

Scientific article

UDC 159.9.07

<https://doi.org/10.21702/rpj.2024.2.6>

# Parental Burnout and Proactive Coping Behavior of Mothers Raising a Child with Autism Spectrum Disorder

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## Abstract

**Introduction.** Currently, a significant number of children with autism spectrum disorders (ASD) have been identified. The appearance of a child with such a disorder in a family creates an unfavorable situation for parents and contributes to parental burnout.

**Methods.** The sample consisted of 75 mothers who raised children with ASD (age of the interviewees  $36.52 \pm 6.54$  years, age of the children  $6.1 \pm 1.72$  years). The Parental Burnout Questionnaire (I. N. Efimova) and the Proactive Coping Behavior Questionnaire (E. Greenglas, R. Schwarzer, S. Taubert, adapted by E. S. Starchenkova) were used for diagnosis. The KRUSkal-Wallis test and regression analysis were used for statistical processing. **Results.** It was found that mothers raising two children are less characterized by depersonalization than mothers with one or three children, one of whom suffers from ASD. A predictor that reduces emotional exhaustion and depersonalization is proactive coping. The cause of increased depersonalization is the search for instrumental support, without actually reinforcing it in the actions of caring for a sick child. Proactive parenting, strategic planning, and seeking emotional support are the real parenting accomplishments.

**Discussion.** Parental burnout of mothers raising a child with ASD is determined in most cases by a lack of proactive coping. Parental burnout has a multifactorial origin and

occurs in response to a prolonged imbalance between stressors and mother's resources. The obtained data indicate the need to create programs of psychological support for mothers raising a child with ASD. Programs should aim to develop parental competence and proactive coping to prevent burnout.

## Keywords

autism spectrum disorder, parental burnout, family situation, child-parent relationships, depersonalization, emotional exhaustion, proactive coping, coping behaviors

## Financing

The study was carried out within the framework of the University Development Program for 2021-2030 as part of the implementation of the strategic academic leadership program "Priority 2030" project "Psychological Health of Women Raising a Child with Developmental Disabilities»

## For citation

Kuzmina, A. S., Stoyanova, I. Y., Krivoshey, K. O., Leshchinskaya S. B. (2024). Parental burnout and proactive coping behavior of mothers raising a child with autism spectrum disorder. *Russian Psychological Journal*, 21(2), 101–118, <https://doi.org/10.21702/rpj.2024.2.6>

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## Introduction

Data from Rosstat of Russia for 2023 indicate that the number of children in the Russian Federation is about 31 million, of whom more than 300 thousand have been diagnosed with autism spectrum disorders (ASD). The study of manifestations in parental burnout of mothers who have a child with ASD is associated with the presence of a significant number of such children with this disease.

The appearance of a child with ASD in the family creates a special situation: the child and his/her environment are under the influence of severe stress caused by the disease. Parents may experience negative emotions - despair, guilt, feelings of inferiority. Anxiety and worry about the child's health, excessive efforts to care for the child affect the decreased ability to qualitatively meet their own needs. Family and parental dysfunction, as well as factors contributing to dysfunction, can contribute to emotional and physical exhaustion, decreased strength, and, ultimately, parental burnout (Fadeeva, 2021, Konischeva, 2022). Stress scores are higher in families raising children with ASD than in

families raising children with other developmental disabilities, such as Down syndrome or cerebral palsy (Hayes & Watson, 2013).

### ***Factors influencing the emergence of burnout in parents raising children with ASD***

Symptomatology of autism spectrum disorders affects key areas of functioning, manifests early in life, and persists throughout life. ASD is a systemic and intractable disorder that contributes to the increasing number of problems parents face when raising children with ASD (Morozov, Morozova, TaASDova, Chigrina, 2023).

