

## Adaptive Parenting: Coping Mechanism of Parents Having a Child with Autism Spectrum Disorder (ASD)

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### Abstract

Raising a child with Autism Spectrum Disorder (ASD) is challenging and exciting because of the different experiences they must face throughout the journey. This qualitative phenomenological research aims to explore a lived experience as well as the challenges and coping mechanisms of a mother who raises a child with ASD. This study acquires a parent's experiences through one-on-one interviews that lead to revealing the deepest agony of a woman raising a child with ASD. It includes challenges, coping mechanisms as well as learnings in different aspects of raising a child diagnosed with ASD. Thematic Analysis revealed core ideas reflecting the mother's sacrifices in accepting the reality of having a child with ASD. The challenges experienced by participants start from the denying stage to acceptance, which leads to seeking an occupational therapist, causing the participants emotional and financial difficulties; despite the mother's challenging experiences, it boils into more dedicated acts of selfishness to ensure the learner's needs. The findings of this study can contribute to the parents having a child with ASD how to accept the learner's difficulties and raise a child with a complete understanding of their diagnoses.

*Keywords: Autism Spectrum Disorder (ASD), Lived Experiences, Coping Mechanism*

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### 1. Introduction

Parenting is a demanding role that requires immense courage and understanding, particularly when providing for a family, and becomes even more challenging when raising a child with Autism Spectrum Disorder (ASD). The stress experienced by parents of children with ASD is well-documented, highlighting the unique challenges faced by these families (Nolcheva & Trajkovski, 2015). These challenges persist throughout the child's life, affecting various aspects such as personal, professional, marital, and financial dimensions (Folkman & Lazarus, 1985, as cited by Lai & Oei, 2014). Coping with these stressors is vital for parental well-being and family functioning (Hall, 2008). However, there is a notable gap in understanding the specific coping mechanisms employed by parents of children with ASD to manage these challenges effectively.

Moreover, despite the presence of support groups, many parents in the Philippines lack adequate knowledge about their child's ASD diagnosis, leading to heightened levels of stress and anxiety (Lasco, et al., 2022; Tekinarslan, 2018, as cited by Pascua & Dizon, 2022). A study conducted in Metro Manila by Durban et al. (2012) revealed the profound emotional impact on parents upon learning of their child's disability, further exacerbating stress and anxiety levels. Despite the implementation of coping mechanisms in previous years, the evolving societal landscape underscores the need to explore current and relevant strategies to support parents in effectively managing the unique challenges associated with raising a child with ASD. Thus, this study aims to address this gap by examining the coping mechanisms utilized by parents of children with ASD in the Philippines, contributing to a deeper understanding of how families adapt and cope with the demands of ASD parenting in the contemporary context.

### 1.1 Purpose of the Study

This research aims to identify the coping strategies utilized by parents raising children with autism spectrum disorder to offer assistance to those who are still in the process of adapting and comprehending their circumstances. The study also anticipates that its findings will provide insights and suggestions for coping mechanisms, benefiting other parents facing similar challenges.

### 1.2 Research Objectives

The main objective of this study is to understand the lived experiences of Parents having a Child with Autism Spectrum Disorder. Specifically, the study sought to answer the following specific questions.

1. What are the challenges faced by parents having a child with autism spectrum disorder?
2. How do parents overcome the challenges of having a child with autism spectrum disorder?
3. What insight can be learned from the experiences of having a child with autism spectrum disorder?

### 1.3 Related Literature

Being a parent gives genuine happiness and life satisfaction in having a child. It is a combination of pure joy for the parents to see their child grow while simultaneously facing challenges in raising them. Thus, parenting is the greatest calling on how to raise a child to become a responsible citizen and functional individual in our society. On the other hand, being a parent of a child with autism spectrum disorder (ASD) is an additional challenge to parents' responsibilities and capabilities, especially to the needs of their child and their coping mechanism as a parent. This section aims to conduct a literature review about the struggles of parents with ASD children and their coping mechanisms in raising them.

