

Personality Factors as Related to Stresses among Parents of Mentally Sub-Normal Children.

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ABSTRACT- *The purpose of the present investigation was to study personality factors as related to stresses among parents of mentally sub-normal children. To measure the level of stress 30 item stress factor scale based on (Olley, Brieger and Olley, 1997) and for measuring personality, 16 Personality Factor Questionnaire Hindi adaptation by S.D.Kapoor (1970) was administered to 150 parents of mentally sub-normal children. Subjects were in the age range of 35 to 55 years and were residents of the city of Meerut. The high and low scorer on different factors of 16 PF were compared in respect of their stress level in 6 areas namely, hospital factors, disease factors, financial factors, familial factors, psychological factors. Result indicates that out of 16 personality factors 7 factors A, B, E, F, H, O and Q4 were found to be significant in contributing to stress level of the respondents. However a majority of personality factors like C,G,I,L,M,N,Q1, Q2 and Q3 were found to be insignificant in corroborating the stress level of the subject.*

Keywords- *stress, personality, coping style, parental reaction.*

I. Introduction

A child with mental retardation has a profound impact on the family. The condition may be apparent at birth or may become evident only with the passage of time. As parents recognize differences in the development of their child, their reaction can be highly variable. Denial is a common parental reaction, especially during the initial stage of adjustment. Parents may minimize the degree of disability or simply deny that any problem exists. They close their mind to their child limitations or explain their child's limitation by implying laziness, indifference, or lack of motivation. Denial can be both useless and destructive. It is useless because refusal to accept the reality of a child's disability does not make child's differences disappear. It is destructive because it impedes the child's necessary education and therapy. Parents may project blame for the child with mental retardation on the people they believe are responsible for their suffering. Common fears of parents are associated with having other children, loss of friends, a life time of care, and impact on the family unit. One more emotion that is very difficult to handle is guilt. Guilt is insidious and debilitating. Assuming blame does not eliminate the disability and intense feeling of guilt can erode parents positive self-concept. The negative emotions of parents in a state of guilt are extremely difficult to dispel. Sometime parents may choose to isolate themselves because of their feelings of shame and guilt. Parents may show rejection through strong underexpectations of achievement, unrealistic goals escape and reaction formation.

The parents of children with disabilities, including those with mental retardation, may need a great deal of additional support from society, friends, and other family members to find happiness that compensates for the frustrations and inconveniences of having a child (Knoll,1992; Turnbull and Turnbull,1985). The children may threaten the parent's self-esteem, feelings of self-worth, and dignity. Some individual view the parenting of healthy children as one of the main purpose of existence. For some parents, these feelings of failure and loss of self-worth are temporary, for others these emotions may last a life time. What can be said with certainty is that the process of adjustment for parents is continuous and distinctly individual (Hardman,Drew,Egan and Wolf 1996).

A number of studies about personality traits in parents of disabled children have also been carried out. Researchers have shown mothers of mentally retarded children compared to those of the normal children have generally lower health levels (Ahmadpanah, 2001), more stress (Dumas et al, 1991) and lower psychological well-being level. Ilai and Esmaeeli (2000) conducted a research under the title of examining the adaptability proportion of the parents of mentally retarded children with respect to stress making factors at mentally retarded schools in Sari. Results indicated there is a significant relationship between stress making factor and parents' demographic variables with the educational level, parents' professional status as well as marriage status, marriage duration, retarder children, age of retarded child, and the age of diagnosing the child's mental retardation. Narimani, et. al. (2007), did a research under the title of comparing the mental health level of the mentally retarded children mothers with that of the normal children mothers. Findings showed that there is generally a significant difference between the mental healths of the two groups of mothers.

