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“SUMMER DOESN’T COME WITH A SINGLE ROSE” : A QUALITATIVE RESEARCH OF TURKISH MOTHERS’ SOCIAL SUPPORT SYSTEMS WHO HAVE A CHILD WITH ASD

“Tek Bir Gülle Yaz Gelmiyor” OSB Olan Çocuğa Sahip Türk Annelerin Sosyal Destek Sistemleri Üzerine Nitel Bir Araştırma

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ABSTRACT

Being a mother is defined as a serious life event in which women often experience physical, psychological and sociological changes. Parenting a child diagnosed with autism can be associated with a high risk of presenting mental health problems such as anxiety and depression. Therefore, researchers, educators or professionals have focused on family members, as well as ASD individuals. Involvement of a child with special needs in the family can often bring stressful and challenging experiences. The purpose of this study is twofold; first, to explore their perspectives on children and social support systems of women with children who have autism spectrum disorder (ASD) and second, to unfold their life experiences. The study was structured using qualitative research method. Qualitative interviews were conducted with mothers of children diagnosed with ASD in Ankara, Turkey. Interviews were conducted with 11 middle age, unemployed Turkish mothers. Data was collected through semi-structured interviews and content analysis was used. The results are interpreted in two main themes (perspectives of mothers on their children and social support). According to the research findings, women mostly don’t have social support and they gradually lose connection to their husbands and other family members or peers. Finally, the findings obtained from the study were discussed in the light of the relevant literature.

Keywords: Parenting, ASD, mother, autism spectrum disorder, social support

ÖZET

Anne olmak kadınlar için psikolojik, fizyolojik ve sosyolojik olmak üzere çok yönlü değişimleri içeren ciddi bir yaşam olayıdır. Otizm spektrum bozukluğu (OSB) olan bir çocuğa anne babalık etmek çoğu zaman anksiyete ve depresyon gibi mental sağlık sorunları ile ilişkili görülür. Bu nedenle, araştırmacılar, eğitimciler veya profesyoneller, OSB olan bireylerinin yanı sıra aile üyeleri üzerine de yoğunlaşmıştır. Aileye özel ihtiyaçları olan bir çocuğun katılımı, stresli ve zorlayıcı deneyimler getirebilir. Otizm spektrum bozukluğu olan çocukların annelerinin sosyal destek sistemleri hakkında sahip olunan bilginin oldukça kısıtlı olduğu görülmektedir. Bu çalışmanın amacı iki yönlüdür: ilki kadınların çocuklarına ilişkin bakışaçılarının ve sosyal destek sistemlerinin keşfedilmesi ikinci olarak ise yaşam deneyimlerinin görünür kılınmasıdır. Bu amaçla çocuğu otizm spektrum bozukluğu tanısı almış ve orta yaş grubundan ve düzenli bir işte çalışmayan 11 kadın çalışma grubunu oluşturmuştur. Çalışma nitel araştırma yöntemi kullanılarak yapılandırılmış, yarı yapılandırılmış görüşmeler yoluyla veri toplanmış ve içerik analizi kullanılmıştır. Elde edilen sonuçlar iki ana tema (annenin çocuğa bakış açısı ve sosyal destek sistemleri) içerisinde yorumlanmıştır. Elde edilen bulgulara göre kadınlar çoğunlukla sosyal desteğe sahip değildirler ve zaman içerisinde eşleri, aileleri ve akranları ile bağlarını kaybetmektedirler. Ayrıca çalışmaya katılan kadınların ilk yıllardan başlayarak yalnızlaştıkları ve ihtiyaç duyduklarını ifade ettikleri duygusal yakınlığa sahip olamadıkları görülmektedir. Çalışmada elde edilen bulgular ilgili literatür göz önüne alınarak tartışılmıştır.

