

The Relationship between Optimism and Life Expectancy with Family Function among Parents with Disabled Children

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Abstract

This study was done aimed to investigate the relationship between optimism and life expectancy with family function among parents with disabled children in the city of Tehran. This research is descriptive by correlation method. Statistical population included all parents with disabled children in Tehran and the research sample consisted of 202 people. Sampling method was chosen based on available. The Spss software version 18 and correlation method and simultaneous multiple regression was used to analyze the data. Tools used include Family Assessment Device (FAD), scale Snyder hope, optimism questionnaire (LOT). The results showed that family performance with hope 0.49 and with optimism 0.48 has a meaningful relationship. In addition, optimism and hope can explain 0.09% of the variance spiritual well-being. It is suggested that to take actions order to help improving the performance of disabled parents.

Keywords: Optimism, hope, family performance, parents, disabled

1. Introduction

Birth and presence of the disabled children in each family can be considered challenging and unpleasant event that will be followed probably distress, frustration, sadness and despair. Disability of a family member effect on the all family members and its various functions because disability damage to cohesion and family structure and its consequences is creation of changes in performance and compatibility of the family (Loeb, Eid & Mont 2008).

Disability is among the factors that make life happy, energetic, successful, relationship with others and is affected the family (Hwang, Hammer & Cragun, 2011). About 7 to 10 percent of people of the world are with disability (Aminzadeh, Hatamizadeh, Mirkhany & Kazemnejad, 2011). 54 million people in America are also in handicapped group that 4.4 million of them are in the age of the child and from every child that is born second 2 children are born with a disability (Roskham, Zech, Nils, & Nader, 2008).

According to medical model, disability is a problem in the individual. According to social model, disability is caused by inconsistency of environmental and individual experience than physical and can facilitates functional limitations (Mozor, 2008)

In addition, in the families with disabled children the roles of members has changed and relations have been based more on emotional and psychological needs of members are not met, and functionally within the scopes of the role, behavior management, emotional performance and overall performance are with weakness and insufficiency (Friedrich & Friedrich, 1981).

Among the family members of disabled, parents are at greater risk of catching mental health problems, with (Michaeli, 2009). Evidences show that parents of disabled children have lower physical and mental health. Many of them suffer from back lower pain, headache, migraine, ulcer, anxiety, anger, and sense of guilt, sadness, social isolation, insomnia, and depression (Murphy, Christian, Caplin & Young, 2007).

Parents also report emotions such as frustration, low self-esteem and anger (Thompson, 2009). Efforts to being a good parent may cause the family to do activities that are more than their power, so they can provide the same opportunities as normal children for their disabled children. Gender roles are also different within families with disabled children.

Mothers may feel guilty because they work out or assign their disabled child to someone else while fathers may feel guilty because they do not work out due to their disabled child. So if a father and a mother act differently in relation to disabled children, they therefore may not similar also in terms of health and well-being (Burton, Bridge & Phipps, 2008).

On the other hand research evidences show that when the family is affected by disabled child, they must create major changes in family structure and performance (Schieve, Blumberg, Rice, Visser & Boyle 2007). Family performance is the ability of family in coordination or correspondence with changes created throughout life, resolution of contradictions and conflicts, solidarity among members and success in disciplinary patterns, observing the boundaries between individuals and performing the rules and regulations and principles over this entity with the aim of protect the entire system (Ports, 1992).

How much the family has a poor performance, the mental health problems of family members will also more. So that the performance of family members is positively correlated with mental health conditions of members such as solving mental problems, emotional control, anxiety, depression and physical complaints (Adib, 2001). One of the most important underlying sources of this group of psychological problems is the loss of life expectancy that acts as a mediator for increasing mental health of parents with impaired children (Lloyd & Hastings, 2009).

In fact, the life expectancy is of the concepts of "positive psychology" approach. Positive psychology is considered a science to study the human abilities and strengths (Seligman & Csikszentmihalyi, 2000). The purpose of this approach is to find out methods by which the people can feel more pleasure and joy, express their altruism and play a more prominent role in creating familial, occupational, and social environments (Peterson & Seligman, 2006). In fact, optimism approach acts as a strategy for parents with disabled child by emphasizing on the positive perceptions (Gupta & Singhal, 2004).