According to Sloper and Turner (1993) mothers' higher levels of distress were associated with high neuroticism scores, mothers' not working, many unmet needs for help, and financial problems. Fathers' higher levels of distress were associated with high neuroticism scores, lack of a money and poor family relationships. Mothers' good adaptation to the children was associated with low use of wishful thinking as a coping strategy, high extraversion and low neuroticism scores, absence of child communication problems and few unmet needs for help with child- related problems. A related point is the possible theoretical confounding between measures, particularly neuroticism scores and psychological distress. The link between neuroticism and distress is well established and the mechanisms underlying this link have received considerable attention. A significant relationship was the positive association between scores and maternal adaption to the child. Positive effect of extraversion on the mother child relationship has been shown in many studies of personality stress and coping. When a child is diagnosed with disability, all the attention focused on helping the child. But parents also need assistance in coping with stress maturity with their emotions and also positive personality approaches are required to them. Parents of children with disabilities have very high level of parenting stress signifying that they perceived for more stress in their role as parents than did parents of children without disabilities, many studies highlighted the same aspect in their findings. Approximately 3 to 5 percentage of the population of children experience or get affected with physical, intellectual and mental health problems according to the National Health Survey in India and other Western countries. Stress and Emotional problems like depression are more common among the parents of children with disabilities which indirectly impose a significant burden on the society (Elgar et al, 2003, 2004). Depressive symptoms, stress and emotional pressure have been cited as having the highest disease burden of all health conditions in parents, impairing social and physical functioning and being associated with suicide, parental separation, divorce problems, increased health care costs, morbidity, crime rate increase, and mortality (World Health Organization, 2001). So keeping all these points in mind the focus of the present study is as follows.

Objective- To study high and low scorer on different factors of personality in terms of their stress score.

Hypothesis- The high and the low scorer on different of personality will differ significantly in terms of their score on stress scale.

Sample – The sample consist of 150 parents of mentally sub-normal children. For the purpose of study the sample of the parents of mentally sub-normal children was divided into two groups i.e. the high and low scorer (N=75 in each group).

II. Tools used in the study

Stress Scale- To measure the level of stress factor among the parents of mentally sub-normal children 30 item stress factor scale (based Olley, Brieger and Olley 1997), Hindi adaptation by Dr.A.C.Vashistha was used. The scale consists of 30- items with 3 alternative responses like, very stressful, moderately stressful and no stressful. Stress scores for 30 items were computed by awarding points to individual responses, 3 points for a very stressful item, 2 for moderately stressful, 1 point for nonstressful item and no points were given if the items were not applicable. This scale yielded six categories of stress situations.

Hospital Factors- Stressful situations that arise as a result of attending clinic and being on admission, including waiting for staff staff attitudes, blood transfusions, potential admissions, general routines and keeping appointments.

Disease Factors- aspects of the nature of the illness, including crises, other infections and the potential of death that were perceived as stressful.

Financial Factors- stress arising from the cost of treatment and home management, including transportation costs and the expense of feeding the child a good diet.

Familial Factors- social stress within the family arising from the illness including sibling rivalry, marital discord, lack of support from extended family members, and interference with domestic and economic activities.

Psychological Factors- stress resulting from the worries and concerns of the mother herself about the potential of having other children with such problem, fears of crises at inconvenient times and thinking about alternative treatments and hope for a cure.

Child factors- stress resulting from the performance and character of the affected child, including absence from school, poor growth and physical features of the disease, and the child's demands for certain foods and rejection of others.

Personality Questionnaire- 16 Personality Factor Questionnaire by Cattell and its Hindi adaptation by S.D.Kapoor was used for measuring personality. It contains 180 questions.

III. RESULT AND DISCUSSION-

Comparison of the high and low scorer on 16 personality factors in terms of their scores on stress scale.

