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College Students’ Feelings and Sex Differences When Having Children with Disabilities

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College Students’ Feelings and Sex Differences When Having Children with Disabilities

By
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An Honors Thesis Submitted in Partial Fulfillment of the Requirements for Graduation from the Western Oregon University Honors Program

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## Stress Responses and Impact of Coping Self-Efficacy when Working with Children Diagnosed with Learning Disabilities

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Abstract

The current study analyzed how college students responded to the idea of having a child under different scenarios. The hypotheses were that females would react more positively than males to having a child and that individuals would react more positively to having a child when thinking about healthy children as opposed to children with learning disabilities. Additionally, an interaction hypothesis was made which stated that female responses would be more negatively affected by thinking about children with learning disabilities than male responses. The experiment was set up for participants to view a video of parents interacting with their children. The children in the videos were either healthy or diagnosed with learning disabilities. Afterwards, participants rated how much they looked forward to parenthood. Data was analyzed with a 2 x 2 Analyses of Variance. No main effect for sex or video viewed was found nor was an interaction effect found. Implications from this study were discussed such as how females and males view parenthood similarly in college and how strongly opinions about parenthood are formed in college students.

Keywords: Parenting, College, Learning Disabilities
Having Children with Disabilities

College Students Feelings and Sex Differences towards Having Children with Disabilities

**Introduction**

Having a child is a life changing event that college students are all over the board on. Some students already have children, others may be in serious relationships and have considered the idea, while still others are adjusting to not living with their own parents and have not yet imagined becoming a parent. For years researchers have been interested in how having a child affects parent’s emotional states. They want to know if having a child makes people happier. For instance, Belkin (2013) wrote about the different emotions parents experience and cited a daily diary study conducted by the Bureau of Labor Statistics which found that over 60 percent of parents claim that raising a child was “very meaningful” while only 19 percent said they were “very happy” while doing it. Belkin (2013) noted that these results suggest that there is more to parenting than happiness. Another aspect of parenting that college students have to consider is that it likely will not go as expected. One possible unexpected outcome is raising a child with learning disabilities (LDs). According to National Institute of Health (2014) about 4-5% of children are diagnosed with LDs. The purpose of this study was to combine these two aspects of parenting (happiness and disabilities) and analyze how college students respond to the idea of having a child with or without disabilities. The study also examined how female responses compared to male responses under the same conditions.

Seligman (2003), who is known as the father of positive psychology, claimed that there are three different aspects of happiness and well-being which he named the “good life”, the “pleasant life”, and the “meaningful life.” These aspects of happiness are differentiated by how they are obtained. The “good life” is about the experiences that
make someone happy such as playing sports, performing music, or exploring the outdoors. People who prioritize the experiences they enjoy lead “good lives” (Seligman, 2003). Additionally, positive temporary emotions such as glee, bliss, and relaxation define the “pleasant life”, while the “meaningful life” is found when people utilize their strengths and passions to benefit or contribute to something greater than themselves (Seligman, 2003). Parents are less likely to have a sufficient amount of experiences that create “good” or “pleasant” lives due to heavy time restraints; however a “meaningful life”, such as the one over 60% of parents claimed they had, is easier to possess as a parent.

Researchers have explored the lives of parents with children with and without disabilities in order to better understand their well-being. Stress is one factor that appears regularly when researchers analyze the lives of these parents. When people experience chronic stress their bodies react negatively and they become more susceptible to obesity as well as digestive, respiratory, and other types of diseases (apa.org). In turn, when someone’s mind and body is always focused on combating stress they are unable to remain healthy, let alone happy. McDermott, Lawson, Hottinger, Seijo, Schechtman, Shulman, and Shinnar (2015) examined stress in parents with children who had been diagnosed with either a LD or autism. They found that over 20 percent of parents with children who experience learning disabilities suffered from high stress levels while 45 percent of parents with children diagnosed with autism reached those same stress levels. The researchers also found a number of comorbid symptoms related to LDs and autism, which included gastrointestinal problems and issues sleeping. Children who experienced
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these in addition to their disability raised the stress rates in their parents even more (McDermott et al, 2015).

Mothers and fathers tend to have different experiences raising children. Gernstein, Crnic, Blacher, and Baker (2009) choose to evaluate those differences with a daily diary study designed to measure the stress of mothers and fathers of children with intellectual disabilities and they found that mothers spent much more time around children and experienced more stress on a day to day basis. Their study took place over a few years, which included time before and after the children entered school. Once the children were put into the school system, the stress of the parents, especially the mothers, increased dramatically. Another study conducted by Pears, Kim, Healey, Yoeger, and Fisher (2014) set out to examine whether placing children with LD’s into a program designed to help them prepare for school, would help them once they enrolled. Not only was the program beneficial to the children who improved dramatically on their self-regulatory skills as well in other social and cognitive areas, but the program also benefited the parents. The program reduced overall stress levels in the parents and allowed them to be more effective in their parenting lives (Pears et al, 2014).

