Resilience of Parents with Autism Spectrum Disorder (ASD) in SLB Aisyiyah Tulangan Sidoarjo

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Abstract: The purpose of this study is to characterize the traits and resilience variables of parents of children in SLB Aisyiyah reinforcing sidoarjo who have Autism Spectrum Disorder (ASD). The newly identified traits and elements that support parents of children with autism spectrum disorder (ASD) in finding resilience in accepting their child’s diagnosis. This study employs a qualitative approach, by focusing on three pairs of parents of children with autism spectrum disorder who are between the ages of 28 and 35 and have overcome challenges to become resilient. The interview approach, which includes both field and general notes, is the technique used to obtain the dates. According to the study’s findings, every parent of a kid with autism spectrum disorder (ASD) possesses insight, independence, relationships, initiative, creativity, humor, morality, and resilience. I have overcome adversity because I am capable of doing so. Each subject’s faith and submission to Allah SWT’s will are also influenced by other causes. However, there is a temporal discrepancy in the resilience process amongst the three subject parents of children diagnosed with autism spectrum disorder (ASD). The support of those closest to you has an impact on this since youngsters with Autism Spectrum Disorder (ASD) must overcome their challenges.

Keywords: Resilience, Resilience Parents, Autism Spectrum Disorder Children.
Introduction

According to the large Indonesian dictionary, it is explained that parents are biological fathers and mothers, according to (Hasanuddin, 2020), parents are people who are known first by their sons and daughters who act as heads of families at home. Parents are the main first educators for their children, because it is from them that children first receive education, thus the first form of education is in the family.

Children are a gift from Allah SWT to give countless gifts to every parent, namely a child, a child as an intermediary to strengthen parental love and become a successor to a better generation of nations, seen from anything physically, socially, and also cognitively (Armiyati, 2021). Childhood is a transition period from toddlerhood to childhood. The growth and development of a child can be seen in physical, cognitive, emotional and social terms (Nurmalitasari, 2015). Every child in carrying out the development process goes through a period of development in sequence according to the stages of development that take place at each age, but there are children who have obstacles in the development process and as a result of one study conducted in the United States estimates that around 14 percent of children receiving special education or special services at the National Center for Education Statistics of the United States.

Disorders or obstacles in / / psychiatric development experienced by children are usually referred to as "children with special needs, which are meaningful in the process of growth and development that requires special education as a whole in their lives, starting from the outer aspects and the inner aspects (Desiningrum, 2017).

Symptoms or disorders of communication, interaction, and behavior in the development of autistic children, usually enter into aspects of obstacles in the development of brain structure and function, so that in their development they experience obstacles in communicating, interacting, and behaving in their lives. Both in the family environment and in the community environment DSM IV-TR defines "autism based on several criteria, such as at least six total symptoms, including at least two symptoms of qualitative impairment in social interaction, at least one symptom of qualitative impairment in communication, and at least one symptom of restricted and repetitive behavior."

All parents wish to have healthy and normal children, but it is possible that parents have problems that prevent them from having the children they want, such as children with health problems, such as Autism Spectrum Disorder (ASD). The presence of this problem causes shame and disappointment for parents who have children with Autism Spectrum Disorder (ASD). Autism Spectrum Disorder (ASD) is a developmental disorder in which one of the main characteristics is difficulty in establishing two-way communication, Autism Spectrum Disorder (ASD) only communicates limited to meeting needs, without any interest in further social interaction with others (Isnannisa & Boediman, 2019). Autism Spectrum Disorder (ASD) individuals including children with typical development have sensory profiles that differ from one another. However, children with ASD have atypical biological conditions related to stimulus sensitivity and processing, stimuli with levels that are considered normal for typical children are considered as something excessive for
children with ASD so that they have difficulty and need the help of others to regulate themselves (Cahyani, 2015).

