



## **Parental Stress in Parents of Children with Learning Disabilities: A Limited Demographic Factors**

**Kamarulzaman Kamaruddin<sup>1\*</sup>, Che Anuar Che Abdullah<sup>2</sup>, Mohd Noor Idris<sup>3</sup>**

<sup>1</sup>Department of Educational Studies, Sultan Idris Education University, 35900 Tanjong Malim, Perak, Malaysia, <sup>2</sup>Department of Psychology and Counseling, Sultan Idris Education University, 35900 Tanjong Malim, Perak, Malaysia, <sup>3</sup>Department of Psychology and Counseling, Sultan Idris Education University, 35900 Tanjong Malim, Perak, Malaysia.

\*Email: [kamarulzaman@fppm.upsi.edu.my](mailto:kamarulzaman@fppm.upsi.edu.my)

### **ABSTRACT**

The main purpose of this study was to examine the level of stress among the parents of children with learning disabilities (LD children). The data were obtained from a survey using the perceived stress scale that involves 264 parents. The results revealed that a total of 99 (37.6%) parents experiencing stress at low level ( $M = 1.00-2.33$ ) and they were in the state of normal. Whilst 138 (52.3%) of the parents were suffering moderate level of stress ( $M = 2.34-3.66$ ) which is considered as mild. Furthermore, the analysis indicated that only 27 (10.1%) of them experienced high level of stress ( $M = 3.67-5.00$ ) which is classified as severe. The findings indicated that mothers of LD children was associated with higher stress and were significantly experienced more stress than fathers. In terms of ethnicity, the findings showed that Chinese parents are experiencing more stress than the Malay and Indian parents. Accordingly, parents of high socio-economic status (SES) were reported experiencing greater stress than parents of middle and low SES. In contrast to the findings on parents of different religious groups whereby they were at moderate level of stress and the result also showed that there is no significant difference between the Muslims, Christians, Buddhists and Hindus with regard to parenting stress.

**Keywords:** Stress, Learning Disabilities Children, Ethnic

**JEL Classifications:** C610, C623, I23

### **1. INTRODUCTION**

Learning disabilities (LD) refer to as having perceptual problems, minimal brain dysfunction, hyperactivity, attention deficits, information processing problems, dyslexia and developmental aphasia (Salend, 2010) According to National Joint Committee on Learning Disabilities (2001) the disabilities may occur in tandem with other disability such as sensory impairment, mental retardation, social and emotional disorder or due to environmental factors. Nevertheless, the Malaysian Ministry of Education has classified the LD children as those who are experiencing mild and moderate disabilities and thus they should be given the opportunity to receive education in mainstream school and enrolled in inclusive programs (Saad et al., 2014). Several studies in the United States reported that parents of LD children experience stress at a high level (Lopez, 2008). Therefore, this problem needs to be addressed

because of excessive stress can lead to health problems. Several past studies show that stress can cause the risk of strokes, heart attacks, ulcers, and mental disorders (Dervishalija, 2013).

Malaysia is a multiracial country in which every of them practicing their own way of life. In Peninsular Malaysia, the most populous ethnic groups are Malay, Chinese, Indian and numerous indigenous people. The majority Malays are Muslim, while the Chinese are Buddhists and the Indians are Hindus. Most probably, the difference way of life among the ethnic groups affect the level of stress among them. In addition, the Malaysian society is characterized by a variety of socio-economic status (SES). This scenario may also affect the level of stress among the parents of LD children. Therefore, this paper would like to present the results of a study with the assumption of demographic differences among the parents of LD children may affect their level of stress.

## 2. EFFICIENCY AND EFFECTIVENESS

The research design for this study was a cross-sectional study and it was conducted at the rehabilitation centers and school that provides inclusive program in the state of Perak. Perak is one of the states in Peninsular Malaysia in which the population is multi-ethnic composition. The study involved 264 parents of LD children from various backgrounds were chosen for the study. Perak was chosen due to its multi-ethnic and multi-cultural population which comprises the main ethnic groups of Malays, Chinese and Indians. The population also is a multi-religious population comprises of Islam, Buddhism, Christianity and Hinduism. In addition, this study also took into account the differences in SES in Malaysian society.