Current research suggests that key deficits in autistic disorders become sources of stress and pave the way for parental burnout (Morozov, Morozova, TaASDova, Chigrina, 2023). The deficits are, first of all, the child's difficulties in understanding emotions, communicative intentions of others and social rules, as well as difficulties in social interaction and communication. Delayed speech development often results in a child with ASD having difficulty asking for help, expressing his or her own wishes, or refusing something. Furthermore, parental anxiety, which reduces resistance to stress, is caused by the poorly formed ability of children with ASD to perform self-care and hygiene procedures. The selectivity of children with ASD in eating, the preference for eating alone, aggravates social isolation and creates additional difficulties for the family. Furthermore, children with ASD are characterized by sleep disorders, manifested in the inability to fall asleep at the right time. All of the above characteristics are physically exhausting and emotionally draining for family members.

### ***Peculiarities of Parental Attitudes towards a child with ASD***

The attitude of parents towards a child with ASD due to the large number of difficulties faced by parents and the high level of family tension becomes special (Pervushina, Kiseleva, MuASDhova, Dorosheva, 2021).

Mothers' attitudes towards children with autism spectrum disorder are contradictory. T. N. Vysotina (2012) found that maternal attitude combines emotional acceptance and rejection of the child at the same time. Researchers have also identified emotional detachment from children and a high level of maternal anxiety, which contribute to manifestations of parental burnout (Gorina, Grinina, Rudzinskaya, 2019). Mothers raising a child with an autism spectrum disorder have less control over their actions, downplay the severity of the condition, and in most cases do not comply with the doctor's recommendations (Bogacheva, Ivanov, 2019). Attitudes towards the family role of the mother of a child with ASD are contradictory. Negativism, excessive concentration on the child, and emotional distance are expressed (Bragina, Belozeroва, Prokofieva, 2021).

Considering the causes of parental burnout, G. G. Phillipova (2017) suggests its interrelation with the mother's demands to herself, which are determined by social patterns. Perception of parental functions as a form of labor duty also leads to maternal burnout (Bazaleva, 2009).

Parental burnout as a multifactorial phenomenon occurs in response to a long-term imbalance between stressors and parental resources (Kisova, Koneva, 2022). Raising a child with ASD is a risk factor that contributes to the symptoms of parental burnout. That said, burnout can be prevented if parents have psychological resources (Kwiatkowski & Sekułowicz, 2017; Lebert-Charron, Dorard, Boujur, & Wendland, 2018; Mikolajczak, Gross & Roskam, 2021; Mikolajczak, Raes, Avalosse & Roskam, 2017).

### ***Proactive coping behavior***

Coping strategies for mothers raising children with ASD are related to the ability of mothers to cope with stressful situations. Coping manifests itself in psychological coping, including a set of ways and techniques of coping with manifestations of distress. Coping is a diverse form of human activity, covering all types of interaction with difficulties that need to be resolved, avoided or brought under control (Korytova, Korytova, Eremina, 2019; Eremina, 2017).

Cooperative behavior is a conscious regulation designed to change the existing life situation (Vodopyanova, 2009; Vodopyanova, Starchenkova, 2008). The main goal of this regulation is to adapt the needs of the personality to the proposed conditions and to change the conditions for the sake of satisfaction of internal needs. To obtain the result, the personality must take an active position, whereas any other position will not lead to a complete change of the situation and obtaining positive emotions (Vodopyanova, 2009; Vodopyanova, Starchenkova, 2008).

Proactive coping behavior is predominantly future-oriented and consists of efforts to shape and develop general personality resources (Konischeva, 2022). Proactive coping promotes the setting of personally meaningful goals and can initiate constructive courses of action. Proactive coping increases a person's overall potential for activity and stress tolerance (Podobina, 2005). The proactive level of coping reflects the anticipation of future uncertainty in all its facets and the variability of life's course. Proactive coping reduces mental tension due to thoughtful accumulation of resources, their distribution, and combination. The process of working with resources is dynamic, always colliding person and situation, subjectivity with objectivity (Starchenkova, 2009; Belinskaya, Vecherin, 2018; Belinskaya, Vecherin, Agadullina, 2018). Proactive coping is built on goal setting and proactive self-regulation, which help to achieve goals and allocate resources correctly.

