

RESEARCH PREVIEW

A Preliminary Synthesis of Quantitative Research: Helping Parents of Children with Developmental Disabilities with Psychological Distress

George H.S. Singer, Brandy Ethridge, Sandra Aldana, & LaQuita Spivey—Gevirtz Graduate School of Education, University of California at Santa Barbara

BOTTOM LINE

We were able to locate 33 studies which compared groups of parents who received supports with a group of parents who did not get these supports. All of these studies looked at parents' feelings of depression. Three forms of support were the most common: 1) behavioral parent training, 2) coping skills education, and 3) combined interventions including both parent training and coping skills education and, sometimes, other additional supports such as respite care. All three methods consistently helped parents to feel better although the improvement was fairly small when only one kind of support was given. When combined these methods were more effective at helping parents with distress. There are now scientifically proven interventions for helping mothers and, perhaps fathers, in the short term.

Beach Center on Disability
Making a Sustainable Difference in Quality of Life



ACTION STEPS

- Understand that feelings of depression are a normal part of life. They are a concern if they happen very often or if they last for more than a week at a time.
- Learn the signs of depression and get help if you or a family member has them for more than a week or has them often.
- Recognize that children's behavior problems are often a source of stress for parents and that learning how to manage your child's behavior can bring big relief.
- Look for professionals who are trained in the methods that are summarized here: behavioral parent training and cognitive behavioral therapy (also called coping skills education here).
- Recognize that it is important to not only do your best for your child but also to take care of yourself, particularly if you are feeling emotional distress.
- Look for a variety of options that fit your preferences and don't stop with just one support if more are available. If you can do both parent training and coping skills education, you may find it to be even more effective.
- Join with other parents to advocate for services that provide these kinds of help in your area if they are not available.

HOW WE DID THIS STUDY

We wanted to take stock of twenty-five years of research on formal ways of supporting parents. One method for getting the big picture when several studies have been done on the same topic is meta-analysis. It is a way to use numbers to indicate how big an impact a form of support has on parents. We searched for studies in many journals and databases and found 33 research reports. We only included studies that compared two or more groups of parents, groups that received a specific kind of intervention to reduce emotional distress and groups that did not receive the treatment. In most cases the parents were assigned to the groups randomly, for example with the flip of a coin. This kind of research is called a "randomized clinical trial" and it is recognized as one major way to determine whether an intervention works. We focused on studies that have tried to help parents with feelings related to depression. We wanted to find out what works and how well they work. We found three families of interventions: a) behavioral parent training, b) parent coping skills education, and c) interventions combining parent training with parent coping skills education. These studies were done in several different countries with the majority from the U.S., Great Britain, and Australia. The studies were mostly of mothers of children with developmental disabilities, mostly mental retardation and autism. A small number of studies also included fathers. We used a statistic for summarizing the outcomes of these studies. It is called an effect size, a statistic in which the higher the number, the bigger the difference the treatment made when the results of similar studies were combined. Overall we wanted to be able to say whether or not there are scientifically proven interventions to help parents with emotional distress.

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KEY FINDINGS

In general there is good news. In all but a few of the studies, parents who received an intervention felt less depressed as a result. When parents learned behavioral skills for managing their children's problem behavior, it often also helped them, the parents, to feel better too. We identified a second family of studies which were also as effective as behavioral parent training for lowering depression. Coping skills education is based on a tradition in psychology known as cognitive-behavioral therapy. These cognitive behavioral methods included learning and practicing skills such as relaxation, keeping track of personal causes of stress, problem solving routines, communicating effectively, using social support and changing negative thoughts and feelings. The interventions that were most effective combined both behavioral parent training (BPT) and cognitive behavior coping skills education (CBT) for parents to help themselves as well as their children. The most successful interventions also included other services in addition to BPT and CBT such as case management and respite care. The effects of individual interventions were positive but not very strong when offered alone. When the interventions were combined the effects were greater. In all of the studies some people responded to treatment better than others so that these methods are generally helpful but may not be sufficient for some parents. Nonetheless, there is enough high quality evidence that we are confident in saying that there are science- based proven methods for helping many mothers with their emotional distress. Although the data offers hope, we are less certain about fathers because there are fewer studies that included them. These methods are consistently helpful across studies and they have medium levels of effectiveness when combined. This collection of research studies is genuine reason for hope about supporting families effectively.

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This Research Preview reflects preliminary findings from research conducted by the authors at the Graduate School of Education, University of California at Santa Barbara. The final results may differ following more in-depth analyses of our research and may vary in some details from the preliminary data reported in this document.