Centers for Disease Control and Prevention (CDC) reported that 1 in 36 children aged eight years is diagnosed with ASD (Maenner et al., 2023). Families of children with ASD were associated with increased maternal anxiety and higher depressive symptoms (Estes et al., 2019). Furthermore, Papadopoulos (2021) reported that emotional burden, family burden, and social burden are the three major themes concerning the maternal burden of raising a child with ASD. He also emphasized that emotional reactions to a child's diagnosis and negative reactions are the things that commonly occur following the child's autism diagnosis. Meanwhile, it is also a result of a mother's depression and feeling distressed upon knowing the child's diagnosis. If parents do not see any improvement in their child's condition, they start to feel ineffective as parents.

Other struggles and challenges commonly encountered in raising a child with ASD are also highly evident from the experiences of indigenous groups of families who have children diagnosed with ASD. According to Catubigan (2023), children from the Mansaka tribe diagnosed with ASD caused family crises and distress. Upon knowing the diagnosis of their child, common feelings were vulnerable just like other mothers do, such as being shocked and confused about the diagnosis, anxiety regarding their child's pain, fear of exclusion, and apprehensions about the future. Just like other mothers with ASD children, the socioeconomic status of the parent is still the major concern for sustaining the medication needs and treatment of their child (Acharya & Sharma, 2021). Community-related issues such as judgement, not being understood, and inability to participate fully in society due to uncontrolled behavior add to the parents' common challenge in raising their child (Rfat et al., 2023). Other challenges to the parents characterized by the condition of their child with ASD includes physical aggression, tantrums, screaming, crying, enuresis (Reddy et al., 2019).

Struggles of parents in raising a child with ASD, as reported by Bonis (2016), experienced higher levels of stress than another group of parents that have normal children. In addition, a lack of financial resources to avail therapies and all necessary treatment for their child is considered a challenge in parenting a child with autism (Chepngetich et al., 2022). The function of parents in their home is to provide the daily basic needs such as food, shelter, clothes, and other expenses for their child's education. That is why caring for a child with ASD should be financially equipped to support the medication and treatment of the child (Befkadu & Adamek, 2022). They also added that having a child with ASD creates a financial challenge and pressure on the parents. Because this leads to an imbalance between parents' daily income and their child's needs, it was also agreed by Sullivan and Stadtlander (2020) that finances were also badly affected as they raised their child with ASD.

Meanwhile, a wide range use of coping mechanisms is highly manifested in taking care of a child with ASD. Algorani (2023) defined coping as "thoughts and behaviors to manage internal and external stressful situations." It is a term that has been used in particular for conscious and voluntary mobilization of actions rather than defensive mechanisms, which are subconscious or unconscious adaptive responses designed to reduce or cope with stress. He also added that coping is generally categorized into four major categories to suppress stress: problem-focused, emotion-focused, meaning-focused, and social coping (support-seeking). Thus, according to Bailey (2022), coping mechanisms help people deal with stress and uncomfortable emotions; this is to help parents, especially, positively cope with stress.

On the other hand, a coping mechanism in raising a child with ASD, as explained by Samadi (2020), is a series of actions to address a stressful or unpleasant situation. Chin et al. (2023) stress that understanding coping strategies to help counteract the stresses associated with parenting a child with ASD may enhance the well-being of parents of children with ASD, expand the value of care provided to these children, and foster better parent-child relationships. As also seen in their study, acceptance, and adaptation of their child's condition are systematic ways to illuminate parenting stress. Yaacob et al. (2022) also agreed that accepting the child's condition is an essential part of the parent's life and well-being.

According to Selvakumar and Panicker (2020), religion is significantly used as a coping mechanism for parents with ASD children compared to other coping styles. Religious practice allows the parents to have peace of mind in taking care of their child diagnosed with a lifetime condition. Moreover, it enables them to think and work positively through their faith and helps them endure the caregiving situation. Faith in God is one of the best strategies for coping with their child's condition (Shelubane & Mezibuko, 2020).

