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AUTISM SPECTRUM DISORDER AND ITS EFFECTS ON PARENT RELATIONSHIPS

A Project

Presented to the

Faculty of

California State University,

San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by

Christopher Armando Berrun

Arturo Alegre

May 2025

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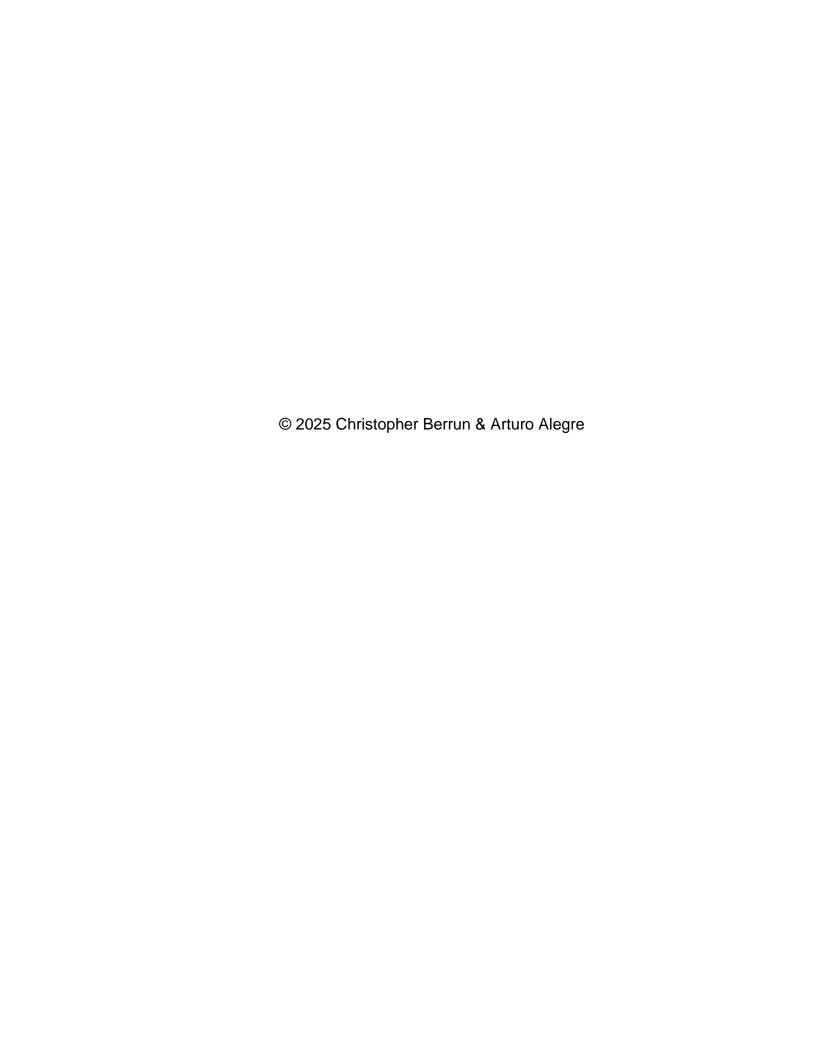
Arturo Alegre

May 2025

Approved by:

Carolyn McAllister, Faculty Supervisor, Social Work

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ABSTRACT

This proposed study aims to explore the impact of Autism Spectrum

Disorder (ASD) on parental relationships. ASD is defined as a neurological
developmental disorder that significantly affects individuals' social
communication, behavior, and interests. The study will focus on the Parents of
children with (ASD) and the heightened stress due to financial strain, increased
caregiving responsibilities, and disagreements over parenting strategies. This
can lead to lower marital satisfaction and overall relationship strain, as parents
struggle to balance their personal relationship with the challenges of raising a
child with complex needs.

Without proper support and resources, these issues may worsen over time, potentially resulting in emotional burnout, decreased couple intimacy, and long-term damage to the stability of the family unit. The proposed study will use a qualitative research approach, gathering firsthand accounts from 17 to 40 parents of children with ASD. This approach will provide deep insights into the personal experiences and challenges these parents face in their relationships. Ethical guidelines will be strictly followed throughout the research. Informed consent will be obtained from all participants, and measures will be implemented to ensure confidentiality and data security. The primary goal of this study is to better understand the unique challenges faced by parents of children with ASD. By shedding light on these difficulties, the research seeks to emphasize the need

for tailored support and resources to improve the well-being of parental relationships.