Hope as a concept in optimism means the ability to believe to feel better in the future, that stimulates a person's activity by its penetrating force in order to be able to acquire new experiences and creates new forces in person (Pour Mohammad Reza, Ashori & Jalilabkenar, 2013)

People with high hopes show the reduced stresses and recover more effectively of the problems (solving problem) and emotional impacts (Anthony & Bergman, 2006). Hope has a positive correlation with mental and physical health such a positive response to medical intervention, mental health, positive mood, avoid stressful events of life, joy and happiness in life affairs, and problem solving, and foretells them (carr, the translation of Pasha Sharifi, Najafi-Zand & Sanaie 2007). Having a positive attitude and hope also gives dare to people to face with their own circumstances, and increases the capacity to overcome them (Doussard-Roosevelt, Joe, Bazhenov & Porges 2003).

Optimism is inversely associated with depression (Aband, 1998). Individual differences play an important role in the degree of optimism in compatibility with stressful life events and life adverse events (Seligman, 1998). Researches also have shown people who are more optimistic, are more hopeful (Nazirul-Hasnain, WasfeeaWazid, Hasan, 2014; Hutzl, Midgett, Pacico1, Bastianello1 & Zanon, 2014). Despite the positive effects of optimism and the effects that can have on the hope, as well as considering that parents of disabled children report mental and physical problems, including several lower back pain, headache, migraine, ulcer, anxiety, anger, and feelings such as frustration, low self-esteem and anger, and also with regard to the positive effects of optimism that optimism has on mental health; however, no research was found that generally study optimism in the parents with disabled child, as well as the relationship between optimism and hope in the parents of disabled child.

In general, since the disabled child provides a ground for modifying the behavior of the family members, having a disabled child as a significant psychological impact causes conflicting emotions and reactions and intensified needs and the creation of new needs, different attitudes and different behaviors. He also affects mental health, psychological and social interaction, and parents' relationships with each other and with the child. On the other hand, having a positive attitude and hope can be used as a shield to defend of family members, especially parents in the face of these conditions. So the relationship between optimism and hope with the family's performance in parents with disabled child is investigated in this study.

2. Research Methodology

This research is descriptive with correlation method. Statistical population included all parents with disabled children in Tehran. The sample consisted of 202 people. Sampling method was chosen based on available. In addition, the spss software version 18 and correlation method and simultaneous multiple regression was used to analyze the data. The tools used in this research are: Family Assessment Device (FAD): is a 60-item questionnaire that to measure family performance has been developed based on McMaster model this model

determines the structural characteristics, occupational and family interaction and defines 6 dimensions of family performance which contains problem solving, communication, roles, emotional responsiveness, emotional involvement, behavior control, In addition is a seventh scale that is related to overall family performance. Lower scores indicate a healthier performance. The average of answers to the questions that each between 1 (normal) and 4 is (unhealthy), 7 scale are calculated to obtain scores. The validity and reliability of these instruments has been proven in the studies abroad (Fogarty, 2009). In Iran also has been normalized by Mohammadi Zadeh & MalekKhosravi (2011) and Cronbach's alpha coefficient of total scales has been obtained of 0.94. In this study the validity of the test was obtained 0.81 by Cronbach alpha method.

Snyder Hope Scale: It is a self-report questionnaire consisting of 12 questions that has been created in 1991 by Schneider et al. This scale has been designed for ages of 15 and older, include two subscales of crossings (crossings, paths and different ways to reach the goal) and motivation (determination to reach the goal) (Snyder et al., 1991). In addition, content validity of this scale has reached to confirm the clinical specialists (Ghahremani and Nadi, 2012). In this study validity of the test was obtained 0.73 by Cronbach alpha method.

Optimism questionnaire: This questionnaire was made by Sheier and Carver (1985) to measure optimism and was named as lifestyle orientation (LOT) . 6 questions that 3 of them have been designed positive, 3 negative. Higher scores indicate greater optimism after the reversing the scores obtained questions of total scores of optimism and pessimism matters is calculated as total scores. Higher scores in general indicate more tendencies to expect more positive results against more negative results. In addition, factor analysis of nature optimism and structures related has shown that nature optimism is an independent factor (Sheier and Carver, 1985). This indicates discriminant validity of this structure. In Iran also Khodabakhshi has normalized this questionnaire. Results obtained are based on test-retest reliability and Cronbach's alpha indicates reliability of optimism scale. Simultaneous validity coefficient between optimism with depression scale and self-control has been obtained 0.64 and 0.72. In this study validity of the test has been obtained 0.83 by Cronbach alpha.

