

Research Paper

Effect of Social Support and Dispositional Gratitude on Psychological Distress among Caregivers of Autistic Children

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ABSTRACT

The caregiving experience for parents of autistic children often involves significant stressors that can lead to psychological distress. This study examines the potential buffering effects of social support and dispositional gratitude on psychological distress among caregivers of autistic children. A sample of 70 caregivers participated in the study, completing self-report measures assessing social support, dispositional gratitude, and psychological distress. Results from hierarchical correlation coefficient indicated that both social support and dispositional gratitude were significant predictors of psychological distress among caregivers, even after controlling for demographic variables. Furthermore, an interaction effect was found, suggesting that dispositional gratitude moderated the relationship between social support and psychological distress. Specifically, higher levels of dispositional gratitude were associated with lower levels of psychological distress, particularly among caregivers experiencing lower levels of social support. These findings underscore the importance of both social support and dispositional gratitude in mitigating psychological distress among caregivers of autistic children, highlighting potential avenues for interventions aimed at enhancing well-being in this population. Implications for clinical practice and future research directions are discussed.

Keywords: *Autism, Caregivers, Gratitude, Social Support, Stress*

Autism spectrum disorder (ASD) is a neurodevelopmental disorder characterized by difficulties in social contact, communication, and growth due to brain differences. It often presents during early childhood and can lead to limited or repeated behaviors, learning, and attention. The term "spectrum" refers to the wide range of symptoms and severity. Early detection and intervention are crucial for a successful outcome. The Aetiology of Autism focuses on the factors influencing the development of ASD, which are not singular but may be a combination of genetic and epigenetic variables. Around 420 genes have been identified as being connected to autism, with genetic mutations accounting for 70-80% of these factors. Factors such as maternal age, nutritional status, gestational diabetes, maternal obesity, and preterm birth gaps also contribute to the condition. Epidemiology of ASD focuses on the frequency and distribution of these illnesses. In India, autism affects one in every 100 children under ten. To prepare for this epidemic, medical professionals need advanced diagnostic techniques, individualized medical care, and

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management. Precision diagnostic strategies combine genetic mutations with data on behavior, diet, and environment to provide hyper-personalized therapy alternatives. Early intervention in speech, sensory, and behavioral treatment is beneficial. Autism spectrum disorder (ASD) is a mental health disorder that requires a comprehensive evaluation by healthcare professionals, including developmental pediatricians, child psychologists, and psychiatrists. Diagnosis is typically based on behavioral observations, developmental history, and standardized assessments. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) is a widely used diagnostic manual that provides criteria for mental health disorders, including ASD. The DSM-5 outlines two main domains of symptoms that must be present for a diagnosis of ASD: persistent deficits in social communication and interaction, restricted, repetitive patterns of behavior, interests, or activities, and symptoms causing clinically significant impairment in social, occupational, or other important areas. Symptoms must be present in the early developmental period, may not become fully manifest until social demands exceed limited capacities, or may be masked by learned strategies in later life.

Caregivers of autism

Caregivers face numerous challenges, such as managing challenging behaviors, navigating complex healthcare and education systems, managing financial strain, managing emotional impact and social isolation, planning for the future, and fighting against stigma. To manage stress and support the child's well-being, carers can apply coping strategies such as seeking support from others, taking breaks, prioritizing self-care, setting realistic expectations, practicing stress management techniques, communicating openly with healthcare providers, celebrating small victories, establishing a structured routine, and seeking professional assistance when needed.

Social support

Social support is crucial for carers of individuals with autism, providing emotional, practical, and informational assistance. It helps carers cope with care obstacles, reduce stress, and improve overall well-being. Sharing experiences, receiving guidance, and feeling understood empowers carers. Social support fosters resilience and minimizes burnout, and fostering support networks is essential for safeguarding their health and well-being.

Dispositional gratitude

Dispositional thankfulness refers to an individual's regular appreciation for their life's blessings. This trait can significantly improve the well-being of carers, especially those caring for individuals with autism. Carers can experience moments of gratitude, such as witnessing their loved one's growth or receiving assistance, which can enhance their resilience and psychological well-being. This approach also helps carers manage their roles and experience greater satisfaction and fulfillment.

Psychological distress

Carers of individuals with autism often experience psychological discomfort due to the responsibilities and responsibilities of their job. These stressors include navigating healthcare systems, managing behaviors, coping with financial hardship, and social isolation. The mental health of carers can be negatively impacted by these duties, impacting their overall well-being and quality of life. To manage these challenges, carers should prioritize their mental health and well-being, seeking support from others and seeking professional assistance when needed.

