

## COPING STRATEGIES OF FATHERS IN EARLY INTERVENTION SERVICES AND PARENTING STRESS LEVELS

**Joana Calero  
Plaza \***

**Gabriel Martínez  
Rico**

**María Dolores Grau-  
Sevilla**

*Universidad Católica de Valencia San Vicente Mártir (UCV), Spain*

### *Abstract*

*We evaluated the relationship between (1) the coping strategies used by fathers of children receiving early intervention services and (2) the stress fathers experience as a result of child rearing. One-hundred and forty-four fathers from 17 early intervention centers in the Valencian Autonomous Community (Spain) participated in the study. We measured the fathers' parenting stress and coping strategies using the Parenting Stress Index-SF (PSI-SF) and the Adult Coping Response Inventory (CRI-A), respectively. Structural equation models were created to assess the simultaneous effects of child-related variables and the fathers' sociodemographic variables on parenting stress, mediated by the fathers' coping strategies. The coping strategy Positive Reappraisal was negatively related to all the PSI-SF stress factors and the total score. Therefore, more frequent use of Positive Reappraisal strategies was related to lower rates of parenting stress. In addition, the educational level of the father and the type of disability of the child were related to the fathers' parenting stress and the coping strategies they used, principally, Avoidant Coping Styles. Fathers of children receiving early intervention services could benefit from intervention programs that consider coping strategies for parenting stress, contributing, in this way, to increasing the fathers' perception of their parenting competence.*

**Keywords:** coping strategies; early intervention; fathers; father-child relationship; parenting stress

---

Correspondence concerning this paper should be addressed to:

\* Universidad Católica de Valencia San Vicente Mártir (UCV), Facultad de Psicología, Valencia. Address: c/Joaquín Navarro, 37 Burjassot-Valencia, Spain. Tel.: 963637412 E-mail: [joana.calero@ucv.es](mailto:joana.calero@ucv.es)

## **Introduction**

When a child with a disability or risk of developmental delay is born, the family has to regroup and adapt to the new situation, and they might experience emotional suffering due to the expectations parents had for the child and the strategies they have implemented to deal with this new situation (Wiegner & Donders, 2000). Parents of children with disabilities often experience a higher level of stress than parents of children without disabilities, regardless of the type of disability (Hsiao, 2017). Families with a child with a disability encounter additional child-rearing demands that might act as potential stressors for the family. Among their needs, parents have to gather information about the child's disability, identify and secure resources and support, and/or strengthen their competence in effectively performing their role as parents (Guralnick, 1998, 2001).

This situation increases parenting stress (Limiñana, Corbalán, & Patró, 2007; López, 2011; Suriá, 2011; Wiegner & Donders, 2000). Parenting stress, in this context, is defined as the negative and distressing feelings experienced by parents when raising their children (Hughes & Huth-Bocks, 2007) due to the imbalance between parenting demands and available resources (Raphael, Zhang, Liu, & Giardino, 2010). This perceived parenting stress varies throughout the stages of the life cycle, and it is especially relevant in the first life stage (Aldwin, 2011), and in the different transitions that occur throughout development (Giné et al., 2013; Wehmeyer & Field, 2007). In the same way, this situation produced by the arrival of the child with a disability activates certain coping strategies in the parents. The relationship between these coping strategies and the parental stress experienced by the parents in the child's upbringing is quite clear.

Parenting stress of families in early intervention services is regarded as one of the factors with the most significant impact on parents' behaviors, and it is an important variable in explaining dysfunctional behaviors in child-rearing (Abidin, 1992; Barroso, Mendez, Graciano, & Bagner, 2018; Östberg & Hagekull, 2000). Parents' evaluations of situations as overwhelming and of their strategies as insufficient favor the emergence of parenting stress. The family's functioning and the parents' distress have a significant impact on the children's cognitive and social development (Wallander & Varni, 1998).

Early intervention researchers' interest in studying differences between mothers and fathers in terms of stress and coping strategies has increased since the 1980s (Head & Abbeduto, 2007). There is scientific evidence about the relationship between parental stress and coping strategies in mothers (Calero, Grau, Martínez-Rico, & Morales-Murillo, 2017). These authors identified mothers' coping strategies, mothers' sociodemographic characteristics, and children's characteristics as predictors of mothers' parenting stress levels. The results of this research support the need to extend the scope and focus of the study to fathers in early intervention because most of the studies are focused on mothers or on comparing fathers and mothers. From a more traditional point of view, fathers have been considered to be more concerned with the economic impact of taking care of a child with a disability (Price-Bonaham & Addison, 1978). In addition, fathers reported that managing daily activities and accessing the needed services and educational resources are major stress triggers (Parish, Seltzer, Greenberg, & Floyd, 2004). In addition, fathers reported that not having enough information about their child's disability also has an impact on their stress levels (Kucuker, 2006).

The results of numerous studies showed that parents of children with Autism Spectrum Disorder experience higher levels of parenting stress (Dardas & Ahmad, 2014; Ericzon, Frazee, & Stahmer, 2005; Seltzer, Abbeduto, Krauss, Greenberg, & Swe, 2004). In addition, scientific evidence shows that children with disabilities have more behavioral problems, and that their parents are more likely to report higher levels of stress and more emotional problems (*i.e.*, Baxter, Cummins, & Yiolitis, 2000; Blacher, Shapiro, Lopez, Diaz, & Fusco, 1997; Konstantareas & Homatidis, 1989; Orr, Cameron, Dobson, & Day, 1993; Quine & Pahl, 1991; Sloper, Knussen, Turner, & Cunningham, 1991; Stores, Stores, Fellows, & Buckley, 1998).

Parents' experiences of lack of support and high levels of anxiety directly and indirectly affect their children's well-being (Crum & Moreland, 2017; Zapata, Bastida, Quiroga, Charra, & Leiva, 2013). Research has suggested that higher rates of stress in parents are often due to factors associated with low socioeconomic status, such as limited resources and access to services (Franco, Pottick, & Huang, 2010), (negative social stigma associated with the child's disability, and lack of community support (Altiere & von Kluge, 2009; Bonis, 2016; Hall, 2012; Saisto, Salmela-Aro, Nurmi, & Halmesmäki, 2008). There is also a risk of poorly adaptive and ineffective

reactions by fathers to their children's behavior when they are experiencing greater parenting stress, thus decreasing their ability to resolve situations and seek appropriate support (Ben-Sasson, Soto, Martínez-Pedraza, & Carter, 2013; Osborne, McHugh, Saunders, & Reed, 2008; Zablotsky, Bradshaw, & Stuart, 2013).

Parenting stress may decrease as the child becomes older (Neece, Green, & Baker, 2012; Williford, Calkins, & Keane, 2007). Parents may be better able to manage their parenting stress over time, coinciding with a decrease in more overt child behavior problems, such as hyperactivity and aggression. This finding may provide support for the association between the child's age and parenting stress (Williford et al., 2007).

Some studies suggest that mothers report higher stress, suggesting that there are differences in their levels of parental stress compared to fathers (Shin & McDonough, 2008; Timko, Stovel, & Moos, 1992). Goldberg, Marcovitch, MacGregor, and Lojkasek (1986) found higher levels of stress in fathers compared to mothers, when considering the characteristics of their children, such as behavioral problems or communication skills. Again, the differences in stress levels between fathers and mothers might be related to the fathers' difficulties in expressing their feelings (Kazan & Marvin, 1984; Soltanifar et al., 2015).

