

The Role of Spiritual Attitude in Child-Rearing in Predicting the Psychological Hardiness of Mothers with Handicapped Children

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Objectives: Providing care to children who have disability is often a stressful experience, yet spiritual beliefs may help mothers to be patient, tolerant and hard in coping with child-rearing difficulties. This study examined the relationship between the spiritual attitudes of mothers of handicapped children to child-rearing and psychological hardiness.

Methods: In a descriptive correlational study, 120 mothers of handicapped children who were referred to the rehabilitation clinics of the University of Social Welfare and Rehabilitation Sciences (Rofeideh, Akhavan and Sina clinics) were selected through purposeful sampling and answered the Sanctification of Parents Scale (SPS), and Personal Views Survey (PVS). Data were analyzed by SPSS-20 software and statistical procedures including Pearson correlation and multiple regression analysis were used.

Results: Results showed that spiritual attitudes to child-rearing are significant predictors of hardiness in mothers.

Discussion: It seems like having spiritual attitudes in difficult situations such as providing care for disabled children plays a significant role in mother's patience and hardiness.

Keywords: spiritual attitude, hardiness, handicapped child

Submitted: 12 March 2015

Accepted: 17 May 2015

Introduction

The process of telling parents about a diagnosis of physical or intellectual disability of their child creates a major burden on the family (1), and parenting a child with a disability can produce great stress and a sense of imbalance in the family system (2). This means that the family may lack balance and may be affected by the sequence of events surrounding the interaction with the family member with a disability (3). A child with a disability usually poses unique challenges for everyone involved in the child's life, especially for the persons responsible for the care of the child (4). This process can be more complicated for mothers as primary caretakers of these children (1). Therefore, the mother is faced with the task of dealing not only with those hassles encountered as a routine part of daily life but also any difficulties related to the child's disability (5,6). Mothers who experience parenting a child with a disability are at increased risk of provoking feelings of loss (i.e. of the perfect or dreamed-of child, and of one's personal freedom), helplessness (i.e. experiencing high stress,

not being able to change the situation and not being able to get the help one needs) and failure (i.e. having a child with difficult behavior and not being able to pursue one's personal goals in life) (7). In this way, religious beliefs and spirituality seem to be associated with improved parental mental health, especially for mothers as a main caregiver (8). Spirituality is our ability to stand outside of ourselves and consider the meaning of our actions, the complexity of our motives and the impact we have on the world around us. It is our capacity to experience passion for a cause, compassion for others and forgiveness of self. Spirituality is a process of becoming, not an achievement; a potential rather than a possession (9). Also, spirituality is defined as having coherent beliefs about the higher purpose and meaning of the universe; knowing where one fits within that larger scheme; having beliefs about the meaning of life that shape behavior and provide comfort (10). It seems that spiritual beliefs and attitudes towards child-rearing in mothers can increase their general mental health and coping styles. In this regard,

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there are hundreds of studies in fields of health, mental health and social work that point to the role that religious and spiritual beliefs and practices contribute to resilience in people who experience illness or disabilities (11). As we know, hardiness consists of tendencies toward commitment, control and challenges in response to life events. Persons high in hardiness are curious and active, believe they can influence events, and expect life to present challenges that can be met with personal development (12). So, hardy individuals, like resilient individuals, are more likely to engage in adaptive coping strategies and less likely to utilize maladaptive strategies (11). Given then that spirituality has an important role in adapting to difficulties and in people's search for wholeness and meaning in life, it also can play important roles in the lives of families of children with disabilities. However, when it comes to research in the field (13). The authors found no empirical research on spiritual attitude to child-rearing in the prediction of psychological hardiness in mothers of handicapped children. The question of interest for this research thus became "What role do spiritual attitudes play in the psychological hardiness of mothers of handicapped children?"

