

Stress, Social Support, Experience of Shame Loss of Face, and Mental Health on Chinese Immigrant Mothers of Children with Developmental Disabilities

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STRESS, SOCIAL SUPPORT AND MENTAL HEALTH OF MOTHERS OF CHILDREN WITH DISABILITIES

About 18,000 children have one or more disabilities in Canada, and 57.6% of these children have developmental disabilities (DDs) (Statistics Canada, 2001). Previous studies have found that families of children with disability face more stressors (Dowling & Dolan, 2001; Hon et al., 2011) and need various types of social support (Khanlou & Haque, 2013; 2014). Prolonged stress has been found to relate to health and mental health issues, with some mothers experiencing depression and health problems (Sarafino, 1994). A high portion of parents of children with DDs have been diagnosed as severely anxious and two-thirds as clinically depressed (Bitsika & Sharpley, 2004). In the long term, this situation may further affect their children's mental health and well-being (Crnic, 1990). Past research also found that social support is an important determinant of health (Simich et al., 2005) and can buffer and alleviate the negative effects of stress. In one study, social support mediated and predicted health and quality of life of mothers of children with disabilities (Zebrack & Lim, 2004).

WHY IS THIS RESEARCH NEEDED?

Mothers are the main caregivers in the families of children with DDs. In Canada, the Chinese immigrant population is increasing and is the second largest visible minority group, among some of which, children with DDs are being raised. In our recent qualitative study (Chinese Mothers Project #1) from Su et al. (2014), 15



Chinese immigrant mothers of children with DDs in Toronto of Canada were interviewed regarding stress, social support and cultural beliefs through a semi-structured interview. Various stressors were found such as limited financial resources, excessive paper work, long waiting times, lack of English-language proficiency, limited knowledge of social services, emotional strain, experiences of discrimination, transportation difficulties and dispersed services, and mothers being blamed. Some cultural barriers included stigma due to feelings of loss of face, and avoiding talking about the family situation. Although some mothers talked about the support they have received from government funding, public health, school, church, family and friends, however, these were not enough. This study showed that social and cultural stress has an important impact on Chinese immigrant mothers of children with DDs.

Chinese culture advocates social harmony and the ability to save face to preserve the public appearance of family and individual, and avoidance of exposing personal weakness (Dowling & Dolan, 2001; Sarafino, 1994). Shame and obligation are the mechanisms to reinforce

proper behaviour and societal expectations (Kramer et al., 2002). In traditional Chinese culture, family is seen as a unit of society and has responsibility for the health, mental well-being, and children's academic performance and achievements (Tews & Merali, 2008). Therefore, we conducted this quantitative study (Chinese Mothers Project 2) to examine the association between these social and cultural factors and mental health among Chinese new immigrant mothers of children with DDs in Toronto. To date, very limited attention has focused on the mental health of Chinese immigrant mothers of children with DDs in their country of resettlement of Canada.

Chinese Mothers Project #2 aims were to:

1. Explore the relationships among parental stress, social support, loss of face, experience of shame, anxiety, depression and self-efficacy on Chinese immigrant mothers of children with DDs;
2. Explore if shame mediates the effect of social anxiety on their depression among Chinese immigrant mothers of children with DDs; and
3. Examine if loss of face mediates the effect of social anxiety on their depression among Chinese immigrant mothers of children with DDs.

HOW WERE DATA COLLECTED?

In total, 64 Chinese immigrant mothers of children with DDs were recruited by the first author through flyers in 3 community organizations (1 mother was recruited by an announcement in York University's e-newsletter in the Great Toronto Area). After providing their written consent, mothers independently completed all measures which included demographic information, the Parental Stress Index-Short

Form, Oslo Social Support Scale, the Experience of Shame, Loss of Face Questionnaire, Social Interaction Anxiety Scale and Social Phobia Scale, Center for Epidemiologic Studies Short Depression Scale, and General Self-efficacy Scale in Mandarin.

Participants

Recruitment (65 Chinese immigrant mothers) took place in the Great Toronto Area. Participants received a debriefing form and \$ 10 cash for their participation.

Average age of mothers/child	Average Years in Canada	Mothers from mainland	Hong Kong Mothers	Macau Mother	Vietnam Mother
44.7/12.3	14.8	48	14	1	1

DATA ANALYSES

Correlations Analysis

First, the zero-order correlations among the various measures were computed to establish the relationships involving stress, social support and self-efficacy, anxiety, depression, shame and loss of face (see Table 1). The result of correlations showed that the experience of shame and loss of face were related to anxiety and depression.

