### **CHAPTER 6**

#### Discussion

This chapter provides an in-depth discussion of the major findings from Phase 2 of the study, which centred on the implementation of the Psychosocial Intervention. The discussion is organized table-wise to ensure a clear, systematic, and structured examination of the results, with each table addressing specific aspects of the findings. It is important to note that the socio-demographic characteristics of the participants have been comprehensively addressed in the main results section, so this chapter will focus exclusively on the primary findings related to the intervention itself. In this chapter, particular attention is given to the ways in which the intervention's strategies—such as the psychoeducational content, enhancement of coping strategies, and support systembuilding etc—might have influenced the outcomes, and how these elements worked together to potentially affect the well-being of the mothers. The discussion also incorporates relevant findings from similar studies, providing a comparative perspective that highlights the consistency or divergence of the results across different research contexts.

# Table 5.8: Perceived Social Support among Mothers in the study group and control group

Mothers of children with ASD encounter a unique set of challenges that can be overwhelming without adequate support (Lamba et al., 2022; Furrukh & Anjum, 2020). Managing their child's behavioural issues (Shattnawi et al., 2021), coordinating medical and educational needs (Brewer, 2018), dealing with social stigma (Turnock et al., 2022) are just a few of the many challenges they face. A strong support system can alleviate these pressures by providing emotional support, practical help, and respite care (Shepherd et al., 2020). Despite the known benefits of support systems, there is limited research on interventions specifically designed to strengthen these networks for mothers of children with ASD.

Before the intervention, mothers caring for children with ASD reported moderate levels of perceived social support, consistent with existing research highlighting the hardships faced by caregivers in this community. These challenges often lead to feelings of isolation and inadequacy (Khanlou et al., 2017), significantly affecting the perceived level of support among these mothers. The various gaps in support systems contributing

to this moderate perception are diverse. For instance, friends and family members may not grasp the unique difficulties of raising a child with ASD (Altiere & von Kluge, 2009), resulting in unsupportive behaviours like dismissing the mother's concerns (Broady et al., 2017) or offering inappropriate advice (Ives et al., 2001). Moreover, there is often a scarcity of specialized support services tailored to families with ASD, such as limited access to therapy (Braddock & Twyman, 2014), support groups (Khanlou et al., 2017), and respite care (Iadarola et al., 2019). The consequences of this moderate social support perception among mothers are profound. It often leads to heightened stress as mothers grapple with caregiving challenges without adequate help (Zablotsky et al., 2013; Pisula, 2011). Extended periods of insufficient support may lead to caregiver burnout, marked by physical, emotional, and mental exhaustion (Sekułowicz et al., 2022; Kwiatkowski & Sekulowicz, 2017). Ultimately, when mothers feel overwhelmed and unsupported, their ability to provide optimal care for their child may be compromised (Robinson et al., 2015; Russell & McCloskey, 2016).

Our intervention aimed to address these gaps by educating mothers about the importance of support systems, helping them identify and map out their support networks, and providing strategies to enhance their help-seeking behaviour. By doing so, the intervention sought to transform the moderate levels of perceived social support into higher levels of actual and perceived support, ultimately improving the well-being of both the mothers and their children.

It was seen that following the intervention, there was a noticeable increase in perceived social support levels, indicating a positive effect. This improvement may suggest that the intervention had a positive effect on the participants. Raising mothers' awareness about the importance of support networks likely empowered them to identify and leverage support from unexpected sources, enriching their overall support network. Research indicates that enhanced social support can significantly improve caregivers' mental health and overall well-being (Zablotsky et al., 2013; Ekas et al., 2010; Drogomyretska et al., 2020). For instance, a study by Benson (2012) found that the characteristics of social networks directly impact psychological adjustment, and these effects are often mediated by perceived social support. Specifically, measures of network structure, such as network size, and network function, like the proportion of network members providing emotional support, were linked to higher levels of perceived social support. This increased perceived support, in turn, was associated with reduced depressive symptoms and enhanced well-being (Benson, 2012).

Moreover, the activity wherein mothers identified and mapped their potential support sources facilitated a hands-on, experiential learning approach. By actively engaging in the process of identifying individuals within their social circle who could offer support, mothers were able to visualize the breadth and depth of their support network. For instance, after listing her network, a mother recognized that her colleague, who has a child with special needs, could offer valuable advice and emotional support.

Furthermore, through the process of mapping out their support networks, mothers gained clarity and organization regarding the types of support available to them. By visually representing their support sources, mothers could clearly identify who in their network could provide different types of support. For instance, they might categorize their sister as providing emotional support, a neighbour as offering physical help, and a local support group as providing informational support. This clarity and organization enable mothers to more effectively leverage their support networks and access the specific types of assistance they need.