Another important aspect of proactive coping is seeking instrumental and emotional support. It is also aimed at recognizing and preventing possible stresses. Having identified possible risks, one can properly allocate resources, prepare for their accumulation at the right time (Eremina, 2015; 2016).

Proactive coping is a resource component. Therefore, it is important and necessary to study both psychological factors that contribute to parental burnout in mothers raising a child with ASD and the proactive coping behavior. We hypothesized that the use of proactive coping behavior contributes to reducing parental burnout in mothers raising a child with autism spectrum disorder.

### ***Purpose of the study***

The purpose of the study is to identify the relationship between parental burnout and proactive coping behavior in mothers raising a child with ASD.

The hypothesis of the study was the assumption of a positive role of proactive coping behavior in reducing symptoms of parental burnout.

## **Methods**

### **Sampling**

A total of 127 mothers with children with ASD participated in the study on a voluntary basis. Women who raised more than 3 children were excluded from the sample, as well as women who were in common-law marriages or additionally had a child with other conditions. Furthermore, mothers whose children had had ASD for less than 1 year were excluded, as the short duration of the disease could have influenced the results of the study.

The final sample consisted of 75 mothers aged  $36.52 \pm 6.54$  years with a child with preschool-age autism spectrum disorder. The age of the children was  $6.1 \pm 1.72$  years. Of these: 16 girls, 59 boys.

The empirical study was conducted on the basis of the KGBU "Altai Krai Center for Psychological, Pedagogical and Medico-Social Assistance".

The questionnaire to describe the characteristics of the sample included information on age, marital status, education level, availability of work and number of children (Table 1).

**Table 1**

*Description of the study sample*

Parameter	Significance	Amount of people	%
Age	up to 30 years old	16	21
	under 35	36	48
	over 35	23	31
	Average	5	6
Level of education	secondary vocational	28	37
	Higher	42	57

Parameter	Significance	Amount of people	%
Marital status	married	52	69
	unmarried	23	31
Job availability	Yes	16	21
	No	59	79
Number of children	1	27	36
	2	37	49
	3	11	15

### **Research methods**

In this work, two diagnostic tools were used:

1. "Parental Burnout" questionnaire by I.N. Efimova. The questionnaire was used to study the level of parental burnout and its symptoms: emotional exhaustion, depersonalization, reduction of parental achievements (Efimova, 2013).
2. The Proactive Coping Inventory (PCI) was developed by E. Greenglass, R. Schwarzer and S. Taubert in adaptation of E. Starchenkova. S. Taubert, adapted by E. S. Starchenkova. It was used to study the following types of proactive coping: proactive coping, reflexive coping, strategic planning, preventive coping, search for instrumental support, and search for emotional support (Starchenkova, 2009). Psychodiagnostics with the help of the questionnaire allows us to obtain complete information about the peculiarities of proactive coping of mothers.

### **Research procedure**

The survey was conducted in individual written form. The duration of the survey was 30-40 minutes. After participating in the study, participants were offered to receive a psychologist's consultation on the results of the questionnaires.

### **Data analysis**

Statistical processing of the data was carried out in the SPSS Statistics 23 program. The nonparametric KRUSkal-Wallis test was used to identify differences between groups, regression analysis was used to identify predictors of parental burnout symptoms.

## **Results**

The KRUSkal-Wallis test was used to identify differences in the expression of parental burnout symptoms and types of proactive coping behavior depending on

sociodemographic variables of women raising a child with autism spectrum disorder. Socio-demographic characteristics (age, level of education, marital status, employment, number of children) were included as a grouping factor, and symptoms of parental burnout and types of proactive coping behavior were included as independent variables.

