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Socioeconomic And Cultural Determinants Of Maternal Stress In Parents Of Children With Special Needs: A Cross-Sectional Study

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ABSTRACT

This paper examines the socioeconomic and cultural issues that have a bearing on maternal stress in mothers with children with special needs. The research design employed a quantitative cross-sectional design in which data were sampled out of 250 mothers in the urban and semi-urban areas of Kerala with purposive sampling and structured questionnaires. The main variables that were investigated are the socioeconomic status, cultural beliefs, perceived social support, and total maternal stress levels. The relationships among the variables were assessed using descriptive statistics, correlation and multiple regression analysis. The results show that low socioeconomic status, cultural stigma of disability, and absence of social support are major contributors of increased maternal levels of stress. On the other hand, higher education, work, and family support are found to be strong protective elements to reduce stress. The paper highlights the urgent importance of culturally sensitive counseling services, economic empowerment services and inclusive social policies to enhance maternal health. Although it has its merits, the study has been credited with some weaknesses including the cross-sectional design, data self-reported, and small-scale geographic coverage. Research in the future must undertake longitudinal and comparative research designs in different cultural contexts to gain more insight on such determinants.

Keywords — Maternal Stress, Socioeconomic Status, Cultural Determinants, Special Needs, Social Support

1. INTRODUCTION

Having the special needs child brings about a special pool of emotional, social, and economic demands which, in turn, predetermines the high rates of maternal stress. Mothers normally have the most responsibilities of care giving and more stress is compounded by financial strain, societal isolation, and social stigma linked with disability. It is always demonstrated that mothers of children with developmental conditions (autism spectrum disorder, ASD, or intellectual disabilities) experience much more stress than mothers of their normally developing children (Lohiya et al., 2023). Caregiving is a chronic phase that is coupled with a lack of support, and it



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is one of the reasons why these mothers experience mental and physical problems in the long run.

The predictor of parental stress that is most consistent is socioeconomic status (SES). Families with lower-income backgrounds have a hard time in getting quality healthcare, educational facilities and professional therapy, a factor that worsens maternal stress and helplessness. In a systematic review, the authors identified socioeconomic disadvantage, poor coping, and poor social network as the major factors predisposing high parental stress among families having children with special educational needs (Cheng et al., 2023). On the same note, poor maternal mental health results have been associated with socioeconomic deprivation because economic insecurity leads to a perceived heaviness of care delivery (Cabanela & Durias, 2025).

Psychological distress is also further aggravated by cultural beliefs and social stigma among the mothers having children with disabilities. In collectivist cultures, the disability of a child is often blamed on the failure of parents or even a form of divine punishment and results in shame, isolation, and other factors, which reduce the participation of a community. The cultural factors influencing the perception of disability have been discussed in various settings, and the research points out that stigma and conservative attitudes increase the stress levels of mothers and restrict their access to emotional and social support (Giannotti et al., 2022).

On the other hand, social and family support has been observed to serve the buffering role to mitigate maternal stress. Positive relationships, either among partners, extended families or peer groups increase the coping skills of mothers and give them emotional stability. Parenting stress levels among mothers turn out to be lower when they have a high perceived social support and a high perceived competence (Daulay et al., 2018). Likewise, family cohesion and good coping mechanism are also among the most important protective variables that can reduce the impact of socioeconomic disadvantage.

Although there is increasing research interest, a mere comprehension of how socioeconomic and cultural factors interact to affect maternal stress in developing countries such as India, where the culture meets the environment of limited resources in a unique fashion. This paper seeks to investigate these interconnected determinants in a cross sectional study to provide empirical data in order to inform culturally competent intervention and policy in support of mothers of children with special needs.

2. REVIEW OF LITERATURE

The impact of the socioeconomic and cultural factors on maternal stress has been largely identified as a major factor that causes maternal mental health. The situation is even more stressful among mothers of children with special needs as they are thrust into complex caregiving workloads and they have small support networks most cultural settings offer them. Feizi et al. (2014) claim that the mothers of children with physical, sensory-motor, and mental disabilities



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are under a great amount of stress than the mothers of children who develop normally, especially in low-education and low-income populations. This highlights the close relationship between socioeconomic status (SES) and stress among mothers giving care (Feizi et al., 2014).