When facing situations that generate stress, individuals use different coping strategies based on their personal characteristics, individual experiences, the demands of the environment, and social pressure (Casullo & Fernández, 2001). Coping strategies are defined as the group of thoughts and actions people use to manage difficult situations and reduce the distress resulting from these situations (Stone, Helder, & Schneider, 1988).

Researchers studying the types of coping strategies used by parents of children with ASD concluded that parents with stress avoidant strategies manifested more mental health problems such as depression and anxiety. Moreover, the parents of children with ASD who positively restructured their situation presented lower stress levels (Dunn, Burbine, Bowers, & Tantefleff-Dunn, 2001). Numerous studies have related the parenting stress experienced by fathers of children with a disability to the number of coping strategies they are prepared to employ (Hall & Graff, 2011; López, Clifford, Minnes, & Ouellette-Kuntz, 2008; Lyons, Leon, Phelps, & Dunleavy, 2010; Zablotsky et

al., 2013). Fathers who use less effective coping strategies experience higher levels of stress (Raphael et al., 2010).

Regarding coping strategies, fathers tend to cope by focusing on the problem (Hovanitz & Koroza, 1989). Fathers suffer more often from major depression (Kazan & Marvin, 1984) and negative emotional states, depending on the severity level of the child's behavioral problems (Benson, 2006; Pottie, Cohen, & Ingram, 2008), which could be related to fathers' greater difficulty in expressing their feelings. Moreover, fathers approach the situation gradually and progressively. The fathers who use avoidant coping strategies present higher levels of stress and more emotional problems compared to parents who use positive restructuration strategies (Dunn et al., 2001; Hastings & Johnson, 2001).

The coping strategies used by parents change over time. In other words, as time passes and the family circumstances vary, the parents' coping strategies differ (Poehlmann, Clements, Abbeduto, & Farsad, 2005). For example, parents who have adapted to having a child with ASD and use coping strategies that contribute to obtaining needed family and personal resources are facilitating their child's goal attainment. These parents have general control of the situation (Jones & Passey, 2005).

Previous research pointed to coping strategies as an important element to consider in early intervention programs. Parents' coping strategies have been associated with their psychological well-being and health when facing stressful situations that result from the added para-normative tasks of raising a child with a disability. Parenting requires skills from both parents so that they are capable of supporting each other while raising their child (Camisasca, Miragoli, & Di Blasio, 2014; Guay, Ratelle, Duchesne, & Dubois, 2018). A parenting alliance serves as a mediator in the relationship between marital adjustment and parenting stress (Camisasca et al., 2014).

Therefore, family functioning is essential for children's development and upbringing. A growing body of empirical evidence supports this principle (Bronfenbrenner, 1987; Crnic & Stormosbak, 1997; Dunst & Bruder, 1999; Lacasa, 2001; Rodrigo & Palacios, 1998).

Most studies on parenting stress and coping strategies are conducted with mothers as participants because they are typically more accessible; however, the role of both parents in their child's upbringing is recognized (Guay et al., 2018). The collaboration of both parents has a positive impact on

the child's upbringing and contributes to the family's quality of life. Thus, the study of parenting stress and coping strategies is necessary, not only in mothers, but also in fathers, in order to deepen our understanding of how raising a child with a disability or at risk of having one affects fathers.

### **Objective**

The general objective of this study is to understand the relationship between the stress of fathers and the coping strategies of fathers of children receiving early care services, thus increasing our knowledge about the specific characteristics that fathers describe in parenting.

### **Method**

#### *Participants*

This work was embedded in a larger study with 144 families. The study presented in this manuscript focused exclusively on fathers of children in early intervention.

One-hundred and forty-four fathers of families receiving early intervention services participated in the study. Our sample was representative of all the early intervention centers (*i.e.*, CIDATs) located in the three provinces of the Valencian Autonomous Community (*i.e.*, state). Forty-eight fathers came from early intervention centers located in the province of Alicante, 25 from Castellón, and 71 from Valencia.

The mean age of the participating fathers was 37.5 years old ( $SD=5.14$ ). Of the 144 participating fathers, 91.3% were married, 2.1% separated, and 6.3% single. Regarding the fathers' employment status and education, 76.8% reported having a job, 38% had completed elementary school, 35.2% had finished high school or had an associate's degree, and 26.8% had completed either a college degree or higher. In 73.2% of the cases, the fathers reported that both parents participated in their child's or children's upbringing. The mean number of siblings per participating family was 1.62 ( $SD=0.97$ ).

The mean age of the children receiving early intervention services was 2.71 years old ( $SD=1.21$ ); 69.7% were boys and 30.3% girls. Regarding the

children's disability status, 78.8% had an established diagnosis, compared to 21.2% who still did not have one. These children go to early intervention services where their development is monitored because of the potential risk of presenting a neurodevelopmental disorder while awaiting a definitive diagnosis. Of those children who had a diagnosis, 16.1% had an intellectual disability, 13.1% had a physical disability, 3.6% had a sensory disability, 38.7% had a generalized developmental disorder, and 8.8% had multiple disabilities.

To meet our study objectives and considering other researchers' findings that supported differences in parenting stress related to the child's disability type, we created two diagnostic categories (*i.e.*, (1) Generalized developmental disorders and (2) Down Syndrome) to be included in the analyses. The rationale for dividing parents according to these two categories comes from previous studies that found that parents of children with GDD presented higher levels of parenting stress (Belchic, 1996; Dumas, Wolf, Fisman, & Culligan, 1991; Konstantareas, 1991; Sanders & Morgan, 1997); whereas parents of children with Down syndrome experienced lower levels of parenting stress, compared to parents of children with another disability status (Hodapp, Ricci, Ly, & Filder, 2003; Seltzer & Riff, 1994).

#### *Instruments*

Parenting stress was evaluated using the *Parenting Stress Index-SF* (PSI; Abidin, 1995). This instrument gathers relevant information about (1) the distress that results from raising children, (2) the parent-child interaction, and (3) the child's characteristics. It consists of 36 items rated on a 5-point Likert scale. The items are divided into three subscales. The first subscale, Parental Distress (*i.e.*, items 1 to 12), measures the distress parents experience when raising a child in relation to personal factors (*i.e.*, parental competence, the perception of problems with their partner, or lack of social support). The second subscale, Parent-Child Dysfunctional Interaction (*i.e.*, items 13 to 24), evaluates the parents' perception of the expectations they have for their children and the degree to which their children reinforce their parental competence. Finally, the third subscale, Difficult-Child (*i.e.*, items 25 to 36), considers the parents' perceptions of how difficult it is to control their children in relation to their behavioral characteristics.

A total stress score is generated by adding up the scores on the three subscales. This score indicates the global stress level parents experience in their

parenting role. The reliability index (*i.e.*, Cronbach alpha) for the scale's total score was .89; and it was .84, .72, and .79 for the subscales of Parental Distress, Parent-Child Dysfunctional Interaction, and Difficult-Child, respectively.