## 1.4 Theoretical Lens

This study is anchored on the theory of stress and coping by Lazarus and Folkman (1984), which states that stress and coping is an effort to explain people's ways or methods of dealing with the problem that environmental and internal demands of a person—moreover, coping aims to examine and discover thoughts and actions that individuals use to respond to stressful issues or situations of their daily lives (Folkman & Lazaro, 1980). Thus, the person's ability to manage and face the problems in their life will make that individual feel on top or in control of things, eventually resulting in satisfaction and fulfillment in life.

In this study, stress is the problems encountered by the parent/parents or the guardian of the child having autism. Coping is the way of the parent/s or guardians in managing the stress or the problem of having a child with autism.

## 2. Methodology

This chapter presents the research procedure of the study; it includes research design, participants and sampling, ethical considerations, role of the researchers, data collection, and data analysis.

### 2.1 Research Design

This research uses the phenomenological approach, as specifically to the parents having a child with Autism Spectrum Disorder. At the heart of this approach are the subjects of the study or the co-researcher guided by the questions posed by the researcher in the recall and reflection of the phenomenon under investigation (Ramirez, 1967). The researcher used an interview guide to gather information and data from the respondents who were selected parents who had a child with an autism spectrum disorder.

## 2.2 Research Participants

The respondents of the research were the parents, guardians, and relatives of Learners with autism spectrum disorders of Ala Central School Esperanza District II. The researchers used the purposive sampling technique in which participants are chosen according to the purpose to which the learner is connected.

## 2.3 Data Analysis

The researchers carefully analyzed the respondent's answers and identified any commonalities in the form of debriefing. The researchers discussed what would be the themes based on the given answers to the questions. After agreeing on the shared themes, the team analyzed a Mechanism of Parents Having a Child with autism spectrum disorder, interpreted and gave meanings to the themes by connecting them to the theories that support the claims as a result of the study.

## 2.4 Ethical Consideration

Researchers of this study guarantee that the respondents' related history is confidential. The status and the name of the chosen participants remained anonymous. All the responses of the participants are highly confidential to others except to the researcher. Before the interview process, the consent of the participants was asked by the researcher if the participants are willing to be part of the research. As the participants gave their consent the researcher observed the obscurity of the participants for the assurance of their privacy.

## 2.5 Role of the Researcher

The researchers look for the participants who correlate the learner with autism spectrum disorder as the main respondents such as parents, teachers, relatives, siblings, and neighborhoods related to the learner. In this, the researcher will provide a questionnaire that is already validated by the experts and use it as a main tool of the research.

## 2.6 Data Collection

Conducting this type of study demands not only intellectual engagement but also a significant commitment to one's life. The research focused on participants selected from a school in Davao del Norte, with the initial step involving the identification of the phenomenon of interest. This process was executed through a meticulous task, wherein one learner diagnosed with autism spectrum disorder and five individuals closely associated with them—parents, teachers, siblings, and neighbors—were cited by the researcher.

Subsequently, the research entailed gathering descriptive accounts from respondents regarding their experiences or observations. This task was organized to designate specific individuals to pose the main questions and others to follow up with additional inquiries. Interviews were conducted in a personalized setting where participants felt comfortable and free from distractions, allowing children to openly share their experiences in response to interview questions. The recorded interviews were securely stored via email and a laptop drive to ensure data preservation throughout the study. Participant responses were transcribed verbatim to maintain validity and precision during data analysis.

In terms of data confidentiality and security, measures were rigorously implemented. All electronic data were permanently deleted by reformatting the external hard drive, while paper records were shredded three years after the study's conclusion. These actions were undertaken to safeguard the privacy and confidentiality of participants and their data. Thematic analysis was employed to analyze participants' responses, with additional consultation with experts to validate and ensure the accuracy of the analyses.

