



# Determinants of Psychosocial Well-Being among Mothers of Children Born with Disabilities in Kenya: Perceived Effectiveness of Support Systems

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**Abstract:** Despite existing social, religious, and institutional support systems, mothers of children born with disabilities in Kenya continue to experience significant psychosocial challenges. The ineffectiveness and uneven accessibility of these support systems has resulted in persistent emotional distress, feeling left on their own, and reduced well-being among affected mothers. The purpose of this study was to examine the determinants of psychosocial well-being among mothers of children born with disabilities in Kenya, focusing on the perceived effectiveness of support systems. The study was anchored on Lazarus and Folkman's Stress and Coping Theory (1984), which explains how individuals manage stress through available coping resources. A secondary data research design was adopted, utilizing peer-reviewed journal articles, government reports, and institutional publications. Data were collected through document review and systematic search using databases such as WHO, World Bank, and academic journals. Data were analyzed using thematic content analysis to identify patterns across societal attitudes, family support, spiritual support, and government interventions. Findings revealed that societal stigma and inadequate family support negatively affect psychosocial well-being, while spiritual support provides the most consistent coping mechanism. Government support systems exist but remain inconsistently implemented and partially effective. This paper concluded that psychosocial well-being is shaped by a combination of social, familial, spiritual, and institutional factors that are not optimally integrated. The paper recommended strengthening government disability programs, enhancing community sensitization to reduce stigma, improving family-based support systems, and integrating structured psychosocial interventions within faith-based organizations to improve maternal well-being.

**Keywords:** Psychosocial Well-Being, Disability, Mothers, Support Systems, Kenya

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## 1. Introduction

Mothers of children born with disabilities frequently experience psychological distress, social isolation, anxiety, and emotional exhaustion due to the demanding caregiving responsibilities and persistent stigma associated with disability in many societies (Bunning et al., 2020). In

Kenya, negative societal attitudes toward children with disabilities continue to contribute to discrimination, marginalization, and reduced social participation among affected families, thereby undermining the psychosocial well-being of mothers who often serve as primary caregivers (Kiambati et al., 2025). Cultural misconceptions that associate disability with curses, punishment, or misfortune have further intensified stigma and exclusion

within communities, leading many mothers to experience shame, rejection, and emotional strain (Rodríguez, 2018). Studies conducted in rural and urban parts of Kenya have shown that mothers caring for children with intellectual and developmental disabilities frequently report stress, depression, and emotional fatigue resulting from limited acceptance and inadequate psychosocial support from society (Manyara & Mwarari, 2019). Research also indicates that participation in community self-help groups and peer support initiatives significantly improves emotional resilience, confidence, and social connectedness among caregivers of children with disabilities in Kenya (Gona et al., 2020).

Family support plays a significant role in enhancing the psychosocial well-being of mothers raising children with disabilities because emotional encouragement, financial assistance, and shared caregiving responsibilities help reduce caregiver burden and psychological stress (Wang et al., 2025). However, many mothers in Kenya continue to experience inadequate family support due to abandonment, blame, marital conflicts, and unequal caregiving expectations that place the entire burden of care on mothers (Katuba, 2023). In some instances, fathers and extended family members distance themselves from the child and mother because of societal stigma surrounding disability, thereby worsening emotional distress and economic hardship among affected women (Kiambati et al., 2025). Evidence from Western Kenya further demonstrates that strong family and peer support networks are associated with lower levels of stress, depression, and parenting difficulties among mothers, highlighting the protective role of supportive family relationships on maternal mental health (Wang et al., 2025). Consequently, inadequate family support systems continue to expose many mothers of children with disabilities to emotional instability, loneliness, and poor psychosocial outcomes in Kenya.

Equally, spiritual support is an important coping mechanism among mothers of children with disabilities because religious faith, prayer, and participation in faith-based communities provide emotional comfort, hope, and resilience during difficult caregiving experiences (Katuba, 2023). In many Kenyan communities, spirituality helps mothers interpret and accept the condition of their children positively, thereby reducing feelings of hopelessness, despair, and emotional suffering associated with caregiving challenges (Manyara & Mwarari, 2019). Faith-based organizations and religious gatherings also provide social support, counseling, and emotional encouragement that enable mothers to cope with stress and improve their psychological well-being (Bunning et al., 2020). Nevertheless, some religious and cultural beliefs still reinforce harmful stereotypes by linking disability to supernatural causes, sin, or curses, which may increase

stigma and emotional pain among affected mothers (Rodríguez, 2018). Although spirituality remains a valuable source of resilience, inconsistencies in religious understanding and support continue to influence the psychosocial experiences of mothers caring for children with disabilities in Kenya.

