COPING MECHANISM OF WOMEN AS SOLO PARENTS OF CHILDREN WITH AUTISM*

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Abstract

This study describes the coping experience of single parents of children with autism in relation to family, belief, and social factors.

Sixteen single women parents of children with autism from Manila and Laguna participated in the research. The main research instruments utilized included a questionnaire, interview schedule, and observation log. Quantitative and qualitative data were analyzed and integrated into a final report.

Introduction

Single parenthood is a role a growing number of women today are assuming—widows, unmarried women, separated/divorced women, and women whose spouses are overseas for extended periods. For some, motherhood is considerably more difficult because of the presence of a "special" child in their families.

The paper explores the reality of women solo parenting children with autism (CWA). The data used is taken from a research study I conducted in 1999 on the "Coping of Single

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Parents of Children with Autism in Relation to Family, Belief and Social Factors." Sixteen women from Manila and Laguna were involved in the study as informants. It is their voices which I will attempt to be heard, plus my own. After all, I, too, qualify as informant for the study: I am a single parent of a 10-year old boy with autism. I had gone through the entire gamut of emotions parents experience upon knowing that their child is "different"—shock, disbelief, denial, guilt, grief, anger, resignation and finally acceptance. With the acceptance of my role as an "advocate" for my son, I began to go on with my life. I sought appropriate intervention services. I read as much as I could about autism. I rallied my family behind me. I made friends with other parents of CWA. I joined a support group. I kept working in order to afford my son's services. And most importantly, I went back to school to pursue a degree in Special Education (SPED). Having done all these, I am now involved in various projects to improve the lives of individuals with autism and their fami-

All these experiences and my own son's brave struggle with autism have inspired me to embark on a research study on the stress and coping experiences of single parents of CWA. The undertaking was significant considering the importance of "empowering" mothers to achieve a level of coping wherein they can emerge as effective "change agents" to their children.

The Enigma that is Autism: An Introduction

Autism is a lifelong developmental disability that usually appears in the first three years of life. It hinders one's ability to process information and stimuli, to communicate, and to relate to people and the environment.

Its essential features are deficits in the areas of communication, social interaction and behavior (DSM- IV in Edelson 1995).

CWA may exhibit impaired socialization and communication skills, delayed psychomotor development, abnormal response to sensory stimuli, peculiar patterns of behavior and as a result, they may seem to live in their own world and seek to find meaning in their confusion by insisting on repetitive actions and routine activities.

Autism is a spectrum disorder, meaning the symptoms and characteristics of autism can present themselves in a wide variety of combinations, from mild to severe. Individuals with autism can exhibit any combination of behaviors in any degree of severity. Two children, both autistic, can act very differently from one another.

The grave effects of the disorder are the result of a neurobiological disorder that affects the functioning of the brain. The exact cause or causes of the dysfunction remain unknown. diagnosis and educational intervention have been known to be vital to treatment.

Autism is four times more prevalent in boys than girls, and knows no racial, ethnic or social boundaries. Family income, lifestyle and educational levels do not affect its chances of occurring. It is the fourth most prevalent developmental disability after mental retardation, epilepsy and cerebral palsy (Reyes in Paterno and Ocampo-Cristobal 1993) and is said to occur as often as congenital blindness and deafness in children (ACAP 1991).

Worldwide, as many as 15 to 23 in every 10,000 individuals are afflicted by the disorder. In the Philippines, based on a population of 65 million, the figure is about 90,000 to 138,000. But only about I percent of these have been diagnosed, and only 0.5 percent are undergoing appropriate intervention (Baga 1998).

The Impact of the CWA on the Family

Literature has focused on a deficit approach in studying the effects of CWA on their families. The assumption being that the inclusion of a member with autism in the family introduces much stress and that this stress has a negative effect on the family.

Families of CWA have been described as "families in distress." Serious discord, depression and financial problems are among the manifestations of chronic stress among these families (Gallagher and Bristol 1989; McAdoo and DeMyer 1978).

Findings of high stress levels among parents of CWA and depression, particularly among mothers, have been noted. Excessive time demands, poor health, depressed moods and pessimism about the child's future, and limits on educational or occupational opportunities for their families are problems reported by mothers of CWA (Holroyd and McArthur in Gallagher and Bristol 1989).