## 3. Findings and Discussion

This chapter presents the findings to explore and understand the lived experiences, coping mechanisms, and insights of Parents having a Child with Autism Spectrum Disorder. To answer this research question, in-depth interviews and focus group discussions were conducted. Emerging themes were generated from the responses of the participants. The following are the accounts of responses.

### 3.1 Challenges Faced by Parents Having a Child with Autism Spectrum Disorder

The first research question asked was about the challenges the participants faced having a child with an autism spectrum disorder. Three (3) major themes and core ideas emerged from the data collected. The participants' statements during the in-depth interview and focus group discussion support and justify these themes. The following are the accounts of responses: overcoming child development and accessing support services, parental resilience, and parental adaptation.

#### *Overcoming Child Development and Accessing Support Services*

The participants shared that their youngest child's developmental trajectory differed from that of their older children, prompting concern as the child faced challenges with speech and displayed other atypical behaviors. Seeking guidance from a healthcare professional, the child received a diagnosis of Global Developmental Delay (GDD). Despite encountering obstacles along the way, the mother demonstrated resilience by placing a high priority on occupational therapy as a means to foster her child's growth and development.

*P1: "During ano ah... pagkakuan niya, one year old, naa koy napansin sa iyaha kay since iyang mga kuya no normal man based sa akong experience nga I have noticed that since her older brothers are normal. But then, akong napansin sa akong youngest child lahi rajud siya, dili siya normal ba. Pati ang pag-say ng Mama mga simple words, dili na niya maistorya so, didto nako na alarma."*

*(When my child is still one year old, I can observe that she is different from her brothers. I can say that she is not normal compared to her brothers. She has difficulty saying the simple word "mother". And that's the time I felt alarmed)*

*P2: "Didto najud sa stage nga pagka one year, maka ingon lang ko nga i-consider lang sa nako kay basi delay lang siya kay isa paman katuig ang bata. Pag 2-years old na niya didto napud ko na-bother kay tingala man ko nga why is it until now dili man gihapon siya makaistorya, lahi rajud siya."*

*(When she's still one year old, I just told myself that maybe she's just having speech delay since she's still one year old. However, when she reached two years old, she still cannot talk and I was really bothered. I can say that she's really different from others.)*

*P3: "Kadto nga mga signs nga nakita nako pag 3-years old, gidala na dayon nako siya sa kanang kuan Developmental Pedia sa Tagum. Didto jud ko first nakapachek-up niya. So ang gikuan sa doctor kay nakita man niya na dili bungol akong anak, ang gi-kuan sa doctor first niya ingon GDD Global Developmental Delay lang ang bata. Karon and then para makuan lang nako akong anak nag undergo mi ug observation. During ato gitagaan ko ug kuan sa doctor nga mag occupational therapy na dapat ang bata, ahh... sa speech. Ang akong gi una jud kaning OT...occupational therapy."*

*(With my observations from her early years, I decided to immediately bring her to a Developmental Pediatrician in Tagum, City when she turned 3 years old. So the doctor told me that my child is not deaf but she diagnosed my child to have a GDD or Global Developmental Delay. The doctor told me to undergo observation with my child. Also, the doctor added that my child should have occupational therapy.)*

This can be implied by the idea of Maenner et al. (2023) reported a high prevalence of ASD diagnosis among children, leading to increased maternal anxiety and depressive symptoms. Papadopoulos (2021) highlighted emotional and family burdens experienced by mothers of children with ASD, with reactions including shock, confusion, and anxiety upon diagnosis. Chin et al. (2023) further stressed the importance of understanding coping strategies to counteract the stresses associated with parenting a child with ASD, indicating that prioritizing interventions like occupational therapy may enhance parent well-being and foster better parent-child relationships.