Personality factors	Groups	N	Mean	S.D	t-test
A	High	75	57.6133	7.94	2.1607*
	low	75	60.3867	7.77	
B	High	75	57.5200	7.23	2.000*
	Low	75	60.0133	8.21	
C	High	75	58.7067	7.36	0.287
	Low	75	58.3333	8.88	
E	High	75	60.0133	8.17	2.008*
	Low	75	57.6533	7.43	
F	High	75	61.8400	7.84	3.646**
	Low	75	57.106	7.09	
G	High	75	58.22	7.24	1.073
	Low	75	59.62	7.99	
H	High	75	59.586	8.142	2.0625*
	Low	75	56.946	7.546	
I	High	75	59.00	7.30	0.212
	Low	75	58.74	7.50	
L	High	75	58.88	8.152	0.394
	Low	75	58.40	7.023	
M	High	75	59.80	6.83	1.95
	Low	75	57.36	8.54	
N	High	75	58.54	7.77	1.741
	Low	75	59.41	7.90	
O	High	75	61.45	7.83	2.189*
	Low	75	58.30	7.90	
Q1	High	75	59.0133	8.27	0.334
	Low	75	58.5733	7.56	
Q2	High	75	58.65	7.68	0.784
	Low	75	57.58	7.96	
Q3	High	75	58.92	6.92	0.150
	Low	75	58.74	7.68	
Q4	High	75	61.22	7.82	2.91*
	Low	75	57.61	7.41	

The objective of the present study was to know the stress level of the parents of sub-normal children high and low scorer on different factors of 16 personality factors to achieve this objective the two groups (high and low) were compared in respect of their score on all the 16 personality factors separately with the use of t-test.

It is evident from table-1 that low scorers, on Factor-A have scored significantly higher (Mean=60.3) on stress scale in comparison to their high scorer counterparts (Mean=57.61) the obtained t-value (t=2.16) between the two groups was also found to be significant beyond 0.05 level of confidence. It indicates that the persons with personality traits like reserve detached critical and cool traits have high level of stress whereas the person with personality traits like outgoing, warm hearted, easy-going have low level stress. Therefore, the findings as presented in table-1 support our hypothesis formulated in the present context.

It reveal in personality factor-B that low scorers, on factor B have score significantly higher (Mean=60.0138) on stress scale in comparison to their high scorer counterparts (Mean=57.520). the obtained t-value (t=2.000) between the two groups was also found to significant beyond 0.05 level of confidence. It indicate that the persons with personality traits like less intelligent, concrete thinking have high level of stress, whereas the persons with personality traits like more intelligent, abstract thinking, bright have low level of stress. Therefore the finding as presented support our hypothesis formulated in the present context.

It is evident from table-1 column-3 that high scorer on factor-C have score slightly higher (mean=58.7067) on stress scale in comparison to their counter parts (mean= 58.333) the obtained t-value (t=0.287) between the two groups was found to be insignificant even at 0.05 level of confidence. It indicates that the personality traits on facor C do not contribute significantly to the level of stresses among the subjects .

It is evident from table-1 column-4 that high scorers on factor- E have scored higher (mean=60.0133) on stress scale in comparison to their low scorer counterparts (mean=57.6533). the obtained t-value (t-2.008) between the two groups was also found to be significant beyond 0.05 level of confidence. It indicate that the person with personality traits like assertive independent, aggressive, competitive, stubborn have high level of stress whereas the person with personality traits like humble, mile , accommodating, conforming have low level of stress. Therefore the findings at presented support our hypothesis formulated in the present context.

It is clear from table-1 column-5 that high scorer on factor –F have scored a higher (mean-61.8400) on stress scale in comparison to the low scorer (mean- 57.106). The comparison between the two means for high scorer and low scorer subjects have yielded a t- value of 3.649, which was significant beyond 0.01 level of confidence. It indicate that persons with personality traits like cheerful, active, talkative, frank, and expressive have low level of stress whereas persons with personality traits like sober, prudent, serious, taciturn have high level of stress.

Factor-G consisted of traits like expedient, evades rules, feels few obligation, conscientious persevering, staid and rule bound. It is evident from table -1 column-6 that t-value (t-1.073) was not found to be significant at any level of confidence. It indicates that the personality traits on factor-G do not contribute significantly to the level of stress among the subjects.

It is clear from table-1 column-7 that high scorer on factor-H have scored higher (mean-59.5867) on stress scale in comparison to their low scorer counterparts (mean- 56.9467), the obtained t-value (t- 2.0625) between the two groups was also found to be significant beyond 0.05 level of confidence. It indicate that the person with personality traits like venturesome, socially bold, uninhibited and spontaneous have low level of stress on the other hand the persons have personality traits like shy restrained, diffident, timid and withdrawing have high level of stress. The finding of the present study is in expected direction and support our hypothesis formulated in the present context.

