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Effect of Parental Stress on Dyadic Adjustment among Parents with Autistic Children, Moderating Role of Social Support

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Abstract: *Raising a child with autism spectrum disorder (ASD) presents its own set of unique challenges, which can have a significant effect on parental stress and dyadic adjustment. This study explores the relationship between parental stress, dyadic adjustment, and social support among parents with Autistic Children with moderating role of Social Support. A correlational research design was used, with data collected from 122 parents through purposive sampling technique. Results showed negative relationship between parental stress and dyadic adjustment, highlighting the stress experienced by parents of autistic children. Social support moderates and weakens this relationship, indicating that more social support can reduce the parental stress on dyadic adjustment. Highlighting the differences in gender of parents in providing care, mothers report more elevated levels of parental stress than fathers. The significance of individualized interventions and support networks for autistic child families is highlighted, as are the implications for clinical, educational, policy, and community life. Future investigation integrates researching additional elements influencing parental stress and dyadic adjustment and merging longitudinal assessments to assess long outcomes.*

Keywords: *Parental Stress, Dyadic Adjustment, Social Support, Parents with Autistic Children*

Introduction

A variety of social, educational, and behavioral issues are signs of a neurodevelopmental disorder known as autism spectrum disorder (ASD). Parents could find it trying and disturbing to raise a young person with mental irregularity because of the condition's one of a kind requirements and troubles. Parents of therapeutically contemplative adolescents routinely face explicit difficulties and stressors. The life of parents who have an autistic child can be affected in a number of ways, including their marriage or dyadic relationship. Due to the ongoing difficulties of providing care, the requirement for specialized assistance, and the uncertainties surrounding their child's future, parents of children with autism frequently experience elevated levels of stress. This ongoing stress may have an impact on their emotional health, coping skills, and general quality of life. Parental stress might affect the marriage as well, which could cause problems with dyadic adjustment.

Parental stress of autistic children

Research has been done on the impact of stress in parenting for couples with autistic child and their marriage results. A study showed that issues with child behavior and parent stress are dangers for the happiness of couples who have children with autism. These things also influence how good their mental health. The previous study that found a connection between happiness in relationships and stress within families of kids with ASD supports these findings. This outcome supports the idea that being happy in a relationship could help parents when they find out their child has autism. In Pakistan, mother mental health is a matter of concern, much like child health. A child's physical and mental health are influenced by their mother's health, and this influence is thought to begin very early in the child's development.

Parental stress and dyadic adjustment

The difficulties parents of children with autism spectrum disorders (ASD) face are various because of their child's developmental challenges. In view of the recent rise in ASD patients with normal-range intelligence, it is essential to get a deeper understanding of the factors related to the adjustment of parents of this group of kids. Parents who raise children with ASD may experience more marital conflicts that is, fights, arguments, and disputes and less marital love that is, feelings of passion, closeness, and commitment between spouses as a result of their parenting. Parents of children with ASD report higher rates of marital separation, divorce, and dissolution and lower levels of adjustment, satisfaction, and happiness in their marriages compared to parents of children with other developmental disabilities and typically developing children. Further evidence from longitudinal studies has shown that after the birth of a child with ASD, spousal perceptions of marital closeness, connection, and attachment frequently decrease.

Moderating role of social support

Parents of children with special needs were less worried when they said that being helped by friends made them happier. For example, some groups that can help with stress and make parents happy are spouses, grandparents' friends or professional organizations. But studies show that parents usually choose their unofficial support groups as the best places to get help. Parents might make this choice because they are not satisfied with official help or get more informal than formal support (Rosheen et al, 2024). Social support is a powerful moderator as well that contributes to stress, well-being and the ability to cope. Social support fulfills its role through mitigation of the impact of stressors and boosting of the individual's resources and social interaction, which in turn foster adaptive strategy against the challenges and healthy habits in various areas of life. Having social support moderation on focus will let us understand the processes and the consequences so that we are able to develop the right assistance services and interventions which improve relationships and communities' resilience and well-being in the long term.

