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A Comparative Study Of Attribution Style Of Parents Of Disabled Children

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Abstract:

Parenting is a major and challenging task that is augmented by the fact that the child involved in it might be a person with special needs. Attribution is a mental process through which people cause things, actions and life situations. Attributional style (AS) is a person-level factor that characterizes the patterns of consistently evaluating positive and negative events of life (Abramson, Seligman and Teasdale, 1978). The prime objective was to assess and find out the attributional style between parents of children with disabilities and parents of children without disabilities. The sample consisted of 100 parents (50 couples) of children with disabilities and 100 parents (50 couples) of children without disabilities, all residing in the Palamau district and meeting the inclusion and exclusion criteria. The sample had been selected using a purposive sampling method. Tools used for the study were Socio demographic and clinical data sheet, General Health Questionnaire (GHQ-5), and The Attributional Style Questionnaire (Peterson et al., 1982). It was found in analyses that parents whose children were not disabled expressed more positive explanatory framework and especially attributed positive events to internal determinants. Parents of children with disabilities, on the contrary, were less likely to project positive consequences onto self-elements, which is an indication of a lesser sense of agency. In addition, the two groups also varied significantly in both positive and negative attributional items on the composite scores.

Introduction: The behaviour of children is heavily influenced by the parents who determine the behaviour of children both directly and indirectly. The parenting style of authoritarian requires emphasis on rules and regulations and excludes questioning. On the other hand, permissive or indulgent parenting offers too much freedom to children so that they define family rules and often give in to their demands. Puberty is an important stage in the lives of both the parents and the teenagers, which is why many researchers believe

that this is a tough phase. There is empirical evidence that shows that one goes through a lot of changes in the process of getting into adulthood since adolescence is a period where individuals experience physical changes in morphology, cognitive and emotional conditions as well as interpersonal relations.

In the quest to explain the processes behind attributional styles, there is need to conceptualise environmental and individualistic viewpoints in behavioural analytic approaches. Heider (1958) presented two processes into which to study the interaction of individuals with their environment, which is then followed by consequent responses and thinking.

When a person has a positive orientation, they have a very clear and optimistic view of the world. These people will interpret information rationally and have a specific epistemic position. The constructive point of view includes the knowledge of phenomena on the global and internal level in opposition to negative point of view, being specific and external (Forgeard and Seligman, 2012). The theoretical framework of positive environmental feedback is universal.

Negative minded people do not have clear concepts. Their mental style does not work, and they are despondent, assuming that everything goes wrong with them. Positive events are considered as an accident, not having any positive consequences and they are more based on the ideas of luck and fate. Convinced that there will be no positive events in the future, a pessimistic person thinks that he/she does not find any affection of people and lives in misery but an optimistic person thinks he/she is the universal one adored and indulged. This trend can be termed as a negative attributional style.

“Prakash and Bhogle (1994) investigated the disparities in management styles and the correlation between using coping and mental despair among 232 scholars. (n.d.). essay. They established that female scholars employed considerably more emotionally attuned controlling strategies, and psychological distress was notably correlated with the utilization of emotionally attuned management.”

Luten, Ralph, and Mineka (1997) did studies with college students to look into the connection between a pessimistic attributional style and both good and bad moods, as well as sad and nervous moods. It was found in both studies that an impatient attributional style was linked to negative affect and depressive mood but not to lower amounts of positive affect.

"A study encompassing college pupils was performed by Corr and Gray (1996). The results showed that specificity anxiety was positively associated with negative attributional style and negatively with positive attributional style."

Anshel and Brinthaup (2006) studied 428 fourth- and sixth-graders, both boys and girls, to determine which attributional style variables were associated with particularity anxiety. There was a small but statistically significant relationship between particularity anxiety and negative attributional style, according to the findings.

Furthermore, girls exhibited higher levels of particularity anxiety compared to boys, and there existed a substantial link between attributional style and particularity anxiety for girls, but not for boys. Senior scholars exhibited a greater tendency for internal attributions about negative events and achieved higher overall scores in negative attributions than their junior counterparts.