## Parental Resilience

Most of the participants upon learning about their child's diagnosis of Global Developmental Delay (GDD) and later Autism Spectrum Disorder (ASD). Initially experiencing a mixture of emotions, including relief tempered with sadness, the mother grapples with acceptance and questions about the circumstances surrounding her child's condition. The transition to an ASD diagnosis brings forth additional emotional and financial burdens, leading the mother to make difficult decisions such as leaving her job to focus on her child's therapy needs. Despite encountering numerous challenges, the mother demonstrates remarkable resilience and determination, remaining steadfastly committed to her child's development.

*P1: "At first, sad oy kanang murag dili jud kadawat. Makaingon ka, maka-question ka sa imong self nga why is it Lord nga imoha mang...kompleto man ko ug giampingan man nako ang pagbuntis nako. Wala man koy gi-inom nga makadaot sa pagbuntis nako sa bata."*

*(At first, I had a hard time accepting the situation. I even question God why is my child different? I even took really good care of her in my womb. I did not even drink anything that could harm her.)*

*P2: "Gi explain sa doctor sa akua ayaw lang kaayo ug ka-worry ma'am basin delay lang siya. So mao to, delay lang so wala lang kaayo ko na-worry. Pag adto nako kay Doc sa Davao Doc, happy nako kay during sa iyang OT abi nako na-okay na akong bata kay okay-okay na siya, makatalk-talk na siya ug ginagmay then, iyang gilinya-linya niya iyang toys. So ana ko wow very good kaayo akong anak kay straight kaayo ang paglinya same color pajud. Sus...kay pag-diagnose sa doctor very sad kaayo kay dili na siya GDD, kundili ASD na jud siya."*

*(The doctor explained to me that I should not worry much. So, when we had her Occupational Therapy, I was so happy because my child could talk a little, so I thought she was now ok. She even straightly lined her toys with the same colors until the doctor told me that my child is not GDD but ASD (Autism Spectrum Disorder).)*

This was supported by the idea of Papadopoulos (2021) who emphasized the emotional burden experienced by mothers, including shock, confusion, and anxiety upon diagnosis. Additionally, Bonis (2016) discusses the heightened stress levels and financial challenges faced by parents raising children with ASD, indicating the need for difficult decisions such as leaving employment to focus on therapy needs.

## Parental Adaptation

The participants shared the importance of recognizing and addressing the unique needs of their daughter with ASD. Unlike their other children, who can navigate daily activities independently, the daughter requires constant guidance and support, particularly in tasks like bathing. Despite the challenges posed by their daughter's condition, they initially plan to seek better support abroad but are forced to adapt their plans due to the pandemic's impact on her career. Despite this setback, they remain resilient and committed to their daughter's well-being, shifting their focus to getting their daughter back to school and continuing her occupational therapy.

*P1: "Akong nakita sa iyaha nga dapat every day ingon ani imong buhaton, mao pud na ilang buhaton pagka-ugma. Unya ang kalahian pud sa iyang mga kuya normal nga mga bata matudlo-an man gud nato sila. Makahimo sila ug sila ra unlike sa akong anak nga naay ASD."*

*(I can observe that she has a routinary action. What she did today, is what she will do tomorrow. The difference with that of her brothers is that, her brothers can independently do things and I can also teach them how to do it, unlike my child with ASD.)*

*P2: “Dili jud nimo pwede siya mapasagdan kay for example, sa normal nga pagligo niya, ahh...kailangan pa nimo siya alalayan. Until now maglisod pa siya ug ligo. Makaligo man siya pero dili jud ma-mao.”*

*(I cannot let my ASD child do things on her own. For example, in taking a bath, I need to assist her because she is having difficulty in taking a bath until now.)*

*P3: “Naa unta koy pangandoy na kato bitaw mo-abroad unta ko, siya ako reason nganong mo-abroad ko. Nag resign ko sa akong pagka-maestra before kay siya ang rason nga molarga kay okay gyud siya financially, kay ngano man gud, sa laing nasod, labi na sa Canada free baya didto so mabitbit nako siya. Libre na but then, wala man gihatag sa Ginoo sa akoo, naabtan na lang ko ug pandemic.”*