Significant differences were found for the depersonalization parameter in mothers with different numbers of children (Table 2). No significant differences were found for other sociodemographic parameters.

**Table 2**

*Comparative analysis of parental burnout symptoms in mothers with different numbers of children*

Symptoms of parental burnout	Number of children	Average rank	$\chi^2$	p
Emotional exhaustion	1	40,02	337	0,185
	2	33,89		
	3	46,86		
Depersonalization	1	41,81	5,72*	0,05
	2	32,39		
	3	47,50		
Reduction in parental achievement	1	33,11	3,41	0,181
	2	42,69		
	3	34,23		

**Note.** p - level of reliability of differences, "\*" -  $p < 0.05$

Mothers raising two children are less depersonalized than mothers with one or three children. Depersonalization is manifested in impersonal and formal character of mother's relations with children. Caring for children at the appearance of this symptom of emotional burnout is expressed in the performance of formal tasks, for example, "to dress" or "to feed". The presence of a second normotypical child in the family is a factor restraining the development of the depersonalization symptom. In a relationship with a

normotypical child, a woman can fulfill a number of emotional needs that are frustrated in a relationship with a child with ASD. Mothers raising three children have the highest level of depersonalization, which may be related to the large number of tasks in a large family, especially in the presence of a child with ASD.

In the next stage of the study, a linear regression analysis was performed, in which types of proactive coping behavior were included as independent variables and indicators of parental burnout symptoms were added to the model as dependent variables using the inclusion method with a probability of  $F = 0.05$ . As a result, three reliable regression models were obtained for symptoms of parental burnout: emotional exhaustion, depersonalization, and reduction of parental achievements.

As shown in Table 3, proactive cooperation is the factor that reduces emotional exhaustion.

**Table 3**  
*Predictors of emotional exhaustion (n = 75)*

Predictors	B	Beta	p
Proactive coping	-0,603	-0,396	0,004
Reflexive coping	0,185	0,111	0,386
Strategic planning	-0,572	-0,154	0,228
Preventive coping	-0,110	-0,061	0,678
Finding instrumental support	0,580	0,237	0,065
Finding emotional support	-0,436	-0,138	0,292
(Constant)	45,127		0,01

Model scores:  $R^2 = 0.296$ ;  $R^2_{adj} = 0.234$ ;  $F = 4.761$ ;  $p = 0.001$

Therefore, manifestations of emotional exhaustion in mothers are associated with a lack of resources to set and achieving personal goals.

Proactive coping is a significant resource for coping with emotional exhaustion. Goal-setting, self-regulation, planning, and activation of resources to achieve a goal helps a mother raising a child with autism spectrum disorder to cope with emotional oversaturation, feelings of emptiness, and exhaustion of her own emotional resources.



A linear regression model was developed for the symptom of parental burnout - depersonalization. The factor reducing depersonalization is "Proactive coping" and the factor contributing to depersonalization manifestations is "Finding instrumental support". The contributing factor to depersonalization is:

- (a) Lack of resources to set and achieve personal goals;
- b) obtaining information for coping with stress (Table 4).

**Table 4**  
*Predictors of depersonalization (n = 75)*

Predictors	B	Beta	p
Proactive coping	-0,245	-0,363	0,011
Reflexive coping	0,088	0,119	0,367
Strategic planning	-0,391	-0,237	0,074
Preventive coping	0,167	0,208	0,170
Finding instrumental support	0,403	0,371	0,006
Finding emotional support	-0,255	-0,182	0,179
(Constant)	9,271		0,01

Model scores:  $R^2 = 0.499$ ;  $R^2_{adj} = 0.249$ ;  $F = 3.759$ ;  $p = 0.003$

These indicators reflect contradictory trends related to the search for instrumental support, which does not prevent, but, on the contrary, contributes to the manifestations of depersonalization. It seems that mothers of children with ASD spend a lot of effort and energy to find information about the child's treatment, the causes of the disease, and to get advice about caring for the child. At the same time, interaction with the child is characterized by emotional distancing, formal performance of parental duties. It can be assumed that the mother's experience of long-term stress associated with a complex and difficult-to-correct diagnosis, insufficient resources, contradictions in instrumental support use, and the inability to put the information and advice received into practice contribute to the development and maintenance of the depersonalization symptom. At the same time, proactive coping behavior, goal-setting, self-regulation, ability to plan and activate resources to achieve a goal help a mother raising a child with autism spectrum disorder to cope with depersonalization symptoms.