Despite these findings, there is a noticeable lack of research focusing on attributional style in parents of disabled children particularly, in Jharkhand. The absence of sufficient research became the main reason for this study which investigates attribution style particularly in parents of impairment children.

Objective: The primary study goal was outlined as follows for the investigation.

1. To examine the distinctions in attribution techniques between parents of children with disabilities and parents of children without disabilities.

Hypotheses: The subsequent hypothesis was developed regarding attribution style of parents of disabled children. This hypothesis was compared to the other group of parents of non-disabled children to look at the variations between them. For the aims of this investigation, null hypotheses were formulated.

Hypotheses:

H01- 1. There will be no substantial disparity in attributional strategy between parents of children with disabilities and those of children without disabilities.

Method:

Research design:

In the current investigation cross sectional, and comparative design was used.

Sample:

In this study, the sample will consist of 100 parents (50 couples) of children with disabilities and 100 parents (50 couples) of children without disabilities, all residing in the Palamau district and meeting the inclusion and exclusion criteria. The sample had been selected using a purposive sampling method.

Inclusion criteria:

- Both parents must be living with the child.
- The child has to have a diagnosis of any affliction covered under the PWD Act.
- The parent(s) must have at least a high school education and be able to understand the questionnaire and respond to it appropriately.

Exclusion criteria:

- Parents who showed significant psychological distress as measured by scores greater than the cutoff on the General Health Questionnaire (GHQ);
- Parents who refuse to cooperate in this process.
- Parents who have a documented history of alcohol and/or drug abuse, traumatic brain injury or other significant medical conditions.

Tools used for data collection:

1.Sociodemographic and Clinical Data Sheet: This tool is meant to gather important information about sociodemographic and clinical factors, such as age, gender, level of education, where the person lives, their marital status, their age at onset, the length of their disability, their family history of illness, the type of child disability, and the severity of the disability, among other things.

2. General Health Questionnaire (GHQ-5):

The General Health Questionnaire-5 (GHQ-5) is a short self-report test that looks at a person's overall mental health and finds minor mental health issues, especially anxiety, depression, and problems with social interaction. Goldberg created it as a shorter version of the popular GHQ. It has five questions that look at mental health symptoms that have happened in the last few weeks. The Likert scale approach is used to score the test.

- Submissions are evaluated on an index of 0 to 3.
- The total score ranges from **0 to 15**.
- Higher scores indicate higher levels of distress.

3. The Attributional Style Questionnaire (Peterson et al., 1982): This questionnaire includes 12 hypothetical situations, some with good and some with bad outcomes. There are also 48 questions that go along with these situations to test attributional style. An instrument for self-reflection, the Attributional Style Questionnaire (ASQ) rates respondents depending with their characterizations of pleasant and unpleasant experiences. It achieves this by comparing three types of causes: internal and external, stable and unstable, and global and specific.

Procedure: The participants, or their parents, if necessary, gave their full consent. They were informed of the study's purpose, and all their inquiries were addressed.

Collection Of data: The researcher initially made a visit to mainstream schools, and specialized schools, disability support groups run by non-governmental organizations, community centres, Anganwadi centres, local hospitals, Samagra Shiksha institutions, and other clinics in the Palamau district. The parents were screened on the General Health Questionnaire (GHQ) to determine their psychological status and snowball

sampling methods were also applied in recruiting the participants. The normative control group was as well mainly obtained on a variety of schools found in the palamau district.

The selection of participants was done using predetermined inclusion and exclusion criteria.

The individual interview was used on each participant. In these interviews, all the relevant data were recorded and data collected was systematically recorded on Individual Data Form (IDF).

Statistical analysis: Using a proper statistical method to analyse the data involved using SPSS v 22.0. If the data was able to be categorized, they were represented as a percentage; if the data could be measured as a continuous measure, a Mean, Standard Deviation, and t-Ratio were calculated.

