

**PARENTAL STRESS AND SELF-EFFICACY AMONG PARENTS OF
AUTISTIC AND NON-AUTISTIC CHILDREN**

Dissertation submitted to Christ College (Autonomous) in partial fulfilment of the
requirements for the award of the degree of Bachelor of Science in Psychology

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BONA-FIDE CERTIFICATE

This is to certify that the dissertation entitled, “PARENTAL STRESS AND SELF-EFFICACY AMONG PARENTS OF AUTISTIC AND NON-AUTISTIC CHILDREN” is a bona-fide record of research work carried out by Ms. RAJESWARI RAMACHANDRAN, Register no: CCASSPY005, during the sixth semester of B.Sc. Psychology of the academic year 2018-2021.

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INTERNAL EXAMINER

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DECLARATION

I hereby declare that the dissertation work entitled “ PARENTAL STRESS AND SELF-EFFICACY AMONG PARENTS OF AUTISTIC AND NON-AUTISTIC CHILDREN” submitted to the University of Calicut, in partial fulfilment of the requirement for the award of the Degree of Bachelor of Science in Psychology is the record work done by me under the supervision of Ms.Durga.K.S , Assistant Professor, Department of Psychology, Christ College (Autonomous) Irinjalakuda. This is not formed as the basis for the award of any degree/diploma (Associate ship) fellowship or other similar title to any candidate of any university.

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ABSTRACT

The purpose of the study was to find the relationship between parental stress and self-efficacy in parent of autistic as well as find the variation between the same in comparison to parents of non-autistic children. Parents of children from various autism institutes and parents of college students were considered as sample for the study. The result from 80 parents was statistically analysed to reach the conclusion. The parental stress scale and General Self-efficacy Scale where the tools used in the study. The results obtained what statistically analysed using ANOVA and t-test. The study revealed Apparently stress and self-efficacy are correlated that is there negatively correlated meaning when parental stress levels are higher this implies that self-efficacy is lower and vice versa that is higher self-efficacy levels exhibit as lower levels of parental stress. In addition to this it was observed that the parental stress levels in parents with having children with autism were higher than parents with having children without autism. It was also found that self-efficacy levels were higher in parents with children without autism than children with autism. Hence from the results we can conclude that parental stress and self-efficacy show significant radiation in regards to presence of autism in children.

Keywords: parental stress, self-efficacy, autism

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CHAPTER I

INTRODUCTION

Children are thought to be a blessing however becoming a parent though rewarding is a role which inherently in its nature is extremely stressful. As a parent, one is responsible for another vulnerable human being who is unable to take care of themselves. Parents endeavour to turn their children into good and independent individuals able to take care of themselves and contribute to the society. Parents of autistic children have a much harder task as the dependence on them is greater with further worries of future.

AUTISM

Autism disorders comes under the classification of Autism Spectrum Disorders according to DSM – V which also comprises of Asperger’s disorder, childhood disintegrative disorder and pervasive developmental disorder not otherwise specified. Autism spectrum disorders were previously known as pervasive developmental disorders. ASD refers to heterogeneous group of neurodevelopmental syndromes which affect brain and development. To receive a diagnosis for ASD the child must exhibit persistent deficits in the three areas of social communication and interaction. In addition to this they must indicate presence of any two of the four types of restricted, repetitive behaviour.

Since autistic children have difficulties in interacting with their environment and people around them, they have difficulty carrying out daily life activities. This leads them to depend heavily on their parents or caregivers to perform day-to-day activities depending on the severity of disability. Due to this parents of children having ASD are under immense pressure and a state of stress.

STRESS

Stress as defined by Hans Selye is “the non-specific response of the body to any demand”. The word stress has its origins in the Latin word ‘strictus’ meaning tight or narrow an ‘stringer’ the meaning to tighten. Thus stress refers to the response of an individual to a situation that disturbs their equilibrium and exceeds the individual’s ability to cope. Some amount of stress is actually good for an individual as it motivates us to perform well, this is known as Eustress. However when stress becomes excessive it is harmful and can cause severe damage to an individual’s physical and emotional state.