Anahtar Sözcükler: Ebeveynlik, otizm, annelik, sosyal destek, iletişim

INTRODUCTION

Autism Spectrum Disorder (ASD) is defined by the American Psychiatric Association in their Diagnostic and Statistical Manual of Mental Disorders, Edition 5 (American Psychiatric Association (APA), 2013) as a cohabiting handicap in two key areas: inflexibility of imagination and social communication problems. Firstly, the inflexibility of imagination which commonly manifests as a difficulty in coping with unfamiliar environments, thus giving rise to a dense focus on routine and/or familiar objects by a way of compensation. Secondly, problems in social communication, which is the compromisation of the ability to form meaningful relationships. As understood from the definition of ASD, communication and social skills of individuals are affected. Also, dependence to routine and rejection of any non-familiarity place other family members in a difficult position. Therefore, researchers, educators or professionals have focused on family members, as well as ASD individuals. Involvement of a child with special

needs in the family can often bring stressful and challenging experiences. Parents need to balance the economic burden of the child who has special needs, along with the needs of other household members. They frequently encounter exclusion and isolation (Estes et al., 2013; Findler et al., 2016; Safe et al., 2012).

In the literature; physical and emotional situations are frequently examined in a family of children with special needs (Davis and Carter, 2008). Another frequently researched topic is the comparison of the stress levels of mothers who have children with or without a developmental disability. The results indicate that mothers who have a child with special needs experience more stress than typical mothers (Lecavalier et al., 2006; Oelofsen and Richardson, 2006; Siman-Tov and Kaniel, 2011). Among family members, communication difficulties, stress, hassle for support, imbalances in education, responsibility sharing and burnout syndrome can be seen. In this case, the needs of other members of the family next to the child with special needs, arise. Mothers who do not receive social support are trying to cope with stress and anxiety, decrease communication with other individuals around them, and have difficulty in establishing healthy relationships with other family members (Wallander et al., 1990). Anxiety level of the mother increases in relation to the degree of the child's special need. It is more stressful for the mother than it is for the family members, especially because it is assumed that the mother is responsible for the child's care and education (Akmeşe et al., 2007).

The fact that parents who are primarily caring for their children have more stress (Montes and Halterman, 2007; Rogers and Hogan, 2003). Despite their many difficulties, several factors have been identified (Pelchat et al., 2009) and some mothers are very positive and successful when it comes to the development of children with special needs (Hastings et al., 2002). What makes the difference between positive and negative situations? Do relationships between family members play a role? In Turkey research is limited on mothers with a child with ASD. In addition to the special needs of the child, mothers can experience stress in general due to changes in their lives, loss of jobs, economic changes, divorce, or life events. The results of studies examining the positive results of having a child with a specific need show that there is no significant difference in terms of happiness. Stressed mothers in this group show higher results in terms of happiness. Parents of children with special needs experience suffering and grief while also experiencing strength, joy, hope, and love (Kearney and Griffin, 2001). In addition, some research results show that having a child with special

needs has its advantages for the child to become a good person, to develop new skills and spirituality (Hastings et al., 2002). The different approaches show that children with special needs are largely tied to the support they receive from their families and environment. Social support plays a key role in their life.

Social support is an interpersonal process of many dimensions (Findler et al., 2016). Research on this issue shows that there a relationship exists between social support and stress experienced. It has also determined that social support has an important role to play in providing ease to the mothers with special needs children. Apart from having a special needs child, social support also plays an important role for mothers. For example, social support can be life-saving for low-income mothers. Social support is also of great importance to the child besides the mother. Many studies have suggested that children of mothers with high levels of social support exhibit more socio-emotional adjustment and cognitive development than children of less supported women (Kinlaw et al.,2001). The presence of social support is a versatile factor as individuals tend to cope with the situation, think that they are not alone and that they see love and value (Findler, 2000). Support comes in two forms: formal support from government or institutions, and informal support from friends and family members, including resource and information sharing, and emotional and psychological support (Fischer and Corcoran, 1999). Children with ASD and their family mostly face barriers and problems with life. These barriers include self-care skills, daily tasks, and behavioral patterns which can be challenging for children with ASD (Bultas et al.,2016). The problems and barriers that parents of children with ASD experience are well known, as are the stresses.