Result and discussion:

H02- There would be no significant difference in attribution style between parents of disabled children and parents of non-disabled children.

Table 4.4: Comparison of attribution style Scores of parents of disabled children and parents of non-disabled children.

Dimension	Groups	N	Mean	SD	t-value	P value	Sig
On positive items							
Composite	Disabled Non-disabled	100	14.85 16.10	2.10 1.90	3.121	0.00237	Significant (p<.01)
Internal-external	Disabled Non-disabled	100	4.05 5.15	1.10 0.90	5.473	0.0036	Significant (p<.01)
Stable- unstable	Disabled Non-disabled	100	5.10 4.90	1.92 1.10	0.639	0.5246	N.S.
Global - specific	Disabled Non-disabled	100	4.72 4.82	0.77 0.64	0.706	0.4818	N.S.
On negative items							
Composite	Non-disabled disabled	100	14.12 12.02	2.05 1.90	5.313	0.0068	Significan t(p<.01)
Internal-external	Non-disabled disabled	100	4.34 4.14	0.66 0.77	1.34	0.1664	n.s.
Stable- unstable	Non-disabled disabled	100	4.10 3.90	0.80 0.90	1.174	0.2431	n.s.
Global - specific	Non-disabled disabled	100	5.12 3.50	1.80 1.10	5.430	0.0057	Significan t(p<.01)

This research aimed to compare the attributional styles of parents whose children have disabilities with those of parents whose children do not have disabilities, across both positive and negative life events.

There was a significant difference between non-disabled children ($M = 16.10$, $SD 1.90$) and disabled children ($M = 14.85$ $SD 2.10$) controlling the effect of composite attribution towards positive outcomes. In accordance with the significant t-value ($t = 3.12$) ($p < .01$), parents whose children do not have disabilities tended to attribute favourable outcomes with a more optimistic attributional style.

Another area where the two groups exhibited substantial differences in their assessment of positive experiences along the internal-external dimension. Parents whose children do not have disabilities reported much higher levels of internal attributions ($M = 5.15$, $SD = 0.90$) compared to parents whose children do have disabilities ($M = 4.05$, $SD = 1.10$). This difference was found to be statistically significant ($t = 5.47$, $p < .01$). Results indicated that parents of children without disabilities attributed their child's successes to their ability or hard work, whereas for positive events, there were no significant differences between groups on both stable and unstable ($t=0.64$; $p>.05$) as well as global and specific ($t=0.71$; $p>.05$) dimensions of outcomes. This means that the two groups had similar opinions about good outcomes in terms of their application and consistency across various contexts.

There were considerable differences in total attribution scores among the groups for negative events. Parents of children with disabilities had a higher composite score ($M= 14.12$, $SD= 2.05$) than did parents of children with disabilities ($M= 12.02$, $SD= 1.90$) and this difference was statistically significant ($t=5.31$, $p<0.01$). These findings suggest that there is a difference between the two groups' attributional understandings of negative events.

Regarding propensity to attribute negative events, there were no significant differences between the two groups on either the internal-external dimension ($t=1.34$, $p>0.05$) or the stable-unstable dimension ($t=1.17$, $p>0.05$). Further it was found that both groups differ significantly on Global-specific dimension.

The results showed parents of children with impairments exhibit distinct attributional patterns compared to parents of children without disabilities across some parameters. These dimensions include composite attribution scores, the tendency to internalize good events, and the tendency to externalize negative events. Thus, the null hypothesis that "There would be no significant difference in attribution style between parents of disabled children and parents of non-disabled children" was partially accepted.

When attributing positive outcomes to a child's accomplishments, many of the parents who have children with disabilities are using an external attributional style, while parents of children without disabilities have higher levels of optimism, which leads them to use an internal attributional style.