3. Research Findings

In this section we test hypotheses by analyzing the data collected through questionnaire that have particular importance in conclusion of study. Statistical techniques used in this research are correlation test and multiple regression analysis, in addition the descriptive statistics have been used to assess demographic variables statistical sample. The present research sample is 202 participants, 101 of whom were Father of disabled children and 101 mothers of disabled children. In order to determine the variables descriptive information about the study, descriptive indicators have been considered in Table 1.

Table 1. The mean and standard deviation of research variables

Research variables	mean	SD
Overall performance	12.31	1.3
Solve the problem	03.12	16.3
Relationship	03.16	3.6
Roles	89.21	59.3
Emotional response	17.18	83.1
Emotional involvement	38.23	75.6
Behavior management	33.23	12.3
Hope	5.26	38.6
Optimism	88.13	91.5

Correlation matrix of Research variables have been provided in the Table 2.

Table 2. Pearson correlation test for research variables

	General performance of family	hope	Optimism
General performance of family	1		
Hope	49.-0**	1	
Optimism	48.0**-	62.0**	1

As can be seen in Table, family performance with hope 0.49 and with optimism 0.48 has relationship, which

statistically also has relationship ($p < 0.001$). In addition hope with optimism about 0.62 is associated ($p < 0.01$). Two-variable linear regression was used to evaluate of this hypothesis that the optimism and hope can explain the part of the variance in family performance. Table 3 shows the results of the analysis. As can be seen in Table optimism and hope can explain 0.09% of performance of the family. Also standardized beta coefficient indicates that one unit increase in optimism score is 0.39 increases in family performance score. On the other hand one unit increase in the hope score is 0.16 units in increasing the performance of the family.

Table 3. Analysis of simultaneous two varieties regression

Model	Non-standardized coefficients		Standardized coefficients			
	B	Beta	R2	f	t	P
hope	0.22	0.39	0/09	89.10	52.4	001.0
Model	0.56	0.16			95.1	05.0

4. Discussion and Conclusion

This study was conducted with the aim to investigate the relationship between hope and optimism with family's performance. As noted, the research results showed optimism and hope are significantly related to family's performance and it was predicted. Various studies have shown the correlation of hope and optimism with family's performance components (Schneider & Lopez, 2007; Anthony & Bergman, 2006; Gupta & Singhal, 2004; Abend & Williamson, 2002)

Overall, these researchers have shown optimism approach with an emphasis on the positive perceptions acts as a strategy for parents with disabled child so that they can better cope with family situation and improve family's performance. A disabled child has a broad impact on the family environment and requires a higher level of care. In some cases because of lack of the required support and other necessary factors, the existence of a disabled child in the family may lead to parents' divorce or some crises in the family environment (Rousey , Wild & Blacher, 2002).

In addition, studies have shown that families with disabled child have some troubles in terms of performance, and are weak within the scope of role, behavior control, emotional performance, and overall performance (Khodabakhsh, Khodadadi, Akhavi & Anisi 2013).

While the performance of family plays an important role in relation to disabled child and family (Hamiwka, Enrica, Tse, Blachaman, & Wirrell 2008). Positive approach seems to have an impact on the performance of these families, especially parents. One of the implications of this approach is optimism and hope. In explaining the results obtained from this study can be said that parents who have an optimistic attitude about themselves and the world, have more mental and physical health. So they improve their performance despite the unfavorable position. Optimistic and hopeful people probably will experience higher well-being. Positive emotional state can cause mental health and improve psychological and even physical status of people.

Optimism causes people to find some beliefs that make personal ability; and have positive assessments from the social and family environment. As a result, they will expect positive results. This causes people to become stronger against the harsh conditions. Optimism and hope in their proper form causes progress, and leads the man forward; while pessimism is inherently self-failure-maker mechanism, and prevents the person from the position. The reason is that optimistic and hopeful people pass the problem after understanding it, and concentrate on solution and adapt themselves with the conditions, and also accept the conditions. Optimism probably is beneficial in both intrapersonal and interpersonal dimensions, even in the absence of stress.

As well as optimism and hope have been also linked with the efficient coping strategies and even better outcomes in physical health and compatibility with the conditions. Optimism may provide the cognitive, coping and contexture resources that can improve family's performance through the improvement of physical and psychological well-being. This study, like any other study had some limitations, including the external validity limitation. Therefore, broader population is suggested to use in future researches.

Another limitation of this study is the lack of research on this group, especially in the field of positive psychology. Therefore it is suggested to researchers develop research in this area. It is also proposed other researches to be conducted in the field of other family members. It is suggested to psychologists and welfare officers to do some protective acts in reconstruction aid, growth and promoting performance of family with

disabled child particularly the situation of their parents.

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