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Research Paper

Effectiveness of Acceptance and Commitment Based Therapy on Psychological Capital in Mothers of Children with Autism Spectrum Disorders



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Nazanin Rava^{1*}

1. MA. of Clinical Psychology, Semnan Azad University, Semnan, Iran.



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ABSTRACT

Objective This study aimed to investigate the effect of acceptance and commitment therapy on the psychological capital of mothers with children with an autism spectrum disorder.

Methods This research is methodically classified as experimental research and had a pre-test and post-test design with a control group. The statistical population of this study included all mothers of children with autism spectrum disorders in medical and rehabilitation centers in Semnan in 2018. Twenty mothers with children with autism spectrum disorder were selected as the research sample by available sampling method and were randomly assigned to the experimental (n = 10) and control (n = 10) groups. Initially, both groups were evaluated by an autism questionnaire. Then, the intervention program based on acceptance and commitment was performed in 10 sessions of 45 minutes and 2 times a week by the researcher on the experimental group. While the control group did not receive such intervention. Analysis of covariance was used to analyze the data.

Results The results showed that treatment based on acceptance and commitment has improved the psychological capital of mothers.

Conclusion Therefore, acceptance and commitment therapy can affect the mental health and psychological capital of mothers of children with autism spectrum disorders.

1. Introduction

Autism is a neurodevelopmental disorder characterized by persistent deficiencies in social interaction and limited repetitive and stereotyped patterns of behavior, activities, and interests (American Psychiatric Association, 2013). One of the important issues in mothers of children with autism is psychological capital. Autism spectrum disorder due to several features such as spectrum involvement A

variety of language, communication, behavioral, social disorders as well as late detection And difficulty, the onset of symptoms after a normal period of normal child development, lack of treatments A definitive and effective and not so favorable prognosis can cause various psychological pressures on Family impose. These children have problems with adaptive behavior, aggression, behaviors Obsessive-compulsive disorder, clichéd behaviors, restlessness, crunching, destructive and abnormal behaviors,

*Corresponding Author:

Nazanin Rava

Address: MA. of Clinical Psychology, Semnan Azad University, Semnan, Iran.

E-mail: rava.nazanin@gmail.com

problems Interaction, social setbacks, and generally weak self-management are many challenges. They create for family members. Research background shows that parents of children Autistic compared to parents of normal children, parents of children with chronic diseases And the parents of other children with special needs, stress, and mental fatigue, Experiencing mental disorders, stress and depression, and higher anxiety. and of course It is noteworthy that mothers compared to fathers welfare and mental health lower and anxiety And they experience more stress and a higher risk of getting health problems There is psychology in these families (Moghtadari, Akbari and Haghgoo, 1391; Ebrahimi, Welfare, Zarei Mahmoudabadi and Ghasemi, 1391).

Mansell and Morris divide the process of affecting autism in the family into four stages They do: before diagnosis, diagnosis period, after diagnosis, and finally acceptance and Compatibility with consequences. In the pre-diagnosis stage, parents pay attention to a series of behavioral symptoms It is attracted to the child. This stage is confused as a result of the child's behaviors, emotions Self-blame and severe stress are characterized by family relationships. On stage Diagnosis has been the initial reaction of parents, shock, disbelief, anger, frustration, denial, and confusion. Is. During this period, many parents suffer from anxiety and worry about the impact of autism on Have become their life. This is a key time for professionals to get information Correct about the nature of the disorder, as well as existing protections and risk factors Explain to the child and balance between realism about future problems There is an early intervention program that can help their child, To establish. In the post-diagnosis period, parents with a wide range of stresses and worries And one of their biggest worries about the child's future is that The child will never be completely normal again and that those around him will change the child's condition Do not understand and react negatively to the child and his parents. Actually. The most stressful factor that parents of autistic children experience .The importance of this article is that: In the past, the number of these children was low, "This disease has no physical manifestations and it is difficult to diagnose." These people have more communication problems, so the role of families in the timely diagnosis of these children is very important. Some of these people are diagnosed with the disease up to 3 and 5 years old and even during primary school. If diagnosed early, some of these

children can go to regular schools.