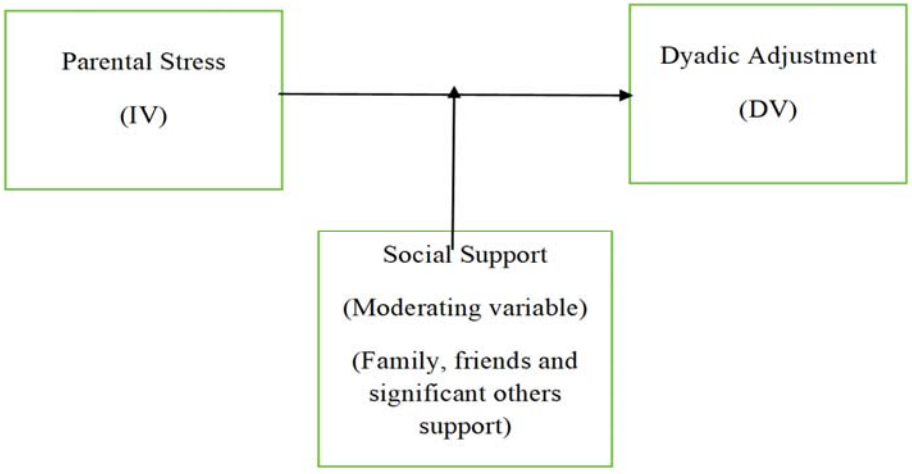

Figure 1. Conceptual framework of study

Hypotheses

H1: There will be a negative relationship between parental stress and dyadic adjustment among parents with autistic children.

H2: Social support will moderate and weaken the relationship between parental stress and dyadic adjustment among parents with autistic children.

H3: Mothers of autistic children will report higher levels of parental stress compared to fathers.

Sample

In this study, quantitative analysis used for the moderating role of social support in the relationship between parental stress and dyadic adjustment. The current study employed a correlational research design. Using the purposive sampling technique, a sample of 122 participants (61 mothers and 61 fathers), were reached from autistic clinics, special education institutes, and relevant support groups for the purpose of collecting data.

Instruments

Demographic Information Sheet contained details about the participants' demographics, including age, gender, family structure, mother's and father's education, mother and father's occupation, socioeconomic status, age of autistic child, level of autism severity, number of children and gender of autistic child.

The present study incorporated three instruments: Parental Stress Scale (PSS), Revised Dyadic Adjustment Scale (RDAS) and Multidimensional Scale of Perceived Social Support (MSPSS). An 18-item survey called the Parental Stress Scale (PSS) measures parents' attitudes regarding parenting. It looks at both the good such as emotional benefits and personal development and the bad such as resource requirements and stress levels aspects of motherhood. The Parental Stress Scale has a good level of internal and external reliability (0.78) (Hayes & Watson, 2018) and is connected with the overall measure of stress. This scale consists of three subscales as parental distress, parent-child dysfunctional interaction and difficult child.

The Revised Dyadic Adjustment Scale (RDAS), a self-report questionnaire that was updated in 1976 after Spanier's Dyadic Adjustment Scale (DAS) was created, measures seven aspects of couple relationships under three main categories: cohesion as demonstrated by activities and discussion; agreement on decisions, values, and affection; and satisfaction with the stability and conflict management of the relationship (Crane, Middleton, & Bean, 2019). The RDAS only has 14 items overall, each asking respondents to rank different aspects of their relationship on a 5 or 6 scale. The RDAS is a relationship satisfaction measure that ranges from 0 to 69, where higher scores represent happier relationships and lower levels represent more unhappy ones. For scores of 48 and above to denote the absence of discomfort, and scores of 47 and Lower scores on the RDAS indicate marital/relationship suffering; the cutoff score is 48. The four subscales that make up the scale are dyadic attachment, dyadic cohesion, dyadic consensus, and dyadic satisfaction. This scale has a Cronbach's alpha reliability of 0.86 (Busby et al., 2019).

