

# PERSONALITY TRAITS AS PREDICTORS OF PARENTING STRESS AMONG CAREGIVERS OF CHILDREN WITH AUTISM IN LAGOS, NIGERIA

## OBASI, C.C., OSINOWO, H.O. & FASHOLA, T.M.

Department of Psychology University of Ibadan

#### **ABSTRACT**

The study investigated personality traits as predictors of parenting stress among caregivers of children with autism. Ex-post-facto, using the cross-sectional design was adopted and data was gathered from randomly selected parents of autistic children, attending Federal Neuro-Psychiatric Hospital Annex in Oshodi, Yaba, Lagos. Gender distribution of the parents revealed that most of them 71.4% were females, while the other 28.6% were males. Findings revealed that Personality traits (extroversion, neuroticism, openness, agreeableness and conscientiousness) were no joint determinants of all the dimensions of parenting stress. However, agreeableness ( $\beta$  = .45, t= 2.38, p<.05), conscientiousness ( $\beta$  = .39, t= 2.07, p<.05) had a significant independent influence on socio-emotional distress; and extraversion ( $\beta$  = -.35, t= -2.06, p<.05) had significant independent influence on long termed disruptive dependence. It was recommended that as much as care is needed for the autistic child, there is need to profile the personality of the primary caregivers of the autistic child. Profiling the personality traits will assist in equipping the parent with essential training that goes with the personality. This will further improve the care that will be given to the autistic child.

Keywords: Parenting Stress, Personality Traits, Autism, Caregiver

## INTRODUCTION

Grappling with the child's autism analysis as indicated by Siegel (1997), is a long haul process, because of a nonattendance of any indications of incapacity in the child's appearance. This which implies that even after the determination, a few parents stay doubtful as to its rightness as the child physically resembles some other normally creating child. Amid the way toward touching base at the last finding, parents endure a vulnerability that is exacerbated by the way that they more often than not get repudiating data about the idea of their child's issues and visualization for advance improvement. Notwithstanding when the finding is made in tertiary restorative organizations generally, numerous parents don't know or taught with regards to the results for the child and family. Absence of appropriate social help essentially influenced the parents' adjustment to the new circumstance, which could lead to parenting stress.

Parenting stress is the cacophony between the desire that a parent has for self and their child in connection to the truth and this, along these lines every now and again envelops troublesome circumstances which are made by convictions, needs and conduct (Crnic, & Low, 2002). It is additionally the overabundance uneasiness and pressure that is specifically identified with the part of an essential guardian and to an immediate care-giving collaboration (Abidin, 1995). Parenting stress may likewise come about because of the recognition that the necessity of care-giving surpasses a few parents' assets (e.g. individual, physical, mental, and monetary assets) because of the mind boggling and requesting care-giving obligations engaged with bringing up a child with a formative handicap.

The reasons for the advancement of parenting stress are multidimensional and can be ascribed to three noteworthy spaces. The initial two includes either parental figures' distress and troublesome child qualities or both. These two spaces can likewise collaborate to make a third area and which is a broken parent-child association design and any distress in these areas in this way means parenting stress as indicated by Abidin as Cited in Shaffer (2012).

The recognition by the parent that the child is hard to tend to, is likewise a precursor to parenting stress, and this sort of stress emerges from the examination of the autism physiological side effects for this situation; where the manifestations are to such an extent that the children are portrayed as having a mind boggling personality, issues with self-



direction, or examples of saw resistant, rebellious, or potentially requesting conduct. These children have been known to adjust inadequately to change and advances, show hostility and hyperactivity, and have other socially unwanted attributes. The need of the child at that point turns into a ceaseless deplete on the guardian's vitality in the broken administration of the child and produces a sentiment disappointment among the parents in their care giving part (Abidin, 1995).

Autism is a long lasting formative handicap of differing seriousness that is portrayed by subjective debilitations in correspondence, complementary social communication and the nearness of confined and monotonous practices and premium (Lin, et al, 2011) and this child with autism will have delays in discourse and may experience issues in learning dialect. Social relatedness is weakened, the child experiences issues in looking and maintains a strategic distance from social contact and can't go up against the point of view of others or sympathize, the child with autism can wind up distressed by changes in timetables and schedules.

