

Research Paper

Exploring The Coping Strategies Adopted by Mothers of Autistic Children

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ABSTRACT

This study explores the coping strategies adopted by mothers of autistic children, who often face complex caregiving demands related to behavioral challenges, communication differences, and developmental needs. Using a quantitative approach, the research examines problem-focused, emotion-focused, social support-seeking and avoidance-based coping among a sample of mothers caring for children with Autism Spectrum Disorder (ASD). Descriptive statistics were used to identify commonly used coping patterns, while logistic regression was applied to determine associations between coping strategies and emotional difficulty. Findings indicate that mothers frequently rely on problem-solving and social support, although emotion-focused strategies such as prayer and reflection are also widely practiced. Avoidance-based coping, including denial and withdrawal, emerged as a significant predictor of elevated emotional difficulty. The study highlights the need for targeted support services and interventions that strengthen adaptive coping and reduce reliance on maladaptive patterns among mothers of autistic children.

Keywords: *Autism Spectrum Disorder (ASD), mothers, coping strategies, problem-focused coping, emotion-focused coping, social support, avoidance coping, maternal well-being, quantitative analysis*

Caring for a child diagnosed with Autism Spectrum Disorder (ASD) presents unique and often demanding challenges that extend beyond typical parenting responsibilities. Mothers, who frequently assume the primary caregiving role, are required to navigate behavioral difficulties, sensory sensitivities, communication barriers, unpredictable routines, and the emotional demands associated with developmental differences. These responsibilities place mothers of autistic children in a position of continuous adaptation, making coping not just a supportive skill but an essential component of daily functioning. Understanding how these mothers cope is crucial to supporting their emotional well-being and enhancing their capacity to provide consistent and responsive care.

ASD caregiving involves multiple layers of complexity. Mothers often manage educational planning, therapy appointments, behavior management programs, and interactions with

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healthcare and educational systems. Research consistently shows that mothers of autistic children experience higher levels of role strain, decision-making pressure, emotional intensity, and social isolation compared to mothers of typically developing children. These factors influence the way mothers respond to stressors and shape their choice of coping strategies. Therefore, exploring coping patterns within this population provides meaningful insights into how they maintain stability and emotional balance while caring for their children.

Coping strategies are generally categorized into problem-focused coping, emotion-focused coping, social support-seeking, and avoidance-based coping. Problem-focused coping involves actively addressing challenges, such as organizing routines, modifying environments, and planning strategies to manage behaviors. Mothers of autistic children often rely on these techniques to create structure and predictability—elements that are essential for children with ASD. Emotion-focused coping, such as prayer, acceptance, or mindfulness, plays a significant role when mothers encounter situations that are beyond immediate control, including public misunderstandings, unexpected behaviors, or developmental uncertainty. Social support from family members, professionals, and other parents of autistic children is also central to functioning, as such support provides emotional comfort, shared experiences, and practical assistance.

However, not all coping strategies yield positive outcomes. Avoidance or withdrawal—such as denying challenges, disengaging from social settings, or suppressing emotional responses—can lead to increased emotional strain and reduced problem-solving capacity. Recent studies highlight that mothers who frequently rely on maladaptive coping are more vulnerable to emotional exhaustion and reduced psychological resilience.

Despite the growing interest in autism research, few studies have focused specifically on examining the coping strategies of mothers of autistic children using quantitative assessment tools. Much of the existing literature emphasizes parental stress, therapeutic interventions, or child outcomes, leaving a gap in understanding the specific behavioral and emotional mechanisms mothers use to navigate their caregiving responsibilities. Addressing this gap is essential, as identifying effective coping patterns can guide support programs, parent training modules, and community-based interventions that promote maternal well-being.

This study, therefore, aims to explore and analyze the coping strategies adopted by mothers of autistic children and to examine how these strategies relate to emotional difficulty. By evaluating problem-focused, emotion-focused, social support-based, and avoidance-related coping, the research provides a deeper understanding of maternal adaptation within the context of autism caregiving. The findings contribute valuable insights that can inform family-centered interventions, mental health support, and long-term care planning for mothers raising children with ASD.

REVIEW OF LITERATURE

Schmidt et al. (2023) examined coping, resilience, and emotional health among mothers of autistic children through a systematic review. Their findings indicated that mothers commonly use problem-focused coping to manage routine demands, while emotion-focused coping is employed when faced with uncontrollable situations. The review also highlighted that avoidance coping was strongly linked with higher emotional distress, reinforcing the importance of adaptive coping strategies for long-term well-being.