This current study examined how male and female college students responded to the prospect of having a child. Some participants were forced to think about having children with disabilities before giving their responses while others had ideas of healthy and happy children fresh in their minds. The first hypothesis was that the female college students would have more positive responses to the idea of having a child than male college students. The second hypotheses was that the participants who thought about the healthy children would have more positive responses than those who thought about the
children with disabilities. The third hypothesis was that the female responses would be negatively affected by thinking about the children with disabilities more so than the male responses.

**Method**

**Participants**

In this study there were 40 participants (male = 20) Among these participants 29 were Caucasian, 3 were African-American, 5 were Native Hawaiian, 2 were Latinos, and 1 was Asian. Additionally there were 10 college freshman, 17 sophomores, 9 juniors, and 4 seniors. Participants were recruited through the psychology department at the university by being informed about the studies taking place during their classes and by posters that were places in the psychology building on campus.

**Materials**

The first materials included in this study were the informed consent and demographics which collected information about the race, age, and year in school of each participant. Two different videos were shown to the different groups of participants. One group was shown a short clip of healthy and happy children around the ages of 4-6 who were spending quality time playing with their parents. The second video shown to the other group was around the same length and featured children of the same age range. The children in the second video, however, had been diagnosed with LDs. This was evident because the video took place in a day care facility for children with LDs. Also included in the study was one statement about looking forward to parenthood written on a paper that participants responded to on a Likert scale from 1-5 where 1 represented strongly
agree and 5 represented strongly agree (Appendix). The responses from the statement were collected and analyzed with a $2 \times 2$ ANOVA.

**Procedure**

When the participants arrived they were randomly assigned to a group, as this was a between subjects design. Their random assignment determined whether they were to receive the video about the healthy children or the video about the children with diagnosed LDs. The participant watched the short video and was then responded to the statement about parenting. Once the participants responded to the single statement they received their extra credit slips and left the experiment. From beginning to end the experiment lasted about 5 minutes.

**Results**

This study was analyzed with a two-way ANOVA. The four groups in the study were men who viewed healthy children ($M = 3.10, SD = 1.52$), men who viewed children with LDs ($M = 2.90, SD = .88$), women who viewed healthy children ($M = 3.4, SD = 1.17$), and women who viewed children with LD’s ($M = 3.70, SD = 1.34$). There was no main effect for sex, $F (1, 36) = 1.93, p = .17$, and there was also no main effect for video viewed, $F (1, 36) = .02, p = .90$, in this study. The interaction, which can be seen in Figure 1, was also not significant, $F (1, 36) = .40, p = .53$.

**Discussion**

This study examined how college students responded to the idea of having a child under different circumstances. The first hypothesis, which stated that individuals who were shown videos of healthy children rather than children with learning disabilities
would be more eager for parenthood, was not supported. This suggested that college students do not consider cognitive abilities of children in general as a particularly relevant factor to their own futures as potential parents. The second hypothesis was that women would look forward to having children more than males. This hypothesis was also not supported, which indicated that there is no difference at the college level between males and females in anticipation of parenthood. Finally, the hypothesized interaction effect that females would be more negatively affected by the videos of children with learning disabilities than the males was also not supported. This indicated that there were no differences between the sexes in terms of how they were affected by the videos of children.

The findings from this study for the initial hypothesis that individuals would be less likely to look forward to parenthood when considering children with LDs rather than healthy children did not align with the findings of McDermott et al. (2015), who examined stress levels in parents of children with diagnosed LDs. McDermott et al (2015) found highly elevated stress levels in those parents compared to the normal person. Those results suggest that the college students in my study would have shied away from the thought of parenthood while considering the stress of having a child with LDs, but they did not.

Research done by Edin, Tach, and Mincy (2009) helps shed some light on how the second hypothesis of this study turned out. It was predicted that females would look forward to parenthood more so than males. However, Edin et al’s (2009) research on fatherhood found that even among non-married fathers a great portion are present at the birth of the child and over 99 percent of those interviewed claim to have intentions of
staying involved in the child’s life. These findings support the findings from this study that males look forward to raising children as much as females do before having a child.