The Multidimensional Scale of Perceived Social Support (MSPSS) developed by Zimet, Dahlem, Zimet, and Farley in 1988 consists of 12 items across three subscales i.e, Family Support, Friend Support and Significant Other Support. The items on perceived social support from family, friends, and a significant other are scored on a scale from 0 to 5 using the Multidimensional Scale of Perceived Social Support (Zimet et al., 1988) using a 5-point Likert scale. The MSPSS scale displayed outstanding internal consistency with a Cronbach's alpha score of 0.933 (Sharif et al., 2021).

Procedure

In the beginning, the study area's autistic clinics, special education facilities, and pertinent support groups were identified. A list of qualified parents was compiled from these

sources. The purpose of the study and the importance of confidentiality were communicated to the researchers. Participants who decided to participate in the study have filled out the consent forms. At any time during the process, participants may withdraw.

Result

Table 1

Demographic Characteristics of the Parents (N = 122)

	Description	Frequency	Percentage
Gender	Mother	61	40.7
	Father	61	40.7
Age	18-30	63	42.0
	31-50	57	38.0
	50 above	2	1.3
Family system	Joint	50	33.3
	Nuclear	72	48.0
Socioeconomic status	low class	17	11.3
	middle class	99	66.0
	upper class	6	4.0

Demographic characteristics of the child (N=122)

	Description	Frequency	Percentage
Age of autistic child	Early Childhood (3-5 years)	48	32.0
	Middle Childhood (6-12 years)		
	Adolescence (13 years)	71	47.3
		3	2.0
Level of autism severity	mild	4	2.7
	moderate	55	36.7
	severe	63	42.0
Gender of autistic child	Male	57	38.0
	Female	65	43.3

Table 01 shows the demographic characteristics of the sample along with frequency and percentage.

Table 2 ***Alpha Reliabilities for all the Study Variables (N = 122)***

Scales	*N*	*α*
PSS	18	.87
RDAS	14	.85
MSPSS	12	.88

Note. PSS=Parental Stress Scale, RDAS= Revised Dyadic Adjustment Scale, MSPSS= Multidimensional scale of Perceived Social Support

Result in table 2 demonstrates significantly high Alpha Reliability Coefficient of PSS ranging from .87 which is good enough. Same is evident for the RDAS as it ranges from .85 which also

comes under good reliability. Alpha Reliability Coefficient of MSPSS range from .88 which is highly reliable. Results in tables shows that all scales are highly reliable measures for the assessment.

Table 3 Descriptive statistics for all study variables (N=122)

	N	Min	Max	Mean	SD	Skewness	Kurtosis
PSS	122	29.00	89.00	59.50	13.50	.915	-.116
RDAS	122	22.00	74.00	52.05	10.94	-635	.383
MSPSS	122	29.00	88.00	55.86	14.81	.333	-401

Table 3 shows the descriptive statistics for all study variables. The mean of PSS is 59.5 and SD is 13.5. The mean of RDAS is 52.05 while the standard deviation is 10.94. the mean of MSPSS is 55.8 and standard deviation is 14.8. Skewness and kurtosis values are also provided to assess the distribution of the data. It is observed that all the scales exhibit normal distributions within an acceptable range, as indicated by the skewness and kurtosis values falling within ±2.

Table 4 Correlations between PSS, RDAS and MSPSS of the Study (N=122)

Variables	PSS	RDAS	MSPSS
1. PSS	1	-.278**	.535**
2. RDAS		1	.480**
3. MSPSS			1

Note. PSS=Parental Stress Scale, RDAS= Revised Dyadic Adjustment Scale, MSPSS= Multidimensional scale of Perceived Social Support

*The above table shows the result of Pearson Product Correlation which indicates the strength and direction of the relationship among study variables. The results illustrated that there is a positive significant relationship (0.535**) between parental stress and perceived social support. There is a highly significant negative relationship (-0.278**) between parental stress and dyadic adjustment. There is a significant positive relationship (0.480**) between dyadic adjustment with perceived social support.*