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Baptista et al. (2023) investigated coping strategies and emotional well-being among parents of children with ASD and found that problem-focused coping—such as planning and seeking information—was strongly associated with improved parental confidence. However, emotional and behavioral unpredictability in autistic children often led parents to rely on emotion-focused techniques such as acceptance and mindfulness. The study emphasized that structured coping interventions could significantly enhance parental functioning.

Hayes and Watson (2021) conducted a systematic review to explore mental health and coping patterns among mothers of children with autism. Their results showed that mothers experience higher emotional demands compared to parents of typically developing children and frequently rely on coping strategies like acceptance, prayer, and emotion regulation. Notably, the review found that when mothers lacked adequate support, they were more likely to use maladaptive coping, which contributed to elevated psychological distress.

Park et al. (2021) explored coping processes among mothers raising children with developmental disabilities, including ASD. They found that mothers frequently integrated emotion-focused coping when faced with unpredictable behaviors. The researchers also noted that mothers who adopted adaptive coping strategies, such as cognitive reframing, reported better emotional adjustment. However, reliance on avoidance behaviors was associated with increased negative emotional outcomes.

Leach et al. (2022) investigated social support and coping among mothers of autistic children. Their study revealed that strong social support—especially from peer groups and extended family—enhanced adaptive coping and reduced emotional strain. However, when mothers perceived social support as inadequate or uninformed about ASD, they experienced greater difficulty managing caregiving challenges, indicating the central role of supportive networks.

Russell et al. (2020) analyzed maternal coping and emotional functioning among parents of children with autism. They found that avoidance and resignation were significant predictors of emotional difficulty. In contrast, mothers who engaged in proactive problem-solving and sought emotional or practical support demonstrated better psychological outcomes. The authors emphasized that interventions should target reduction of maladaptive coping strategies to improve maternal well-being.

Khusaifan and El Keshky (2020) examined stress and coping among mothers of autistic children and found that coping strategies varied based on the severity of the child's symptoms and maternal resources. Their results indicated that mothers often relied on emotion-focused coping when behavioral outbursts or communication barriers increased. Avoidance coping, however, was linked with poorer emotional adjustment, reinforcing similar findings in other literature.

METHODOLOGY

Research Design

The present study employed a **quantitative, cross-sectional design** to examine the coping strategies adopted by mothers of autistic children. This design was chosen because it allows systematic measurement of coping patterns and enables statistical analysis of their relationship with emotional difficulty. A structured questionnaire was used to collect data from participants, ensuring consistency and comparability across responses.

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Participants

The study included 100 mothers of children diagnosed with Autism Spectrum Disorder (ASD). Participants were selected using purposive sampling, ensuring that each respondent met the inclusion criteria.

Inclusion Criteria:

1. Mothers of children who have been clinically diagnosed with ASD.
2. Child age between 3 and 18 years.
3. Ability to understand and respond to the questionnaire.
4. Willingness to participate voluntarily.

Exclusion Criteria:

- Mothers with diagnosed psychiatric conditions that could influence coping patterns.
- Mothers whose children had comorbid developmental disabilities other than ASD.

Participants represented diverse sociodemographic backgrounds in terms of age, education, employment status, and family structure, providing a broad view of coping strategies across varied caregiving situations.

Instruments

1. Socio-Demographic Information Sheet: A structured form was used to collect information on the mother's age, education, marital status, employment, family type, and child-related details such as age, ASD diagnosis duration, and therapy involvement.

2. Coping Strategies Scale: Coping strategies were assessed using an adapted scale consisting of four major domains commonly reported in ASD caregiving research:

- **Problem-Focused Coping**
- **Emotion-Focused Coping**
- **Seeking Social Support**
- **Avoidance/Withdrawal Coping**

3. Emotional Difficulty Screening Tool: A brief screening tool consisting of two questions was used to identify mothers experiencing emotional difficulty. A total score ≥ 3 indicated notable emotional difficulty. The tool has previously demonstrated good sensitivity and specificity in parental mental health research.

Data Collection Procedure

Data were collected over a period of two months through autism therapy centers, support groups, and online parent communities. Mothers were briefed about the study purpose, and informed consent was obtained prior to participation. They completed the questionnaire independently in either paper or digital format. Confidentiality and anonymity were strictly maintained, and participation was entirely voluntary.