Physically, the children may have a dull body development that incorporates pacing, hand-fluttering or finger-flicking and shaking (APA, 2005). The mentally unbalanced child may have fits of rage and imprudent practices with constrained security mindfulness (Sarafino, 2002). This social shortage in autism is set apart by absence of utilization of non-verbal practices, deficiency in the improvement peer connections, an absence of trying to share happiness, interests or accomplishment with others and a general absence of social or passionate correspondence (Lasgaard, Ericksen, Goosens & Nielsen, 2009). The child with autism will require mind at an abnormal state of force over a broadened timeframe in contrast with regularly creating children while the psychological and physical parts of autism prompts practical impediments in an assortment of spaces (correspondence, self-mind, self-bearing, social abilities, wellbeing, and security).

The versatile working shortfalls are normally anticipated to proceed for a drawn out stretch of time; which implies on-going consideration is required by the child and such needed help could run from straightforward prompts to add up to individual care. This on-going and serious level of care, support, and concern accommodated by parents removes time and assets from their own particular lives (perhaps that of his/her kin,) and can bring about an absence of self-mind that could conceivably prompt a pathology that might be exacerbated by identity propensity of the parent if legitimate help isn't set up to cradle the effect of the stress and these formative challenges related with autism might be extremely distressing for parents. The child's behavioral issues as indicated by Estes et al., (2009) inquire about are one of the indicators of parents' stress. Children living with autism suffer various issues, for example, animosity and self-damage (Matson and Bolt, 2008)and are anticipated to be casualties of self-damage, forceful and generally ruinous conduct and these are the most grounded indicators of parenting stress as per Dunlap and Robbins(1994) and Richman et al,(2009).

These testing practices showed by the child that postures coordinate issues by imperiling the wellbeing of the child or others or causing material harm, may likewise prompt the group seclusion of the parents (Worcester et al., 2008). Parents frequently feel defenseless, when their child's reactions to endeavors at quieting him/her down are met with totally unusual and endless reaction. In this way, the impact of testing practices on parenting stress can be perplexing. The child's weakened versatile working which prompts bring down day by day living abilities, may likewise add to the stress experienced by parents (Tomanik et al., 2004). These children with low level of self-mind aptitudes require more help over a broadened period in regular assignments such as getting dressed, eating and every day cleanliness.





The stress experienced by parents is additionally connected with problems affecting various zones, including their passionate and full of feeling control, and circadian musicality. Self-detailing studies have demonstrated that, children with autism show more negative feelings than children with mental inability and ordinarily creating children (Cahill et al., 2003). A correlation has been found to exist between child attributes as touchiness, social withdrawal, hyperactivity and resistance, and the level of parenting stress in moms (Tomanik et al., 2004). Parents additionally end up grieved by the child's atypical conduct coming about because of tangible issues, for example, obsession with a few and shirking of different items, incomprehensible reactions to incitement and helplessness to tactile over-burden (Ben-Sasson et al., 2007).

When parents encounter chronic stress within the first three years of life, a child's emotional and physical development becomes critical. All parents expect and plan for normal and healthy children, very few think of the risk that their child might not be normally developed, so caregivers of children living with autism are not prepared nor forewarned as symptoms do not show in any test and as such may predispose parents raising a child with autism to suffer parenting stress at high levels (Murphy, Christian, Caplin & Young, 2006). In Nigeria, there are a few professional therapists that have autism specific training (Asikhia, 2011). Since autism therapy is repetitive and time consuming, requiring a significant amount of investment in effort which may put the cost of any form of therapy beyond the reach of the poor may also give rise to another development that may leave a lot of parents feeling overwhelmed and further pummeled by autism whilst increasing their feelings of helplessness and hopelessness at their circumstance. The degree to which specific behavioural problems contribute to parenting stress can be traced to certain psychological variables that may also be implicated in parenting stress in autism such as the personality trait of the parents involved.

Personality traits are descriptions of people in terms of relatively stable patterns of behaviour, thoughts and emotions (McCrae & Costa, 2003). These individual differences can be found along any dimension and the Five Factor Model of personality is a classification found through statistical analysis of the traits most frequently observed in any population (Srivastava, 2008). The Five Factor Model (FFM) is the most researched taxonomy of traits across cultures (Allik, 2005) and within this model; a large number of traits are combined into five main trait dimensions. Costa and McCrae (1992) purport the universality of five main personality traits which are Openness, Conscientiousness, Agreeableness, Extraversion and Neuroticism.