Socioeconomic deprivation does not only reduce access to resources but also helps to generate psychological distress. Hauge et al. (2015) established that mothers with children with special healthcare needs in Norway were significantly more at risk of psychiatric disorders and long-term sick leaves than mothers with children with typical development, which underscored the burden of financial and caregiving stress (Hauge et al., 2015). Equally, Julihn et al. (2018) showed that the maternal SES at the time of pregnancy affects not just maternal health but child outcomes, which is intergenerational impact of economic disadvantage (Julihn et al., 2018).

Disability and cultural beliefs about disability also contribute to the increasing maternal stress, particularly in collectivist societies where there is the presence of stigma and misconceptions about disability. Rabbani and Rani (2025) conducted a study to understand the predicament of inclusive education within South Asian settings and found out that mothers of the children with special needs face the problem of social rejection, emotional exhaustion, and institutional neglect. These elements increase the levels of psychological distress and poor family functioning (Rabbani and Rani, 2025). Similarly, socioeconomic hardship, child behavioral problems, and cultural stigma were described by Nahar et al. (2022) as the most relevant predictive factors of poor maternal mental health in mothers of children with autism spectrum disorder (Nahar et al., 2022).

It is also found that psychological adaptation of mothers depends on quality of family life and support mechanisms. The quality of life within family and parenting stress were strongly negatively correlated with each other, and social cohesion and marital satisfaction were also quite helpful variables (Sağlam & Alegöz, 2025). Also, Hauser, Kover, and Abbeduto (2014) claimed that whereas child behavioral problems initially cause maternal stress, these problems might also result in increased emotional proximity and adaptive resilience in the long run (Hauser, Kover, and Abbeduto, 2014).

Together, these studies have demonstrated that socioeconomic disadvantage along with cultural attitudes towards disability have severe influences on maternal stress, and support systems and resilience mediate these effects. Research on the interaction of these determinants however, is not much in developing countries. This is the gap that the current study seeks to fill through analyzing the socioeconomic and cultural effects of maternal stress on parents of children with special needs in India.

Hypotheses



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H1: Lower socioeconomic status significantly predicts higher levels of maternal stress among mothers of children with special needs.

H2: Cultural stigma and negative societal attitudes towards disability significantly increase maternal stress levels among mothers of children with special needs.

3. METHODOLOGY

The research design that will be used in this study is a quantitative cross-sectional research design to examine the socioeconomic and cultural determinants of maternal stress in mothers with children with special needs. A purposive sample of 250 mothers was identified to suit the study and the sample was chosen with definite inclusion criteria, which included the primary caregiver of the child having autism spectrum disorder, cerebral palsy, Down syndrome, or other developmental disabilities. This sampling methodology is appropriate in this case because it implies that data are collected among the respondents who are the most pertinent to the research purposes because they will reflect the intricate interdependence of the socioeconomic status, cultural attitudes, and maternal stress. A survey made up of standardized and reliable tools was used to collect data in the form of a structured questionnaire. Maternal stress was also assessed through Parental Stress Scale (PSS) designed by Berry and Jones (1995), which is used to measure the level of stress which is related to parenting experiences on a 5-point Likert scale. The socioeconomic variables were measured with the help of household income, education, employment, housing conditions, and healthcare access, according to the socioeconomic categories employed by Julihn et al. (2018) and Feizi et al. (2014). The assessment of cultural determinants was made based on a researcher-constructed Cultural Attitude and Stigma Scale that relied on the beliefs regarding disability, perceived social stigma, and community acceptance, relying on previous frameworks recommended by Rabbani and Rani (2025) and Nahar et al. (2022). Data collection was done through face to face survey at pediatric clinics, rehabs and special education institutions throughout Kerala. Data were analyzed using descriptive statistics of variables of demographics, correlation analysis to determine the relationship between socioeconomic and cultural variables and stress, and multiple regressions analysis to determine the predictive role of socioeconomic and cultural variables on maternal stress. Statistical analysis has been done with SPSS version 26.0. This type of quantitative design allows measuring and statistically interpreting the role of socioeconomic disadvantages and cultural stigma in the development of a high level of maternal stress. The rigor approach applied to the study is methodologically sound, the practice is supported with standardized instruments, and the sample is representative, which guarantees the validity of the study and provides evidence-based conclusions that could be used by policymakers and practitioners to develop culturally sensitive and socioeconomically inclusive maternal support programs.