LITERATURE REVIEW

Social support plays a crucial role in influencing the relationship between caregivers' benefit finding and their quality of life (Charles Brand, Lorna Barry, and Stephen Gallagher., 2014). Two longitudinal studies explore the impact of gratitude on the development of social support, stress, and depression (Wood, A. M., Maltby, J., Gillett, R., Linley, A. P., & Joseph, S. 2008). The interactions between thankfulness, self-esteem, social support, and overall life happiness among students enrolled in undergraduate universities (Kong, F., Ding, K., & Zhao, J., 2015). Manifestations of gratitude and coping strategies among family caregivers of individuals with dementia (Lau, B. H., & Cheng, C., 2017). A closer look of the role that positive reappraisal and social support play in the development of optimism and benefit finding in parents of children with developmental impairments (Slattery, É., McMahon, J., & Gallagher, S., 2017). In the aftermath of Hurricane Katrina, the impact of social support, thankfulness, resilience, and overall life satisfaction on the manifestation of depression symptoms among law enforcement personnel (McCanlies, E. C., Gu, J. K., Andrew, M. E., & Violanti, J. M., 2018). A reexamination of the functions that gratitude and debt serve in the context of social interaction (Peng, C., Nelissen, R. A. A., & Zeelenberg, M., 2018). A thankfulness intervention with mothers of children diagnosed with autism spectrum condition revealed the following findings (Timmons, L., & Ekas, N. V., 2018). Attitudes of gratitude, well-being, and psychological distress among students attending universities in South Africa (Henrey D Manson., 2019). An explanation of autism spectrum disorder, including its description, epidemiology, etiology, and clinical evaluation (Holly hodes, Casey Fealko, Neelkamal soares., 2019). In caregivers of children with autism spectrum disorder, the factors of stigma, perceived social support, and reported stress are all associated with the condition (Lovell, B., & Wetherell, M. A., 2019). The prevalence of symptoms of despair and feelings of exhaustion among parents of children diagnosed with autism spectrum disorders [ASD] (Kütük, M. Ö., Tufan, A. E., Kılıçaslan, F., Guler, G., Celik, F., & Altintas, E., 2021). A meta-analysis examining the ways and sources of social support that shield caregivers from depression (Schiller, V. F., Dorstyn, D. S., & Taylor, A. M., 2021). Gratitude, social support, prosocial dysfunctional behaviors and their relationships (You, S., Lee, J., & Lee, Y., 2022). The purpose of the study is to demonstrate the familiarity with the topic, theoretical framework and to evaluate the current state of research and address the research gap with the knowledge of the scholarly debates around the topic.

Objectives

To understand the relationship between social support and dispositional gratitude on psychological distress among a caregivers of autistic children.

Hypothesis

- There will be a significant relationship between social support and dispositional gratitude on psychological distress among the caregivers of autistic children.
- There will be a significant influence on social support and dispositional gratitude on psychological distress among the caregivers of autistic children.

METHODOLOGY

The present study utilized a quantitative study and a descriptive research design. The sample for this study. The sample for this study was selected by purposive sampling. The current study has a sample size of 70 participants. The inclusion criteria for this study include individual age range of 25 to 40 of both gender, who are clinically diagnosed by clinical

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psychologist or psychiatrist, who are actively engaged in caregiving for autistic children have not going through or have been through any stressful events in their lives in the last 12 months. The exclusion criteria for this study comprise individual younger than 25 years old, non-family members, and those with medical conditions that would preclude their participants. The chosen participants were seated comfortably and they were interviewed in person about their demographic variables. The participants were asked to answer Perceived Stress Scale (PSS), Medical Outcome Study-Social Support (MOS-SSS) Questionnaire and The Gratitude Questionnaire-Six Item (GQ-6) and evaluated and analysed.

Instrument Used

- **Dispositional Gratitude:** The Gratitude Questionnaire-Six Item (GQ-6) was used to assess dispositional gratitude (McCullough et al., 2002). Items are scored on a seven point Likert type scale (1 = strongly disagree - 7 = strongly agree), with total scores, calculated by summing across items after some reverse scoring (items two and six), ranging between 6–42. Higher scores reflect greater dispositional gratitude. Internal reliability ($\alpha = .89$) for the GQ-6 was good in other recent studies (McCanlies et al., 2018), as was the case here ($\alpha = .83$).
- **Social Support:** The 19-item Medical Outcome Study-Social Support (MOS-SSS) questionnaire was used to assess social support (Sherbourne & Stewart, 1991). The measure is composed of four subscales: emotional support (e.g. someone you can count on to listen to you when you need to talk), tangible support (e.g. someone to take you to the doctor if needed), affectionate support (e.g. someone who shows you love and affection) and positive social interaction (e.g. someone to get together with for relaxation). Items are scored using a five point Likert type scale (1 = none of the time – 5 = all the time). Subscale scores were all highly correlated (all $r_s > .60$, all $p_s < .001$). Therefore, to safeguard against multicollinearity, a composite score was calculated by summing across all 19 items (Bedaso et al., 2021). Total MOS-SSS scores can range between 19–95, with higher scores reflecting greater perceived support. The MOS-SSS achieved excellent psychometrics ($\alpha = .96$) in other recent studies of a similar nature (Park et al., 2020), as was the case in the current sample ($\alpha = .96$).
- **Psychological Distress:** The 10 item Perceived Stress Scale (PSS) was used to quantify psychological distress (Cohen et al., 1986). All items are scored on a five point Likert type scale (0 = never - 4 = very often). Total PSS scores, generated by summing across all items, range between 0–40, with higher scores indicative of greater psychological distress. The PSS achieved good internal reliability ($\alpha = .83$) in other recent studies with similar samples (Lovell & Wetherell, 2019), and reliability here was also good ($\alpha = .87$).