Table 5 Means, Standard Deviations and t-values of gender among Study Variables (N =122)

	Mother (*n* = 61)		Father (*n* = 61)				*95% CI*		
Scales	*M*	*SD*	*M*	*SD*	*T(120)*	*P*	*LL*	*UL*	*Cohen's d*
PSS	58.8	3.56	55.6	3.37	5.07	.00	1.94	4.43	0.92
RDAS	42.1	6.19	40.2	6.79	0.22	.00	1.23	6.73	0.29
MSPSS	52.1	6.23	55.7	7.34	2.31	.02	2.56	5.32	0.53

Note. PSS=Parental Stress Scale, RDAS= Revised Dyadic Adjustment Scale, MSPSS= Multidimensional scale of Perceived Social Support, M=mean, SD= Standard Deviation, LL=lower limit, UL= upper limit

Table 05 reveals the significant mean difference on gender of participants, findings show that parents of mother group higher scores on Parental Stress scale (M= 58.8, SD= 3.56), as compared to fathers (M= 55.6, SD= 3.37). The Cohen's d value of parental stress scale was 0.92, which indicate large effect size, p value of parental stress scale was .00 and t value of parental stress scale was 5.07 respectively. The findings shows that mothers score higher on dyadic adjustment as compared to fathers while father scores higher on social support scale as compare to mothers.

Table 6 Moderation analysis

Predictor Variables	*β*	SE	T	*P*	*95% CI*	
					LLCI	*ULCI*
Constant	-30.90	12.76	-2.42	0.01	-56.18	-5.62
PSS	1.34	0.20	6.61	0.00	0.94	1.75
MSPSS	0.73	0.22	3.21	0.00	0.28	1.18
Int_1	-0.01	0.003	-3.21	0.00	-0.01	-0.00
R^2	0.78	-	-	-	-	-
R	0.88					

Note. PSS=Parental Stress Scale, RDAS= Revised Dyadic Adjustment Scale, MSPSS= Multidimensional scale of Perceived Social Support, SE=Standard errors, β= Coefficients, CI=Confidence Interval, UL= Upper limit, LL= Lower Limit.

According to the findings, "PSS" and social support, with coefficients of 1.35 and 0.73, respectively, have a considerable impact on the outcome variable dyadic adjustment. On the other hand, with a coefficient of -0.01, the interaction term "Int_1" shows a negative impact on the outcome. Given that the p-values for each of the predictor variables are less than 0.05, these results are statistically significant. With an R-squared value of 0.79, this shows high percentage of the variability in the outcome variable. Thus, the moderation effect weakens the relationship between PSS and dyadic adjustment. This means that higher levels of social support (MSPSS) reduce the impact of parental stress (PSS) on dyadic adjustment.

Discussion

The objective of this study was to investigate the relationship among of Parental Stress, Dyadic Adjustment and Social Support for Pakistani parents with autistic children. This research was conducted to study the effects of social support on the bond between parents. In accordance with the previous literature on the stipulated constructs it has been posited that: (1) There exists a negative correlation between parent's stress and dyadic adjustment between parental to autistic children who are affected. (2) The social support available

to caregivers will influence the relationship between parental stress and dyadic adjustment in parents of autism spectrum disorder children. (3) Fathers of autistic children will express significantly more stress involved in parenting compared to mothers. By the end of the experiment, these problems have been enumerated.