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4. RESULTS

4.1 Descriptive Statistics

The descriptive statistics explain the findings on the responses obtained in reference to 250 mothers who participated in the research and have children with special needs. The findings show that the level of stress among the respondents is moderately high (mean = 3.8), and the scores on cultural stigma (mean = 4.1) and perceived social exclusion (mean = 4.0) are also quite high. The variables on socioeconomic status have been observed to be varied, with an average income of 2.8 and an average education of 3.0 on a 5-point scale. These results indicate that the perceived stigma and lower socioeconomic status are more likely to be found in the sample, which may cause high levels of maternal stress. The standard deviations are relatively small, which represents uniform responses of the respondents.

Table 1. Descriptive Statistics

Variable	Mean	Median	Mode	Standard Deviation
Maternal Stress	3.8	4.0	4	0.7
Socioeconomic Status	2.8	3.0	3	0.8
Education Level	3.0	3.0	3	0.7
Cultural Stigma	4.1	4.0	4	0.6
Social Support	2.9	3.0	3	0.8

4.2 Correlation Analysis

The correlation analysis indicates that there are strong correlations between maternal stress and socioeconomic, as well as cultural variables. There is a strong negative relationship between maternal stress and socioeconomic status ($r = -0.61$) and education ($r = -0.54$), such that the less the individuals have socioeconomic status and education, the higher the stress level is. In its turn, cultural stigma has a positive correlation with maternal stress ($r = 0.68$), which means that the impact of the culture and the attitudes of the society on stress levels is rather high. Maternal stress has a moderate negative relationship with social support ($r = -0.49$), which supports its buffering impact on the psychological strain.

Table 2. Correlation Matrix

Variable	Maternal Stress	Socioeconomic Status	Education Level	Cultural Stigma	Social Support
Maternal Stress	1	-0.61	-0.54	0.68	-0.49
Socioeconomic Status	-0.61	1	0.59	-0.52	0.47
Education Level	-0.54	0.59	1	-0.43	0.41
Cultural Stigma	0.68	-0.52	-0.43	1	-0.38



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Social Support	-0.49	0.47	0.41	-0.38	1
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4.3 Regression Analysis

In order to determine the strength of the predictors of maternal stress, multiple regression was performed to help establish the significance of socioeconomic and cultural determinants of the main outcomes. The findings reveal that cultural stigma ($\beta = 0.42$, $p = 0.001$) is the strongest positive predictor of maternal stress; and then socioeconomic status ($\beta = -0.35$, $p = 0.001$) and social support ($\beta = -0.28$, $p = 0.001$). The negative influence was less but still significant in the case of education ($\beta = -0.21$, $p = 0.004$). These results show that economic poverty is an important factor in stressing mothers, but that cultural stigma is the strongest in the Indian setting.

Table 3. Regression Analysis

Predictor Variable	Coefficient (β)	Standard Error	t-value	p-value
Cultural Stigma	0.42	0.05	8.40	<0.001
Socioeconomic Status	-0.35	0.06	-5.83	<0.001
Education Level	-0.21	0.07	-2.90	0.004
Social Support	-0.28	0.05	-5.60	<0.001

Summing up, the quantitative analysis demonstrates that socioeconomic disadvantage and cultural stigma have a strong predictive value of maternal stress, and social support is a partial predictor protection factor. These findings are consistent with the results of Feizi et al. (2014) and Nahar et al. (2022) and allow concluding that sociocultural barriers and economic inequality increase the stress levels of mothers with children with special needs jointly.

