



A Study of Resilience in Parents of Specially Abled Child

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A STUDY OF RESILIENCE IN PARENTS OF SPECIALLY ABLED CHILD ABSTRACT Resilience in parents of specially abled child was compared with that in parents of normal child. It was assumed that parents of specially abled child would be more resilient than parents of normal child. Final random samples of parents of specially abled child (n=120) and parents of normal child (n=120) were selected from a larger population of 300 parents

Abstract

Resilience in parents of specially abled child was compared with that in parents of normal child. It was assumed that parents of specially abled child would be more resilient than parents of normal child. Final random samples of parents of specially abled child (n=120) and parents of normal child (n=120) were selected from a larger population of 300 parents in each of the two groups. Resilience was studied with the help of a stress resistance scale. The finding confirmed the research hypothesis.

Key Words

Resilience, Parents of specially abled child,
Parents of normal child.

Introduction

Ungar et al. (2007) state that resilience is better understood as the opportunity and capacity of individuals to navigate their way to psychological, social, cultural, and physical resources. These resources sustained well-beings of individuals, and their opportunity and capacity to negotiate for these resources in culturally meaningful ways. Zautra et al. (2007) assert that resilience is an effective coping mechanism. This mechanism works when individuals are under stress for example, presence of specially abled child in the family. They believe that resilience is concerned with sustained competence exhibited by individuals who experience challenging conditions.

The presence of a specially abled child in the family is very specific and severe stressful situation which most often require a life time adaptation and threatens well-being of all other family members and probably of the specially abled child also. Parents are at the verge of intense

stressful situation as they found themselves as the only responsible persons. They not only need to care the specially abled child but also other children too, taking care of sibling rivalry, as clinical observations show that the normal children show resentment for taking extra and essential attention and care given to the specially abled child and may show non-adaptive behaviour and grievances too.

Margalit & Ankonina (1991) found that “parents of children with disabilities differed from parents of children without disabilities in their negative affect but not in their positive affect, calling attention to latter’s protective role in well-being”. Fredrickson and Joiner (2002) reports that “unlike negative emotions, which narrow people’s thought action repertoires (e.g., fight or flight), positive emotions broaden people’s thought-action repertoires in terms of their global attention and information processing. This expansion encourages the discovery of novel lines of thought or action, enables more flexible and creative thinking, predicts the use of broadly conceived coping strategies, creates a spiral toward improved well-being and resilience, and builds psychological resources and a coping arsenal for handling future adversities”.

A major shift has been observed over the past decade from pathological family viewpoint to competency-based, strength oriented model (Walsh, 2003). A family resilience approach recognizes families as challenged rather than damaged on the basis of these advancements (Wickham- Searl, 1992; Sorgie et al., 1998; Stainton & Besser, 1998; Heiman, 2002; Marcus et al., 2005; Bayat, 2007).McConnel & Savage (2015), did a research with a presumption that (the care needs of) the child with intellectual disability is the stressor and, in doing so, equates resilience with the successful adaptation of families to caring for a child with intellectual disability.

Several systems

Oriented research prevention and prevention models have a framework for identifying key processes that are thought to strengthen a family’s ability to cope with stressful life situations. From these family system models, two have emerged that focus specifically on the concept of family resilience. These two models are: the resilience model of family adjustment and adaptation (McCubbin & McCubbin, 1988; and McCubbin et al., 1995), and the systems theory of family resilience (Walsh, 1998).

Mink et al. (1983), observed that family cohesiveness contributed to better coping. Handerson & Vanderberg (1992) found that people with an internal locus of control were more likely to engage in behaviors to overcome the adverse effects of the chronic stress of raising an autistic child and thus, were more likely to achieve successful adaptation and resilience.

Wickhan- Searl (1992) found that some parents of disabled children pursue careers in areas where they can provide support to other families with similar experiences.

Stainton & Besser (1998) recognized nine core themes: “source of joy and happiness; increase sense of purpose & priorities; expanded personal and social networks and community involvement; increased spirituality; source of family unity & closeness; increased tolerance & understanding; personal growth and strength; positive impacts of others/community”.Scorgie & Sobsey (2000) investigated the possibilities of transformations that could occur from having a child with developmental disability. “The results showed a number of positive changes in the lives of parents of children with developmental disabilities. These positive changes included personal growth, improved relations with others and changes in philosophical or spiritual values”.Taanila (2002) found that “coping families that coped differed from non- coping families in seeking information, accepting the child, cooperating as a family and receiving social support”.

