

Social Support and Psychological Well-Being in Fathers of Children with Autism Spectrum Disorders



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Introduction

Fathers of children with autism spectrum disorders (ASDs) are at risk for higher levels of parenting stress and poorer psychological well-being than are fathers of typically developing children (Benson & Karlof, 2009) and fathers of children with other types of developmental disorders (Hartley, Seltzer, Head, & Abbeduto, 2012). Theoretical and empirical research suggests that social support is an important mechanism that impacts the relationship between psychological stress, including parenting stress, and psychological well-being (Bloor, Sandler, Martin, Uchino, & Kinney, 2006). The present study examines the relationship between the receipt of various types and sources of social support and psychological well-being in fathers of children with ASDs

Study Aims

- 1) Determine the types and sources of social support that fathers of children with ASDs report receiving.
- 2) Evaluate the association between social support and psychological well-being in fathers of children with ASDs

Methods

Participants

- 69 Fathers aged 25-61 years ($M = 44.42$; $SD = 7.82$)
- Household income: \$20K-\$160K+ ($M = \$80K$ -\$89K; $SD = \$30K$)
- Child with an ASD aged 3-20 years ($M = 12.06$; $SD = 5.01$)
- 95.6% Caucasian, non-Hispanic

Measures

- *Types and Sources of Social Support*: The Sources of Social Support Scale (SSSS; Carver, 2006)
- *Psychological Well-Being*: Positive and Negative Affect Schedule (PANAS; Watson, Clark, & Tellegen, 1988)

Results

Study Aim 1: Type of Support

- A paired samples t-test indicated a significant difference in fathers' perceived level of support based on type ($t(68) = -9.02$, $p < .01$).
- Fathers reported receiving significantly higher levels of *emotional support*.