Methods

In a correlational study, 60 mothers of handicapped children who were referred to rehabilitation clinics of the University of Social Welfare and Rehabilitation Sciences in Tehran (Sina, Akhavan, Rofeideh clinics) were selected through purposeful sampling and answered the Sanctification of Parents Scale (14) which measures spirituality, and the Personal Views Survey Questionnaire to assess hardiness. The age of participants ranged from 26-67 years ($M=35$, $SD=10.62$); 81.7% of them were housekeepers, 16.7% were employed and 1.7% were retired. From the total sample, 88.3% of

women were living with their husband, 8.3% were divorced and 3.3% were widowed.

The Sanctification of Parents Scale was constructed by Mahoney and colleagues (14), The questionnaire included 20 items divided into two parts: theistic and atheistic questions rating with Likert spectrum intended to assesses God's representation; the spiritual representation in parenting activities in which mothers explain their parenting activity as holy, spiritual or as a manifestation of God (15). Items such as "God has a role in the birth of my child", "I can feel God as a result of being a mother" or "I see God's manifestation in my child" are included as questions. According to Swank and colleagues, this scale has convergence validity with the Universal Religious Scale. An overall Cronbach's Alpha Coefficient of 0.74 for the questioner and a coefficient of 0.79 and 0.70 for fathers and mothers are reported, respectively (15,16). Personal Views Survey (PVS): the PVS is a self-report questionnaire that contains 50 items to assess hardiness, with three subscales including commitment, challenge and control including 16, 17 and 17 items, respectively. The overall reliability coefficients of this instrument have been 0.75 and 0.70, 0.54, 0.52 for every subscale, respectively (17). The data were analyzed by employing SPSS-20 software and descriptive statistics including frequency, means, and standard deviation, Pearson correlation coefficient and regression analysis were used.

Results

The result of analysis showed that the participant's ages ranged from 26 to 67 years (table 1). The result also showed that the majority of mothers lived with their husband. In addition, the frequency of boys was higher than the girls. The number of family members is also included in the table (1).

Table 1. Demographic characteristics

| Characteristics | N | Percent |
|-----------------|-------------------|---------|
| Age | 20-30 | 16.66 |
| | 30-40 | 56.66 |
| | 40-50 | 18.3 |
| | 50-60 | 3.3 |
| | Above 60 | 5 |
| Marital status | Live with husband | 88.3 |
| | Divorced | 8.3 |
| | widowed | 3.3 |
| Child gender | Boy | 53.3 |
| | Girl | 28.3 |
| | Not pointed | 18.3 |
| Family members | 3 and less | 28.33 |
| | 4 or 5 | 66.66 |
| | 6 and more | 5 |

Descriptive statistics including mean, standard deviation, minimum, maximum and Cronbach's Alpha" are shown in table (2). The mean score on the SPS and PVS were M=121 (SD=16.67) and M=94.91

(SD=15.74), respectively. Also, the mean score on the PVS subscales of commitment, control, challenge were M=32.88 (SD=6.65), M=37.25 (SD=6.08), M=26.85 (SD=5.16), respectively.

Table 2. Descriptive statistics

| Variables | M | SD | Min | Max | α |
|--------------------|-------|-------|-----|-----|----------|
| Spiritual attitude | 121 | 16.67 | 71 | 139 | 0.94 |
| Hardiness | 94.91 | 15.74 | 43 | 119 | 0.80 |
| Commitment | 32.88 | 6.65 | 13 | 47 | 0.72 |
| Control | 37.25 | 6.08 | 19 | 48 | 0.67 |
| Challenge | 26.85 | 5.16 | 15 | 40 | 0.69 |

The result of Pearson's correlation analysis indicated that there was a significant relationship between the spiritual attitudes to child-rearing and

hardiness in mothers ($r = 0.47$). These results are presented in table (3).

Table 3. Correlation coefficients between spiritual attitude to child rearing and hardiness

| Variables | Indexes | | |
|---------------------|------------|-------------------------|-------|
| Predictive | Criterion | | |
| spiritual attitudes | Hardiness | Correlation coefficient | sig |
| | Commitment | **0.47 | 0.000 |
| | Control | **0.42 | 0.001 |
| | Challenge | 0.20 | 0.123 |
| | | *0.28 | 0.028 |

**P<0.01, *P<0.05

In addition, the result of Pearson's correlation test indicated that there was a significant association between the spiritual attitudes and some of the subscales of hardiness scale and between the

spiritual attitude to child-rearing and commitment ($r=0.42$) and challenge ($r=0.28$). However, there was no significant relationship between the spiritual attitude to child-rearing and control ($r=0.20$).

