

# Putting Research to Work for Military Families



Focus:  
Civilian

## Comparing Parents of Children with Down Syndrome at Different Life Span Stages

Nelson Goff, B. S., Monk, J. K., Malone, J., Staats, N., Tanner, A., & Springer, N. P. (2016). Comparing parents of children with Down syndrome at different life span stages. *Journal of Marriage and Family*, 78(4), 1131-1148.  
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**SUMMARY:** Parents of children with Down syndrome face unique challenges at different stages of life. In this study, parents were divided into four groups based on the age of their children and answered questions regarding their coping strategies, hope, life satisfactions, and marital relationships. Results revealed that parents' coping strategies, but not other variables, varied at different phases of life.

### KEY FINDINGS:

- Parents of children with Down syndrome at different phases of their lives have different coping strategies; specifically, parents reported higher coping scores in middle childhood and adolescent years, but lower coping scores in early childhood and adult years.
- No significant differences among the four groups of parents were observed in relationship functioning, individual life satisfaction, or hope.
- All parents indicated the importance of acceptance and having a positive attitude in caring for their children with Down syndrome.

### IMPLICATIONS FOR MILITARY PROFESSIONALS:

Military professionals could:

- Encourage military parents of children with developmental disorders (e.g., Down syndrome) to participate in programs that help them learn effective coping strategies
- Educate military parents of children with developmental disorders on how to maintain optimism and engage in self-care

### IMPLICATIONS FOR PROGRAMS:

Programs could:

- Offer support groups for parents whose children were diagnosed with developmental disorders
- Develop workshops for military parents of children with developmental disorders to increase their life satisfaction and coping strategies

### IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend education of professionals who work with military families on the effects of childhood developmental disorders on family well-being
- Continue to support parent education programs that aim to promote positive parenting and resilience in military families

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## METHODS

- Participants were recruited through local and national Down syndrome groups such as the Council for Exceptional Children.
- Of the 644 responses, 31% were missing data; measures included coping strategies, hope, life satisfaction, marital relationship adjustment, and relationship satisfaction.
- Analysis compared the responses of parents with children of different age groups.

## PARTICIPANTS

- Participants were 445 parents whose children had Down syndrome, and they were divided into four groups based on the age of the children: early childhood group (49%, under 5 years old), middle childhood group (30%, 5-11 years old), adolescent group (11%, 12-18 years old), and adult group (10%, over 18 years old).
- The average age of the participants was 41.91 years (SD = 9.66) and 87% of them were female.
- The majority of the participants were White (91%), followed by Latino (4%), Black (1%), and other (4%).

## LIMITATIONS

- Most single parents did not complete the relationship component of the survey and were excluded from the analysis, therefore, the findings may have been different if this population was included.
- According to the authors, the sample was high-functioning and therefore may not represent the general population.
- Most of the participants were mothers (87%), so the results of the study mostly represented mothers' perspectives and could not be generalized to male caregivers.

## AVENUES FOR FUTURE RESEARCH

Future research could:

- Recruit parents from different family structures including single parents and divorced parents
- Increase the race/ethnicity and socioeconomic diversity of the sample
- Investigate if fathers and mothers have different perspectives and strategies in coping with children's Down syndrome

## ASSESSING RESEARCH THAT WORKS



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