Further, we obtained a linear regression model for the symptom of parental burnout "Reduction of parental achievements". The resource component of parental achievements is "Proactive coping", "Strategic planning", "Search for emotional support". At the same time, the reduction of parental achievements contributes:

- (a) Lack of resources to set and achieve personal goals;
- b) lack of a well thought out plan of action;
- c) a lack of seeking emotional support and socializing with others;
- d) obtaining information for coping with stress (Table 5).

**Table 5**  
*Predictors of parental achievement reduction (n = 75)*

Predictors	B	Beta	p
Proactive coping	0,464	0,451	0,001
Reflexive coping	-0,236	-0,209	0,088
Strategic planning	0,615	0,245	0,046
Preventive coping	-0,076	-0,062	0,654
Finding instrumental support	-0,437	-0,264	0,031
Finding emotional support	0,638	0,299	0,018
(Constant)	18,345		0,001

Model parameters:  $R^2 = 0.601$ ;  $R^2_{adj} = 0.361$ ;  $F = 6.401$ ;  $p = 0.001$

Mothers have a decreased sense of competence in the fulfillment of the parental role, as well as dissatisfaction with themselves. The need for emotional support is significant, but at the same time, in most cases mothers do not discuss with close people the difficulties that arise in interaction with the child and in the distribution of family responsibilities. In addition, mothers often conceal the presence of the child's illness.

## Discussion

The birth and upbringing of a child with autism spectrum disorder is associated with the family's experience of chronic stress and with the development of symptoms of parental burnout. Emotional burnout is especially relevant for mothers.

The study obtained data that the symptoms of parental burnout are not related to the parameters of age, education level, marital status, and job availability. Mothers who raise two children are less susceptible to the emergence of a depersonalization symptom than mothers with one or three children. The presence of a second normotypical child in the family is a factor that inhibits the development of the depersonalization symptom. In a relationship with a normotypical child, a woman can fulfill several emotional needs that are frustrated in a relationship with a child with ASD. Having a normotypical child in the family allows parents to realize frustrated parental attitudes, get an emotional response and feel parental competence. Having many children is also associated with the risk of depersonalization, which requires further research.

The results of the regression analysis suggest that the lack of resources for setting and achieving personal goals is a predictor of mothers' emotional exhaustion. Depersonalization is associated with a lack of resources for setting and achieving personal goals and an orientation toward instrumental coping. The lack of resources to set and achieving personal goals, lack of a clearly thought-out, goal-oriented action plan, inconsistencies in seeking emotional support, and the desire to obtaining information to cope with stress but not actually apply it when raising a child with ASD contribute to the reduction of parental achievement. Proactive coping of mothers of children with disabilities is characterized by active coping, planning, searching for instrumental support (Kurowska, Kózka, Majda, 2021).

Parents of children with ASD experience chronic fatigue, which prevents them from coping with responsibilities, as well as meeting both the needs of children and their own (Bobrova, Dovbnaya, Morozova, Sotova, 2022; Pustovaya, Pustovaya, Gutkevich, 2021). Robinson M., Neece (2015) note high levels of parental stress in families raising a child with developmental disabilities. Often parents' perceptions of the real needs of children with ASD and opportunities to meet the needs do not always correspond to reality (Geiger, Smith, Creaghead, 2002; Thomas, Elli, McLaurin, 2007; Wallace-Watkin, Whitehouse, Waddington, 2021).

