



## Depression and Mental Health Status of Parents of Children with Special Needs Residing in Bilaspur District of Himachal Pradesh (HP)

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### ABSTRACT

*The main purpose of this study was to investigate depression and mental health status of parents of children with special needs (CWSNs) residing in bilaspur district of Himachal Pradesh. Survey methodology was adopted for the study and random sampling technique was used to select the sample which comprised of 40 parents of children with special needs residing in Himachal Pradesh district. The tools used in this study were Depression Scale by Dr. Karim and Dr. Tiwari (1986) and Mental Health Check-List constructed by Dr. Kumar (1992). The responses were analyzed by using t-Test and Correlation Coefficient (r). The results show 38% of the parents of CWSNs had no depression., 26% had little bit depression, 10% had moderate depression, 2% extremely depressed and 4% were quite a bit depressed. There was no significant gender difference in the level of depression of parents of children with special needs. The results of the study further indicated the mental health status of parent , 10% parents had average mental health, 45% parents had very good mental health, 37.5% parents had good mental health, 5% parents had poor mental health and only 2.5% parents had very poor mental health. The study further revealed that there was no significant gender difference in the level of mental health status of parents of CWSN. There was low correlation between depression and mental health status of parents of children with special needs.*

**KEYWORDS:** Depression, Mental Health, Parents of Children with Special Needs

### Introduction

Depression is a constant feeling of sadness and loss of interest, which stops you doing your normal activities. People experiencing depression may have feelings of dejection, hopelessness and, sometimes, suicidal thoughts. It can either be short term or long term. It is not uncommon for all individuals to travel through periods of sadness, adjustment or other difficulties. Situational depression tends to develop as a reaction to prolonged exposure to chronic stress, physical, emotional and/or environmental or significant life changes/losses and a person's difficulty adjusting or handling life's challenge. Periods of experiencing these sorts of emotions, especially during difficult times, don't necessarily signify clinical or maybe situational depression. Clinical depression is defined more as biologically based where symptoms would be present regardless of an individual's circumstances or satisfaction with life.

Parents of children with special needs tend to be faced with a continuous barrage of challenges from societal isolation, financial strain, difficulty finding resources to outright exhaustion or feelings of confusion or burn out. Over time, if these circumstances aren't addressed and relief isn't found a cognitive and, sometimes, biological change may start to require place. Chemicals within the brain like Serotonin and Dopamine regulate our responses to pleasure, hurt and help us navigate our emotions/perceptions of the planet around us begin to decrease as we chronically experience negative emotions and/or situations. It's also important to notice that after prolonged decrease in these chemicals thanks to exposure to chronic emotional turmoil, stress and isolation, the brain may begin to permanently alter and actually begin to supply less and fewer of those chemicals. This means it'll become harder and harder for a private to recover or return to "normal functioning". The longer we're exposed to worry or negative emotions and thinking, the less able we become at dealing with those feelings.

Mental health refers to our cognitive, behavioural, and emotional wellbeing – it's all about how we expect, feel, and behave. The term 'mental health' is usually wont to mean an absence of a mental disturbance. Mental health can affect daily life, relationships, and even physical health. Mental health also includes a person's ability to enjoy life – to realize a balance between life activities and efforts to achieve psychological resilience. "Emotional, behavioural, and social maturity or normality; the absence of a mental or behavioural disorder; a state of psychological well-being during which one has achieved a satisfactory integration of one's instinctual drives acceptable to both oneself and one's social milieu; an appropriate balance of love, work, and leisure pursuits." According to the WHO (World Health Organization), mental health is a state of well-being during which the individual realizes his

or her own abilities, can deal with the traditional stresses of life, can work productively and fruitfully, and is in a position to make a contribution to his or her community.” The most common types of mental illness are anxiety disorders, mood disorders, and schizophrenia disorders.

Being a parent of a child with a disability can be challenging and stressful. Parents of children with a disability – particularly mothers – have been shown to report poorer physical and mental health than mothers of typically developing children. Parenting a child with special needs is challenging. It requires extra effort in time, awareness, and education. These considerations are going to be quite different from one child to subsequent because ‘special needs’ is employed as an umbrella term to encompass anything from light learning disabilities to more severe behaviour issues. Proper diagnoses ensure parents are going to be that specialize in the proper methods and activities for his or her child. Raising a toddler who is mentally challenged requires emotional strength and adaptability. The child has special needs additionally to the regular needs of all children, and foyeys can find themselves overwhelmed by various medical, caregiving and academic responsibilities. Whether the special needs of the kid are minimal or complex, the oldsters are inevitably affected. Support from family, friends, the community or paid caregivers is critical to maintaining balance within the home.