*The study data provide grounds for Hypothesis 1 which proposed that psychological distress and marital adjustment are negatively correlated to parents of autistic children. The findings indicated a high negative correlation (-.278**) between parental stress and dyadic adjustment, a finding that corroborates previous research. It signifies that the higher the level of stress among parents tend to be the poorer marital relationship. In line with a hypothesis of autism having a major negative effect on parental attitudes and as a result, the marital relationship, parents of a child with autism may experience poor dyadic adjustment. The stress factors experienced by parents of autistic children are similar to those that their counterparts face, that include social isolation, financial difficulties, and a lot of caregiving duties (Smith et al., 2020). Parental stress causes substantial problems for marital happiness of the mates of neurodevelopmental disorders child including autism. Resilience is the inevitable buffer against this connection emphasizing its utmost importance in marriage sustainability (Pervez et al. ,2023). Parental stress can be considered as a negative factor while dealing with other parents or couples whose child is autistic, but social support can play the moderating role by helping them to cope with the stress (Wahab et al., 2022).*

The relationship between parental stress and dyadic adjustment among parents of autistic children is moderated and weakened, according to Hypothesis 2. The study's findings, which are displayed in Table 7, support this hypothesis. The study's findings, which indicate that social support considerably lowered the relationship between parental stress and dyadic adjustment, validated hypothesis 2. First, over the course of the research, emotional support was found to have a t-value of 6. 6152 (P < 0. 001) and a coefficient value of 1. 3478 with a standard error of 0. 2037. In light of their marital adjustment, this suggests that the social network of the intramarital partners may be a useful tool for easing parental stress.

The presence of supportive networks of interaction can have a substantial influence on the parental state of well-being and the effectiveness of the family as a whole. The support from the extended family, friends, support groups and healthcare professionals is also a very important factor since it may offer the parents the sense of validation and validation and may reduce the sense of loneliness and isolation that the parents may suffer from. Additionally, social support also gives a chance of offering some specific help in coping with daily stressful situations, including a care of a small child, financial troubles or receiving services and sources for their child (Ali et al., 2021: Altaf et al, 2021). The research in social support (Pakenham et al., 2021) supports the moderating role of supportive relationships in coping with the fact that Parental stress and dyadic adjustment are largely impacted by being protective. In their research, Davis & Gavidia-Payne (2019) reported that the social support in parents of children with autism spectrum disorder (ASD) was connected with the reducing of stress at the level of the individual. Estes and their co-workers investigated the cumulative effects of social support, and they found that social support was a significant factor which was predictive of the decreased level of stress among women of children with ASD over time.

As put forward by the third hypothesis, mothers of a child with autism will be more stressed-out than fathers. According to the data obtained from

the investigation, the present hypothesis is true. The study results endorsed Hypothesis 3 as they revealed a notable variation in degrees of stress between genders. The mean mother's score and the father's score were 58.8 and 55.6, respectively; the mother-specific parental stress was reported to much higher extent than the father's. Scale of the parental stress Cohen's d value was 0.92, in consequence, the effect size was significant. This research highlights the specific setbacks the mothers have to go through to enable their children with autism.

According to Benson and Karlof (2021), it is likely that older people pressure women more and expect them to follow the gender roles and obligations associated with caregiving, which in turn could lead to greater levels of stress experienced by women as compared to men. In addition, because women mostly have to shoulder the burdens of primary caregiving for their families, they are most likely to be pulled by the intricate and overwhelming demands of their kids, especially when they have special needs like autism (Johnston & Goldberg, 2021).

Moreover, mothers are often saddled with an excessive share of the mental burden associated with caregiving, which contains such components as responding to the child's emotional needs, campaigning for services, and organizing medical and educational interventions. For instance, stress and psychological strains levels can be elevated because of such situations (Pakenham et al., 2018). A mother of a child with autism can suffer from high levels of stress resulting from, for example, feelings of guilt, shame and self-blame which are caused by the reaction to personal shortcomings and to the society`s expectations (Miller et al., 2018).

Conclusion

It was found that the relationship between dyadic adjustment and parental stress was moderated by social support. Higher degree of social support was linked to less negative impacts of stress on the durability of relationships. This highlights the importance of social networks are for helping parents with autistic children build marital relationship. The survey also revealed that mothers of autistic children experienced more parental stress as compared to fathers. The gender differences in parenting are revealed by this study, which also emphasizes the importance for focused interventions to promote mother wellbeing in this population.