Depending on its duration, stress is of two types acute and chronic. When stress exists for a short amount of time it is known as acute stress and when it persists for a longer amount of time it is known as chronic stress. If we were to consider the case of parents of autistic children, it can be observed that this stress is constant and negative in nature and which may evolve into chronic distress.

The symptoms of stress include a range of physiological responses such as increased heart rate, increased breathing rate, higher blood pressure, intense sweating, nausea, constipation, diarrhoea, headaches etc. In addition to this there are cognitive, psychological and behavioural problems like loss of concentration, anxiety, intrusive thoughts, insomnia, loss of appetite, sense of hopelessness.

Various techniques can be used to manage stress such as relaxation techniques like mindfulness meditation, biofeedback, creative visualization, cognitive behavioural therapy, progressive muscle relaxation, exercise, proper diet, positive thinking etc. It is important that one develops resilience to stress and stressors especially if the stress is chronic in nature. As not doing so can cause severe damage to an individual's psychological and physical well-being.

Parental stress in particular is when a parent perceives that they are unable to meet the demands of their role with the resources available to them. This can occur due to a variety of reasons and is a quite normal experience for most parents. However excessive parenting stress can in fact be harmful as it may lead to feelings of guilt for not doing enough for their child which might in turn exacerbate the parent-child relationship.

SELF-EFFICACY

The concept of self-efficacy was introduced by Albert Bandura. According to him, self-efficacy is the personal judgement of "how well one can execute courses of action required to deal with prospective situations". Self-efficacy is the belief we have in our own abilities, specifically our ability to meet the challenges ahead of us and complete a task successfully (Akhtar, 2008). An individual's belief in their efficacy develops through 4 main sources namely mastery experiences, vicarious experiences, social persuasion and emotional states.

Mastery of experiences refers to the experience that an individual gains as they face new situations and challenges and overcome them successfully. While success builds up one's efficacy failures undermine it especially in a case where failure occurs before efficacy has a chance to develop. Vicarious experiences on the other hand refer to how people by observing others complete tasks successfully by imitating them and absorbing the positive beliefs about self from them. It is essentially about developing positive role models.

Social persuasion on the other hand is when a person is persuaded to believe that they have certain skills and capabilities to succeed based on the positive verbal feedback that they get for completing a task. Another important part of self-efficacy is our emotional or psychological state that is when the person is in a state of emotional, physical and psychological well-being they are more likely to have higher levels of self-efficacy and they are able to build upon this efficacy. However if a person is suffering or they are in a negative emotional state or struggling

from depression, anxiety and other mental illnesses it is very hard for self-efficacy to develop as they are suffering.

James Maddux in 2013 said that there is another route to self-efficacy that is imaginal experiences that is visualization. When one visualises that they behave effectively to achieve success in a given situation and practices this repeatedly, you become capable of achieving these goals that you set. Self-efficacy is essentially built through modelling, verbal feedback, encouragement, allowing people to make their own choices and helping them to accept the consequences of these decisions and encouraging participation in situations irrespective of the outcome.

Higher levels of self-efficacy are beneficial to an individual as it indicates resilience to adversity and stress and is associated with healthier lifestyle habits, improved performance in family, workplace and educational environment. Efficacy is what enables us to live our daily lives, its is responsible for the initiatives that one takes and carries out successfully. It is vital to taking control of one's own life and accepting the consequences of our choices regardless of their nature.

This study tries to understand the emotional upheaval that the parent of autistic children undergo. Specifically it attempts to correlate the factors of self-efficacy and parental stress. The study attempts to see if greater sense of self-efficacy reduces parental stress. It also attempts to find out the variation of stress in parents of normal and autistic children. There is also an attempt to identify various factors which act as stressors and any factors which may lead to the reduction of stress and increase in feelings of self-efficacy.

