



The Effectiveness of Psychoeducation to Improve the Well-being of Parents Having Children with Autism During the Pandemic

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Abstract

Article Information:

Received August 15, 2021

Revised February 23, 2022

Accepted February 25, 2022

Keywords:

autism spectrum disorder,
group-based parenting
support, well-being,
psychoeducation

This study aimed to determine the role of group-based parenting support training with the psychoeducational method in improving the well-being of parents having children with autism spectrum disorders (ASD) during the pandemic. The participants were 10 parents divided into the psychoeducational group and 12 parents in the control group in one State Special School for Autism in Medan. The instrument used a scale based on seven aspects of subjective well-being, as expressed by White (2010). Furthermore, data analysis was carried out using an independent sample t-test. The results showed that there was no difference in the well-being score between the psychoeducational and control group ($F(1,20) = 0.445$, $t = -0.446$, $p > 0.05$). Meanwhile, the control group had higher well-being score in the post-test ($n = 12$, $M = 103.17$, $SD = 16.596$) than the psychoeducational group ($n = 10$, $M = 100.20$, $SD = 14.148$).

INTRODUCTION

The COVID-19 pandemic has caused several impacts, especially in education, such as online teaching and learning activities (Bozkurt & Sharma, 2020); (Moorhouse, 2020). This is an alternative education system that has been implemented by almost all countries in the world, where parents are involved in the learning process of their children (Cahapay, 2020). Similarly, the learning system for children with neurodevelopmental disorders such as those with ASD takes place at home.

Several studies have shown the obstacles encountered by parents in teaching children with ASD during a pandemic, one of which is a study conducted by Daulay (2021). The results have proven that the teaching and learning activities helped by mothers at home during the pandemic are less than optimal due to the increased maladaptive behavior of children with ASD, lack of knowledge of mothers regarding how to teach children at home, and heavier parenting responsibilities they face at home. Therefore, there is a possibility of creating a negative impact, such as parenting stress. Furthermore, the study carried out in the Philippines (Cahapay, 2020) and Zimbabwe by Majoko and Dudu (2020) proved the heavy burden of parenting that parents experience while their children are studying at home during the pandemic.

Based on Daulay (2021) and coupled with the previous study, it was confirmed that parents of children with ASD experience more parenting stress in caring for their children. This high-stress level was also confirmed by a meta-analysis study conducted by Hayes and Watson (2013), which proved that parents of children with ASD experience higher parenting stress than those having children with normal development or other developmental disorders. In addition to feeling the stress of parenting, they also feel other negative emotions, including decreased well-being. This is evidenced by the previous study carried out by Daulay (2019), (Syahidah & Psi, 2019), and (Malik, 2018). Therefore, well-being is a variable that should be further studied, especially for parents raising children with ASD, because the increase in well-being and lack of parenting stress will positively affect them. Firstly, positive elements such as mental health (Zablotsky, Bradshaw & Stuart, 2013), self-efficacy (Conti, 2015), marital satisfaction (Malik, 2018), accepting the child's condition (Syahidah & Psi, 2019), being grateful (Syahidah, Eva, Viatrie, 2018), receiving social support (Pradana & Kustanti, 2018), sourcing for strategies for coping with stress should be enhanced (Budiarti & Hanoum, 2019).

Secondly, the quality of parenting and interaction between parents and children should be improved. This can be achieved by avoiding showing abusive behavior towards children (Deater-Deckard, 2004) and seeking optimization in providing interventions to children (Mukhtar, 2017). Thirdly, the relationship quality between parents and other families should be enhanced. This is because not all families can accept the presence of a child with ASD, which can affect the warmth of the relationship between parents and the extended family. The impact on the family includes divorce (Hartley et al. 2010) and less harmony (Weiss et al. 2014). According to Daulay (2020), there are three important roles for parents and families in handling children, including 1) caring for children together while at home, 2) establishing good relations with professionals and cooperating with institutions, schools, therapy centres, and hospitals, which are capable of providing services in the fields of education, health, and social affairs, and 3) socializing the condition of children to the community.

One effort to empower parents of children with ASD during the pandemic is to improve their well-being through professional parenting support. According to McKeown (2000, in Mukhtar, 2017), parenting support is an umbrella term often used to describe various supports and interventions provided to parents and other family members and is also known as parenting programs. In the study carried out by Mukhtar (2017), parenting support in a group setting (group-based parenting support) was used to emphasize the stress of parenting experienced by parents of children with ASD. The results showed that the group-based parenting support using the psychoeducational group method had no effect on parenting stress. However, when carried out using the parenting support group method on the level of parenting stress, an effect was seen. Therefore, based on the results, there is an emphasis that group-based parenting support carried out with the psychoeducational group method has no effect.