Ethical Considerations

Ethical approval was obtained from the Institutional Review Committee. Participation involved no physical or psychological risk. Mothers were informed that they could withdraw from the study at any time without consequence. All information was kept confidential and used solely for academic purposes.

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Tools of Analysis

Data were analyzed using descriptive and inferential statistical methods:

- **Descriptive statistics** (mean, SD, frequency, percentage) were used to summarize coping patterns.
- **Reliability analysis** using Cronbach's alpha assessed internal consistency of the coping scale.
- **Prevalence estimation** determined the percentage of mothers experiencing emotional difficulty.
- **Univariate logistic regression** assessed the independent association between each coping strategy and emotional difficulty.
- **Multivariate logistic regression** controlled for demographic factors such as mother's age, marital status, education, and child's age.
- A **p-value < 0.05** was considered statistically significant.

Objectives:

- To explore the different coping strategies adopted by mothers of autistic children, including problem-focused, emotion-focused, social support-seeking, and avoidance coping.
- To identify the proportion of mothers experiencing emotional difficulty while caring for autistic children.
- To examine how different coping strategies are related to emotional difficulty among mothers.
- To determine which coping strategies, contribute most to emotional difficulty when caring for autistic children.
- To assess the overall consistency of the coping strategy measures used in the study.

RESULTS

Descriptive Statistics of Coping Strategies

Descriptive analysis was conducted to understand the overall coping patterns among mothers of autistic children. Means, standard deviations, and reliability coefficients were computed for each coping domain to identify areas of higher or lower utilization. As shown in **Table 1**, mothers reported the highest use of **problem-focused coping, positive approach, and seeking social support**, indicating frequent engagement in planning, structuring routines, and seeking guidance from family members or professionals. Emotion-focused coping also showed moderate usage, reflecting the psychological need for internal emotional regulation when managing ASD-related challenges. Avoidance-based coping strategies such as denial, withdrawal, or emotional disengagement were used less frequently but still present within the sample. The Cronbach's alpha values between 0.70 and 0.87 indicate strong internal consistency for the coping tool.

Table 1. Descriptive Statistics of Coping Strategies Adopted by Mothers

Coping Strategy Factor	No. of Items	Mean	SD	Median	Cronbach's α
Positive Approach	10	1.92	0.58	1.90	0.87
Problem Solving	4	1.88	0.63	1.87	0.82
Seeking Social Support	6	1.84	0.64	1.83	0.79
Prayer / Reflection	7	1.59	0.63	1.62	0.81
Avoidance / Withdrawal	7	1.67	0.61	1.72	0.77
Resignation	4	1.64	0.65	1.60	0.75
Denial	3	1.69	0.64	1.75	0.70
Assertive Problem Solving	4	1.67	0.64	1.75	0.68

Interpretation

The descriptive results show that mothers rely on a balanced mix of coping strategies, with slight variations between adaptive and maladaptive approaches. The highest mean scores were seen in Positive Approach (M = 1.92), Problem Solving (M = 1.88), and Seeking Social Support (M = 1.84). These findings indicate that mothers frequently use constructive coping behaviors such as planning, organizing tasks, and reaching out to others for assistance. The consistently high reliability scores ($\alpha = 0.79-0.87$) further confirm that these subscales were interpreted in a stable and meaningful way by the participants. Among emotion-focused strategies, Prayer/Reflection also showed moderate usage (M = 1.59), suggesting that many mothers draw on spiritual or internal emotional regulation to handle challenges. In contrast, avoidance-type coping strategies such as Avoidance/Withdrawal, Resignation, and Denial demonstrated relatively lower but still notable mean values (M = 1.64–1.69). This indicates that while maladaptive coping is less dominant, it is still present and may influence emotional functioning. Overall, the descriptive statistics reflect a diverse coping pattern, with a stronger inclination toward adaptive strategies.

Prevalence of Emotional Difficulty

To determine the proportion of mothers experiencing emotional strain, scores from the Emotional Difficulty Screening Tool were analyzed. As shown in **Table 2**, **28% of mothers** scored above the cutoff value, indicating notable emotional difficulty. This finding reflects the demanding nature of ASD caregiving, which often involves managing behavioral needs, therapy schedules, communication barriers, and public misunderstandings. The 95% confidence interval suggests that emotional difficulty is a meaningful concern within this population, emphasizing the need for targeted support services.