Significance of Study

The study looks into the effect of self-efficacy and parental stress in the parent-child relationship, on the occasion that the child suffers from ASD. In addition, it tries compare the variations in the same with regards to the socioeconomic status and education level of the individual. Self-efficacy is the perception of the individual in regards to their own ability. In the context of a parent to an autistic child, it is of primary importance in regards to the parental stress that results. Parent- child relations are likely to improve in the scenario where, the parents are sure of their abilities and capacities in relation to their child and life in general. Higher degree of parental stress quiet often aggravates a parent-child relationship and even leads to development of negative view towards the child and guilt towards oneself. Through this study, an attempt is made to understand the various factors that a parent of an ASD child may have difficulty with and an effort is made to correlate the demographic factors which may influence the same. In the current scenario wherein an increasing number of ASD children are

seen, it is of vital importance that the mental health of their caregivers is considered. Better mental health for caregivers means the children too benefit and there can be more harmony among the family members. This study is conducted to provide insight into the factors affecting parental stress and self-efficacy of parents of autistic children.

Aim

The aim of the study is to find the effect of having autistic children on parental stress and self-efficacy.

Explanation of Key Terms

Self-Efficacy: It is the personal judgement of "how well one can execute courses of action required to deal with prospective situations". (Albert Bandura)

Parental stress: It is defined as parental perceptions of an imbalance between the demands of parenting and available resources (Raphael, Zhang, Liu, & Giardino, 2010)

Objectives

- To understand the relationship between self-efficacy and parental stress.
- To understand whether there is any influence of autism in children on parental stress and self-efficacy of the parents.

Hypothesis

- There is no significant relationship between self-efficacy and parental stress.
- There is no significant difference in parental stress among parents of autistic and non-autistic children.
- There is no significant difference in self-efficacy among parents of autistic and non-autistic children.

CHAPTER II
REVIEW OF LITERATURE

Zhou et al (2019) investigated emotional problems in mothers of autistic children and their correlation with socioeconomic status and the children's core symptoms in a sample size of 180 mothers. The study found that mothers of ASD children showed elevated levels of anxiety and depression symptoms, in addition to this there was a positive correlation between autistic symptoms of children with depression and anxiety in mothers. However it was found that only the educational level aspect of the socioeconomic status had an impact on the maternal depressive symptoms.

Ilias et al (2018) studied parenting stress and resilience in parents of children with autism spectrum disorder in southeast Asia. The study found that there were six factors: social support, severity of autism symptoms, financial difficulty, parents' perception and understanding toward ASD, parents' anxiety and worries about their child's future, and religious beliefs; which could be considered as causes for parental stress coping or resilience mechanism. The study sought to fill in the gap occurring in research due to differences in culture between western countries and the southeast Asia region. It concluded that understanding of these differences may enable medical professional to provide better services.

Melli, Grossi, Zarbo, and Compare (2016) in the book "Psychological Distress" published a study "Mental stress in parents and siblings of autistic children: review of the literature and an original study of the related psychological dimensions". The study concluded that parents of autistic children tend to be more vulnerable to depression, anxiety and stress. It was noted that parents of children with ASD suffer from more parenting stress compared to those with normal children. The study indicated that treatment should not only include the individual with the impairment but rather the whole family. Intervention started early on can improve the mental health of the entire family.

Mohd. Fajjullah Kha (2016) conducted a study of perceived stress, quality of life and coping strategies of parents of children with special needs. The study examined 90 parents of children diagnosed with SLD, ASD and MR. It was concluded that perceived stress was least in SLD followed by MR and highest for ASD, whereas QoL was observed to show a reverse trend. The study also showed that there is a significant variation in the coping strategies used by the various groups of parents. Particularly those in SLD category depended more on social support and self control strategies while MR depended heavily on confrontive style strategies.

Another study was put forward by Farsi et al (2016) on stress, anxiety, and depression among parents of children with autism spectrum disorder in Oman. The study was unique in the point that it considered the psychosocial perception as skewed by the cultural and conceptual issues in non-western nations. This essentially indicates that individuals in non-western cultures do not express distress as defined by the ICD and DSM. The study concluded that caregivers of ASD

individuals tend to exhibit adverse psychological states like stress, anxiety, and depression to a greater degree.