Table 4. Predicting hardiness by Spiritual Attitude to Child rearing

| Predictive variable | Indexes | | | | | | | |
|---------------------|---------|------|--------|-------|--------------|---------|-------|-------|
| | R | RS | F sig | SE | Coefficients | | t | Sig |
| | | | | | B | β | | |
| Constant | - | - | - | 13.35 | 40.79 | - | 3.055 | 0.003 |
| spiritual attitudes | 0.47 | 0.22 | 16.737 | 0.109 | 0.447 | 0.473 | 4.091 | 0.000 |

An inspection of table (4) reveals that spiritual attitude to child-rearing explains 22 percent of the variance in hardiness, thus, 22 percent of hardiness in mothers can be predicted by spiritual attitudes.

Discussion

The aim of this study was to examine the relationship between the spiritual attitudes to child-rearing and hardiness in mothers of handicapped children. The results also indicated that there was a significant relationship between the spiritual attitudes to child-rearing and hardiness. Therefore, the spiritual attitudes may explain some variance of hardiness in mothers. These findings are in agreement with the findings of Dollahite, Marks and Olson (18), Tarakeshwar and Pargament (19), skinner et al (20), treloar (21) Miltiades and Pruchno (22) Marshall (23), Denise, Poston and Turnbull (11), Haimour and Abu-Hawwash (24) who also reported that spirituality and religion are

important sources of strength when adjusting to disability-related problems in mothers of children with disabilities. Child disability may be viewed as a family trauma which may lead to family crisis. In this way, parents particularly the mothers as the main caregivers of disabled children need meaning and spiritual attitudes and need to be patient and tolerant in order to adjust to all the difficulties of disabled child-rearing and cope with their child's needs. In these situations, spirituality enhances an individual's understanding to cope with the condition and overcome the problems.

Individuals who believe in spirituality seek God's grace and help in difficult time. They feel that child-rearing is as a God's test, gift, mission, and meaningful duty. This causes them to have more control over the situation, to be more active in coping with events and be more committed to their task. They are generally psychologically tougher and more active in their coping strategies. Other

researchers have shown that many parents experience positive gains including personal growth, improved relationships with others, and increased patience and empathy as a result of raising a child with disability (25,26).

Conclusion

To investigate the relationship between the spiritual attitudes to child-rearing and hardiness in mothers of handicapped children we found that the mothers' spiritual attitudes toward raising their children can be a powerful mental source that helps them to be patient and resistant. It helps them to adjust to and cope with their child's needs by

hoping on God bless when considering mothering as a meaningful activity.

Acknowledgement

We gratefully acknowledge the very helpful assistance of the managers and personnel of Rofeideh, Akhavan and Sina rehabilitation clinics and the research committee of the University of Social Welfare and Rehabilitation Sciences.

This research was approved by the Research Committee of Student Researches of the University of Social Welfare and Rehabilitation Sciences.