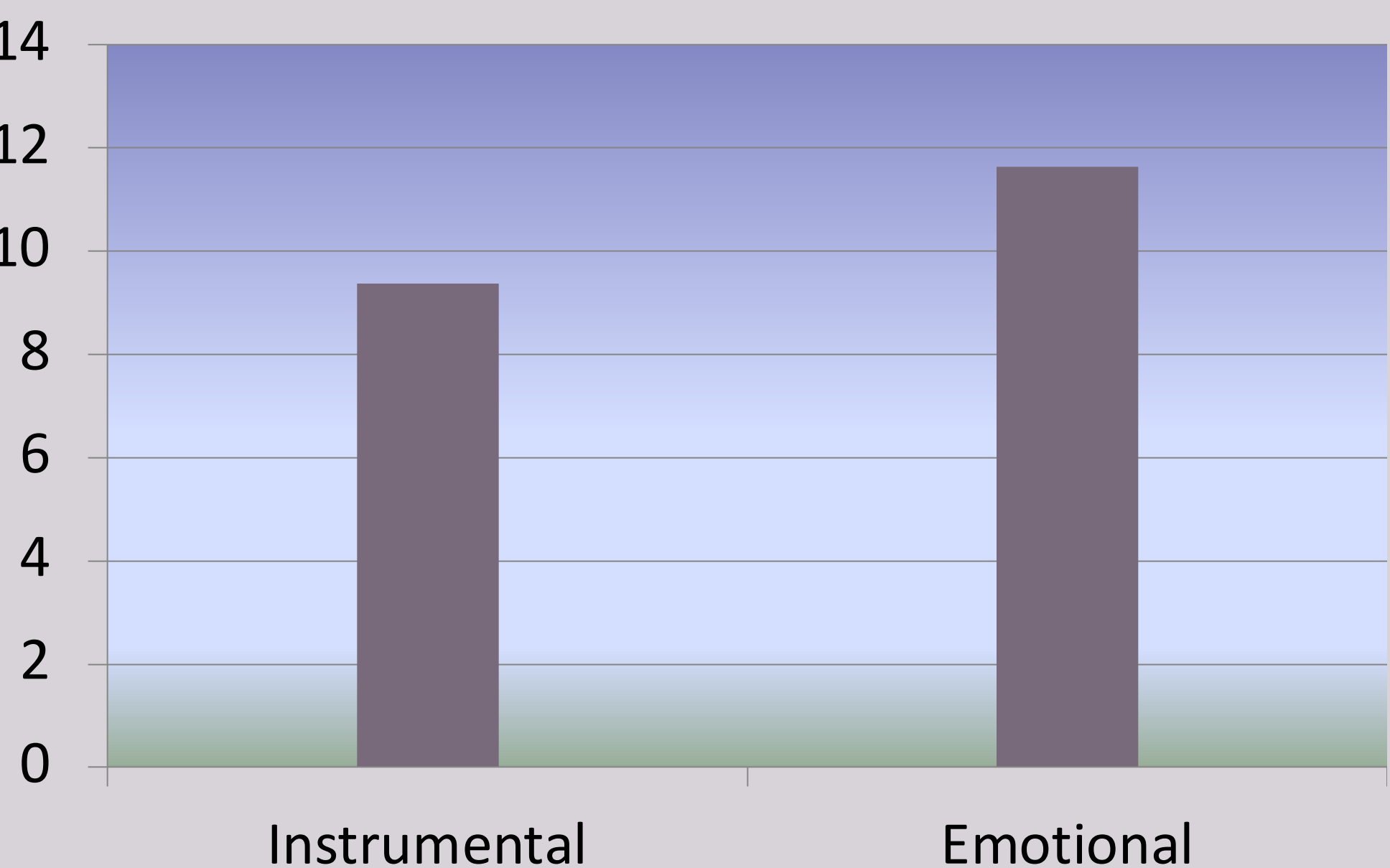


Table 1. Types of Social Support

| | Minimum | Maximum | Mean | Std. Deviation |
|--------------|---------|---------|-------|----------------|
| Instrumental | 6.00 | 16.50 | 9.36 | 1.88 |
| Emotional | 5.00 | 17.75 | 11.64 | 2.77 |