The current study is undertaken with the objective to promote better understanding of problems of parents of children with ID. The aims of the study were to find depression and mental health status of parents of children with special needs residing in bilaspur district of himachal pradesh(hp).

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### Rationale of the study

The rationale for conducting a study on the depression and mental health status of parents of children with special needs residing in Bilaspur District of Himachal Pradesh (HP) is multifaceted and encompasses several key considerations. There is scarcity of studies specifically focusing on the mental health of parents of children with special needs in the Bilaspur District of Himachal Pradesh. Conducting this research fills a critical gap in the literature and provides localized insights that can inform targeted interventions and support services tailored to the needs of this population. The socio-cultural context of Bilaspur District in Himachal Pradesh also influence the experiences and coping mechanisms of parents of children with special needs. Factors such as cultural norms, familial support structures, access to healthcare services, and socio-economic conditions can impact parental mental health outcomes. Examining depression within this specific context provides valuable insights into the intersection of culture, socio-economic status, and caregiving stressors. Investigating the depression and mental health status of parents of children with special needs in Bilaspur District of Himachal Pradesh is warranted due to its potential to generate localized insights, inform culturally sensitive interventions, and improve the well-being of families in the region. Findings from the study can inform the development of evidence-based interventions, support programs, and policies aimed at promoting the mental health of parents of children with special needs in Bilaspur District and beyond. By identifying risk factors, protective factors, and areas of unmet need, the research can guide the allocation of resources and the implementation of targeted interventions to support parental well-being and enhance family resilience.

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### Review of Related Literature

**Woodman, et al. (2014)** The study was conducted to examine the risk of psychological stress among parents of children with developmental disabilities as compared to parents of children without disabilities. Factors leading to elevated stress levels have been identified to be attributed to children’s adopting and conveying problems. The study analyses relativeness between behavioural problems among children and maternal stress among a sample of 176 families with children with disabilities. The study found that interactions between the parent and the child varied across different periods in time and with a constant change in behavioural problems.

**Subramanyam et al (2018)** The aim of the study was to identify psychopathology and coping mechanisms in parents of children with Intellectual disability. The study used interview method on 100 parents visiting outpatient department of a municipal run, tertiary care teaching hospital, the B.Y.L Nair Hospital, Mumbai. The findings stated that, 85% of parents of children with intellectual deficit considered it a major concern in their life. The study concluded that psychopathology such as depression among mother of children with Intellectual disability. The coping mechanism were worse such as fatalism, expressive action and escape avoidance. The psychopathology did not have a correlation with severity of disorder. The parents of girl child considered it a bigger concern as girl child needed protection and care due to the nature of intellectual vulnerability

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### Objectives of the study

1. To find the level of depression among parents of children with special needs residing in bilaspur district of HP.
2. To find the gender difference in the level of depression of parents of children with special needs residing in bilaspur district of HP.
3. To find the level of mental health status among parents of children with special needs residing in bilaspur district of HP.
4. To find the gender difference of mental health status of parents of children with special needs residing in bilaspur district of HP.
5. To find the relation between the depression and mental health status among parents of children with special needs residing in bilaspur district of HP.

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### Hypothesis of the study

1. The parents of children with special needs residing in bilaspur district of HP have extreme high level of depression.

2. There is a significant gender difference in the level of depression of parents of children with special needs residing in bilaspur district of HP.
3. The parents of children with special needs residing in bilaspur district of HP have high level of mental health status.
4. There is a significant gender difference in the mental health status of parents of children with special needs residing in bilaspur district of HP.
5. There is a significant relation between the depression and mental health status among parents of children with special needs bilaspur district of HP.

## Research Methodology

In this study the researcher intends to investigate the depression and mental health status of parents of children with special needs residing in bilaspur district of HP. Thus, a descriptive survey method was used in this study.

### Sample for the study

In the present study, a sample of 40 parents has been selected through Random Sampling.

### Tool used

For the purpose of the accomplishment of objectives, the tools of Depression Scale by Dr. Shamim Karim and Dr. Rama Tiwari 1986 and Mental Health of Check-List constructed by Dr. Promod Kumar 1992 were used.

## Objective Wise Results

### Research objective 1

To find the levels of depression among parents of children with special needs residing in bilaspur district of HP.

Research objective 2

S. No.	Range of raw score	No. of parents	percentage	Levels of depression
1	110-170	19	38%	Not at all
2	171-231	13	26%	A little bit
3	232-292	5	10%	Moderately
4	293-352	1	2%	Extremely
5	353-413	2	4%	Quite a bit

The table 1 indicates that out of 40 parents of children with special needs residing in bilaspur district of HP.19 parents have no depression, 13 parents have little bit depression, 5 parents have moderate level of depression, 1 parent has extreme level of depression and 2 parents have quite a bit depression. Thus it can be concluded that level of depression of 19 parents is not at all.

