



Title	From Despondency to Competency: Psychological Well-being of Parents of Children with Autism Spectrum Disorders in Hong Kong.
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From Despondency to Competency: Psychological Well-being of Parents of Children with Autism Spectrum Disorders in Hong Kong

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Abstract

The inter-relationships among child-related stress and parent-related resources that influencing the psychological well-being for parents of children with autism spectrum disorders ("ASD") in Hong Kong were examined. A total of 173 parents of children with ASD were administered measures of stressor (perception on parenting stress and child's behavior), resources (social support and coping), self-efficacy belief in parenting and parent distress. Hierarchical multiple regression analysis results showed that the parental self-efficacy belief, maladaptive coping strategies and perceived parenting stress were significantly associated with parental distress. Results suggested that the development of an interactive framework of parental well-being may constituted with the key factors examined in the present study. Further investigation will harness the theoretical and practical developments to support parents of children with ASD in Hong Kong.

Keywords: Parental Self-efficacy, Coping, Parental Well-being, Children with Autism Spectrum Disorders

Background

Parenting Challenges and Parental Well-Being

Past research has consistently shown that parents of children with ASD experienced significantly higher stress associated with the child's symptoms compared to the parents of children with or without other disabilities (Sanders & Morgan, 1997). A major source of stress may come from the nature of the child's behavioral problem (Hastings et al., 2005; Hodapp et al., 1997). The question of how factors associated with the child's symptoms and the underlying psychological process may impact upon parent's psychological well-being remains unknown. Answer to this question is important as it may facilitate theoretical and practical development tailor made to address ASD parent's needs (Benson, 2012).

Past Studies on Social Support, Coping, and Parental Self-Efficacy

A variety of factors have been identified in the past research including social support, coping, and parental self-efficacy. Research has shown that social support protected against parenting stress and was negatively associated with stress in parents of children with ASD (Bristol, 1984; Gray & Holden, 1992). Maladaptive coping strategies such as avoidance were reported to be related to heightened stress and increased risks of mental health problems in parents of children with ASD (Hastings et al., 2005). Recent research suggested that positive appraisal such as positive reframing may be a more effective coping strategy (Benson, 2012; Hastings et al., 2005). Parental self-efficacy is defined as the competency belief a parent perceived he or she may be able to fulfill a parenting role (Teti, O'Connell, & Reiner, 1996). It was reported that parental self-efficacy was related to improved well-being in mothers of children with ASD (Kuhn & Carter, 2006). Moreover, research suggested that parental self-efficacy was mediating the relationship between the child's behavioral problem and the psychological well-being for parents (Coleman & Karraker, 1998). In view of these aforementioned evidence, the present study aims to put together a model proposing how the dynamic interplay of the above mentioned factors may contribute to parental well-being for parents of children with ASD in Hong Kong.

Method

One hundred seventy-three parents (146 mothers and 27 fathers) of 149 boys and 24 girls who had received clinical diagnosis of ASD reported on their perceived parenting stress and child's behavioral problem, social support, coping, parental self-efficacy, parental distress and demographic information for further analysis.

Results

Table 1 presents the descriptive statistics for the measures in relation to parental distress as outcome variable, as well as their inter-correlations. Domain-specific and task-specific parental self-efficacy beliefs were negatively related to parent distress ($r = -0.35$ and -0.56 respectively, $p < 0.01$), as well as social support ($r = -0.42$, $p < 0.01$). Perceived parenting stress and the child's behavioral problem were significantly related to parental distress ($r = 0.66$ and 0.51 respectively, $p < 0.01$). Five coping strategies employed by the sample in the present study were analyzed. Engagement ($r = 0.16$, $p < 0.05$), unacceptance ($r = 0.52$, $p < 0.01$), disengagement ($r = 0.25$, $p < 0.01$) and relationship coping ($r = -0.18$, $p < 0.05$) were significantly related to parental distress. No significant relationship was found between alternative coping and parental distress ($r = -0.05$, $p > 0.05$).