According to (Pangestika, 2019) the beginning of the parents’ reaction when they find out their child is diagnosed with Autism Spectrum Disorder (ASD) which often appears in the reaction of shock, inner turmoil, sadness, stress, feelings of guilt, disappointment, heartache, anger, unable to accept the reality that occurs this makes parents withdraw from the environment and other people. Most every parent will feel confused about how to take care of children who have autistic disorders, considering the difficult handling of autistic children, such as toilet training, recognizing the dangers of socializing and others. Parents who have children with Autism Spectrum Disorder (ASD) are more prone to having high stress than parents who have normal children (11%) (Hidayati & Sawitri, 2017). According to (Sesa & Yarni, 2022), having a child with Autism Spectrum Disorder (ASD) is vulnerable to affecting a marriage relationship, where the marriage relationship experiences cracks, such as divorce and separation, compared to parents with normal children.

In general, all parents expect their children to be born with the ideal profile they imagine, so they have a demand in accordance with their expectations. Every parent wants their children to grow and develop healthily and normally like other children, have intelligence, good morals, can get along and socialize with others, and are expected to be independent and useful for the environment or for the nation and country. Parents often observe and compare the condition of their children with other children. When parents realize that their children are not perfect or do not match what they believe, many emotional reactions are displayed. They show responses of shock or surprise, rejection, deep sadness, anger, and various other reactions (Yudiati, 2020).

According to (Irawati et al., 2022) the anxiety of parents who have children with Autism Spectrum Disorder (ASD) can be seen from several cognitive characteristics, namely feeling about something, often feeling afraid or often imagining negatively about something that has happened and that has not happened in their child’s future, parents often feel afraid of their inability to overcome problems, worry about something, and thoughts feel mixed up or confused. But there are others who feel and show feelings of acceptance and happiness, namely feeling resilience.

Resilience is a relatively new term in the world of psychology, especially developmental psychology (Oldfield et al., 2018). Resilience is how a person is able to rise from conditions of stress, trauma, and risk in the life that is experienced. With resilience, a person can rise from his dark period towards a better time.

Obtained from the theory above, resilience is an important thing that is owned by each individual so that individuals are able to overcome their problems, someone who has resilience is able to go through an uphill struggle and make a failure not an end, but can take meaning from a failure by using their knowledge. On the contrary, someone who does not have resilience is unable to overcome his problems and even worsen the situation at hand.

Parents who have ASD children are very important to know and understand resilience to care for and educate their children so that the optimization of the potential of autistic
children can be achieved. The success of therapy for autistic children is not only determined by the severity of the symptoms, the age of the child when therapy begins, the child’s intelligence, speech and language skills, the intensity of therapy according to (Ningrum, 2016), but also determined by the active role of both parents. These problems encourage researchers to examine empirically the resilience of parents who have autistic children in dealing with problems, handling and optimizing the potential of ASD children. Resilience patterns that usually occur in parents are stimulus - response the purpose of developing resilience of ASD parents as we expect.

With this SLB school, it is hoped that it will provide information to parents who have children with special needs, especially ASD on new aspects and new experiences and change the way parents view ASD children and can educate their children properly and can rise from their past trauma without the need to experience excessive parenting stress in caring for and fearing the future development of children with mental disorders, especially Autism Spectrum Disorder (ASD).

**Methodology**

This study uses phenomenological qualitative research methods, aiming to determine the description of resilience in mothers who have ASD (Autistic Spectrum Disorder) children. The subjects in this study were mothers who had ASD (Autistic Spectrum Disorder) children. The research sample used non-random sampling purposive sampling technique. The data collection technique used was primary subject interviews and significant others. Data analysis with triangulation techniques.

**Result and Discussion**

Based on the above explanation of resilience factors in parents with children with Autism Syndrome Disorder (ASD), describing the three subjects have resilience forming factors, namely I Have, I Am, and I Can. Because the three subjects received support from their families so that they were able to achieve resilience. The three subjects also have a strong belief that they can provide good treatment and care for their children so that they can recover or have better development and believe that everything given has been arranged by Allah. Because the three subjects feel calm and happy without thinking about negative things, even in difficult circumstances, the three subjects realized that Allah is the owner of everything.

