This study investigated how various types of social support serve as moderators of stress for mothers (N=45) of moderately mentally retarded, school-aged children attending a public school special education program in south Alabama. Subjects were administered the Questionnaire on Social Support, which examines degree of support and subject satisfaction with degree of support in three areas: intimate relationships; friendships; and community or neighborhood support. A significant correlation was found between satisfaction with intimate support and maternal coping ability, while a weak correlation was exhibited between satisfaction with friendship support and maternal coping ability. No significant correlation existed between satisfaction with community support and maternal coping ability. Mothers expressing greater satisfaction with intimate and friendship support were more likely to successfully cope with stress. It was concluded that perceptions of satisfaction or dissatisfaction with family resources may exert a considerable influence on the expression of family stress. Includes 19 references. (DB)
Social Support and Stress of Mothers of Mentally Retarded Children

Thomas A. Wood, Ed.D.
Auburn University

Samuel W. Flynt, Ed.D.
Auburn University at Montgomery

Presented at the 98th Annual Meeting of the American Psychological Association, Boston, MA, August, 1990.

Running head: SOCIAL SUPPORT
SOCIAL SUPPORT AND STRESS OF MOTHERS OF MENTALLY RETARDED CHILDREN

In the field of mental retardation recent emphasis on the family has led to research focused on family adaptation to stress (Wikler, 1966). One aspect of the family's ability to cope with stress is the concept of social support (O'Connor, 1983; Rowitz, 1985).

A frequently cited definition of social support by Cobb (1976) emphasizes personal interactions which lead a person to feel cared for, valued, and included in mutually dependent relationships. Research on families with a mentally retarded child has found that more supportive social networks are associated with improved parental well-being and more positive attitudes about family life (Dunst, Trivette, & Cross, 1986). Numerous ecological sources of this support have been identified (Henderson, Byrne, & Duncan-Jones, 1981) and categories of social support have been developed that reflect common characteristics of support sources. These include intimate relationships, friendships, and community support (Crnic, Greenberg, Robinson, & Ragozin, 1984).

Studies of families with a handicapped child have found intimate relationships to be a major source of support in buffering the effects of stress. Friedrich (1979), conducted a study of 98 mothers of handicapped children of which approximately 50% had mental retardation. He found that marital satisfaction was the best overall predictor of coping behavior. Blacher, Nihira, and Meyers (1987) reported that
mothers of children with severe mental retardation identified their spouse as the greatest source of social support.

In much of the social support literature a distinction is seldom made between children with mild, moderate, severe, and profound levels of mental retardation. Research, however, has found family functioning to vary as a result of severity of handicapping condition of the child. In a study by Donovan (1988), for example, mothers of children with autism and mothers of children with mental retardation had significant differences in perceived stress scores and coping behaviors. The mothers of children with autism had higher levels of stress and relied more on formal sources of social support to alleviate stress. Blacher, et.al (1987), reported that families with a severely retarded child had more difficulties with family adjustment and daily life than families with a moderately or mildly retarded child. Farber (1959), found that greater marital conflict and more problems in general were associated with families of children with severe mental retardation. The research that has been conducted to date points to severity of handicapping condition having an impact on family stress and coping behaviors.

Satisfaction with social support has recently been recognized by researchers as a significant factor in family adaptation to stress (Barrera, 1981). Affleck, Tennen, Allen, and Gershman (1986) found parents' positive adaptation to high-risk infants was
more closely related to satisfaction with social support than the amount of support utilized. Dunst, et.al. (1986) conducted a study that included parents of mentally retarded preschoolers and found satisfaction with social support to be significantly related to parent's physical and emotional health and overprotection of the child. Parents who were more satisfied with social support were less protective of their child.

A paucity of information exists concerning how parents of school-aged mentally retarded children perceive the adequacy of social support available to them. The purpose of this study was to investigate how various types of social support might serve as a moderator of stress for parents of moderately mentally retarded, school-aged children. Parental satisfaction with social support, felt to be central to successful adaptation, was also examined.