These activity-based learning fosters a deeper understanding of the diverse types of support available within their existing social connections, empowering mothers to seek assistance more effectively and efficiently. Identifying specific types of support, including emotional, financial, informational, and physical assistance, empowers caregivers by providing them with targeted resources to address their needs (Srinivasan et al., 2021). This empowerment allows mothers to prioritize their caregiving responsibilities while also recognizing the importance of self-care and seeking support when needed. By identifying and acknowledging the diverse types of support available within their network, caregivers gain a sense of agency and control over their caregiving journey (Altiere & Von Kluge, 2009). This newfound empowerment fosters resilience and resourcefulness, enabling caregivers to navigate the challenges of caring for children with ASD more effectively and confidently.

The intervention further strategically addressed the underlying reasons for hesitation in seeking support, particularly the fear of rejection and the fear of burdening others. By directly targeting these psychological barriers, the intervention effectively dismantled obstacles that often inhibit caregivers from reaching out for assistance. For instance, caregivers may hesitate to seek support due to a fear of being judged or rejected by others who may not understand the challenges they face. Research studies (Kim et al., 2001; Luong et al., 2009; McCabe, 2008; Nevo and Bin Khader, 1995) indicate that parents often refrain from seeking help due to the fear of social stigma and

embarrassment linked to having a child with special needs. Additionally, they may worry about burdening their friends or family members with their caregiving responsibilities. By acknowledging and addressing these concerns within the intervention, caregivers were provided with reassurance and validation of their experiences. This validation helps to normalize their feelings and reduces the stigma associated with seeking support. As a result, caregivers felt more empowered to overcome their hesitations and actively seek the help they need to navigate their caregiving journey more effectively.

The intervention not only addressed psychological barriers but also provided caregivers with practical strategies and reinforcement to facilitate help-seeking behaviour. By offering tangible tips and guidance, caregivers were equipped with the necessary tools to navigate support-seeking situations more confidently. For example, caregivers were provided with suggestions on how to communicate their needs effectively and set boundaries when seeking support from friends and family members. Additionally, the intervention reinforced the importance of existing support systems and encouraged caregivers to actively engage with them. By highlighting the value of seeking and accepting help from their social networks, caregivers were motivated to overcome their reservations and actively seek support when needed. This emphasis on practical tips and reinforcement likely played a significant role in increasing caregivers perceived social support levels, as it provided them with the necessary skills and confidence to effectively leverage their support networks.

The sustained high levels of perceived social support at both the one-month and three-month follow-up assessments suggest that this positive change endured over time. On the other hand, in the control group, perceived social support scores remained consistent across all time points, indicating no observed changes in perceived social support levels over time.

Overall, the results suggest a positive effect of the intervention on the perceived social support of mothers of children with ASD. The significant increase observed immediately after the intervention, sustained at both the one-month and three-month follow-ups, implies that the intervention potentially provided valuable support networks or resources, leading to enduring improvements in perceived social support.

Based on the pairwise comparison results, it appears that the intervention program had a significant effect on perceived social support in the experimental group. The mean differences between pre-intervention and post-intervention assessments

(Post1, Post2, and Post3) were statistically significant (p < 0.005) for all time points, indicating an increase in perceived social support immediately after the intervention and sustaining up to three months post-intervention. Additionally, the lack of significant mean differences between subsequent post-intervention assessments (Post1 vs. Post2, Post1 vs. Post3, and Post2 vs. Post3) suggests that while there may have been minor fluctuations, overall, the perceived social support remained stable over time following the initial increase. Therefore, it can be concluded that the intervention program had a positive and lasting effect on perceived social support among mothers of children with ASD in the experimental group.

# Table 5.9 Problem Focused Coping among Mothers in the study group and controlgroup

There was a significant increase in problem-focused coping, as evidenced by the rise in the mean score following the intervention. This immediate rise suggests that the intervention had a positive initial impact on the problem-focused coping strategies of mothers in the experimental group. This improvement can be attributed to several key components of the intervention. Firstly, participants learnt about different coping strategies, including problem-focused coping. They learned that problem-focused coping involves taking active steps to solve the problems that cause stress. This educational component helped mothers recognize the importance of actively addressing issues rather than avoiding them (Pourmohamadreza-Tajrishi et al., 2015). The benefits of problemfocused coping were highlighted, such as gaining control over stressful situations and reducing the negative impact of stress on daily life (Obeid & Daou, 2015). Next, through an activity, participants were encouraged to reflect on their current coping mechanisms by reviewing past stressful situations and their responses. They assessed the effectiveness of their responses, identifying which strategies helped and which did not. After which they brainstormed alternative responses, focusing on more proactive, problem-solving approaches. This exercise helped them develop practical problem-solving skills that they could apply in future situations. The intervention not only provided participants with the knowledge and tools to engage in problem-focused coping but also resulted in tangible improvements in their ability to manage stressors effectively.