ACKNOWLEDGEMENTS

I would like to express my heartfelt gratitude to my parents, Arturo and Charlene, for their unwavering love and dedication to our family. Thank you especially to my father, who came from Mexico and worked tirelessly to give us the best life possible. I also want to extend my appreciation to The Heart Matters Foster Family Agency and the incredible youth who have crossed my path—you have all inspired me in countless ways. Lastly, thank you to Lia Andrews for being the best supervisor, role model, leader and guiding me through this journey with constant support and encouragement. — Christopher Berrun

I am deeply grateful to my parents, who emigrated from Mexico to the United States with minimal education but immense hope and determination, laying the foundation for my journey and aspirations. My father's tremendous work ethic and my mother's never-ending support—even when I have not been the best son—have been pivotal in my achievements. My heartfelt appreciation also extends to my partner, Evelyn, and our daughter, Emery, whose unique perspective as an autistic individual has profoundly shaped this research proposal. Navigating the challenges of having an autistic child, our family faces obstacles with resilience and a steadfast commitment to never giving up on Emery. Additionally, I am profoundly thankful for my friends, work colleagues, and mentors whose guidance and encouragement have been crucial throughout my life and career. To my children, Jacob, Santiago, and Emery, your belief in me is my greatest motivation, driving me to overcome barriers I never thought

possible. Thank you all for your steadfast support and encouragement throughout this journey. — Arturo Alegre

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CHAPTER ONE

PROBLEM FORMULATION

Description Of The Problem

Autism Spectrum Disorder (ASD) is a neurological problem with various symptoms and challenges. Some signs and challenges relate to social communication, repetitive behaviors, and limited interests (American Psychiatric Association, 2013). A prevalence of 1 in 44 children in the United States (U.S.) were diagnosed with ASD in 2020 (CDC, 2020). Two years later, statistics indicated a rise in ASD, as 1 in 36 children were diagnosed with ASD in the U.S. in 2023 (CDC, 2023).

Raising a child with ASD can have a significant unfavorable strain on parent relationships. These complications include financial tension, adverse effects on siblings, increased tasks between parents, disputes regarding parenting approach, and increased caregiver stress (Brobst et al., 2008). According to research by (Gau et al., 2012), parents of children with ASD are at risk for maladaptive couple outcomes, including lower marital satisfaction. Studies by (Brobst et al., 2008) were also able to specify that parents of children with ASD are at high risk for less fulfilling, pleasing, and shorter-lived couple relationships due to the complications of raising a child with ASD. Overall, we see parents of children with ASD report a lower couple satisfaction rate as they struggle to address and care for a child with ASD.

Hartley et al. (2017) claimed parents whose child has been diagnosed with ASD report a high level of parenting stress. Multiple factors contribute to this, such as the physical and emotional demands of caring for a child with ASD. Some challenges include caregiving, managing maladaptive behaviors, and getting the child the therapeutic support needed (Hartley et al., 2017).

This paper will explore the difficulties that families with ASD experience and the importance of recognizing the strain and identifying ways we can better support the family and strengthen their relationship by maneuvering around the intricate problems of raising a child with ASD. We must bring awareness to this issue to better help parents obtain the appropriate support and resources they need to strengthen their relationship and adapt to the challenges that raising a child with ASD imposes.

Policy and Practice Consequences

The policies surrounding families with a family member diagnosed with Autism Spectrum Disorder (ASD) have undergone significant changes over the years, with some notable implications for individuals with ASD, caregivers, and professionals who support them. A shift towards inclusive education has been a central focus of recent policies. Some policies emphasize the importance of accommodating the diverse needs of students with ASD within general education classrooms (Turnbull et al., 2019). This shift towards inclusivity aligns with the broader trend of recognizing the rights of individuals with disabilities to access education in the least restrictive environment possible (Turnbull et al., 2019).

