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EMOTIONAL CHALLENGES OF PARENTING: EXPLORING ANXIETY, DEPRESSION, AND STRESS IN PARENTS OF CHILDREN WITH DISABILITIES

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Abstract

Parenting children with disabilities presents unique emotional challenges, often resulting in heightened levels of anxiety, depression, and stress among parents. The present study aimed to examine these psychological variables in parents of blind children, children with hearing and speech impairments, and children with intellectual disabilities. A total of 480 parents (240 of male children and 240 of female children) were selected through random sampling. The **Anxiety, Depression, and Stress Scale** developed by Bhatnagar and Singh was administered to assess parental psychological states. Data were collected using the survey method and analyzed using the **t-test** to compare mean differences between groups. Results indicated that parents of female children reported significantly higher levels of anxiety, depression, and stress than parents of male children. The findings underscore the need for targeted psychological support and intervention programs to enhance parental well-being and promote a supportive environment for children with disabilities. These insights can inform mental health professionals, educators, and policymakers in developing comprehensive family-centered strategies.

Keywords: Parents, Disabilities, Anxiety, Depression, Stress

1. Introduction

Parenting is often regarded as a rewarding yet demanding responsibility that requires continuous emotional, physical, and social engagement. For parents of children with disabilities, these responsibilities become even more complex, as they are not only required to meet the ordinary demands of childrearing but also to manage unique challenges associated with their child's condition. The term "children with disabilities" encompasses a wide range of developmental, cognitive, physical, and emotional impairments, each of which may influence family dynamics in distinct ways. While every parent experiences moments of stress and anxiety, parents of children with disabilities often face heightened levels of psychological strain due to the constant caregiving demands, societal expectations, financial concerns, and uncertainties about the child's future. These emotional challenges frequently manifest in the form of anxiety, depression, and stress, which may influence both the well-being of the parents and the quality of care they provide to their child.

Anxiety is one of the most common psychological experiences reported by parents in this context. The unpredictability of a child's health, the pressure of managing medical and educational needs, and the fear of social stigma often create persistent worry. Many parents live with ongoing uncertainty regarding their child's long-term development, independence, and social acceptance. This constant state of vigilance and apprehension contributes to chronic stress, which, if left unaddressed, may lead to serious health consequences. Anxiety can also affect decision-making processes, interpersonal relationships, and the ability of parents to maintain balance between caregiving and personal well-being.

Depression is another significant emotional burden that many parents of children with disabilities endure. Feelings of helplessness, guilt, and sadness may emerge when parents perceive their child's difficulties as overwhelming or beyond their control. In some cases, social isolation intensifies these feelings, as families may withdraw from community interactions due to stigma, lack of accessibility, or fear of judgment. Over time, the psychological weight of continuous caregiving and limited opportunities for respite can contribute to emotional exhaustion and depressive symptoms. Such depression not only affects parents' mental health but also impacts family harmony, spousal relationships, and the emotional development of other siblings within the household.



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Stress is a natural outcome of the demanding circumstances faced by these parents. Daily routines often involve medical appointments, therapy sessions, and educational interventions that require considerable time, energy, and financial resources. Coupled with the necessity to balance employment, household responsibilities, and caregiving, stress becomes a pervasive part of life. Financial strain due to medical expenses and specialized services further intensifies this burden. Chronic stress not only impairs psychological functioning but also affects physical health, leading to fatigue, sleep disturbances, and weakened immunity, which in turn compromise the overall resilience of parents.

The emotional challenges of parenting children with disabilities cannot be understood in isolation. They are influenced by broader social, cultural, and institutional factors such as access to healthcare, availability of support services, and societal attitudes toward disability. Recognizing these challenges is vital for designing effective interventions and support systems that promote the mental health of parents while ensuring the well-being of their children. This study seeks to explore the interconnections of anxiety, depression, and stress in parents of children with disabilities, highlighting the need for comprehensive psychological support and community-based resources. By understanding the emotional landscape of these parents, researchers, practitioners, and policymakers can contribute to more inclusive frameworks that acknowledge not only the needs of children with disabilities but also the mental health of those who care for them.

2. Anxiety, Depression, and Stress in Parents of Children with Disabilities

Parenting a child with disabilities is often accompanied by significant emotional challenges that extend beyond the typical responsibilities of caregiving. Parents are required to navigate complex medical, educational, and social demands, which can lead to heightened levels of anxiety, depression, and stress. Anxiety frequently arises from concerns about the child's health, development, and future, creating a persistent state of worry. Depression may emerge from feelings of helplessness, guilt, and social isolation, especially when support systems are limited or societal stigma is present. Stress is further intensified by the constant need for caregiving, financial strain, and the difficulty of balancing personal and professional responsibilities. These psychological burdens not only affect the well-being of parents but also have implications for family harmony and the child's development. Understanding these emotional challenges is essential to provide targeted interventions and support systems that promote resilience and mental health in families.

3. The Study's Need and Significance

The study of anxiety, depression, and stress in parents of children with disabilities holds critical importance in both academic and practical contexts. Parenting a child with disabilities involves unique emotional and social challenges that differ significantly from parenting typically developing children. These parents often experience heightened psychological burdens due to continuous caregiving responsibilities, financial demands, societal stigma, and uncertainties regarding their child's future. Despite the growing awareness of disability rights and inclusive education, the mental health needs of parents are often overlooked, creating a gap in support systems and research. Addressing this gap is vital to ensure holistic care that encompasses both the child and the family unit.