Table 2. Prevalence of Mothers Meeting Screening Cut-Offs

Screening Variable	Cut-off Score	n Above Cut-off	Total (N)	Prevalence (%)	95% CI
Emotional Distress	≥ 3	28	100	28.0%	19.2–36.8%
Anxiety Symptoms	≥ 3	25	100	25.0%	16.7–33.3%

Interpretation

The prevalence analysis shows that a considerable proportion of mothers met the screening cutoff for emotional difficulty, with 28% scoring above the threshold. This indicates that nearly one-third of the sample may be experiencing notable emotional challenges. The confidence interval (19.2%–36.8%) suggests that this prevalence is statistically meaningful and not due to chance. This finding emphasizes the importance of understanding mothers' emotional states and the coping strategies they rely on. It also highlights the need for supportive resources and interventions tailored to maternal well-being.

Association Between Coping Strategies and Emotional Difficulty

Univariate logistic regression was conducted to examine the independent association of each coping strategy with emotional difficulty. Table 3 shows that maladaptive coping strategies—including avoidance/withdrawal, resignation, and denial—were strongly associated with higher emotional difficulty among mothers of autistic children. This indicates that when mothers disengage emotionally or avoid confronting caregiving challenges, their likelihood of experiencing emotional distress increases substantially. Emotion-focused coping also exhibited a significant association, suggesting that mothers

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who rely heavily on internal emotional processing may be doing so in response to heightened caregiving demands. In contrast, adaptive coping strategies such as problem-focused coping and seeking social support were not statistically associated with emotional difficulty in the unadjusted model.

Table 3. Association Between Coping Strategies and Emotional Difficulty

Coping Strategy	High Difficulty (n=28)	Low Difficulty (n=72)	OR	95% CI	p-value
Positive Approach	1.93 ± 0.39	1.91 ± 0.72	1.06	0.57–1.99	0.78
Problem Solving	1.85 ± 0.48	1.89 ± 0.83	0.91	0.52–1.60	0.72
Seeking Social Support	1.82 ± 0.51	1.86 ± 0.78	0.90	0.51–1.62	0.65
Prayer / Reflection	1.72 ± 0.58	1.43 ± 0.67	2.13	1.13–4.02	0.02
Avoidance	1.89 ± 0.44	1.42 ± 0.67	4.56	2.05–10.13	<0.01
Resignation	1.88 ± 0.50	1.39 ± 0.72	3.68	1.82–7.46	<0.01
Denial	1.90 ± 0.50	1.46 ± 0.71	3.31	1.67–6.57	<0.01
Assertive Problem Solving	1.71 ± 0.54	1.63 ± 0.75	1.23	0.69–2.22	0.49

Interpretation

The unadjusted logistic regression results reveal that maladaptive coping strategies—specifically Avoidance/Withdrawal (OR = 4.56), Resignation (OR = 3.68), and Denial (OR = 3.31)—are strongly associated with higher emotional difficulty among mothers. These coping styles significantly increase the likelihood of emotional challenges, suggesting that disengaging or withdrawing from difficult situations may contribute to emotional instability.

Emotion-focused coping shows a moderate association (Prayer/Reflection OR = 2.13), indicating that excessive reliance on emotional regulation alone may reflect underlying emotional struggle. In contrast, adaptive strategies such as Positive Approach, Problem Solving, and Seeking Social Support showed no significant association, implying that while helpful for daily functioning, they may not directly protect against deeper emotional difficulty.

Adjusted Associations with Emotional Difficulty

To account for potential confounding factors such as mother's age, education, marital status, and child's age, multivariate logistic regression was performed. As shown in Table 4, avoidance-based coping remained a significant predictor of emotional difficulty even after adjustments. This suggests that maladaptive coping has a direct influence on emotional distress regardless of background factors. Social support approached significance, indicating that while support helps, its effectiveness may depend on quality, availability, and level of understanding provided to mothers. Problem-focused and positive approach strategies did not show a significant protective effect in the adjusted model, suggesting that ASD caregiving challenges may require more than routine problem-solving efforts to reduce emotional strain.

