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**Coping Towards Family Behavior Behavior in Caring for Autistic Children at the
Autistic Child Therapy Center in Surabaya**

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ABSTRACT

The presence of autistic children makes them feel stressed and ashamed of stigma from his social environment. This condition without social support make response And problem psychosocial become critical as well as maladaptive coping. Family maladaptive coping results in low caring behavior so that happen developmental failure of autistic children. Objective: to identify family coping models based on response psychosocial in behavior caring child autism. Design cross sectional research. The population and sample are parents. Autistic children age school in Center Therapy Autism Surabaya, a number of 108. Sampling; simple random. For coping strategies with questionnaires and caring behavior with questionnaires adapted from the Parenting Stress Index Short Form. Data are presented in the form of frequency distribution and cross tabulation. Analysis of variable relationships with the Chi-Square test. It was found that the opinion of families who lacked behavior in caring for autistic children was 79% and the opinion of very good families had very good behavior in caring for autistic children (67%). The results of the Chi Square analysis test obtained $p = 0.019 < \alpha = 0.05$, meaning that there was a significant influence between family coping and the ability to care for autistic children. There is a significant influence of family coping on the abilities of autistic children. Increasing family coping with stressor management and positive community psychosocial responses with psychosocial acceptance and understanding through education will make the behavior of caring for autistic children and the abilities of autistic children optimal and become independent children.

Keywords: Family coping, Behavior caring child, Autism

INTRODUCTION

Autistic children have developmental process disorders that appear in early childhood with severe and long-term effects. These effects impact individuals and families ⁽¹⁾. The presence of a child autism for families becomes a stressor and problem family in social society which can cause various family and psychosocial problems ⁽²⁾. Families with stressors related to the presence of autistic children and lack of family support cause long-term social stress which will lead to maladaptive coping ⁽³⁾.

Data on the prevalence of autistic children in Indonesia shows that around 3.2

million children out of a total population of 270.2 million Indonesians have been diagnosed with autism ⁽⁴⁾ and in East Java, as many as 15% of the 1,476 children with special needs who attend 388 special schools and 93 inclusive schools are children with autism autism⁽⁵⁾. Maladaptive coping families will feel sad which is prolonged, feelings of guilt and mutual blame between family members or feelings of hatred towards autistic children in providing care for autistic children become inappropriate. Families with maladaptive coping carry out care for autistic children without considering the characteristics and abilities of autistic children which can

cause the occurrence failure growth and development physique, psychology, and also mentally ⁽³⁾. With adaptive coping, families will be able to increase love Darling and attention which is optimal for autistic children so as to optimize their abilities development of autistic children ⁽³⁾.

The aim of the study was to analyze the influence of family coping on child-rearing behavior. Autism. Efforts to achieve adaptive family coping are carried out by making the stressor of the presence of autistic children and psychosocial responses positive⁽⁶⁾ by increasing acceptance and understanding regarding the presence of autistic children both in the family and in society.

Design cross sectional research. The population and sample are parents. Autistic children age school in Center Therapy Autism Surabaya, a number of 108. Sampling; simple random. For coping strategies with questionnaires and caring behavior with questionnaires adapted from the Parenting Stress Index Short Form. Data are displayed in the form of frequency distribution and cross tabulation. Analysis of the influence between variables using SPSS software, version 15.0 $p < 0.05$ is considered statistically significant. Analysis of the relationship between variables with the Chi-Square test ⁽⁷⁾.

RESULT AND DISCUSSION

Table 1. Demographic characteristics of parents of autistic children at the Surabaya Autism Center, July 2024

Indicator	Category	Frequency	Percentage
Type sex	Woman	96	89
	Man - man	12	11
Age	< 40 years	40	37
	40 – 50 year	62	57

Table 3. Cross tabulation between Coping family and behavior caring child autism at Surabaya Autism Therapy Center, July 2024

Indicators / Categories	Behavior caring child autism								Total	
	Not enough		Enough		Good		Very Good		Freq	Percent
Coping family	Freq	Percent	Freq	Percent	Freq	Percent	Freq	Percent		
Not enough	27	79	5	15	0	0	2	6	34	100

	> 50 years	6	6
Education	Intermediate	42	39
	College Tall	66	61
Work	Housewife	62	58
	Ladder	35	32
	Private	11	10
	civil servant	11	10
Total		108	100

Results study shows 89% of the type sex women, 57% aged 40-50 years old, 61% educated tall and 58 % as Mother House ladder.

Table 2. Distribution of Coping frequency family and behavior caring child autism at Surabaya Autism Therapy Center, July 2024

Indicator	Category	Frequency	Percentage
Coping family	Not enough	34	31.5
	Enough	16	14.8
	Good	22	20.4
	Very good	36	33.3
Caring child autism	Not enough	30	27.8
	Enough	18	16.7
	Good	21	19.4
	Very good	39	36.1
Total		108	100

Table 2 , shows Coping family on child autism part small (33.3%) or as many as 36 parents is very good . Behavior caring child autism part small (36.1%) or as many as 39 parents is very Good.