This is different from the study carried out by (Masson et al. 2012), which showed that for parents in the psychoeducational group, there is an emphasis on cognitive and behavioral processes, including providing information or knowledge; therefore, they are expected to have certain skills. Similarly, other studies have proven that providing psychoeducation for parents has a positive effect, including increasing self-efficacy (Sofronoff & Farbotko, 2002), improving coping skills and reducing stress (Bearss et al. 2013), maternal acceptance of the condition of children with ASD (Ogretir & Ulutas, 2009), increased knowledge (Schultz et al. 2011), fostering confidence in parents (Keen et al. 2010), improving problem-solving abilities (Gattuso, 2013), and reducing parenting stress (Pamungkas, 2015).

The various results above show differences in providing group-based parenting support with the psychoeducational method for parents. This is the main factor to examine further study on the role of the method, especially its effectiveness and effect on parents caring for children with ASD during the pandemic, particularly in improving their well-being. This study aimed to determine the role of group-based parenting support with the psychoeducational group method on the well-being of parents having children with ASD during the pandemic. Therefore, the proposed hypothesis is that group-based parenting support training through the psychoeducational method affects the well-being of parents with ASD children.

METHOD

This study involved parents of children with ASD at one State Special School for Autism in North Sumatra. During the COVID-19 pandemic, children with ASD did not study at school and were diverted to study at home with materials delivered by the teacher through the WhatsApp (WA) group. Therefore, to obtain participants, permission was sought in advance from the school regarding the implementation of the activity, and a school teacher assisted in making the implementation process easier and more focused. Furthermore, the school distributed invitations through the WA group to parents. On Saturday, June 12, 2021, the first meeting was held, and over 15 parents were in attendance, but only 10 were willing to participate in the study at the following three meetings. The 10 participants had similar characteristics, involving 1) biological parents of children with ASD, 2) the children have been diagnosed with ASD by professionals (doctors, psychologists, and psychiatrists), 3) children with ASD live with their parents and are not placed in school dormitories or with extended families (e.g., grandparents and siblings). Participants who were willing to partake were explained how the study was carried out, its objectives, and its benefits. Then, they filled out informed consent as a form of volunteering to participate.

Well-being was measured using a scale compiled by Triwahyuningsih (2017) based on aspects of subjective well-being expressed by White (2010). The scale consists of seven aspects: economic confidence, agency and participation, social connections, close

relationships, physical and mental health, competence and self-worth, and values and meaning in life. The construct validity in the form of a factor loading moves from 0.401 to 0.787. Therefore, the well-being variable can be revealed from the indicators, including the seven aspects. This scale used a Likert model, with four answer choices for each item, including SS (absolutely appropriate), S (appropriate), TS (not appropriate), and STS (absolutely inappropriate). The scores for favorable items with the answer choices of SS, S, TS, and STS were 4 (four), 3 (three), 2 (two), and 1 (one), respectively. Conversely, the scores for unfavorable items with the answer choices of SS, S, TS, and STS were 1 (one), 2 (two), 3 (three), and 4 (four), respectively. Furthermore, the well-being scale has good reliability, with Cronbach's alpha value of 0.819.

The quasi-experimental method was used to determine the effect of group-based parenting support training on the well-being of parents having children with ASD. It is an experimental design that uses either two groups or one group for the entire design but applies repeated treatments and measurements (Saifuddin, 2019). Similarly, Latipun (2015) states that it is widely used in experimental studies in psychology due to practical and ethical considerations. Therefore, it is recommended to be used in carrying out experimental studies on humans. The design in this study refers to the pre-test and post-test control group design to compare the effect of a treatment on the experimental and control group (Sugiyono, 2017).

A total of three stages were implemented in this study. First was the preparation stage, that was started with the preparation of measuring instruments in the form of 1) a well-being scale adapted from (Triwahyuningsih, 2017) based on subjective well-being expressed by White (2010). This scale has been tested for construct validity and reliability. Furthermore, the group-based parenting support training module compiled by Mukhtar (2017) was adapted. Based on this module, Mukhtar (2017) compiled it in several steps, including 1) carrying out a need assessment of parents having children with ASD, 2) developing guidelines for group-based parenting support, 3) carrying out expert judgment for module validation, 4) carrying out module testing, 5) evaluating the module, 6) carrying out training for group and deputy leaders, and 7) carrying out briefings for observers and documentation officers. In general, this module has been tested for validity. Meanwhile, before using it, permission was sought from the Faculty of Psychology of Universitas Gadjah Mada (UGM). Besides, adjustments were made based on the current needs of the parents. Simultaneously, the study team got the licence for data collection from the school.