Rivers & Stoneman (2003), in their quantitative study, observed that social support had been associated with positive family and child outcomes in families with an autistic child.

Antonovsky (1993), Antonovsky & Sourani (1998), and Hansson & Cederblad (2004) observed that in grappling with adversity, couples and families did best when helped to gain a shared sense of coherence by recasting a crisis as a challenge that was comprehensible, manageable, and meaningful to tackle.

Fredrickson (2001), and Folkman & Moskowitz (2004) observed that “joy, hope, and pride were the most common terms used to describe their disabled children and were examples of discrete positive emotions which counteracted the physiological effects of negative emotions and facilitated adaptive coping and fuelled psychological resilience”. Kausar et al. (2003) reported that “the parents could be filled with ‘hope’ that their child would one day be able to achieve certain goals”. Al-Yagon and Margalit (2009) reported that parents had feeling of love for their child and felt quite proud of their child when they achieved something which was unexpected to them due to child’s disability. Greer et al. (2006) found that formal social support helped family of intellectually disabled children in preparing predicted levels of strength and family closeness.

King et al. (2006), conducted a study on three focus with 15 parents and four service providers. The results revealed that family beliefs system were changed and adapted overtime. This process of adaptation enabled families to develop different perspectives that culminated a newly form sense of control and thus, resiliency in parents.

Fischer et al. (2007) concluded that social support was an important buffer against family crisis factors and a factor in family resiliency promoting family recovery and as a mediator of family distress. Twoy et al. (2007) concluded that parents of children with autism spectrum disorder were likely to use support systems within the family’s social network to be resilient.

Singer & Floyd (2006), Al- Kuwari (2007) and, Olsson & Hwang (2008) found that mothers of intellectually deficit children had poorer psychological health and were at elevated risk of depression in comparison to mothers of typically developing children. Al- Yagon and Margalit (2009) emphasized intrapersonal and interpersonal factors and one factor where the child is the source of positivity and the child’s accomplishment which bettered parent’s resilience.

Problem and Hypothesis :

The only problem of the research pertained to impact of the presence of specially abled child in the family on resilience of parents. More specifically, the problem was whether there was any difference between parents of normal child and those of specially abled in respect of their resilience.

It was hypothesized that parents of specially abled child would be more resilient than parents of normal children.

Methodology

Sample

Final random sample of 120 parents of 60 normal child and 120 parents of 60 specially abled child were selected from larger population (n=300 each).

Tool

The Stress Resistance Scale (Ajawani & Varwandkar, 2010) was used to assess resilience level of parents. The test is highly reliable and valid, the coefficient ranging between 0.68 to 0.87 and are significant. The raw scores can be converted into percentile norm.

Procedure

Initially, institutes dealing with education and training of specially abled children and those with normal children were approached for the purpose of data collection. Firstly, 300 parents of the available specially abled children (n=150) in the institute were contacted through the teachers and were

administered Stress Resistance Scale along with a 'Request cum Consent Letter'. Secondly, 300 parents of the available 150 normal children of matched ages were contacted through the teachers and were administered Stress Resistance Scale after taking their consent.

These finally selected 240 parents' scores on Stress Resistance Scale were considered as the base for further computations as resilience scores.

Result and Discussion

A perusal of Table 1 clarifies that average resilience score of parents of specially abled child (M=92.875) was higher than that of parents of normal child (M=81.605).

Table 1: Average Resilience Scores of Parents of Normal and Parents of Specially Abled Child and Obtained t ratio

Comparison Group	n	M	$\sum x^2$	Obtained t ratio	Level of Significance
Parents of Normal Child	120	81.605	27110.06		
Vs				11.34	P<0.01
Parents of Specially Abled Child	120	92.875	29554.04		

The obtained significant t ratio (t=11.34, p< 0.01, df= 239) provided sound statistical ground to conclude that parents of specially abled child were truly more resilient than parents of normal child.

The findings of the present study are in consonance to those of Margalit & Ankonina (1991), Valentine et al. (1998), Watson et al. (1999), Fredrickson (2001), Fredrickson & Joiner (2002), Hastings et al. (2002), Kausar et al. (2003), Folkman & Moskowitz (2004), Greer et al. (2006), Esdaile (2009), Emerson et al. (2012), Park (2011, 2013) and Beighton & Wills (2017).

