research had the following design:

#### Step 1

We set out to identify the emotional difficulties they encounter when giving life to and taking care of children and special and typical parents. One of the authors identified from personal experience these difficulties, then we also asked the parents we knew. Then, we researched which quizzes are best suited to find out the degree of anxiety, depression, and stress and I concluded that in order to highlight the different statistics between the levels of these emotional difficulties, the DASS 21-R questionnaires for depression, anxiety, and stress and the Perceived Stress Scale questionnaire are the most right. I elaborated the objectives of this paper.

#### Step 2

Development of a questionnaire in Google Forms containing demographic data of gender, age, background, occupation, and type of parent (parent of a typical child or parent of a child with a disability) and the 21 questions of the questionnaire DASS 21-R and the 14 questions of the Perceived Stress Scale questionnaire. Obviously, too GDPR consent request. Then, an important step of this research constituted sending it for completion first to the parents of children with disabilities and then to parents of typical children. It is important to note that although parents of children with disabilities were reached more easily, it was more complicated to lead to a completed questionnaire for parents of typical children.

#### Step 3

Downloading the results and observing the connection between the chosen occupation of the parent and the type of child (with or without disabilities) and the wording of the third hypothesis. Then, applying statistical tests and interpreting statistical results. Finally, the elaboration of the psychological interpretations provided by the statistical results, the drafting of the conclusions, the personal contribution to the work, but also the possible future directions of study for this research. Presentation of the results obtained in statistical tests for each hypothesis in part with the mention in/validation of hypothesis and their psychological interpretation.

The three hypothesis from which we started this research are:

**Hypothesis no. 1** It is assumed that there is a significant correlation of statistical interest between the level of stress, anxiety, depression of the parent and the type of child he has.

#### CORRELATION

/VARIABLES = Stres Anxietate Depresie Tip\_Copil  
/PRINT = TWOTAIL SIG.

**Correlations**

		Stres	Anxietate	Depresie	Tip_Copil
Stres	Pearson Correlation	1,000	,903	,918	,475
	Sig. (2-tailed)		,000	,000	,000
	N	208	208	208	208
Anxietate	Pearson Correlation	,903	1,000	,910	,522
	Sig. (2-tailed)	,000		,000	,000
	N	208	208	208	208
Depresie	Pearson Correlation	,918	,910	1,000	,454
	Sig. (2-tailed)	,000	,000		,000
	N	208	208	208	208
Tip_Copil	Pearson Correlation	,475	,522	,454	1,000
	Sig. (2-tailed)	,000	,000	,000	
	N	208	208	208	208

To test this hypothesis we used the coefficient evaluation test of Pearson correlation ( $r$ ). Accordingly, to the statistics results we can say that we have statistical significance for all three correlations, so hypothesis no 1 is validated.

**Hypothesis no. 2** It is admitted that there is a statistically significant difference regarding the level of stress between parents of children with disabilities and parents of typical children.

T-TEST /VARIABLES= PSS  
/GROUPS=Tip\_Copil(1,2) /MISSING=ANALYSIS  
/CRITERIA=CI(0.95).

**Group Statistics**

Group	N	Mean	Std. Deviation	S.E. Mean
PSS Copil fara nevoi speciale	104	21,55	7,73	,76
Copil cu nevoi speciale	104	28,05	9,21	,90

**Independent Samples Test**

	Levene's Test for Equality of Variances					T-Test for Equality of Means				
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference		
								Lower	Upper	
PSS Equal variances assumed	4,21	,041	-5,51	206,00	,000	-6,50	1,18	-8,82	-4,18	
Equal variances not assumed			-5,51	199,93	,000	-6,50	1,18	-8,83	-4,17	

We applied the t-test for two samples independently it emerges that there is a statistically significant difference ( $p=.001$ ), so also this hypothesis is validated.

**Hypothesis no. 3** It is assumed that there is a statistically significant difference in what concerns the chosen occupation (job) between the parents of some children with disabilities and the parents of other typical children.