Tripathi (2015) did a study on how parenting style and parents level of stress having children with autistic spectrum disorder, it was a study based on northern India. The study considered 320 parents of which 75% were mothers and 25 % were fathers. It was concluded that on the whole parents of children with ASD tend to suffer from higher degree of stress than their normal counterparts. In addition to this it could be seen that a more authoritarian approach to parenting was adopted with the increasing severity of autism. It was also seen that mothers on the whole took a more permissive approach to parenting than fathers. The study also provided for proper training and counselling so as to adopt more effective parenting style and decrease stress among parents especially mothers.

Tajrishi et al (2015) investigated the effects of problem-focused coping strategy training on psychological symptoms of mothers of children with down's syndrome. Data collected before training showed that mothers had high amount of stress, anxiety, depression, and greater aggressiveness. The experimental group after training was found to have a significant reduction in their negative symptoms an increased sense of well-being and positive relationship with their offspring.

Feizi et al (2014) studied about parenting stress among mothers of children with different physical, mental, and psychological problems. In general it was observed that the levels of stress in parents with some kind of developmental problem is in fact higher than those with normal children. The study discovered that mothers of children with sensory-motor and chronic physical problems suffered from greater amount of stress than those with children having psychological disorders. It was also found that level of education and number of children also play an important role in level of stress reported by mothers.

Fido and Saad (2013) looked into the psychological effects of parenting children with autism. This study was focused on the parents of ASD children in the Arab countries. It was found that though the occurrence of ASD is less here compared to other developed nations, the parents of these children were found to suffer from greater amount of child rearing stress just like their western counterparts. 120 parents of autistic children were tested using Beck's Depression Inventory. It was found that mother's were at greater risk for psychological problems than their male counterparts, this was thought to be due to the parental role and cultural appraisal of a women's worth and traditional role as mother.

Malay Das (2011) reported a study on the parental psychosocial stress of mentally retarded and autistic children. The study considered 272 parents equiproportionately divided into mothers and fathers of mentally retarded, autistic and normal children. Results of the study showed that

parents of special children were more distressed than their normal counterparts regarding the future, mothers of special children were more distressed than their fathers, and the major stressor was the stigma as perceived by the society. The study concluded that organized parental support groups, parent education and psychological counselling via special schools did much to alleviate this distress.

Rezendes and Scarpa (2011) studied the associations between parental anxiety or depression and child behavior problems related to autism spectrum disorders, the roles of parenting stress and parenting self-efficacy. This study examined the roles of parenting stress and parenting self-efficacy as mediators between child behavior problems and parental anxiety or depression. A sample population of 134 mothers were used in this study and it was found that increase in self-efficacy lead to decrease in anxiety and depression in parents. Also it indicated that parental stress mediated child behaviour problems as well as parental anxiety or depression. In addition to this a small positive correlation was found between maternal age and stress.

Kediye et al (2009) studied "Somali-Canadian Mothers' Experiences in Parenting a Child with Autism Spectrum Disorder". This study made use of open-ended questions to collect information. It noted that the experience of somalian-canadian mothers were similar to those from the mainstream culture. However it was observed that they higher had greater concerning the future of their ASD children due to the lack of extended family members. They had particular difficulty with the medical professionals as well as social situations and feared bringing out their ASD children in public.

Dąbrowska (2008) studied the sense of coherence and coping with stress in fathers of children with developmental disabilities. The coherence and coping with stress of 128 fathers of ASD children were studied and it was observed that there is no difference in global sense of coherence in fathers of ASD and normal children. However it was observed that fathers with low level of sense of coherence made use of avoidance oriented coping strategy, while those with high levels of sense of coherence used confrontation, positive reappraisal and planful problem solving

Nikmat, Ahmad, Oon, and Razali (2008) studied the prevalence of parental stress and psychological wellbeing among parents with autistic children and their associations with dimensions of support system. A total 52 parents with autistic child were considered for the study, and it was found that 90.4% of parents had significant parenting stress, and 53.8% of parents showed clinical disturbance in psychological wellbeing. In addition to this, gender and occupation showed statistically significant association with psychological wellbeing. However no association found between parental stress and psychological wellbeing with dimensions of support system among parents with autistic child.