The instrument used to assess the level of stress was adapted from perceived stress scale and it was validated by the experts in the field of educational psychology (Cohen et al., 1991). The Bahasa Malaysia version of the instrument was given to the respondents. The response format for the questionnaire was strongly agreed (SA), Agreed (A), Uncertain (U), Disagreed (D) and strongly disagreed (SD). Based on the mean score, the researcher developed interpretation to classify the level of high ( $M = 3.67-5.00$ ), moderate ( $M = 2.34-3.66$ ) and low ( $M = 1.00-2.33$ ).

For the purpose of data collection, parents were interviewed and they were ask to provide demographic information such as pertaining to ethnic, religious practices, household income, parental education while the items contained in the questionnaire were asked indirectly.

## 3. RESULTS

### 3.1. The Level of Parental Stress

Table 1 shows the level of parental stress based on response of respondents involved. The analysis indicated that a total 21 (10.1%) parents experiencing stress at high level ( $M = 3.67-5.00$ ) and they are in the state of unfavorable. Whilst 52 (47.3%) parents of LD children were suffering moderate level of stress ( $M = 2.34-3.66$ ) and it can be considered as mild level of stress. Furthermore, the analysis also indicated that a total 37 (33.6%) of the respondents experienced a low level of stress, and they can be classified as normal.

### 3.2. Parental Stress Based on Gender

Table 2 shows the level of stress among the parents based on gender. As can be seen in the analysis, 71.4% mothers are in the score of high level of stress compared to 28.6% fathers. However at the low level of stress, the result shows that there were only 35.1% parents are mothers compared to fathers (64.9%). Thus, these findings demonstrate that mothers of LD children experiencing higher stress than their fathers. Accordingly, the result of t-test ( $t = 6.254$ ) shows that there is significant difference with regard to stress between mothers and fathers of LD children at ( $P < 0.01$ ).

### 3.3. Parental Stress Based on Ethnic Groups

Table 3 demonstrates the mean stress scores between parents of various ethnic groups in Malaysia. The result shows that the mean score of Malay parents is 2.27 and it indicates that they are at the low level of stress. While the mean score of Indian parents is 2.35

**Table 1: Level of stress according to number of respondents and percentage**

Variable	Level of stress	Range (mean score)	Number of respondents (%)
Stress among the parents	Low	1.00-2.33	99 (37.6)
	Moderate	2.34-3.66	138 (52.3)
	High	3.67-5.00	27 (10.1)

**Table 2: Distribution of score and t-test analysis**

Groups	Range of mean score			Mean difference	
	1.00-2.33	34-3.66	3.67-5.00	t value	P value
Mother n=129 (%)	13 (35.1)	34 (65.4)	15 (71.4)	6.254	0.000**
Father n=135 (%)	24 (64.9)	18 (34.6)	6 (28.6)		

\*\*The means difference is significance at 0.01

**Table 3: The result of ANOVA and Bonferroni test of ethnic groups on parental stress**

Ethnic groups		Ethnic groups			
		Malay parents	Chinese parents	Indian parents	
		N=122	N=77	N=65	
		Mean=2.27	Mean=3.67	Mean=2.35	
Ethnic		Mean difference		Variance analysis	
		t value	P value	F value	P value
Malays	Chinese	6.254	0.000**	2.065	0.070
Malays	Indians	1.834	0.069		
Chinese	Indians	-2.927	0.004**		

\*\*The means difference is significance at 0.01

which indicate that the parents were at moderate level of stress. Meanwhile, the mean score for Chinese parents is 3.67 and it shows that the parents are experiencing high levels of stress. As a whole, this situation shows the Chinese parents are experiencing more stress than the Malay and Indian parents. To determine the difference parental stress between the ethnic groups, the researcher employed Bonferonni test and one-way ANOVA. The result shows that there is significant difference between Malay and Chinese parents with regard to parenting stress. This situation also happened between Indian and Chinese parents. However, the findings showed there is no significant difference between Malay and Indian parents in terms of parenting stress. Nevertheless, the overview of the whole situation can be seen in the result of ANOVA ( $F = 0.065$ ) which indicates there is no significant difference at ( $P < 0.05$ ) between the ethnic groups with regard to parenting stress.

