PI 57

Gender Differences in Parenting Stress and Social Support Among Hemophilia Families

Gates, Carletha

Submission Group

Psychosocial Issues

Abstract

Objective: This research study examined gender differences in parenting stress and social support perceptions in families of children with hemophilia. This study sought to raise awareness of gender differences related to hemophilia parents' stress and impact how they can better utilize social support networks as they raise their chronically ill child. Understanding the link among gender, stress, and perceptions of social support is important to help parents develop coping strategies to meet the unique challenges of caring for their child with hemophilia. Methods: A quantitative, online survey design was used for this study. Two instruments measured the data: the Parenting Stress Index-Short Form (PSI-SF) measured parenting stress, and the Medical Outcome Study Social Support Survey (MOS-SSS) measured social support. A demographic questionnaire developed by the researcher was also used. Using a purposive sampling technique, mothers and fathers, over the age of 18, who have children with hemophilia, and reside in Maryland, Washington, DC, or northern Virginia were recruited for the study. Two research questions and related hypotheses were developed for the study. MANOVA was used to determine whether mothers and fathers of children with hemophilia differ with regard to level of perceived parenting stress and level of perceived social support. Summary: The study revealed that mothers expressed significantly higher levels of parenting stress than did fathers. The findings also indicated that mothers' perception of social support was significantly higher than that of fathers. No significant difference in parenting stress in the severity of the child's hemophilia was found. The total sample consisted of 62 participants; 59.7% (n = 37) were mothers and 40.3% (n=25) fathers. Univariate testing found that mothers (M = 140.05) had a significantly higher level of perceived parenting stress than fathers (M = 121.08). Univariate testing found that mothers (M = 68.46) had a significantly higher level of perceived social support than fathers (M = 56.32). Parenting stress did not significantly differ for parents with children with mild to moderate hemophilia (M = 134) and parents with children with severe hemophilia (M = 131.64). Conclusion: The findings from this study support the need for hemophilia advocates to have a more in-depth dialogue about parenting stress. No matter the severity of the child's hemophilia, all hemophilia parents experience stress and are in need of gender-specific social support. Study results should equip hemophilia advocates with information that will add clarity to the implications of gender differences and how to relate these differences to understanding stress and providing gender-specific social support. The information from this study can be used to engage parents through programs and services that would help decrease stress and increase social support use to improve the health, wellness, and overall quality of life of the hemophilia family.