For the evaluation of the fathers' coping strategies, the Adult Coping Responses Inventory, CRI-A (Moos, 1993, Spanish adaptation of Kirchner & Forns, 2010), was used. This instrument evaluates the person's self-perceptions of his or her coping strategies when faced with life situations that might be perceived as stressful (*e.g.*, raising a child with developmental problems or at high risk of having them). In this study, the scales focused on coping strategies related to parenting. The CRI-A consists of 48 items, divided into 8 scales of 6 items each. The first four subscales refer to Approach Coping Styles, whereas scales 5 to 8 refer to Avoidant Coping Styles. The definitions of the subscales are presented in Table 1.

Table 1. *Definitions of the Adult Coping Response Inventory (CRI-A) Subscales*

Subscales	Definitions
<b>Approach Coping Style</b>	
Logical Analysis	Cognitive attempts to understand and prepare mentally to deal with a stressor and its consequences
Positive Reappraisal	Cognitive attempts to construct and restructure a problem in a positive sense while accepting the reality of a situation
Seeking Guidance and Support	Behavioral attempts to seek information, support and guidance
Problem Solving	Behavioral attempts to take actions directly leading to the problem
<b>Avoidant Coping Styles</b>	
Cognitive Avoidance	Cognitive attempts to avoid realistically thinking about the problem
Acceptance/Resignation	Cognitive attempts to react to the problem by accepting it
Seeking Alternative Rewards	Behavioral attempts to get involved in substitutive activities and create new sources of satisfaction
Emotional Discharge	Behavioral attempts to reduce tension by expressing negative feelings

Note: Subscale definitions were taken from the "*Manual Inventario de Respuestas de Afrontamiento-Adultos, versión española [Adults Coping Responses Inventory Guidelines, Spanish Version]*" by T. Kirchner and M. Forns, 2010 by TEA Ediciones [TEA Editions].

The reliability indices (*i.e.*, Cronbach Alpha) for the scale scores are .83 for the total score and range from .38 to .60 for the subscales. Moss (1993) stated that the internal consistency of the scale scores increases when all the



items are considered in the total score, and it decreases when considering the subscales. Although they are not optimal values, they agree with those reported by the existing literature on coping questionnaires, where most of the internal consistency values are not usually very high (Mikulic & Crespi, 2008).

#### *Procedure*

First, approval from the General Directorate for Persons with Disabilities of the Department of Social Welfare of the Valencian Autonomous Community [Dirección General de Personas con Discapacidad de la Consellería de Asuntos Sociales Bienestar de la Comunidad Valenciana] was obtained to contact all the early intervention centers registered and subsidized by the administration. Then, we contacted the directors of the early intervention centers to share the objectives of this study and invite them to participate. All the contacted centers agreed to participate in the study. The centers' early intervention service providers received a letter with the objectives of the study, and they were invited to voluntarily participate in the study and asked to sign an informed consent form. As for the parents, once they had agreed to participate in the study, they signed an informed consent form and received a package containing the measurement scales and questionnaires.

#### *Data analysis*

First, descriptive analyses (*e.g.*, mean, standard deviation) and correlational analyses were conducted to summarize the fathers' variables scores and determine the relationship between the observed variables: parenting stress and coping strategies. Next, a structural equation model was run to understand the effect of the fathers' coping strategies on parenting stress levels. The statistical analysis packages EQS 6.1 (Bentler, 1995) and SPSS 20 (IBM Corp, 2011) were used to carry out the analyses. Maximum Likelihood was the estimation method utilized for the structural equation model analyses (Bentler, 1995) because the conditions for its use are reasonable and adequate for the sample size of this study (Finney & DiStefano, 2006). Model fit was tested using recommended indexes (*i.e.*, CFI and GFI), accepting only values above .90 for an adequate fit. In addition, RMSA and SMRS were used to test the error, accepting only values below .08 (Hoyle & Panter, 1995; Kaplan, 2000).

## Results

The fathers' total parenting stress score (i.e., PSI-SF total) was 2.20 (SD=0.54). At the factor level, the highest scores were found for Difficult-Child (M=2.37, SD=0.70). Table 2 shows the means and standard deviations for the fathers' total and factor scores on the PSI-SF.

Table 2. Fathers' mean scores in the PSI-SF total and subscales

Subscales	<i>M (SD)</i>
Parental distress	2.20 (0.69)
Parent-child dysfunctional interaction	2.01 (0.58)
Difficult child	2.37 (0.70)
Total score	2.20 (0.54)

Note: N = 135

Regarding the fathers' coping strategies, measured using the CRI-A, Problem Solving was the strategy used most (M=1.92, SD=0.57), and Emotional Discharge was used the least (M=0.86, SD=0.55). We summarize the fathers' scores on the CRI-A subscales in Table 3.

Table 3. Fathers' mean scores in the CRI-A subscales

Subscales	<i>M (SD)</i>
Logical Analysis	1.51 (0.54)
Positive Reappraisal	1.64 (0.62)
Seeking Guidance and Support	1.67 (0.63)
Problem Solving	1.92 (0.57)
Cognitive Avoidance	1.01 (0.58)
Acceptance/Resignation	1.16 (0.57)
Seeking Alternative Rewards	0.95 (0.57)
Emotional Discharge	0.86 (0.55)

Note: N = 130

Before running the structural equation model, we analyzed the intercorrelations between the subscales of the measures used in the study (i.e., PSI-SF and CRI-A subscales). The intercorrelation indexes are presented in Tables 4 and 5 for the PSI-SF, and in Tables 6 and 7 for the CRI-A.

Table 4. Intercorrelations among the PSI-SF Total and Subscales

	1	2	3
1. Parental distress	—		
2. Parent-child dysfunctional interaction	.492**	—	
3. Difficult child	.444**	.663**	—
4. Total PSI	.792**	.834**	.845**

Note: N = 135; \*\* p < .01

Table 5. Intercorrelations among the CRI-A Approach Coping Style Subscales

	1	2	3
1. Logical Analysis	—		
2. Positive Reappraisal	.466**	—	
3. Seeking Guidance and Support	.269**	.251**	—
4. Problem Solving	.350**	.430**	.353**

Note: N = 130; \*\* p < .01

Table 6. Intercorrelations among CRI-A Approach Coping Style Subscales

	1	2	3
1. Cognitive Avoidance	—		
2. Acceptance/Resignation	.482**	—	
3. Seeking Alternative Rewards	.266**	.353**	—
4. Emotional Discharge	.437**	.400**	.266**

Note: N = 130; \*\* p < .01

Then, to determine the relationship between the fathers' coping strategies and their parenting stress levels, we correlated the coping strategies scores, measured by the 8 CRI-A subscales, with the total and factor scores on the parenting stress measure (PSI-SF). Table 7 shows the correlational indexes.

Table 7. Correlations between fathers' coping strategies and parenting stress factor

Strategy	Parental distress	Dysfunctional interactions	Difficult child	PSI-SF total
Logical Analysis	.022	.022	.101	.061
Positive Reappraisal	-.186*	-.188*	-.152	-.212*
Seeking Guidance and Support	-.010	.052	-.021	.006
Problem Solving	-.128	.009	-.030	-.064
Cognitive Avoidance	.217*	.233**	.260**	.288**
Acceptance/Resignation	.213*	.048	-.054	.084
Seeking Alternative Rewards	.066	.015	-.096	-.008
Emotional Discharge	.274**	.112	.128	.212*

Note: N = 127; \* p < .05; \*\* p < .01

Positive Reappraisal was negatively and statistically significantly correlated with all the parenting stress factors and the total scores. When fathers used more Positive Reappraisal strategies, their parenting stress levels were lower. On the other hand, Cognitive Avoidance was related in a negative and statistically significant way to parenting stress. Fathers' more frequent use of Cognitive Avoidance was related to higher levels of parenting stress. Moreover, the Acceptance or Resignation strategy was positively and significantly correlated with Parental Distress. Emotional Discharge was positively correlated with Parental Distress and the total parenting stress score.