Table 1: Correlations with various Measures

	Stress	Anxiety	Phobia	Depression
Shame	--	.61***	.40***	.64***
Loss of face	--	.35**	.21†	.41***
Self-efficacy	--	--	-.22†	--
Support	.21†	--	--	-.25*

Note: * $p < .05$, ** $p < .01$, *** $p < .001$. † $.05 < p < .10$

Regression Analyses

Second, a series of regression analyses were performed using SPSS REGRESSION to test how loss of face, and experience of shame were related to depression of Chinese immigrant mothers of children with DDs.

(1). Three steps of regression were performed and found loss of face mediated the relationship between anxiety and depression. A Sobel Test confirmed that loss of face partially mediated the effect of anxiety on depression.

(2). The same procedures were used to check if shame mediated the relationship between anxiety and depression. A Sobel Test confirmed that experience of shame fully mediated the effect of anxiety on depression.

MAIN FINDINGS

SOCIAL SUPPORT and MENTAL HEALTH

We examined the relationships among stress, social support, experience of shame, loss of face, anxiety, depression and self-efficacy. We found that social support was negatively correlated with depression, and negatively related to loss of face (marginally). Social support was also negatively correlated with self-efficacy of Chinese immigrant mothers of children with DDs.

EXPERIENCE of SHAME, LOSS of FACE and MENTAL HEALTH

Shame was positively correlated significantly with loss of face, with social anxiety, social phobia, and depression. Loss of face was positively correlated significantly with anxiety, depression and marginally positively related with social phobia of Chinese immigrant

mothers of children with DDs. These results suggest that Chinese immigrant mothers who have more social anxiety and more feelings of shame are more likely to experience increased depression symptoms. Therefore, the effects of social anxiety levels on depression also depends on degrees of shame and loss of face which Chinese immigrant mothers of children with DDs experienced.

MENTAL HEALTH (ANXIETY and DEPRESSION)

Social anxiety was positively correlated significantly with social phobia, and depression of Chinese mothers of children with DDs. Social anxiety significantly predicted depression on Chinese mothers of children with DDs. These results suggest that Chinese immigrant mothers who have more social anxiety and feelings of shame are more likely to experience symptoms of depression. Therefore, anxiety does have significant effect on depression among Chinese immigrant mothers of children with DDs.

CONCLUSIONS

Chinese immigrant mothers of children with DDs experienced many social anxieties, depression, feelings of shame and loss of face. The findings confirmed that the experience of shame and loss of face are associated with each other, and both are linked significantly with increased levels of depression, social anxiety, and social phobia. Moreover, social support are linked with decreased depression and marginally associated with the decreased loss of face. Higher levels of self-efficacy decrease social phobia.

HOW CAN INFORMATION FROM THE SECOND CHINESE MOTHERS PROJECT BE USED?

Our empirical findings highlight the impact of social cultural factors on the mental health of Chinese immigrant mothers of children with DDs. Findings can be used as a resource by policy

makers, program planners, school board leaders, clinicians and community organizers to improve culturally-sensitive and family-oriented services for mothers who are coping with feelings of shame, loss of face, social anxiety, and depression.

Selected References:

1. Chang, M. Y., & McConkey, R. (2008). The perceptions and experiences of Taiwanese parents who have children with intellectual disability. *International Journal of Disability*, 55(1), 27-41.
2. Lai, A. (2006). Eye on religion: Cultural signs and caring for Chinese patients. *Southern Medical Journal*, 99(6), 688-689.
3. Liu, G. Z. (2001). Chinese culture and disability: Information for U.S. service providers. Retrieved September 15, 2010, from <http://cirrie.buffalo.edu/monographs/china.php>

ABOUT THE INFORMATION SHEET

This information sheet is a short summary of our recently completed quantitative study. The full report with a complete list of references will be ready for dissemination this winter. If you would like a copy, please email to owhchair@yorku.ca with the subject heading 'Chinese Mothers Project Report.'

WOMEN'S HEALTH RESEARCH CHAIR IN MENTAL HEALTH

The Office of Women's Health Research Chair in Mental Health is part of the Faculty of the Health at York University. We are interested in studying social factors that affect the mental health and wellbeing of women, youth, and children. To learn more about the activities of the Office, please visit www.yorku.ca/nkhanlou

ABOUT THE RESEARCHERS

Dr. Chang Su is a postdoctoral fellow in Lillian Wright Maternal Child Health of the Faculty of Health at York University and the Principal Investigator of this study. She conducted all the interviews for this project. Dr. Nazilla Khanlou is an Associate Professor at York University and holds the Women's Health Research Chair in Mental Health, she is a postdoctoral supervisor for Dr. Chang Su.

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