Sabih and Sajid (2008) investigated the level of parenting stress and associating factors of stress in parents rearing children with autism. A sample of 60 parents that is 30 mothers and 30 fathers were considered for the course of the study. The study revealed that mothers experienced stress significantly more than fathers, in addition to this it was observed that there was a variation in the stress levels depending upon age and gender of child with autism. Parenting stress was higher when the child is of younger age also higher stress was observed when the child was female than when they were male.

Gupta and Singal (2005) published a study "Psychosocial Support for Families of Children with Autism in the Asia Pacific Disability Rehabilitation Journal. The study showed that parents of ASD children are at higher risk for depression, anxiety and stress. Although fathers and mothers are equally susceptible to this it was observed that mothers tend to express this, whereas fathers tended to suppress their emotional reactions. The study highlighted the importance of parent support services and development of coping strategies to ensure the well-being of caregivers, in addition the importance of developing of intra-agency cooperation and parent-professional collaboration. This study gave an Indian perspective to ASD.

Gupta and Singal (2004) wrote an article in Asia Pacific Disability Rehabilitation Journal on positive perceptions in parents of children with disabilities. Unlike most others in this field who focused on negative and adverse aspects of having an ASD child, they took a different approach and focused on developing positive perception in parents with regards to their ASD children. It was found that the attitude of parents was the primarily at fault for the negative attribution to ASD children. This was mainly due to the fact that parents are often burdened with guilt and shame in regards to the plight of their ASD children. It was found that coping strategies which made use of positive perception were effective in improving quality of life of the ASD children and their families.

CHAPTER III

METHODS

The method chapter describes the sample used for study, the inclusion criteria and exclusion criteria for the samples, details of different tools used and their pattern of scoring, procedure of data collection, consolidation of data, and the statistical method employed for analysis of data collected.

SAMPLE

The target population of this study were parents of two distinct categories, namely: parents of autistic children and parents of non-autistic children. The only inclusion criteria was presence and absence of autistic children. Data was collected from various autism centers and Christ College Autonomous, Irinjalakuda. The sample consisted of 80 parents. (40 autistic and 40 non-autistic, 52-female and 28- male)

INCLUSION CRITERIA

- Both male and female parents
- Parents within Kerala
- Parents of children with autism
- Parents of children without autism

EXCLUSION CRITERIA

- Single parent families
- Parents outside Kerala

VARIABLES UNDER STUDY

The self-efficacy and parental stress among parents of autistic and non-autistic children were the variables considered under the topic of the study.

THE TOOLS

Only self-report inventories were used in the course of the study. The tools used were

- 1) Personal data sheet
- 2) Parental stress scale
- 3) General self-efficacy scale

PERSONAL DATA SHEET

The personal data sheet was constructed by the researcher as a means to collect the sociodemographic data necessary for the study.

PARENTAL STRESS SCALE

The parental stress scale was developed by Barry and Jones in 1995 as an alternative to the 101 item parenting stress index. It is an 18 item self-report scale and the items represent positive aspects like emotional benefits, personal development etc and the negative aspects like demands on resources, restrictions etc. The respondents agree or disagree in terms of their typical relationship with their child or children. The parental stress scale is a 5 point scale varying from strongly disagree, disagree, undecided, agree, strongly agree. The scale is used to assess parental stress levels for parents and carers who have accessed targeted support such as family support, parenting courses, and one to one parenting support. The outcome of this stress scale is to provide services or areas of work focused on improving parents or carers parenting capacity. The scale is self-report inventory which is relatively short and easy to administer and can be completed in less than 10 minutes.