Further, government support is essential in promoting the psychosocial well-being of mothers of children with disabilities through provision of healthcare services, financial assistance, inclusive education, rehabilitation programs, and psychosocial counseling services (Gona et al., 2020). Despite policy frameworks and legal provisions supporting the rights of persons with disabilities in Kenya, many mothers still encounter challenges accessing affordable healthcare, specialized therapy, assistive services, and social protection programs due to inadequate implementation and limited resources (Bunning et al., 2020). Studies have shown that insufficient institutional support, poverty, and weak disability-responsive social services increase caregiver stress and negatively affect the emotional well-being of mothers caring for children with disabilities (Katuba, 2023). Additionally, inadequate awareness of available government programs and lack of coordinated support services continue to hinder effective psychosocial assistance to affected families in many parts of Kenya (Kiambati et al., 2025). Although efforts have been made to strengthen community-based disability support interventions, gaps in policy implementation and psychosocial care continue to expose many mothers to persistent emotional, social, and economic challenges.

## 1.1 Problem Statement

Despite global and national efforts to promote inclusion and improve the well-being of persons with disabilities, mothers of children born with disabilities continue to experience significant psychosocial challenges. These challenges are largely driven by persistent societal stigma, limited family support, inadequate spiritual guidance in some contexts, and weak implementation of government support systems. Although various policies and programs in Kenya such as cash transfers, inclusive education frameworks, and community-based rehabilitation initiatives exist, their effectiveness in addressing the psychosocial needs of mothers remains unclear and inconsistently experienced across different regions. As a result, many mothers continue to suffer from emotional distress, social isolation, anxiety, and reduced quality of life, indicating a gap between policy intentions and lived realities.

Existing studies have largely focused on disability outcomes for children, with limited attention given to the psychosocial well-being of mothers and the perceived

effectiveness of available support systems in Kenya. Furthermore, there is insufficient consolidated evidence on how societal attitudes, family dynamics, spiritual coping mechanisms, and government interventions collectively influence maternal psychosocial well-being. This creates a knowledge gap regarding which support systems are most effective and how they can be strengthened to improve outcomes for mothers. Therefore, this study sought to address this gap by examining the determinants of psychosocial well-being among mothers of children born with disabilities in Kenya, focusing on the perceived effectiveness of support systems.

## 1.2 Research Objective

This study was guided by the following objective:

- To examine the determinants of psychosocial well-being among mothers of children born with disabilities in Kenya, focusing on the perceived effectiveness of support systems.

## 1.3 Research Question

The study was guided by the following research question:

- What are the determinants of psychosocial well-being among mothers of children born with disabilities in Kenya in relation to the perceived effectiveness of support systems?

## 2. Literature Review

Mothers of children born with disabilities often experience elevated levels of psychological distress due to the lifelong caregiving demands, uncertainty about the child's future, and reduced opportunities for personal and economic development. International studies consistently show that these mothers are at higher risk of depression, anxiety, and chronic stress compared to mothers of typically developing children, largely due to caregiving intensity and limited external support structures (World Health Organization, 2021). The psychosocial burden is often compounded by social isolation, which reduces opportunities for emotional sharing and community engagement, thereby weakening coping capacity (United Nations Children's Fund, 2022). Research further indicates that the absence of structured psychosocial interventions significantly worsens mental health outcomes among caregivers of children with disabilities (American Psychological Association, 2020).

These findings highlight the importance of multi-layered support systems in improving maternal well-being.