*(I have a dream of going abroad because of her. I resigned from my previous job as a teacher because I will go to Canada since everything is free there so I can bring her with me, however, God did not allow me to go, and the pandemic started.)*

This was supported by various authors. Catubigan (2023) discusses the emotional turmoil experienced by parents upon receiving their child's diagnosis, including shock, confusion, and anxiety about the future, highlighting the initial struggle for acceptance. Additionally, Bonis (2016) emphasizes the heightened stress levels and financial strains encountered by parents raising children with ASD, indicating the need for adaptive responses to manage the situation effectively. Moreover, Chin et al. (2023) stress the importance of understanding coping strategies to counteract the stresses associated with parenting a child with ASD, suggesting that acceptance and adaptation are crucial for illuminating parenting stress and fostering better parent-child relationships. These studies collectively support the claim that parents of children with ASD demonstrate resilience and determination in addressing their child's unique needs despite facing significant challenges and setbacks.

### *3.2 Coping Mechanisms of Having a Child with Autism Spectrum Disorder*

The second research question asked was how the participants overcame the challenges of having a child with an autism spectrum disorder. Two (2) major themes and core ideas emerged from the data collected. The participants' statements during the in-depth interview and focus group discussion support and justify these themes. The following are the accounts of responses: advocating for growth amidst challenges, and family support and inclusion.

#### *Advocating for Growth Amidst Challenges*

The participants shared the importance of continuing a child's occupational therapy alongside mainstream classes and seeking assistance from the Department of Social Welfare and Development (DSWD) for support. Despite challenges like limited slots in programs, participants prioritize life skills like gardening and emphasize limiting screen time to prevent phone addiction. Maintaining love and care, she balances discipline with understanding, even in frustrating situations like online shopping mishaps.

*P1: “Sa karon ang advice kay magpa OT, miskin naa siya sa mainstream class dili pajud na enough. Karon nakig coordinate ko sa DSWD para sa assistance. Gina enroll nako sya pero walay vacant slot sa pagkakaron.*

*(For now, the advice is to undergo occupational therapy because even if she is not in a mainstream class, that is still not enough. I coordinated with DSWD for assistance but until now, there is no vacant slot for her.)*

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*P2: “Sa balay gina tudloan nako sya mag-silhig sa ground, mag gardening. Pero gina striktohan jud nako siya sa pag-gamit ug cellphone para dili ma adik ug dili mahimong routine nila.*

*(At home, I taught her how to sweep the floor and do gardening. I also do not let her use her cellphone because she might get addicted to it and may become her routinary activity.)*

*P3: “Ang pag love ug care jud need jud na ipa feel sa ila. Usahay masuko ko sa iya labi na ug malimtan namo ba...like parehas atong nag order sya sa Shopee. Need jud siya disiplinahon sad labi na mo order siyag mga candies ug dulaan pero gina cancel namo.”*

*(We need to let them feel that they are loved and cared for. We need to discipline her. Sometimes, we scold her because of her wrongdoings. For example, ordering candies and toys in Shoppe (online shop), so when she does this, we just canceled the order.)*

This can be implied by the idea of Bonis (2016) who discusses the struggles experienced by parents raising children with ASD, highlighting the importance of prioritizing therapy despite financial constraints. Similarly, Algorani (2023) emphasizes the manifestation of coping mechanisms to manage stressful situations, suggesting that maintaining love and care while balancing discipline and understanding is essential for positive parental coping. Additionally, Chin et al. (2023) stress the importance of understanding coping strategies to counteract the stresses associated with parenting a child with ASD, which may enhance the well-being of parents and foster better parent-child relationships.

### *Family Support and Inclusion*

The participants shared their gratitude for the child's understanding brothers and supportive relatives, despite occasional difficulties in connecting due to age gaps. They appreciate the understanding and love shown by the child's teachers and classmates, who offer help and support in mainstream school settings. The family values acceptance and support, ensuring the child feels loved and included both at home and in school.