Hierarchical multiple regression analysis results indicated that the model as shown in Figure 1 explained 60.0% of the variance in parental distress [$F(13,159) = 18.11$, $p < 0.001$; see Table 2]. The result showed that task-specific parental self-efficacy belief, disengagement coping, unacceptance coping and perceived parenting stress were significantly associated with parental distress, after controlling for the parent's age, parent's education level and the child's age.

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Figure 1. Conceptual model of parental distress proposed in the present study

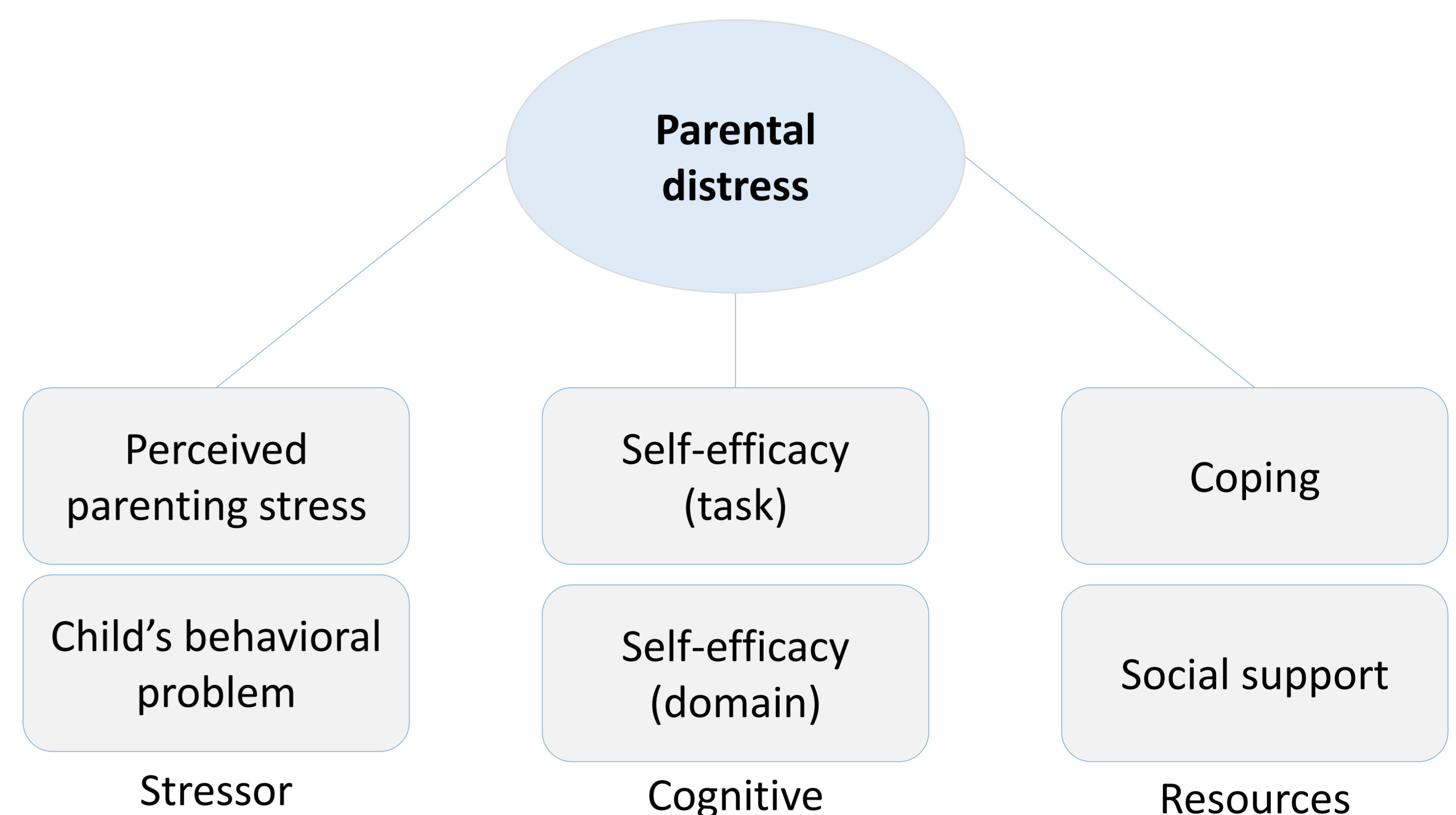


Table 1
Means, Standard Deviations, Correlations for Measures in the Present Study (n = 173)

	1	2	3	4	5	6	7	8	9	10	11
Mean	35.57	19.73	26.43	32.75	32.50	33.28	31.55	10.28	10.68	9.24	23.99
SD	10.25	3.05	3.70	5.34	6.20	5.90	5.55	2.96	2.92	1.78	4.74
1. Parental distress	-	-.35**	-.56**	.66**	.51**	-.42**	-.16*	.52**	-.05	.25**	-.18*
2. PSE		-	.49**	-.40**	-.37**	.47**	.27**	-.25**	.14	-.01	.25**
3. APSE			-	-.56**	-.53**	.39**	.25**	-.42**	.03	-.05	.22**
4. Perceived parenting stress				-	.59**	-.48**	-.21**	.36**	-.15	-.01	-.27**
5. Child's behavioral problem					-	-.32**	-.17*	.26**	-.04	.14	-.16*
6. Social support						-	.29**	-.27**	.18*	.04	.19*
7. Engagement coping							-	-.17*	.35**	.32**	.55**
8. Unacceptance								-	.07	.23**	-.13
9. Alternative coping									-	.32**	.31**
10. Disengagement										-	.25**
11. Relationship coping											-

Note. PSE, domain-specific parental self-efficacy belief. APSE, task-specific self-efficacy for parents of children with ASD.

* $p < .05$. ** $p < .01$.

Conclusion