Park and Folkman (1997) opined that the way some individuals perceive stress is affected by the meaning they assign to it, particularly due to the personality traits of the individual. For instance, some people see stress as challenges to be met and conquered while others are predisposed to sublimating such. Personality traits predisposes an individual to a fight or flight response in the face of parenting stress in autism; neurotic personality trait for instance predicts exposure to interpersonal stress and tendencies to appraise events as highly threatening and coping responses tend to be low that translates to high parenting stress (Grant & Langan-Fox, 2007) while Vollrath (2001) opine that conscientiousness will predict low exposure to stress. Previous studies have also found a correlation between other aspects of personality traits and varying levels of parenting stress (Penley & Tomaka 2002).

One of the most grounded connects between personality factors and psychopathology is the connection amongst Neuroticism and incessant stress that conceivably prompts gloom. In spite of reactions that Neuroticism and misery are connected due to shared factors, looks into, for example, that of Duggan et al (2003) showed that Neuroticism contains segments well beyond those identified with depressive symptomatology. So also, endless stress has exhibited a positive association with Neuroticism and a negative association with



Extraversion, proposing that it might be the blend of these two traits that is most identified with incessant stress (Chioqueta & Stiles, 2005).

In past investigates, one of the steady discoveries in writing is that large amounts of Neuroticism are identified with less versatile child rearing practices in general (Spinath and O'Connor, 2003). Indeed, in a non-clinical example Metsapelto and Pulkkinen (2003) found that guardians high in Neuroticism were bring down in detailed parental nurturance and information about their youngster's exercises. In non-clinical examples, hoisted Neuroticism has likewise been related with self-announced parental dismissal of their tyke (Spinath & O'Connor, 2003), bring down watched affectability and intellectual incitement, higher watched negative effect and nosiness with newborn children (Belsky et al., 1995), expanded watched control statement, and lower responsiveness with babies (Clark et al., 2000). Be that as it may, not the greater part of the measurements of personality is as reliably connected with child rearing stress.

Clark et al., (2000) found that maternal conscientiousness anticipated the watched official part of child rearing with newborn children, which imply a steady and maintained way of monitoring the kid. Conscientiousness was additionally found most importantly other personality traits to be prescient of watched maternal responsiveness toward their newborn children (Clark, Kochanska, and Ready, 2000). Given the connection amongst Conscientiousness and Autism, it is likely that moms low in Conscientiousness might be less predictable in their child rearing and have more noteworthy trouble monitoring their youngster, and this relationship might be improved when Neuroticism is high also. While the writing relating Conscientiousness to child rearing is constrained, the beforehand surveyed investigate taking a gander at Stress and child rearing may upgrade this infrequently looked into territory.

This study is unique and will fill literature gap by investigating the role of psychological variables in parenting stress among parents of autistic children. Specifically, the study will unravel the role of personality traits (extroversion, neuroticism, openness, agreeableness and conscientiousness) in parenting stress.

One hypothesis will be tested in this paper;

Personality traits (extroversion, neuroticism, openness, agreeableness and conscientiousness) will jointly and independently predict the dimensions of parenting stress among caregivers of autistic children.

# **METHOD**

#### Design

The design of choice for this study was a cross-sectional survey utilizing the ex-post facto design. Cross-sectional surveys attempt to describe and explain present condition through the agency of many participants and instruments to describe a phenomenon (in this case the parents of children living with autism, and the instruments to measure parenting stress), in an attempt to make predictions on the relationship between the independent variable (personality trait) and the dependent variable (parenting stress).

## Setting

The setting for the study is the psychology unit of the Child and Adolescent Clinic of the Federal Neuro-Psychiatric Hospital located in Oshodi Lagos. This centre is dedicated to the care of mental health issues in children and adolescents. It is a 138 bed hospital. The clinic days are on Tuesdays and Thursdays. The centre is staffed by the core staff from the Yaba Centre who attends to their patients on clinic days.



## Sampling Method

Random sampling method was the sampling choice as parents were randomly selected from the informal autism registry of the Child and Adolescent Clinic of the Federal Neuro-Psychiatric Hospital Annex in Oshodi, Yaba, Lagos.

# **Participants**

Participants were 50 parents or caregiver of children living with autism. Inclusion criteria was that participants must be primary caregiver (parent) of autistic child(ren), while parents who do not have autistic child was excluded.

#### Instrument

The instruments used were structured questionnaire with four sections as described below:

## **Section A: Demographic information**

Demographic factors: Section A contained the demographic variables of age, sex, employment status, and years of education, family type, length of time of autism diagnosis, prior psychological intervention and number of autistic children in the household.