All parents experience stress while raising children. Being a mother to a child with or without special needs is often described as an event that brings about great changes for the women as well. Maternity has been much discussed in the literature. It is also frequently sought how it is to be a mother of a child with special needs. Social support systems of mothers with children who have ASD are often searched in quantitative ways in Turkey (Çoşkun and Akkaş, 2009; Karpaz and Girli, 2012; Kırbaş and Özkan, 2013). In addition, a limited number of quantitative research focuses on families problems (Nuri et al., 2018) or resource for coping with disability (Hatun et al.,2016). However, it is very important to investigate the life experiences of mothers in this group. Plans can be made according to the experiences and needs revealed by the researchers. The purpose of this study is to explore perspective on their children and

social support systems of 11 mothers of children with ASD. This study also aims to better understand mothers and their life experiences. Turkey is a country with a large population of children with special needs. Unfortunately, there is limited information about the life experience of mothers. The current study aims to find more details on the issue while attempting to suggest solutions.

METHODS

Research shows that the qualitative method is a more effective way to explore the experiences of mothers who have children with disabilities (Maxwell and Barr, 2003; Weeks et al.,2008). In-depth interviewing is a technique that focuses on the topic being searched for and aims to create data by bringing together the opinions, thoughts, and evaluations of individuals around the subject (Kümbetoğlu, 2015). For this reason, in-depth interviewing technique was used in this research. The communications with participants were carried out in accordance with a pre-prepared semi-structured interview form, and from time to time detailed questions were addressed to them. Current research data were analyzed through content analysis. The aim of content analysis is the systematic examination of communicative material. The content analysis follows these stages: coding, conceptualization, categorization (Flick et al.,2004). The coding is to read the obtained data again and again by the researcher, conceptualization is to bring together the meaningful pieces and categorization is the creation of themes.

Participants and Procedures

The mother of the children with autism spectrum disorder was included in the study and the number of participants was limited to 11 by considering that the data reached saturation during the interviews. Table 1 shows the age and education levels of participants and the age of children with ASD. In table 1 and the rest of the work, nicknames were used to protect the privacy of the participants.

One of the mothers had graduated from university whereas the other had pursued postsecondary college degrees. All mothers were unemployed, but one of them worked temporarily as a cleaner. Out of the eleven women sampled, eight were living with their husbands while two of them had lost their partners. Only one of them was divorced. Two women had a child before the age of 18.

Table 1 Women and Their Child's Demographic Information

Name of Women	Age	Education Level	Child's Age
Sevgi	40	Bachelor's Degree	14
Umut	38	No HS Degree	7
Hayal	32	HS Degree	6
Hayat	33	HS Degree	5
Sevinç	39	No HS Degree	16
Rüya	38	No HS Degree	18
Ümit	44	No HS Degree	16
Hasret	37	No HS Degree	4
Emel	45	No HS Degree	12
Gül	50	HS Degree	16
Lale	34	HS Degree	15

*HS:High School

Procedure and Analysis

Mothers to be interviewed were selected from schools where their children were receiving education in Ankara, Turkey. There are two types of schools for such children in Turkey: government schools (full-time) and rehabilitation center (part-time). The government school is a special education practice school, on the other hand, the rehabilitation center is a private institution. Children are trained here on an hourly basis. The data were drawn from semi-structured interviews with mothers who had a child diagnosed with ASD. Snowball sampling method was used in this study. Participating women gave references to other women. The snowball sample started from a special education rehabilitation center in Yenimahalle district. The mother of the first child who received education in the rehabilitation center directed the researcher to the other mothers in the same institution. The fourth mother's child is also attending the government school in Mamak. The other seven participants were reached in this school. The permits for women to participate in the study were primarily taken from the principals of these two institutions.