The significance of this study lies in its potential to highlight the psychological struggles faced by these parents and to inform the development of targeted interventions. By identifying the levels of anxiety, depression, and stress, the research can contribute valuable insights for mental health professionals, educators, and policymakers. It can also help in designing counseling programs, support groups, and stress-management strategies tailored to the needs of parents. Furthermore, such a study underscores the interconnectedness of parental well-being and child development. When parents are emotionally supported, they are better equipped to provide consistent, nurturing care, thereby positively influencing the child's growth and adjustment. Ultimately, this research emphasizes the necessity of recognizing parental mental health as a crucial component of disability studies and family welfare, paving the way for more inclusive and compassionate policies and practices.



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4. Objective of the Study

The following objectives were framed in this study.

1. To examine the difference in anxiety levels among parents of blind children, deaf and dumb children, and mentally retarded children.
2. To compare the depression levels of parents of blind children, deaf and dumb children, and mentally retarded children.
3. To study the difference in stress levels of parents of blind children, deaf and dumb children, and mentally retarded children.

5. Hypotheses of the Study

The following hypotheses were tested in this study.

1. There is no significant difference in anxiety levels among parents of blind children, deaf and dumb children, and mentally retarded children.
2. There is no significant difference in depression levels among parents of blind children, deaf and dumb children, and mentally retarded children.
3. There is no significant difference in stress levels among parents of blind children, deaf and dumb children, and mentally retarded children.

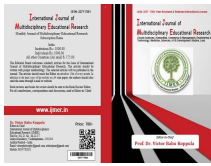
6. Method and Procedure

The present study adopted a systematic methodology to investigate anxiety, depression, and stress in parents of exceptional children. The sample consisted of 480 parents, with 240 parents in each group, selected through the random sampling method to ensure fairness and representativeness. To assess the psychological variables, the standardized Anxiety, Depression, and Stress Scale developed by Pallavi Bhatnagar and Megha Singh was employed, as it is recognized for its reliability and validity. The tool was administered to parents with clear instructions, ensuring accurate and unbiased responses. Data were collected using the survey method, with questionnaires distributed personally and through schools and institutions working with exceptional children. Informed consent was obtained, confidentiality was assured, and the purpose of the study was clearly explained to participants. The researcher-maintained neutrality throughout the process and provided clarifications when needed. Data collection was conducted both individually and in small groups, depending on parents' availability. For statistical analysis, the t-test was used to examine differences in anxiety, depression, and stress among parents of exceptional children. This technique was considered appropriate for comparing mean scores of independent groups to determine whether differences were statistically significant.

7. Analysis and Interpretation of Data

Table- 1
Mean Score, SD, SED, t – Value.

Variables	Group	N	Mean	SD	SED	T – Value
Anxiety	Parents of male blind children, deaf and dumb children and mentally retarded	240	13.00	3.6	0.32	6.17**
	Parents of female blind children, deaf and dumb children and mentally retarded	240	15.00	3.5		
Depression	Parents of male blind children, deaf and dumb children and mentally retarded	240	09.00	3.4	0.34	5.82**



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	Parents of female blind children, deaf and dumb children and mentally retarded	240	11.00	4.1		
Stress	Parents of male blind children, deaf and dumb children and mentally retarded	240	10.00	3.9	0.33	2.99**
	Parents of female blind children, deaf and dumb children and mentally retarded	240	11.00	3.4		
NS= Not Significant						
0.05 = 1.96*, 0.01 = 2.58**						

The table presents the comparative analysis of anxiety, depression, and stress among parents of male and female children with disabilities, including blind, deaf and dumb, and mentally retarded children. Each group consisted of 240 parents, making a total of 480 participants.

Anxiety: The mean anxiety score for parents of male children was 13.00 (SD = 3.6), whereas parents of female children had a higher mean score of 15.00 (SD = 3.5). The standard error of difference (SED) was 0.32, and the t-value of 6.17 indicates a statistically significant difference at the 0.01 level (**), suggesting that parents of female children experience higher levels of anxiety compared to parents of male children.

Depression: Parents of male children had a mean depression score of 9.00 (SD = 3.4), while parents of female children scored 11.00 (SD = 4.1). The SED was 0.34, and the t-value of 5.82** is significant at the 0.01 level, demonstrating that depression levels are significantly higher among parents of female children.

Stress: The mean stress score for parents of male children was 10.00 (SD = 3.9), compared to 11.00 (SD = 3.4) for parents of female children. The SED was 0.33, and the t-value of 2.99** shows a statistically significant difference at the 0.01 level, indicating that parents of female children experience greater stress than those of male children.

Overall, the findings reveal that parents of female children with disabilities report significantly higher levels of anxiety, depression, and stress compared to parents of male children. This suggests that the gender of the child may influence the psychological well-being of parents, highlighting the need for targeted emotional support and interventions.

8. Findings

The findings of the present study are reported below.

1. Parents of female children with disabilities (blind, deaf and dumb, and mentally retarded) reported significantly higher anxiety (M = 15.00, SD = 3.5) compared to parents of male children (M = 13.00, SD = 3.6), with a t-value of 6.17**, indicating a statistically significant difference at the 0.01 level.
2. The depression scores of parents of female children (M = 11.00, SD = 4.1) were significantly higher than those of parents of male children (M = 9.00, SD = 3.4), as shown by a t-value of 5.82**, signifying a significant difference at the 0.01 level.
3. Parents of female children exhibited higher stress (M = 11.00, SD = 3.4) than parents of male children (M = 10.00, SD = 3.9), with a t-value of 2.99**, reflecting a statistically significant difference at the 0.01 level.

9. Recommendations

1. **Psychological Support Programs:** Establish counselling and support programs for parents of children with disabilities to help them manage anxiety, depression, and stress effectively. Regular sessions with trained mental health professionals can provide coping strategies and emotional guidance.



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2. Parental Awareness and Training: Conduct workshops and training sessions to educate parents about the specific needs of their children, stress management techniques, and ways to create a supportive home environment, which can enhance both parental well-being and child development.

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