

A study in depression levels among mothers of disabled children

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Objectives: The global prevalence of lifetime depression is very high among women in the world – approximately 12-25 percent. The global prevalence of disability is also very high and the estimated figure for the end of 2000 was put at around 300million. The child's disability stresses the mother the most, and this stress shows itself in the form of depression, and causes the mother's performance or function to drop, and thus has a negative effect on the child's treatment.

Methods: The research is of the analytical kind (cross sectional), and as well as depression other demographic items are reviewed. The sample study volume is one hundred mothers of disabled children who went to one of the rehabilitation centers of the provincial town of Karaj between 2002 and 2006. The tools for this study is the standardised beck depression scale, and the test data was broken down and analysed by (chi square) and the SPSS software.

Results: The results of this study indicated that 73% of mothers, had degrees of depression, and approximately 21% of them suffered from severe depression, and out of all the variables, there was a significant relationship only between the mothers' depression and the children's type of disability.

Conclusion: The results of this study indicated that the depression levels among mothers of disabled children were equal to 3-5 of the global range, and in view of the negative effects that the mothers' depression have on the recuperation process of the children, the necessity to support parents with disabled children – which would to a large extent reduce the stress levels – is felt more than before

Keywords: depression, mothers, disabled children

Introduction:

Depression is one of the most common psychiatric disorders and lifetime prevalence of depression is very high among women in the world – approximately 12-25 percent. In 2000, depression was the fourth reason for loss of employment, and in 2002 it was the second incapacitating illness among all physical and mental illnesses (Ghorehshizadeh, 2005, 85-89). In view of the abovementioned statistics, and in view of the overall statistics of mental disorders which the World Health Organization (WHO) announces, approximately one percent of the world population suffers from severe mental disorders, and 15 percent suffer minor mental disorders (WHO, 1990).

On the other hand, in view of the family being nuclear in many countries, and also attention to the fact that the disability of one of the children can all too often leave negative effects on all the family and each members and their various functions, and cause higher degrees of stress, depression and anger among the parents of disabled children (Little, 2003). And in view of the very high disability prevalence in the world, in such a way that for the end of 2000 it was estimated at 300million (Mirkhani, 2000, 74-79), and the fundamental role of the mother in raising, and stabilising the family, and ultimately the fact that giving support to parents of disabled children, will noticeably reduce their mental problems such as

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depression, stress and anger (Capuzzi, 1980,161-167). These facts inspired this researcher to do this research with the aim of taking a little step towards reducing family problems.

Papers Study:

Chronic depression is an incapacitating illness, and its lifetime prevalence is unfortunately very high, and its point prevalence is estimated at approximately 2-3% for men, and 4-9% for women, and its more prevalent in rural areas than urban areas, and stressful events are deemed as the most important reasons for its occurrence (Gelder,2005,105).

Studies conducted in Iran over the recent years shows that 1.6% of the population above 15 suffer from acute mental disorders, and 15.3% suffer from mild mental disorders (Bagheri Yazdi,1994,32-39). Other studies indicate its prevalence from 11.9% to 53.8% (Davidian,1991,14-23).

Several studies have been conducted on depression in Iran, and one of these studies indicated that in the rural society 1.9% suffered acute depression, and 45.9% mild depression, among women in particular (Mo'tamedi,1997,33).

Stressful factors are the most important causes of depression, and one of the main stresses for parents is their children, disabled ones in particular.

The love for a child is an instinctive feeling, in such a way that even infertility, without considering education and income or other social elements, can create noticeable amounts of stress and depression in the husband and wife. And this is in a meaningful way in the disable society (Nasrabadi, 2005). On this basis, various studies have been done on parents with disabled children. According to the WHO's definition a disabled person is an individual that has genetically or during the course of living, lost all or part of his/her physical or mental capabilities, or both either temporarily or permanently; and is not able to have an independent life without the help of special equipment or care (WHO, 7, 1977, from Amirkhani, 1999). There are different terminologies for disability: impairment, disability, and handicap. In general disability is defined as the result of impairment, whereas handicap is defined as social uselessness (same source). Various examples of disability are applied, but experts generally include the following terms: Learning disability; developmental disabilities; mental retardation; chronic conditions such as juvenile rheumatoid arthritis; HIV/AIDS; diabetes; speech and

