

# Knowledge, Attitudes, And Coping Strategies Among Parents Of Autistic Children Attending Federal Neuro-Psychiatric Hospital, Yaba Lagos State, Nigeria

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**Abstract- Background:** Information and training build relationships especially with families living with autistic children. To keep and manage autistic children, autistic parents need to be equipped with certain training on how to deal with, cope, relate and contribute to the children's social life by understanding and integrating their behaviour. Therefore, this study investigates autism knowledge, attitude, and coping strategies employed by the parents of autistic children at Federal Neuropsychiatric Hospital, Yaba, Lagos, Nigeria

**Methods:** A quantitative descriptive cross-sectional design was employed through a self-structured questionnaire distributed among Three hundred and forty-eight (348) parents attending federal neuropsychiatric hospital, child and adolescent center clinic were selected using a simple random sampling technique.

**Result:** The results showed that larger proportion of the respondents (58.5%) had fair knowledge and negative attitude 216(62.1%) towards autism. A significant influence was found between autistic parents' knowledge of coping strategies ( $F(14, 333) = 5.25, p<.05$ ) in the same vein, a significant influence was also established between the attitude of autistic parents on coping strategies ( $F(17, 330) = 4.38, p<.05$ )

Conclusively, education on autism management is inevitable for autistic parents. To manage and integrate their children's emotions lies on the level of their knowledge of the concept, therefore, this study recommends autistic parents participate in awareness programs to initiate treatment and therapies for the early stage of such diseases.

**Index Terms-** Knowledge, attitude, coping strategies

## I. INTRODUCTION

Autism spectrum disorder (ASD) is a neurodevelopmental disorder with current prevalence rates estimated to be 1 in 59 children in the United States (Christensen, Braun, Baio, Bilder, Charles, Constantino, & Lee, 2019). Early intervention for children with ASD has been shown to greatly improve development and daily life (Debodiance, Maljaars, Noens & Van

den Noortgate, 2017). The average age for an ASD diagnosis in children is four years (CDC, 2018). Theoretically, many children are missing out on receiving early intervention services and the benefits that go along with those services. Before children start preschool or kindergarten, parents are the ones who see them most often. In many cases, parents are the first to be exposed to the early signs of ASD. Parental knowledge of ASD may be crucial to the early diagnosis and unusual ways of perceiving and processing information can seriously hinder the daily functioning of children with autism spectrum disorders and severely impede their educational and social attainments. The term spectrum refers to the wide range of symptoms, skills, and levels of disability in functioning that can occur in children with autism.

Corona, Christodulu, and Rinaldi (2017) discover a significant association between knowledge of ASD and self-efficacy of education professionals working with students with ASD and how ASD training impacts knowledge and self-efficacy. Knowledge of ASD was significantly and positively correlated with prior training on ASD ( $p<.01$ ) and positive behaviour support (PBS;  $p<.01$ ). Pearce (2014) reported that parental involvement in training increases their ability to understand the behaviour of their children with autism disorder and modify it.

However, parents of children with autism spectrum disorders face challenges both at home and in the community compared to parents of children without autism, they are at heightened risk of financial strain and poor physical and mental health; they are also likely to experience higher divorce rates (Brown, Whiting, Kahumoku Fessler, Witting, & Jensen, 2020).

Parents in these areas have different cultural beliefs that have influenced their understanding of ASD as well as their decision-making (Nealy, O'Hare, Powers, & Swick, 2012) and accounted for inadequate knowledge and a higher level of stigma among parents and in society (Divan, 2012). The insufficiency of this knowledge has accounted for a higher level of stigma among parents of ASD in society which has led many families at risk of having multiple challenges with a positive and high adaptation to stress. Even though many studies had shown over time that family responses vary from maladjustment to healthy adaptation but no

study had examined the level of knowledge, attitude, and coping strategies among parents with autistic children which this study hereby stands in the gap to be filled by exploring level of autism understanding, attitude and coping strategies employed by parents of autistic children at Federal Neuropsychiatric Hospital, Yaba, Lagos in Nigeria.