References

Amireh, M. M. H. (2019). Stress Levels and Coping Strategies among Parents of Children with Autism and Down Syndrome: The Effect of Demographic Variables on Levels of Stress. Child Care in Practice, 25(2), 146–156. https://doi.org/10.1080/13575279.2018.1446907

Altaf, S., Hassan, B., Khattak, A. Z., & Iqbal, N. (2021). Relationship of Parenting Styles with Decision-Making and Self-concept among Adolescents. Foundation University Journal of Psychology, 5(2).

Anderson, S. R., Banford Witting, A., Tambling, R. R., Ketring, S. A., & Johnson, L. N. (2020). Pressure to Attend Therapy, Dyadic Adjustment, and Adverse Childhood Experiences: Direct and Indirect Effects on the Therapeutic Alliance in Couples Therapy. Journal of Marital and Family Therapy, 46(2), 366–380. https://doi.org/10.1111/jmft.12394

Baraskewich, J., von Ranson, K. M., McCrimmon, A., & McMorris, C. A. (2021). Feeding and eating problems in children and adolescents with autism: A scoping review. Autism, 25(6), 1505–1519. https://doi.org/10.1177/1362361321995631

Brisini, K. St. C., & Solomon, D. H. (2021). Distinguishing relational turbulence,

marital satisfaction, and parenting stress as predictors of ineffective Arguing among parents of children with autism. Journal of Social and Personal Relationships, 38(1), 65–83. https://doi.org/10.1177/0265407520958197

Brown, M., Whiting, J., Kahumoku-Fessler, E., Witting, A. B., & Jensen, J. (2020). A Dyadic Model of Stress, Coping, and Marital Satisfaction Among Parents of Children With Autism. Family Relations, 69(1), 138–150. https://doi.org/10.1111/fare.12375

Buijsman, R., Begeer, S., & Scheeren, A. M. (2023). 'Autistic person' or 'person with autism'? Person-first language preference in Dutch adults with autism and parents. Autism, 27(3), 788–795. https://doi.org/10.1177/13623613221117914

Cetinbakis, G., Bastug, G., & Ozel-Kizil, E. T. (2020). Factors contributing to higher caregiving burden in Turkish mothers of children with autism spectrum disorders. International Journal of Developmental Disabilities, 66(1), 46–53. https://doi.org/10.1080/20473869.2018.1478630

Chan, K. K. S., & Leung, D. C. K. (2020). The Impact of Child Autistic Symptoms on Parental Marital Relationship: Parenting and Coparenting Processes as Mediating Mechanisms. Autism Research, 13(9), 1516–1526. https://doi.org/10.1002/aur.2297

Chouhy, C., Cullen, F. T., & Lee, H. (2020). A Social Support Theory of Desistance. Journal of Developmental and Life-Course Criminology, 6(2), 204–223. https://doi.org/10.1007/s40865-020-00146-4

Duca, D.-S. (2015). Family resilience and parental stress: The effects on marital relationship in the context of a child diagnosed with an autism spectrum disorder. Analele Ştiinţifice Ale Universităţii »Alexandru Ioan Cuza« Din Iaşi. Psihologie, 1, 71–90.

Durães, R. S. S., Khafif, T. C., Lotufo-Neto, F., & Serafim, A. de P. (2020). Effectiveness of Cognitive Behavioral Couple Therapy on Reducing Depression and Anxiety Symptoms and Increasing Dyadic Adjustment and Marital Social Skills: An Exploratory Study. The Family Journal, 28(4), 344–355. https://doi.org/10.1177/1066480720902410

Ede, M. O., Anyanwu, J. I., Onuigbo, L. N., Ifelunni, C. O., Alabi-Oparaocha, F. C., Okenyi, E. C., Agu, M. A., Ugwuanyi, L. T., Ugwuanyi, C., Eseadi, C., Awoke, N. N., Nweze, T., & Victor-Aigbodion, V. (2020). Rational Emotive Family Health Therapy for Reducing Parenting Stress in Families of Children with Autism Spectrum Disorders: A Group Randomized Control Study. Journal of Rational-Emotive & Cognitive-Behavior Therapy, 38(2), 243–271. https://doi.org/10.1007/s10942-020-00342-7