language difficulties; physical and orthopaedic disabilities; deafness and learning impairment; visual impairment and autism (Sullivan, 2000, 1257-1274). Stress and depression in parents of disabled children is one of the most important problems that they face, and numerous studies indicate that basically having a difficult child brings about depression in the parents, and this depression is more in mothers than fathers (Tan,2005,76-79). Of course there are some that believe that the thing that mostly causes depression in parents is not disability, but it is these children's behavioural problems that cause depression (Kogel, 1992,205-216). Or another study shows that children's behavioural problems are much more stressful for the mothers than the handicap (Baker,2005,575-590). Of course attention must be made to the fact that the family's pervious problems can aggravate these problems, for example it has been noticed that in families that have an autistic child, that genetically it is possible that the existence of neuropsychiatric disorders, such as depression, alcoholism and stress is more (Miles,2003,403-415), it has also been noticed that physical handicaps such as Myotonic Dystrophy can also bring about stress in the family, specially if there is a history of depression and stress in the family (Corrine, 2000).

To sum up, numerous studies support this theory that the parents of children that suffer from general developmental disability, show higher degrees of stress (Sanders,1997,15-32). As mentioned, comparative studies done among parents with intellectual disabilities children, showed that the mothers became more stressed than the fathers (Hastings,2005,155-165). Perhaps this is due to the reason that mothers get a lot more involved with their children than the fathers, and this is why stress signs are seen more among the mothers rather than the fathers of disabled children (Hastings,2003,231). Of course perhaps one of the important reasons for these stresses, and depression could be because these children are more at risk of being subjected to abuse than healthy children, and a study on children with schizophrenia, autism, affective disorder, anxiety disorder, and conduct disorder, revealed that they were seven times more at risk of being abused or neglected than healthy children (Council on Children with Behavioural Disorder, 2000). In view of the high levels of damage on the mothers, such as stress, anxiety and depression, and previous studies based on the beck depression scale, for example one study on mothers with an

autistic child depression was at 11.8, and mothers of mentally handicapped children depression was at 9.2, and in mothers of the control group depression was at five percent (Olsson,2001,534-54). We decided to conduct this study, so that by making a comparative study of Iran with other countries to be able to find practical solutions to help parents of disabled children.

Study Method:

This research is the analytical kind(cross sectional), and as well as studying depression among mothers of disabled children, other features such as the age of the mother, the child, education and career of the mother are studied. The survey population is mothers of disabled children in the provincial town of Karaj, who have gone to the Mofid Re-education and Rehabilitation Centre for the Disabled, and volume of the sample population is of 100 mothers who went to this centre in the last four years. To break down and analyse the data, the deductive and descriptive statistics, and the statistical test of (chi square) and the SPSS software, and the measuring tool is the beck depression scale , which is filled in and the psychologist marks the result.

Study findings:

One-hundred mothers and one-hundred children were studied. Fifty-one percent of the children were in the 6-9 age range, and 43% in the 2-5 age range; and 49% of the mothers were in the 20-30 age range, and 39% in the 31-40 age range.

Twenty-eight percent of the mothers could read and write, 23% had secondary school education, and 36% had high school diplomas, and 14% university education. 88% of the mothers were housewives, and 99% of the husbands were in employment. Table number one indicates the distribution of the child's type of disability.

Table 1: Child's disability type

Disability type	No.	%
Mental retardation with ability to learn	34	34
Mental retardation that can be trained	8	8
Brain damage and other cases	58	58
Total	100	100

Thirty-four percent of the parents were related to each other, and 89% of the mothers were physically healthy, and 67% of the children were boys.

The distribution of the mothers' depression is shown in table number two. As it is clear in the table, 73% of the mothers in the study have various degrees of depression, 36% of them suffering from mild depression and 21% from severe depression. In the analysis that was done with the (chi square) test, there were no significant relationship between the depression levels of the mothers, with their husbands' jobs, the child's gender, the parents being related, mothers' health conditions, mothers' education, the child's age, mothers' age, mothers' job, and the family's housing situation. The only significant relationship was between the mother's depression levels and the child's disability type. In brain damage cases 14 mothers suffered from severe depression, and 25 had mild depression.

Table 2: Depression levels of mothers

Depression levels	No.	%
Severe	21	21
Relatively depressed	16	16
Mild	36	36
Normal	27	27
Total	100	100

Table number 3 studies the type of disability and the mothers' depression.

