Relationship Between Husband Social Support and the Resilience of Mother of Children with Autism Spectrum Disorder (ASD)

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ABSTRACT
Mothers with ASD children face daily adversity that translates into a high level of stress due to the symptoms the child has. Mothers must overcome all the challenges and adversity by having resilience. Resilience held by mothers is formed from external factors, namely social support from their spouse. This research conducted to find out relationship between social support from spouses and resilience by mothers with ASD children. Instrument used was a social provisions scale consisting of 44 items (α = 0.755) and resilience quotient consisting of 56 items (α = 0.779). Using purposive sampling with a total of 30 participants who brought their children to therapy at clinic in the city of Bandung. The results of this study indicate that there is a significant positive relationship between social support of the husband and the resilience of the mother and child ASD (r = 0.663; p = 0.000). In addition, this study also found two interesting things from the correlation between dimensions of social support from husbands with resilience.

Keywords: Mothers With Autism Spectrum Disorder Child, Resilience, Spouse Social Support.

1. INTRODUCTION

ASD (Autism Spectrum Disorder) is a form of developmental disorder in children who are in the Pervasive Development Disorder (PDD) category [1]. According to data by the World Health Organization (WHO) in 2018, 1 in 160 children have ASD worldwide. Parents who have ASD children must have fear and disappointment with their child's condition [2]. Parents, especially mothers, have higher stress levels and feel a greater pressure than parents with other developmental disorders or parents of typically developing children [3]. In addition, mothers have a dual role as primary caregivers for ASD children and do homework. The dual role that is undertaken makes mothers experience different stress than mothers with other developmental disorders [4,5].

The challenge of undergoing multiple roles which is a stressor for mothers every day makes mothers have to have resilience [6]. Resilience is the ability of individuals to overcome, steer through, bounce back, and open up to options for solutions to solve problems (reaching out) so that it is called individual "resilience". When facing challenges, self-efficacy is an individual's belief to be able to solve problems and succeed in solving them, empathy is an individual's ability to be able to see the signs shown by others about their emotional state, and reaching out which is an individual's ability to try things and opportunities. Resilience is important for individuals because resilience is the ability of individuals to be able to face extraordinary difficulties by adapting and improving life balance so that they can avoid the negative effects of stress [7].

Resilience formed by mothers can ideally enable mothers to have their children checked by doctors or psychologists regularly, accept the fact that they have ASD children, seek solutions, and various information about how to support children's growth and development, and apply information. which is known to directly support children's development. Mothers who have high resilience can regulate the emotions they feel and regulate the expressions of those emotions, show control over daily difficulties when caring for ASD children, make efforts to be able to provide the best care and facilities for ASD
children and be able to commit to solving problems by not giving up when the strategy doesn't work [8].

These differences in sources and similarities in resilience make researchers interested in finding out whether there is a relationship between social support and resilience in mothers who have ASD children? Is social support from the husband a protective factor in the formation of resilience in mothers with ASD children?

2. METHOD

Participants of this study are mothers who have children diagnosed with Autism Spectrum Disorder (ASD) aged 3-10 years, do therapy at a child development clinic in Bandung, and have a husband who lives together. The sampling technique used non-probability with a purposive sampling method considering the limited population of mothers with ASD children in Bandung and taking clinics that were willing to conduct research. From the results of data collection, there were 30 mothers who met the criteria with an age range of 18-65 years (M = 34.86, SD = 1.162.)

The measurement instrument used consists of two scales, namely the Resilient Quotient Scale and the Social Provisions Scale. Both measuring instruments are a self-report questionnaire. The Resilient Quotient Scale has 56 items consisting of favorable and unfavorable statements to measure seven dimensions of resilience, namely emotional regulation, impulse control, optimism, empathy, causal analysis, self-efficacy, and reaching out. The scoring of this measuring tool uses a Likert scale from 1 = strongly disagree to 4 = strongly agree. RQS has a reliability value of $\alpha = 0.755$. The Social Provision Scale has 44 items consisting of favorable and unfavorable statements to measure six dimensions of social support, namely attachment, social integration, opportunity for nurturance, reliable alliance, guidance, and reassurance of worth. The scoring of this measuring tool uses a Likert scale from 1 = strongly disagree to 4 = strongly agree. SPS has a reliability value of $\alpha = 0.779$.