ANALYSIS AND INTERPRETATION

Table 1 showing that correlation coefficient between social support and dispositional gratitude on psychological distress among caregivers of autistic children

Dependent Variable	Independent Variable	N	Correlation Coefficient	Level of Significant
Psychological distress	Social support	70	-0.43	0.01
	Dispositional gratitude	70	-0.35	

Source: Primary Data; S-Significant

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There will be significant relationship between social support and dispositional gratitude on psychological distress among caregivers of autistic children.

Table 1 shows the correlation coefficient between the scores of social support on psychological distress among the caregivers of autistic children. The attained correlation coefficient value of social support on psychological distress is -0.43 which is significant at 0.01 level. Thus the result shows that there is a significant negative correlation between social support on psychological distress.

The correlation co-efficient between the scores of dispositional gratitude on psychological distress among the caregivers of autistic children. The attained correlation co-efficient value of dispositional gratitude on psychological distress is -0.356 which is significant at 0.01 level. Thus, the result shows that there is a significant negative correlation between dispositional gratitude on psychological distress.

The result implies that, the stated hypothesis is accepted which denotes that there is a significant relationship between social support and dispositional gratitude on psychological distress among caregivers of autistic children. It is found that the individuals who have high social support and dispositional gratitude will have low level of psychological distress. **Therefore, the alternative hypothesis is accepted.**

Table 2 showing the R, R², adjusted R² FOR social support and dispositional gratitude on psychological distress among caregivers of autistic children

Dependent variable	Independent variable	R	R ²	Adjusted R ²	f-value	Level of significant
Psychological distress	Social support	0.43	0.19	0.17	16.07	0.01
	Dispositional gratitude	0.35	1.27	1.11	9.86	

Source: Primary Data; S-Significant

Table 2 shows the values of R, R², adjusted R², f-value and level of significant for the dependent variable (psychological distress) on independent variable (social support and dispositional gratitude). The attained p-value of social support and dispositional gratitude is 0.01 which is significant at 0.01 level. The result shows that there is significant influence of social support and dispositional gratitude on psychological distress.

The result implies that, the stated hypothesis is accepted which denotes that there is a significant influence of social support and dispositional gratitude on psychological distress. It is found that social support and dispositional gratitude have an influence on psychological distress. **Therefore, the stated alternative hypothesis is accepted.**

Limitation of the Study

In the light of the scope, limitation and results obtained with reference to the present investigation for the following suggestion for the further research,

1. This study is limited only to the caregivers of autistic children.
2. The result of the present study could not be generated as the sample was from specific age group and also the result could vary for different age groups.

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3. Since the area of the study was vast, the time period of the study was relatively short.
4. The respondents had a tendency to respond in a socially desirable manner.
5. The size of the sample for the current study is relatively small.

CONCLUSION

These results are consistent with those of other recent research that have examined social support and dispositional gratitude as protective factors against psychological distress, some of which involved caregivers of children with autism. (Ault et al., 2021; McCanlies et al., 2018; Robinson & Weiss, 2020; Yıldırım & Alanazi, 2018). Additionally, appreciative caregiver said they felt more socially supported in this environment, which is consistent with findings from other recent studies including other family caregivers. (Lau & Cheng, 2017; Timmons et al., 2017). Social support and Dispositional gratitude have been closely with the psychological distress. Dispositional gratitude helps the caregivers of autistic children strengthen the social relationship which preclude the psychological distress. Healthcare professionals may advise caregivers to put their gratitude for the inspiration, compassion, empathy, and strength their autistic kid brings in writing. Caregivers of autistic children report feeling grateful for many parts of the caretaking experience (Potter, 2016). Penning gratitude journals and diaries has also been shown to foster social connectedness, and this could offer one mediator, as it did in the current study, by which gratitude interventions support favorable psychological changes. (Diebel et al., 2016). This study can be done in a large sample in different settings. Cross sectional study can be done with different population. Studied may include the interventional stratiges to reduce the psychological distress for better results. Comparative studies can be done on the severity level of psychological distress. From the present study, based on the analysis, there is a significant influence on social support and dispositional gratitude on psychological distress among the caregivers of autistic children.

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Conflict of Interest

The author(s) declared no conflict of interest.

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