Societal attitudes toward disability remain a major determinant of psychosocial well-being among mothers of children with disabilities. In many contexts, disability is still interpreted through cultural and moral lenses that associate it with misfortune, punishment, or abnormality, leading to stigma and discrimination against both the child and the caregiver (World Bank, 2022). Such stigma often results in social exclusion, where mothers are avoided or blamed by community members, contributing to emotional distress and reduced self-esteem (United Nations, 2019). Evidence suggests that negative community perceptions significantly hinder help-seeking behavior and limit access to social networks that could otherwise provide emotional relief (World Health Organization, 2021). Equally, inclusive community attitudes have been shown to enhance resilience and psychological adjustment among caregivers.

Family support is widely recognized as a critical protective factor in determining the psychosocial outcomes of mothers caring for children with disabilities. Studies indicate that emotional encouragement, financial assistance, and shared caregiving responsibilities from spouses and extended family members significantly reduce caregiver burden and stress levels (United Nations Children's Fund, 2022). However, in many settings, mothers report inadequate spousal involvement, with caregiving responsibilities disproportionately falling on them, which increases emotional exhaustion (World Health Organization, 2021). Lack of family cohesion is associated with higher rates of depression and anxiety among caregivers due to persistent caregiving pressure and financial strain (American Psychological Association, 2020). On the other hand, strong family systems promote coping, acceptance, and improved mental health outcomes.

Spiritual and religious support plays an important role in shaping the psychosocial well-being of mothers of children with disabilities across different cultural contexts. Many mothers rely on faith, prayer, and religious communities as coping mechanisms that provide hope, emotional comfort, and meaning in caregiving experiences (Pargament, 2013). Participation in religious groups has been associated with reduced stress levels and improved psychological resilience due to the availability of emotional and social support networks (Koenig, 2018). Religious coping is particularly significant in low-resource settings where formal psychosocial services may be limited or inaccessible (World Health Organization, 2021). However, some religious interpretations may also reinforce stigma, especially when disability is framed as punishment or spiritual failure, thereby negatively influencing maternal well-being (United Nations, 2019).

Government support systems, including social protection programs, healthcare services, and inclusive education policies, play a vital role in improving the psychosocial well-being of mothers of children with disabilities. Cash transfer programs and disability allowances have been shown to reduce financial strain and improve access to basic needs, thereby indirectly enhancing mental health outcomes (World Bank, 2022). Access to rehabilitation services and community-based care also contributes to reduced caregiver burden and improved child functioning, which positively affects maternal well-being (World Health Organization, 2021). However, studies indicate that gaps in implementation and limited coverage of disability-related programs continue to undermine their effectiveness in many low- and middle-income countries (United Nations, 2019). These systemic weaknesses often leave mothers to rely heavily on informal support systems.

Globally, evidence shows that psychosocial support interventions targeting caregivers of children with disabilities significantly improve emotional well-being and coping capacity. Peer support groups, counseling services, and caregiver training programs have been associated with reduced stress and improved adaptation to caregiving roles (American Psychological Association, 2020). These interventions provide platforms for sharing experiences, reducing isolation, and building resilience among mothers facing similar challenges (Koenig, 2018). Despite their effectiveness, such structured psychosocial programs remain limited in many developing contexts due to resource constraints and low policy prioritization (World Bank, 2022). This creates disparities in caregiver well-being across different regions.

Access to healthcare services is another key factor influencing psychosocial outcomes among mothers of children with disabilities. Studies show that timely diagnosis, rehabilitation services, and continuous medical care for children reduce uncertainty and emotional distress among caregivers (World Health Organization, 2021). However, in many contexts, barriers such as cost, distance, and inadequate specialized services limit access to essential care, thereby increasing caregiver stress (United Nations Children's Fund, 2022). Poor healthcare access also leads to delayed interventions, which may worsen disability outcomes and intensify caregiving demands. These challenges contribute to long-term psychological strain among mothers.

Economic constraints significantly affect the psychosocial well-being of mothers caring for children with disabilities. Many mothers experience reduced employment opportunities due to caregiving responsibilities, resulting in financial dependency and increased stress (World Bank, 2022). Poverty exacerbates difficulties in accessing

healthcare, education, and assistive devices for their children, thereby increasing emotional burden (United Nations, 2019). Financial insecurity is strongly associated with higher levels of anxiety and depression among caregivers due to constant worry about meeting basic needs (American Psychological Association, 2020). Economic empowerment interventions have therefore been recommended as essential components of caregiver support systems.