We ran a structural equation model to assess the simultaneous effects of all the variables on the fathers' parenting stress. In the model, we included the variables related to the children's and fathers' characteristics that could predict or affect the fathers' coping strategies or parenting stress levels. The variables considered included the age and educational level of the father and the type of disability of the child. The latter variable was divided into two groups for the analysis. The first group included children with generalized developmental disorders or multiple disabilities, and the second group included children with Down Syndrome or other diagnoses (Calero et al., 2017). In the model, we only included the coping strategies that showed a correlation with parenting stress: Positive Reappraisal, Cognitive evaluation, Acceptance or resignation, and Emotional discharge (Figure 1).

For the structural equation model performed only with observed variables, we obtained an adequate fit,  $X^2_{17}=28.15$ ,  $p<.05$ , CFI=.95, GFI=.94, SRMR=.07, and RMSEA=.07. The specified model is presented in Figure 1.

Educational level was negatively related to Positive Reappraisal ( $p<.05$ ). Fathers with lower educational levels had more difficulties in making positive interpretations of the situation. This variable explained 3.9% of the variance. Type of disability had a direct effect on parenting stress, and the coping strategies had an indirect and direct effect on parenting stress. Considering the type of disability, the generalized developmental disorder or multiple disabilities category had a statistically significant and positive effect on the Parent-child Dysfunctional Interaction and Difficult-Child stress factors.

Regarding the coping strategies, Positive Reappraisal had a statistically significant relationship with the three stress PSI-SF factors, positively with Parent-Child Dysfunctional Interaction and negatively with Difficult-Child and

Parental Distress. Cognitive Avoidance was positively correlated with Parent-Child Dysfunctional Interaction and Difficult-Child ( $p < .05$ ). The coping strategy Acceptance or Resignation showed a negative and statistically significant correlation with Difficult-Child, whereas Emotional Discharge was related in a positive and statistically significant way with Parental Distress. On the whole, the variables related to Parental Distress explained 15.9% of the variance. Variables related to Parent-Child Dysfunctional Interaction explained 12.7% of the variance, and the variables associated with Difficult-Child explained 17.3% (Figure 2).

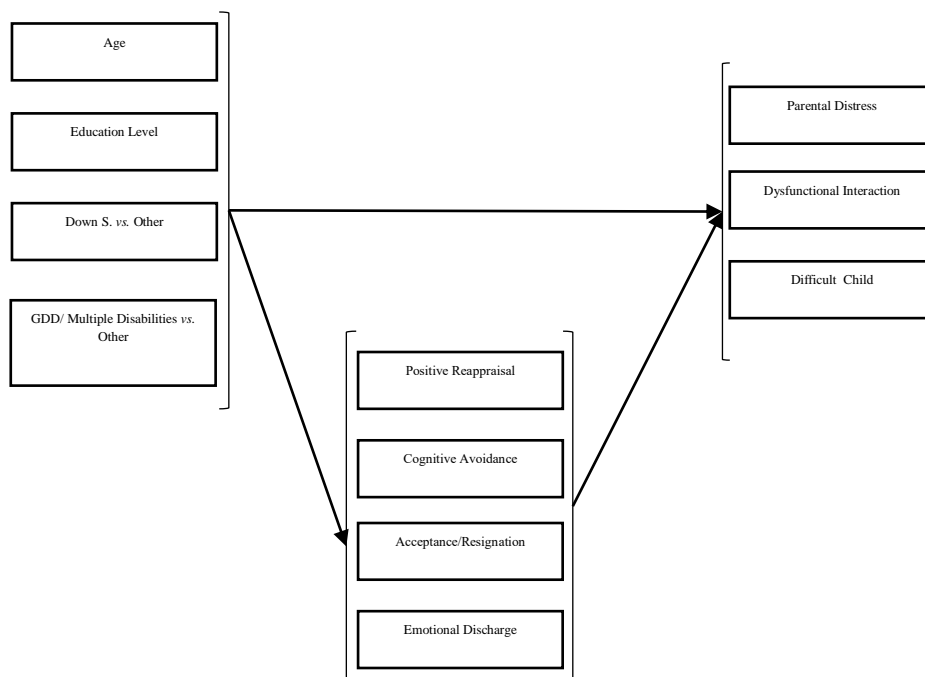


Figure 1. Hypothetical structural model for predicting father's stress factors

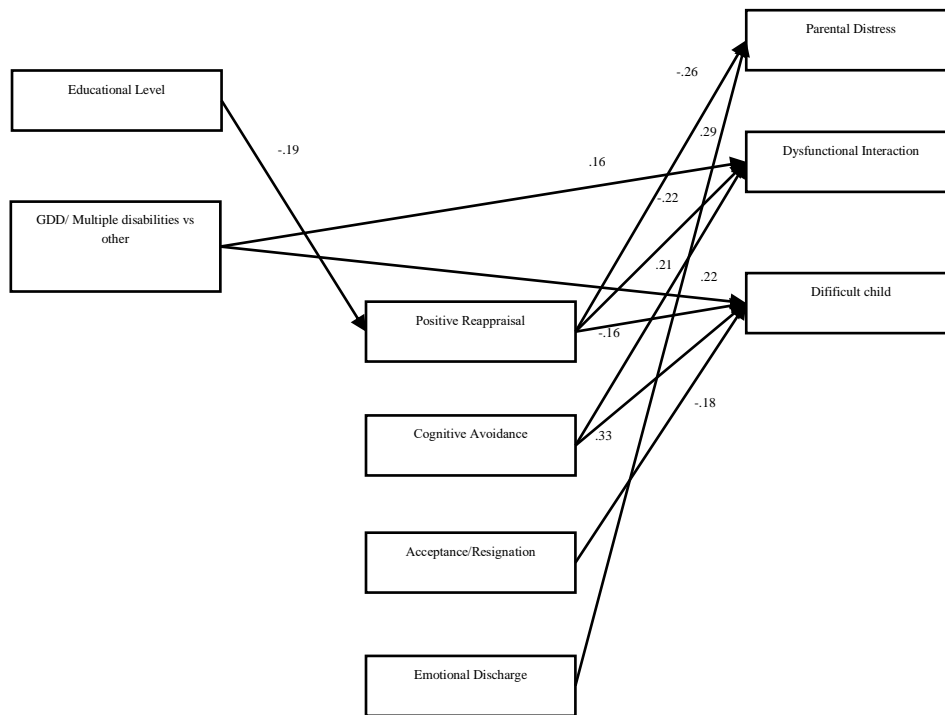


Figure 3. Model for predicting father's stress factors

### Conclusions

Our study results showed that, in general, both fathers and mothers collaborate in the upbringing of children receiving early intervention services, with an interparental contribution in 73.6% of the participating families. Males, therefore, are involved in the upbringing of their children. A solid parenting alliance could provide the parents with the necessary emotional and psychological resources to cope with parenting demands (Guay et al., 2018).