However, implementing inclusive policies on a macro level raises challenges related to resource allocation, training for educators (micro level), and the need for ongoing support systems (National Autism Center, 2020).

The consequences of these ASD policies are evident in the evolving approaches to intervention and support for families who have an individual with ASD. The emphasis on early identification and intervention has gained both attention and importance. Research highlights the significance of timely and targeted interventions to enhance positive outcomes for individuals with ASD (Dawson et al., 2010). Applied Behavior Analysis (ABA) has been a widely endorsed micro intervention that focuses on modifying behavior to improve social and communication skills. However, the increased emphasis on individualized and holistic approaches recognizes the array within the ASD population, encouraging a shift away from one-size-fits-all interventions (Rutter, 2011).

As policy and practice overlap in ASD, there is a growing acknowledgment of the need for ongoing research to inform evidence-based policies and practices. Policymakers and practitioners must collaborate at a macro level to ensure that interventions are based on the latest research findings and responsive to the evolving needs of individuals with ASD, as well as their families. Additionally, a focus on community engagement and the involvement of individuals with ASD and their families in decision-making processes is essential to create policies and practices that are authentically person-centered (Autism Speaks, 2021). The dynamic interplay between policy development and

implementation remains critical in shaping the landscape for individuals with ASD, influencing their access to education, services, and overall quality of life.

These family policies who have a family member with ASD extend into adulthood, offering support for vocational training, employment, and housing (Miller, 2022). Community programs promote understanding and care services with the aim at providing relief for caregivers (White & Wilson, 2020). Financial assistance, parental training, and continuous advocacy address evolving needs (Smith, 2021 & Jones, 2018). Local and national autism organizations play a crucial role in spreading awareness in region-specific information (National Autism Association, 2023).

CHAPTER TWO

LITERATURE REVIEW

Introduction

Autism Spectrum Disorder (ASD) is a neurological developmental disorder that affects individuals in areas of social communication and interaction.

Individuals with ASD also have limited functioning and repetitive patterns of behavior, interests, or activities (American Psychiatric Association, 2013). ASD includes symptoms and levels, thus leading to the term "spectrum."

Understanding the complexities of ASD is crucial for effective diagnosis, intervention, and support for individuals affected by the disorder and their families. This literature review aims to provide an overview of current research on various aspects of ASD and its effects on parental relationships. This literature review will explore the emotional strain, marital satisfaction, and outcomes it plays on the parents providing for those with ASD.

Emotional Impact

According to the study by (Hickey et al., 2019) the research states that parents of children with ASD reported higher levels of stress and depressive symptoms which overall reflects a decline of parent-child relationships. This study utilizes family systems perspective to examine how these factors are associated within families over a period of 12 months. The study found that mothers of children with ASD reported higher levels of parental stress which correlated with

higher levels of depressive symptoms compared to fathers. Additionally, the study highlighted the psychological well-being of mothers resulted in a stronger impact on the parent-child relationship compared to fathers.

An interesting observation that the research highlighted was that mothers' own levels of parenting stress, and depressive symptoms projected their warmth and criticism towards their child with ASD after 12 months (Hickey et al., 2019.) The study suggests that the fathers' levels of parenting stress only predicted their criticism, not warmth, toward their child with ASD after the same period. This study also describes that the mothers' psychological well-being has a more direct influence on the parent-child relationship compared to fathers. The study furthermore found that fathers' warmth towards their child with ASD decreased if mothers reported high initial levels of parenting stress.

Ultimately, the research reinforced the importance of active interventions to reduce parenting stress and depressive symptoms of those with children with ASD. The study emphasized the importance of mindfulness stress reduction and Cognitive Behavioral therapy (CBT) to better support those providing for those with ASD (Hickey et al., 2019.) The study also explored the effectiveness of family support and interventions to improve the overall well-being of parental and parent- child relationships. In the end, the research showed the complexities of those who provide for children with ASD and how it affects the parent, family and child relationship in every aspect and the need for support and interventions to better support these families.