Similar to our study findings, a study conducted by Feinberg et al. (2014) demonstrated the effectiveness of a structured intervention in enhancing coping strategies among mothers. In their intervention sessions, mothers worked one-on-one with a trained

interventionist to identify a specific, measurable problem. They then proceeded through a series of steps that included goal setting, brainstorming and evaluating solutions, choosing a solution, and action planning. The findings from Feinberg et al. (2014) indicated that Problem Solving Education was associated with an increase in social coping abilities and a decrease in clinically significant parenting stress. Supporting these findings, Nguyen et al. (2016) conducted a study in which sessions addressed specific issues identified by caregivers. These issues ranged from emotional difficulties to logistical challenges, encompassing both concerns related to their child with ASD and other personal problems. This method mirrors our activity where participants listed their difficult situations or problems. Nguyen et al. (2016) found that mothers of children with ASD who completed the Problem-Solving Skills Training (PSST) intervention experienced significant reductions in depressive symptoms, overall mood disturbance, and post-traumatic stress symptoms. Moreover, these mothers demonstrated improved problem-solving abilities after the intervention compared to their baseline. Another study by Sidig et al. (2022) reported that the use of problem focused coping strategy by mothers increased from 42.90% to 92.85% post training program. Similarly, a brief group-based educational and family support program for parents of children with autism reported that participants experienced reduced stress, improved emotional well-being and family functioning, and increased use of problem-focused coping strategies (Samadi et al., 2013).

These findings suggest that integrating problem-solving education into support programs for caregivers can lead to sustained improvements in their ability to cope with stress. The primary goal of problem-solving approaches is to enhance positive well-being by helping individuals manage stressful problems more effectively (D'Zurilla & Nezu, 2010). This approach has proven effective in various clinical settings and populations. For instance, it has been shown to be an effective treatment for depression (Cuijpers et al., 2007) and generalized anxiety disorder (Ladouceur et al., 2000). When applied to caregivers of other populations, problem-solving training has led to reductions in depression and feelings of burden among family caregivers of physically or cognitively impaired older adults, with significant improvements observed (Gallagher-Thompson et al., 2000). Similarly, family caregivers of stroke survivors who received problem-solving training demonstrated better problem-solving skills, greater caregiver preparedness, less depression, and significant improvements in vitality, social functioning, mental health,

and role limitations related to emotional problems (Grant et al., 2002). Furthermore, an open trial of a web-based family problem-solving intervention aimed at improving adaptation in families of children with moderate to severe traumatic brain injury revealed significant improvements in injury-related burden, parental psychiatric symptoms, depression, and parenting stress (Wade et al., 2005). Therefore, problem-focused coping is crucial as it equips individuals with the skills to actively address and resolve issues, leading to reduced stress and enhanced mental health. This approach empowers caregivers by improving their problem-solving abilities, thereby promoting sustained well-being and resilience in the face of ongoing challenges.

Additionally, the mean scores at one month and three months post-intervention remained relatively stable, indicating a lasting effect. This consistency suggests that the improvements in coping strategies were maintained over time, highlighting the intervention's efficacy. Similarly, Feinberg et al. (2014) found that results were stable even three months post-intervention, indicating sustained improvement in coping strategies. In contrast, Nguyen et al. (2016) observed a decline in effective problemsolving between 10-12 weeks and three months post-intervention. This decrease could be due to random variation, participants not consistently practicing the skills acquired during the intervention, or the loss of support from the sessions.

In contrast, the problem-focused coping scores in the control group remained unchanged across all time points, indicating a lack of observable changes in coping strategies over time. Furthermore, the within-subjects effect of time analysis demonstrates a statistically significant result (p-value < .001), suggesting a notable difference in problem-focused coping scores across various time points evaluated (preintervention, immediately after intervention, one month after intervention, and three months after intervention). This analysis is further reinforced by the significant interaction effect between time and group (p-value < .001), indicating that the impact of time on problem-focused coping varies significantly between the experimental and control groups.