On the other hand, there is increasing evidence of the positive effects of CWA on their families. Despite the seemingly overwhelming challenges they face, families of CWA are coping and adjusting (Bristol 1984; Liwag 1987).

According to Bristol, although families experience stress and have a real need for services for the CWA, the vast majority of them were functioning well as families and have succeeded in adapting to their child with autism.

Liwag (1987), in her study of Filipino families of children with autism, cites the complexity of Filipino family dynamics including mutual support or *pananalo* and sacrifices and sharing of strengths or *pag-aako* among fathers, mothers and siblings, as contributing to adjustment and coping among these families.

The Reality of Single Parents Raising CWA

In their review of literature on families of young children with disabilities, Gallagher and Bristol (1989) note that single-parent households represent a large segment of families of children with disabilities. Of 1,050 families surveyed in a free, state-wide program for children with developmental disabilities in the United States, 41 percent were headed by single parents, including those who were separated, divorced, never married or widowed (in Gallagher and Bristol, 1984a).

The Autism Society of the Philippines (ASP), an organization of parents, individuals with autism, and helping professionals with a membership of some 600 indicated that around 9% of its members are single parents of CWA. Majority of them were unmarried, followed by those whose spouses were Overseas Filipino Workers (OFWs), widows, and those who were separated/divorced.

Indeed, the number of female-headed households in the Philippines has increased from 10% of all households in 1970 to 11.3% in 1990 (NSO). Of the 1.2 million female-headed households, widows accounted for the majority while I 6.5% were single, 13.1% were married with husbands who were away from home or not working and 6.7% were divorced or separated.

Considering the enigma that is autism, the impact of the CWA on families and the reality of single parents raising CWA, there is a need to undertake research on the stress and coping experiences of single parents. By addressing the needs and concerns of these parents, we ultimately help the CWA reach his/her full potential.

In exploring the experiences of single parents of CWA, the study was guided by a framework that considered the experiences in relation to family, belief and social factors that affect coping.

METHOD

The descriptive study made use of a combination of a self-administered questionnaire, a semi-structured in-depth interview, and non-obtrusive observation. In addition, three case studies representing various levels of coping by the single parents were presented.

Purposeful sampling was utilized in the selection of the 16 respondents. The sample was derived from referrals by administrators/principals of special schools in Manila and Laguna.

The research proceeded in the following phases—One: Development of Research Instruments; Phase Two: Pre-Testing of Research Instruments; Phase Three: Data Gathering (home visits) and Phase Four: Analysis and Interpretation/Integration of Data.

The research instruments were developed through inputs from related studies on the topic as well as consultations with parents of CWA and helping professionals. In the Pre-Test Phase, three women who were single parents of CWA and three others who have had experience as solo parents of CWA (wives of OFWs who have since settled in the country) participated in pre-testing the research instruments. During the home visits, the questionnaires were explained and distributed, and the interviews and observation conducted. Quantitative and qualitative data derived from the research instruments were analyzed and integrated into a final report.

RESULTS AND DISCUSSION

Profile of the Single Parents

Of the 16 respondents, nine were married with spouses who were abroad for extended periods because of work/study, three were widows, three were separated and one was un-

Development of Research Instruments

- Readings/Literature review
- Interview of parents and family members of children with autism and helping professionals

PHASE 1

Pre-testing of Research Instruments

- Administration
- AnalysisRevision

Data Gathering (Home Visits)

- Distribution of questionnaires
- Conduct of interviews
- Observation

PHASE 3

PHASE 2

Analysis and Interpretation of Data

- Analysis of questionnaire results
- Analysis of interview and
- observation results - Integration into final report

PHASE 4

Flow Chart of Research Activities and Methodology

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Table 1. Profile of the Single Parents (n= 16)

Single Parents

Civil Status Married (9)

Widow (3) Separated (3) Unmarried (1)

Age 36-40 yrs. (8)

31-35 yrs. (5) 41-45 yrs. (2) 46 and above (1)

Educational attainment College (11)

Self-employed (businesswomen)

Vocational (4) Master's (1)

