
Stress Experienced by Parents of Children Diagnosed with a Learning Disability- A Study

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Received: 10-August-2022
Revised: 20-October-2022
Accepted: 25-November-2022

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Abstract

Parental stress is experienced by children's parents with learning disabilities such as Down syndrome as well as Intellectual Disabilities as a result of adjusting to and managing with their children's problems. Despite the fact that millions of people encounter learning difficulties every moment, there is a widespread uncertainty and disinformation about the nature and influence of learning disability. Inadequate knowledge regarding learning disability increases the danger of stigma, as well as the chance of diminished expectations as well as missed opportunities in school, the workplace, and the community. Recent research has found that children's parents with neuro disabilities suffer more parental stress than parents of normally developing children, although the relationship between the type of condition and parenting stress is unclear. This study aims to compare mean scores of the parental distress level among children parents with learning disabilities & difficult child level among children's parents with learning disabilities.

Keywords: Stress, Parents, Children Disability (CD), Disorders, Learning Disability (LD)

Introduction

A person's capacity to receive, store, process, retrieve, or convey knowledge can be negatively impacted by learning disorders, which are caused by neurological variations in the structure and function of the brain. Even though the precise basis of these brain-based illnesses is not yet fully known, significant strides also been made possible by the discovery that LD, ADHD, and other similar illnesses occur with a high incidence among members of the same families. It is also possible for learning disabilities to be the result of insults to the developing brain before or during birth. Postnatal occurrences that may contribute to the development of LD include traumatic injuries, acute malnutrition, or exposure to toxic compounds like lead. However, there is a higher reported occurrence of learning disabilities between some of people who are living in poverty. Individuals that struggle academically have a real and persistent problem. However, there are some persons who struggle with reading, arithmetic, written language, and comprehension their entire lives but are never diagnosed with a learning disability. It is not uncommon for adults to receive a diagnosis of a learning disability. Many individuals with LD experience low self-esteem, low aspirations for themselves, difficulties with underachievement & underemployment, social isolation, and legal problems at a higher rate than their non-LD peers. Perhaps the most accurate definition of learning disabilities is as follows: unexpected, significant problems in educational excellence and related areas of learning & behaviour. If children are identified as being at risk for learning disabilities at an early age, they can avoid years of hardship and uncertainty about themselves. Adolescents with

LD who take the time to learn about their condition, realise that their disability is not who they are rather what they have, and plan for the resources, accommodations, including supports that will help them succeed will grow up to be productive, self-reliant adults. This will aid them in understanding the unique characteristics of their LD.

According to Liles et al. (2012), the term "parenting stress" refers to a negative reaction occurs most frequently when the responsibilities of being a parent do not match up with the resources that are thought to be available to the parent. There is a possibility that every parent may suffer some level of stress associated with parenting, but prolonged exposure to high levels of parenting stress may have major adverse impacts on both the mental health of the parent and the family as a whole. According to a number of hypotheses, the level of anxietal stress experienced by parents is the product of multiple factors, including those that are innate to the kid, the parents, the family, and the environment, all of which interact with one another and contribute to the final result.

Common Types of Learning Disabilities

Reading, mathematics, and the ability to express oneself in writing are typically the most severely affected aspects in a person's life when they have a specific learning disability. It is possible for them to co-occur with other impairments of attention, language, and behaviour; nonetheless, the ways in which they affect learning are separate from one another.