Overall, the results underscore the enduring effect of the intervention on problemfocused coping within the experimental group, with significant improvements observed immediately after intervention and sustained over a period of one month. Although there is a slight decline in the effect over time, the statistically significant findings affirm the

continued presence of the intervention's beneficial influence on problem-focused coping. Whereas in the control group, the problem-focused coping scores remained consistent across all time points, with no statistically significant differences observed.

# Table 5.10 Emotion Focused Coping among Mothers in the study group and control group

Our intervention also significantly enhanced problem-focused coping among participants, as evidenced by the rise in the mean scores following the intervention. This improvement can be attributed to several key components of the intervention. Participants were encouraged to develop and maintain supportive friendships. Engaging in regular conversations with friends provided a valuable outlet for expressing feelings and receiving emotional support.

The importance of emotional support, particularly for mothers who are primary caregivers of children with autism, cannot be overstated. Emotional support from friends, family, and support groups can play a crucial role in mitigating this stress and enhancing the overall well-being of caregivers. Numerous studies highlight the significance of emotional support for caregivers. For example, a study by Ekas et al. (2010) found that social support was a critical factor in reducing stress and improving psychological well-being among mothers of children with autism. Similarly, a study by Goedeke et al. (2019) demonstrated that emotional support from family and friends significantly reduced feelings of depression and anxiety in parents of children with autism.

In another study, Liu et al. (2023) explored the impact of social support on coping strategies among parents of children with autism. They found that parents who received higher levels of social support were more likely to engage in adaptive coping strategies and experience less psychological distress. This suggests that emotional support not only provides immediate relief from stress but also promotes long-term resilience by encouraging positive coping mechanisms. Furthermore, research by Clifford and Minnes (2013) indicated that participation in support groups resulted in the adoption of more adaptive coping strategies. These support groups offered a platform for sharing experiences, gaining practical advice, and receiving empathy and understanding from others facing similar challenges (Hastings & Beck, 2004).

The findings from these studies underscore the vital role that emotional support plays in the lives of caregivers of children with autism (Ekas et al., 2010). It helps them manage the emotional burdens associated with their caregiving roles and enhances their capacity to cope with stress effectively (Smith et al., 2012). Incorporating components that foster emotional support into intervention programs is therefore essential for promoting the mental health and well-being of caregivers.

Secondly, our participants were also guided to identify and engage in hobbies and leisure activities they enjoyed. These activities served as a distraction from stress and helped in managing emotional responses more constructively. Engaging in hobbies or leisure activities is a vital aspect of emotional self-care that contributes significantly to reducing stress and enhancing overall well-being (Sylvia, 2021). Many studies support the importance of these activities for stress management, particularly for caregivers.

Research by Pressman et al. (2009) highlights that leisure activities are associated with lower levels of stress and improved physical health. Their study found that individuals who regularly engaged in enjoyable activities reported better moods, higher levels of positive affect, and reduced stress levels. This underscores the therapeutic effect of hobbies in providing a mental break from the demands of daily life.

Additionally, findings from a study conducted by Davy et al. (2023) revealed that caregivers emphasized the importance of addressing their existing fatigue levels by engaging in activities aimed at rejuvenation or enhancing their quality of life. Parents identified various meaningful activities, with the most prevalent ones being employment, family outings, and leisure pursuits.

Another qualitative study conducted by Laughlin (2023) delved into the firsthand experiences of parental caregivers of children with autism regarding life challenges and the role of leisure as a coping mechanism for stress. The results also uncovered that leisure served as a coping resource in several ways: rejuvenation, mood enhancement, creating distance from stressors, and facilitating social experiences. This research underscored the significance of recreation therapists promoting leisure education and informal leisure activities among parental caregivers to facilitate effective coping with caregiver-related stress.

By integrating hobbies and leisure activities into their routines, caregivers can experience significant improvements in their emotional well-being (Sylvia, 2021). These activities provide a necessary break from caregiving responsibilities, allowing individuals to recharge and return to their duties with renewed energy and a positive

mindset. Encouraging caregivers to pursue activities they enjoy is a crucial strategy in promoting their overall mental health and resilience (Walton, 2019; Sylvia, 2021; Sharma et al., 2023). This approach aligns with the broader body of research emphasizing the importance of leisure activities in enhancing emotional well-being and reducing caregiver stress.

Furthermore, our intervention also included mindfulness and relaxation exercises, such as meditation and deep-breathing techniques. These practices helped participants reduce stress and anxiety by promoting a state of calm and relaxation. The importance of mindfulness and relaxation exercises in promoting emotional well-being has been extensively studied and documented (Kabat-Zinn et al., 1992; Whitebird et al., 2013; Hofmann et al., 2010; Carlson et al., 2001). These practices offer numerous benefits for stress reduction and overall mental health.