It is evident from table-1 column-8 that high scorer on factor I have score slightly higher (Mean=59.0000) on stress scale in comparison to their scorer counterparts (Mean=58.7467) the obtained t- value (t = 0.212) between the two groups was not found to be significant even at 0.05 level of confidence. It indicates that the personality traits on Factor I do not contribute significantly to the level of stress among the subject.

Factor L consisted of traits like trusting, adaptable, free of jealousy, easy to get on with, suspicious, self-opinionated and hard to cool. It is evident from table-1 column-9 that t-value (t-0.394) was not found to be significant at any level of confidence. . It indicates that the personality traits on factor-L do not contribute significantly to the level of stress among the subjects.

Factor –M consisted of traits like practical, careful, conventional, regulated by external realities, proper, imaginative, wrapper up in inner urgencies, careless about practical matters and absent minded. it is evident from the data as presented intable -1 column-10 that high scorer on factor –M have scored higher score (Mean=59.8900) on stress scale in comparison to the low scorer counterparts(Mean=57.3600) the obtained t – value (t=1.952) between the two groups was not to be significant even at 0.05 level of confidence. It indicates that the personality traits on Factor M do not contribute significantly to the level of stress among the subject.

Factor N consisted of the traits like forthright, natural, artless, sentimental, shrewd, calculating, worldly, penetrating traits. it is clear from table -1 column 11 that low scorer on Factor-N have scored slightly higher (Mean=59.4133) on stress scale in comparison to the high scorer counterparts (M=58.5467) the obtained t-value (t=1.741) between the two groups was not found to be significant at 0.05 level of confidence. It indicates that the personality traits od Factor N do not contribute significantly to the level of stress among the subjects.

Factor O consisted traits like placid, self-assured, confident, untroubled adequacy, apprehensive, worrying, and depressive and guilt proneness. High scorer and low scorer on these traits were compared in respect of their score on stress scale and finding indicate that in table-1 column-12 that high scorer on Factor-O have scored significantly higher (Mean=61.4533) on stress scale in comparison to the low scorer counterparts (Mean= 58.3067) the obtained a t-value (t-2.18) between the two groups was also found to be significant beyond 0.05 level of confidence. it indicate that the persons with personality traits like apprehensive, worrying, depressive and gulf and proneness have low level of stress on the other hand the persons having personality traits like placid, self-assured, confident and untroubled adequacy have higher level of stress.

Factor Q1 consisted of personality traits like conservative, respecting, established ideas, tolerant of traditional difficulties, conservative, experimenting, critical, liberal, analytical, free thinking and radicalism. It is clear from table 1 column 13 that high scorer on factor Q1 have score slightly higher (mean- 59.0133) on stress scale in comparison to the low scorer counterparts (mean-58.5733) the obtained t value (t- 0.334) between the two groups was also found to be non-significant even at 0.05 level of confidence. It indicates that the personality traits on factor Q1 do not contribute significantly to the level of stress among subjects.

Factor Q2 consisted of personality traits like group dependent, group adherence, self-sufficient, prefers own decision and resourceful. It is evident from table -1 column 14 that high scorer on factor Q2 have score slightly higher (mean-58.6533) on stress scale in comparison to the low scorer counterparts (mean- 57.5867) the obtained t value (t-0.784) between the two groups was also found to be significant even at 0.05 level of confidence. It indicate that the personality trait on factor Q2 do not contribute significantly to the level of stress among the subjects.

Factor Q3 consisted of personality traits like undisciplined, self-conflict, careless of protocol, follows own urges, controlled, socially precise, following self-image. It reveal from table 1 column 15 that high scorer on factor Q3 have score slightly higher(mean- 58.9200) on stress scale in comparison to their low scorer counterparts (mean-58.7467) the obtained t value (t-0.150) between the two groups was found to be insignificant even at 0.05 level of confidence.