SCORING

In the parenting stress scale, the overall the possible scores on the scale range from 18 to 90. The higher the score the higher the measured level of parental stress. For scoring purposes each response is given a value i.e. 1=Strongly Disagree, 2=Disagree, 3= Undecided, 4=Agree, 5= Strongly Agree.

To compute the parents stress scale items 1, 2, 5, 6, 7, 8, 17 and 18 should be reverse scored as follows: (1=5) (2=4) (3=3) (4=2) (5=1). The item scores are then summed.

RELIABILITY AND VALIDITY

The Parental Stress Scale demonstrated satisfactory levels of internal reliability (.83), and test-retest reliability (.81). The scale demonstrated satisfactory convergent validity with various measures of stress, emotion, and role satisfaction, including perceived stress, work/family stress, loneliness, anxiety, guilt, marital satisfaction, marital commitment, job satisfaction, and social support

GENERAL SELF-EFFICACY SCALE

The General Self-Efficacy Scale is a 10-item psychometric scale that is designed to assess optimistic self-beliefs to cope with a variety of difficult demands in life. The scale was originally developed in German by Matthias Jerusalem and Ralf Schwarzer in 1981. In contrast to other scales that were designed to assess optimism, this one explicitly refers to personal agency, i.e., the belief that one's actions are responsible for successful outcomes.

SCORING

The general self-efficacy scale is a self scoring scale wherein the option of not at all true gives a score of 1, hardly true gives score of two, moderately true give score of three and exactly true score of four. The total score is calculated by finding the sum of all the items. For the General Self-efficacy Scale, the total score ranges between 10 and 40, with a higher score indicating more self-efficacy.

RELIABILITY AND VALIDITY

The General Self-efficacy Scale has an internal reliability of Cronbach's alphas between .76 and .90. For validity, it is correlated to emotion, optimism, work satisfaction positively and negative coefficients were found for depression, stress, health complaints, burnout and anxiety.

PROCEDURE FOR DATA COLLECTION

Parents of autistic and non-autistic children were provided with the personal data sheet, Parental Stress Scale and General Self-efficacy Scale, to fill out the same. Completed questionnaires were collected and statistically analysed to reach the conclusions of the study.

CONSOLIDATION OF DATA

After data collection, the data is scored systematically, in addition to this relevant data obtained from the subjects were consolidated in a coding sheet. These scores along with the socio-demographic variables were coded and entered into an Excel sheet for further statistical analysis.

STATISTICAL ANALYSIS

After consolidation, statistical analysis of the data was performed using ANOVA.

ANOVA

Analysis of variance is a statistical model developed by Ronald Fisher referring to one way analysis of variance which is used to determine whether there is any statistically significant difference between means of two or more independent groups.

CHAPTER IV

RESULT AND DISCUSSION

The aim of the study was to find the relationship between parental stress and self-efficacy in parents having children with and without autism. ANOVA was used to determine the relationship between the variables.

The obtained results and their interpretation are as follows:

Table 4.1: Correlation between variables parental stress and self-efficacy

	Parental Stress	Self-efficacy
Parental Stress	1	-.372**
Self-efficacy	-.372**	1

**Correlation is significant at the 0.01 level (2-tailed)

Table 4.1 indicates the product moment correlation between study variables. It depicted that parental stress and self-efficacy have a mild negative correlation with high significance ($r=-.372$, $p<.001$). Hence we reject the hypothesis that there is no significant relationship between parental stress and self-efficacy.

Parents having higher self-efficacy levels may feel more in control of their lives and that of their children, in addition to this they might feel a sense of confidence in their ability to deal with any situation that arises. Thus in such a state of mind they will feel less stress regarding their ability to cope with the demands of parenthood. In the alternate sense parents with lower self-efficacy levels may feel as if they have no control over neither their own lives or that of their children. This in turn may create an apprehension regarding their ability to fulfill their role as a parent and deal with the challenges of parenthood leading to higher levels of parental stress.