### 3.4. Parental Stress Based on Religious Groups

Table 4 shows the result of ANOVA and Bonferroni test of religious groups with regard to parental stress. The result indicates that stress at moderate level among Muslim parents ( $M = 2.37$ ), Christian parents ( $M = 2.43$ ), Buddhist parents ( $M = 2.39$ ) and Hindu parents ( $M = 2.38$ ). Meanwhile, the result of ANOVA ( $F = 2.065$ ) shows that there is significant difference at ( $P < 0.05$ ) between the religious groups with regard to parenting stress.

### 3.5. Parental Stress Based on SES

Saifi and Mehmood (2011) defines SES as an economic and sociological combined total measure of a person's work experience

**Table 4: The result of ANOVA and Bonferroni test of religious groups on parental stress**

Religious groups	Muslim parents	Christian parents	Buddhist parents	Hindu parents
	N=129	N=27	N=57	N=51
	Mean=2.37	Mean=2.43	Mean=2.39	Mean=2.38

  

Group	Mean difference		Variance analysis		
	t value	P value	F value	P value	
Muslims	Christians	-1.542	0.124	1.435	0.223**
Muslims	Buddhists	-1.214	0.226		
Muslims	Hindus	-1.062	0.286		
Christians	Buddhists	1.825	0.069		
Christians	Hindus	1.824	0.069		
Buddhists	Hindus	1.834	0.068		

\*\*The means difference is significance at 0.01

and an individual's or family's economic and social position in relation to others based on income, education, and occupation. It also has a strong impact on parental involvement compared to other factors. Marks et al. (2000) noted that SES is typically classified into three categories, namely high SES, middle SES, and low SES which indicate the three areas for a family or an individual may fall into. Table 5 demonstrates the mean stress scores between parents from various SES groups. The result shows that the mean score of parent from high SES group is 3.69 and therefore it indicates that they are experiencing high level of stress. While the mean score of the parent from middle SES group is 2.33 which indicates that they are at moderate level of stress. Meanwhile, the mean score of the parent from low SES group is 2.13 and it shows that the parents are at low levels of stress. As a whole, this situation shows that the parents from high SES group are experiencing more stress than the middle and low SES group. To determine the difference of parental stress between the SES groups, Bonferonni test and one way ANOVA were employed. The result shows that there is significant difference between high SES and middle SES group with regard to parenting stress. This situation also happened between high SES and low SES group in terms of parenting stress. However, the findings showed there is no significant difference between groups of parents from middle and low SES. Nevertheless, the overview of the whole situation can be seen in the result of ANOVA ( $F = 11.828$ ) which indicates there is significant difference at ( $P < 0.05$ ) between parents of various groups with regard to parenting stress.

#### 4. DISCUSSION

The findings of this study emphasize the importance of looking more closely at the level of stress of the parents of LD children in relation to their demographic background. Although the findings show the number of parents of LD children who experience high levels of stress is very small, but this matter needs to be addressed because it interferes the well-being not only parents but also their families. Furthermore, as suggested by Lopez (2008) those with high psychological stress is associated with high blood pressure, higher body mass index, larger waist to hip ratio, shorter telomere length, higher cortisol levels, suppressed immune function, decreased sleep, and at risk of alcohol consumption. The high level of stress or mental health problems experienced by parents of LD children could be related to subjective factors such as feeling social isolation and life dissatisfaction (Dervishalija, 2013). The

**Table 5: The result of ANOVA and Bonferroni test of SES on parental stress**

Ethnic groups	SES groups		
	High SES	Middle SES	Low SES
	N=42	N=134	N=88
	Mean=3.69	Mean=2.33	Mean=2.13

  

SES	Mean difference		Variance analysis		
	t value	P value	F value	P value	
High	Middle	2.834	0.048		
High	Low	6.254	0.000	11.828	0.001**
Middle	Low	1.144	0.254		

\*\*The means difference is significance at 0.01 SES: Socio-economic status

findings of this study is similar to a study done by Dervishalija (2013) on families who has LD children whereby parents faced many challenges such as repeated physical and emotional crises, interactive family issues, ruined schedules, and additional expenses, which can create financial burden and emotional distress for a family. Having a child with LD often requires a reorientation and reevaluation of family goals, responsibilities and relationships.