A study by Benn et al. (2012) assessed the effectiveness of a mindfulness-based stress reduction program and found that, in addition to reducing stress after the intervention, there were significant improvements in psychological functioning. This included increased compassion, personal growth, empathic concern, and forgiveness, all of which are related to emotional focus. Similarly, other studies on mindfulness programs for parents of children with autism have shown various benefits. Participants exhibited an increase in active coping styles (Blackledge & Hayes, 2006), enhanced emotional awareness and non-judgmental acceptance (de Bruin et al., 2014), a reduction in negative thoughts (Kowalkowski, 2012), and decreased anxiety and negative moods (Ruiz-Robledillo et al., 2014).

By incorporating mindfulness and relaxation exercises into our intervention, we provided participants with evidence-based tools to manage stress and anxiety effectively. These practices not only promote a sense of calm and relaxation but also offer long-term benefits for emotional well-being and resilience (Wang et al., 2022). The inclusion of mindfulness exercises aligns with the broader body of research highlighting the therapeutic effects of these practices on mental health.

The consistent use of emotional self-care strategies among participants underscores the long-term efficacy of the intervention in promoting adaptive emotionfocused coping mechanisms. These findings highlight the importance of incorporating emotional self-care activities into support programs for caregivers of children with

autism. By helping caregivers manage their emotions more effectively, these programs can reduce emotional distress and improve overall well-being.

Following the intervention, there was a noticeable trend of increased mean scores, suggesting a potential positive impact on enhancing emotion-focused coping strategies. This trend persisted at the one-month and three-month follow-ups, indicating the sustained effect of the intervention over time. In contrast, the control group showed no observed changes in emotion-focused coping strategies over time. The consistent increase in mean emotion-focused coping scores immediately after the intervention, along with sustained levels observed at one month and three months post-intervention, suggests the intervention's potential efficacy in enhancing emotion-focused coping strategies among mothers of children with ASD in the experimental group. This positive trend implies that the intervention likely equipped mothers with the necessary skills and resources to better manage and cope with the emotional stressors associated with parenting a child with ASD.

The significant within-subjects effect of time suggests that emotion-focused coping strategies among mothers of children with ASD may naturally fluctuate over time, irrespective of any intervention. However, the significant interaction effect between time and group indicates that the changes in emotion-focused coping scores over time were influenced by group assignment. This suggests that the intervention provided to the experimental group may have played a role in shaping the trajectory of emotion-focused coping strategies differently compared to the control group, highlighting the potential effectiveness of the intervention in enhancing emotion-focused coping skills among mothers in the experimental group.

Overall, in the experimental group, the intervention led to significant increases in emotion-focused coping strategies immediately after intervention, with effects persisting for up to three months post-intervention. On the contrary, the control group showed no significant changes in emotion-focused coping scores over time.

#### Table 5. 11 Avoidant Coping among Mothers in the study group and control group

While the intervention was successful in enhancing problem-focused and emotion-focused coping, its impact on reducing avoidant coping strategies was less pronounced. Before the intervention, mothers in the experimental group exhibited a baseline level of avoidant coping strategies. Following the intervention, there was a minor decrease in the mean avoidant coping score, although this change was relatively small and did not significantly differ from the baseline. This minor decrease may be attributed to components of the intervention specifically designed to address avoidant coping. However, the findings suggest that avoidant coping is a deeply ingrained behavior that may require more targeted and sustained intervention efforts.

Psychologically, avoidant coping is often linked to emotional regulation processes, where individuals attempt to minimize distress by disengaging from stressors. This response may be particularly reinforced in parents of children with ASD, who face chronic stressors that may feel overwhelming or unsolvable. Research suggests that habitual avoidance can create a cycle where short-term relief reinforces disengagement, making it harder to adopt proactive coping strategies in the long run (Skinner et al., 2003). Given the chronic nature of caregiving stress, parents may find avoidance to be an immediate, albeit temporary, relief mechanism, making it harder to shift toward engagement-based strategies.

Participants were educated about the drawbacks of avoidant coping and encouraged to explore proactive alternatives. Through structured activities, participants assessed their current coping responses, identified unhelpful avoidance behaviours, and brainstormed proactive alternatives. This process aimed to empower them to take actionable steps toward addressing their challenges rather than avoiding them. This trend persisted at the one-month and three-month follow-ups, indicating that any potential impact of the intervention on avoidant coping in the experimental group was sustained over time. The stability of avoidant coping scores over the one-month and three-month periods suggests that the intervention may not have had a substantial impact on reducing avoidant coping strategies among mothers in the experimental group.