However, this study's Specific Objectives are to:

1. determine the level of knowledge about Autism among parents with Autistic children at the federal neuropsychiatric hospital Yaba.
2. determine the attitude of parents with autistic children towards the child.
3. find out coping strategies employed by autistic parents to care for children living with autism at the federal neuropsychiatric hospital Yaba.
4. access the significant influence of knowledge on coping strategies employed by parents with autistic children at federal neuropsychiatric hospital Yaba, Lagos state
5. access the significant influence of attitude on coping strategies employed among parents with autistic children at the federal neuropsychiatric hospital Yaba

Moreover, this study adopted Macroanalytic, Trait-Oriented Coping Theories

Many trait-oriented approaches in this field have established two constructs central to an understanding of cognitive responses to stress: vigilance, that is, the orientation toward stressful aspects of an encounter, and cognitive avoidance, that is, averting attention from stress-related information (cf. Janis 1983, Krohne 1978, 1993, Roth and Cohen 1986).

Approaches corresponding to these conceptions are repression-sensitization (Byrne 1964), monitoring-blunting (Miller 1980, 1987), or attention rejection (Mullen and Suls 1982). But out of the three approaches, attention-rejection led by Krohne (1993) was found more suitable for this study compared to repression and monitoring-blunting because the model of coping modes (MCM) deals with individual differences in attention orientation and emotional-behavioural regulation under stressful conditions (Krohne 1993). However, this approach implies that parents of children living with autistic need to be orientated more on the condition of their autistic children either by training, or talk show to sensitize different coping strategies in caring for their autistic children through the parent's emotional attitudes or behaviours.

## II. MATERIALS AND METHODS

### Research Design

This study employed a descriptive cross-sectional survey type. A self-administered structured questionnaire was developed to assess the level of knowledge, attitude, and coping strategies employed by the parents of autistic children at Federal Neuropsychiatric Hospital, Yaba, Lagos. A total population of five hundred 500 out of which 400 were sampled to represent the study.

### Sampling Technique;

Simple random sampling techniques were employed to select 400 autistic parents who have been attending autistic children's clinic days from the child and adolescent unit in Oshodi annex for a month, making a total of 400 autistic parents in child and adolescent units who participated in the study.

### Instrumentation

Data was collected using a self-developed questionnaire. The questionnaire consists of four sections. Sections A to D with thirty-seven items was used as the tool for collecting information from autistic parents. **Section A:** assessed the socio-demographic data (6 items) **Section B:** assessed the level of knowledge of autistic parents about autistic children. There are 8(eight) items assessed with a dichotomous scale of yes and No; where Yes was a score of 1, while No was scored 0. The score ranges between 0-8, where any respondents with 0-3 have poor knowledge, 3.1-5.0 is fair in knowledge and 5-8 represents good knowledge. **Section C:** assessed the attitude of autistic parents towards autistic children using 7 items using a 5 Likert scale a five (5) Likert scale form was used to assess the level of attitude. The highest possible score was thirty-five (35) while the lowest was zero (0). The scores were converted into percentages. Scores between 0%-49% were considered negative attitudes while scores between 50% - 100% were considered positive attitudes. **Section D:** determined adopted coping strategies of the parents of autistic children using 8 items using a 5 Likert scale. However, the questionnaire was validated and tested for reliability index using Cronbach alpha, the reliability coefficient for autistic parents' knowledge was 0.89, Attitudes was 0.890 and coping strategies was 0.90.

### Method of Data Analysis

The collected data were coded into the computer using the statistical software Statistical Package for the Social Sciences (SPSS) version 23. The research questions were answered using descriptive statistics (percentages, mean score, and frequency counts) while inferential statistics of One-way Anova statistic was used to test the two hypotheses at a 0.05 level of significance. An *a-P* value of less than 0.05 is accepted as being statistically significant.

## III. RESULTS

### Socio-demographic data

Table 1 Respondents were found across the age spectrum of 21 to 51 years and above with a mean age of 36 years. More (59.5%) of the participants were between 35 to 40 years. A majority (52.3%) were Christian by belief as a result of its commonest practice religion in the study settings and more than half (91.9%) of the parents were married. Based on educational qualification, more than a quarter (46.6%) of the participants were holders of tertiary education and on relationship with the patients (64.7%) reported that mothers had a close relationship with their patients than their fathers, (64.7%).