Enea, V., & Rusu, D. M. (2020). Raising a Child with Autism Spectrum Disorder: A Systematic Review of the Literature Investigating Parenting Stress. Journal of Mental Health Research in Intellectual Disabilities, 13(4), 283–321. https://doi.org/10.1080/19315864.2020.1822962

Factor, R. S., Swain, D. M., & Scarpa, A. (2018). Child Autism Spectrum Disorder Traits and Parenting Stress: The Utility of Using a Physiological Measure of Parental

Stress. Journal of Autism and Developmental Disorders, 48(4), 1081–1091. https://doi.org/10.1007/s10803-017-3397-5

Fang, Y., Luo, J., Boele, M., Windhorst, D., van Grieken, A., & Raat, H. (2022). Parent, child, and situational factors associated with parenting stress: A systematic review. European Child & Adolescent Psychiatry. https://doi.org/10.1007/s00787-022-02027-1

Gau, S. S.-F., Chou, M.-C., Chiang, H.-L., Lee, J.-C., Wong, C.-C., Chou, W.-J., & Wu, Y.-Y. (2012). Parental adjustment, marital relationship, and family function in families of children with autism. Research in Autism Spectrum Disorders, 6(1), 263–270. https://doi.org/10.1016/j.rasd.2011.05.007

Ramzan, L., Rashid, A., Aziz, S., Batool, S., Yaqoob, S., Khan, M. A., & Chugtai, A. S. (2022). Parental Stress of Pakistani Families with Children who Have Developmental Disabilities. Pakistan Journal of Medical & Health Sciences, 16(08), Article 08. https://doi.org/10.53350/pjmhs22168514

Rosheen, M., Hassan, B., Khattak, A. Z., & Iqbal, N. (2024). Parental Psychological Control, Adolescent's Emotional Autonomy and Its Relationship with Academic Resilience. Foundation University Journal of Psychology, 8(1), 43-55.

Schopler, E., Mesibov, G., & Baker, A. (1982). Evaluation of Treatment for Autistic Children and Their Parents. Journal of the American Academy of Child Psychiatry, 21(3), 262–267. https://doi.org/10.1016/S0002-7138(09)60881-5

Weinberg, M., Gueta, N., Weinberg, J., Abu Much, M., Akawi, A., Sharkia, R., & Mahajnah, M. (2021). The relationship between parental stress and mastery, forgiveness, and social support among parents of children with autism. Research in Autism Spectrum Disorders, 81, 101712. https://doi.org/10.1016/j.rasd.2020.101712

Wilde, J. L., & Dozois, D. J. A. (2019). A dyadic partner-schema model of relationship distress and depression: Conceptual integration of interpersonal theory and cognitive-behavioral models. Clinical Psychology Review, 70, 13–25. https://doi.org/10.1016/j.cpr.2019.03.003

Wong, P., Liamputtong, P., Koch, S., & Rawson, H. (2019). The Impact of Social Support Networks on Family Resilience in an Australian Intensive Care Unit: A Constructivist Grounded Theory. Journal of Nursing Scholarship, 51(1), 68–80. https://doi.org/10.1111/jnu.12443

Zeng, S., Zhao, H., Hu, X., Lee, J. D., Stone-MacDonald, A. K., & Price, Z. W. (2021). Are we on the Same Page: A DyadicAnalysis of Parental Stress, Support, and Family Quality of Life on Raising Children with Autism Spectrum Disorders. Journal of Developmental and Physical Disabilities, 33(4), 599–618. https://doi.org/10.1007/s10882-020-09761-x

Zou, R., Xu, F., Wang, Y., Duan, M., Guo, M., Zhang, Q., Zhao, H., & Zheng, H. (2020). Changes in the Gut Microbiota of Children with Autism Spectrum Disorder. Autism Research, 13(9), 1614–1625. https://doi.org/10.1002/aur.2358