

Socioeconomic and Demographic Differences in Burnout Among Parents of Children with Special Needs

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Abstract

This study examined burnout levels among parents of children with special needs in relation to various socioeconomic and demographic characteristics. Data were collected through face-to-face surveys with 382 parents. Because burnout scores did not meet the assumption of normality, Mann–Whitney U and Kruskal–Wallis H tests were used to compare groups. The findings revealed significant differences in burnout according to the gender of the child, cohabitation status, income level, and the type of support services utilized by parents. Parents of girls with special needs showed higher burnout levels than parents of boys. In addition, burnout levels varied across different household compositions, income groups, and support-service categories. A statistically significant difference was also observed according to marital status; however, this finding should be interpreted with caution due to the substantial imbalance in group sizes. No significant differences were found according to parent type or educational level. Overall, the findings suggest that parental burnout is more closely associated with family and socioeconomic circumstances than with individual demographic characteristics. The results highlight the importance of considering contextual and resource-related factors when developing support services and intervention programs for families of children with special needs.

Keywords: Burnout, Parents of Children with Special Needs, Socioeconomic Factors, Demographic Factors, Non-Parametric Analysis

Introduction

The family is more than a group of individuals living together; it is a dynamic social system characterized by interdependent relationships, evolving roles, and changing patterns of communication (Roskam et al., 2023). From a developmental perspective, families are required to adapt to both normative life transitions, such as parenthood, adolescence, and aging, and non-normative events, including illness, disability, and trauma (Walsh, 2016; Roskam et al., 2023). These transitions often require substantial adjustments in parental responsibilities, family roles, and interpersonal relationships, which may challenge the family's adaptive capacity. The diagnosis of a child with special needs represents one of the major life events that can place considerable demands on family functioning. Increased caregiving responsibilities, changes in family routines, the reorganization of sibling relationships, and adjustments in social interactions may lead to significant transformations within the family environment. Such changes can affect the psychological well-being of all family members, particularly parents (Güler et al., 2022; Yılmaz & Bahçalı, 2025). Although caregiving demands

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vary depending on the child's condition, caring for a child with special needs often requires continuous and long-term commitment. As a result, parents may experience persistent stress that, over time, can contribute to burnout (Findling et al., 2024). Consistent with this view, studies conducted in Türkiye and other countries have reported higher levels of burnout among parents of children with special needs compared with parents of typically developing children (Findling et al., 2024; Roskam et al., 2023; Güler et al., 2022).

In recent years, research on parental burnout has expanded beyond risk factors to include protective factors that may buffer its development, such as psychological resilience, social support, and coping strategies (Ren et al., 2024; Cheng & Lai, 2023). Empirical studies suggest that healthy family communication, strong perceived social support, and spousal support are associated with lower levels of parental burnout and better psychological adjustment among caregivers of children with special needs (Cheng & Lai, 2023; Lebert-Charron et al., 2022; Aydoğan & Kizildag, 2017; Duygun & Sezgin, 2003). These findings highlight the importance of psychosocial resources in helping parents cope with the demands of long-term caregiving.

Although burnout was originally developed as a construct to explain chronic stress in occupational settings, it has increasingly been applied to the parenting context to understand the prolonged demands associated with raising children (Maslach & Leiter, 2016; Mikolajczak & Roskam, 2018). According to this perspective, burnout may occur when persistent and intense demands exceed an individual's available coping resources (Roskam et al., 2023). Traditionally, burnout has been characterized by three dimensions: emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment (Maslach et al., 2001). In the context of parenting, burnout may be reflected in feelings of inadequacy in the parental role, psychological and physical exhaustion, and emotional distancing from one's child. The continuous and intensive caregiving responsibilities associated with raising a child with special needs have been identified as a major risk factor for parental burnout (Mikolajczak & Roskam, 2018; Lebert-Charron et al., 2022). Studies conducted in Türkiye have reported higher levels of burnout among parents of children with multiple disabilities, families with preschool-aged children, and mothers who receive limited support from their spouses during the caregiving process (Güler et al., 2022; Yılmaz & Bahçalı, 2025). Taken together, these findings suggest that parental burnout is associated not only with individual characteristics but also with broader family, social, and socioeconomic conditions.