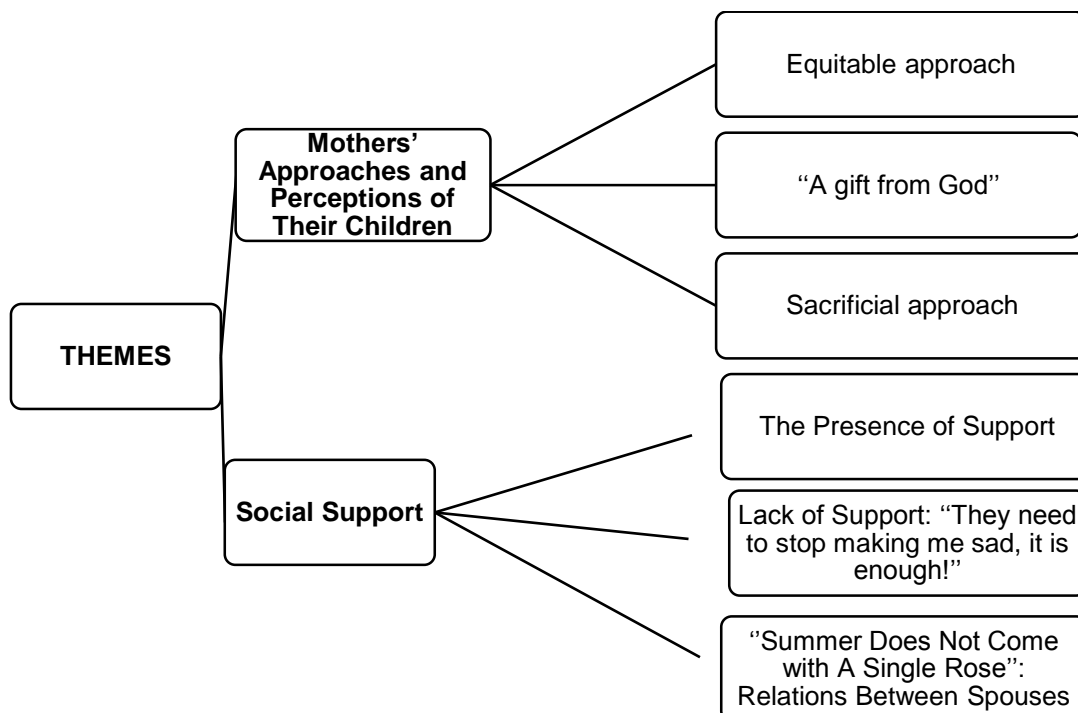
The first conversation was made on phone and time and date for an interview was agreed upon by the women. Then, the meeting took place. Some of the interviews

were conducted at the rehabilitation center and others were in the school which woman's children are attending. During the meeting, the researcher and the woman were alone. Firstly, questions such as the age of the participants and the gender of their children were asked. Then how did your life change with motherhood? How would you describe yourself as a mother? What is your relationship with your child? How was your child's first year years? What is the distribution of tasks in your home? Responses to such questions have been reached. Also, a voice recorder was used with the permission of the participant. Additionally, the researcher took notes about non-verbal expressions such as crying or looking sad, and gestures used by the woman. The average duration of interviews was 65 minutes. The interview was recorded and all the recorded interviews were transcribed.

The main data was obtained in this manner. All documents were checked by the researcher more than once. For coding purposes, units of meaning based on common themes were classified. The data was analyzed via MAXQDA 11, a qualitative software program that allows the researcher to organize and categorize the data based on developing themes.

FINDINGS

Figure 1. Themes



Mothers' Approaches and Perceptions of Their Children

The first theme that emerged from the analysis focuses on mothers' approaches and perceptions of their children. It seems that mothers have developed three different perspectives for their children: Equitable Approach, A Gift From The God Approach and Sacrificial Approach.