The three subjects were able to bring up a description of the three resilience factors as carried out by (Aisyah & Chisol, 2020) "Resilience in Parents Who Have Down Syndrome Children" showing the results of research on the description of resilient individuals that they have three factors namely I Have, I Am, and I Can. I Am is a strength from within the individual, namely love, empathy, pride in oneself, independence, belief in responsibility and belief and hope. I Can is an individual can manage various stimuli, can regulate temperament, establish relationships and be able to solve problems. I Have is an external factor that consists of trusting relationships and the drive to be independent.
In this study, it was also found that spirituality is also able to influence individuals to achieve resilience. As the results of research (Nay & Diah, 2013) "The Relationship between Spiritual Intelligence and Resilience in Students who Follow the Acceleration Program" with the result that individuals have poor spiritual intelligence will have low resilience. Because in the three subjects believe in God’s power, surrender to God's destiny and believe that God gives trials will not exceed the limits of his strength. Belief in God is a form of one's spirituality. So the higher the spirituality, the higher the resilience of the individual.

The three subjects bring up a description of the seven characteristics of resilience after bringing up the three resilience factors. The three subjects were able to experience what had happened and take responsibility for themselves and their families. The three subjects were able to control emotions so that they could focus on solving the problems they were facing. The three subjects were able to improve relationships with family and the surrounding environment. The three subjects did not give up in overcoming the problems that were happening as a form of responsibility of a mother / father (Parent), the three subjects remained focused and tried to find ways for the right solution in dealing with changes that occurred by their children.

As conducted by researchers (Nisa, 2012) "Study of Resilience (Resiliency) of Children in Sidoarjo Orphanage" which shows the results of the subject's research being able to increase resilience because it has seven characteristics. In accordance with what is said (Isnaini & Lestari, 2018) that there are seven characteristics of Insight, Independence, Relationships, Initiative, Creativity, Humor, and Morality.

The three subjects bring up a picture of three resilience factors and seven resilience characteristics with different periods of time. As Meichenbaum said (Aisyah & Chisol, 2020) resilience is seen as a phenomenon that is "fluid" over time. Individuals may be resilient at one stage of development, but not at another. (Nisa, 2012) states that there are two components that must be present in identifying resilience, namely exposure to difficult and stressful situations, severe obstacles or threats in an individual’s life, and individual positive adjustments to these situations. Thus it is concluded that resilience is a dynamic process that involves the role of various individual and social or environmental factors, which reflect the strength and resilience of a person to rise from negative emotional experiences when facing difficult and stressful situations.

Based on the explanation above, the resilience characteristics of parents with Autistic children illustrate that the three subjects have seven characters to be resilient and able to overcome adversity. The three subjects were able to understand what had happened and take responsibility for themselves and their families. Able to control their emotions so that they can focus on finding problem solving. Able to establish good relationships with family, friends, friends, school teachers and therapists, this is evident that the subject can find various solutions for his child.

The three subjects continued to work hard to find information and new businesses as a form of responsibility as parents. The three subjects remained focused on the problem at hand so that they could find the right solution. The three subjects still feel calm and happy
even in difficult circumstances, when the subjects can also take the positive side of each problem, and are able to rise to do more positive activities even better. The subject also realized that Allah is the owner of everything.

**Conclusion**

The three subjects showed a characteristic picture of insight, independence, relationships, initiative, creativity, humor, and morality. But there is a difference in the time it takes for the three Subjects to get up, Subject III takes longer than the other subjects. The three Subjects were able to accept difficult conditions and realize that the Subject as a parent is responsible for the family, able to think of ways to solve problems, able to maintain relationships with family and friends, keep trying again to build a more advanced business, self-introspection and have hope for a happier future. Subject I. Subject II and subject III were able to feel happiness and express themselves well even in unpleasant conditions. Subject III was able to control emotions and regain the spirit to try.

The three subjects showed a description of the I Have, I Am, I Can factor. The subject realized the conditions that had occurred, surrendered to God and believed in God the Giver of Fortune. Surrender to Allah SWT is a form of spirituality of the subject. In this case, the subject’s spirituality is one of the factors that helps the subject to achieve resilience. The subject received support from the family.

**References**