Table 4.2: Mean, SD, t-value, and level of significance obtained by parents with and without autistic children in parental stress

Variables	Sample	Mean	SD	t-value	significance
PARENTAL STRESS	Parents with autistic children 40	43.97	7.6	-5.021	.000
	Parents without autistic children 40	36.05	6.45		

Table 4.2 indicates the mean, standard deviation, t-value, and level of significance among parents with and without autistic children in parental stress.

In this variable, 43.97 and 36.05 are the mean scores obtained for the sample, parent with autistic children and parents without autistic children.

In the test p value is .000 and t-value is -5.021. Therefore the null hypothesis is rejected. This means that there is significant difference in parental stress among parents with and without autistic children.

On the basis of mean score obtained it can be observed that there is a difference in parental stress based on presence of autistic child. Parents with autistic children show higher score in parental stress than parents without autistic children. Higher score in parental stress scale indicates more severe degree of stress and its consequent symptoms.

Researches done indicate that higher level of stress is seen in parents with autistic children. This is primarily due to the fact that autistic children often have severe disabilities that impair their everyday. Thus they are heavily dependent on their caretakers for even everyday simple tasks, in addition to this parents are apprehensive about the life of their children in the future. The constant pressure and demands on them can often be taxing leading to them being extremely stressed.

Table 4.3: Mean, SD, t-value, and level of significance obtained by parents with and without autistic children in self-efficacy

Variables	Sample	Mean	SD	t-value	significance
Self-efficacy	Parents with autistic children 40	29.48	5.14	1.576	.000
	Parents without autistic children 40	31.32	5.34		

Table 4.3 indicates the mean, standard deviation, t-value, and level of significance among parents with and without autistic children in self-efficacy.

In this variable 29.48 and 31.32 are the mean scores obtained for the sample, parent with autistic children and parents without autistic children.

In the test p value is .000 and t-value is 1.576. Therefore the null hypothesis is rejected. This means that there is significant difference in self-efficacy among parents with and without autistic children.

On the basis of mean score obtained it can be observed that there is a difference in self-efficacy based on presence of autistic child. Parents with autistic children show lower score in self-efficacy than parents without autistic children. Lower score in general self-efficacy scale indicates lower degree of self-efficacy and perceived control over one's own life.

Researches done often show that parents with autistic children have lower levels of efficacy. The reason of this has many dimensions the most basic would be the fact that parents often do not expect that they might have an autistic child. This often leads to them being surprised and feel that life is beyond their control lessening the self-efficacy present in them. Dealing with autistic children is no easy task and the daily challenges faced when nurturing an autistic child may often chip away at the belief the parent has about their own ability to care for the child. In addition to this a life style change is often required to accommodate an autistic child which may disrupt the vision of the life that the parent had planned. Often individuals may feel that their life revolves around the child and that they have no independent life of their own. Thus an individual may start feeling as if they are no longer in control of their lives and lose their sense of efficacy.

From the results it can be seen that parental stress and self-efficacy have a negative correlation with high significance. It can also be observed that parental stress is higher for parents with autistic children whereas self-efficacy is lower for parents with autistic children.

CHAPTER V
SUMMARY AND CONCLUSION

Parents of autistic children are often under a constant state of stress due to the many demands upon them. Often they also have a very low sense of self-efficacy as they feel that their children’s condition is beyond their control. The combination of both often results in higher amount of parental stress and impaires the parent child relationship. The present study is aimed at finding the relationship between parental stress and self-efficacy in parents of autistic children as compared to parents of non-autistic children. The study was conducted on 80 parents, half of whom had autistic children and the other half having non-autistic children. The parental stress scale and General Self-efficacy Scale where the tools used in the study. The collected data was analysed using one way ANOVA to find the relationship between the variables.