In this context, sociodemographic characteristics are important for understanding variations in parental burnout. Previous studies have shown that factors such as parental gender, age, and income level, as well as child-related characteristics including age and diagnosis, are associated with differences in burnout levels among caregivers (Roskam et al., 2023; Cheng & Lai, 2023; Güler et al., 2022). Despite this growing body of research, relatively few studies have systematically examined burnout among parents of children with special needs from a sociodemographic perspective. Existing research has primarily focused on psychological variables such as burnout, hopelessness, resilience, and social support, whereas demographic risk profiles have received comparatively less attention (Yılmaz & Bahçalı, 2025; Ren et al., 2024; Lebert-Charron et al., 2022). This gap highlights the need for studies that examine how socioeconomic and demographic characteristics are associated with parental burnout in families of children with special needs.

Given the limited evidence regarding sociodemographic differences in parental burnout among families of children with special needs, further research in this area is warranted. Such



studies may contribute to the identification of groups that are more vulnerable to burnout and provide a stronger evidence base for family-centered support services. In addition, a better understanding of the socioeconomic and demographic factors associated with parental burnout may inform the development of preventive and supportive mental health interventions. Accordingly, the present study aims to examine burnout levels among parents of children with special needs in relation to various sociodemographic characteristics. By identifying factors associated with burnout, the study seeks to contribute to the literature on parental well-being and to inform the planning of mental health and family support services.

Research Questions

The study sought to answer the following research questions:

1. What are the burnout levels of parents of children with special needs?
2. Do burnout levels differ according to selected demographic and socioeconomic characteristics, including parent type, marital status, child gender, cohabitation status, income level, educational level, and the type of support services utilized?

Research Hypotheses

Based on the existing literature, the following hypotheses were tested:

- H1. Burnout levels differ significantly according to parent type (mother, father, or other caregiver).
- H2. Burnout levels differ significantly according to marital status.
- H3. Burnout levels differ significantly according to the gender of the child with special needs.
- H4. Burnout levels differ significantly according to cohabitation status.
- H5. Burnout levels differ significantly according to income level.
- H6. Burnout levels differ significantly according to the type of support services utilized by parents.
- H7. Burnout levels differ significantly according to educational level.

Method

Research Design

This study employed a quantitative research design based on the relational survey model. Relational survey models aim to identify patterns of association among variables and examine how these variables vary together without any experimental intervention (Büyükoztürk et al., 2018). Consistent with this approach, the present study investigated whether burnout levels among parents of children with special needs differed according to various demographic and socioeconomic characteristics.

Participants and Procedure

The target population of the study consisted of parents living in the Erciş and Muradiye districts of Van Province, Türkiye, whose children were receiving services from special

education and rehabilitation centers. The sample comprised 382 parents of children with special needs who voluntarily agreed to participate in the study.

The inclusion criteria were being the parent or primary caregiver of a child with special needs and providing informed consent to participate. No restrictions were imposed regarding the child's disability type, age, or severity level. Parents who declined participation or provided incomplete responses to the survey instruments were excluded from the study. Data were collected through face-to-face administration of the research instruments.

Ethical approval for the study was obtained from the Social and Human Sciences Publication Ethics Committee of Van Yüzüncü Yıl University (Decision No: 2024/26-16, dated December 23, 2024). All participants were informed about the purpose of the study and provided informed consent prior to participation.

Measures

Sociodemographic Information Form

A sociodemographic information form developed by the researchers was used to collect information on parent type, marital status, child gender, cohabitation status, income level, educational level, and the type of support services utilized.

Maslach Burnout Inventory

Parental burnout was assessed using the adapted version of the Maslach Burnout Inventory (MBI). The original scale was developed by Maslach and Jackson (1981) and consists of 22 items grouped into three dimensions: Emotional Exhaustion (9 items), Personal Accomplishment (8 items), and Depersonalization (5 items). The Turkish adaptation of the scale was conducted by Ergin (1992), who reduced the original seven-point response format to a five-point Likert scale to improve cultural appropriateness. The adaptation study retained the original three-factor structure.