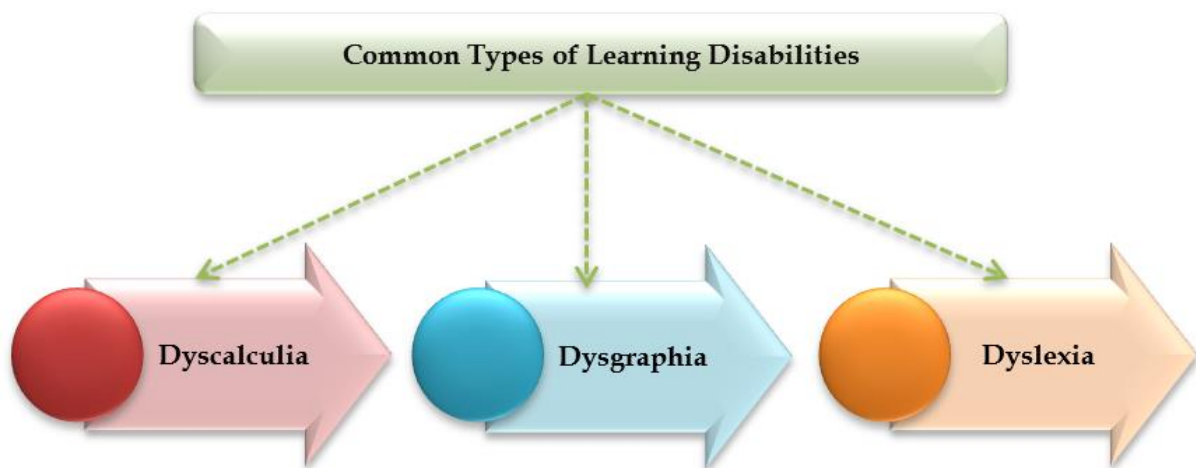


Figure 1: Researcher Self-Prepared

Associated Deficits and Disorders

LD is commonly linked to several subfields, although these domains are not recognised as distinct subtypes of LD themselves. Inadequacies in a person's capacity to receive information, process that information, associate it with other pieces of information, retrieve that knowledge, and articulate it can frequently help explain why that individual struggles with learning & performance. Frustration, low self-esteem, and social disengagement can result from a failure to process information efficiently. In order to provide effective education and support to those with Learning disability & ADHD, it is important to understand how they are impacted by these areas of weakness. The precise nature of these issues and their impact are being elucidated by ongoing research.

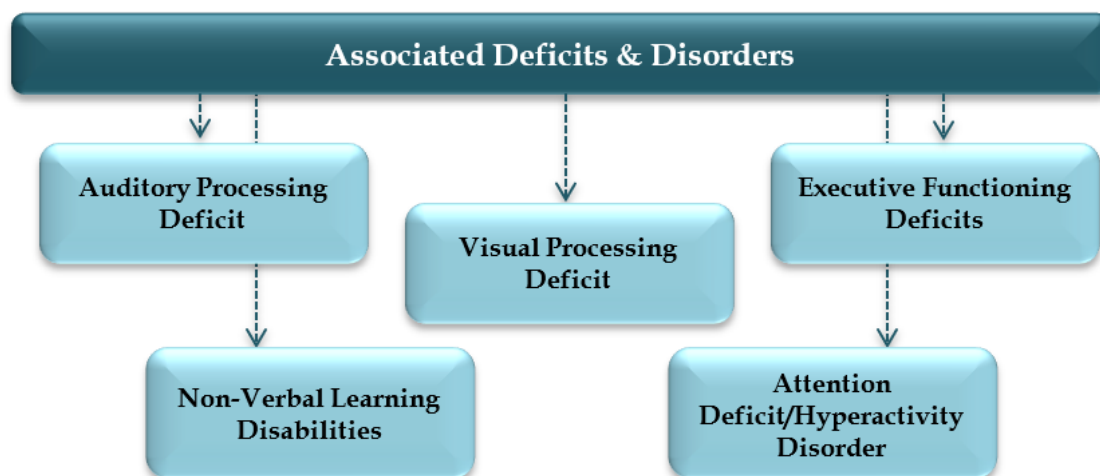


Figure 2: Researcher Self-Prepared

REVIEW LITERATURE

Numerous studies have been carried out, and the results of these studies indicate that more psychological based support has been provided for the children who are affected by the disorder. On the other hand, parents normally not receiving sufficient support in the form of emotional & psychological type of support from the moment they learn about their children's diagnosis. (Bohon, 2019). Parents are frequently concerned and anxious about the sheer volume of caring responsibilities that require a significant amount of time, effort, and work. In addition, parents are expected to be available the majority of the time in order to meet the requirements of their children on a daily basis, which can have repercussions for their professional lives (Bahry et al., 2019).