Religion Roman Catholic (14)

Iglesia ni Kristo (1) Born Again (1)

Occupation

Housewife Full-time housewives (6)

With part-time sales activities (3)

Employee Government worker (2)

University employee (1) Factory worker (1) Hardware sales secretary (1)

That dware saids secretary (1

Dress shop proprietor (1) Government supplier (1)

Income P 0-10T (5), No information (5), P30,001

and above (4) 10,001-20T (1), P20,001-30T (1)

Source of Income remittance (3), remittance and commissions
Married from part-time sales activities (3), remittance

from part-time sales activities (3), remittance and salary (2), remittance and own business

Separated husband's child support (1), own f amily's

support (1), salary and sales commissions (1)

Widow pension (1), pension and salary (1), family

support, salary and taking in a border (1)

Unmarried business (1)

Home Ownership Own house (10), renting (4), living

with parents (2)

Number of years as single

parent of a CWA 5-6 years (7), 7 and above (5), 1-2 years (2)

3-4 years (2)

Number of Children 2 (7), 1 (5), 3 (2), 4 and above (2)

of the ASP.

Majority (9) were "housewives", three of whom were engaged in sales to supplement their husband's income. Two were businesswomen, one ran a dress shop and the other was a government supplier. Two were government employees, one was a municipal accountant and the other a public school teacher. Two were secretaries, one in a university and one in a hardware store. One was a factory worker.

In the interviews, a number of the "housewives" said that they quit their jobs in order to care for the CWA on a full time basis. The "housewives" who augmented their husband's income by engaging in sales reported they went about their sales activities close to their homes or in the school of the CWA to maintain overall supervision of the CWA. Those employed took jobs that were also near their homes. For most of them, career advancement and recognition was desired but not really a priority. Work, however, remained important to these working single parents because their salaries were often their main income sources.

In their 30s and college-educated, most of the interviewees have been single parents of a CWA for a period of more than five years. They had an average of two children. Notably, five reported that the CWA was their only child.

Youth and good health provided these single parents the much needed energy to enable them to keep up with the demands of the CWA. Their educational background facilitated understanding of autism as a disorder and its effects on their children. Almost all of the parents had attended parent training, read books on the disorder, and were actively involved in their children's intervention programs. The length of time as

single parents indicates that the respondents have had considerable experience in parenting a CWA alone. Most of the single parents had only one other child to attend to other than the CWA. All these contributed to their coping.

Their Stress Experience

The single parents experienced stress associated with the characteristics of the CWA (Table 2) as well as general or everyday stresses (Table 3) in their roles as single parents of the CWA.

Among the communication characteristics of the CWA, echolalia (repetition of words/phrases said to them) and immature language (not age-appropriate) were the most stressful to the respondents. Tantrum behavior was the psychosocial characteristic that was most stressful to the single parents while hyperactivity was the most stressful psychomotor characteristic. Their children's degree of dependence was stressful to the respondents, particularly their children's need for assistance in grooming and personal hygiene. Most stressful among their children's intellectual characteristics was their poor participation in learning situations and short attention span.

The top ranking general sources of stress of the respondents were "financial difficulties" "concern for the future" "excessive time demands" "lack of community awareness on autism" and "taking on several roles."

In the interviews, the single parents, regardless of income bracket, also reported that financial concerns were a major source of stress. The single parents who belonged to higher income brackets said they needed to further improve their financial standing to prepare for future expenses. Those who had comparatively less income cited the fact that school fees

Table 2. Rank Distribution of Respondents' Sources of Stress Associated with the CWA's Characteristics