Factor Q4 consisted of the traits like relaxed, tranquil, torpid, unfrustrated, tense,driven,overwrought. It is exposed from table 1 column 16 that high scorer on Factor Q4 have significantly higher (Mean- 61.2267) on stress scale in comparison their low scorer counterparts (Mean-57.6133). the obtained t-value (t-2.91) between the two groups was also found to significant beyond 0.05 level of confidence. It indicates that persons with personality traits like tense frustrated, driven, overwrought have low level of stress on the other hand the persons with personality traits like relaxed tranquil, tropid, unfrustrated have low level of stress.

IV. Discussion

The finding presented in table 1, column 1 to 16 reveal that the personality traits of the respondents are good conductor of the level of stress among them. On the basis of overall discussion, it can be concluded that out of 16 personality factors, only seven factors, namely, factors- A,B,E,F,H,O,and Q4 were found to be significant in affecting stress level of the subjects. Personality factors like, C,G,I,L,M,N,Q1,Q2 and Q3 were found to be insignificant in substantiating the stress level of the respondent. The finding of the present study indicate that the subjects with high scores on stress scale are more reserve detached, critical cool, low intelligent, concrete thinker emotionally unstable, facing reality, calm, mature, happy-go-lucky, impulsive, lively, enthusiastic, venturesome, socially bold, inhibited, spontaneous, apprehensive, worrying depressive, guilt presences, on the other hand subjects with low scores on stress scale are more out going, warm hearted, easy going, participating, more intelligent, abstract thinker, bright , sober, prudent, serious, taciturn, shy, restrained diffident, timid, placid, self-assured, confident, relaxed, tranquil, torpid and unfrustrated.

The findings of the present study are more or less support our day to day observation. The personality traits which are responsible for growth of stress among the subjects in the present study, they are relevant and can be seen in daily life also. Needless to say that subject with high stress will be reserved detached, critical cool, impulsive. Venture some, socially bold, spontaneous and so on. A number of studies conducted in this area also support the present findings.Piven, et al. (1994) deficits have been reported in personality functioning among parents of disabled children. Chen et al. (1992) found that mothers of learning disabled and children with attention deficit disorder and hyperactivity had higher depression, anxiety,and/or neurotic like personality disorders than did mothers of non-disabled children. Singhi,Goyal,Perashad, Singhi and Walia (1990), found that the neuroticism scores were significantly higher in families with disabled children.. G.K.Rastogi,(1984) examined parents of 50 mentally retarded children. He studied their personality pattern with the help of Middlesex hospital questionnaire. In fathers and mothers separately. None of the personality traits were observed to vary at statistically significant level in relation to the degree of retardation in their child, but both of parents of mildly retarded children obtained higher score on scale of anxiety, phobia and depression. Analysis of different factors when compared for fathers and mothers together, revealed a higher degree of neurotic traits in mother.

M.R.Ali, et.al. (1994) designed a study to assess the personality characteristics and psychological problems of parents of mentally retarded children. 76 parents whose mean age was 42.12 yrs. With SD 10.15, 38 of mentally retarded and 38 of normal children, were investigated. A Bengali version of the Eysenck Personality Questionnaire was used to measure the psychoticism, neuroticism and extroversion introversion responses of the parents. Result showed that parents of mentally retarded children had significantly higher scores only on the neuroticism scale indicating that they were more emotionally unstable than the parents of normal children. The findings were discussed in terms of constraining factors associated with having a mentally retarded child.

V. Conclusion

Personality traits of parents that might have influenced the perception of stress were also very important. Really personality trait affects once perception of stress and coping style. Considering the above mentioned lacunae of the present study further community based research needs to be conducted. Intervention services focus parents of mentally handicapped children need to be decentralized. This will help in providing such parents with as much skill as possible to deal with their children. The support system of these parents can

be enhanced by organizing self-help groups. This can serve as medium for communication. Parents can share their feelings and discover means to deal with their problems. Support group can also diminish the feeling of isolation experienced by some families with mentally retarded children.

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