The results from the study discussed earlier by Gernstein et al (2009) were not supported by the lack of an interaction effect in this study between the variables of sex and LDs. Gernstein et al (2009) found that mothers experienced far greater daily stress than fathers when parenting children with LDs. This suggests that females’ perceptions of parenthood would be more negatively affected by considering children with LDs than males’ perceptions. However, this relationship did not turn up in the present study, which suggests that there is no difference in how females and males perceive children with LDs.

When considering the implications of this study and how it compares to prior research, it is important to account for the limitations that the study possessed. The key limitation of this study was that it was attempting to manipulate an idea that is well formed in most individuals’ minds. Many participants remarked after completing the study that they were not a good person to test because they either despised being around children or love children unconditionally. In reality, this did not make them unfit for the experiment, but rather typical people who had strong opinions about having a child. Manipulating those opinions with a video clip that lasted only 2 minutes was unsuccessful. This may have been because that short exposure was not a powerful enough treatment to have an effect on their pre-conceived notions about having children. Another potential limitation from this study may have been the content in the videos used for the different conditions. The videos did feature children who were either healthy or unhealthy, but other factors of the videos were slightly different. The video with the healthy children featured them simply playing with their parents. By contrast, the video
with the children with diagnosed LDs included dialogue about why it is important for those children to play and to find environments where they are able to play properly, along with the footage of them playing with their parents. This dialogue may have factored into how participants in that group responded, because it shed light on some of the difficulties parents of children with LDs deal with that participants would have thought about otherwise. Other limitations that may have had an effect on this study include a limited sample size and recruitment of participants through the psychology department.

This study has the potential to be built upon or adjusted in a variety of ways. One variation that could bring interesting results would be if participants took this study prior to having children and then took a follow up test once they were parents to determine whether their previous expectations of parenthood were met. I predict that many participants would give parenting a lower score once they have had children A limitation to that potential study would be that there would be no way to ensure that participants had children with LDs, therefore it would be critical to have a large sample size. Another possible improvement to this study would be to have participants spend 30 minutes with children with or without LDs in place of watching videos about them. This would be a far more powerful experience for the participants and may be more effective in terms of manipulating their response to the dependent variable. Participants who spent time with the children diagnosed with LDs would have a better appreciation for how challenging it can be to work them.

Parenting is never exactly what people believe it is going to be prior to becoming parents and this study and others like it help to shed light on that. Although LDs did not
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strongly factor into participants’ ideas about parenting, the research shows that it is challenging to deal with when it happens and this may be partly because people do not consider the possibility of it beforehand. Cuzzocrea, Murdaca, Costa, Filippello, and Larcan (2016) analyzed how different coping strategies helped parents with LDs deal with the stress. Their research results suggested that the coping strategies most commonly used, such as problem solving and turning to religion, were not useful in reducing stress among parents, but that increased social support was helpful in reducing stress. Similar research done by Sofronoff and Farbotko (2002) found that a training program for parents of children with LDs was able to reduce problem behaviors in the children and increase parental self-efficacy in mothers. Studies such as these can be applied to help parents of children with LDs understand the challenges they face and how to handle them more effectively.

This study set out to examine how gender and the variable of children with LDs affected how college students responded to the idea of having children. The results suggested that males and females view having a child with the same amount of eagerness and that viewing children with LDs rather than healthy children play with their parents had no effect on how the individuals anticipated parenthood. These findings did not support the hypotheses for the experiment but they did provide insight into how college students think about having children. While previous research has shown that fathers can struggle with remaining involved in parenting (Edin et al., 2009) and mothers can struggle with daily stressors of having children, especially those with LDs (Gernstein et al, 2009), this study suggested that they begin in the same place before those events occur. Future research can build on this study by looking into more ways to analyze how
students think parenting will be and by connecting those notions with their actual parenting experiences down the line.
Figure 1

Sex Differences and Feelings Towards Having Children

Healthy | Learning Disabled

Male | Female

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Appendix

Dependent Variable Statement and Response

I look forward to having children.

1 - Strongly Disagree
2 - Disagree
3 - Neither agree nor disagree
4 - Agree
5 - Strongly Agree
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References


Follow Up Study - Stress Responses and Impact of Coping Self-Efficacy when Working with Children Diagnosed with Learning Disabilities

Abstract

This study will analyze college student’s responses about the stress related to working with children diagnosed with learning disabilities (LDs). The experiment will include participants responding to a coping self-efficacy scale, working shortly thereafter with a group of students with or without LDs, and finally rating how stressful they believe working with children diagnosed with learning disabilities to be. The first hypothesis is that participants who work with the group of children diagnosed with LDs will rate working with those children as more stressful than the participants who work with group of children who are not diagnosed with LDs. The second hypothesis will be that those who rate themselves low in coping self-efficacy will rate working with children diagnosed with LDs in a professional environment as more stressful than those who rate themselves high in coping self-efficacy. Finally, the third hypothesis will be that those who rate themselves low in coping self-efficacy will demonstrate a greater increase in their stress responses about working with LD children in a professional environment by being partnered with children diagnosed with LDs, than participants who rate themselves high in coping self-efficacy. Participants will be categorized into high or low coping self-efficacy groups with a median split analysis based off of their responses to the coping self-efficacy scale. Additionally, a 2x2 Analyses of Variance will be used to analyze the data. Implications from this study, such as how to reduce stress in special education teachers, will be discussed.