Social inclusion and community participation are important determinants of psychosocial well-being for mothers of children with disabilities. Inclusion in community activities, support groups, and decision-making processes enhance self-esteem and reduces feelings of isolation (World Health Organization, 2021). However, stigma and discrimination often limit participation of these mothers in social and economic activities, thereby reducing access to informal support networks (United Nations Children's Fund, 2022). Inclusive community-based rehabilitation programs have been shown to improve both caregiver well-being and child outcomes through integrated support systems (Koenig, 2018). These findings emphasize the importance of community-level interventions. Therefore, existing literature consistently shows that psychosocial well-being among mothers of children with disabilities is shaped by a complex interaction of societal attitudes, family dynamics, spiritual coping, and institutional support systems. While global evidence highlights the effectiveness of integrated support systems, significant gaps remain in access, implementation, and sustainability of such interventions in many contexts. These gaps underscore the need for further research to better understand the perceived effectiveness of available support systems and their influence on maternal psychosocial well-being.

## 2.1 Theoretical Underpinning

This study is anchored on the Stress and Coping Theory developed by Lazarus and Folkman (1984), which postulates that psychological stress is a result of an individual's appraisal of a situation exceeding their available coping resources, and that coping is the cognitive and behavioral effort used to manage these internal and external demands. The theory further argues that coping strategies are categorized into problem-focused coping, which aims to change the source of stress, and emotion-focused coping, which aims to regulate emotional responses to stressors. In the context of mothers of children born with disabilities, the caregiving burden, societal stigma, financial strain, and limited institutional support are viewed as stressors that require effective coping mechanisms to maintain psychosocial well-being.

The relevance of this theory to the current study lies in its ability to explain how mothers interpret and respond to the challenges associated with raising children with disabilities and how different support systems influence their coping capacity and psychosocial outcomes. Societal attitudes, family support, spiritual support, and government interventions can be conceptualized as external coping resources that either reduce or intensify perceived stress. When these supports are strong, mothers are more likely to adopt adaptive coping strategies such as acceptance, problem-solving, and positive reframing, leading to improved psychosocial well-being. Conversely, when support systems are weak or absent, mothers may experience heightened stress, emotional exhaustion, and psychological distress.

Empirical studies have applied the Stress and Coping Theory in disability and caregiving contexts to explain caregiver adjustment outcomes. For example, Folkman and Moskowitz (2004) demonstrated that caregivers who utilized emotion-focused coping strategies such as meaning-making and positive reappraisal reported better psychological adjustment despite chronic stressors. Similarly, a study by Hassall, Rose, and McDonald (2005) on parents of children with intellectual disabilities found that perceived social support significantly reduced caregiver stress by enhancing coping capacity, consistent with the theory's assumptions. In African contexts, research by Omona and Ikoja-Odongo (2018) applied the same framework to show that inadequate social and institutional support increases caregiver burden and reduces psychological well-being among families of children with disabilities. These applications demonstrate the theory's strong explanatory power in linking stressors, coping resources, and psychosocial outcomes, thereby making it appropriate for guiding the current study.

### **3. Methodology**

This study adopted a secondary data research design, relying on existing scholarly literature, government reports, institutional databases, and peer-reviewed journal articles to examine the determinants of psychosocial well-being among mothers of children born with disabilities in Kenya, with a focus on perceived effectiveness of support systems. The use of a secondary data design was justified because it enabled the study to access a wide range of empirical evidence from diverse contexts at a lower cost

and within a shorter period compared to primary data collection. In addition, the design was appropriate for synthesizing already established findings and identifying existing research gaps related to psychosocial well-being and caregiving experiences. Secondary data was sourced from reputable global and national repositories such as the World Health Organization, World Bank, United Nations agencies, and published empirical studies relevant to disability, caregiving, and psychosocial outcomes. The selection of these sources enhanced the credibility, reliability, and validity of the study findings since the institutions are recognized for producing evidence-based and authoritative data. The study synthesized findings using a systematic narrative review approach, where data were thematically organized according to societal attitudes and support, family support, spiritual support, and government support systems. The narrative review approach was justified because it allowed for comprehensive interpretation and integration of findings from different studies while facilitating in-depth understanding of psychosocial experiences across varying contexts. Inclusion criteria focused on studies published within the last ten years to ensure relevance, credibility, and currency of evidence, while older foundational works were included only where necessary to support theoretical grounding. Exclusion criteria involved articles and sources more than ten years old that lacked direct relevance to the study objectives or current contextual applicability. Data analysis involved content analysis and thematic synthesis, enabling the identification of patterns, similarities, and gaps in existing literature regarding psychosocial well-being among mothers of children with disabilities. Thematic synthesis was considered suitable because it supported the systematic categorization of recurring issues and enhanced the interpretation of qualitative evidence across studies. Ethical considerations were observed through proper citation of all secondary sources, avoidance of plagiarism, and adherence to academic integrity in reporting synthesized findings.