Nevertheless, small amount of stress may be necessary, beneficial, and even healthy (Nevid et al., 2010). It is considered as positive stress or eustress and it will help to improve psychological well-being. It also plays a factor in motivation, adaptation, and reaction to the environment. Therefore, those with low and average level of stress are described as positive stress or eustress. In this study, a total of 52.3% parents of LD children were suffering moderate level of stress and 37.6% of them experienced low levels of stress. Therefore, this situation gives the impression that a positive stress experienced by the parents of LD children in Malaysian society.

Referring to previous studies, this study proves the level of stress of mothers of LD children are the higher their fathers. The findings are supported by Hastings (2002); Oelofsen and Richardson (2006) and Gray (2003) stated that mothers experience a greater impact on their stress than fathers with the existence of disabled child in the family. Fathers claimed that their child's condition did not affect them personally as it did with their wives. According to Gray (2003) a study done by different levels of stress experienced by mothers and father may be explained by gender roles connected to work and child rearing. While mothers usually are more involved in child rearing, fathers are more into working harder in order to support their family's financial needs. There is difference between mothers and fathers in the coping strategies they use. Probably,

fathers tend to suppress their feelings, or to avoid them by working until late or staying away from home, mothers tend to vent their feelings. Mothers tend to experience a wider range of feelings (from grief, sadness, anger and crying) and talk more about their emotional distress with others. Mothers are found to be more stigmatized by their child's disorder (Gray, 2003). Accordingly, mothers appear to be more vulnerable to the stress associated with child's behavioral problems (Lopez et al., 2008). Since mothers are more under pressure to balance child care needs and household chores, physical support from the family is reported as a relief (Gupta and Kaur, 2010). As typically fathers are the sole bread winners for their immediate and extended families, in Malaysian culture, having a child with LD can impose further financial pressures on fathers. Because of social stigma towards disabled, parents can feel shame and embarrassment in taking their child to social and family gatherings. This can lead to social isolation for the whole family, contributing to further stress.

Malaysia is a multi-ethnic country which comprises of three main groups in the country that is the Malays, who are majority Muslims in the country. The other two main racial groups are the Chinese, who are mostly Buddhists and the Indians, who are mainly Hindu. With regard to ethnicity, the findings revealed that the levels of stress among Chinese parents are greater than the Malay and Indian parents. This can be seen that the mean score of Chinese parents ( $M = 3.7$ ) compared to Malay parents ( $M = 2.27$ ) and Indian parents ( $M = 2.35$ ). The mean score also reflects that the level of stress among Chinese parents is high. Therefore, a significantly high proportion of Chinese parents had stress as compared to Malay and Indian parents.

However, this situation did not happen when we looked at the level of stress among parents of different religious beliefs. As can be seen the findings indicated that all of the groups are at the moderate level of stress whereby Muslim parents ( $M = 2.37$ ), Christian parents ( $M = 2.43$ ), Buddhist parents (2.39) and Hindu parents (2.38). Maybe a study done by Gupta et al. (2012) can support this situation whereby more than half of the respondents turned to God, mosques and temples for coping, after they had exhausted all avenues of treatment and were told by the physicians that there was "no hope" of a cure. Many researchers from India have reported that people often find relief in religious propitiation and surrender to the will of God when faced with intractable disease and disability (Farheen et al., 2008).

Among the SES groups the analysis shows that parents of high SES ( $M = 3.69$ ) dominated the high level of stress when compared to middle SES ( $M = 2.33$ ) and low SES ( $M = 2.13$ ) groups of parents. These findings seem to support the previous study done by Gupta et al., (2012) that parents who engaged in more lucrative and prestigious occupations had more stress than parents engaged in less prestigious and lucrative irrespective of their income occupations. In their role as parents, those who worked as professionals, managers and had small businesses experienced higher stress than those who worked as labor and clerks, due to impaired sense of competence, restrictions placed on other life roles, marital conflict, lack of social support and depression. These findings are in contrast to most published studies which report

higher stress among parents of low SES. Higher stress among parents who are engaged in a prestigious occupation may be due to the thwarting of their generally higher expectations of their children, higher perception of shame, frustration at not being able to restore the condition of the child and more restrictions on their social and professional activities (Duncan, et al., 1972).