Adviser to the Minister of Health on Rehabilitation Affairs said: "In recent years, the percentage of this disease has increased and one in every 60 to 70 children born has autism, and it can be said that autism is the most common disease in children." Dr. Joghtaei, stating that the cause of this disease is not completely clear, said: This disease has different symptoms and is related to before birth, fetal formation, and occurs during fetal development, but it can not be said that it is a genetic disease. Of course, social causes, medication, stress, and air pollution are also risk factors that cause this disorder. Psychological capital is one of the important components of positive psychology. Positive psychology emphasizes the strengths of individuals and the improvement of their performance in various aspects of life (Lutans and Joseph, 2007). Given all of the above factors, it is clear that parents of autistic children in particular Their mothers are under a lot of stress and have special needs at every stage. With Attention to the prevalence of stress and depression and stress among the population of mothers of children with Autism Disorder (Diligent, Attar, and Slogan , 2019; Khorshidian, Dosti, Samadai, and Mortazavi Kesari,2018) and their negative effects on mothers' performance in life as well as the costs to It is then imposed on society and families to conduct such research for the investigation The family consequences of autism are of particular importance. In addition, reviews This indicates that most studies in the field of mothers of autistic children, Quantitative and qualitative studies on the experience of mothers of autistic children are limited Is small; On the other hand, families of children with autism spectrum, very diverse experiences and They are unique, which cannot be explained by quantitative current research, and for understanding and Deep knowledge and explanation of these real experiences, conducting qualitative research is very valuable; Qualitative research as opposed to quantitative research on creativity, flexibility, breadth, They have a certain depth and complexity and with any qualitative research, we can go to new horizons Recently obtained a research question; In addition to the components emphasized by researchers In the past, it explored new components. Also, families of autistic children The reason for having a child with a lifelong disorder requires intervention, education and Lifetime support is long-term; This is while in Iran, despite High prevalence of autism among children, factors such as

limited treatment and rehabilitation centers, Living experience of mothers of children with autism spectrum disorder: A phenomenological study 993 Service providers seem to play an effective role in accepting parents as well as overcoming them On issues and challenges related to their child's care and treatment, therefore The need for research to develop simple, cost-effective, and effective interventions that Reduce the wear and tear of caregivers and increase the family's ability to cope with the disease, It is felt more than before. The results of this research and the deep understanding of the experience of these mothers in Living with an autistic child, recognizing the mental state of mothers, paying attention to needs and problems They can reach all relevant institutions and organizations, including consultants and policymakers Family and welfare organization, to develop basic and practical programs and provide Provide support resources for these mothers to help ensure their mental health.

Due to the unique characteristics of children with autism spectrum disorders and their importance The role of mothers in their rehabilitation and care as well as being a big part of life Mothers of autistic children spend in child care, lack qualitative studies that Understand the meaning of mothers' caring experiences, it feels. Therefore, considering the need to recognize the impact of childhood autism on mothers and promotion The quality of life of mothers and their support, this study aims to explain the phenomenology of experience Mothers took on life with autistic children. Lack of credible family education and little support from service providers Mental health has doubled the burden of caring for children with autism; According to Lutens, psychological capital refers to a person's positive psychological state and includes four personal characteristics: self-efficacy, optimism, hope, and resilience. There is considerable evidence that psychological capital is positively associated with several beneficial outcomes, such as job satisfaction, health, and psychological well-being, and negatively correlated with several adverse outcomes, such as job stress and anxiety. (Zang, Chang and Grove, 2019) the first component of psychological capital, self-efficacy, means being confident in one's ability to perform and complete the tasks assigned to the individual. Positive expectations for future events (Hui, Cao, Li and Hee, 2014). Being consistent in moving towards goals and when it is necessary to reconsider the orientation

towards goals to achieve the result, constitutes the third component of psychological capital, namely hope. Finally, the fourth component of psychological capital, resilience, is related to positive coping and the ability to retreat forward when surrounded by hardships and problems (Gorgens-Ackerman & Herbert, 2013; Bergheim, Nielsen, Myren's. And Aid, 2015).

One of the therapies that have emerged from the development of cognitive-behavioral therapies is acceptance and commitment therapy, which has recently become the focus of researchers. Acceptance and adherence therapy is one of the new approaches to behavior therapy. In this treatment, acceptance and mindfulness interventions are used along with strategies of adherence and behavior change to improve psychological flexibility in treatment seekers. Psychological resilience refers to the ability to contact the moments of life and change or perpetuate behavior, behavior that is aligned with one's chosen values. (Flexman and Lodge, 2002; translated by Mirzaei and No Nahal 2015). Acceptance and commitment therapy is a psychological intervention that uses mindfulness and acceptance strategies along with commitment and behavior change strategies to increase psychological flexibility and its goal is to increase psychological flexibility, resilience, and resilience. It is widely useful in various behavioral and mental health contexts (Dostkam and Samadi; 2014). According to the above, the purpose of this study is to investigate the effect of acceptance and commitment therapy on the psychological capital of mothers with children with an autism spectrum disorder.

2. Materials and Methods:

This research is methodically classified as experimental research and had a pre-test and post-test design with a control group. The statistical population of this study included all mothers of children with an autism spectrum disorder in medical and rehabilitation centers in Semnan in 1397. Twenty mothers with children with autism spectrum disorder were selected as the research sample by available sampling method and were randomly assigned to the experimental (n = 10) and control (n = 10) groups.