The reported reliability coefficients for the Turkish version were satisfactory. Cronbach's alpha coefficients were .83 for Emotional Exhaustion, .72 for Personal Accomplishment, and .65 for Depersonalization. Test-retest reliability coefficients were .83, .67, and .72, respectively (Ergin, 1992).

Evidence supporting the use of the scale with parents was first provided by Pelsma et al. (1989), who demonstrated its validity and reliability in parental samples. Subsequently, Duygun and Sezgin (2001) adapted the inventory for use with parents of children with intellectual disabilities. In this adaptation, references to work-related experiences were modified to reflect caregiving experiences. For example, expressions referring to "people encountered at work" were replaced with references to "my child," and work-related statements were revised to focus on child care responsibilities.

The psychometric analyses conducted by Duygun and Sezgin (2001) indicated a two-factor structure consisting of Emotional Exhaustion and Personal Accomplishment. One item (Item 15) was removed because of a low factor loading, resulting in a 21-item version of the inventory. Cronbach's alpha coefficients were reported as .65 and .83 for the two subscales, while test-retest reliability coefficients were .67 and .83, respectively. Higher scores on the Emotional Exhaustion dimension and lower scores on the Personal Accomplishment



dimension indicate higher levels of parental burnout. The 21-item parental version developed by Duygun and Sezgin (2001) was used in the present study.

Data Analysis

All statistical analyses were conducted using IBM SPSS Statistics 22.0. Prior to the main analyses, the distributional characteristics of burnout scores were examined using skewness and kurtosis coefficients, Normal Q–Q plots, and the Kolmogorov–Smirnov and Shapiro–Wilk tests. Although skewness and kurtosis values were within acceptable limits, the normality tests and visual inspection of the Q–Q plot indicated deviations from normality. Therefore, non-parametric statistical procedures were preferred.

The Mann–Whitney U test was used to compare burnout levels across dichotomous variables, including marital status and the gender of the child with special needs. Variables with more than two categories, namely parent type, cohabitation status, income level, educational level, and the type of support services utilized, were analyzed using the Kruskal–Wallis H test. Statistical significance was evaluated at the .05 level.

Results

The results of the statistical analyses are presented below. As a preliminary step, the distributional characteristics of the burnout scores were examined to determine the suitability of the statistical procedures. The findings of the normality assessment are presented in Table 1.

Table 1: Normality Statistics for Burnout Scores

Skewness		Kurtosis		Kolmogorov-Smirnov		Shapiro-Wilk	
Statistic	Std. Error	Statistic	Std. Error	Statistic	p	Statistic	p
-.048	.125	-.291	.249	.095	.001	.966	.001

The results presented in Table 1 indicate that the burnout scores showed skewness and kurtosis values close to zero (Skewness = $-.048$; Kurtosis = $-.291$). However, both the Kolmogorov–Smirnov test ($p = .001$) and the Shapiro–Wilk test ($p = .001$) yielded statistically significant results, indicating deviations from normality. Accordingly, non-parametric statistical methods were used in subsequent analyses.

To examine whether burnout levels differed according to marital status (married vs. divorced/widowed), a Mann–Whitney U test was performed. The results are presented in Table 2.

Table 2: Burnout Scores by Marital Status: Mann–Whitney U Test Results

Group	N	Mean Rank	Sum of Ranks	Mann-Whitney U	Z	p
Married	355	194.87	68985.50	3696.000	-1.964	0.047*
Divorced/Widowed	27	140.20	3785.50			
Total	382					

* $p < 0.05$

The results of the Mann–Whitney U test indicated a statistically significant difference in burnout levels according to marital status ($U = 3696.00$, $z = -1.96$, $p = .047$). Married

participants had a higher mean rank (194.87) than divorced or widowed participants (140.20), indicating higher burnout levels among married parents.

In Table 3, a non-parametric Mann–Whitney U test was conducted to determine whether burnout scores differ significantly according to the gender of the child with special needs (female/male).