On the other hand, studies show that parenting stress is one of the factors that contribute to the effectiveness of parenting (Guajardo, Snyder, &

Petersen, 2009), and that it is higher when there is a disabled child (Guajardo et al., 2009), while reflecting a dynamic relationship with coping strategies.

Fathers with less effective coping experience higher levels of stress (Raphael et al., 2010) There are numerous studies showing that children with disabilities have more behavioral problems, with their fathers experiencing greater parenting stress and other problems such as depression and anxiety. (*i.e.*, Baxter, Cummins, & Yiolitis, 2000; Blacher, Shapiro, Lopez, Diaz, & Fusco, 1997; Konstantareas & Homatidis, 1989; Orr, Cameron, Dobson, & Day, 1993; Quine & Pahl, 1991; Sloper, Knussen, Turner, & Cunningham, 1991; Stores, Stores, Fellows, & Buckley, 1998; Blacher & McIntyre, 2006; Meadan, Halle, & Ebata, 2010; Perry, Harris, & Minnes, 2005; Trute, Hiebert-Murphy, & Levine, 2007).

In this regard, our study of families of children who come to early intervention with disabilities and high risk shows that fathers have lower levels of parenting stress when they use the Approach Coping Styles of positive reappraisal, *i.e.* when they restructure the problem in a positive way and accept reality. By contrast, when they use Avoidant Coping styles, avoiding thinking about the problem and the situation in which they live, they present higher levels of parenting stress.

On the other hand, when Parental distress is caused by parents' perception of difficulty in controlling their children, based on children's behavioral characteristics (factor from Difficult child), fathers are more likely to use Avoidant Coping styles such as Cognitive avoidance and Acceptance or resignation. Some parents in our study reported difficulties in accepting the reality of the problem, whereas others reported accepting the situation through resignation. However, if the most frequently used coping strategy was Acceptance or resignation, parenting stress levels increased considerably compared to parents' perceptions of competence (Parental distress factor).

In general, the literature indicates, in the same direction, that coping strategies focused on Problem solving are more effective than coping strategies involving Emotional discharge because the latter are related to Cognitive avoidance (Essex, Seltzer, & Krauss, 1999; Gavidia-Payne & Stoneman, 2006; Hasting, Kovshoff, Brown, Ward, Espinosa, & Remington, 2005; Judge, 1998; Kim, Greenberg, Seltzer, & Krauss, 2003; Sloper et al., & 1991). Fathers often lack coping strategies to solve real problems; instead, many of them use Emotional discharge or Avoidant Coping styles, which lack effectiveness and

lead to higher levels of stress (Pottie & Ingram, 2008; Raphael et al., 2010; Zablotsky et al., 2013).

In our study, fathers of children with Autism Spectrum Disorders who used Avoidant Coping styles, such as Cognitive avoidance, had higher levels of stress and emotional problems than fathers who used Positive Reappraisal strategies. This result is consistent with other previous studies (Dunn et al., 2001; Hastings & Jonson, 2001).

In addition, the educational level of the fathers was linked to differences in the type of coping strategies chosen. Fathers with higher educational levels used strategies that helped them to participate in other activities to establish new sources of satisfaction. The educational level of the fathers was negatively associated with the coping strategies of Positive reappraisal. The lower the educational level, the more difficult it was for the fathers to make a positive interpretation of the situation. These fathers are less likely to use strategies aimed at reconstructing and restructuring a problem in a positive manner while accepting the reality.

The conclusions of this study can help to improve the development of early intervention programs by considering the impact of parenting stress factors on family interaction patterns (Hastings, 2001; Hsiao, 2017; Guralnick, 2000) and focusing intervention not only on the child, but also on all the family members and the environment (Juan-Vera, Heras, & Pérez-López, 2009).

In addition, our results showed the importance of providing families with support to increase fathers' competence and help them to address their children's problem behaviors and manage parenting stress (Baker, Blacher, Crnic, & Edelbrock, 2002; Baker, McIntyre, Blacher, Crnic, Edelbrock, & Low, 2003; Barroso et al., 2018; McStay, Trembath, & Dissanayake, 2014; Hsiao, 2017; McWilliam, 2016).

Our results suggest that attention to families attending early intervention needs to include additional objectives aimed at improving parenting stress, as well as coping strategies. This study has shown that fathers use more Avoidant Coping of the situation, which hinders their interaction with the child and affects their parenting stress.

#### *Limitations and future considerations*

The main contribution of our study was to analyze the coping strategies and parenting stress of the fathers of children receiving early intervention



services. This represents an innovation because most studies that consider these variables are focused on mothers. Although mothers have historically been the main caregivers, the relevance of the role of fathers in parenting and their participation in early intervention services is increasing in the younger generations. In a recent meta-analysis of parental stress by Barroso et al. (2018), most of the studies analyzed (67%) included mothers as primary informants of fathers' stress.

It would be interesting to include other participants from other Spanish locations and autonomous communities, in order to generalize the results obtained in our Valencian Community sample. Furthermore, future empirical efforts should also include both fathers and mothers in the sample to compare their scores and design plans that would favor the use of coping strategies that would support family empowerment and family quality of life.

Because of the cross-sectional nature of this study, future studies could consider how the stressors and needs of parents change throughout the longitudinal process of parenting. Moreover, we only used self-report measures of parenting stress, and no objective measures, such as recordings of interactions or direct observations, were included in the study. Adding other data collection methods could contribute to better capturing parenting stress levels. Another limitation is not being able to determine with exactitude the directionality of the sources of parenting stress due to the study design. All of these issues should be considered in future studies.

### References

- Abidin, R. R. (1995). *Parenting Stress Index* (3rd ed.). *Professional Manual*. Odessa, FL: Psychological Assessment Resources.
- Abidin, R. R. (1992). The determinants of parenting behavior. *Journal of Clinical Child Psychology*, 21, 407-412.
- Aldwin, C. M., & Brustrom, J. (1997). Theories of coping with chronic stress: illustrations from health psychology and aging literature. In B. Gottlieb (Ed.), *Coping with chronic stress* (pp. 75-103). New York: Plenum Press. doi:10.1007/978-1-4757-9862-3