3. RESULT

The Pearson correlation between the husband's social support and resilience shows that there is a significant relationship between the husband's social support and resilience of mothers with ASD children ($r = 0.663$, $p < 0.05$). The dimension that is in the low category is the reassurance of worth. As many as 21 respondents (70%) perceive that their husbands have not given positive appreciation to the mother in the form of praise for the mother's ability and the achievement of child development.

The dimension that has a significant negative relationship with resilience is attachment ($p = 0.027$) with a moderate correlation ($r = -0.404$, $p < 0.05$).

The husband's social support had a significant and positive correlation with the level of resilience possessed by mothers with ASD children ($r = 0.663$, $p < 0.05$). This significant and positive correlation is in line with (8) which explains that support from husbands is one of the factors that significantly affect his quality to be able to face challenges and develop when facing difficulties in caring for ASD children.

When viewed from the form of support provided, it is found that mothers get support in the form of happiness when with their husbands, involvement in childcare decision making, convenience when asked for advice when mothers have difficulty caring for children, the trust given by mothers in choosing the best therapy place for children, the presence needed by the husband in the family to care for ASD children, and the husband's willingness to accompany the child to the therapy place. Husband has a significant role in influencing the mother's ability to seek new information by reaching out to the husband because the husband is the first person that is trusted by the wife when she needs opinion before the closest family [9]. It also explains that the support is given from the husband in the form of appreciation for the presence of the mother in the family and also involvement in making childcare decisions at home significantly increases the mother's ability to try various ways to prevent changes in children's behavior that cannot be controlled in the future.

The results of this study also found a significant relationship in the dimensions of the husband's social support, namely guidance and resilience to mothers. Judging from the description of mothers with high resilience, as much as 93.3% get useful advice in therapy places for their children, provide input on which schools are good for children, provide options for appropriate therapy places for their children, provide input on which schools are good for children, and tend not to give modest answers when invited to a discussion. This is in line with the results [8] research which states that support in the form of information provided from closest people, especially partners, contributes 9.1% to the level of mother's confidence in caring for ASD children as a whole. In [10] also explains that the direction/information provided fulfills the resilience function of individuals to stretch through or through the challenges they have because...
The individual has new knowledge about what to face and how to deal with it.

The moderate relationship between husband's social support and maternal resilience with ASD children indicates that there are other sources that can play a significant role in shaping the resilience of mothers. This can be viewed from 4 dimensions that do not play a significant role in maternal resilience. First, the absence of a relationship between the dimensions of social integration and resilience in mothers shows that the involvement of the husband in making decisions, providing opportunities to be able to carry out activities such as caring for children together and giving opinions to the wife so that making the wife also a part of childcare does not have a significant impact on ability mothers in parenting ASD children. The husband's involvement should have a significant impact on the wife’s ability because the husband can help the wife in carrying out her dual role of caring for ASD children. In this study, wives who are mothers with ASD children have a part in caring for ASD children because in general in Indonesia mothers carry out household duties in caring for children. This indicates that the involvement given by the husband does not have a significant effect because mothers with ASD children already know clearly the responsibilities of child care so that the mother's ability to care for children is not influenced by the husband who also involves the wife in caring for ASD children.

Second, the absence of a significant relationship between the dimensions of reassurance of worth and resilience indicates that the mother's confidence in the rewards given by her husband does not have a significant impact on the ability of mothers to care for ASD children. The form of appreciation given by others in this context by husbands to wives who care for ASD children is in the form of praise, appreciation for the achievement of child development, and the belief from the husband that his wife can do her best in childcare. The absence of this relationship is in accordance with Santoso (2015) research which explains that in Southeast Asia, the appreciation that is considered important for mothers with ASD children does not come from the husband but from the husband's side of the family.

4. CONCLUSION

The husband's social support had a significant and positive correlation with the level of resilience possessed by mothers with ASD children. This can be viewed from the absence of a relationship between the dimensions of social integration and resilience in mothers and the absence of a significant relationship between the dimensions of reassurance of worth and resilience indicates.

AUTHORS’ CONTRIBUTION

This study was designed by S.A.S and M.F.M. S.A.S as the first author provided conceptual framework, gathered data, analyzing statistical data, and write the report for the data findings. M.F.M as the second author provided conceptual framework for the discussion.

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REFERENCES