Marital Satisfaction Due to ASD

Marital Satisfaction for parents raising a child with ASD has shown to suggest that raising a child with ASD can have significant strain on a parent's relationships and make the relationship difficult to navigate thus reducing the happiness within the relationships.

According to (Hartley et al., 2017) research has proven that the parents of children with ASD have a higher level of stress and lower level of marital satisfaction when compared to parent of those with normally developed children. This results in the strain and tension in co-parenting, finances, and basic challenges with getting their child's needs met. (Hartley et al., 2017) emphasizes how the impact of the behavior of the child can play a huge role in the relationship, as children with ASD can have present with more severe maladaptive behaviors. According to research (Hartley et al., 2017) we see that ASD children with more prevalent disruptive, communication challenges and sleep disturbances correlate with an increased stress and marital unhappiness.

The study (Hartley et al., 2017) further suggests that gender plays a significant role in the levels of stress when raising a child with ASD can greatly influence marital satisfaction. (Hartley et al., 2017) found that gender differences explore different coping skills and strategies when caretaking for a child with ASD and the importance of understanding both genders and their coping abilities to better support a targeted approach to increase martial satisfaction.

(Karst & Van Hecke, 2012) found that the implementation of successful and productive coping strategies can further minimalize the obstructive impact of raising a child with ASD. (Karst & Van Hecke, 2012) research established that those couples who implement problem solving skills, communication skills and maintain a positive point of view when dealing with a child report higher level of marital satisfaction.

Parent Child Interaction

ASD plays a significant impact on parent-child interactions due to the lack of communication skills, behavioral challenges, and lack of social cues that children with ASD present. According to (Koegel et al., 2012) children with ASD have a difficult time asking for their needs and at times utilize maladaptive behaviors (kicking, screaming, hitting self or others) to get the attention of their parents. Individuals with ASD who engage in these maladaptive behaviors cause friction between the parent-child interaction and debate between parents about how to properly address these maladaptive behaviors. The findings by (Koegel et al., 2012) advise parents to gear themselves towards adapting their communication style to better communicate with their child and thus resulting in a reduction in the strain it takes to raise a child with ASD and maintain the best possible relationship with their partner.

According to (Kasari & Smith, 2013) parents may need to be proactive in creating opportunities for social interaction and teaching skills to their child with ASD to better promote healthy parent-child relationships. Social interactions are

critical components in children with ASD and affect how they will engage with the people around them. Taking all these factors into consideration has shown to take a mental toll on parents as they now must incorporate structured activities and peer mediated interventions, leaving little time to spend quality time with each other.

Parent- child interactions in families with children affected by Autism Spectrum Disorder can be greatly influences by behavioral, communication and social challenges which have an underlying affect on the dynamic of the relationship. Research highlights the impact of implementing communication styles, social engagement and promoting positive behavior to enrich the interactions between parent and child. Ultimately, providing a positive support strategy for each family can better foster a healthy and positive relationship between parent and child.

Support Services

Accessible access to support services and resources is crucial for parents who have a child diagnosed with ASD. These support services and resources can help parents successfully navigate the challenges associated with having a child who has this disorder and improve outcomes. Research shows that intervention programs, such as early intensive behavioral intervention (EIBI) and developmental preschool programs are effective at reducing maladaptive behaviors in individuals with ASD. Additionally, educating parents on how to implement effective interventions at home to support optimal development of the

individual and family (Dawson et al., 2010). School-based services, including special education programs, individualized education plans (IEPs), and classroom accommodations, have been implemented and are essential for addressing the educational needs of students with ASD and promoting academic success and social inclusion (Koegel et al., 2009). Access to community-based services, such as social skills groups, recreational programs, and vocational training, offer opportunities for individuals with ASD to develop social connections, improve social functioning at home and engage in meaningful activities, and transition to adulthood successfully (Howlin et al., 2013).

According to (Dawson et al., 2010), research stipulates that early intervention can lead to improved long-term that includes language and communication skills and better social skills. It helps them set the goal of increased independence and less monitoring as they develop into adulthood thus reducing the overall stress and workload of the primary caregiver. Overall, there is a significant impact of ASD services, and they can contribute to improvements in areas of the family, parents and improve their quality of life.