Characteristics of CWA by Developmental Area	ь.
Company to the contract of	Rank
Communication Echolalia	1 =
	1.5 1.5
Immature Language Very little speech	3
Lacks comprehension	3 4
Talks incessantly about one topic	5
Indicates needs by gestures	6
Jargon	7
Absence of speech	8
Pronoun reversals	9
1 Tollouti Teversuis	,
Pschosocial	
Tantrums	1
Tantrum behavior	ĺ
Inappropriate laughing, giggling	1
Lack of fear of real danger	3
Self-stimulation	4
Running away	5
Grabbing	6
Resistance to change	7
Aggression	8
Excessive fear of harmless objects	9
Does not play with others	10
Self-injury	11
Indifference, aloof towards others	12
Disinterest in physical contact	13
Psychomotor	
Hyperactivity	1
Difficulty making use of hands/fingers	2
Clumsy and lacks coordination	3
Difficulty in writing/drawing	4
Hypoactivity	5
Degree of Dependence	
Needs help in grooming and personal hygiene	1
Erratic sleeping patterns	2
Difficult eating habits	3 4
Not t oilet-trained	5
Cannot tfeed himself independently	5 6
Requires special medical attention	0
Intellectual Achievement	
	1
Does not participate well in learning situations due to short attention span Has splinter skills but in general exhibits low cognitive functioning	2
Lags in intellectual development of peers	3
Lags in intellectual development of peers Lags in intellectual development of younger siblings	4
Easily forgets what has already been mastered	5
Duality longers what has already freel mastered	•/

Table 3 Rank Distribution of Respondents' General Stress (n=16)

Stresses	Rank
Financial difficulties	1
Concern for the future	2
Excessive time demands	3.5
Lack of community awareness on autism	3.5
Taking on several roles	5
Lack of appropriate programs for the child	6
Limits on occupational opportunities	7.5
Social stigma	7.5
Isolation/lack of socialization	9
Lack of recreation/respite care	10
*Concern about spouse	11.5
Depression/low morale	11.5
**Concern about siblings	13
Health problems	14.5
Problems with in-laws	14.5

^{*}n=12

^{**}n=11

and other intervention services of the CWA were difficult to shoulder. The separated single parents were most concerned about the future and were taking steps to improve their financial situation—one was preparing to work abroad while the other was considering legal action to get child support.

The respondents likewise expressed concern about the future and the prospects for their children with autism who will grow to be adults. What options will be available to them after they are no longer part of the school system? Who will look after them when their caregivers are gone? Will they be a burden on others, especially to their brothers and sisters?

THEIR COPING EXPERIENCE

The single parents' belief and support systems came into play to enable them to cope with the stress of solo parenting a CWA.

Belief Factors

The respondents' beliefs on having a CWA was important to their coping. According to the literature on coping, stressors become crises depending on the meaning one gives to the stressful event.

All the single parents held positive beliefs on having a CWA. The top ranked statements regarding their beliefs included "I love my CWA dearly and accept him/her unconditionally. My child is a gift."; "Acceptance of my child's condition allows me to channel my efforts on ways to help my child."; and "I know I am not alone. There are other parents like me raising a CWA. Together we can make a difference in our children's lives." These statements represented the following assigned belief categories: expression of love, pride and commitment to the child; attitude towards autism; and support systems.

To a certain extent, the top ranking beliefs held by the single parents were indicative of how the respondents handled the presence of autism in their lives. First, they accepted the child with autism and attached a positive meaning to the stressful event of having a child with a disability. Second, they accepted the disability and channeled their efforts towards ways to help their child. Third, they realized that they were not alone and that there were others in the same situation who were vital sources of support.

In the interviews, the respondents attached the following meanings to the CWA: God-given, a source of luck, a source of pride, a challenge, and bound to them emotionally.

The statement, "It is devastating to know that my beautiful child has autism. Life will never be the same" ranks lowest among their beliefs on having a child with autism. Other statements that rank low include: "I must have done something wrong in my life to deserve my CWA" and "Having a CWA is the worst thing that ever happened to me". These belief statements fall under the assigned categories of blame and negativism.

The least ranked beliefs highlight the fact that the respondents do not engage in negativism or in blaming certain persons or incidents for their child's autism (see Table 4).

Family Factors

The family's profile, characteristics, and support (Table 5) were of significance to the coping of the respondents.