Table 4. Multivariate Logistic Regression: Predictors of High Emotional Difficulty

Predictor	AOR	95% CI	p-value
Positive Approach	1.19	0.53–2.68	0.67
Problem Solving	0.75	0.35–1.59	0.45
Seeking Social Support	2.26	0.96–5.34	0.06
Prayer / Reflection	2.55	1.14–5.67	0.02

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Predictor	AOR	95% CI	p-value
Avoidance / Withdrawal	3.66	1.43–9.40	<0.01
Resignation	3.25	1.38–7.66	<0.01
Denial	2.72	1.18–6.21	0.02
Assertive Problem Solving	1.60	0.75–3.38	0.22
Age	1.02	0.98–1.07	0.31
Marital Status	1.58	0.75–3.34	0.23
Education Level	1.41	0.68–2.91	0.35

Interpretation

After adjusting for demographic variables (age, education, marital status), the findings remained consistent, with avoidance-based strategies continuing to predict emotional difficulty. Avoidance/Withdrawal (AOR = 3.66), Resignation (AOR = 3.25), and Denial (AOR = 2.72) were significant predictors even after controlling for confounders. This reinforces the conclusion that these coping styles contribute to higher emotional vulnerability among mothers. Social support approached significance (AOR = 2.26; $p = 0.06$), suggesting that the quality or availability of support may influence emotional well-being, though not strongly in this sample. Adaptive strategies showed no significant adjusted effect, indicating that emotional outcomes are influenced more by maladaptive patterns than by the mere presence of positive coping.

Reliability Analysis

Cronbach's alpha was calculated to determine the internal consistency of the coping scale used in the study. As shown in Table 5, all domains demonstrated acceptable to high reliability, with alpha coefficients ranging from 0.70 to 0.87. These results confirm that the coping tool was psychometrically sound and appropriate for assessing coping behaviors among mothers of autistic children.

Table 5. Example Item Reliability (Cronbach's Alpha Calculation Table)

Item	Mean	Variance
Planning ahead	2.1	0.57
Seeking support	1.9	0.67
Using reflection/prayer	2.0	0.30
Avoiding the issue	1.8	0.57
Sum of Variances	—	2.10
Total Score Variance	—	5.90
Cronbach's α	—	0.86

Interpretation

The reliability analysis demonstrated that all coping subscales had acceptable to strong internal consistency, with Cronbach's alpha values ranging from 0.70 to 0.87. This indicates that the coping items within each domain measured the constructs reliably. The high alpha values for Positive Approach and Problem Solving (0.82–0.87) reflect particularly good internal coherence. These results confirm that the coping scale used in this study was psychometrically sound and appropriate for analyzing coping patterns among mothers.

FINDINGS

The study revealed several important insights into the coping strategies adopted by mothers of autistic children. Mothers frequently used **problem-focused coping**, such as planning, organizing routines, and seeking practical solutions to manage daily challenges related to

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autism. **Emotion-focused coping**, including acceptance, reflection, and prayer, was also commonly practiced, indicating a need for emotional self-management when faced with situations that cannot be immediately changed. **Seeking social support** from family members, professionals, and peer groups emerged as another widely used strategy, highlighting the value mothers place on shared understanding and guidance.

Despite these adaptive approaches, a notable proportion of mothers—**28%**—reported experiencing emotional difficulty. This finding reflects the demanding nature of autism caregiving, which often involves managing behavioral differences, communication challenges, and constant decision-making.

A key finding of the study is that **avoidance-based coping**, such as denial, withdrawal, or emotional disengagement, was strongly linked to higher emotional difficulty. Even when considering personal and family characteristics, mothers who relied on avoidance were more likely to experience emotional strain. This suggests that such coping strategies may offer temporary relief but contribute to long-term emotional challenges.

Emotion-focused coping showed mixed results. While it was used frequently, its connection to emotional difficulty appeared to vary depending on the intensity of caregiving demands. In contrast, problem-focused coping and social support did not show a strong direct connection to emotional difficulty, suggesting that while these strategies are helpful for daily management, they may not fully protect mothers from deeper emotional strain.

Overall, the findings point to the need for targeted support that enhances adaptive coping, promotes strong social support networks, and reduces reliance on avoidance-based patterns. These results underline the importance of providing mothers with resources that strengthen both emotional resilience and caregiving capacity.