T-TEST /VARIABLES= Ocupatie  
/GROUPS=Tip\_Copil(1,2) /MISSING=ANALYSIS  
/CRITERIA=CI(0.95).

**Group Statistics**

Group	N	Mean	Std. Deviation	S.E. Mean
Ocupatie Copil fara nevoi speciale	104	1,96	,19	,02
Copil cu nevoi speciale	104	1,41	,49	,05

**Independent Samples Test**

		Levene's Test for Equality of Variances					T-Test for Equality of Means			
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
Occupatie	Equal variances assumed	448,83	,000	10,52	206,00	,000	,55	,05	,45	,65
	Equal variances not assumed			10,52	133,70	,000	,55	,05	,45	,65

After applying the t-test for two independent samples and analyzing the resulting data, it appears that there is a statistically significant difference ( $p=.001$ ), so this third hypothesis is validated.

## Findings and discussion

According to the **first hypothesis**, we assumed that there is a significant correlation of statistical interest between the parent's level of stress, anxiety, depression, and the type of child they have. To test this hypothesis we used the coefficient evaluation test of Pearson correlation ( $r$ ). From the analysis of the statistical results, we noticed that we have statistical significance for all three correlations studied. For the correlation between the parent's stress level and the type of child that this has, we say there is a positive, direct, high-intensity correlation ( $r=0.475$ ,  $p=0.001$ ,  $N=208$ ). Regarding the correlation between parent anxiety level and child type (disabled child or typical child), we can say that there is a positive correlation, direct, of high intensity ( $r=0.522$ ,



$p=0.001$ ,  $N=208$ ). Regarding the correlation between the level of depression of the parent and the type of the child (disabled child or typical child), we can say that there is a positive correlation, direct, of high intensity ( $r=0.454$ ,  $p=0.001$ ,  $N=208$ ). In conclusion, we will say that the hypothesis is confirmed, there is a correlation and significant statistical interest between the level of stress, anxiety, and depression between parent and child types. *The fact that we detected high values in the anxiety, depression, and stress variables that correlate with high values of the child type variable (ie 2, as we coded the type of child with special needs), we could say that we encounter levels of anxiety, depression and higher stress in parents of children with special needs than in parents of typical children.* A fact confirmed by specialized studies. The authors recall here the study by Hoyle et al. (2021), authors who had the hypothesis that parents of children with disabilities are more likely to develop a mental or emotional disorder than parents who have healthy children. The results have shown a higher level of stress, depression, and anxiety in parents with atypical children (de 3 times higher in mothers than in fathers), compared to parents with typical children.

For the **second hypothesis**, it is assumed that there is a statistically significant difference in the level of stress between parents of children with special needs and parents of typical children. After analysis of the results obtained after applying the t-test for two samples independently, it emerges that there is a statistically significant difference ( $p=.001$ ) regarding the level of stress between the two groups of parents. We will conclude by saying that the hypothesis is confirmed, there being a difference statistically significant regarding the level of stress among parents of children with needs special and the parents of typical children. We applied the t-test for two independent samples using the results of the PSS (Perceived Stress Scale) questionnaire, precisely to check again if, from a statistical point of view, the level of stress is influenced by the type of child. *Interpretation of the statistical results clearly shows a statistically significant difference between the level of stress in parents of children with disabilities versus the level of stress in parents of typical children.* Also taking into account the fact that in the previous hypothesis, when applying the Pearson test we found a positive correlation, directly proportional and of high intensity, we can say that parents of children with disabilities have a higher level of stress than parents of typical children. A fact that is also confirmed by specialized studies that say that the challenges of parenting children with disabilities can disturb their emotional balance. We recall here the 2001 study by Smith and Innocenti (2001) measured the stress level of parents in 880 families who had children with disabilities. The results indicate a high level of stress in these parents, with the following risk factors: precarious financial situation, lack of quality time in the relationship with the child, and lack of social support.