According to "Abiddin", the term "difficult child" refers to the behavioural qualities of a child that determine how easy or difficult it is to handle that child. In the meantime, the sub-scale of DC in the Parental Stress Index Instrument reflects to the perceptions of the parents regarding how tough or easy their child is. (Baqutayan et al. 2015). One of the factors that frequently adds to a parent's stress is the child's behaviour, particularly in the case of children who have special needs such as autism spectrum disorder (ASD). Children with these traits often have difficulties with adaptation and everyday functioning, requiring their caregivers to put in more time and effort to help their children with things like getting dressed, eating, and maintaining personal cleanliness. For families whose children have autism spectrum disorders, this can be an especially trying time (Hoagwood et al. 2010). Having trouble falling asleep and waking up several times during the night are both symptoms of insomnia, which is more common in children with learning challenges. This can cause their parents to experience extreme exhaustion as a result of the responsibility of caring for them (Goodlin-Jones et al., 2008).

Many studies have also demonstrated that the stress levels mainly experienced by parents who have children having mental disorders are higher than the levels experienced by parents whose children have normal development "(Delambo et al., 2013)". This is because of the fact that having a kid with a high disability requires a greater amount of work and involvement on the part of the parents, such as a commitment to ongoing therapies and medical treatments over a longer time period. This can continue until the kid reaches the stages of adolescence and adulthood, during which the effects of stress become significantly more significant. When taken together, these factors could produce an ongoing source of stress that leads to disorder and conflict within the family.

In addition, research has shown that families who have children or other family members who suffer from mental illness are more likely to have poor parenting skills or problems with socialisation and discipline. Because of this, many parents are still hesitant to take their children to a specialist for help with their behavioural issues. It has been a major tenet of 20th century philosophy to blame parents for their children's mental health problems (Holmes, 2003). In addition, many times the parents of a family will conceal their child's mental disease in order to spare the family's disgrace (Akbarzadeh, 2015). According to the findings of a number of studies, both mothers & fathers experience distinct aspects of the behaviour and actions of their children, which are the factors

that generate stress. (Honig et al. 2004). It is also widely reported that mothers' stress is tied both to children's problematic behaviours and to dads' mental health, although fathers' stress levels or ratings are frequently not associated altogether any stressors. This is a common occurrence “(Hastings et al., 2005)”. According to the findings of a study that was carried out by (Gray 2003) on families who had children diagnosed with autism, it was found that parents were influenced in different ways and to varying degrees depending on the severity of their child's illness. In addition to this, men have asserted that their kid's health does not have as much of an impact on them as it does on mothers. However, the stress that fathers experience is frequently the result of the impact of watching their wives deal with the stress while caring for their child (Kamaruddin & Mamat, 2015).

OBJECTIVES OF THE STUDY

- To compare mean scores of the parental distress level among children parents with learning disabilities.
- To compare mean scores of difficult child level among children’s parents with learning disabilities.

HYPOTHESES OF THE STUDY

H1 There is no significant differences in mean scores of the Parental Distress level (PDL) among Children Parents with Learning Disabilities.

H2 There is no significant differences in mean scores between Difficult Child Level (DCL) among Parents of Children with Learning Disabilities.

RESEARCH METHODOLOGY

- **Approach:** Approach was quantitative and Probability sampling method was implemented in this research and respondents among parents of children with learning disabilities.
- **Sample and Sampling Technique:** The sample constituted & identified two mentally challenged schools by using stratified sampling technique from Delhi-NCR.
- **Sample Categorization:**
The sample has been categorized according to the difficult child level (DCL) & parent distress level (PDL). The sample has been categorized according to the parent’s stress of the study of learning disability.
- **Research Tool:** A structured questionnaire was used to collect the relevant data.
- **Statistical Techniques:** The mean, the standard deviation, and the t-test were the types of statistical analysis that were performed for this study. For the purpose of data analysis and interpretation, the “Statistical Package for the Social Sciences (SPSS)” was utilised.

DATA ANALYSIS AND INTERPRETATION

Normality of the Data

Table 1: Descriptive Measures to find the Normal Distribution

N	Mean	SD	Std. Error of Mean	Sk	Std. Error Sk	Z-value of Sk	Ku	Std. Error Ku	Z-value of Ku
80	105.44	12.39	1.024	0.127	0.106	1.40	-0.251	0.211	-1.42

For data normality, the z-value should be within the range of ± 1.96 (M & M, 2002). In the present study, the z-values of “skewness (Sk) & kurtosis (Ku)” are in the accepted range, as shown in table (1).