## **Section B: Big-Five Personality scale**

Five-Factor Model (FFM) otherwise known as the Big Five Personality Inventory that is used by psychologists to describe human personality traits. It is a 44 item inventory that measures individuals on the big five dimensions of personality and was developed by Goldberg (1981). Each of the factors is then further divided into personality facets. For this study, the Cronbach Alpha for the various traits are as follows Openness = 0.81, Conscientiousness = 0.77, Extraversion = 0.80, Agreeableness = 0.75 and Neuroticism = 0.86.

# Section C: Parenting children living with autism scale

Parenting stress among parents of children living with autism will be measured using the Autism Parenting Stress Scale that was developed and validated for this study. It was used to measure stress inducers leading to parenting stress in parents of autistic children. It is a 29-item self-report instrument with 5 subscales designed to measure stressors emanating from; General psychosocial distress, socio-emotional distress, hopelessness, disruptive physiological symptoms and long term disruptive dependency.

The Cronbach's coefficients are ranged from 0.94 to 0.94 to 0.89 to 0.8 to 0.79 respectively. The instrument achieved a 0.95 Cronbach Alpha for this study. Split half reliability of (r = 0.92) and (r = 0.93) were reported for all items i.e. (15 item) and (14 item) respectively. Scores below the norm indicated a low parenting stress score and a score above the norm indicated high parenting stress.

## **Procedure**

The researcher undertook and completed the basic course on human subject research curriculum from West African Bioethics training programme and was certified by the Collaborative Institutional Training Initiative (CITI). A research proposal was written to the ethical board of the Federal Neuro-Psychiatric Hospital Yaba. Ethical approval and permission to undertake research was obtained. The psychological unit provided 2 NYSC graduates of psychology as research assistants on request of the researcher, who were trained on the mode of actualizing the study.

The major areas covered during the training session included establishment of rapport, administration of scales, voluntary participation, empathy (not sympathy) as they were a vulnerable group, and respect for the parents. The last area (respect) was emphasized as the parents had communicated feelings of perceived stigmatization during the FGD sessions, hopelessness and being beaten down. The Research Assistants(RAs) were used only for data collection for initial screening for parenting stress among the parents of children living with autism.





## **RESULTS**

This section deals with data analysis and interpretation of the findings.

Table 1: Descriptive statistics of socio-demographics

Variable	Response	Frequency	Percent (%)
Age	20-24 years	11	22.4
	25-29 years	16	32.7
	30-34 years	14	28.6
	25 years and above	8	16.3
Gender	Males	14	28.6
	Females	36	71.4
Employment status	Currently employed	27	54
	Self-employed	17	34
	Pensioner	1	2
	Unemployed	5	10
Length of autism diagnosis	1-3 years	28	55
	4-6 years	18	35
	Above 6 years	5	10
Years of education	0-6 years	5	10
	6-12 years	22	43
	Above 12 years	24	47
Family type	Monogamous	38	76
	Polygamous	8	16
	Single parent	4	8
Previous psychological intervention	Yes	19	37
	No	21	41
	Don't know	11	22
Number of autistic children	One	46	92
	Two	4	8
Total		50	100

Table1 presents the socio-demographic information of respondents. According to age distribution, parents' of children living with autism who participated in the study were mostly young parents who are within ages 25-29 years (32%), the next group were participants who were 28.6% were within ages 30-34years and the youngest group of ages 20-24 had 22% of the parents being in the group while 16.3% Of the group were parents that literature refers to as older parents or parents within the age range of 35 years and above. As regards gender distribution of the parents, most of them 71.4% were females, while the other 28.6% were males. Employment status frequency showed that more of the respondents 54% were currently employed by either a state owned or federal institution, while 34% were self-employed or owners of businesses, 10% are unemployed while the other 2% are pensioners.

As regards length of time of autism diagnosis, more of the respondents 55% indicated that they had their formal autism diagnosis in the last 1-3years, while 35% had their children formal autism diagnosis in the last 4-5years, while the other 10% of the participants had their children formally diagnosed as autistic in the last 6years. As regards years of education, more of the parents of children living with autism 47% had above 12 years of formal education, 43% had between 6 and 12 years of formal education, while the other 10% had between 0 and 6 years of formal education. Also, frequency distribution for family type





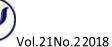
showed that more of the parents 76% were in monogamous married relationships, 16% were in a polygamous marriage, while the other 8% were single parents.