As for the **third hypothesis**, it is assumed that there is a statistically significant difference in the chosen occupation (job) between parents of disabled children and parents of children with disabilities typically. After applying the t-test for two independent samples and analyzing the resulting data, it appears that there is a statistically significant difference ( $p=.001$ ) regarding the chosen occupation, between the two groups of parents. It can be concluded by saying that the hypothesis is confirmed, there being a difference statistically significant regarding the chosen occupation among the parents of children with needs special and the parents of typical children. In the demographic data of the questionnaire, we also entered the parent's occupation, a variable which we divided into two categories: the occupation of taking care of the child and others similar (personal assistant, housewife, person on childcare leave) and others job types (from psychologist, policeman, bank advisor to teacher, lawyer, journalist, a specialist in marketing, PR or human resources and many others).

*The statistical results show us that the type of child (disabled or typical) makes a difference and influences the choice of occupation. This means that the appearance of a child with special needs in a family can change its priorities. In the foreground, they will have their desire to diagnose their child, to start recovery, and to take care of the child so that he can become a child that can be included in society. A child with such limitations needs medical consultations and repeated specialty, a complex recovery program (kinesitherapy, speech therapy, language disorder therapy, psychological counseling, or other forms of recovery), and for this reason, the life of these parents prioritizes the special needs of the child. And thus, it is explained why the occupation is closely related to the type of child. To have a child with special needs leaves no time for the exercise of the job/occupation that the parent had before this problem child appeared. Precisely because recovery depends on the level of care and involvement of parents, in families with a child with a disability, a parent devotes himself to the care and recovery of this child. It is known that those mothers spend up to six hours a day of the week on direct care tasks with the disabled child, which is two to three times more than that of others mothers (Bhopti, 2016). There are situations where some parents become the therapists of their children themselves.*

And on the other hand, employers don't want a person who is very connected to a child who has special needs and the parents of these children may even lose their jobs. Several studies say that having a disabled child in a family brings unexpected experiences and challenges that can generate, in addition to stress, health disorders mental, health problems, the strain on family relationships, divorce, pressures financial, and unemployment (Reichman et al., 2008; Bourke-Taylor et al., 2010, Bhopti, 2016).

## Conclusion

Studies in the field certify that when a child with special needs is born in a family, challenges arise that can generate stress and mental health disorders, among others (divorce, job loss). Moreover, parents of children with disabilities are more likely to develop a mental or emotional disorder than parents of healthy children. The results of several studies have shown higher levels of stress, depression, and anxiety in parents of atypical children compared to parents of typical children. Other studies have shown that the high stress of parents who have one or more children with disabilities can affect the mental health of these parents.

With these studies in mind, but also bearing in mind the research related to the complex challenges that parents of children with disabilities had in the pandemic, we wanted to investigate whether in the community of parents of children with special needs these parents have higher levels to the most common emotional difficulties (anxiety, depression, and stress), compared to parents of typical children

The fact that we detected high values in the anxiety, depression, and stress variables which correlate with increased values of the child type variable (ie 2, as we coded the type of child with special needs), we could say that we encounter levels of anxiety, higher depression and stress in parents of children with special needs than in parents typical children (hypothesis 1).

This was also the central idea from which this research started, namely that, having to deal with more complex challenges than parents of typical children (diagnosis and recovery of the child, lack of financial and integration support, the special needs of the child, the care and permanent supervision of the child, even at old ages, the overwhelming challenges in case of multiple disabilities), those who give life to and care for minors with special needs can register higher values raised to these emotional difficulties studied compared to those of the parents of children without problems.

In order to verify if, from a statistical point of view, the level of stress is influenced by the type of child, we applied the t-test for two independent samples using the results of the PSS (Perceived Stress Scale) questionnaire. And the interpretation of the statistical results shows a statistically significant difference between the level of stress in parents of children with disabilities versus the level of stress in parents of typical children (the second hypothesis).

