Brief communication

The influence of family's cohesion and adaptability in family satisfaction of parents with a child with autism spectrum disorder

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ABSTRACT

The current study examined whether there was significant relationship among family functioning (cohesion and adaptability) and overall family satisfaction in parents with a child with autism spectrum disorder. It was predicted that poor family adaptive functioning, poor family cohesion along with other family-related variables (child diagnosis, parents' marital status, and other siblings in the family) would predict lower levels of family satisfaction. 73 mothers and 27 fathers of a child with ASD participated in this study. Google forms were used in this electronic web research. Data were collected using the Family Adaptability and Cohesion Evaluation Scale (FACES–III) and the Family satisfaction scale (FSS). This study's results demonstrate that family adaptability along with a child's autism spectrum disorder diagnosis may be significant predictors of family satisfaction. Findings report the significance of identifying discrepancies in family functioning as they provide an insight into how family members not only view but also how they interact with each other which in turn can inform clinical interventions and the therapeutic work.

KEYWORDS: Autism spectrum disorder, family functioning, family satisfaction, parental role.

Introduction

The lifelong nature of autism has deep implications on parents of children with the disorder, resulting in a wide range of challenges. Research findings comparing the stress of a family with a child with autism to families of children with other disorders (e.g., Down syndrome) demonstrate that those with a child with autism experience more stress, depression, and anxiety.[1,2] Parents who have a child with autism report their difficulties and stressors as a twenty-four-hour job through the child's entire lifetime.[1,2] Previous research data show that parents of children with autism are at a high risk for marital discord.[3] They also seem to report greater levels of depression and lower levels of marital intimacy.[4,5]

Family satisfaction is a vital construct, and it has been widely used in studies of normal and problematic family functioning.[6] According to Ghanizadeh et al[7] children with ASD may have a variety of difficulties which in turn could influence their parent's family satisfaction and subsequently family life. In parallel, family functioning and family satisfaction are essential regarding the interactions between children with autism spectrum disorder (ASD) and their parents.[8] According to Olson et al,[9] family cohesion is defined "as the emotional bonding that family members have toward one another" while adaptability is a measure of the family's capacity to adjust in response to a stressful situation.[10]

Overall, taking care of a child with autism spectrum disorder (ASD) has been associated with various neg-

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ative outcomes for parents namely heightened levels of stress and depression.[11,12] Nevertheless, much less is known about the couple relationship.[13]

The present study aimed to explore parental relationship satisfaction in families where one child has ASD. Specifically, it was examined if poor family adaptive functioning, poor family cohesion along other family-related variables (child's diagnosis: Asperger's disorder/ASD, parents' marital status, and other siblings in the family) could predict lower levels of family satisfaction.

Material and Method

Participants and procedure

Participants completed the questionnaire as a part of an online survey which was distributed through internet websites and media. Participation was voluntary and anonymous. Participants were informed about the aims of the study to ensure informed consent. The research was distributed for a limited period and until the number of 100 participants was reached. It was conducted from May 15 till June 15, 2019. This study adhered to all ethical guidelines of the institution to which the researcher belongs to.

Measures

Data were collected using the Family Adaptability and Cohesion Evaluation Scale (FACES–III)[9] and the Family satisfaction scale (FSS).[6] FACES-III is a self-administered measure that evaluates the cohesion and adaptability of the families (with or without a child with a severe disability). Cohesion is defined as the degree of emotional bonding between family members, and adaptability refers to the ability of the family system to change in response to situational and developmental stress. FACES-III is designed to be given twice. One form asks participants to describe their family and the following asks how they would like their family to be. Therefore, it is a 20-item scale, which estimates the real and ideal type of family functioning. Each item was scored on a 5-point response option that ranged from "1=rarely" to "5=always." The scale was first completed with the instruction 'Describe your family now'. Afterward, participants were asked to respond to 'Ideally, how would you like your family to be? Established norms show that high scores on the two dimensions refer to balanced types of families, moderate scores to mid-range types, and low scores to extreme types of families. The FACES III scale has been standardized and adapted to Greek by Bibou et al.[14]

In this study, the reliability of internal consistency (Cronbach's a) was 0.82 for cohesion and 0.84 for adaptability.

The FSS6 is a 14-item instrument composed of items designed to measure family cohesion and adaptability. Each item was scored on a 5-point Likert scale (1=dissatisfied, 2=somewhat dissatisfied, 3=generally satisfied, 4=very satisfied, 5=extremely satisfied). Total scores range from 14 to 70. The FSS6 has been standardized and adapted to Greek by Papadi.[15] In this study, the reliability of internal consistency of the FSS (Cronbach's a) was 0.79.

Results

Descriptive analysis

Most of the 73 participating mothers were above 36 years old whereas most of the 27 fathers were above 36 years old. Age ranged from 33 to 58 (M=44.36, SD=8.41). Most of the participants were married (71) and had more than one child (69). Parents reported that 81 children with ASD had a diagnosis of autism and 19 were reported as having a diagnosis of Asperger's syndrome. Diagnoses in this study were assigned according to DSM-IV-TR[16] criteria by child psychiatric units.