- Altieri, M. J., & von Kluge, S. (2009). Searching for acceptance: Challenges encountered while raising a child with autism. *Journal of Intellectual & Developmental Disability, 34*, 142-152. doi:10.1080/13668250902845202
- Baker, B. L., Blacher, J., Crnic, K. A., & Edelbrock, C. (2002). Behavior problems and parenting stress in families of three-year-old children with and without developmental delays. *American Journal on Mental Retardation, 107*, 433-444.
- Baker, B. L., McIntyre, L. L., Blacher, J., Crnic, K., Edelbrock, C., & Low, C. (2003). Pre-school children with and without developmental delay: Behaviour problems and parenting stress over time. *Journal of Intellectual Disability Research, 47*, 217-230. doi:10.1046/j.1365-2788.2003.00484.x
- Barroso, N. E., Mendez, L., Graziano, P. A., & Bagner, D. M. (2018). Parenting stress through the lens of different clinical groups: a systematic review & meta-analysis. *Journal of abnormal child psychology, 46*(3), 449-461. doi:10.1007/s10802-017-0313-6
- Baxter, C., Cummins, R. A., & Yiolitis, L. (2000). Parental stress attributed to family members with and without disability: a longitudinal study. *Journal of Intellectual and Developmental Disability, 25*, 105-118.
- Blacher, J., Shapiro, J., Lopez, S., Diaz, L., & Fusco, J. (1997). Depression in Latina mothers of children with mental retardation: a neglected concern. *American Journal on Mental Retardation, 101*, 483-496.
- Blacher, J., & McIntyre, L. L. (2006). Syndrome specificity and behavioural disorders in young adults with intellectual disability: Cultural differences in family impact. *Journal of Intellectual Disability Research, 50*, 184-198. doi:10.1111/j.1365-2788.2005.00768.x
- Belchic, J. K. (1996). *Stress, social support and sense of parenting competence: a comparison of mothers and fathers of children with autism, Down syndrome and normal development across the family life cycle* (Doctoral dissertation). New Jersey, USA.: Rutgers University.
- Bentler, P. M. (1995). *EQS structural equations program manual*. Encino, CA: Multivariate Software.
- Benson, P. R. (2006). The Impact of Child Symptom Severity on Depressed Mood Among Parents of Children with ASD: The Mediating Role of Stress Proliferation. *Journal of Autism and Developmental Disorders, 36*, 685-695. doi:10.1007/s10803-006-0112-3
- Ben-Sasson, A., Soto, T. W., Martínez-Pedraza, F., & Carter, A. S. (2013).

- Early sensory over-responsivity in toddlers with autism spectrum disorders as a predictor of family impairment and parenting stress. *Journal of Child Psychology and Psychiatry*, 54, 846-853. doi:10.1111/jcpp.12035
- Bonis, S. (2016). Stress and parents of children with autism: A review of literature. *Issues in Mental Health Nursing*, 37, 153-163.
- Bronfenbrenner, U. (1987). *La ecología del desarrollo humano [The ecology of the human development]*. Barcelona: Paidós.
- Calero, J., Grau, M. D., Martínez-Rico, G., & Morales-Murillo, C. P. (2017). Parenting Stress and Coping Strategies in Mothers of Children Receiving Early Intervention Services. *Journal of Child and Family Studies*, 26, 3192-3202. doi:10.1007/s10826-017-0802-9
- Camisasca, E., Miragoli, S., & DiBlasio, P. (2014). Is the Relationship Between Marital Adjustment and Parenting Stress Mediated or Moderated by Parenting Alliance? *Europe's Journal of Psychology*, 10, 235-254. doi:10.5964/ejop.v10i2.724
- Casullo, M., & Fernández Liporace, M. (2001). Estrategias de afrontamiento en estudiantes adolescentes [Coping strategies in adolescent students]. *Revista del Instituto de Investigaciones*, 6(1), 25-49.
- Crnic, K., & Stormshak, E. (1997). The effectiveness of Providing Social Support for Families of children at Risk. In M. Guralnick (Ed.), *The effectiveness of Early Intervention* (pp. 499-522). Baltimore: Paulh Brookes Publishing.
- Crum, K. I., & Moreland, A. D. (2017). Parental stress and children's social and behavioral outcomes: The role of abuse potential over time. *Journal of Child and Family Studies*, 26(11), 3067-3078. doi:10.1007/s10826-017-0822-5
- Dardas, L., & Ahmad, M. (2014a). Psychosocial correlates of parenting a child with autistic disorder. *The Journal of Nursing Research*, 22, 183-191.
- Dardas, L., & Ahmad, M. (2014b). Coping strategies as mediators and moderators between stress and quality of life among parents of children with autistic disorder. *Stress and Health*, 31, 5-12.
- Dumas, J. E., Wolf, L. C., Fisman, S. N., & Culligan, A. (1991). Parenting stress, child behavior problems, and dysphoria in parents of children with autism, down syndrome, behavior disorders, and normal development. *Exceptionality*, 2, 97-110. doi:10.1080/09362839109524770
- Dunn, M. E., Burbine, T., Bowers, C. A., & Tantleff-Dunn, S. (2001).

- Moderators of stress in parents of children with autism. *Community Mental Health Journal*, 37, 39-45.
- Dunst, C. J., & Bruder, M. B. (1999). Family and community activity settings, natural learning environment, and children's learning opportunities. *Children's Learning Opportunities Report*, 1(2), 1-2.
- Ericzon, M., Frazee, L., & Stahmer, A. (2005). Stress levels and adaptability in parents of toddlers with and without Autism Spectrum Disorders. *Research and Practice for Persons with Severe Disabilities*, 30, 194-204.
- Essex, E. L., Seltzer, M. M., & Krauss, M. W. (1999). Differences in coping effectiveness and well-being among aging mothers and fathers of adults with mental retardation. *American Journal on Mental Retardation*, 104, 545-563.
- Finney, S. J., & Di Stefano, C. (2006). Non-normal and categorical data in SEM. In G. R. Hancock & R. O. Mueller (Eds.), *Structural Equation Modeling: A second course*. Greenwich, CO: Information Age Publishing.
- Franco, L. M., Pottick, K., & Huang, C. C. (2010). Early parenthood in a community context: neighborhood conditions, race-ethnicity, and parentig stress. *Journal of Community Psychology*, 38, 574-590.
- Gavidia-Payne, S., & Stoneman, Z. (2006). Marital adjustment in families of young children with disabilities: associations with daily hassles and problem-focused coping. *American Journal of Mental Retardation*, 111, 1-14. doi:10.1352/0895-8017(2006)111[1:maifoy]2.0.co;2
- Giné, C., Vilaseca, R., Gràcia, M., Mora, J., Orcasitas, J. M., Simón, C., & Simó-Pinatella, D. (2013). Spanish Family Quality of Life Scales: Under and over 18years old. *Journal of Intellectual & Developmental Disability*, 38, 141-148. doi:10.3109/13668250.2013.774324
- Goldberg, S., Marcovitch, S., MacGregor, D., & Lojkasek, M. (1986). Family responses to developmentally delayed preschoolers: etiology and the father's role. *American Journal of Mental Deficiency*, 90, 610-617.
- Guajardo, N. R., Snyder, G., & Petersen, R. (2009). Relationships among parenting practices, parental stress, child behaviour, Hsiao 5 and children's social-cognitive development. *Infant & Child Development*, 18, 37-60. doi:10.1002/icd.578
- Guay, F., Ratelle, C. F., Duchesne, S., & Dubois, P. (2018). Mothers' and Fathers' Autonomy-Supportive and Controlling Behaviors: An Analysis of Interparental Contributions. *Parenting*, 18, 45-65.