Interventions and Treatments

Evidence-based interventions and treatments to help support parents include a wide range of approaches—these approaches include behavioral interventions, speech-language therapy, occupational therapy, and pharmacological treatments. These interventions and treatments are critical in helping the family and parents navigate the complexities around ABA. Applied

Behavior Analysis (ABA) is one of the most widely researched and utilized behavioral interventions for ASD, focusing on teaching adaptive behaviors and reducing maladaptive behaviors through systematic reinforcement and prompting strategies (Smith et al., 2007). Speech-language therapy targets improving communication skills, including language development, practical coping skills, and social communication, through structured interventions tailored to the individual's needs (Paul et al., 2014). Occupational therapy goes hand in hand with ABA to address sensory processing differences and develop fundamental functional skills related to daily activities, sensory regulation, and social participation (Case-Smith & Arbesman, 2008).

Research by (Brookman-Frazee et al., 2017) found that parents generally find ABA therapy positively and recognize its benefits for their child's development, but they also found stressors and challenges related to the intensity and scheduling of therapy sessions, as well as the financial costs included. According to Altiere and von Kluge (2009) found that the parents of children with ASD experience increased stress levels due to the time management of coordinating and attending various therapies, managing behavioral challenges, and coping with the emotional impact of raising a child with special needs. In conclusion, while there is a significant amount of availability of services with children with ASD that benefits parents, there are also stressors and challenges that come with services.

Conclusion

In conclusion, this literature review highlights ASD and its array of complex challenges that significantly impact parental relationships and parent-child interaction. Due to the various interventions that parents must apply on a day-to-day basis, research highlights the increased stress, communication difficulties, and altered stress because of providing an individual with ASD the best quality of life possible. Even with interventions, developmental programs, and evidence-based practices offering possible improvement for individuals with ASD, this is not a fix all end all approach. Moving forward, further research could fill in the gap and explore effective interventions and ways to better improve parental wellbeing and strengthen parental relationships.

CHAPTER THREE

METHODS

Introduction

This chapter serves as a framework utilized in our research. It explores the process involved with participant recruitment, engagement, interviews, obtaining informed consent, and data analysis. The chapter will introduce the researcher qualifications, institutional guidelines, ethical procedures, and measures to ensure participant protection. Ultimately, it discusses the research design, sampling method and our data collection process. Finally, the chapter describes the data analysis techniques that will be employed in the study.

Study Design

The following exploratory study aims to contribute new and refreshing insights into the effects of Autism Spectrum Disorder (ASD) on parental relationships. It utilizes qualitative research to provide the researchers with a lived firsthand experience of the parents. Qualitative research will be used as it allows us researchers to gain better insight and understanding of the participant's relationships, perspectives, and experiences. Unlike quantitative research methods, we will be utilizing qualitative research to uncover an exploration of parenting dynamics rather than statistical information. Ultimately, this approach allows us to uncover insightful and specific insights into the dynamics of parent relationships affected by ASD.

Qualitative research offers insight on the exploration of the effects of ASD on parental relationships. One of qualitative research's primary strengths is the understanding it provides for us all; by engaging directly with participants through interviews and observations, we can capture the complex, emotional, and firsthand accounts that effect parental experiences. This method will allow for the collection of detailed data that can provide us with patterns, themes, and insights that cannot be captured through quantitative methods. However, qualitative research also has limitations. Its findings are often not generalizable or structured due to the smaller, non-random samples typically used. Overall, the data can also be subject to researcher bias, as the summary of qualitative data can be subjective. Despite these limitations, the in-depth and personal nature of qualitative research makes it a valuable and supportive approach for understanding the dynamics of parental relationships in families affected by ASD

Sampling

In conducting this qualitative research on the effects of ASD on parent relationships, we will use specific sampling methods. As we select participants, we will utilize purposive sampling with a snowball sampling approach. The study will include participants aged 18 or above and identified as parents of ASD. All participants will have experiences with challenges around ASD within their relationship. We will obtain at least 17 participants. Out of the 25–40 individuals we plan to approach, we will look to get a minimum of 17 who will agree to participate and will complete the informed consent forms. The final sample size of

this study will conclude with approximately 17-40 participants from various ethnic demographics and locations.