Most of the single-parent households in this study were composed of the single parent, the CWA, siblings, extended family members, and other household members. The average household size was six. Most of the siblings of the CWA were female. Most of the respondents had extended family

Table 4. High- and Low-Ranking Belief Statements of the Respondents On Having a CWA

Beliefs on Having a CWA	Assigned Category	Rank
High-Ranking		
I love my CWA dearly and accept him/her unconditionally. My child is a gift.	Expression of love, pride and commitment	t
Acceptance of my child's condition allows me to channel my efforts on ways to help my child.	Attitude towards autism	2
I know I am not alone. There are other parents like me raising a CWA. Together we can make a difference in our children's lives.	Support	3
I have never felt more loved than by my CWA. I will always be there for my child.	Expession of love, pride and commitment	4
I take pride in the accomplishments of my child, no matter how small, and see this as an opportunity to celebrate life.	Expression of love, pride and commitment	5
Low-Ranking		
I must have done something wrong in my life to deserve my CWA.	Blame	12.83
I blame others for my child's autism.	Blame	12.83
I feel as if I have lost the child I always wanted and am now left with an imperfect child.	Negativism	18
Having a CWA is the worst thing that ever happened to me.	Negativism	19
It is devastating to know that my beautiful child has autism. Life will never be the same	Negativism	20

again.

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Household Composition

Table 5. Family Factors that Contribute to Respondents' Coping

Nuclear and Extended family (5), Nuclear, Extended family and other household members (5): Nuclear family and other household members (3), Nuclear

Family factors	Rank
Individual Members' Profile	
Child with Autism (n=16)	
Sex	Male (13), Female (3)
Birth order	Eldest (6), Only child (5), Youngest (4), Middle child (1)
Age	4-6 (6), 7-9 (6), 10 and above (4)
Age diagnosed	3-4 (9), 1-2 (6), 5 and above (3)
Number of years receiving services	3-4 (7), 1-2 (6), 5 and above (3)
Siblings (n=17)	
Number of siblings of the CWA	1 (8), 0 (5), 2 (2), 3 and above (2)
Sex	Female (10), Male (7)
Age	7-12 (7), 0-3 (3), 13-16 (3), 17 and above (3), 4-6 (1)
Birth order	Eldest (6), Youngest (6), Middle Child/Children (5)
Spouse (n=12)	
Age	31-35 (4), 36-40 (3), 46 and above (3), 41-45 (2)
Educational attainment	College (12)
Occupation	Seaman (4). Engineer (2). Accountant (2). Businessman (2). Student with part-time job (1), Community Worker
Place of work/study	No definite-seamen (4), Phils. (3), Asia (2), USA (1), Africa (1), Middle East (1)
Frequency of home visits	Once a year (5), Twice a year (3), None (3), More than a year (1).
Extended family members (n=35)	
Number	2 (4), 3 and above (4), 1 (2), 0 (6)
Relationship to the respondent	Sister (10), Others (i.e. brother/sister in-laws, grand
	nephew, etc.) Mother (5), Niece (5), Nephew (3).
	Father (2). Brother (2), Mother in-law (1)
Sex	Female (25). Male (10)
Age	11-20 (9), 1-10 (8), 40 and above (9), 31-40 (5), 21-30 (4)
Occupation	Student (10), Employee (8), Housewife (7), Unemployed (6), Caregiver/Yaya (4)
Other household members (n=8)	1 (4) 2 (2)
Number	1 (6), 2 (2)
Sex	Female (7), Male (1) 21-25 (5), 15-20 (2), 26 and above (1)
Age	• • • • • • • • • • • • • • • • • • • •
Occupation	Caregiver/Yaya (6), Houseboy (1), Border (1)
Household Size	Six (7), Five (3), Three (3), Four (2), Two (1)

family (3)

(Continuation of Table 5)

ramity Characteristics	i
Commitment, help and support for one	
another	2
Members are well-adjusted	3
Members have well-grounded moral/	
religious beliefs	4
Exhibit appreciation and affection for	
each other	5
Members practice self-nurturance and	
self-care	6.5
Openly express their feelings	6.5
Members are flexible and adapting to	
change	8
Pursue activities for personal growth	9
family fosters individuality	10
Actively engage in recreational	
activities	
Family Support	1
Spouse	2
Other household members	3
Relatives of respondent	4
Eldest child	5
Youngest child	6
Relatives of spouse	7
Middle Child/Children	

members living with them. Majority of these extended family members were female—sisters, mothers and nieces. Other household members providing help to the single parent were likewise female caregivers or "yayas."