- Guralnick, M. J. (1998). The effectiveness of early intervention for vulnerable children: a developmental perspective. *American Journal on Mental Retardation, 102*, 319-345.
- Guralnick, M. J. (2000). Early childhood intervention: Evolution of a system. *Focus on autism and other Developmental Disabilities, 15*(2), 68-79. doi:10.1177/108835760001500202
- Guralnick, M. J. (2001). A developmental Systems Model for Early Intervention. *Infants and Young Children, 14*(2), 1-18.
- Hall, H. R. (2012). Families of children with autism: Behaviors of children, community support and coping. *Issues in Comprehensive Pediatric Nursing, 35*, 111-132. doi:10.3109/01460862.2012.678263
- Hall, H. R., & Graff, J. C. (2011). The relationships among adaptive behaviors of children with autism, family support, parenting stress, and coping. *Issues in Comprehensive Pediatric Nursing, 34*, 4-25.
- Hastings, R. P., & Johnson, E. (2001). Stress in UK families conducting intensive home-based behavioral intervention for their young child with autism. *Journal of Autism and Developmental Disorders, 31*, 327-336.
- Hastings, R., Kovshoff, H., Brown, T., Ward, N., Espinosa, F. D., & Remington, B. (2005). Coping strategies in mothers and fathers of preschool and school-age children with autism. *Autism, 9*, 377-391.
- Head, L., & Abbeduto, L. (2007). Recognizing the role of parents in developmental outcomes: A systems approach to evaluating the child with developmental disabilities. *Mental Retardation and Developmental Disabilities Research Reviews, 13*, 293-301. doi:10.1002/mrdd.20169
- Hodapp, R. M., Ricci, L. A., Ly, T. M., & Filder, D. J. (2003). The effects of the child with Down syndrome on maternal stress. *British Journal of Developmental Psychology, 22*, 137-151.
- Hovanitz, C. A., & Koroza, E. (1989). Life stress and clinically elevated MMPI scale: Gender differences in the moderating influence of coping. *Journal of Clinical Psychology, 45*, 2021-2024.
- Hoyle, R. H., & Panter, A. T. (1995). Writing about structural equation models. In R. H. Hoyle (Ed.). *Structural equation modeling: Concepts, issues and applications* (pp. 159-176). Thousand Oaks, CA: Sage.
- Hsiao, Y. J., Higgins, K., Pierce, T., Whitby, P. J. S., & Tandy, R. D. (2017). Parental stress, family quality of life, and family-teacher partnerships:

- Families of children with autism spectrum disorder. *Research in developmental disabilities*, 70, 152-162. doi:10.1016/j.ridd.2017.08.013
- Hughes, H. M., & Huth-Bocks, A. C. (2007). Variations in parenting stress in African-American battered women: Implications for children's adjustment and family intervention. *European Psychologist*, 12(1), 62-71. doi:10.1027/1016-9040.12.1.62
- IBM Corp. (2011). IBM SPSS Statistics for Windows, Version 21.0. Armonk, NY: IBM Corp.
- Jones, J., & Passey, J. (2005). Family adaptation, coping and resources: parents of children with developmental disabilities and behavior problems. *Journal on Developmental Disabilities*, 11(1), 31-46.
- Juan-Vera, M. J., Heras, C. M., & Pérez-López, J. (2009). Niveles de estrés en madres de niños atendidos en un centro de desarrollo infantil y atención temprana y de niños de población general [Stress levels in mothers of children cared for in a child development and early care centre and children in the general population]. *International Journal of Developmental and Educational Psychology*, 1, 159-166.
- Judge, S. (1998). Parental coping strategies and strengths in families of young children with disabilities. *Family Relations*, 47, 263-268.
- Kaplan, D. (2008). *Structural equation modeling: Foundations and extensions*. Sage Publications. doi:10.4135/9781452226576
- Kazan, A., & Marvin, R. (1984). Differences, difficulties and adaptation: stress and social networks in families with handicapped child. *Family Relations*, 33, 67-77. doi:10.2307/584591
- Kim, H., Greenberg, J. S., Seltzer, M. M., & Krauss, M. W. (2003). The role of coping in maintaining the psychological well-being of mothers of adults with intellectual disability and mental illness. *Journal of Intellectual Disability Research*, 47, 313-327. doi:10.1046/j.1365-2788.2003.00493.x
- Kirchner, T., & Forns, M. (2010). *Manual Inventario de respuestas de afrontamiento-adultos, versión española [Handbook Inventory of Coping Responses-Adults, Spanish version]*. Madrid: TEA ediciones.
- Konstantareas, M. M., & Homatidis, S. (1989). Assessing child symptom severity and stress in parents of autistic children. *Journal of Child Psychology and Psychiatry*, 30, 459-470.

- Konstantareas, M. M. (1991). Autistic, learning disabled and delayed children's impact on their parents. *Canadian Journal of Behavioural Science/Revue Canadienne des Sciences du Comportement*, 23, 358-375.
- Kucuker, S. (2006). The family-focused early intervention programme: Evaluation of parental stress and depression. *Early Child Development and Care*, 176, 329-341. doi:10.1080/03004430500206957
- Lacasa, P. (2001). Entorno familiar y educación escolar: la interacción de dos escenarios educativos [Family environment and school education: the interaction of two educational scenarios]. In C. Coll, J. Palacios, & A. Marchesi (Eds.), *Desarrollo psicológico y educación. 2. Psicología de la Educación Escolar* (2ª ed., pp. 597-622.). Madrid: Editorial Alianza.
- Limiñana, R. M., Corbalán, J., & Patró, R. (2007). Afrontamiento y adaptación psicológica en padre de niños con fisura palatina [Coping and psychological adjustment in parents of children with cleft palate]. *Anales de Psicología*, 23, 201-206.
- López, C. (2011). *El estrés en familias con sujetos con deficiencia Intelectual [Stress in Families with Subjects with Intellectual Deficiency]*. (Unpublished doctoral dissertation), Universidad Complutense de Madrid, Madrid, Spain.
- Lopez, V., Clifford, T., Minnes, P., & Ouellette-Kuntz, H. (2008). Parental stress and coping in families of children with and without developmental delays. *Journal on Developmental Disabilities*, 14, 99-104.
- Lyons, A. M., Leon, S. C., Phelps, R., & Dunleavy, A. M. (2010). The impact of child symptom severity on stress among parents of children with ASD: The moderating role of coping styles. *Journal of Child and Family Studies*, 19, 516-524. doi:10.1007/s10826-009-9323-5
- McStay, R. L., Trembath, D., & Dissanayake, C. (2014). Stress and family quality of life in parents of children with autism spectrum disorder: Parent gender and the double ABCX model. *Journal of Autism and Developmental Disorders*, 44, 3101-3118.
- McWilliam, R. A. (2016). Metanoia en atención temprana: transformación a un enfoque centrado en la familia [Metanoia in early care: transformation to a family-centered approach]. *Revista Latinoamericana de Educación Inclusiva*, 10, 133-153. doi:10.4067/s0718-73782016000100008
- Meadan, H., Halle, J. W., & Ebata, A. T. (2010). Families with children who have autism spectrum disorders: Stress and support, *Exceptional Children*,