Null Hypothesis 1: There is no significant differences in mean scores of the Parental Distress level (PDL) among Children’s Parents with Learning Disabilities.

Table 2: Comparison of Parental Distress level (PDL) among Children Parents with Learning Disabilities.

Groups	N	Mean	SD	t-Value	d	Sig.	Remark
PDL	80	175.72	21.750	1.658	0.24	0.076	NS
DCL	80	160.64	20.046				

NS: Not Significant

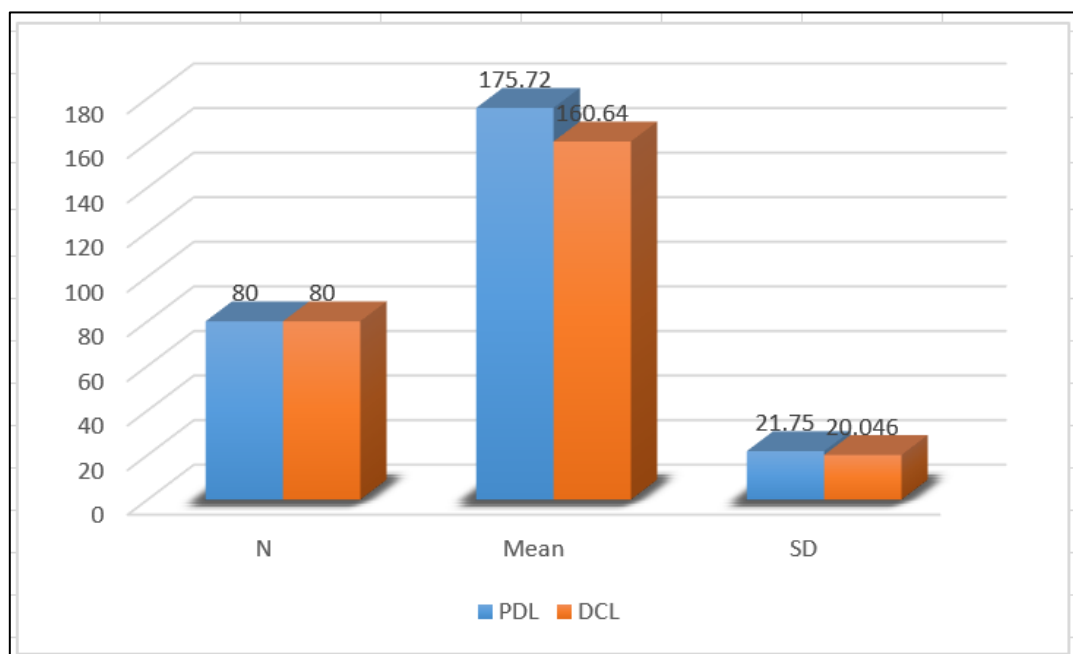


Figure : Mean & S.D. Values of PDL & DCL

The result of the independent t-test (table 2) indicates that PDL ($M = 175.72$, $SD = 21.750$) and DCL ($M = 160.64$, $SD = 20.046$) do not differ significantly in stress, $t = 1.658$, $p > 0.05$ level of significance. It is observed that the t-value is not significant at 0.05 level of significance. Both PDL & DCL do not differ significantly in stress levels. Thus, the null hypothesis (1), “There is no significant differences in mean scores of the Parental Distress level (PDL) among Children Parents with Learning Disabilities.” is not rejected.

Null Hypothesis 2: There is no significant differences in mean scores between Difficult Child Level (DCL) among children’s parents with Learning Disabilities

Table 3: Comparison of Difficult Child Level (DCL) Among Children’s Parents with Learning Disabilities

Groups	N	Mean	SD	t-Value	d	Sig.	Remark
PDL	80	174.27	14.029	1.283	0.101	0.022*	Sig.
DCL	80	180.04	17.194				