**Table 1: Socio-demographic data of the midwives**

<b>N=348</b>		Frequency	Percentage (%)
Gender	Male	123	35.3
	Female	225	64.7
Age of the respondents	20-25 years	46	13.2
	26-30 years	95	27.3
	35-40 years	209	59.5
Marital status	Married	205	91.9
	Divorced	16	4.6
	Separated	5	1.4
	Widow	7	2.0
Religion	Christian	182	52.3
	Islam	117	33.6
	Traditional	49	14.1
Occupation	Civil servant	238	68.4
	Self-employed	81	23.3
	Unemployed	29	8.3
Education status	Primary	27	7.8
	Secondary	108	31.0
	Higher institution	162	46.6
Relationship to patients	Mother	225	64.7
	Father	123	35.3

**What is the Level of Knowledge of parents living with autistic children in Oshodi Annex of Federal Neuropsychiatric Hospital, Yaba, Lagos, located at Lagos Mainland?**

Table 2a. Revealed the level of knowledge of the respondents on the level of knowledge of autistic parents with a mean score of

4.24±3.15. Larger proportion of the respondents 201(58.5%) had fair knowledge about autism, meanwhile, 84(24.1%) of the respondents had good knowledge and 63(18.1%) of the respondents with poor knowledge

**Table 2a: Level of knowledge of Autistics parents in Oshodi Annex of Federal Neuropsychiatric Hospital, Yaba, Lagos, located at Lagos Mainland.**

**X=4.0, Max=8, Min= 0**

Category	Classification	Frequency N=348	Percentage %
0-3	poor	63	18.1%
3.1-5	fair	201	57.8%
5.0-8	Good	84	24.1%
<b>Total</b>		<b>348</b>	<b>100</b>

**Table 2b: Knowledge of Autistic Parents on autistic disorder**

Items (N=348)	Yes f (%)	No f (%)
1. Autism is a defect in the parent gene.	117(33.6%)	231(66.4%)
2. Children with autism usually grow up to be adults with mental illness	75(21.6%)	273(78.4%)
3. Marked impairment in eye-to-eye contact, facial expression, body gestures, and postures during social interaction.	65(18.7%)	283(81.3%)
4. Delay or total lack of development of spoken language	225(65.2%)	121(34.8%)
5. Loss of interest in the environment and surroundings	166(47.7%)	77(22.1%)
6. Autistic disorder cause staring into open space and not focusing on anything specific	103(26.7%)	245(70.4%)
7. The causes of Autism spectrum Disorder are most often spiritually originated	15(4.3%)	298(85.8%)
8. Autism is an infectious disease	127(63.5%)	91(33.6%)

Table 2b shows that 231(66.4%) of the respondents disagreed that autism is a defect in parent gene, 273(78.4%) against that

Children with autism usually grow up to be adults with mental illness, 283(81.3%) disagreed that Marked impairment in the eye

to eye contact, facial expression, body gestures and postures during social interaction, 227(65.2%) agree that they delay or total lack of development of spoken language, 225(65.2%) agree that loss of interest in the environment and surroundings, 245(70.4%) disagree autistic disorder cause staring into open space and not focusing on anything specific, 160(85.8%) disagreed that the causes of Autism spectrum Disorder are most often spiritual originated while 221(63.5%) agree that Autism is an infectious disease

#### **What is the attitude of autistic parents towards children with an autistic disorder?**

*Level of Attitude of autistic parents towards autistic disorder in Oshodi Annex of Federal Neuropsychiatric Hospital, Yaba, Lagos, located at Lagos Mainland.*

Table 3a. Revealed the attitudinal disposition of the parent regarding autism. The result revealed that the respondent's attitude toward autism had a mean score of  $25.67 \pm 3.94$ . Majority of the respondents 216(62.1%) had negative attitude towards autism, while 132(37.9%) of the respondents had positive attitude

**Table 3a: Level of the attitude of Autistics parents towards autistic children in Oshodi Annex of Federal Neuropsychiatric Hospital, Yaba, Lagos, located at Lagos Mainland.**

Category	Classification	Frequency N=348	Percentage %
Less than 25	Negative	216	62.1
25 and above	Positive	132	37.9
<b>Total</b>		<b>348</b>	<b>100</b>