References

1. Young YS, Moon HW, Rah UW, Lee IY. Psychological characteristic of mothers of children with disabilities. *Yonsei Medical Journal*. 1996;6:380-4
2. Burrell B, Thompson, B., & Sexton, D Predicting child abuse potential across family types. *Child Abuse and Neglect*. 1994;18 1039-49.
3. Brown RI, Adam-Crisp, J.M, Wang, M, Iarocci, G. Family Quality of Life When There Is a Child with a Developmental Disability. *Journal of Policy and Practice in Intellectual Disabilities* 2006;4: 238-45.
4. Mc Conkey R, Truesdale-Kennedy M, Chang MY, Jarrah S, Shukri R The impact on mothers of bringing up a child with intellectual disabilities: A cross-cultural study. *International journal of nursing studies*. 2008;45(1):65-74.
5. Fewell RR, Vadasy PF. Families of handicapped children: Needs and supports across the life span: Pro-Ed; 1986.
6. Parke RD. Fathers, families, and support systems: Their role in the development of at-risk and retarded infants and children. *Families of handicapped persons: Research, programs, and policy issues* 1986:101-13.
7. Olsson MB, Wang PH. Depression in mothers and fathers of children with intellectual disability. *Journal of Intellectual Disability Research* 2001;6:535-43.
8. Ekas NV, Whitman TI, Shivers C. Religiosity, spirituality, and socioemotional functioning in mothers of children with autism spectrum disorder. *Journal of Autism and Developmental Disorders*. 2009;39:707-19.
9. Underwood LG. A Working Model of Health: Spirituality and Religiosity as Resources: Applications to Persons with Disability. *Journal of Religion, Disability & Health*. 1999;3(3):51-71.
10. Peterson C, Seligman MEP. *Character strengths and virtues: A handbook and classification*. Washington, DC: American Psychological Association; 2004.
11. Poston DJ, Turnbull AP. Role of Spirituality and Religion in Family Quality of Life for Families of Children with Disabilities. *Education and Training in Developmental Disabilities*. 2004;39(2):95-108.
12. Kobasa SC, Maddi SR, Puccetti MC, Zola MA. Effectiveness of hardiness, exercise and social support as resources against illness. *Journal of Psychosomatic Research*. 1985;29(5):525-33.
13. Smith DJ. *Rehabilitation Counselor Willingness to Integrate Spirituality into Client Counseling Sessions*. New York: Faculty of the Graduate School of the State University of New York at Buffalo; 2007.
14. Mahoney A, Pargament KI, Jewell T, Swank AB, Scott E, Emery E, et al. Marriage and the spiritual realm: The role of proximal and distal religious constructs in marital functioning. *Journal of family psychology*. 1999;13(3):321-38.
15. Swank A, Mahoney A, Pargament K. A sacred trust: Parenting and the spiritual realm. Annual Meeting of the American Psychological Association 2000.
16. LeRoy MA. *The role of sanctification of parenting in married couples perceptions of coparenting*. United States: Bowling Green State University; 2009.
17. Kobasa SC. Stressful life events, personality, and health: an inquiry into hardiness. *Journal of personality and social psychology*. 1979;37(1):1-11.
18. Dollahite DC, Marks LD, Olson MM. Faithful fathering in trying times: Religious beliefs and practices of Latter-day Saint fathers of children with special needs. *The Journal of Men's Studies*. 1998;7(1):71-93.
19. PK. TN. Religious coping in families of children with autism. *Focus on Autism and Other Developmental Disabilities*. 2001;16(4):247-60.
20. Skinner DG, Correa Vivian, Skinner Martie, Bailey Jr, Donald B. Role of religion in the lives of Latino families of young children with developmental delays. *Journal of Information*. 2001;106(4):297-313.
21. Treloar LL. Disability, spiritual beliefs and the church: the experiences of adults with disabilities and family members. *Journal of Advanced Nursing*. 2002;40(5):594-603.
22. Miltiades H, Pruchno R. The effect of religious coping on caregiving appraisals of mothers of adults with developmental disabilities. *The Gerontologist*. 2002;42(1):82-91.
23. Marshall ES, Olsen SF, Mandelco BL, Dyches TT, Allred KW, N. S. "This is a spiritual experience": Perspectives of Latter-Day Saint families living with a child with disabilities. *Qualitative Health Research*. 2003;13(1):57-76.
24. Haimour AI, Abu-Hawwash R. Evaluating quality of life of parents having a child with disability. *International Interdisciplinary Journal of Education*. 2012;1(2):37-43.
25. Hastings RP, Taunt HM. Positive perceptions in families of children with developmental disabilities. *American Journal of Mental Retardation*. 2002;107:116-27.
26. Pakenham KI, Sofronoff K, Samios C. Adjustment in mothers of children with Asperger syndrome. *Autism*. 2005;9:191-212.