Evidently, the support of other females/women within the family was vital to the coping of these parents—from their daughters, their mothers, their sisters, nieces and househelp.

According to the respondents, the top four characteristics of their families were commitment, help and support for one another, individual adjustment, and religious orientation.

Bristol (1989) notes that families of CWA characterized with a high degree of commitment, help, and support for one another had greater acceptance and competence for coping with the child. She likewise found that belief in God and adherence to clear moral standards facilitated survival among families by giving greater meaning and purpose to the sacrifices of the family in the care of the CWA.

The family characteristic that least described the families of the single parents was an active recreational orientation or participation in social and recreational activities outside the home. In the interviews, the single parents reported that they engaged in recreational activities but not as often as they wanted to. They indicated that financial and time constraints limited their recreational activities while others said it was stressful for the family to go out with the CWA. This may have an impact on the coping of the single parent as findings from Bristol's study (1989) indicated that families with an active recreational orientation are better able to adapt to the care of the CWA.

The single parents drew from family support, an important factor that affected coping. The respondents said their spouses (despite their periodic absence from their homes), followed by other members of their household, their own relatives and eldest child were helpful to them. Least helpful were middle children and relatives of their spouse. Family members provided financial/material support, emotional/moral support and practical support to the single parent.

The amount of perceived support from members of the immediate family has been found to be related to levels of perceived stress and ratings of family adaptation. As a major source of longitudinal and natural support, family members have been found to provide a variety of support to parents by providing respite, care, financial assistance, and emotional support (Powell et al. 1992).

Notably, of their children, the eldest female child was most helpful to the single parent because she provided child care, was the playmate of the CWA, and provided assistance in carrying out the home program of the CWA.

Literature on the effects of the individual with special needs on his siblings show that sisters, in particular older daughters, were most vulnerable to stress because of their frequent interaction with the individual with special needs. Powers (1989) cautions parents of children with special needs against turning one or more of their children into a "parental child" by giving them too much responsibility.

Social Factors

In addition to belief and family factors, there are factors within the single parent's social environment that impact on her coping. These include both formal and informal social support (Table 6).

Informal Social Support

Other than their immediate household members, the single parents drew from a number of other natural supports in-

Table 6. Social Factors that Contributed to Respondents' Coping

Social Factors Rank	(Degree of Helpfulness)
Formal Social Support	
Child Intervention	
Special school	1
Speech therapy	2
Occupational therapy	3
Physical therapy	4
Tutorial	5
Play therapy	6
Parent Intervention	
Parent training	1
Counseling	2
Family therapy	3.5
Parent group therapy	3.5
Informal Social Support	
Other parents of CWA	1
Relatives of respondent (i.e. not part of	2
respondents' household)	
Friends	3
Church members	4
Neighbors	5
Community members	6
Relatives of spouse	7
Co-workers	8

cluding relatives, friends, co-workers, neighbors, church members, other parents of CWA, among others.

The respondents considered other parents of CWA, their own relatives (who were not living with them) and friends as most helpful to them. Least helpful were co-workers and relatives from their spouses' family. Individuals who comprised their informal social support provided moral/emotional support; love, understanding and acceptance of the child; and shared experiences and knowledge on child care and management.

Throits (in Powell et al. 1992) stressed that people are most likely to seek support from individuals or groups who have experiences similar to their own. A parent of the CWA can say "I know how you feel" to another parent with legitimacy that a professional who has not had similar experiences can achieve.

Liwag (1987) noted similar findings in her study indicating that relatives were an important factor in the coping of families because of the moral encouragement and material assistance they provided.

Formal Social Support

The single parents relied on formal social support (i.e., services that require more formal organizational structure or the exchange of money) provided to them or the child with autism. Of the child intervention services, the special school, speech and physical therapy were considered most helpful. Of the parent intervention services received, parent training and psychological counseling were very helpful to the single parents.

The special school was considered as very helpful by the single parents because of various child outcomes and an in-

crease of parental knowledge of management strategies. According to Dizon (1998), special education plays a pivotal role in the intervention for the CWA. A trained specialist or a teacher of SPED is able to provide systematic, comprehensive and effective intervention for the CWA.