Further, as regards frequency distribution for psychological intervention, more of the respondents 41% indicated not to have heard any psychological intervention in the past, 37% indicated to have had previous psychological intervention, while the other 22% do not know. Finally, an overwhelming proportion of the respondents 92% had only a child living with autism while 8% had more than one autistic child in the household.

Hypothesis one stated personality traits (Extraversion, Agreeableness, Conscientiousness, Neuroticism and Openness to experience) of parents of children living with autism will independently and jointly predict their parenting stress (General psychosocial distress, socioemotional distress, hopelessness, disruptive physiological symptoms and long term disruptive dependency). This was tested using multiple regression analysis and the result is presented on Table 2;

Table 2: Summary of Multiple Regression Analysis Showing the Influence of personality traits (extraversion, agreeableness, conscientiousness, neuroticism and openness to experience) on Dimensions of Parenting Stress

Dependent Dependent	Criterion	β	t	Р	R	R²	F	Р
	Extraversion	.28	1.65	>.05				
	Agreeableness	17	87	>.05				
General psychological distress	Conscientiousness	.39	2.07	<.05	.44	.19	2.01	>.05
	Neuroticism	.06	.33	>.05				
	Openness	11	55	>.05				
	Extraversion	.17	.98	>.05				
	Agreeableness	53	-2.73	<.05				
Socio-Emotional distress	Conscientiousness	.45	2.38	<.05	.44	.20	2.15	>.05
	Neuroticism	.09	.51	>.05				
	Openness	22	-1.14	>.05				
	Extraversion	27	-1.52	>.05				
	Agreeableness	.18	.88	>.05				
Hopelessness	Conscientiousness	.12	.59	>.05	.35	.12	1.22	>.05
	Neuroticism	.00	.01	>.05				
	Openness	.23	1.14	>.05				
Disruptive Psychological. Symptoms	Extraversion	05	27	>.05				
	Agreeableness	07	36	>.05				
	Conscientiousness	.15	.74	>.05	.30	.09	.84	>.05
	Neuroticism	.26	1.39	>.05				
	Openness	.07	.35	>.05				
	Extraversion	35	-2.06	<.05				



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	Agreeableness	.09	.48	>.05				
Long termed disruptive dependence	Conscientiousness	.08	.45	>.05	.44	.20	2.08	>.05
	Neuroticism	.17	.96	>.05				
	Openness	.33	1.74	>.05				

The result revealed that extraversion, agreeableness, conscientiousness, neuroticism, and openness to experience did not jointly predict general psychological distress ( $R^2 = 0.19$ , F (5, 43) = 2.01, p > .05).

As regards socio-emotional distress, extraversion, agreeableness, conscientiousness, neuroticism, and openness to experience did not jointly predict socio-emotional distress ( $R^2$  = 0.20, F (5, 43) = 2.15, p >.05). However, only agreeableness ( $\beta$  = .45, t= 2.38, p<.05), conscientiousness ( $\beta$  = .39, t= 2.07, p<.05) had a significant independent influence on socio-emotional distress.

As regards hopelessness dimension, extraversion, agreeableness, conscientiousness, neuroticism, and openness to experience did not jointly predict hopelessness ( $R^2 = 0.12$ , F (5, 43) = 1.22, p >.05).

As regards disruptive physiological symptoms, extraversion, agreeableness, conscientiousness, neuroticism, and openness to experience did not jointly predict disruptive physiological symptoms ( $R^2 = 0.09$ , F (5, 43) = .84, p >.05).

Finally, as regards long termed disruptive dependence, extraversion, agreeableness, conscientiousness, neuroticism, and openness to experience did not jointly predict long termed disruptive dependence ( $R^2 = 0.20$ , F (5, 43) = 2.08, p >.05). However, the result revealed that extraversion ( $\beta = -.35$ , t= -2.06, p<.05) had significant independent influence on long termed disruptive dependence.