Psychological Capital Questionnaire: This scale was developed by Lutans, Olivier, and Joseph (2007) and contains 24 items that measure four dimensions of psychological capital. These 4 dimensions are self-efficacy, optimism, hope, and resilience. Each of these

dimensions includes 6 items. Although this scale is new, many studies have shown the validity of this scale at the intercultural and occupational level, and the validity of these subscales has been proven (Morrow, Rodriguez and King, 2018). Also, the reliability of this questionnaire has been reported to be 0.85 (Lutans, Lutans, 2004). In Iran, Cronbach's alpha was 0.71 and the validity was 0.66.

Execution method: The intervention program is based on acceptance and commitment in 10 sessions of 45 minutes and 2 times a week was performed by the researcher on the experimental group in Semnan city with one-month dictation while the control group did not receive such intervention.

The program view is described in Table 1.

Table 1 Group treatment method based on acceptance and commitment

Treatment sessions	Content and purpose of each session
First session	Execution of schema questionnaire, conscious mind focus, exploring how schemas affect clients' emotions and cognitions
Second session	Investigation of schema motivators, coping behaviors, performing exercises in the direction of constructive frustration
Third session	Investigate the costs of schematic coping behaviors, talk about constructive frustration, and help members stop trying to control
Fourth session	Provide a psycho-educational material to understand the values, the user of valuable goals, the worksheet of assessing obstacles
Fifth session	Training the five senses, reviewing homework, presenting a psycho-educational article about faulting, teaching specific faulting techniques, practicing faulting techniques by members, determining homework
Sixth session	Provide psycho-educational material about failure and focus on evaluations versus descriptions, cultivate your practice as a tissue
Seventh session	Discussion about the inevitability of suffering and deteriorating relationships, presenting a psycho-educational article on anger, examining the costs of hatred
Eight session	Show fault, explore the costs of avoiding painful emotions, explore getting rid of old control strategies, provide mental imagery to cultivate a self-observer perspective
Ninth session	Responding to recent schematic motivating events, providing an illustration that evokes mindfulness and kindness towards schema-related suffering
Tenth session	Provide a meditation to increase kindness to oneself and others, discuss performance improvement strategies, members' commitment to a new goal, post-treatment evaluations

3. Results

Analysis of covariance was used to analyze the data.

Table 2. The mean and standard deviation of psychological capital scores in two stages of measurement by experimental and control groups

Variable	Group	level	Mean	Standard deviation
Psychological capital	Control	Pre-test	36.65	6.976
		Post-test	36.98	6.998
	Experiment	Pre-test	36.34	7.734
		Post-test	39.87	5.034

Table 2 shows the descriptive statistics related to the mean and standard deviation of psychological capital scores for the experimental and control groups in two stages of assessment (pre-test and post-test). As

can be seen, in the control group, the average scores in the pre-test and post-test stages do not show much change, but in the experimental group, we see a greater increase in scores in the post-test than in the pre-test.

To investigate the effect of acceptance and commitment-based therapy on the psychological capital of mothers with children with autism spectrum disorder, an analysis of covariance (ANCOVA) test was used. Before this test, the statistical assumptions

of the normality of the distribution of scores using the Kolmogorov-Smirnov test, the uniformity of the regression line slope, and the homogeneity of variances were examined using the Levin test. The use of analysis of covariance is unrestricted.

Table 3. Results of analysis of covariance to compare psychological capital in the experimental group and the control group

Source of changes	Total squares	Df	Average squares	F	Significance	Effect size
Pre-test	354.745	1	354.745	193.697	0.001	0.958
Psychological capital	12.798	1	12.776	6.861	0.028	0.437
Error	16.864	9	1.876			
Total	377.698	11				

Table 3 shows the results of the analysis of covariance to compare the scores of psychological capital in the experimental and control groups, in the post-test phase. The value of F obtained is equal to 6.861 and is significant at the alpha level of 0.05 ($p < 0.05$). Therefore, the null hypothesis is rejected and the research hypothesis is confirmed. Due to the higher mean scores of the experimental group in the post-test, it can be concluded that treatment based on acceptance and commitment has been effective on the psychological capital of mothers with children with an autism spectrum disorder.