Table 3: Burnout Scores by Child’s Gender: Mann–Whitney U Test Results

Group	N	Mean Rank.	Sum of Ranks	Mann-Whitney U	Z	p
Female	169	206.87	34961.50	15231.500	-2.512	.012*
Male	213	178.35	37809.50			
Total	382					

* $p < 0.05$

The results of the Mann–Whitney U test indicated a statistically significant difference in parental burnout according to the gender of the child with special needs ($U = 15231.50$, $z = -2.51$, $p = .012$). Parents of girls with special needs had a higher mean rank (206.87) than parents of boys (178.35), indicating higher burnout levels among caregivers of girls.

In Table 4, a non-parametric Kruskal–Wallis H test was conducted to determine whether burnout scores differ significantly according to parent type (mother / father / guardian–other).

Table 4: Burnout Scores by Parent Type: Kruskal–Wallis Test Results

Group	N	Mean Rank.	Kruskal-Wallis	p
Mother	279	187.16	1.777	.411
Father	96	204.49		
Guardian–Other	7	186.14		
Total	382			

The results of the Kruskal–Wallis H test indicated no statistically significant differences in burnout levels according to parent type (mother, father, or guardian/other), $\chi^2(2) = 1.78$, $p = .411$. Although fathers had a slightly higher mean rank (204.49) than mothers (187.16) and guardians/other caregivers (186.14), these differences were not statistically significant.

In Table 5, a non-parametric Kruskal–Wallis H test was conducted to examine whether burnout scores differ significantly according to the caregiver’s cohabitation status (living with spouse / living with child / other).

Table 5: Burnout Scores by Cohabitation Status: Kruskal–Wallis Test Results

Group	N	Mean Rank.	Kruskal-Wallis	p
Living with spouse and children	316	184.25	8.799	.012*
Without spouse. only me and my children	38	215.00		
Other	28	241.38		
Total	382			

* $p < 0.05$



The results of the Kruskal–Wallis H test indicated a statistically significant difference in burnout levels according to cohabitation status, $\chi^2(2) = 8.80$, $p = .012$. The mean ranks were 184.25 for participants living with a spouse and children, 215.00 for those living only with their children, and 241.38 for those in other living arrangements. These findings suggest that burnout levels varied across different household compositions.

In Table 6, a non-parametric Kruskal–Wallis H test was conducted to examine whether burnout scores differ significantly according to parents' average monthly income.

Table 6: Burnout Scores by Income Level: Kruskal–Wallis Test Results

Group	N	Mean Rank.	Kruskal-Wallis	p
Income Less Than Expenses	255	203.41	8.941	.011*
Income Equals Expenses	104	168.18		
Income Greater Than Expenses	23	164.93		
Total	382			

* $p < 0.05$

The results of the Kruskal–Wallis H test indicated a statistically significant difference in burnout levels according to income level, $\chi^2(2) = 8.94$, $p = .011$. The mean ranks were 203.41 for participants whose income was lower than their expenses, 168.18 for those whose income equaled their expenses, and 164.93 for those whose income exceeded their expenses. These findings suggest that burnout levels varied across income groups.

In Table 7, a non-parametric Kruskal–Wallis H test was conducted to examine whether burnout scores differ significantly according to the types of support services or resources utilized by the parents.

Table 7: Burnout Scores by Type of Support Services Utilized: Kruskal–Wallis Test Results

Group	N	Mean Rank.	Kruskal-Wallis	p
No Support	47	133.87	48.113	0.001*
Disability Allowance	140	233.56		
Care Allowance	69	147.32		
Discounted Vehicle	2	132.00		
Other	13	136.54		
Care Allowance and Disability Allowance	111	195.59		
Total	382			

* $p < 0.05$

The results of the Kruskal–Wallis H test indicated a statistically significant difference in burnout levels according to the type of support services utilized by parents, $\chi^2(5) = 48.11$, $p < .001$. The mean ranks were 133.87 for the No Support group, 233.56 for the Disability Allowance group, 147.32 for the Care Allowance group, 132.00 for the Discounted Vehicle group, 136.54 for the Other group, and 195.59 for the group receiving both Care Allowance and Disability Allowance. These findings suggest that burnout levels varied across different support-service categories.

In Table 8, a non-parametric Kruskal–Wallis H test was conducted to examine whether burnout scores differ significantly according to parents’ educational level.