5. CONCLUSION

5.1 Discussion

This research indicates that the social and cultural factors are crucial in defining maternal stress in mothers that have children with special needs. These findings revealed that the decreased socioeconomic status, low education, and elevated cultural stigma were major predictors of high levels of stress. This is also in line with the study by Feizi et al. (2014), who stated that mothers of children with disabilities perceive high stress levels when they are limited by the economic difficulties and inadequate access to resources. Likewise, Hauge et al. (2015) also highlighted that mothers of the chronically ill children experience increased psychological distress because of the financial pressure and employment interference. The positive relation between cultural stigma and maternal stress is very strong in this study which is a factor that is consistent with the study conducted by Rabbani and Rani (2025) who concluded that societal misconceptions and discrimination against children with disabilities increase emotional load on mothers. Furthermore, the adverse interaction between the social support and maternal stress supports Saaglam and Alegoz (2025), who emphasize that supportive family conditions reduce stress and



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promote maternal health. The results of the regression analysis also indicated that the cultural stigma was the strongest predictor of stress, exceeding the socioeconomic ones, implying that cultural beliefs and social attitude are also closely connected to the maternal psychological wellbeing in the Indian environment. This fact corresponds to the results of Nahar et al. (2022), who have reported that the high level of stigma and social isolation is a major factor that harms the mental health of mothers despite the presence of sufficient financial assets. The findings also echo Hauser et al. (2014), who stated that the stress level could be moderated by adaptive coping and family connectedness, meaning that the stress can be reduced in the case of interventions that would encourage social inclusion and resilience. Therefore, the research highlights that both cultural and socioeconomic circumstances need to be looked into collectively as the economic deprivation as it is does not entirely warrant the high stress levels these mothers are exposed to.

5.2 Implications

The findings are significant to health policymaking, teachers, and social workers who work in the field of maternal and children welfare. To begin with, the major correlation between low socioeconomic status and high maternal stress implies the pressing necessity of socioeconomic intervention efforts, including employment opportunities, financial support, and affordable medical services to the families of the children with special needs. The main concern of policymakers should be to incorporate social welfare schemes and community-based rehabilitation programs which will solve both the economic and psychological problems of these mothers. Moreover, the high influence of the cultural stigma on the maternal stress supports the significant role of culturally sensitive awareness campaigns that will help to decrease the prejudice in the society and make it more inclusive. The community should be educated on the fact that disability is not a shame and that the community needs to support and understand people who are disabled, which Rabbani and Rani (2025) have supported. Family-based interventions should be introduced by social workers and counselors to enhance the support systems since family cohesion has been found to be protecting maternal distress (Sağlam & Alegöz, 2025). Schools and health care providers should also work together to offer psychological counseling and stress management training to women who have children with disabilities. Mothers can experience and gain resilience through the participation of local self-governments and NGOs in creating peer-support groups. Besides this, medical professionals are to be trained to identify the symptoms of parental burnout and refer mothers to relevant psychological assistance mechanisms.

5.3 Future Research limitations and scope.

Although the research offers meaningful information regarding socioeconomic and cultural factors that predispose mothers to stress, it has some drawbacks to be mentioned. The cross-sectional design does not allow to conclude about causality; longitudinal studies are required to



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follow the development of maternal stress over time with modifications in socioeconomic status or culture views. The application of self-reported questionnaires can create bias in the responses especially through social desirability since mothers will be underreporting stress. Future studies can use qualitative interviews or focus group discussions as an opportunity to study lived experiences of mothers in more detail. Furthermore, the research also focuses on one geographic area, which might restrict the applicability of the study to other geographic areas; upcoming studies should employ comparative studies in different cultural contexts to establish universal and culture-related determinant factors of stress. Introducing the sample of fathers or other caregivers might also help to gain a clearer picture of stress relations within the family. Lastly, the inclusion of physiological indicators of stress (e.g., cortisol levels) in combination with psychological tests would help to increase the objectivity of the studies in the future. Most of these constraints notwithstanding, the study is a valuable addition to the body of knowledge on how intertwined socioeconomic and cultural determinants influence the maternal well-being to provide a background to culturally sensitive and contextually appropriate interventions.

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