## 5. CONCLUSION

Although this study was done in Perak but it gives an overview of what happened in other places in Malaysia. This is because the demographic characteristics of the whole country are not much different. This findings showed the number of parents of LD children who are experiencing high levels of stress are small, i.e. 10.1% only. In comparison between the parents in families of LD children, the findings indicated a high level of stress widely happened among mothers of LD children (71.4%) and fathers (28.6%) was even better. Nevertheless, this problem also needs to be addressed and should not be taken for granted in order to foster the well-being of the disadvantaged group. In addition, parents of high SES experienced more stress than parents of low SES. The findings also showed that there is no significant different in term of stress level between the ethnic groups (Malays, Chinese and Indians) and religious groups (Muslims, Christians, Buddhists and Hindus). However, according to Nevid et al. (2010) small amounts of stress may be necessary, beneficial, and even healthy. This emotional state is regarded as positive stress or eustress which will help to improve psychological well-being. In other words, there will be critical roles for parents in coping with their emotional stress. In addition, various parties especially the government agencies such as the Department of Special Education and Department of Social Welfare should provide and devise programs to help the parents by providing services such family counseling, coping skills and early intervention.

## ACKNOWLEDGMENTS

This research is funded by Malaysia Ministry of Higher Education under the Fundamental Research Grant Scheme (FRGS) with S/O Code 12179.

## REFERENCES

- Cohen, S., Tyrrell, D.A., Smith, A.P. (1991), Psychological stress and susceptibility to the common cold. *New England Journal of Medicine*, 325(9), 606-612.
- Dervishalijaj, E. (2013), Parental stress in families of children with disabilities: A literature review. *Journal of Educational and Social Research*, 3(7), 579.
- Duncan, O.D., Featherman, D.L., Duncan, B.D. (1972), *Socioeconomic Background and Achievement*. New York: Seminar Press.
- Farheen, A., Dixit, S., Bansal, S.B., Yesikar, V. (2008), Coping strategies in families with mentally retarded children. *Indian Journal for the Practicing Doctor*; 5: 11-12.
- Gray, D.E. (2003), Gender and coping: The parents of children with high functioning autism. *Social Science and Medicine*, 56(3), 631-642.
- Gupta, R.K., Kaur, H. (2010), Stress among parents of children with

- intellectual disability. *Asia Pacific Disability Rehabilitation Journal*, 21(2), 118-126.
- Gupta, V.B., Mehrotra, P., Mehrotra, N. (2012), Parental stress in raising a child with disabilities in India. *Disability, CBR and Inclusive Development*, 23(2), 41-52.
- Hastings, R.P. (2002), Parental stress and behaviour problems of children with developmental disability. *Journal of Intellectual and Developmental Disability*, 27(3), 149-160.
- Marks, G.N., McMillan, J., Jones, F.L., Ainley, J. (2000), The Measurement of Socioeconomic status for the Reporting of Nationally Comparable Outcomes of Schooling. Draft Report by the National Education Performance Monitoring Taskforce, Australian Council for Educational Research and Sociology Program, Research School of Social Sciences, Australian National University.
- National Joint Committee on Learning Disabilities (2001), In *Collective Perspectives on Issues Affecting Learning Disabilities*. Austin, TX: Pro-Ed. p39-53.
- Nevid, J. S., Rathus, S. A., Greene, B. (2010), *Abnormal Psychology in a Changing World*. 5<sup>th</sup> ed. Englewood Cliffs, NJ: Prentice-Hall, Inc.
- Lopez, V., Clifford, T., Minnes, P., Ouellette-Kuntz, H. (2008), Parental Stress and Coping in Families of Children With and Without Developmental Delays. *Journal of Developmental Disabilities*, 14 (2), 99-104.
- Oelofsen, N., Richardson, P. (2006), Sense of coherence and parenting stress in mothers and fathers of preschool children with developmental disability. *Journal of Intellectual and developmental Disability*, 31(1), 1-12.
- Saad, S., Ismail, K., Hamid, S.R.A. (2014), Knowledge of learning disabilities among pre-service and in-service trainee teachers in malaysia. *IIUM Journal of Educational Studies*, 2(2), 22-39.
- Saifi, S., Mehmood, T. (2011), Effects of socioeconomic status on students achievement. *International Journal of Social Sciences and Education*, 1(2), 119-128.
- Salend, S.J. (2010), *Creating Inclusive Classrooms: Effective and Reflective Practices for All Students*. 7<sup>th</sup> ed. New York: Macmillan Publishing Company.