Table 3: Link between the child's disability type and mothers' depression levels

Depression level \ Child's disability type	Severe		Relatively depressed		Mild		Normal		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%
Mental retardation with ability to learn	4	11.8	9	26.4	10	29.4	11	32.4	34	100
Mental retardation that can be trained	3	37.5	4	50	1	12.5	0	0	8	100
Brain damage and other cases	14	24.1	3	5.2	25	43.1	16	27.6	58	100
Total	21		16		36		27		100	
Test result	P = 0.003		DF = 6		X ² - 20.028					

Conclusion and results:

The results of this study indicate that 73% of the mothers had various degrees of depression, with 21% suffering with severe depression, which is a lot higher than the global statistics (12-25%) (Ghoreishizadeh, 2005, 85-89). (WHO, 1990), and in relation to the figures in Iran, the rates are very high (1.9% severe depression) (Mo'tamedi, 1997, 33). With this it becomes clear that disability brings about higher degrees of stress, depression and rage among the parents (Little, 2003), (Sanders, 1997, 15-32). The findings of this study regarding depression among the mothers correspond with other findings in Iran. One of these studies came to the conclusion that the mothers of children with disorders in comparison to children with no disorder suffer from more depression and have a low social function (Salehi, 2004). And another study showed that the most severe reaction that is shown towards the birth of a disabled child is depression, and another study showed similar results, and survival of an abnormal child was more painful for the parents than the death of a normal child (Adib Sereshki, 1999), and another research indicated that most of the close relatives of a child with some sort of disorder suffer with various degrees of depression (Alaghband Raad, 2003), and in another study the depression levels of the parents of children that suffer from malignancy is four times of the general public (Norouzi-nejad, 2004). In the rest of the findings no significant relationship were found between the mothers' depression and their ages. Another study corroborated this finding. (Karimi Zarechi, 2003). no significant relationship were found between the depression and education of the mothers, which corroborated with some other studies (Modabernia, 2001), and does not corroborate with some others at the same time, such as a study that states depression is high among illiterate people (Sepehrmanesh, 2003, and Ramazani, 2001). No significant relationship were found between the mothers' employment situation with depression, which is in disagreement with several previous studies (Bolhari, 2001, Ramazani, 2001). Also a study in Malaysia indicated that mothers of children with mental retardation in comparison with the control group suffer from further stress, particularly if the mothers are unemployed, this stress is more severe (ONG, 1999, 358-362). In a relative study, no significant relationship were found between the health conditions of the mothers and their depression levels, which did not corroborate

with other studies (Yazdan Doost, 2001, Shahrokhi, 2001). Contrary to the findings of Bolhari (Bolhari, 2001) on the links between the parents being related to each other and depression among the women, in this current study no significant relationship were found. Also other available studies indicated that there is no link between the clear and unclear housing conditions, and depression among the mothers (Karimi Zarechi, 2003, Modabernia 2001). The lack of a significant relationship between the age of the mothers and their depression that was discovered in this study, is also confirmed in other studies (Shariati, 1996). In another study (Khamseh, 2002), in contrast to this study, significant relationship was established between mothers' depression and the child's gender.

No significant relationship were established between the mothers' depression and their husbands' employment conditions in other studies and also in an article on the perceptions of services and resources as mediators of depression among parents of children with developmental disabilities (Herman, 1997, 458-467).

It must be said that the only item that had significant relationship was found in this study was between the depression levels in the mothers and the children's disability type. To corroborate this, mothers of children with brain damage suffered with severe depression. In her studies in her "Exceptional Children", Adib Sereshki states when the child has severe disability, and or has multiple disabilities, the family is more affected by this (Adib Sereshki, 1999), and in the same regard Khamseh reported a meaningful link between the child's health conditions and the depression level in the mother (Khamseh, 2002).

In closing this discussion it is important to point out that often the stigmatisation that the patient and his/her family are subjected to, cause complications in the treatment process of the patient. And in many eastern countries such as Lebanon, it's been observed that these types of treatments reduce the social participation of these individuals, and in most cases the family's stress is as a result of problems in adapting to the environment, and mothers suffer from a higher range of depression in society; and ultimately that mother's depression is as a result of family strain, parental stress and family income (Azar, 2006, 375-380). ■

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