



Parenting and family adjustment scales (PAFAS): validation of a brief parent-report measure for use with families who have a child with a developmental disability

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ABSTRACT

Background: Children with a developmental disability are three to four times more likely than their typically developing peers of developing significant emotional and behavioural problems. There is strong evidence to suggest that individual biological and psychological factors interact with family functioning to precipitate and perpetuate these problems.

Aims: This study examined the psychometric properties of a brief measure, the Parent and Family Adjustment Scales (PAFAS) for use with parents of children with a developmental disability.

Methods: A sample of 914 parents of children ($M = 6.27$ years) with a developmental disability participated in the study. Disabilities included Autism Spectrum Disorder and Intellectual Disability

Results: A confirmatory factor analysis supported a 16-item, four factor model of PAFAS Parenting, and an 11-item, three factor model of PAFAS Family Adjustment. The Parenting Scale measures parental consistency, coercive practices, use of encouragement and the quality of parent-child relationship. The Family Adjustment Scale measures parental emotional adjustment and partner and family support in parenting.

Conclusions: The current study indicated that the PAFAS demonstrates promise as a brief measure of multiple domains of family functioning important for families who have a child with a developmental disability.

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What this paper adds

Given that factors such as coercive parenting, emotional adjustment difficulties of carers and relationship conflict between caregivers have been implicated in the development and maintenance of the emotional and behaviour problems of children with developmental disabilities, it is essential that allied professionals have a means for the early identification of these modifiable risk factors. This study found that the Parenting and Family Adjustment Scales (PAFAS) demonstrated promise as a brief outcome measure for assessing change in risk factors associated with family functioning. Due to its brevity and ease of scoring, this measure has the potential to be used at a public health level or in individual or group parenting interventions for parents of children with a disability.

1. Introduction

Children with a developmental disability are three to four times more likely than their typically developing peers of developing significant emotional and behavioural problems (Einfeld, Ellis, & Emerson, 2011). These problems have serious consequences. They can threaten the physical health of children (Borthwick-Duffy, 1994; Nissen & Haveman, 1997), restrict children's access to recreational and educational programs (Parmenter, Einfeld, Tonge, & Dempster, 1998), lead to exclusion from community settings (Borthwick-Duffy, Eyman, & White, 1987; Hill & Bruininks, 1984), and reduce occupational opportunities in the post-school period (Anderson, Lakin, Hill, & Chen, 1992). Behaviour problems not only impact the child, but are also one of the main predictors of parental distress (Floyd & Gallagher, 1997; Mazzucchelli, 2016; Plant & Sanders, 2007), use of respite services (Chan & Sigafos, 2001; Sloper, Knussen, Turner, & Cunningham, 1991), and parents relinquishing the care of their child (Nankervis, Rosewarne, & Vassos, 2011).

1.1. Risk factors for behavioural and emotional problems

While individual biological and psychological factors may place children with a developmental disability at increased risk for developing behavioural and emotional problems, there is strong evidence to suggest that these factors interact with social and environmental factors to precipitate and perpetuate problem behaviour (Oliver, Demetriades, & Hall, 2002; Tonge & Einfeld, 2003). In particular, coercive parenting practices, emotional adjustment difficulties of carers, and relationship conflict between caregivers have been implicated in the development and maintenance of the emotional and behavioural problems of children with developmental disabilities (Chadwick, Kusel, & Cuddy, 2008; Hastings & Lloyd, 2007; Koskentausta et al., 2007). Indeed, studies indicate that children with developmental disabilities are more likely to be exposed to such risk factors than their non-disabled peers (Beck, Daley, Hastings, & Stevenson, 2004). For instance, there is evidence that maternal expressed emotion towards children with an intellectual disability is more negative than expressed emotion towards children without intellectual disability (Beck et al., 2004; Green & Baker, 2011). Ragaldo, Harvinder, Inkelas, Wissow, and Halfon (2004) found that parents of children at risk of developmental delay were more likely to report that they spanked their child than were parents whose child was not at risk of developmental delay. These children have also been found to be at greater risk of maltreatment (Stalker & McArthur, 2012). The impact of adverse parenting practices and family dysfunction on a range of outcomes is well illustrated by the Adverse Childhood Experiences Study (ACES; Gilbert et al., 2015).

The ACES assessed the long-term relationship between childhood experiences, including abuse and household dysfunction with adult outcomes. Abuse, as measured by this study, included yelling, swearing, hitting or grabbing a child, while household dysfunction included living with a parent who had a mental and/or substance use disorder or witnessing a parent being treated violently. This study found that there was an 80% likelihood that a child exposed to one of these behaviours was also likely to be exposed to at least one other (Felitti et al., 1998). In the main, these behaviours represent modifiable risk factors and underline the importance of prevention and early intervention to address the problem, with child-rearing practices, parental adjustment, and family relationships the obvious foci of assessment and modification. To assist with interventions and the planning of services aimed at improving the parenting and social context of children with a disability, it is necessary to have an efficient means of identifying families who exhibit high levels of relevant risk factors such as dysfunctional parenting practices and parental maladjustment.

In terms of parents' personal adjustment, many studies have reported that mothers of children with developmental disabilities have higher levels of stress (Herring et al., 2006) and poorer psychological well-being than other mothers (Barlow, Cullen-Powell, & Cheshire, 2006; Eisenhower, Baker, & Blacher, 2005). Parents often experience grief when they learn that their child has a disability and the process of adapting to disability can be prolonged in nature (Eakes, Burke, & Hainsworth, 1998; Rentinck, Ketelaar, Jongmans, & Gorter, 2007). Significantly, a bidirectional relationship has been found between parenting stress and child behaviour problems: high parenting stress contributing to a worsening in child behaviour problems over time, and child behaviour problems exacerbating parental stress (Neece, Green, & Baker, 2012; Woodman et al., 2015).

1.2. Measuring family functioning in parents of children with developmental disabilities

Developers of evidence-based parenting programs recommend the use of parent and teacher report outcome measures to assist with treatment planning and to monitor the effects of parenting interventions (e.g., Mazzucchelli & Sanders, 2011). Child outcome measures that have been employed in intervention studies for children with a developmental disability include the Child Adjustment and Parent Efficacy Scale—Developmental Disability (Mazzucchelli, Sanders, & Morawska, 2011, see Emser et al., 2016), the Developmental Behaviour Checklist (Einfeld & Tonge, 1995), the Eyberg Child Behavior Inventory (Eyberg & Pincus, 1999), and the

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