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## Stress and support in relation to parental self: A comparison between mothers of children in cancer treatment and mothers of healthy children

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### Abstract

This study investigated the impact of parental self-representation on perceived stress and support in mothers of children in cancer treatment compared to mothers of healthy children. Measures: the Perceived Support Scale (De Caroli & Sagone, 2013), the Perceived Stress Scale (Cohen et al., 1983), and Semantic Differential Technique for Parental Self (De Caroli & Sagone, 2011). Results: Mothers of children in cancer treatment obtained higher levels of stress and perceived support than control group; additionally, mothers of children in cancer treatment showed a less positive image of parental self than control group. Negative correlations between levels of perceived stress and parental self and positive correlations between levels of support and parental self were found.

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### 1. Introduction

Several empirical evidences suggested that parents of children with cancer reported higher levels of post-traumatic stress and dysfunctional coping strategies than parents of healthy children (see Barakat et al., 1997; Brown, Madan-Swain, & Lambert, 2003; Norberg et al., 2006; Han et al., 2009; Bennett et al., 2013). In fact, using the Impact of Event Scale, the Posttraumatic Stress Disorder Reaction Index, the Assessment of Life Threat Intensity Questionnaire, and the State-Trait Anxiety Inventory, Barakat et al. (1997) noted that mothers and fathers of children cancer survivors showed significantly higher levels of posttraumatic stress symptoms compared to parents of healthy children; in addition, family functioning (measured by Family Adaptability and Cohesion Evaluation Scale) and maternal social support were negatively correlated with posttraumatic stress symptoms.

Brown et al. (2003) found that mothers of adolescents cancer survivors, recruited from the Medical University of South Carolina, endorsed higher frequency of posttraumatic stress symptoms (measured with the Posttraumatic

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Stress Index: Pynoos et al., 1987) and reported greater recent and past stressful life events (valued using the Family Inventory of Life Events and Change: McCubbin, Patterson, & Wilson, 1996) than control group; in addition, the more the mothers of cancer survivors expressed an increased conflict and decreased support in the family functioning (measured with the Family Environment Scale: Moos & Moos, 1981) the more they reported a greater frequency of posttraumatic stress symptoms. Likewise, Norberg and her colleagues (2006) examined the relationships among anxiety, coping strategy of social support, and perceived social support in Swedish parents of children with successfully completed treatment for cancer, revealing that, specifically for mothers, anxiety was negatively related to support-seeking strategy and perceived support: in addition, perceived support appeared to be more important for the regulation of anxiety than support-seeking strategy. Furthermore, Han and her colleagues (2009) analysed the coping strategies (using the Coping Health Inventory for Parents: McCubbin et al., 1979) and the psychosocial adjustment (measured with the subscales of the Psychosocial Adjustment to Illness Scale: Derogatis, 1986) in a total of 200 Korean mothers of children with cancer. The authors found that the most helpful coping strategies were the maintenance of family integration and the optimistic definition of the situation; psychological distress was negatively correlated with family integration, cooperation, optimistic definition, communication with other parents, and consultation with healthcare professionals.

More recently, in a group of parents of children treated for brain tumour at the Nottingham University Hospitals (UK), Bennett and her colleagues (2013) found significant correlations among levels of parenting stress (measured by the Parenting Stress Index-Short Form: Abidin, 1995), type of parental locus of control (examined with the Parental Locus of Control Scale: Campis, Lyman, & Prentice-Dunn, 1986), and coping styles (valued with the Ways of Coping Questionnaire: Folkman & Lazarus, 1988). The results revealed that the more the parents of these children used external locus of control, the more they experienced high levels of parenting stress; furthermore, the more they applied the emotion-focused coping strategies (specifically, the strategies of the distancing, accepting responsibility, escape-avoidance, and self-controlling), the more they reported high levels of stress.

Few studies carried out in relation to the impact of parental self on levels of perceived stress and social support was found. In Italian context, De Caroli and Sagone (2013) found that, in relation to the experience of partum as possible stressful factor, the more the primiparous mothers perceived themselves to be supported (specifically, by their friends) and expressed a positive representation of Parental Self (measured by The Semantic Differential Technique: Osgood et al., 1957), the less they obtained high levels of stress (valued with the Perceived Stress Scale: Cohen et al., 1983). In another study, De Caroli and Sagone (2011) showed that the more the parents of disabled children (particularly, with autism syndrome) perceived themselves to be stressed, the more they expressed a negative representation of Parental Self (analysed with the Semantic Differential Technique); in addition, these parents expressed a low perceived support provided by rehabilitation centres and a more negative image of their disabled children. In line with this research interest, the current study investigated the impact of parental self-representation on perceived stress and support in a group of Italian mothers of children in cancer treatment compared to mothers of healthy children. We hypothesized that: 1) mothers of children with cancer will report higher levels of perceived stress and of support than mothers of healthy children, as noted in the abovementioned findings; 2) mothers of children with cancer will show a more negative image of Parental Self compared to mothers of healthy children; 3) finally, the more the mothers (particularly, those of children in cancer treatment) will express a positive representation of self as mothers, the more they will perceive themselves to be supported and the less they will feel themselves to be stressed.

## **2. Methodology**

### *2.1. Participants*

The sample of this research was composed by 100 Italian mothers, divided in 50 mothers of children in cancer treatment and 50 mothers of healthy children as control group. The age of mothers with children in cancer treatment ranged from 24 to 53 years ( $M=37,9$ ,  $sd=5,7$ ) and the age of mothers with healthy children from 21 to

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