Margalit & Ankonina, (1991) explained that positive effect of stressful events in life indicated towards effective coping and adjustment of parents of specially abled child. Margalit & Ankonina (1991) found that parents of children with disabilities differed from parents of children with disabilities differed from parents of children without disabilities in their negative affect but not in their positive affect, calling attention to latter's protective role in well-being. Watson et al. (1999) also assert that positive and negative emotions have different impacts on processing. Fredrickson & Joiner (2002) argue that negative emotional narrow people's thought – action repertoires (e.g., fight or flight). In contrast, positive emotions broaden people's thought – action repertoires in terms of their global attention and information processing. This expansion encourages the discovery of novel lines of thought or action, enables more flexible and creative thinking, predicts the use of broadly conceived coping strategies, creates a spiral toward improved well-being and resilience, and builds psychological resources and a coping arsenal for handling future adversities.

Many researches have emphasized the role coping strategies as mediators of potential stress-related responses that affect well-being, behaviour, and adjustment (Lazarus, 1999). Coping strategies refer to both cognitive and behavioural efforts used to manage specific external and internal demands that tax an individual's resources (Lazarus, 1999; Folkman & Moskowitz, 2004). Finding of the present research indicates that parents of specially abled child used active coping strategies such as information seeking and problem-solving. In the advanced knowledge era, it has become quite easy for parents of specially abled child to seek information and help from experts in the field to get their problems solved which they face in their daily lives.

Parents' sense of coherence is also important to understand their coping with stressors (Margalit, 1994; Oelofsen & Richardson, 2006; and Al-Yagon & Margalit, 2009). Sense of coherence comprises

the core variable within health model of Antonovsky (1979, 1987). He termed it as salutogenesis in contrast to pathogenesis. He assumed that the human environment produced stressors that might arise from genetic personal, social, cultural, or other sources. Sense of coherence is defined as a global orientation that expresses the extent to which an individual has a pervasive, enduring, though dynamic, feeling of confidence that (i) the stimuli deriving from one's internal and external environments are structured, predictable, and explicable; (ii) resources are available to meet the demands posed by these stimuli; and (iii) these demands are challenges worthy of investment and engagement. Studies of Antonovsky & Sagy (1986), Hart et al. (2006) and of Marsh et al. (2007) underscored that sense of coherence of individuals was indicator of resilience. Greef & Van Der Merwe (2004) and Lindstrom & Erikson (2005) also assert that sense of coherence highlights personal strength with unique value at times of crisis and distress and helps in high resilience. The finding of the present research indicates that the parents of specially abled child might have higher sense of coherence that lead them to be more resilient in comparison to parents of normal child.

Knowledge about parents' perceptions concerning the future may extend the understanding of their coping, well-being and resilience. The construct of hope is composed of goal identification, pathway thinking, that is the perceived capacity to generate strategies for attaining goals, and agency thinking, that is, perceptions involving one's capacity to initiate and sustain movement along the chosen goal (Snyder, 2000, 2006; Snyder et al., 2000; and Snyder et al., 2004). Irving et al. (2004) and Parveen & James (2007) observed positive association between individuals' degree of hope and their effective coping in a variety of stressful situations and thus showing resilience effect. It seems that the parents of specially abled child, in the present research, had high degree of hope to cope with daily stresses pertaining to rearing a specially abled child and about their future which ultimately led them to be resilient. Folkman & Moskowitz (2004) observed that joy, hope, and pride were the most common terms used by parents of specially abled child to describe their child and were examples of discrete positive emotions which counteract the physiological effects of negative emotions and facilitate adaptive coping. Fredrickson (2001) asserts that this fuels psychological resiliency. Kausar et al. (2003) believed that the parents could be filled with 'hope' that their child would one day be able to achieve certain goals and hope in families of children with intellectual disabilities. This has been described as 'a complex intangible in the heading and coping process. Beighton & Wills (2017) found that every parent in their study spoke about feelings of love for their child and how proud they were when their child achieved something unexpected. Reporting that their child had made a positive impact on others could be recognition to parents that their child has finally been 'accepted' leading them to feel a greater sense of social connectedness and belonging (Esdaile, 2009) and potentially contributing to the development of an extended social support system for their child, should it be needed (Valentine et al., 1998).