Our study findings align with previous research by Piazza et al. (2014), Sivberg (2002), Wang et al. (2011), Lai et al. (2015); and Ntre et al. (2022), which all suggest that parents of children with developmental disabilities often resort to maladaptive coping in managing caregiving stress.

The limited impact of the intervention on avoidant coping may be attributed to several factors. Avoidant coping strategies, such as ignoring problems or avoiding stressful situations, can be deeply ingrained behaviours that are challenging to modify over a short intervention period (Roth & Cohen, 1986). Unlike problem-focused or emotion-focused coping, which involve active engagement and can be reinforced

through immediate feedback and support, avoidant coping requires a fundamental shift in mindset and behaviour that may take longer to achieve (Roth & Cohen, 1986).

Given these complexities, it may be beneficial to adopt a more subtle approach to tackling avoidant coping. Instead of aiming to eliminate avoidant coping altogether, interventions could focus on helping individuals recognize when avoidant coping might be temporarily helpful and when it might be detrimental. For instance, guiding participants to identify specific situations where taking a mental break is beneficial versus situations that require immediate problem-solving can provide them with a more balanced and flexible coping repertoire. It is important to recognize that not all forms of avoidant coping are inherently maladaptive. Healthy avoidant coping, when used appropriately, can serve as a temporary strategy to manage overwhelming stress and allow individuals to regroup before tackling their problems head-on. For example, taking a brief mental break from a stressful situation by engaging in a hobby or exercise can be a healthy way to avoid immediate stressors and return to the issue with a clearer mind. Teaching participants to differentiate between healthy and unhealthy avoidant coping strategies is crucial.

In conclusion, while our intervention made strides in enhancing problem-focused and emotion-focused coping, addressing avoidant coping remains a complex challenge. The deeply ingrained nature of avoidant behaviours suggests that more extensive and sustained efforts are necessary. Future interventions should focus on helping participants identify and practice healthy avoidant coping strategies, recognize when avoidance is appropriate, and gradually shift toward more adaptive coping mechanisms. Techniques such as mindfulness-based stress reduction (MBSR) and acceptance and commitment therapy (ACT) have shown promise in helping individuals acknowledge distress without resorting to maladaptive avoidance (Hayes et al., 2012).By adopting this multifaceted approach, we can better support caregivers in managing their stress and enhancing their psychological well-being.

## Table 5. 12 Parental Stress among Mothers in the study group and control group

The average results within the experimental group indicate a decrease in mean scores immediately following the provision of the intervention, suggesting a potential reduction in stress levels. This suggests that the psychosocial intervention was effective in reducing stress levels among participants.

Firstly, the intervention likely provided participants with a deeper understanding of ASD, including its signs, symptoms, and various treatment options. By increasing knowledge about ASD, participants may have felt more equipped to navigate challenges associated with raising a child with autism, potentially reducing immediate stress related to uncertainty or lack of information. Similarly, in a study by Patra et al. (2015), which focused on psychoeducation intervention for parents of children with Autism Spectrum Disorder, the findings revealed a significant enhancement in parental understanding of ASD and demonstrated a notable reduction in the perceived stress levels among participating parents. Another study by Farmer and Reupert (2013) revealed significant improvements in parents' understanding of autism and their own child. Additionally, the study showed substantial increases in parental confidence and a notable reduction in parental anxiety. A study by Cutress and Muncer (2014) also demonstrated that participants reported a greater understanding of autism, along with enhanced communication with their child and improved ability to manage their child's behaviour.

These findings emphasize the pivotal role of health literacy among parents. Health literacy not only influences how parents interpret and respond to their child's health issues but also affects their interactions with healthcare providers and their utilization of healthcare resources (May et al., 2018). Health literacy enables parents to better comprehend the nuances of their child's condition, equipping them with essential knowledge about signs, symptoms, and available treatments (Morrison et al., 2019). With this understanding, parents can navigate the challenges of raising a child with autism more effectively, potentially alleviating immediate stressors stemming from uncertainty or lack of information. Therefore, fostering health literacy among parents is paramount, as it not only empowers them to make informed decisions but also enhances their ability to cope with the unique demands associated with their child's condition, ultimately improving the overall well-being of both parents and children alike (May et al., 2018; Morrison et al., 2019; de Buhr & Tannen, 2020).