Data Collection and Instruments

The data-gathering process for this research will involve two researchers conducting semi-structured interviews with two parents in person. The interviews will be comprised of 25 questions. These questions will aim to explore the participants' experiences with ASD and its impact on their overall relationship dynamics. Audio recordings of the interviews will be conducted and written, and verbal consent will be obtained from the participants. To ensure confidentiality, each participant will be assigned an identification number during the recording.

Participants will be given a chance to decline to answering any questions or terminate the interview prematurely. Responses provided during the interviews will serve as a primary data source, an analysis and reporting will be carried out by both us researchers. The final research report will include a copy of the interview guide as an appendix,

To recruit participants, we as researchers will circulate an invitation providing details of the study's purpose and contact info for a response, The flyer will be shared electronically on various social media sites such as Facebook, Instagram, TikTok, and X and will be designed to be easily shared across other platforms. It will also be emailed to the San Bernardino County and Riverside County Regional Centers. Copies of the recruitment flyer will be included in the final research report as an appendix.

Procedures

Before each interview, all participants will sign and provide consent forms which will also have an option to deny the use of recording devices during the interviews. Upon scheduling, participants will receive a phone call from the researchers with the location and time of the interview. Researchers will review the demographic information to be collected during the interview. Data instruments will include paper, pens, a laptop, handwritten notes, audio recording and electronic notes. After each interview, information will be stored in one of the researchers locked home containers and on a on an anti-virus, firewall-protected, and password-protected electronic device.

Research Ethics and Protection of Human Rights

This research will be conducted following severe ethics and guidelines to protect human rights. The researchers completed the Social Behavioral Research Investigators and Key Personnel course offered by the Collaborative Institutional Training Initiative (CITI) Program at California State University, San Bernardino (CSUSB), in February 2024, valid until February 2029. Approval from the CSUSB Institutional Review Board (IRB) will be obtained approximately around October 15th, 2024, before collecting any sample data.

Prior to data collection, all participants will complete informed consent forms, which explain the details about the study's purpose, risks, and benefits.

These forms also reinforce confidentiality, stating that no identifying information would be shared, only demographic data would be used, and participants would

have access to the information provided. The data storage process will also be explained in the consent document, with all collected data being securely stored in one sole researcher's home office. Handwritten notes will also be stored in a secured locked container, while all electronic files will be stored on one computer and password protected with antivirus and firewall protection. Any physical documents, or other materials containing identifiable information will be securely disposed of two years after the study's final publication. An appendix of the final research report also provides a copy of the informed consent template report.

Data Analysis

The data collected for the study on the effects of Autism Spectrum

Disorder (ASD) on parental relationships will involve an in-depth analysis of
qualitative data collected through semi-structured interviews with parents of
individuals with ASD. Qualitative research analysis will be utilized to identify
patterns, themes, and insights developing from the participants' narratives
regarding the impact of ASD on their parental relationships. Important themes will
be acknowledged and explained through constant data comparison. The study
will offer various perspectives on the complexity of the parent-child relationships
affected by ASD, highlighting parents' struggles and resilience in navigating these
circumstances. Furthermore, the difference in experiences among participants
will highlight the complex nature of ASD, emphasizing the urgent need for tailored
interventions and support strategies to address the unique needs of parents as
their parental relationships are affected by ASD.

Summary

This study overall will investigate the effects of Autism Spectrum Disorder (ASD) on parental relationships. It will start by noting the strict ethical procedures, which includes research training and Institutional Review Board (IRB) approval, to protect participant confidentiality and well-being throughout the study. For the study, a qualitative approach utilizing purposive and snowball sampling techniques will be used to recruit participants who are parents affected by ASD. Data collection involves semi-structured interviews conducted with careful consideration for participant confidentiality. The analysis will include demographic

reporting and various statistical tests mentioned in the data analysis to explain the relationship between ASD and parental relationship dynamics. This research study will highlight the necessity for resources and support for parents navigating these challenges.