Apart from the above contributions, we consider an important personal contribution of the third hypothesis which clearly shows that the parents of children with disability's main occupation are taking care of that child. His special needs do not allow the parent to have another job, so the conclusion is that in Romania a parent of a child with a disability cannot or has no way of having a job if he has a child with special needs. This shows that this parent will definitely need financial help, but also emotional support. Because being a personal assistant to a child with a disability is an extremely physically demanding occupation (these children remain disabled and in adulthood), and especially emotional.

The present research is also important because it confirms international studies in the field, namely that these parents register higher levels of anxiety, depression, and stress than the parents of typical children, but also because of the large number of respondents geographically distributed in almost all the big cities of the country.

We believe that such research is necessary for Romania, precisely to draw attention to the complex challenges these parents face, but also to the emotional difficulties generated by them. It can be a wake-up call to the community in which we live so that we can be more understanding, empathetic, and able to support such a parent. Because without an emotional balance, these parents cannot move forward, cannot fight for their children, cannot be their co-therapists, and cannot be close to them in the way that the little ones need. And if they fail, their children with special needs are left alone in a system that is not prepared to care for such children.

## References

- Bhopti, A. (2016). *Promoting the occupations of parents of children with disability in early childhood intervention services - Building stronger families and communities*. Australian Occupational Therapy Journal
- Bourke-Taylor, H., et al. (2010). *Impact of caring of a school-aged child with a disability: Understanding mother's perspectives*, Australian Occupational Therapy Journal 57(2): 127-36  
[https://www.researchgate.net/publication/46380097\\_Impact\\_of\\_caring\\_for\\_a\\_school-aged\\_child\\_with\\_a\\_disability\\_Understanding\\_mothers'\\_perspectives](https://www.researchgate.net/publication/46380097_Impact_of_caring_for_a_school-aged_child_with_a_disability_Understanding_mothers'_perspectives)
- Feizi, A., et al. (2014). *Parenting stress among mothers of children with different physical, mental, and psychological problems*. Journal of Research in Medical Science: the official Journal of Isfahan University.  
<https://pubmed.ncbi.nlm.nih.gov/24778669/>
- Hoyle, et al. (2021). *Mental health risks of parents of children with developmental disabilities: A nationally representative study in the United States*. Disability and Health Journal, 14(2), 101020.  
<https://doi.org/10.1016/j.dhjo.2020.101020>
- Lach, L., M., et al. (2009) *The health and psychosocial functioning of caregivers of children with neurodevelopmental disorders*. Journal of Disability and Rehabilitation.  
<https://www.tandfonline.com/doi/abs/10.1080/08916930802354948?journalCode=idr.e20>
- Merkaj, V., et al. (2013). *Symptoms of stress, depression and anxiety between parents of autistic children and parents of typically developing children*. Academic Journal of Interdisciplinary Studies.  
<https://doi.org/10.5901/ajis.2013.v2n2p345>
- Poptean, C., B. (2021), *Challenges for Parents of Children with Disabilities during the COVID-19 Pandemic*, Review of Psychopedagogy(10)1, 162-175 <https://doi.org/10.56663/rop.v10i1.7>
- Raina, P., et al. (2005). *The health and well-being of caregivers of children with cerebral palsy*. Journal of Pediatrics, <https://pubmed.ncbi.nlm.nih.gov/15930188/>



- Reichman, N., E., et al. (2008). *Impact of Child Disability on the Family*. Maternal and Child Health Journal 12(6):679-83  
[https://www.researchgate.net/publication/5788710\\_Impact\\_of\\_Child\\_Disability\\_on\\_the\\_Family](https://www.researchgate.net/publication/5788710_Impact_of_Child_Disability_on_the_Family)
- Smith, T. B.; Innocenti, M. S. (2001). *Parenting Stress in Families of Children with Disabilities*. American Journal of Orthopsychiatry.
- Uskun, E.; Gundogar, D. (2010). *The levels of stress, depression and anxiety of parents of disabled children in Turkey*. Disability and Rehabilitation, 32(23), 1917–1927. <https://doi.org/10.3109/09638281003763804>  
<https://online.regiscollege.edu/>