Enough	2	12.5	5	31	5	31	4	25.5	16	100
Good	0	0	4	18	9	41	9	41	22	100
Very Good	1	3	4	11	7	19	24	67	36	100

Test ; df = 3, p = 0.019 < α = 0.05

Table 3, Show Coping family not enough as large (79%) or as many as 27 parents have ability caring child autism less . Coping family very Good as big (67 %) or as many as 24 parents have ability caring child autism very good.Result test analysis The Chi Square test obtained $p = 0.019 < \alpha = 0.05$, meaning there is influence significant between coping family with ability caring child autism.

Coping family on child autism

The existence of a child autism for families becomes a stressor and problem family in social society that can cause various family and psychosocial problems ⁽²⁾. Families with stressors related to the presence of autistic children and lack of family support cause long-term social stress which will lead to maladaptive coping. The ability of parents to manage stressors and psychosocial support from the community becomes positive stress, making severe stress into mild stress or even non-stress. Positive views of parents or not being stressed make parents can control themselves and make themselves an important psychological resource in creating adaptive coping. This is in accordance with the theory that states that individuals with *beliefs* positive will justice, freedom, as well as God, become important sources for viewing oneself positively. According to the theory of looking at himself positively and can be a very important psychological resource for coping with stress ⁽³⁾.

Parents who have a positive view of the presence of autistic children in the midst of the family and society of autistic children reduce physical and emotional fatigue so that they have more energy, it is easier to be a positive person in maintaining good relationships with family members or the community including autistic children. This condition makes parents have good

energy and health to create adaptive coping effectively. According to the theory that states that someone who has good health, that person has a tendency to choose to use problem focused coping strategies in dealing with stress⁽³⁾.

Coping family influential to behavior parenting child Autism

Families with poor or maladaptive stress coping models experience prolonged feelings of sadness and guilt or blaming between family members, hatred towards autistic children results in low affection and attention and reduces the behavior of caring for autistic children. Families with adaptive coping are able to reduce physiological and psychological reactions of themselves and family members due to stressors in their involvement in caring for autistic children. According to the theory, parents who have effective coping are able to reduce stressor reactions to passive caregivers, namely family members, for involvement in caring for autistic children ⁽⁹⁾.

Families with adaptive coping will be able to increase togetherness between family members to become more close, able to maintain and manage coping strategies properly. Coping strategies include motivation and the level of cognitive, social and psychomotor development abilities in autistic children, reducing the involvement of the ego of parents and family members in autistic children, finding alternative learning strategies and developing new standards or behaviors and learning new skills according to the child's abilities. Families who have adaptive coping are able to managing social support especially from family and professional staff for get comfort, attention or assistance related to the behavior of caring for autistic children from the environment. According to the theory that states organized support No directed by

officer health professional And effort organized by professional health ⁽³⁾.

CONCLUSION

There is influence significant between coping family with ability caring child autism. Family with coping adaptive capable managing stressors and support psycho social for to obtain comfort, attention or help so that increase behavior maintenance and ability development child autism.

REFERENCES

1. Franz, Lauren, et a. " *Early intervention for very young children with or at high likelihoodfor autism spectrum disorder: An overview of reviews.*" *Developmental Medicine & Child Neurology* 64.9 (2022): 1063-1076. DOI: 10.1111/dmcn.15258
2. Manor- Binyamini , I., Benatov , J. and Abu- Kaf , S. ' Social support, depression, and somatisation among Bedouin mothers of adolescents with or without developmental development disabilities', *Journal of Intellectual & Developmental Disabilities* y , 45(3), pp. 245– 253. (2019) doi: 10.3109/13668250.2019.1627861.
3. Folkman, Susan. "*Stress: appraisal and coping.*" *Encyclopedia of behavioral medicine*. Cham: Springer International Publishing, 2177-2179 (2020).
4. Body Center Statistics in Indonesia, *Prevalence Data Autism in Indonesia*, Jakarta (2020)
5. Ministry Education And Indonesian Culture , *School Data Outside Ordinary* , Jakarta (2020)
6. Carver, CS, Scheir, MF, & Wientraub, JK 1989. *Assessing Coping Strategies: A Theoretically Based Approach*. *Journal of Personality and Social Psychology*, Vol. 56, No. 2, 267 – 283.
7. Notoatmojo, 2005. *Methodology Study health* , Rhineka Create , Jakarta
8. Sigurd Mikkelsen, David ett. all, *Are depressive disorders caused by psychosocial stressors at work? A systematic review with meta-analysis* , *European Journal of Epidemiology* (2021) 36:479–496 <https://doi.org/10.1007/s10654-021-00725-9>
9. Walsh, F. *Strengthening family resilience*. New York: Guilford Press(1998)