- 77(1), 7-36. doi:10.1177/001440291007700101
- Moos, R. H. (1993). *Coping Responses Inventory. CRI-Adult Form (Manual)*. Odessa, FL: Psychological Assessment Resources.
- Mikulic, I. M., & Crespi, M. C. (2008). Adaptación y validación del Inventario de Respuestas de Afrontamiento de Moos (CRI-A) para adultos [Adaptation and validation of the Moos Coping Response Inventory (CRI-A) for adults]. *Anuario de investigaciones*, 15.
- Neece, C. L., Green, S. A., & Baker, B. L. (2012). Parenting stress and child behavior problems: A transactional relationship across time. *American Journal on Intellectual and Developmental Disabilities*, 117, 48-66.
- Orr, R. R., Cameron, S. J., Dobson, L. A., & Day, D. M. (1993). Age-related changes in stress experienced by families with a child who has developmental delays. *Mental Retardation*, 31, 171-176.
- Osborne, L. A., McHugh, L., Saunders, J., & Reed, P. (2008). Parenting stress reduces the effectiveness of early teaching interventions for autistic spectrum disorders. *Journal of Autism and Developmental Disorders*, 38, 1092-1103. doi:10.1007/s10803-007-0497-7
- Östberg, M., & Hagekull, B. (2000). A structural modeling approach to the understanding of parenting stress. *Journal of Clinical Child Psychology*, 29, 615-625. doi:10.1207/s15374424jccp2904\_13
- Parish, S., Seltzer, M., Greenberg, J., & Floyd, F. (2004). Economic implications of caregiving at midlife: Comparing parents with and without children who have developmental disabilities. *Mental Retardation*, 42, 413-426.
- Perry, A., Harris, K., & Minnes, P. (2005). Family environments and family harmony: An exploration across severity, age, and type of DD. *Journal of Developmental Disabilities*, 11, 17-29.
- Poehlmann, J., Clements, M., Abbeduto, L., & Farsad, V. (2005). Family experiences associated with a child's diagnosis of fragile X or Down syndrome: Evidence for disruption and resilience. *Mental Retardation*, 43, 255-267.
- Pottie, C. G., Cohen, J., & Ingram, K. M. (2008). Parenting a child with autism: Contextual factors associated with enhanced daily parental mood. *Journal of Pediatric Psychology*, 34, 419-429. doi:10.1093/jpepsy/jsn094
- Price-Bonham, S., & Addison, S. (1978). Families and mentally retarded children: emphasis on the father. *Family Coordinator*, 27, 221-230.



- Quine, L., & Pahl, J. (1991). Stress and coping in mothers caring for a child with severe learning difficulties: a test of Lazarus' transactional model of coping. *Journal of Community and Applied Social Psychology, 1*, 57-70. doi:10.1002/casp.2450010109
- Raphael, J. L., Zhang, Y., Liu, H., & Giardino, A. P. (2010). Parenting stress in U.S. families: Implications for paediatric health care utilization. *Child: Care, Health, and Development, 36*, 216-224.
- Rodrigo, M. J., & Palacios, J. (1998). *Familia y desarrollo humano [Family and human development]*. Madrid: Alianza.
- Sanders, J. L., & Morgan, S. B. (1997). Family stress and adjustment as perceived by parents of children with autism or Down syndrome: implications for intervention. *Child & Family Behavior Therapy, 19*, 15-32. doi:10.1300/j019v19n04\_02
- Saisto, T., Salmela-Aro, K., Nurmi, J., & Halmesmäki, E. (2008). Longitudinal study on the predictors of parental stress in mothers and fathers of toddlers. *Journal of Psychosomatic Obstetrics & Gynecology, 29*, 219-228. doi:10.1080/01674820802000467
- Seltzer, M. M., & Riff, C. D. (1994). Parenting across the life span: the normative and non-normative cases. *Life-Span Development and Behavior, 12*, 1-40.
- Seltzer, M., Abbeduto, M., Krauss, L., Greenberg, J., & Swe, S. (2004). Comparison groups in autism family research: Down syndrome, fragile X syndrome, and schizophrenia. *Journal of Autism and Developmental Disorders, 34*, 11-30.
- Shin, J. Y., & McDonough, R. G. (2008). Tipos, disponibilidad y percepción de apoyo social entre los padres de niños pequeños con retrasos cognitivos en Vietnam [Types, availability and perception of social support among parents of young children with cognitive delays in Vietnam]. *Revista Internacional de Investigación de Rehabilitación, 31*(2), 131-139.
- Sloper, P., Knussen, C., Turner, S., & Cunningham, C. (1991). Factors related to stress and satisfaction with life in families of children with Down's Syndrome. *Journal of Child Psychology and Psychiatry, and Allied Disciplines, 32*, 655-676.
- Soltanifar, A., Akbarzadeh, F., Moharreri, F., Soltanifar, A., Ebrahimi, A., Mokhber, N., & Ali Naqvi, S. S. (2015). Comparison of parental stress among mothers and fathers of children with autistic spectrum disorder in

- Iran. *Iranian Journal of Nursing and Midwifery Research*, 20, 93-98.
- Stone, A. A., Helder, L., & Schneider, M. S. (1998). Coping with stressful events: Coping, dimensions and issues. In Cohen (Ed.), *Life events and psychological functioning: Theoretical and methodological issues* (pp. 182-210). Newbury Park, CA: Sage.
- Stores, R., Stores, G., Fellows, B., & Buckley, S. (1998). Daytime behaviour problems and maternal stress in children with Down's syndrome, their siblings, and non-intellectually disabled and other intellectually disabled peers. *Journal of Intellectual Disability Research*, 42, 228-237.
- Suriá Martínez, R. (2011). Discapacidad adquirida y discapacidad sobrevenida: análisis comparativo de la sobrecarga que generan ambas formas de discapacidad en las madres de hijos afectados [Acquired disability and supervening disability: comparative analysis of the overload generated by both forms of disability in the mothers of affected children]. *Siglo Cero*, 42, 67-84.
- Timko, C., Stovel, K. W., & Moos, R. H. (1992). Functioning among mothers and fathers of children with juvenile rheumatic disease: A longitudinal study. *Journal of Pediatric Psychology*, 17(6), 705-724.
- Trute, B., Hiebert-Murphy, D., & Levine, K. (2007). Parental appraisal of the family impact of childhood developmental disability: Times of sadness and times of joy. *Journal of Intellectual & Developmental Disability*, 32, 1-9. doi: 10.1080/13668250601146753
- Wallander, J. L., & Varni, J. W. (1998). Effects of pediatric chronic physical disorders on child and family adjustment. *The Journal of Child Psychology and Psychiatry and Allied Disciplines*, 39, 29-46.
- Wehmeyer, M. L., & Field, S. L. (2007). *Self-Determination: Instructional and assessment strategies*. Thousand Oaks, CA: Corwin Press.
- Wiegner, S., & Donders, J. (2000). Predictors of parental distress after congenital disabilities. *Journal Developmental Behavioral Pediatrics*, 21, 271-274.
- Williford, A. P., Calkins, S. D., & Keane, S. P. (2007). Predicting change in parenting stress across early childhood: Child and maternal factors. *Journal of abnormal child psychology*, 35(2), 251-263.
- Zablotsky, B., Bradshaw, C. P., & Stuart, E. A. (2013). The association between mental health, stress, and coping supports in mothers of children

with autism spectrum disorders. *Journal of Autism and Developmental Disorders*, 43, 1380-1393.

Zapata, A., Bastida, M., Quiroga, A., Charra, S., & Leiva, J. M. (2013). Evaluación del bienestar psicológico y estrategias de afrontamiento en padres con niños o adolescentes con retraso mental leve [Assessment of psychological well-being and coping strategies in parents with children or adolescents with mild mental retardation]. *PSIENCIA: Revista Latinoamericana de Ciencia Psicológica*, 5, 15-23.

Received April 24, 2020

Revision July 4, 2020

Accepted July 10, 2020