Keywords: Coping Self-Efficacy, Learning Disabilities, Teaching
Stress Responses and Impact of Coping Self-Efficacy when Working with Children Diagnosed with Learning Disabilities

Introduction

The public school system is currently in flux as teachers are retiring at a faster pace than ever. It is anticipated that half of the nation’s employed teachers from 2009 will be retired by 2019 (ocregister.com). Within the field of approximately 3 million public school teachers, 450,700 of them work in special education (SPED) classrooms (bls.org). Researchers have examined in depth how parents of children with learning disorders (LDs) cope with stress however, little research has been done on how SPED teachers cope with stress. With thousands of job opportunities in this field opening up every year it is important that researchers gain a better understanding of the connection between LDs and stress. One aspect of SPED teaching that has been studied is the importance of coping self-efficacy, which is a specific type of self-efficacy that helps people make multiple efforts towards achieving their goal (Cudre-Mauroux, 2011). The purpose of this study will be to build on previous research on the stress of individuals working with people diagnosed with LDs by analyzing the relationship between coping self-efficacy and stress reactions in college students.

Personal qualities affect how people cope with stress when working with individuals diagnosed with LDs. Cudre-Mauroux (2011) examined scenarios of people coping with the stress of working with individuals diagnosed with LDs and found that the self-efficacy of the caregiver impacted not only their stress but also the outcome of the situation. She found that setbacks and frustrating occurrences can lead to negative outcomes such as burnout in staff members and poor relationships between staff and
student when the teacher is low in self-efficacy. However, having high coping self-efficacy was beneficial in similar frustrating scenarios (Cudre-Mauroux, 2011).

Research has examined the stress that parents of children diagnosed with LDs experience. Brooks and Bouras (1994) found that mothers of more severely disabled children experience high levels of stress, especially as their children age. They also found that mothers of children diagnosed with LDs rated their social support to be low and had particularly negative opinions about the professional support they have received. Additionally, Lam, Giles, and Lavander (2003) found that children who have significant behavioral problems are likely to live with parents who rate highly in expressed emotion (EE), which is a measure that describes how a caretaker of a dependent individual reacts to that person. These high EE caretakers viewed their children’s developmental issues as being more problematic than low EE caretakers. These individuals tended to avoid social support and built up more stress than their low EE counterparts. However, the researchers found that caretakers who rated highly in warmth, rather than EE, were more likely to use adaptive coping strategies and to benefit from social support. The children of these warm caretakers were less likely to have person-related problem behaviors such as difficulties playing with peers or being overly irritable (Lam et al, 2003). By identifying personal qualities, such as warmth, that increase the effectiveness of low EE caretakers, we may be able to improve the quality of social support that is provided to parents of children diagnosed with LDs.

When examining the field of SPED teachers it is important to understand the types of stressors they face on a regular basis, in order to help them cope with that stress and improve as teachers. Research conducted by Markham, Green, and Ross (1996)
found that SPED teachers report that preparing students for problems outside of the classroom is more of a stressor than preparing them for the problems they face in class. This is logical due to the fact that many children with LDs struggle when they are outside of the secure environment of their SPED classroom. Metsapelto, Pulkkinen, and Tolvanen (2010) provided one possible solution which is to break up the school day with various extra circular activities. Their findings indicated that when this was done with regular students, levels of social anxiety and depressive symptoms were reduced. If these tactics were introduced into SPED classrooms and had similar effects on reducing social anxiety in the students they could potentially be helpful in reducing the stress of teachers as they prepare their students for social life outside of the classroom.