4. Discussion and Conclusion:

These To explain these findings, it should be said that acceptance and commitment-based therapy (ACT) is one of the psychological interventions that does not mean life satisfaction to get what we have, but it means satisfaction with experiences, accepting them, and facing the situation. Emotional emotions are negative (Asha, Farahbakhsh, Sedroposhan Vastodeh, 2012). In explaining the above findings, psychological capital can be considered as one of the characteristics and skills It is considered fundamental that in the case of mothers of autistic children in Living and interacting with a child is less vulnerable to stressful life events They show themselves and as a result, are less likely to suffer from physical and mental exhaustion They become and finally feel more satisfaction, vitality, and well-being. The results of some studies are in line with the results of the present study; Including Hussein Khanzadeh, Yazdani, and Khodakarami (0998) in a study comparing the psychological capital of mothers Children with autism spectrum disorder and mothers with normal children and results Showed that there is a significant difference between the two groups in the

psychological capital variable, So that the psychological capital of mothers with autistic children is less than the average capital The psychology of mothers without children is autism. Also Mehrbakhsh Markhali, Tahernia and Salehi (2018) In a study comparing the components of psychological capital in mothers of children with and Non-metallic autism and the results showed that among all four components of psychological capital There is a significant difference between the two groups. And in another study entitled Comparison of Features Psychology and psychological capital of mothers with hyperactive boys and mothers with Autism boy children, the results showed that in psychological capital, in components Self-efficacy and resilience of mothers of children with autism have a higher score than mothers of children They were inactive and the difference between the two groups was significant. But the two groups in terms of components of hope and Optimism did not differ significantly (Heidari and Heidari, 0991). With the help of mothers of children with autism spectrum disorder and teaching techniques such as their desire and acceptance, they learn to identify and address some of the obstacles in their lives (Heidarian Samani, Sajjadian Vahidari Shadehi, 2017). In this treatment, people learn how not to mix with their disturbing thoughts and be able to endure the feelings and emotions, and painful experiences of their lives. In cognitive fusion, the event is intertwined with the mind. People in this therapy learn how not to mix with their disturbing thoughts and be able to endure the feelings and emotions and painful experiences of their lives. In cognitive fusion, events are intertwined with thought as if they are inseparable. Overall, the results suggest that the autistic child has negative effects on the mother.

It has marital relations, social relations, and mother-child interactions with other children. From Including the negative effects of the child on the mother, job restrictions, leaving the job, loss Some job benefits and economic difficulties, loss of personal development opportunities, Ignoring personal excellence and reducing the quality of personal, family, and social life of the mother is. Negative effects on marital relationships such as tension and relationship destruction, relationship reduction Maternal emotional, emotional divorce, increased anxiety and insecurity and peace of mind of the mother, decreased Psychological adjustment, reduction of achieving maximum adaptation to the disorder, and the process of treatment and care The child and the mother's ability to cope is reduced. Favorable relationship with a spouse in Form of cooperation and cohesion as well as mother self-efficacy, satisfaction, and peace of mind Makes the mother responsible for the child. In connection with the negative effects on The relationship of mother and child with other children can be due to not allocating enough time and as a result Severe limitation of recreation, lack of favorable communication, stress between mother and child, and motivation in Childbearing was mentioned It can be said that the techniques that increase cognitive fault, the components of acceptance: contact with the present, sharply increase and promote values and self-concept. With increasing self-efficacy, resilience, hope, and humor, the person who previously had negative thoughts and feelings that prevented him from doing things and believed that he can now act differently and doing committed action will change the behavior in the person. In this therapeutic approach, people learn to focus on their current activities and to observe their feelings, thoughts, and beliefs without judgment (Simpson, 2017). And this factor improves the quality of life in them. Among the limitations of the present study, Qualitative research as opposed to quantitative research on creativity, flexibility, They have a certain breadth, depth, and complexity, from research design

to data analysis Includes. The mentioned features, however, are considered as strengths of the qualitative method But researchers in this field face special tasks, challenges, and problems All stages of research from the initial semi-open questions and their continuous changes in the field of study to There is a wealth of analysis of diverse qualitative data. The present qualitative research also addresses issues Methodological was mentioned. In qualitative research, the mentality of researchers may be based on The various stages of the research are influential, although in this field the effort was on objectivity, Finally, this is a research limitation. The reluctance of some mothers to Participating in research and refusing to be interviewed to provide information is another Limitations of the present study were present. Also, some mothers are reluctant to respond to Some of the interview questions, including those related to the impact on your family relationships They did not have a relationship with their spouse, in particular, they avoided telling the truth and tried to go through They had questions and no answers.

5. Ethical Considerations

Compliance with ethical guidelines

All ethical principles are considered in this article. The participants were informed about the purpose of the research and its implementation stages. They were also assured about the confidentiality of their information and were free to leave the study whenever they wished, and if desired, the research results would be available to them.

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Authors' contributions

The author himself has been present in designing, executing and writing all parts of the research.

Conflicts of interest

The authors declared no conflict of interest.

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