Introduction
Research into families of children and young people with disability maintain that parents seem to experience higher levels of global stress than parents of children without disabilities. Considering that adjustment is related to the effectiveness with which the family uses its resources and the support of their social network, we intend to analyse the differences of stress and social support among groups of parents of children with different problems and to clarify the relationships between the variables under study in order to adapt family intervention strategies.

Methodology
With this purpose in mind, a comparative, descriptive-correlational study was undertaken. The convenience sample included three groups of parents of children with different disabilities: 82 with Intellectual Disability – ID (53.9%); 37 with Motor Problems – MP (24.3%); 33 with Autism Spectrum Disorders – ASD (21.7%).

The gathering instruments were Parenting Stress Index (Abidin, 1995) – Portuguese adaptation, Social Support Questionnaire - short version (Pinheiro & Ferreira, 2001) and a Parental Questionnaire (sociodemographic, and family data).

Results
We found significant differences in specific stress dimensions. In relation to Child Domain stress (CD subscale), there were differences in Hyperactivity (p=0.022) and Acceptability (p=0.033), with parents of children with ID having higher results (Hyperactivity: M=26.15, SD=6.67 and Acceptability: M=23.91, SD=4.67) than parents of children with MP (Hyperactivity: M=22.75, SD=6.13 and Acceptability: M=21.37, SD=5.94). We also found differences in Adaptability dimension (p=0.000), with higher scores for parents of children with ASD (M=36.09, SD=5.78) than parents of children with ID (M=30.08, SD=7.56) and those with children with MP (M=29.75, SD=6.88).

Regarding Parents Domain stress (PD subscale) there were significant differences in the Role Restriction dimension (p=0.020), and the parents of children with MP have higher results (M=23.97, SD=6.51) than parents of children with ASD (M=19.72, SD=6.57).

In the Social Support, availability dimension, we found significant differences (p=0.000) among parents of children with ASD, with higher results for social support (M=19.51, SD=8.74), and parents of children with ID (M=13.37, SD=7.92). There were differences between the parents of children with ASD and parents of children with MP (M=13.27, SD=6.35).

We also found significant and negative correlations between parental stress measures (Total PSI; CD subscale and PD subscale) and the social support dimensions (availability and satisfaction with support).

Conclusion
The results converge with the majority of studies in this area, because they enhance the high levels of stress parents or caregivers of children with disabilities feel, particularly in Child Domain stress (Gupta, 2007). In this context, the type of intervention should include parental counseling components, in order to promote a greater awareness and involvement for a better adjustment to disability. Measures that focus on the management and control of behaviour should also be included. The literature also highlights the role of informal support provided by groups of parents, especially in the early stages of adjustment is particularly important promoting positive but realistic expectations of children (Dunst, Trivette & Jodry, 1997).

References

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Parental adjustment to disability, stress indicators and the influence of social support
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