APPENDIX A INFORMED CONSENT

INFORMED CONSENT

The study in which you are asked to participate is designed to examine effects of Autism Spectrum Disorder on parent relationships within San Bernardino County. The study is being conducted by Christopher Berrun and Arturo Alegre, graduate students, under the supervision of Carrolyn McAllister, Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board at CSUSB.

PURPOSE: The purpose of the study is to examine the effects of Autism Spectrum Disorder on Parent Relationships

DESCRIPTION: Participants will be interviewed and asked of a few questions on the status of their relationship by both primary researchers, how time Is managed with a child of ASD, ways duties are distributed and how self-care in implemented, and some demographics.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY/ANONYMITY: Your responses will remain confidential, and data will be reported in group form only. Your responses will remain confidential and any personally identifiable information will be anonymized. Individual responses will be revised to protect personally identifiable information.

DURATION: It will take 20-45 minutes to complete the interview.

RISKS: Although not anticipated, there may be some discomfort in answering some of the questions. You are not required to answer and can skip the question or end your participation.

BENEFITS: There will not be any direct benefits to the participants. This may assist in studies and understanding the effects of Autism Spectrum Disorder on parent relationships.

CONTACT: If you have any questions about this study, please feel free to contact Dr. McAllister at Cmcallis@csusb.edu

RESULTS: Results of the study can be obtained to	from the Pfau Lib	rary Sc	holarWorks database
(http://scholarworks.lib.csusb.edu/) at California S	tate University, S	an Ber	nardino after July 2025.
*********************************	*****************	*****	************
I agree to have this interview be audio recorded:	YES	_ NO	(required it you are recording interview for qualitative or mixe method study; DO NOT INCLUDE THIS HIGHLIGHTED PORTION IN YOUR FINAL INFORMED CONSENT)
	28		The state of the s

APPENDIX B AUTISM SPECTRUM DISORDER DEMOGRAPHICS SURVEY

Participant Information:
Name (optional):
Age:
Gender:
Ethnicity:
Relationship Status:
Number of children with ASD:
Age(s) of child(ren) with ASD:
How long ago was your child diagnosed with ASD?

Emotional Strain and Challenges:

- 1. Can you describe the emotional challenges you face as a parent of a child with ASD?
- 2. In what ways do you feel overwhelmed by the demands of parenting your child?
- 3. What are your main concerns regarding your child's future, and how do they affect you?
- 4. How do you experience feelings of isolation in your parenting journey?
- 5. Can you share how your friends and family support you in meeting your child's needs?

Marital Satisfaction:

- 6. How has parenting a child with ASD affected your relationship with your partner?
- 7. How do you and your partner communicate about your child's needs?
- 8. Can you describe any disagreements you and your partner have had regarding support

for your child?

- 9. How do you feel you and your partner work as a team in parenting?
- 10. What does quality time with your partner look like, and how satisfied are you with it?

Parent-Child Interactions:

- 11. How would you describe your bond with your child despite the challenges of ASD?
- 12. What kinds of activities do you enjoy engaging in with your child?
- 13. Can you share your experiences of frustration when trying to communicate with your

child?

- 14. How do you celebrate your child's achievements, no matter how small?
- 15. In what ways do you feel your child understands your emotions?

Support Systems:

- 16. What has been your experience with the support services available for managing your child's ASD?
- 17. How do you find the information and resources available to you about ASD?
- 18. What are your thoughts on the availability of resources for families with children on the autism spectrum?
- 19. Can you describe how community programs have been beneficial for your family?
- 20. How comfortable do you feel discussing your child's needs with professionals, and why?

Coping and Resilience:

21. What coping strategies have you developed to deal with the challenges of parenting a child with ASD?

- 22. How do you seek support from other parents of children with ASD, and what does that look like?
- 23. Can you share your hope regarding your family's future despite the challenges you face?
- 24. What potential do you see in your child for achieving their goals?
- 25. How has participating in research about ASD impacted your experience as a parent?

Developed by Christopher Berrun & Arturo Alegre

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ASSIGNED RESPONSIBILITIES

We hereby affirm that we have collaborated equally on every section of this project. Our combined efforts and expertise have played a crucial role in shaping the content, reflecting our shared commitment to this project.