*P1: “Sa iyahang mga kuya, kasabot na sa iyaha. Maski tuod mga lalaki gud iyang mga kuya. Sometimes dili nila masabtan pero akong ginapasabot na, “nak si blessie dili parehas sa imoha, so imo jud nang sabton.” Ang mga relatives, kasabot man pud. Mao na, amoa, supportahan namo unsa iyang mga gusto, iyahang hilig. Basta love man among gina (show) sa iya, na wala jud namo siya gipasagdan.*

*(Her brothers understand her situation. I always talk to them, and I always let them understand the situation of their sister. Even our relatives understood her situation. Also, we are always supporting the things that she likes. We always see to it that we show our love and care for her.)*

*P2: “Sa school, diri sa iyang mga classmate, karon kay thankful kaayo ko sa mga teacher labi n animo ma'am Zel, love kaayo nimo akong anak, si ma'am Jing pinangga man niya. Though dili man jud nila ma cope up noh same sa normal kay mainstream man sila, so naa juy subject na hina siya. So karon pasalamat ko kang ma'am Jing, sa iyang mga teacher. Sa iya pong mga classmate, ginatabangan jud siya, Usahay gani maka-ingon ko'g “ayaw bitbita iyang bag (para makakat-on siya), pero pinangga man siya. Thankful sad kaayo ta sa Panabo Central kay ma-educate pud ang mga bata about sa mga LSEs na kauban nila.”*

*(I am thankful to her teachers because they loved and cared for my child. Also, to her classmates because they always help her in her academics and activities. I am also thankful to Panabo Central because the kids will be educated about the Learners with Special Educational Needs.)*

This can be denoted by the idea of Catubigan (2023) considers the challenges faced by families of children with ASD, including feelings of vulnerability and anxiety. Despite these challenges, families prioritize the well-being of their children, emphasizing the importance of acceptance and support. Additionally, Acharya & Sharma (2021) highlight the socioeconomic concerns of parents raising children with ASD, indicating that community-related issues such as judgment and exclusion further exacerbate the challenges faced by these families. Moreover, Selvakumar and Panicker (2020) discuss the significance of



religion as a coping mechanism for parents of children with ASD, suggesting that faith provides peace of mind and enables positive thinking in caregiving situations.

### 3.3 Insight of Having a Child with Autism Spectrum Disorder

The third and last research question asked was their insights about having a child with an autism spectrum disorder. Two (2) major themes and core ideas emerged from the data collected. The participants' statements during the in-depth interview and focus group discussion support and justify these themes. The following are the accounts of responses: advocating family support and prioritizing happiness.

#### *Advocating Family Support*

The participants highlighted the importance of gratitude for having normal children and recognizing the challenges of raising a child with autism. They urge to prioritize their children's needs over work and material pursuits, especially those with special needs who require extra attention.

*P1: “Kanang karon dapat jud ang mga mama thankful jud na sila sa ilang mga anak kay normal ilang mga anak. Mao jud na akoo jud, una jud nako ma sulti thankful jud kaayo ta sa Ginoo basta atong anak normal, dili lalim ang naay anak nga naay autism labi nag babae.”*

*(Parents should be thankful because they have a normal child. In my situation, I can say that it is difficult to have a child with autism especially that she is a girl.)*

*P2: “Ato jud tutokan atong anak labi nag naay special needs kay lahi jud sila, special jud sila. Kaingon jud ka special jud sila sa daghang butang..need jud sila ug attention. Nakita jud nako kay miskan gani atong normal na anak need gani ug attention, what more pa kaya ang mga special?”*

*(We should focus on giving our special children the things that they need like our attention. I can say that normal child needs their parents' attention, how much more do these children with special educational needs?)*

The claim regarding advocating for family support is supported by several authors. Firstly, Bonis (2016) reports that parents raising children with ASD experience higher levels of stress compared to parents of neurotypical children. This indicates the additional challenges that parents of children with ASD face, emphasizing the need for support and understanding from family members and society. Additionally, Sullivan and Stadtlander (2020) discuss the financial challenges associated with raising a child with ASD, highlighting the importance of prioritizing the child's needs over material pursuits. Furthermore, Algorani (2023) discusses coping mechanisms used by parents of children with ASD, suggesting that seeking social support is one of the strategies to manage stress.