Table 8: Burnout Scores by Educational Level: Kruskal–Wallis Test Results

Group	N	Mean Rank.	Kruskal-Wallis	p
Illiterate	152	190.64	5.760	.330
Primary School	137	201.90		
Middle School	42	185.83		
High School	41	183.39		
University	10	144.25		
Total	382			

The results of the Kruskal–Wallis H test indicated no statistically significant differences in burnout levels according to educational level, $\chi^2(4) = 5.76$, $p = .330$. Although some variation was observed in the mean ranks across educational groups, these differences were not statistically significant.

Discussion and Conclusion

The findings of the present study suggest that parental burnout is a multidimensional phenomenon that cannot be explained solely by individual characteristics. The risk–resource balance model, which conceptualizes parental burnout as the result of an imbalance between chronic demands and available psychosocial resources, provides a useful framework for interpreting these findings (Roskam & Mikolajczak, 2023). According to this perspective, burnout is more likely to emerge when ongoing challenges, such as financial strain, intensive caregiving responsibilities, and limited support resources, exceed a caregiver’s capacity to cope. The present findings are generally consistent with this framework. In particular, parents whose income was lower than their expenses reported higher burnout levels than those with greater financial balance, suggesting that economic strain may be associated with increased vulnerability to parental burnout.

The findings related to income level are consistent with previous research reporting an association between financial conditions and emotional burnout among parents of individuals with intellectual disabilities (Duran & Barlas, 2014). Economic hardship may create not only direct financial challenges but also additional stressors, including concerns about the future and difficulties accessing educational, healthcare, and support services. These cumulative pressures may increase the demands placed on caregivers and contribute to higher levels of burnout. Taken together, the findings suggest that parental burnout is associated not only with individual coping capacities but also with broader socioeconomic conditions that shape families’ daily caregiving experiences.

Another notable finding was that burnout levels differed according to cohabitation status. Although post-hoc analyses were not conducted, the pattern of mean ranks suggests that household composition may be associated with burnout levels. Previous research comparing mothers of children with intellectual disabilities and mothers of typically developing children has highlighted the importance of social support and coping resources in understanding parental burnout (Duygun & Sezgin, 2003). In the present study, burnout levels differed according to cohabitation status, suggesting that family living arrangements may be associated with the availability of practical and emotional support resources. Although social support



was not directly measured, the pattern of findings is broadly consistent with the view that supportive family environments may help buffer the challenges associated with long-term caregiving.

Similarly, a study examining resilience, burnout, and hopelessness among families of children with special needs reported that higher resilience was associated with lower burnout, whereas higher hopelessness was associated with greater burnout (Yılmaz & Bahçalı, 2025). Although resilience was not assessed in the current study, these findings provide a useful framework for interpreting the observed differences in burnout across family and support-related contexts. Together, they suggest that parental burnout may be shaped not only by socioeconomic circumstances but also by the psychosocial resources available to families.

A further important finding was that burnout levels differed according to the type of support services utilized by parents. Although post-hoc comparisons were not conducted, the distribution of mean ranks suggests that burnout may vary across different support-service categories. One possible explanation is that families receiving specific forms of financial assistance may also experience greater caregiving demands or more severe child-related needs. Therefore, support utilization may reflect not only the availability of resources but also the intensity of challenges faced by families. This interpretation is broadly consistent with the risk–resource framework, which emphasizes the interaction between caregiving demands and available resources (Roskam & Mikolajczak, 2023). Future studies should examine not only whether families receive support but also the adequacy, accessibility, and perceived usefulness of these services.

Additional evidence from the literature further supports the role of psychosocial and contextual factors in parental burnout. For example, hopelessness has been reported to be positively associated with burnout among parents of children with learning disabilities, highlighting the importance of cognitive and emotional processes in caregivers' well-being (Özülkü & Bağlama, 2022). Similarly, research conducted with families of children with hearing impairments found that social support and resilience were closely linked to lower burnout levels, underscoring the protective value of psychosocial resources (Nazik et al., 2023). In addition, findings indicating that perceived social support is associated with caregiver burden and burnout, and that income level is related to burnout dimensions among mothers of children with intellectual disabilities, further emphasize the potential contribution of both economic and psychosocial stressors to parental burnout (Türk et al., 2025).