Multiple regression analysis

Multiple linear regression analysis was used to examine the association between predictor variables (FACES-III: real family cohesion, FACES-III: real family adaptability, children's diagnosis, other children in the family, parents' marital status) and the FSS. The total score obtained from the FSS scale was used as the dependent variable. The assumptions of regression analysis were tested and were not violated.[17] The analysis showed that there was a collective significant effect between predictor variables and the dependent variable ($F(5,94)=2.68$, $p<0.05$, $R^2=0.078$). The individual predictors were examined further and indicated that FACES-III: real family adaptability ($t=2.30$, $p=0.023$) and children's diagnosis ($t=2.05$, $p=0.043$) were significant predictors in the model (table 1).

Discussion

This study's results show that higher levels of family satisfaction are related to the family's adaptability levels and also with their child's ASD diagnosis (Asperger syndrome). Adaptability (the family's ability to change its power structure, role relationships, and rules to respond to situational or developmental needs)[9,18] was found to be a critical factor in predicting family satisfaction in this study's sample. After all, following a diagnosis of ASD, families encounter a continuing process of adaptation in all aspects of their child's life and development.[19,20]

Table 1. Multiple regression analysis for family adaptive functioning, family cohesion, child's diagnosis, parents' marital status, and other siblings in the family predicting family satisfaction.

Predictor variables	B	SE	β	t	p
Real family cohesion	0.279	0.151	0.182	0.184	0.869
Real family adaptability	0.449	0.195	0.233	2.30	0.007
Child's diagnosis	0.127	0.062	0.198	2.05	0.032
Other children in the family	0.034	0.120	0.027	0.280	0.374
Parents' marital status	0.004	0.127	0.005	0.035	0.972

This study's findings coincide with previous research data demonstrating that family adaptability may be a basic factor of resilience and positive outcomes in raising children with ASD.[21]

This study's practical implications show that families with a child with ASD may have the potential to be greatly benefited from early interventions targeted also in couples relationship and family satisfaction. The longitudinal examination of these relationships along with the impact of other significant factors such as family's financial constraints, lack of social support, and the shortcomings of health policies could be another significant area of research. In all, a measure of family functioning of this type, which is easy and quick to complete, could be used to offer a way of monitoring a family's efforts to cope with a demanding situation and respond to its members' psychosocial needs. Overall, families are complicated systems and it is very challenging to find effortless evaluation methods which are of practical assistance to the clinician while offering meaningful information about the family.

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Σύντομο άρθρο

Η επίδραση της οικογενειακής συνοχής και προσαρμοστικότητας στην οικογενειακή ικανοποίηση γονέων με παιδί με διαταραχή αυτιστικού φάσματος

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ΠΕΡΙΛΗΨΗ

Η παρούσα μελέτη διερεύνησε την ύπαρξη σημαντικών στατιστικά σχέσεων μεταξύ της οικογενειακής λειτουργίας (συνοχή και προσαρμοστικότητα οικογένειας) και της συνολικής οικογενειακής ικανοποίησης σε γονείς με παιδί με διαταραχή αυτιστικού φάσματος. Θεωρήθηκε ότι η κακή προσαρμοστική λειτουργία της οικογένειας, η κακή οικογενειακή συνοχή μαζί με άλλες μεταβλητές που αφορούν στην οικογένεια (διάγνωση, η οικογενειακή κατάσταση των συμμετεχόντων και η ύπαρξη και άλλων παιδιών στην οικογένεια) θα προέβλεπαν χαμηλότερα επίπεδα οικογενειακής ικανοποίησης. Εβδομήντα τρεις μητέρες και 27 πατέρες παιδιού με διαταραχή αυτιστικού φάσματος συμμετείχαν στη μελέτη. Για τη διεξαγωγή της μελέτης χρησιμοποιήθηκε η εφαρμογή Google forms. Τα δεδομένα συλλέχθηκαν χρησιμοποιώντας την κλίμακα οικογενειακής προσαρμοστικότητας και συνοχής (FACES – III) και την κλίμακα οικογενειακής ικανοποίησης (FSS). Τα αποτελέσματα της μελέτης δείχνουν ότι η προσαρμοστικότητα της οικογένειας, καθώς και η διάγνωση του παιδιού αποτελούν σημαντικό παράγοντα πρόβλεψης της οικογενειακής ικανοποίησης. Τα αποτελέσματα της έρευνας τονίζουν τη σημασία του εντοπισμού των προβλημάτων της οικογενειακής λειτουργίας καθώς παρέχουν μια εικόνα όχι μόνο για το πώς τα μέλη της οικογένειας αντιλαμβάνονται τις μεταξύ τους σχέσεις αλλά και πώς αλληλεπιδρούν μεταξύ τους, εικόνα η οποία μπορεί να αποβεί ιδιαίτερα χρήσιμη στις κλινικές παρεμβάσεις και τη θεραπευτική εργασία.

ΛΕΞΕΙΣ ΕΥΡΕΤΗΡΙΟΥ: Διαταραχή αυτιστικού φάσματος, οικογενειακή λειτουργία, οικογενειακή ικανοποίηση, γονικός ρόλος.

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