Secondly, the intervention also involved participants in conversations targeting the stigma and discrimination commonly encountered by individuals with autism and their families. Stigma can take various forms, such as social exclusion and negative stereotypes, and combating it requires challenging misconceptions and fostering a more inclusive society (Turnock et al., 2022; Hotez, 2021; Bennett et al., 2019). By delving into the roots of stigma and its impact, the intervention sought to break down barriers to

acceptance and support. Participants also took part in activities aimed at promoting empathy, raising awareness, and challenging harmful beliefs about autism. Through these discussions, participants may have gained insights into confronting stigma and advocating for greater inclusion in their communities. For instance, a study by Lodder et al. (2020), which focused on a stigma protection intervention designed to improve the mental health of parents of children with autism, observed an increase in mental health scores as well as reduced perceived stigma and self-stigma scores. These findings highlight that targeted interventions can effectively enhance the psychological well-being of caregivers (Sörensen et al., 2002) by directly addressing the sources of stigma and providing coping mechanisms. By fostering understanding and acceptance, the intervention may have empowered the participants to navigate social situations and access support without fear of judgment, lessening the emotional toll of stigma and enhancing the well-being of individuals with autism and their families.

Thirdly, the intervention also emphasized the importance of building a strong support network for families affected by autism. By helping participants identify and access available support resources, and to enhance support seeking behaviour, the intervention may have provided immediate reassurance and validation, reduced feelings of isolation and thereby reducing the overall stress levels. Research suggests that increased social support can greatly enhance caregivers' mental health and overall wellbeing (Zablotsky et al., 2013; Ekas et al., 2010; Drogomyretska et al., 2020; Benson, 2012) whereas a lack of social support leads to a decline in maternal mental health (Boyd, 2002).

Furthermore, participants were encouraged to explore and assess their current coping mechanisms for managing stress related to raising a child with autism. Through discussions and activities focused on identifying helpful coping strategies and developing alternatives when needed, participants may have experienced immediate relief by gaining new tools and skills for managing stressors more effectively. Research studies demonstrate that effectively using adaptive coping strategies and positive coping responses can help reduce stress (Feinberg et al., 2014; Nguyen et al., 2016; Sidig et al., 2022; Samadi et al., 2013; D'Zurilla & Nezu, 2010; Cuijpers et al., 2007; Ladouceur et al., 2000; Gallagher-Thompson et al., 2000; Grant et al., 2002; Wade et al., 2005).

Participants were also introduced to simple relaxation techniques and self-care activities aimed at reducing emotional distress and promoting overall well-being. The goal is to empower participants to better handle the emotional demands of parenting a child with autism, resulting in lower stress levels and improved emotional well-being. By adopting and practicing stress management techniques through relaxation exercises, participants likely experienced immediate relief from emotional tension and anxiety, fostering a heightened sense of calm and control. Numerous research studies indicate that relaxation techniques and self-care activities reduce stress for parents of children with autism. Benn et al. (2012) found that their Stress Management and Relaxation Technique program significantly decreased stress post-intervention. Similarly, Blackledge and Hayes (2006) reported a significant reduction in general distress and depression following their intervention, which was maintained at a three-month follow-up. De Bruin et al. (2014) observed a significant increase in mindfulness measures at both post-test and follow-up, a borderline significant increase in quality-of-life post-intervention, and a significant decrease in parental stress post-test. Ferraioli and Harris (2013) also reported a significant reduction in parental stress post-intervention in their mindfulness group, and Singh et al. (2014) also confirmed a significant decrease in parent stress levels.

Lastly the intervention focused on providing participants with strategies for understanding and managing their child's unique temperament and behavioural challenges. Participants delved into the underlying reasons for challenging behaviours in children with autism and explore evidence-based techniques for behaviour management and communication. This included setting clear expectations, using positive reinforcement, implementing visual supports, and creating structured routines. By equipping participants with practical tips and techniques for addressing their child's challenging behaviours, the intervention may have alleviated immediate stressors related to parenting difficulties and enhanced participants' confidence in their ability to cope effectively.