**Table 3b: Attitudes of autistic parents towards children living with autism**

(N=348)	Strongly agree	Agree	Undecided	Strongly disagree	Disagree
I enjoy the time i spend with my child	59(17.0%)	32(9.2%)	65(18.7%)	78(22.4%)	114(32.8%)
It is easier for me to play and have fun with my child	70(20.1%)	50(14.4%)	53(15.2%)	90(25.9%)	85(24.4%)
I find it hard adjusting to the demands/challenges of caring for my child	117(33.6%)	80(23.0%)	84(24.1%)	32(9.2%)	35(10.1%)
My child's behaviour bothers me more	49(14.1%)	28(8.0%)	63(18.1%)	93(26.7%)	115(33.0%)
I feel like I should have better control over his/her behaviour	62(17.8%)	62(17.8%)	23(6.6%)	83(23.9%)	118(33.9%)
My child makes me feel more confident as a parent	28(8.0%)	30(8.6%)	80(23.0%)	107(30.7%)	103(29.6%)
My child brings out feelings of happiness and pride more	118(33.9%)	117(33.6%)	66(19.0%)	31(8.9%)	16(4.6%)

Table 3b shows that 192(55.2%) of the respondents disagreed that they enjoy the time they spend with my child, 175(50.3%) disagreed that it is easier for them to play and have fun with their child, 197(56.6%) agree that they find it hard adjusting to the demands/challenges of caring for their child, 208(59.7%) disagreed that their child's behaviour bothers them more, 201(57.8%) disagreed that they feel like they should have better

control over his/her behaviour, 210(60.3%) disagreed that their child makes them feel more confident as a parent, 235(67.5%) reported that child brings out feelings of happiness and pride more. *What are the coping strategies employed by autistic parents to care for children living with autism at the federal neuropsychiatric hospital Yaba?*

**Table 4: Coping strategies for autistic parents in Oshodi Annex of Federal Neuropsychiatric Hospital, Yaba, Lagos, located at Lagos Mainland**

	Strongly agree	Agree	Undecided	Strongly disagree	Disagree
We have full commitment to God in our prayers	101(29.0%)	92(26.4%)	63(18.1%)	60(17.2%)	32(9.2%)
Good network with other families affected by autism	19(5.5%)	44(12.6%)	71(20.4%)	131(37.6%)	83(23.9%)
Our family enjoys good social support from family and friends	45(12.9%)	50(14.4%)	47(13.5%)	126(36.2%)	80(23.0%)
Rewarding or thanking siblings for watching or helping out their brother /sister	38(10.9%)	105(30.2%)	94(27.0%)	66(19.0%)	45(12.9%)

I feel encouraged and relieved by the Autism support group (comprising of Doctors, Nurses, Donor agencies, and other philanthropists)	55(15.8%)	141(40.5%)	99(28.4%)	22(6.3%)	31(8.9%)
Spend some time alone with my spouse (e.g. watching television programs when the children are asleep or going out for dinner).	106(30.5%)	104(29.9%)	85(24.4%)	33(9.5%)	20(5.7%)
Occasionally engage in family activities without the child with autism- (e.g. recreational activities at an amusement park)	73(21.0%)	114(32.8%)	65(18.7%)	44(12.6%)	52(14.9%)
The medical and social services and other therapies required for their care are in place	96(27.6%)	101(29.0%)	57(16.4%)	52(14.9%)	42(12.1%)

Table 4. Revealed the coping strategies employed by autistic parents. The result showed that the majority of the autistic parents agreed to cope with the following strategies by being committed to God in prayers (55.4%), encouraged and relieved by an autism support group such as a doctor, nurse et. c (56.3%), being together with their partner (60.4%), engaging occasionally with family activities without autistic child (53.8%) and availability of medical, social services and other therapies (56.6%) were seen as workable strategies to autistic parents while creating a good network with other families affected by autism (81.9%), enjoying good social support from family friends (72.7%) and rewarding

sibling for watching after their brother /sister was not seen as a dependable strategy to cope with by many autistics parent in Oshodi Annex of Federal Neuropsychiatric Hospital, Yaba, Lagos, located at Lagos Mainland.