The quality of functioning of the family adds an important perspective to the understanding of well-being of parents, specially of mothers (Patterson, 2002; and Kersh et al., 2006). Cohesion refers to the extent of connection, closeness, and involvement between the family members. Adaptability reflects the ability to family system to change as an adaptation to developmental and external pressures (Olson et al., 1985). Margalit (1994) and Dyson (2003) reported significant differences on these parameters between families of disabled children and those of children with typical development. The finding of the present research too revealed this difference in favour of parents of specially abled child and indicates that there would have been higher cohesion and adaptability in family of specially abled children, inculcated just due to their presence only.

Beighton & Wills (2017) observed that parents, thought acknowledging the stress of raising their child with intellectual disabilities, and reported that their child had brought about many positive changes in themselves and family. They identified seven key themes which enabled parents adapt successfully to the stressful experiences of raising their specially abled child. These themes were: (i)

an increased sense of personal strength and confidence, (ii) changed priorities, (iii) grater appreciation of life, (iv) pleasure in the child's accomplishments, (v) increased faith/spirituality, (vi) more meaningful relationships, and (vii) the positive effect that the child has on the wider community. This also made amendable to meaning-focused therapeutic interventions for such parents to enhance their resiliency. Emerson et al. (2012) reported that parents of children with intellectual disability spent the longest time as carers and this had shown to impact their well-being positively as these parents perceived positive aspects of rearing an intellectually disabled child. Park & Folkman (1997) and Hastings et al. (2002) posited that parents were not actually identifying positive aspects of parenting their child per se, but the positives they describe were adaptive coping mechanisms in which they engaged in positive reframing, one of the common component of meaning focused coping.

The transactional model of stress and coping (Lazarus & Folkman, 1987; and Park, 2013) highlights the cognitive and emotional aspects of the person experiencing the stress with the appraisal and coping process central to this model which includes 'positive psychological states' which are the result of meaning-focused coping strategies that involve searching for 'a more favourable, understanding of the situation and its implications' (Park, 2013). Within meaning-focused coping, positive reappraisal is the most commonly used strategy. Positive reappraisal is a way of viewing and experiencing the stressful events, ideas, concepts, and emotions in order to find more positive alternatives (Troy et al, 2010; and Hill Rice, 2012). Hastings et al. (2012) also found that positive reappraisal was a significant independent predictor. 'Meaning' is described as making sense, order out of one's existence (Reker et al., 1987). Meaning- focused coping assumes that individual experience stress when they perceive discrepancies between their appraised meaning of a particular situation (Degree of threat, harm, controllability and implications) and their global meaning (fundamental assumptions of life, values, goals, beliefs, desires) (Park & Folkman, 1997; Grant et al, 2007; and Peer & Hilman, 2014). For example, most parents of specially abled child assume that their child will be healthy and follow a normal developmental pattern and the diagnosis of intellectual disability is likely to violate their beliefs about the fairness of why this has happened to them. Most will be faced with how to resolve the incongruence between their global and appraised meaning. This will require them to re-evaluate their hoped-for-future life goals, plans, and priorities, and this incongruence may be changed by searching for a more favourable understanding of the situation, reducing the mismatch between situational and global meaning (Park, 2013). Peer & Hillman (2014) also identified three empirically supported resilience factors: dispositional optimism, problem-focused coping (including positive reappraisal), and social support. Dispositional optimism is the tendency to look for the positive and expect positive outcomes when confronting problem in life. Problem-focused coping involves altering internal and external situational demands and (planful) problem-solving to prevent a stressful situation from recurring. Social support may be enacted or perceived and formal or informal. McConnel & Savage (2015) also argued to consider the 'adaptation of families', and not merely 'family adaptation' to caring for a child with intellectual disability. The findings of the present research also indicate that parents of specially abled child might have used meaning-focused coping and hence were found more resilient than parents of normal child who did not face such intense stressful situation and were not forced to search specific meaning of their existence as the incongruence between appraised and global meaning was minimal. Park (2011) reported that resilient parents of specially abled child also used other strategies of meaning-focused coping which included benefit reminding (making an intentional effort to recall previously found benefits), adaptive goal processes (revising goals and planning goal-directed problem-focused coping that fosters meaning in terms of purpose and control), reordering of priorities (value-based) process where aspect of life move up or down the priority ladder), and activating spiritual beliefs and experiences through which individuals found existential meaning leading to resiliency.

All these findings of the present research clearly highlight higher resilience of parents of specially abled child than parents of normal child.

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