Numerous research studies have highlighted the relationship between the severity of a child's autism and increased maternal stress (Hastings et al., 2005; Baker-Ericzén et al., 2005), as well as the correlation between children's behaviour and parenting stress (Beck et al., 2004; Phetrasuwan & Shandor Miles, 2009). Therefore, it was crucial for our intervention to address these aspects. Other studies have emphasized that providing participants with strategies to understand and manage their child's unique temperament

and behavioural challenges leads to decreased levels of parenting stress (Koegel, Bimbela & Schreibman, 1996) and depression (Bristol et al., 1993). Similarly, Feldman and Werner (2002) documented reductions in parent stress and increases in self-efficacy through behavioural parent training. Utilizing Parent Management Training (PMT), which teaches skills for managing children's disruptive behaviours, has shown significant effects on behaviour (Skotarczak & Lee, 2015). Furthermore, various studies have reported statistically significant improvements in autistic children's behaviour following parent training programs (Wong & Kwan, 2010; Matson, Mahan & Matson, 2009; Rogers & Dawson, 2012; George & Sakeer, 2013; Schultz, Schmidt and Stichter, 2011; Bassam & Tork, 2019). Leung et al. (2014) reported significantly lower levels of child behaviour problems, parental stress, dysfunctional discipline style, and parental conflict scores post-intervention. Similarly, Kubo et al. (2021) found significant improvements in self-efficacy and mental health scores for mothers and in children's behaviour in the intervention group. Caregivers of very young children newly diagnosed with ASD who participated in 3 months of parent coaching reported lower parenting stress than those receiving community intervention as usual (Munson et al., 2014). Another study showed that post-intervention, the percentage of mothers with a good score in physical care skills increased from 31.4% to 50.0%, and mean stress scores decreased (Sidig et al., 2022).

By gaining a deeper understanding of their child's needs and learning effective management strategies, participants can feel more confident and capable in addressing their child's challenging behaviours, leading to improved parent-child interactions and reduced stress levels for both parent and child (Robson, 2018).

Subsequent assessments one month later revealed relatively stable scores, indicating that the intervention's effect persisted for a month, albeit without further significant reduction compared to immediately post-intervention. However, at the threemonth assessment, there was a slight increase in mean scores compared to the previous post-intervention assessment. This implies that while stress levels remained lower than baseline, there was a slight rebound in stress levels three months after the intervention compared to one month after.

Overall, these findings suggest that the intervention program initially had a modest effect on reducing perceived stress levels within the experimental group. However, this effect may not have been sustained over the long term, as stress levels

appeared to slightly increase three months post-intervention compared to one-month post-intervention.

In the control group however, it was seen that the mean scores remained unchanged. Based on these findings, it appears that the stress levels in the control group remained relatively stable throughout the study period, indicating that factors other than the intervention may have influenced their perceived stress levels. These findings become more apparent as the within-subjects analysis demonstrates a notable variance in perceived stress levels across different time points (Pre-intervention, post-intervention, one month later, three months later) for both groups. Moreover, a significant interaction effect between time and group suggests a distinct variation in the change of perceived stress levels over time between the experimental and control groups. Pairwise comparisons demonstrated statistically significant decreases in perceived stress levels following an intervention implemented for participants in the experimental group. The most substantial reduction occurred immediately after the intervention (Post1), indicating an immediate impact. This suggests that the intervention likely introduced coping mechanisms or strategies that helped participants manage their stress more effectively. The persistence of decreased stress levels one month after the intervention (Post2) further underscores the effectiveness of the intervention in providing lasting benefits. Although the effect was slightly diminished three months after the intervention (Post3), it remained statistically significant, indicating that the intervention likely imparted skills or practices that continued to influence participants' stress levels over time. Thus, the intervention appears to have played a significant role in reducing perceived stress levels among participants, potentially by equipping them with tools to better manage stressors in their daily lives.

Overall, the results suggest that the intervention implemented in the experimental group had a significant effect on reducing perceived stress levels immediately after the intervention, with potential sustained or decreased effects observed over the three-month period. In contrast, perceived stress levels in the control group remained stable over time, with no significant changes observed between the pre-intervention and post-intervention assessments.

## Conclusion

Based on the findings, the intervention demonstrated significant positive effects on several key areas of maternal well-being. Mothers in the experimental group showed substantial improvements in perceived social support, problem-focused coping, and emotion-focused coping, with these gains being sustained at both one-month and threemonth follow-ups. These results suggest that the intervention had a lasting impact on enhancing coping strategies and social support. In contrast, the control group showed no significant changes in these areas. Although the experimental group experienced a slight decrease in avoidant coping, this change was not statistically significant, indicating that the intervention had a more limited effect on this coping style. Regarding parental stress, the intervention group experienced a significant reduction in stress immediately after the intervention, which was maintained for one month, but stress levels slightly rebounded by the three-month follow-up, remaining lower than baseline. The control group showed no changes in stress levels. Overall, the findings highlight the effectiveness of the psychosocial intervention in improving maternal coping skills, perceived social support, and reducing stress, with benefits that persisted over time, although some aspects, like avoidant coping, did not show significant change.