As a result of being exposed to such stressful situations and uncertainty about their child's future (due to the

additional challenges of raising a child with disabilities), parents of children with disabilities are generally less likely to attribute positive outcomes to their own efforts or abilities than are parents of children without disabilities.

In addition, parents of children with normal development have significantly different beliefs of negative events than those of parents of children with disabilities. Such difference can be noticed in the comparative levels of stable-unstable synthesis and global-specific synthesis whereby the former group scores statistically significantly higher. The perceptual difference could indicate a coping mechanism and outcome of learning to disconnect negative cognitions and emotions with functioning in general after a long time being exposed to chronic stress.

Parents who have children with developmental difficulties in adaptation to the continued adversity seem to take a more detailed assessment of negative events and show a rather pessimistic attributional mode of positive events. Improving parental well-being may possibly be accomplished in terms of strengthening the development of more adaptive coping styles such as attenuation of excessively negative and global interpretations and encouraging increased internal attribution of positive consequences.

Figure: 4.5: Comparison of mean attribution style Scores (on positive items) of parents of disabled children and parents of non-disabled children.

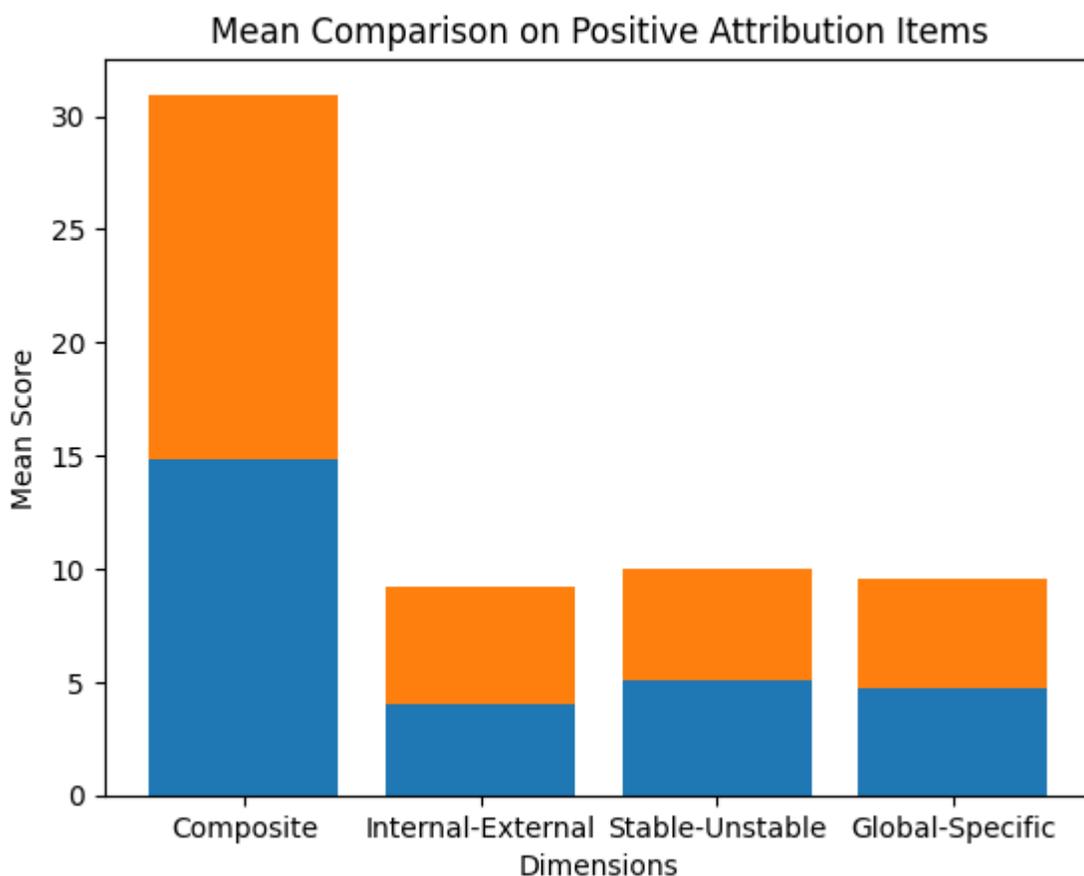
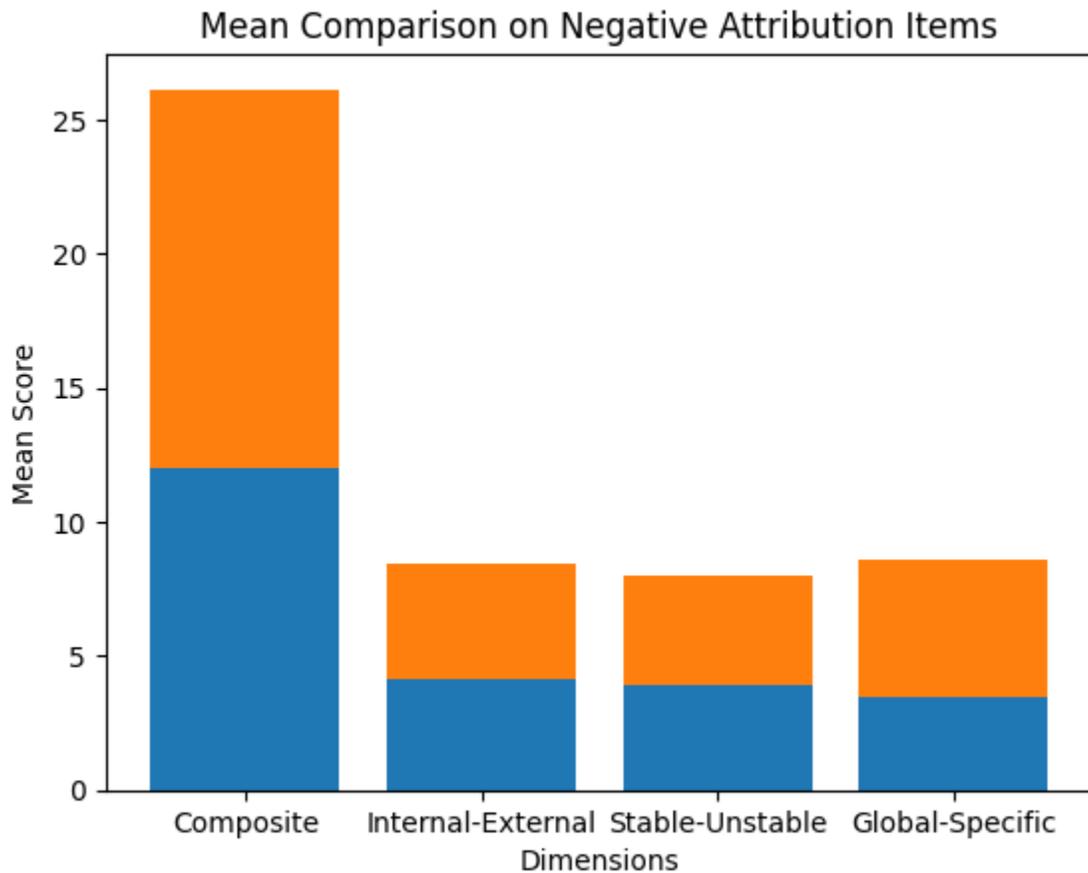


Figure: 4.6: Comparison of mean attribution style Scores (on Negative items) of parents of disabled children and parents of non-disabled children.



Conclusion: Studies of attributional style revealed that the parents of normally developing children have a positively oriented explanatory system, that is, attributing positive events to external factors. On the other hand, parents of children with disabilities also show a lower tendency to believe that positive results have been caused by themselves meaning they do not show a sense of agency. It is worth noting that such parents tend to interpret adverse events as contextually specific, which is a possible adaptive mechanism that helps them to avoid prolonged adverse effect.

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