Hypothesis two stated that demographic and clinical history factors (age, marital status, and educational qualification, length of time of diagnosis, family type, and number of autistic children in the family, history of prior psychological intervention, gender and employment status) of parents of children living with autism will significantly independently and jointly predict their stress scores. The hypothesis was tested using multiple regressions and the result is presented in Table 3;

Table 3: Summary of multiple regression analysis showing the influence of age, gender marital status, and educational qualification, length of time of diagnosis, family type, and number of autistic children in the family, history of prior psychological intervention, and employment status on parenting stress

Predictors	В	t	Р	R	$R^2$	F	P
Age	179	-1.284	>.05				
Sex	.258	1.895	>.05	0.00	0.00	4.40	0.5
Educational level Length of time of diagnosis	.134 .093	.958 .654	>.05 >.05	0.28	0.08	4.10	<.05
Family type	.239	1.735	>.05				
Number of autistic children in the family	.283	2.025	<.05				
History of prior psychological intervention Employment status	047 .150	331 1.071	>.05 >.05				



The result revealed that parents of children living with autism who were administered the instrument about the demographic information of age, gender marital status, and educational qualification, length of time of diagnosis, family type, and number of autistic children in the family, history of prior psychological intervention, and employment status as it relates to sources of parenting stress reported the following result;  $(R^2 = 0.08, F(8, 40) = 4.10, p <$ .05). A combination of the items of age, gender marital status, and educational qualification, length of time of diagnosis, family type, and number of autistic children in the family, history of prior psychological intervention, and employment status accounted for 8% of the change observed in the self-report of parents of children living with autism. This revealed that the collective presence of demographic variables had significant influence on the parenting stress among parents of children living with autism. The result revealed that the number of autistic children in the family ( $\beta$  = .15, t= 8.40, p<.01) were significant independent predictors of parental stress among parents of children living with autism. The result demonstrated that age ( $\beta$  = -.18, t= -1.28, p>.01), sex ( $\beta$  = .26, t= 1.89, p>.05), educational level ( $\beta$  = .13, t= .96. p>.05), type of family ( $\beta$  = .24, t= 1.74, p>.05), length of time of diagnosis( $\beta$  = .09, t= .65 p>.05), history of prior psychological intervention ( $\beta$  = .09, t= .65 p>.05), and Employment status( $\beta = .05$ , t= .91 p>.05) had no significant independent influence on parenting stress. This result implies that parenting stress increased as the number of children living with autism in the household increased. The hypothesis is supported.

## **DISCUSSION**

These findings appeared to agree with Hong and Woody (2007) who found that individuals who scored low on agreeableness are susceptible to health risk behaviour. Harkness (2002) also found that clients with major depression and chronic minor depression were found to have scored low in the agreeableness personality trait. The interpretation of this finding is that since the agreeableness personality trait predicted the compatibility of people with others people and a tendency to be accommodating in social situations, a low score in this trait tend to predict suspiciousness, skeptibility, questioning, aggressive and self-centeredness, which may be a exacerbated by the public response to the autism presentation. A high score in Conscientiousness correlating to a high parenting stress score tends to agree with Hogan and Ones, (1997) who determined that a Conscientious individual's reactivity to stress maybe context dependent. The interpretation of this is that a high score in conscientiousness might result in decreased reactivity, however, if the individual is not in control, behaviour associated with Conscientiousness may interfere with flexible problem solving. Parents' personality traits are considered to shield parents from being devastated by their child's special care requirements (Belsky & Barends, 2002).

Also, Tomanik, Harris and Hawkins (2004) demonstrated that mothers of children living with autism indicated higher stress with their child's inability to participate in interactions and their lack of communication skills. Bishop et al (2007) considered the child's conduct difficulty were a considerable source of stress for parents and Matson and Rivet (2008) and Richman et al (2009) also found that aggression and self-injury and otherwise destructive behaviour as sources of stress. All of these studies prove that the Conscientious parent will score high on parenting stress as a result of all of these sources of psychological distress which are the general symptomatology of autism. Parents are also concerned by their ward's atypical conduct consequent upon response difficulties such as obsession and evasion of things, inconsistent reactions to stimulus and vulnerability to awareness overburden (Ben-Sasson et al., 2007) Parents who are not sufficiently instructed on autism determined inadequacies in afferent procedure, such conduct may be perplexing and cause exacerbated stress. The child has an irregular growth in different areas, from general progress then continuing to retrogression then critical developmental retardation (Marcus et al., 1997). This can be seen in some of the items under this subscale that dealt with for instance, taking the child to



unrestricted places, taking care of other family members, and routineness of childcare will be sources of stress with an individual that is conscientious.

Based on the findings therefore, it was recommended that, as much as care is needed for the autistic child, there is need to profile the personality of the primary caregivers of the autistic child. Profiling the personality traits will assist in equipping the parent with essential training that goes with the personality. This will further improve the care that will be given to the autistic child.

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