#### *Prioritizing Happiness*

The participants noticed a significant improvement in the child's social skills and attitude towards school. Despite struggles with writing, the child enjoys attending school and eagerly anticipates class days. The participants are grateful for their child's happiness and progress in school, prioritizing her well-being and joy above all else.

*P1: “Karon nga na-expose siya sa school, tan-awa ragud the way siya mo respond sa principal makig minggle na siya, na develop na jud iyang social skills.”*

*(Now that she is exposed in the school environment, I can say that she developed her social skills the way that she responded to the principal and the way she mingled with other kids.)*

*P2: “Dako japon akong pasalamat na nagbalik jud siyag school. Karon makita man nimo jud siya na naay (improvement), though naa pajud siyay struggle jud sa iyang pag-skwela kanang sa writing, sa reading wala koy problema kay kabasa man siya, kaialangan lang jud siya totokan.”*

*(I am thankful that classes are back to normal. I can see that my child has improved a lot. She can read and write but with assistance.)*

*P3: “Happy man kaayo ko na naa siya ron diri sa school. Basta happy man siya na bata karon, basta makita nako happy siya. Happy kaayo siya sa iyang pagkswela.”*

*(I am happy to see my child going to school. If my child is happy, I am also happy.)*

To support the claim regarding the significant improvement in the child's social skills and attitude towards school, as well as the participants' gratitude for their child's happiness and progress, we can draw from several authors in the provided literature. Firstly, Maenner et al. (2023) from the Centers for Disease Control and Prevention (CDC) report on the prevalence of ASD, indicating the importance of understanding the challenges faced by children with ASD and their families. Estes et al. (2019) discuss the increased maternal anxiety and depressive symptoms associated with raising a child with ASD, underscoring the emotional burden experienced by parents.

Furthermore, Chin et al. (2023) emphasize the importance of understanding coping strategies to enhance the well-being of parents of children with ASD, which can contribute to fostering better parent-child relationships. This suggests that when parents can cope effectively, it positively impacts their child's social skills and overall attitude towards school. Additionally, Selvakumar and Panicker (2020) discuss religion as a significant coping mechanism for parents with ASD children. The peace of mind and positive outlook gained through religious practice can contribute to a more supportive environment for the child's education and social development.

## Conclusion

This investigation showed that despite facing emotional and financial burdens, parents demonstrate unwavering dedication, prioritizing their child's therapy needs and advocating for their growth amidst challenges. Family support and inclusion play a pivotal role in providing a nurturing environment, with parents expressing gratitude for understanding siblings, supportive relatives, and empathetic educators. Insights gleaned underscore the importance of prioritizing family support and prioritizing happiness, emphasizing the need to cherish joys and celebrate the progress experienced by children with ASD.

## Recommendation

The implications of this study offer practical insights for stakeholders involved in supporting families with children diagnosed with Autism Spectrum Disorder (ASD). Healthcare professionals can utilize the findings to tailor interventions and support services to address the challenges faced by families, such as providing specialized therapy options and resources for coping mechanisms identified in the study. Policymakers can use these results to advocate for increased funding for ASD-related research and support programs, as well as policies that facilitate access to necessary services. Educators can implement strategies in schools to support the unique needs of students with ASD, based on the coping mechanisms and insights identified by parents. Community organizations can develop targeted programs and services that align with the identified needs and preferences of families raising children with ASD.

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