Suggestions:

Based on the findings of the study, it is recommended that greater emphasis be placed on strengthening adaptive coping among mothers of autistic children. Programs that focus on enhancing problem-solving skills, routine structuring, and behavioral management can support mothers in navigating daily caregiving demands more effectively. At the same time, accessible emotional support services—such as counseling, parent support groups, and community-based initiatives—are essential to help mothers process and manage their internal emotional responses. Encouraging strong social support networks, including involvement of family members, peers, and trained professionals, can reduce feelings of isolation and provide sustained guidance. It is also important to create awareness about the negative impact of avoidance-based coping and provide mothers with healthier alternatives such as mindfulness, acceptance strategies, and stress-reduction techniques. Finally, expanding autism-friendly services, improving early intervention access, and promoting community awareness can further support mothers in their caregiving journey, contributing to better emotional well-being and overall family functioning.

Recommendations

The study recommends the development of structured support systems tailored specifically to the needs of mothers of autistic children. Health professionals, educators, and community organizations should collaborate to provide comprehensive programs that combine practical training in behavior management with emotional support services. Regular workshops, skill-building sessions, and parent-coaching models can help mothers strengthen adaptive coping

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strategies and reduce reliance on avoidance-based approaches. It is also recommended that policymakers expand the availability of early intervention services, therapy resources, and autism-friendly environments to ease caregiving demands. Establishing accessible peer-support networks can enhance social connectedness and give mothers opportunities to share experiences and solutions. Furthermore, community awareness initiatives are essential to reduce stigma and create more understanding environments for families. Overall, these recommendations underscore the need for a holistic support framework that empowers mothers, promotes emotional well-being, and enhances the quality of care provided to autistic children.

CONCLUSION

This study provides meaningful insights into the coping strategies adopted by mothers of autistic children and highlights the complex emotional realities associated with ASD caregiving. The findings show that mothers frequently employ adaptive strategies such as problem-focused coping, positive approaches, and seeking social support. These strategies reflect their commitment to creating structure, seeking solutions, and managing daily caregiving challenges. However, despite the use of these constructive methods, a considerable proportion of mothers—28%—experience notable emotional difficulty, demonstrating the persistent impact of the caregiving role.

Most importantly, maladaptive coping strategies such as avoidance, withdrawal, and denial emerged as significant predictors of emotional difficulty, even after adjusting for demographic variables. This indicates that emotional distress is strongly influenced by coping style, particularly when mothers disengage or suppress their emotions. The study emphasizes the need for programs and interventions that strengthen effective coping, reduce reliance on maladaptive patterns, and provide emotional and practical support tailored to the needs of mothers caring for autistic children. Overall, the findings contribute to a deeper understanding of maternal coping and underscore the importance of creating supportive environments that enhance resilience and well-being.

Limitations of the Study

Although the study provides valuable insights into the coping strategies of mothers of autistic children, several limitations must be acknowledged. First, the study utilized a **purposive sampling method**, which may limit the generalizability of the findings to all mothers of autistic children. The sample may not fully represent diverse socioeconomic, cultural, or geographic backgrounds. Second, the research relied on **self-reported questionnaires**, which can introduce response bias, including social desirability or underreporting of maladaptive coping behaviors. Third, the cross-sectional design captures coping at a single point in time and does not reflect how coping patterns may change as the child grows or as the mother gains more experience. Additionally, the study did not include fathers or other caregivers, limiting the understanding of coping within the broader family system. Finally, emotional difficulty was measured using a brief screening tool rather than a comprehensive diagnostic measure, which may not capture the full complexity of maternal emotional well-being.

Future Scope

Future research can expand upon these findings by using **longitudinal designs** to track how coping strategies evolve across different developmental stages of the child. Including **larger and more diverse samples** can enhance generalizability and allow for comparisons across socioeconomic levels, family types, and cultural groups. Further studies should also explore

the coping patterns of fathers, grandparents, and other caregivers to provide a more holistic understanding of family adaptation to ASD. Incorporating qualitative methods—such as in-depth interviews or focus groups—may help uncover deeper emotional experiences, contextual factors, and culturally specific coping practices. Additionally, future research should examine the effectiveness of structured interventions, such as parent training programs, support groups, and mindfulness-based therapies, in improving coping and reducing emotional difficulty among mothers. Exploring the role of community awareness, healthcare support, and early intervention services can also provide important insights for policy development and family-centered services.

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Conflict of Interest

The author(s) declared no conflict of interest.

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