Consistent with these findings, studies examining family stress and life satisfaction have identified family stress as a strong correlate of burnout, whereas life satisfaction appears to function as a protective factor (Güler et al., 2022). Taken together, this body of evidence supports the view that parental burnout is best understood as the outcome of prolonged and cumulative stress experiences that interact with the availability of personal, familial, and social resources.

The finding that parents of girls with special needs reported higher burnout levels than parents of boys also deserves consideration. Although the mechanisms underlying this difference were not directly examined in the present study, previous literature suggests that caregiving experiences may be shaped by gender-related expectations, parental concerns regarding the future, and culturally influenced perceptions of vulnerability. Because these variables were not measured, such interpretations remain speculative. Nevertheless, the finding indicates that

child gender may represent an important contextual factor in understanding parental burnout and warrants further investigation in future studies.

A qualitative study conducted with mothers of children with disabilities reported that chronic fatigue, social isolation, continuous caregiving responsibilities, and the neglect of personal needs were among the experiences associated with parental burnout (Ersoy & Buluş, 2019). These findings suggest that parental burnout cannot be fully understood through quantitative indicators alone and that caregivers' subjective experiences should also be considered. Similarly, a review examining anxiety among families of children with special needs concluded that these families often experience substantial physical, emotional, and economic burdens, which may contribute to elevated levels of psychological distress (Şimşek et al., 2023). In addition, a thesis study investigating burnout, anxiety, and quality of life among mothers of children with special needs reported a positive association between burnout and anxiety (Topal, 2021). Together, these findings reinforce the view that parental burnout is closely intertwined with broader aspects of psychological well-being. Similarly, Marufoğlu and Tanhan (2025) reported that parents of children with disabilities experienced difficulties across multiple dimensions of psychological well-being, including burnout, death anxiety, psychological flexibility, and life satisfaction. These findings support the view that parental burnout should be evaluated within a broader psychosocial framework rather than as an isolated outcome.

In contrast to several significant findings, burnout levels did not differ significantly according to parent type or educational level. The absence of a significant difference between mothers and fathers may suggest that the demands associated with caring for a child with special needs can be experienced as burdensome across caregiver roles. Similarly, educational level was not significantly associated with burnout, suggesting that formal education alone may not be sufficient to reduce the challenges associated with long-term caregiving. These findings further support the view that parental burnout may be more closely linked to contextual and resource-related factors than to individual demographic characteristics.

The significant difference observed according to marital status should also be interpreted cautiously. Although married parents reported higher burnout levels than divorced or widowed parents, the latter group was substantially smaller. Consequently, this finding may have been influenced by unequal group sizes and other unmeasured contextual factors, such as caregiving arrangements, economic burden, and access to family support. Further research involving more balanced subgroup distributions is needed before firm conclusions can be drawn regarding the role of marital status in parental burnout.

Several limitations should be acknowledged. First, the cross-sectional design prevents causal interpretations of the observed relationships. Second, the data were based on self-report measures and may therefore be influenced by response biases. Third, some subgroup sizes were relatively small, particularly the guardian/other caregiver, university graduate, and discounted vehicle support groups, which may have limited statistical power. Fourth, post-hoc analyses were not conducted following significant Kruskal–Wallis tests; therefore, the specific group differences underlying these findings remain unclear. Finally, variables such as disability severity, caregiving duration, perceived social support, caregiver burden, and psychological resilience were not directly assessed and should be considered in future studies.



Overall, the findings of the present study suggest that parental burnout is associated with a combination of socioeconomic and family-related factors rather than with individual demographic characteristics alone. Consistent with the risk–resource balance model (Roskam & Mikolajczak, 2023), these findings support the view that parental burnout emerges when chronic caregiving demands exceed the resources available to families. Accordingly, intervention efforts may benefit from adopting a multidimensional approach that combines economic support, family-centered services, and psychosocial resources aimed at strengthening families’ capacity to cope with long-term caregiving demands.

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