The second was the implementation stage, which was carried out for two months (June -July 2021) during the COVID pandemic, in collaboration with the State Special School for Autism in Medan city, Indonesia. At that time, the school was closed, and the children were studying at home, even though the school had picket teachers every day. Through them, the team was able to meet with the principal to explain the aim of this study. After permission was granted, the school was also willing to assist. The third was

the data processing stage. The data for the well-being scale was obtained by scoring each answer provided by the participants using SPSS version 23.0 for windows.

Data analysis aimed to test the study hypothesis, which states that group-based parenting support training through the psychoeducational method affects the well-being of parents having children with ASD. This was obtained by testing the difference in well-being between the experimental (with treatment) and control group (without treatment) using descriptive and independent sample t-test analysis.

RESULTS

This study hypothesizes that group-based parenting support training through the psychoeducational method affects the well-being of parents having children with ASD. The results showed no significant difference in scores between the psychoeducational and control groups. The differences in both groups were obtained from the analysis of the independent sample t-test ($F = 0.445$, $t = -0.446$, $p > 0.05$).

After obtaining the mean of the pre-test, it was obtained that the well-being score in the control group was ($M = 98.83$, $p < 0.05$) higher than the psychoeducational group ($M = 95.60$, $p < 0.05$). Similarly, the mean of the post-test indicates that the well-being score of the control group ($M = 103.17$, $p < 0.05$) is higher than the psychoeducational group ($M = 100.20$, $p < 0.05$). The differences in the well-being of control and psychoeducational groups are shown in Table 1.

Table 1. Differences in the Well-being Scores for Psychoeducational and Control Groups

Variable	Control Group				Psychoeducational group			
	Pre-Test		Post-Test		Pre-Test		Post-Test	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Well-being	98.83	16.061	103.17	16.596	95.60	13.729	100.20	14.148

Furthermore, a significant difference was seen in the well-being score before (pre-test) and after (post-test) joining the psychoeducational group.

Table 2. Differences in Well-being Scores of the Psychoeducational Group for the Pre-Test and Post-Test

Aspect	Pre-test		Post-test	
	Mean	SD	Mean	SD
Economic confidence	10.00	1.886	9.50	2.068
Agency and participation	4.10	0.568	3.60	0.699
Social connections	6.70	1.829	7.10	1.287
Close relationships	7.90	2.331	8.00	1.247
Physical and mental health	6.90	2.514	6.90	2.378
Competence and self-worth	9.60	2.459	9.70	2.406
Values and meaning of life	9.80	1.814	10.60	1.955

Table 2 explains the difference in the well-being scores of the pre-test and post-test of the psychoeducational group. In the pre-test, the results showed that there was a

difference in the mean score in terms of economic confidence ($M = 10.00$), which was higher than the post-test ($M = 9.50$). Also, in terms of agency and participation, there was a difference in the mean score in the pre-test ($M = 4.10$), which was higher than the post-test ($M = 3.60$). Meanwhile, in terms of social connections, there was a difference in the mean score in the post-test ($M = 7.10$), which was higher than the pre-test ($M = 6.70$). In terms of close relationships, there was a difference in the mean score in the post-test ($M = 8.00$), which was higher than the pre-test ($M = 7.90$). Furthermore, in terms of physical and mental health, there was a difference in the mean score in the post-test ($M = 9.70$), which was higher than the pre-test condition ($M = 9.60$). In terms of competence and self-worth, there was a difference in the mean score in the post-test ($M = 9.70$), which was higher than the pre-test ($M = 9.60$). Also, in terms of values and meaning of life, there was a difference in the mean score in the post-test ($M = 10.60$), which was higher than the pre-test ($M = 9.80$).

DISCUSSION

The main aim of this study is to improve the well-being of parents caring for children with ASD, especially during the pandemic. Through group-based parenting support training, it is expected that parents of children with ASD will experience notable changes. However, the results differ from the proposed hypothesis which states that group-based parenting support training through psychoeducational methods affects the well-being of parents of children. The results showed no significant difference in scores between the psychoeducational and control groups.

The failure of group-based parenting support training in improving well-being may be due to several factors. Firstly, the participants were not randomly selected, which implies that not all population members were opportune to participate. Jaya, 2019 states that with the same opportunity, every member of the population stands a chance of being selected to minimize the subjectivity of researchers as humans when choosing samples.