Further research conducted by Williams and Gersch (2004) explored the different types of stressors that are experienced between SPED teachers and general teachers. Their research indicated that while general teachers are most often stressed by evaluations from superiors and negative student behaviors, SPED teachers are stressed by a lack of structure in their career. Both groups were also stressed by large amounts of paperwork (Williams & Gersch, 2004). Gersten, Keating, Yovanoff, and Harniss (2001) addressed these issues in their research as well, noting that many SPED teachers leave the field after a short period of time due to frustrations concerning paperwork and administrative support. These types of stressors often go overlooked when considering the SPED teaching profession, but they are compounding the stress that these teachers face every day. Not only must we identify personal qualities that allow SPED teachers to succeed, we must also provide them with an improved structure and support system in order to reduce stress.
The original portion of this study analyzed how viewing videos of children with or without LDs impacted college students’ responses to the statement “I look forward to having children.” No significant results were found. This was likely a result of the videos not being impactful on the participants. Also, participants likely had strong opinions about parenting prior to entering the study that were difficult to change. This follow-up study intends on improving on the original by addressing those faults.

This follow-up study will examine participants’ opinions about the stressfulness of working with children diagnosed with LDs, rather than their opinions about having children. This inquiry will force participants to directly consider the stress that working with children diagnosed with LDs can potentially cause; whereas the original dependent variable about having children was likely influenced by other factors. For example, a participant’s strong desire to love their own child may have prevented them from considering the stress involved with parenting a child diagnosed with LDs. Instead of videos, this study will involve participants actively engaging with children with or without LD diagnoses, which may be a more impactful experience for them. Another difference between this study and the original is that this follow-up study will introduce the concept of coping self-efficacy. Rather than comparing male responses to female responses, this study will compare individuals based on how they rate themselves on coping self-efficacy. The first hypothesis of the follow-up study will be that individuals who are partnered with children diagnosed with LDs will rate working with children diagnosed with LDs in a professional environment as more stressful than the participants who are partnered with children who are not diagnosed with LDs. The second hypothesis will be that those who rate themselves low in coping self-efficacy will rate working with
children diagnosed with LDs in a professional environment as more stressful than those who rate themselves high in coping self-efficacy. Finally, the third hypothesis will be that those who rate themselves low in coping self-efficacy will demonstrate a greater increase in their stress responses about working with LD children in a professional environment by being partnered with children diagnosed with LDs, than participants who rate themselves high in coping self-efficacy.

**Method**

**Participants**

In this study there will be 40 participants who will all be undergraduate college students. These students will be recruited through the Psychology Department via SONA, an online participant recruitment service.

**Materials**

The first required material for this study will be an informed consent form as well as a demographic form that will compile information about the participants’ school level, sex, race, and age. Additionally, I will need the assistance of 16 second grade children: a group of eight children who are diagnosed with LDs and a group of eight children who are not diagnosed with LDs. Also required will be 10 different Dr. Seuss books, as well as questions about the stories, such as “What words rhymed in the story?” or “What happened when the main character tried the Green Eggs and Ham?” There will also be a coping self-efficacy scale for participants to respond to. The participants will also be asked to rate how stressful they view working with children diagnosed with LDs to be on
a Likert scale from 1 to 5 where 1 represents no stress and 5 represents high levels of stress.

The Coping Self-Efficacy Scale used in this study was created by Chesney, Neilands, Chambers, Taylor, and Folkman (2006). The scale includes 26 statements about individuals’ confidence concerning various coping strategies (i.e., positive self-talk and identifying good aspects of negative situations). Participants will respond to all 26 statements on a scale from 0 to 10 where 0 corresponds to an inability to utilize the strategy and 10 corresponds with complete confidence in utilizing the strategy. The sum of their 26 responses will be taken and used in a median split analysis to sort participants between high and low coping self-efficacy.

Procedure

When participants arrive for the study they will first read and sign a form of consent about the study as well as complete a demographics form. The participants will then complete the coping self-efficacy scale (Chesney et al., 2006). Next, they will be randomly assigned to work with a group of children with or without LDs. They will be introduced to the children they will be working with and will then read one of the Dr. Seuss books to the group. Over the course of the study the books will be rotated so that each group of children is read each book only twice. This will help ensure that the children do not simply memorize the answers about one book. Afterward they will be asked to have a discussion with the children about the questions related to the book. This hands on experience working with the children for a short period of time will provide them with the information they need to make their stress ratings later on in the study. Once the discussion about the book is complete, the children will leave the room. Finally,
the participants will be asked to rate how stressful they believe working with children diagnosed with LDs would be on the Likert scale. Once they have given their stress ratings participants will be debriefed about the design and purpose of the study. The study will last approximately 10 minutes.

**Research Design and Data Analysis**

First, participants will be categorized as having high or low coping self-efficacy by a median split analysis. Subsequently, a 2 (LDs: present vs. not present) x 2 (coping self-efficacy: high vs. low) Analysis of Variance will be conducted to examine if either of these variables has an independent effect on – or if they interact to affect – participants’ stress ratings.
References


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