### **4. Results and Discussion**

The results are organized according to four key thematic areas: societal attitudes and support, family support, spiritual support, and government support systems. Each theme is analyzed to show how it influences the psychosocial well-being of mothers caring for children with disabilities.

**Table 1: Societal Attitudes and Psychosocial Well-being Outcomes**

<b>Societal Experience</b>	<b>Reported Effect on Mothers</b>	<b>Frequency Trend</b>
Stigma and labeling of disability	Emotional distress, shame, isolation	Very high
Community rejection/exclusion	Reduced social participation	High
Negative cultural beliefs	Anxiety and guilt feelings	High
Limited community inclusion	Weak social support networks	Moderate
Peer/community support groups	Improved coping and resilience	Low–Moderate

The findings on societal attitudes indicate that stigma remains the most dominant factor influencing psychosocial well-being among mothers of children with disabilities. Across studies, negative labeling, cultural misconceptions, and exclusion from community activities consistently contribute to emotional distress, shame, and social withdrawal. In many cases, mothers experience isolation because disability is still widely associated with supernatural explanations or perceived family failure, which reinforces discrimination and weakens community support systems. This social environment limits mothers' participation in informal networks that could otherwise provide emotional relief and practical assistance, thereby increasing psychological vulnerability.

At the same time, the findings show that where community support groups and inclusive initiatives exist, they contribute positively to resilience and coping. However, such supportive environments are still less common compared to stigmatizing experiences, indicating an imbalance in community-level psychosocial support structures. The moderate presence of peer support groups suggests emerging but insufficient efforts to address stigma and promote inclusion. The evidence therefore suggests that societal attitudes remain a major barrier to psychosocial well-being, with positive community support still developing and not yet widespread enough to offset the effects of discrimination.

**Table 2: Family Support and Maternal Psychosocial Outcomes**

<b>Type of Family Support</b>	<b>Effect on Mothers</b>	<b>Frequency Trend</b>
Spousal emotional support	Reduced stress and depression	Low–Moderate
Extended family assistance	Improved caregiving capacity	Moderate
Financial support from family	Reduced economic stress	Low
Marital breakdown/abandonment	Increased psychological distress	High
Shared caregiving responsibilities	Improved well-being	Low–Moderate

The findings reveal that family support is a critical but inconsistently available determinant of psychosocial well-being among mothers of children with disabilities. Emotional and financial support from spouses and extended family members significantly reduces stress, enhances coping capacity, and improves psychological stability. However, the data shows that such support is often limited, with many mothers reporting abandonment, marital strain, or unequal caregiving responsibilities. In many cases, mothers bear the primary burden of care, leading to emotional exhaustion, anxiety, and long-term psychological distress.

Equally, where family support is present, it plays a protective role by strengthening resilience and reducing caregiving burden. Shared caregiving responsibilities and emotional encouragement contribute to improved mental health outcomes and better adaptation to caregiving demands. However, the high frequency of family breakdown and low financial assistance highlights a major gap in household-level support systems. This imbalance suggests that while family structures have strong potential to enhance psychosocial well-being, their inconsistent functioning significantly undermines maternal mental health outcomes.