Secondly, due to the limited time in delivering group-based parenting support training materials, the limited information related to knowledge of the condition of children with ASD and how to care for and interact with them was deemed insufficient. This is related to the use of the standardized group-based parenting support training module that has been tested for validity by Mukhtar (2017). However, the entire material provided in the module, which was eight, was conducted in this study in only four meetings. In each meeting, two materials were analyzed at once due to the limited time, considering that the pandemic was still engulfing all regions in Indonesia and the willingness of the participants to hold four meetings. Saifuddin (2019) emphasizes that for studies that modify the treatment module made by the previous study, improvements should be made to obtain validation by experts and then tested. This follows the study conducted by Johnson, D.W., and Johnson (2009), which suggests that several factors influence training: participants, climate, participants' learning styles, strategies, topics,

techniques, supporting facilities, and limitations. In this case, the weakness of group-based parenting support training in improving the parents' well-being having children with ASD was also influenced by several important factors, namely training modules, participants, and topics.

Thirdly, participation in psychoeducational groups may have other impacts, such as personal tension and anxiety for parents. After participating in the training activities, they felt guilty because they have not shown optimum care in caring for children with ASD, or their efforts may not be appropriate to meet their needs. The new knowledge received in the group-based parenting support training gave rise to their anxiety. This is in line with Mukhtar's study (2017) that providing information or training materials for group-based parenting support creates a separate burden on parents. Some parents agreed with the material presented or wanted to apply the material. However, some felt confused or had difficulties for various reasons, such as the children's condition and personal factors of parents, family, or society. Valentine (2010) also says that parenting stress can be due to parents' excessive information.

Meanwhile, the results of this study are different from the study conducted by (Hidayati, 2013) on the use of group-based parenting support training with the psychoeducational group method. The results proved that the study using experimental research with a nonrandomized pre-test-post-test control group design on 40 mothers of children with ASD for two days could reduce their stress in caring for children with ASD. Similarly, Pamungkas, 2015 studied eight mothers of children with ASD using experimental research with a nonrandomized pre-test-post-test control group design. The results showed a decrease in mothers' parenting stress. Other previous studies that support the importance of interventions for parents of children with ASD include Denne et al. (2018) and McAleese et al. (2014), which proved that psychoeducation programs could increase parents' knowledge and self-efficacy.

Although there was no significant difference in the well-being scores between the psychoeducational and control groups, an increase was observed in 5 aspects after examining each aspect of well-being. This was based on the mean score of the psychoeducational group in the pre-test and post-test, including social connections, close relationships, physical and mental health, competence and self-worth, and values and meaning in life. Meanwhile, some changes were seen as a positive impact of the group-based parenting support training on parents of children with ASD.

During the pandemic, a study on the usefulness of implementing interventions was conducted. Others include the role of telephone-based psychology in overcoming a period of psychological crisis to improve mental health (Ribeiro et al. 2020), WeChat-based psychological intervention in reducing anxiety for patients suspected of suffering from COVID-19 (Zhou et al. 2020), and pediatric telehealth in providing support and resilience for families having children with disabilities (Camden & Silva, 2021). Although the results of this study indicated that there was no significant difference in

well-being scores between the psychoeducational group and the control group, there were changes felt by parents of children with ASD as a positive impact of being given group-based parenting support training in the psychoeducational group.

CONCLUSION AND SUGGESTIONS

The results are inadequate to prove the proposed hypothesis. The results show that parenting support group-based training does not improve the well-being of the psychoeducational and control groups. However, this study proves that it affects participation in psychoeducation before (pre-test) and after (post-test) treatment; therefore, some suggestions were made. Firstly, considering the importance of improving well-being and minimizing parenting stress while caring for children with ASD, schools should carry out training programs to improve well-being, happiness, and stress management on an ongoing basis. Because during the study process, the parents were enthusiastic about participating in the training activities, which can be seen from their activeness in asking questions about parenting and how to handle children with ASD. Furthermore, the relevance of the school to routinely procure parenting activities was assessed by presenting professional people, and due to the pandemic, seminars or training activities were carried out online. This is following Sadeghi et al. (2021) that an internet-based parent training intervention provides similar benefits as face-to-face training. These findings support the potential use of telehealth to provide a study-based parent training intervention to any family with internet access. Secondly, parents are expected to maintain their well-being by constantly sourcing information and skills from various sources and applying them daily. Furthermore, they should take a short time to carry out activities such as planting flowers, joking, also reading books related to parenting while caring for children. Thirdly, future studies should involve other personal resources in improving well-being and reducing parenting stress, for example, coping variables in influencing the psychological condition of parents and exploring sociodemographic variables such as socioeconomic level, subject's age, and education level concerning well-being.

ACKNOWLEDGMENT

This work was supported by the BOPTN of the Research Institutions and Community Service of Universitas Islam Negeri Sumatera Utara (No. 203/2021). The authors are grateful to the research participants (mothers of children with ASD) and the State Special School for Autism in Medan, Indonesia, for their contributions and cooperation to this study.

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