TABLE 5.1 : TENABILITY OF HYPOTHESIS

HYPOTHESIS	TENABILITY
There is no significant difference in parental stress among parents of autistic and non-autistic children.	Rejected
There is no significant difference in self-efficacy among parents of autistic and non-autistic children.	Rejected
There is no significant relationship between self-efficacy and parental stress.	Rejected

MAJOR FINDINGS

- Parental stress is higher in parents of children with autism than without autism
- Self-efficacy is higher in parents of children without autism than with autism.
- Higher levels of parental stress is observed in parents lower levels of self-efficacy.

IMPLICATIONS OF STUDY

Parental mental health is significant not only to the parents as individuals themselves but also to children and their well-being. Heightened levels of parental stress can negatively effect parent child relationship and even lead to resentment to one’s own child especially in the case of differently abled children who require constant care throughout their entire life. Enhancing self-efficacy can in turn help parents to reduce stress and feel a sense of control over their lives. Thus an understanding of both these factors in oneself and other parents will enable creation of a

sense of solidarity and feeling that one is not alone and that it is alright to feel the way they do. In addition to this awareness of the same can help to reduce stress and enhance self-efficacy to enable development of better parent child relationship and the sustenance of the same.

LIMITATIONS OF STUDY

The study was conducted staying within the constraints of time and the situation of the covid-19 pandemic. The population considered for the study was taken from the state of Kerala alone and consisted only of 80 samples.

RECCOMENDATIONS FOR FURTHER STUDY

The study can be elaborated to consider various factors that influence parental stress and self-efficacy such as education level of parent, gender of parent, socioeconomic status, gender of child with autism, number of children with autism etc. Attempts can be made to administer and test different methods to reduce stress and enhance self-efficacy to get a better understanding of techniques that help parents of children with autism. In addition to this the study can be reworked with a larger and more random sample population to gain more significance.

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APPENDIX

DECLARATION

It is hereby declared that any personal details and other information collected for the purpose of this study will strictly be used for research purpose alone and that the confidentiality of the respondents will be maintained.

SOCIO DEMOGRAPHIC SHEET

Name:

Age:

Socioeconomic Status:

Do you have any children with autism? Yes/No

If yes, how many?

Number of Children with Autism

Gender of Child with Autism:

QUESTIONNAIRE

PART-A

The following statements describe feelings and perceptions about the experience of being a parent. Think of each of the items in terms of how your relationship with your child or children typically is. Please indicate the degree to which you agree or disagree with the following items by placing the appropriate number in the space provided.

1 = Strongly disagree 2 = Disagree 3 = Undecided 4 = Agree 5 = Strongly agree

1	I am happy in my role as a parent	
2	There is little or nothing I wouldn't do for my child(ren) if it was necessary.	
3	Caring for my child(ren) sometimes takes more time and energy than I have to give.	
4	I sometimes worry whether I am doing enough for my child(ren).	

5	I feel close to my child(ren).	
6	I enjoy spending time with my child(ren).	
7	My child(ren) is an important source of affection for me.	
8	. Having child(ren) gives me a more certain and optimistic view for the future.	
9	The major source of stress in my life is my child(ren).	
10	Having child(ren) leaves little time and flexibility in my life.	
11	Having child(ren) has been a financial burden.	
12	It is difficult to balance different responsibilities because of my child(ren).	
13	The behaviour of my child(ren) is often embarrassing or stressful to me.	

PART B

The following statements describe feelings and perceptions about your experiences. Please indicate the degree to which you agree or disagree with the following items by placing tick in the space provided.

	Not at all true	Hardly true	Moderately true	Exactly true
1. I can always manage to solve difficult problems if I try hard enough	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. If someone opposes me, I can find the means and ways to get what I want.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It is easy for me to stick to my aims and accomplish my goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I am confident that I could deal efficiently with unexpected events.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Thanks to my resourcefulness, I know how to handle unforeseen situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I can solve most problems if I invest the necessary effort.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I can remain calm when facing difficulties because I can rely on my coping abilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. When I am confronted with a problem, I can usually find several solutions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If I am in trouble, I can usually think of a solution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I can usually handle whatever comes my way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>