The mother's attitude toward a child with ASD acts as an important factor of parental burnout (Ilyina, Gurieva, 2019; Anikina, Pshonova, 2019; Efimova, 2013). Therefore, the relationship between emotional burnout and parental neglect, violence, and avoidance has been revealed (Maslach & Leiter, 2016; Mikolajczak, Gross & Roskam, 2019). Parental burnout has been found to be often underdiagnosed, while it can be devastating to the functioning and health. Researchers have categorized risk factors for manifestations of parental burnout as suicidal ideation, sleep disturbances, and subdepressive behaviors. Parental burnout contributes to increased conflict in the family, as an well as increased

incidence of violence against the child (Balandova, 2020; Mikolajczak & Roskam, 2018; Mikolajczak & Roskam, 2020; Mikolajczak, Aunola, Sorkkila & Roskam, 2023).

The problem of parental burnout of fathers is also of interest. Today, partnership families oriented on equal contribution of spouses to the family well-being are widely spread, it is shown that parental burnout of fathers has a moderately positive relationship with the appearance of deviations in the emotional sphere in the child, as well as the emergence of difficulties associated with social interaction (Lee Pace, Lee, Knauer H, 2018), this problem requires further study.

Emotional exhaustion, muted emotional reactions, decreased own resources, formal compliance with parental responsibilities, and decreased sense of parental competence are psychological features defined by a lack of proactive coping. The lack of proactive coping manifests itself in the inability to set goals and use available resources for positive change in a problematic situation. Mothers raising children with autism spectrum disorders often experience uncertainty about the correctness of parenting, which is accompanied by feelings of guilt, helplessness, shame, fear, including fear of seeking help from professionals. These reasons are the basis for the development of chronic stress and symptoms of parental burnout. The obtained results are consistent with the findings of Crnic, Ross (2017), who noted the relationship of parental burnout and parent's self-efficacy.

Mothers of children with ASD often use nonconstructive coping strategies of mental withdrawal from the problem, denial, behavioral withdrawal, and taking sedatives (Stallman, Beaudequin, Hermens, & Eisenberg, 2021).

The notion that proactive coping behavior reduces mental tension by means of thoughtful accumulation of resources, their distribution and combination is considered in a number of publications (Starchenkova, 2009). Our results support the hypothesis about the positive role of proactive coping behavior in reducing symptoms of parental burnout.

### ***Conclusion***

The study developed three regression models of parental burnout symptoms: emotional exhaustion, depersonalization, and reduction of parental achievements. We determined the positive role of proactive coping behavior in reducing the symptoms of parental burnout.

The results of the study indicate the need to create special psychological support programs for mothers raising a child with autism spectrum disorders, aimed at improving parental competence and reducing manifestations of parental burnout.

### ***Limitations of the study***

The limitations of the study are the small sample size, as well as its geographical representation, limited to the territory of Altai Krai. In addition, there is insufficient balance of samples by sociodemographic characteristics, participation in the study only of mothers, and lack of study of parental burnout in fathers.

### **Research Perspectives**

The prospects of the study are related to the expansion of the sample in the aspect of studying child-parent relations in dynamics, personality characteristics of mothers, and family differences in the context of creating comprehensive psychological support programs, including the development of proactive coping behavior, for parents who have children with autism spectrum disorders.

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Received: 28.09.2023

Revised: 01.01.2024

Accepted: 25.02.2024

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**Anna Sergeevna Kuzmina** – research planning, analysis and interpretation of results.

**Irina Yakovlevna Stoyanova** – interpretation of the results, scientific editing of the texts of the sections "Results"; "Discussion of the results" critical revision of the content of the article.

**Kristina Olegovna Krivoshey** – planning and conducting the research, formation of the empirical sample, analysis and interpretation of the results.

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## **Conflict of Interest Information**

The author has no conflicts of interest to declare.