**METHOD**

**Subjects**

The subjects were mothers of students with moderate mental retardation attending a public school special education program in South Alabama. Ninety mothers were contacted by mail to request their participation and 45 responded affirmatively for an acceptance rate of 50%. The subjects ranged in age from 24 to 60 years (mean age = 39.24 years). Ethnic groups represented in the sample were white (25 subjects) and black (20 subjects). Twenty-five subjects were married. The children ranged in age from 80 to 248 months, (mean age = 167.77 months). There
were 28 males and 17 females.

**Procedure**

Permission to participate forms and demographic information was collected by return mail. Information on perceived stress and social support was obtained through telephone interviews. The Questionnaire on Resources and Stress - Short Form (QRS-F) (Friedrich, Greenberg, & Crnic, 1983) was used to measure perceived maternal stress levels. The QRS-F, an often used instrument (Donovan, 1988; Scott, Sexton, & Wood, 1986) consists of 52 items in its revised form. Friedrich, et.al., (1983) through item analysis and factor analysis identified four independent factors: parent and family problems, pessimism, child characteristics, and physical incapacitation. Factor I, parent and family problems, was utilized in this study as a measure of a mother’s coping ability. Previous research (Friedrich, Wilturner, & Cohen, 1985) found this factor to assess several variables that are indicative of coping behavior.

The Questionnaire on Social Support (QSS), as adapted by Crnic, et.al., (1984), was utilized as a measure of support sources. It is comprised of 16 items that reflect support from 3 factors: Intimate Relationships, Friendships, and Community or Neighborhood support. Each item contains two parts, one addresses degree of support, and the other pertains to the subject’s satisfaction with the degree of support.
RESULTS

The data obtained from the two instruments administered in this study were analyzed with Pearson product moment correlations and a stepwise multiple regression analysis. Pearson correlation coefficients were computed for QRS-F Factor I and each of the subscales of the QSS. Moderate correlation coefficients were found for Intimate Support (-.40 p < .01) and Satisfaction with Intimate Support (-.39 p < .01). The only other subscale approaching significance was Satisfaction with Friendship Support (-.25 p = .052). A stepwise multiple regression analysis was also computed for the QRS-F Factor I score and each subscale score of the QSS to determine the predictive contribution of sources of support and satisfaction with sources of support to maternal coping ability. The results of the regression analysis found Intimate Support to be the only significant predictor variable, F(1,41) = 7.28, p < .01, R = .15. This indicates that intimate support is a better predictor of maternal coping ability than other sources of support. Although the overall amount of variance accounted for is relatively small (15%), this finding does underscore the contribution of intimate sources of support to the moderation of family stress related to the presence of a child with mental retardation.

DISCUSSION

The results indicate that various sources of social support have an effect on maternal coping ability as measured by Factor I of the QRS-F. Mothers of children...
with moderate mental retardation were found to rely more on intimate sources of social support to cope with stress. This finding concurs with previous studies that have viewed persons with mental retardation as a homogeneous group (McKinney & Peterson, 1985; Friedrich, et.al, 1985). These researchers found that spousal support and marital satisfaction exerted considerable influence on the family's adaptation to stress.

Previous researchers (Barrera, 1981; Affleck, et.al., 1986) have contended that satisfaction with support is a fundamental aspect of the construct of social support. The results of the present study lend support to this contention with regard to intimate support. A significant correlation was found between satisfaction with intimate support and maternal coping ability, while a weak correlation was exhibited between satisfaction with friendship support and maternal coping ability. No significant correlation existed between satisfaction with community support and Factor I scores on the QRS-F. Mothers expressing greater satisfaction with intimate and friendship support were more likely to successfully cope with stress.

The results of this study would warrant both quantitative and qualitative analyses of social support and other family resources by practitioners working with mothers of children with moderate mental retardation. Family stress theory has long recognized the importance of the family's perception of the stressor(s) and family resources influencing the level of stress in a family (Hill, 1949). Flynt & Wood (1989) reported that mothers of moderately retarded children experience high levels of family
stress across the life cycle of the child. Variations in stress levels were attributed to differences in maternal utilization of family resources in coping with stress. The present study finds that perceptions of satisfaction or dissatisfaction with family resources may exert a considerable influence on the expression of family stress.
SOCIAL SUPPORT

REFERENCES