The preliminary findings of the present study were partially consistent with the past research, such that some of the key constructs such as parental self-efficacy belief and coping strategies were important constructs associated with parental distress. Some findings, however, were inconsistent with the past research. For instance, research suggested social support was a protective factor for parental well-being (Gray & Holden, 1992), whereas child's behavioral problem was shown to be one of the key stressors influencing parental well-being (Hastings et al., 2005). Neither of these relationships were not found in the present study. It was suggested that parental self-efficacy belief, coping strategies, and perceived parenting stress may constitute an interactive framework, accounting for the variance in parental distress in the present study. The findings of the present study shall facilitate theoretical development of the underlying mechanism of parental well-being, which capacitate the development of the parent support program to foster competent parents of children with ASD in Hong Kong.

Table 2
Standardized Betas (β) for Hierarchical Regression Model on Parental Distress from the Independent Variables in the Present Study After Controls for Differences in Ages and Education levels for Parents and Difference in Ages for the Child (n = 173)

Final Step Predictors	ΔR^2	df	B	SE B	β
Step 1: Control Variables	0.01	3/169			
Parent's age			0.06	0.11	0.04
Parent's education			0.54	0.72	0.04
Child's age			0.01	0.15	0.01
Step 2: Independent Variables	0.59***	13/159			
Parental self-efficacy (domain)			0.12	0.21	0.04
Parental self-efficacy (task)			-0.42	0.20	-0.15*
Perceived parenting stress			0.76	0.14	0.40***
Child's behavioral problem			0.15	0.11	0.09
Social support			-0.16	0.11	-0.09
Engagement coping			0.01	0.12	0.00
Disengagement coping			1.17	0.34	0.20***
Alternative coping			-0.23	0.21	-0.06
Unacceptance coping			0.83	0.21	0.24***
Relationship coping			-0.05	0.14	-0.03

* $p < .05$. *** $p < .001$.