The single parents indicated that parent training was most helpful to them because they learned management strategies, increased their knowledge on autism, were able to share ideas and experiences, build friendships, and derive moral/emotional support. Koegel et al. (1981) found that parent training is important to families of CWA and that it was superior to direct child intervention alone in maintaining and generalizing child skills.

Assessment of their Coping

Findings from the research instruments, including the questionnaire, interview schedule and observation revealed that most of the respondents were coping with the care and presence of their CWA

The questionnaire revealed that respondents tapped various beliefs, family and social factors to adequately cope with the CWA.

In the interviews, majority of the single parents indicated that they were coping while others described their condition as "getting there." "Coming to terms with autism and accepting the child for what he is," "Being positive and hopeful for the child," and "Going on with my life"—are some of the statements the respondents used to describe their coping. They acknowledged the positive changes that occurred to them as a result of having a CWA: becoming more spiritual, positive and hopeful, flexible and adaptable to change, responsible, patient, and compassionate of others.

During the observation, it was found that most of the single parents were in the last three stages of adjustment described by Healey (1995) namely: resignation, acceptance and adjustment.

They spoke knowledgeably about autism; were comfortable speaking about their children's disability; took steps to learn more about autism and how to manage their children; passed on their knowledge to family members and others; took on multiple roles with ease; practiced self-care and nurturance; attended to their other children's needs; were actively involved in their CWA's intervention programs; and were part of support groups, advocacy efforts and projects for individuals with autism.

CONCLUSION AND RECOMMENDATIONS

Despite the inordinate amount of stress experienced by the single parents in this study, they were coping with the presence and care of their CWA. They dealt with the stresses in their lives by drawing from significant family, belief and social factors that affected coping.

In light of research findings in this study, recommendations regarding support systems, programs and services, research, and policy and legislation are proposed.

Support Systems

Considering the lifelong condition of autism and its chronic stresses, parents will need to cope with autism through time and will continue to rely on a variety of supports to assist them in caring for their CWA. It is important, therefore, to strengthen and enhance such support systems to ensure the well-being of parents—the best advocates of CWA.

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In light of significant contributions of family and household members to the coping of the respondents, it is recommended that mothers of CWA draw from the wellspring of support provided by their families. Fathers need to play a more active role in the care of CWA. Other than their traditional role of providing economic support to the family, they should offer more emotional and practical support to their spouse to enable her to fulfill her multiple roles. The middle child and relatives of the spouse should likewise be encouraged to interact more with the CWA and be more involved in the child's home program.

Considering the importance of certain family characteristics to coping, it is recommended that families pursue activities that make for greater commitment, help and support for one another as well as individual adjustment.

Since informal and formal social supports, including other parents of CWA, the special school, and parent training were found to be significant social factors in coping, parents should be encouraged to join parent support groups, coordinate and be actively involved with the child's special school and undergo parent training on autism.

Programs and Services

Because of the centrality of the family in child development, there should be more intervention services that cater to families of CWA. In coming up with programs for families, family diversity, including alternative family patterns, should be considered.

Particular attention should also be given to the lack of recreation among families living with autism. In the design of programs, providing respite services and recreational opportunities for family members should be included.

Research

More research on families living with autism should be undertaken. Aside from familial resources to coping, the interactions, functions, and life cycles of families of CWA should likewise be examined to determine how best to help these families. A longitudinal perspective is strongly needed in future studies.

Moreover, research has focused on the adjustment of mothers of CWA. Little is known about the coping of other family members including fathers, siblings (particularly the eldest female child) and extended family members, who play significant roles in the growth and development of the CWA. Studies that consider these family members will impact on the delivery of services to families and their members with autism.

Research should likewise focus on helping professionals and their stress and coping experiences. Teachers, in particular, are prone to burnout and should be assisted in managing their stress.

Policy and Legislation

The National Integrated Plan on Autism spearheaded by the National Council for the Welfare of Disabled Persons should be implemented. The plan is an interagency undertaking to provide much needed services to individuals with autism and their families.

The Solo Parent Act should be pushed into law as this would benefit the growing number of single parents in the country, including single parents of CWA.

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