Note Table 1. $t(68) = -9.02$, $p < .01$

Study Aim 1: Source of Support

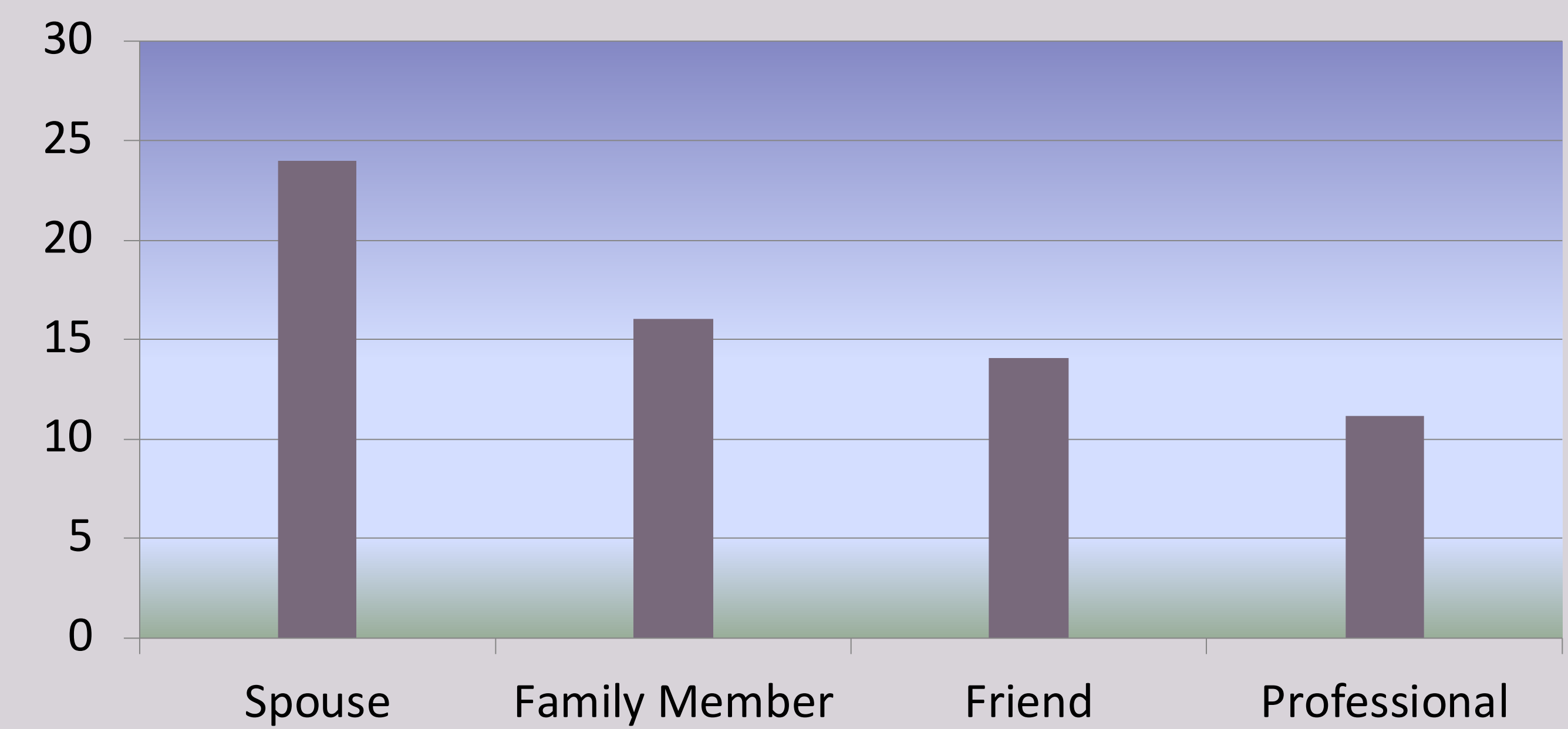


Table 2. Sources of Social Support

| | Minimum | Maximum | Mean | Std. Deviation |
|---------------|---------|---------|-------|----------------|
| Spouse | 11.00 | 30.00 | 24.00 | 4.793 |
| Family Member | 6.00 | 30.00 | 16.06 | 4.914 |
| Friend | 6.00 | 27.00 | 14.04 | 5.066 |
| Professional | 6.00 | 26.00 | 11.17 | 4.814 |

Note Table 2. $t(68) = 12.28$, $p < .01$ (spouse - family member); $t(68) = 3.57$, $p < .01$ (family member - friend); $t(68) = 3.85$, $p < .01$ (friend - professional)

- A one-way repeated measure ANOVA indicated that there was a significant difference in fathers' perceived level of social support based on source ($F(3, 68) = 130.12$, $p < .001$).
- Fathers reported significantly higher levels of social support from their *spouse* than social support from other sources. Bonferroni-corrected paired sample t-tests indicated that fathers reported receiving significantly more social support:
 - from their *spouse* than from another *family member* ($t(68) = 12.28$, $p < .01$).
 - from their *spouse* than from a *friend* ($t(68) = 13.62$, $p < .01$).
 - from their *spouse* than from a health care *professional* ($t(68) = 18.241$, $p < .01$).
 - from a *family member* than from a *friend* ($t(68) = 3.57$, $p < .01$).
 - from a *family member* than from a *professional* ($t(68) = 7.14$, $p < .01$).
 - from a *friend* than from a *professional* ($t(68) = 3.85$, $p < .01$).

Study Aim 2: Type of Support and Affect

Table 3. Correlations Between Type of Social Support and Positive/Negative Affect

| | | Positive Affect | Negative Affect |
|----------------------|---------------------|-----------------|-----------------|
| Instrumental Support | Pearson Correlation | .279* | -.307* |
| Emotional Support | Pearson Correlation | .295* | -.209 |

** . Correlation is significant at the 0.01 level.
* . Correlation is significant at the 0.05 level.

- *Instrumental support* was significantly positively correlated with *positive affect* ($r = .28$, $p = .020$) and significantly negatively correlated with *negative affect* ($r = -.31$, $p = .010$).
- *Emotional support* was significantly positively correlated with *positive affect* ($r = .30$, $p = .014$), but was not significantly correlated with *negative affect*.

Study Aim 2: Source of Support and Affect

Table 4. Correlations Between Social Support Sources and Positive/Negative Affect

| | | Positive Affect | Negative Affect |
|---------------|---------------------|-----------------|-----------------|
| Spouse | Pearson Correlation | .253* | -.335** |
| Family Member | Pearson Correlation | .128 | -.076 |
| Friend | Pearson Correlation | .255* | -.122 |
| Professional | Pearson Correlation | .248* | -.182 |

** . Correlation is significant at the 0.01 level.

* . Correlation is significant at the 0.05 level.

- Social support from one's *spouse* was significantly positively correlated with *positive affect* ($r = .25$, $p = .036$) and significantly negatively correlated with *negative affect* ($r = -.335$, $p = .005$).
- Social support from a *friend* was significantly positively correlated with *positive affect* ($r = .26$, $p = .035$) but was not significantly correlated with *negative affect*.
- Social support from a health care *professional* was significantly positively correlated with *positive affect* ($r = .25$, $p = .040$), but was not significantly correlated with *negative affect*.
- No significant correlation between social support from another *family member* and *positive* or *negative affect* was found.

Discussion

- Fathers reported receiving more *emotional support* than *instrumental support*.
- Although both *emotional support* and *instrumental support* were related to positive affect, only *instrumental support* was related to negative affect.
- Support from one's *spouse* appears to be a particularly beneficial source of social support for fathers, as it was the only source of support related to *negative affect*.
- These findings suggest that marital quality and the couple relationship, as well as the provision of tangible, *instrumental support* may be important foci for intervention services for fathers of children with ASDs.

References

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