#### ***Test of hypothesis***

**Hypothesis 1:** There is a significant influence of knowledge on coping strategies of Autism among parents of Autistic children at the federal neuropsychiatric hospital Yaba and the result was present in table 6

**Table 5: One-way ANOVA showing the influence of knowledge on coping strategies among parents of Autistic children**

	Source	SS	df	MS	F	Sig.
Coping strategies	Between Groups	775.407	14	55.386	5.253	<.05
	Within Groups	3511.360	333	10.545		
	Total	4286.767	347			

The result in table 6 shows that there was a significant influence of parents' knowledge of autism on coping strategies ( $F(14, 333) = 5.25, p<.05$ ). The hypothesis stated that "There is a significant influence of knowledge on coping strategies of Autism among parents of Autistic children at federal neuropsychiatric hospital Yaba" was hereby accepted by this findings. This implies that the training of autistic parents has a great significant impact

on suggested coping strategies in caring for autistic children at the federal neuropsychiatric hospital Yaba.

**Hypothesis 2:** There is a significant influence of autistic parent's attitudes on coping strategies of Autism among parents of Autistic children at the federal neuropsychiatric hospital Yaba and the result was present in table 6

**Table 6: One-way ANOVA showing the influence of attitude on coping strategies among parents of Autistic children**

	Source	SS	df	MS	F	Sig.
Coping strategies	Between Groups	789.604	17	46.447	4.383	<.05
	Within Groups	3497.163	330	10.597		
	Total	4286.767	347			

Table 6 shows a significant influence of autistic parent attitude on coping strategies ( $F(17, 330) = 4.38, p < .05$ ). The hypothesis stated that "There is a significant influence of autistic parent attitude on coping strategies for children living with Autism at federal neuropsychiatric hospital Yaba" was hereby accepted by this finding. This implies that autistic parent's behaviours had a significant contribution to the suggested coping strategies for managing children with autism

#### IV. DISCUSSION

The result revealed the level of knowledge of the respondents with a mean score of  $14.24 \pm 3.15$ . A larger proportion of the respondents 201(58.5%) had fair knowledge about autism, meanwhile, 84(24.1%) respondents had good knowledge, and 63(18.1%) respondents with poor knowledge. This might be a result of autistic parents continuing education regarding their qualifications. This result correlates with a study led by Symon (2005) who designed a training program for parents of three autistic children in America due to negative behaviours of autistic parents (aggressive behaviour, stereotypical behaviour, lack of interaction with others) suffered by autistic children. Along the same line, Murphy and Tierney (2005) detect educational needs and the need for information among the parents of children diagnosed with an autism spectrum disorder.

The findings further revealed the attitudinal disposition of the parent regarding autism. This result showed that respondents' attitudes towards autism had a mean score of  $25.67 \pm 3.94$  and the majority of the respondents 216(62.1%) had a negative perception towards autism, while 132(37.9%) of respondents had a positive attitude. This might be a result of low information about autism because many of the respondents were not exposed beyond their locality. This result is in line with a study conducted by Baret and Godard, (2011) who found that the attitudes of parents of individuals with ASD toward genetic research are limited.

However, a significant influence was revealed in table 5 of autistic parent knowledge on coping strategies of Autism among parents of Autistic children  $F(14, 333) = 5.25, p < .05$ . Moreso, a significant influence was further revealed in table 6 of autistic parent attitude on coping strategies  $F(17, 330) = 4.38, p < .05$  at the federal neuropsychiatric hospital in Yaba, Lagos state. These findings were found related to a study led by Lai and Oei, (2014) who found that problem-focused coping and social support as the most widely used coping strategies and found links between these strategies and parental knowledge, attitude, and child characteristics.

#### V. CONCLUSION

Information in development is inevitable. To enhance proper growth and increment in self, family, and in society parental

knowledge need to be equipped either by training or teaching to regulate and understand the behaviour of their autistic children. Based on the result of the findings, this study recommends regular health professional educative programs to be conducted in the hospital and community centers to help parents in the early identification of developmental disabilities like autism.

#### Conflict of interest

No conflict of interest was declared by the authors

#### Ethical Approval

Ethical approval was obtained from Babcock University Health Research and Ethical Committee and the Health and Research Committee of the federal neuropsychiatric hospital Yaba Lagos state

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