Therefore, Hypotheses No. 1 stating "The parents of children with special needs have extreme level of depression" is rejected.

### Research objective 2

To find the gender difference in the level of depression of parents of children with special needs residing in bilaspur district of HP.

**Table 2**

Value of mean, Standard Deviation and t-value for male and female parents of special children.

	sex	N	Mean	Std. Deviation	Std.Error Mean	df	t	Significant
Depression	male	8	179.00	58.26	20.60	38	.91	Not significant
	female	32	201.34	62.60	11.06			

The table 2 shows that the mean value of score for male and female respondent lies between

179.00 and 201.34, the value of standard deviation was 58.26 and 62.60 further the t-test comes to .914 which is not significant at 0.05 level. This shows that there is no significant difference in the level of depression among parents of children with special needs Thus the level of depression between male and female parents do not differ statistically from each other. So the null hypothesis is rejected.

### Research objective 3

To find the level of mental health status among parents of children with special needs residing in bilaspur district of HP.

**Table 3**

S.NO	Range of raw score	No. of parents	percentage	Level of mental health
1	10-16	4	10%	Average
2	17-23	18	45%	Very good
3	24-30	15	37.5%	Good
4	31-37	2	5%	Poor
5	38-44	1	2.5%	Very poor

The table 3 indicates that out of 40 parents of children with special needs residing in bilaspur district of HP, 4 parents have average mental health, 18 parents have very good mental health, 15 parents have good mental health, 2 parents have poor mental health and 1 parent has very poor mental health. Thus it can be conclude that the mental health status of 18 parents is very good. So the null hypothesis is rejected.

#### Research objective 4

To find the gender difference of mental health status of parents of children with special needs residing in bilaspur district of HP.

**Table 4**

Value of mean Standard Deviation and t-value for male and female parents of children.

	Sex	N	Mean	Std. Deviation	Std.error Mean	df	t	Significant
Mental health status	male	8	24.13	5.08	1.79	38	.44	Not significant
	female	32	23.03	6.38	1.12			

The table 4 shows that the mean value of score for male and female respondent lies between

24.13 and 23.03 , the value of standard deviation was 5.08 and 6.38 further the t-test comes to

.44 which is not significant. This shows that there is no significant difference in the level of mental health status among parents of children with special needs residing in bilaspur district of HP. Thus the level of mental health status between male and female parents do not differ statistically from each other .So the null hypothesis is rejected.

#### Research objective 5

To find the relation between the depression and mental health status among parents of children with special needs residing in bilaspur district of HP.

**Table 5**

Correlation between depression and mental health status

Variables	N	r	Level of significance
Depression Mental health status	40	.31	significant

The table 5 indicates that correlation between depression and mental health status of parents of children with special needs residing in bilaspur district of HP is .30 and significant. The result indicates that there is low correlation between depression and mental health status of parents of children with special needs. In the light of present finding, null hypothesis has not been rejected.

## Discussion

The current study has unfolded psychological issues of parents of children with ID. This study sheds light on the often overlooked yet critical issue of the mental health status of parents caring for children with special needs in Bilaspur District, Himachal Pradesh. Through comprehensive analysis and exploration, it becomes evident that the burden of caregiving can significantly impact parental mental well-being, with depression emerging as a prevalent

concern. The findings underscore the urgent need for tailored interventions and support services that acknowledge the unique challenges faced by these parents within the cultural and socio-economic context of Bilaspur District. The present study revealed that out of 40, 4% parents of children with special needs residing in Bilaspur district of HP have quite a bit of depression. There is no significant gender difference in the level of depression among the parents of children with special needs. And out of 40, 2.5% parents have very poor mental health status. There is no significant difference in the level of mental health status among parents of children with special needs. There is low correlation between depression and mental health status of parents of children with special needs.

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## Conclusion

In essence, the study on depression and mental health status among parents of children with special needs in Bilaspur District of Himachal Pradesh contributes valuable insights to the fields of special education, mental health, and family support services. By addressing the unique needs of this population, the research has the potential to improve the well-being of parents, enhance family resilience, and ultimately, promote the holistic development of children with special needs. Ultimately, this research serves as a catalyst for action, urging stakeholders to prioritize the mental health needs of parents of children with special needs and implement targeted interventions that promote resilience, well-being, and familial harmony. Through collective efforts and a commitment to fostering understanding and support, we can strive towards creating a more inclusive society where all families, regardless of their circumstances, can thrive and flourish.

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