*Significant at 0.05 Level

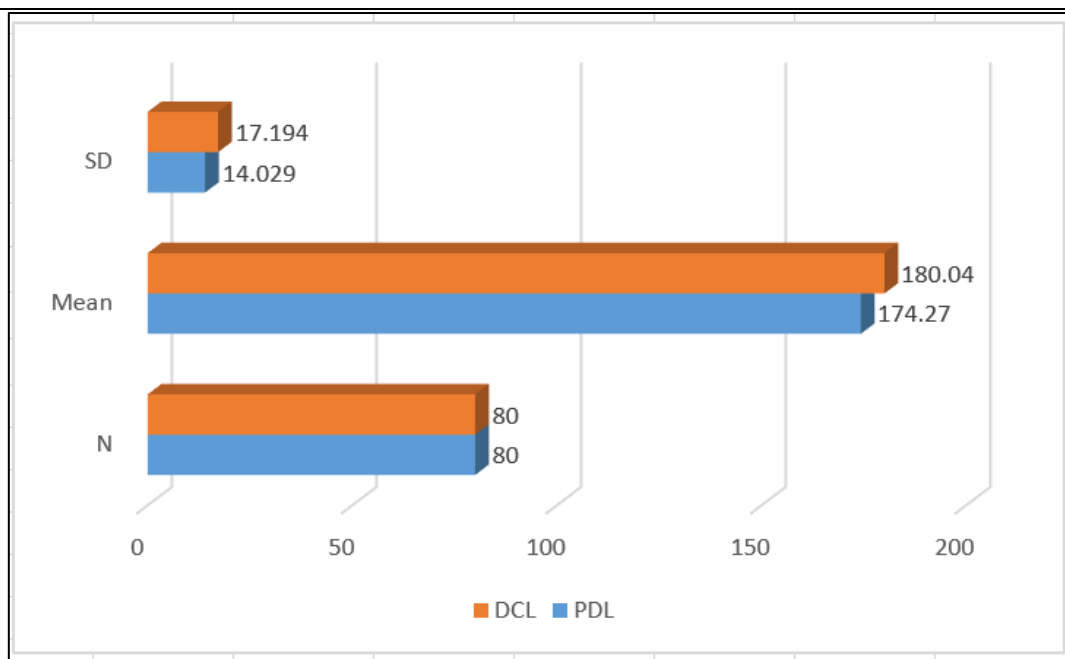


Figure : Mean & S.D. Values of PDL & DCL

Table (3) shows that the t-value (1.283) is significant at 0.05 level of significance. It indicates that the mean scores of Difficult Child Level (DCL) among children’s parents with Learning Disabilities differ significantly. PDL among children’s parents with learning disability (M = 174.27, SD = 14.029) and DCL among children’s parents with learning disability (M = 180.04, SD = 17.194) differ significantly in learning disability, $t = 1.283, p < 0.05$ level of significance. PDL found better in their stress than their counterparts of the DCL. Here, the effect size value ($d = 0.101$) indicates that the value of d is between 0.2 and 0.5, indicating a minor effect size. Therefore, the null hypothesis (2), i.e., “There is no significant differences in mean scores between Difficult Child Level (DCL) among Parents of Children with Learning Disabilities” is rejected.

Future Research

This study only covers parents from physically challenged schools in the Delhi-National Capital Region (NCR), hence the conclusion is that future researchers should broaden the scope of their samples to include additional states in India. In addition, in order to investigate a wider range of data variables, additional demographic characteristics, such as the age group of the parents and their socioeconomic standing, could be included in subsequent research. Concerning the direction that future research should go, it is recommended that studies be carried out on the policies and methods that might contribute to reducing the difficulties faced by parents, which will, in turn, reduce their levels of stress.

Conclusion

This study assessed the amount of parental stress among children’s parents with learning disabilities in Delhi-NCR. It consisted of a questionnaire of Parent Distress and Difficult Child, both of which showed that the majority of parents fall into the category of typical stress. The results of this research contribute to a deeper comprehension of the stress that is experienced by parents of children who have learning difficulties. It is imperative that appropriate policies and facilities be put into place in order to lend a hand to and lighten the load of families who are coping with impaired children. In addition to that, parenting classes and training that are fit and appropriate for parents of children with special needs should be made available to those parents. In general, it is unavoidable that the parent will experience stress, limited financial assistance, shortage of time, as well as emotional & physical tiredness; however, stress should be managed in an appropriate manner in order to avoid negative effects. As a result of the findings of the current research, it is imperative that programmes of ongoing education and counselling be made available to parents in order to improve their coping strategies with regard to

the care of their disabled children. These strategies can be improved by having parents talk about the challenges and requirements of their disabled children as well as the state of their own mental health.

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