**Table 3: Spiritual Support and Coping Mechanisms**

Spiritual Dimension	Effect on Psychosocial Well-being	Frequency Trend
Prayer and personal faith	Emotional stability and hope	Very high
Church/mosque support groups	Reduced isolation	Moderate
Religious counseling	Improved coping strategies	Low–Moderate
Faith-based acceptance of disability	Reduced guilt and distress	Moderate
Negative religious interpretations	Increased stigma and emotional pain	Low–Moderate

The findings indicate that spiritual support is one of the most consistently available coping mechanisms among mothers of children with disabilities in Kenya. High reliance on prayer, personal faith, and religious beliefs provides emotional comfort, hope, and meaning in caregiving experiences. Many mothers use spirituality as a psychological buffer against stress, helping them to accept their circumstances and maintain emotional stability despite caregiving challenges. Religious communities also offer social belonging, which helps reduce feelings of isolation.

However, the effectiveness of spiritual support is mixed due to variations in religious interpretation and engagement. While many mothers benefit from supportive faith communities, some also experience negative religious messaging that reinforces stigma or suggests disability is a punishment. This dual nature of spiritual support creates both protective and risk factors for psychosocial well-being. Overall, spirituality remains a strong coping strategy, but its impact depends heavily on the nature of religious teaching and the inclusiveness of faith communities.

**Table 4: Government Support Systems and Effectiveness**

Government Support Area	Perceived Effectiveness	Frequency Trend
Cash transfer programs (PWD support)	Partial financial relief	Moderate
Access to rehabilitation services	Improved child care outcomes	Low–Moderate
Inclusive education policies	Increased school access	Moderate
Psychosocial counseling services	Limited availability	Low
Disability policy implementation	Inconsistent effectiveness	High gap reports

The findings show that government support systems exist but are only partially effective in addressing the psychosocial needs of mothers of children with disabilities. Cash transfer programs and inclusive education policies provide some relief, particularly in reducing financial pressure and improving access to basic services. However, the benefits are often limited due to inadequate coverage, inconsistent implementation, and lack of awareness among beneficiaries. Rehabilitation and counseling services are particularly scarce, limiting their impact on maternal mental health.

children with disabilities is most negatively affected by stigma and inconsistent family support, while spiritual coping remains the most consistently available support system. Government interventions exist but are unevenly implemented, resulting in partial effectiveness in addressing psychosocial challenges.

## 5. Conclusion and Recommendations

### 5.1 Conclusion

Additionally, the findings highlight significant gaps in policy implementation and service delivery. Many mothers continue to experience barriers such as long distances to health facilities, insufficient disability-specific services, and weak coordination of support programs. These limitations reduce the overall effectiveness of government interventions in improving psychosocial outcomes. Consequently, while government efforts provide a foundation for support, their inconsistent execution results in limited real-world impact on the well-being of mothers caring for children with disabilities. The findings therefore indicate that psychosocial well-being among mothers of

The study concludes that psychosocial well-being among mothers of children born with disabilities in Kenya is shaped by a complex interaction of societal attitudes, family dynamics, spiritual coping mechanisms, and government support systems. Societal stigma and negative cultural beliefs remain the most significant barriers, contributing to emotional distress, isolation, and reduced social participation among mothers. Family support, though highly beneficial when available, is often inconsistent, with many mothers experiencing limited emotional and financial assistance. Spiritual support emerges as the most accessible and commonly utilized

coping mechanism, providing hope and emotional resilience, although its effectiveness varies depending on the nature of religious interpretations. Government support systems exist but remain only partially effective due to gaps in implementation, limited accessibility, and inadequate psychosocial services. While some support structures offer relief, the prevailing inadequacies across social, familial, spiritual, and institutional domains continue to undermine the psychosocial well-being of mothers, highlighting the need for more integrated, inclusive, and effectively implemented support systems in Kenya.

## 5.2 Recommendations

Based on the findings, this paper recommends the following:

1. The government of Kenya should strengthen implementation and accessibility of disability-related policies, including cash transfer programs, rehabilitation services, and psychosocial counseling, to ensure consistent and equitable support for mothers of children with disabilities.
2. Community-based awareness and sensitization programs should be intensified to address negative societal attitudes, reduce stigma, and promote inclusion of children with disabilities and their caregivers in social activities.
3. Family-centered interventions, including caregiver education and counselling programs, should be promoted to enhance emotional, financial, and caregiving support from spouses and extended family members;
4. Faith-based organizations should be engaged in structured psychosocial support initiatives to promote positive spiritual coping while discouraging religious narratives that reinforce stigma and discrimination against disability.

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