Equitable Approach

All mothers expressed how they viewed their own child. One of the approaches "equitability" is observed most in mothers who have more than one children. According to the words of one of them, Rya: "I usually share my world among both of my children. I divide their pocket money equally. The child in front of me is a child but also a young person. I also say that he deserves wearing designer clothing. What is the lack of my child? Will he not be able to wear it because of his disability? I am trying my best for them" (Rya, 38). The other participant focused on valuability. She said: "Zehra and her sister are so valuable to me" (Umut, 38). These expressions show us that perspectives are manifold in terms of the relationship between mother and child. It is seen that women who have more than one child adopt this approach because they see their children as valuable. Another approach like the equality of women is to see their child as a blessing.

"A Gift From God"

Findings from research usually show that faith and belief in God has a key role among the families which have a child with special needs. "Fatih (the child) brought us abundance, I always believed him. For example, we got our first car and home just after he was born" (Sevin, 39). According to this expression, the child brings good fortune and needed resources. On the other side, one of the participants: "Zehra and her sister are so precious to me. I am thankful to God who gave her to me. If she were not like that, I would not enjoy my life, watching the way Zehra grow." (Umut,38). The expression of a mother who is liberated by her child's special needs is also remarkable. Behind this is a woman who has been subjected to bad treatment by her husband. Her child is a gift from God and that sets her free.

The other perspective is related to God and family's life experience. Most of the faithful people can handle the case like a test that comes from God. "I think that everyone's test from Allah will be different... Yes, I have taken it with the permission of Allah. I say that all of us come to the world as hard-working students of Allah, and are asked

difficult questions by Allah. I am saying that this is my testimony. I also say Alhamdulillah and you can overcome it with strong faith, my Lord...” (Hayal,32). Women see their children as a gift or an exam from God. As it is understood from the statements, the participants see this situation as a factor increasing their spirituality.

Sacrificial Approach

Having a child with special needs often develops sacrificial behaviour in parents. One of the most common examples is not having a second child, as one of the participants had stated. “Fatih is our only child, I try to do everything as much as I can. We cannot say no to anything anyway. Because we have no other children. We do not have anything left to do in the future. I didn't even have my second child because of him. I think that I cannot devote my time to him/her if I have a second child. He will be missing something. I did not want to be unfair to the other child. You will have to entrust something to the other child constantly like looking after his brother. I didn't do that because it would be unfair for him. For example, Fatih is afraid of loud voices. Because of this me and my husband never talk loudly in the house...” (Sevinç, 39). This can be explained in two ways: on the one hand, to provide adequate care and education to the child with special needs. On the other hand, it results in insufficiency to offer the other child the love and interest he or she deserves. Parents tend to make emotional sacrifices outside financial sacrifices. “I'm doing everything I can do for him; I take care of my grandson when my daughter is at work. I am and will be always interested in him. I don't want him to feel jealous about his nephew” (Emel, 45). It is understood from this statement that the participant woman is structuring the relationship she has established with other family members through her child. Sometimes the child is the only one that keeps women alive. “I was so alone, I thought was going to die, but I kept living for my child” (Gül,50). The child with special needs can have a key role in a mother's life.

Social Support

The second theme emerged from the study analysis focuses on social support women get. The theme gives information about changing the quality of life and social support system concerning women.

The Presence of Support

When asked about the social support to women in the research, it is noticed that the support they are getting decreases year by year. Women first mentioned social support from their families. “...My family was also in Ankara, I have already seen a bit of

their support as Fatih was growing up” (Sevinç, 39). “While my son was young, we would visit his grandmother on weekends. Praise that, after my birth, one of my husband’s relatives always invited us to dinner at weekends. One of my sisters was unemployed at that time and she came out to help me occasionally “(Sevgi,40).

The social support doesn’t always come from family or relatives. For example, “ there was an old couple in our apartment. I sometimes left Eren to them... there are also schools for children like Eren. With the financial support from his grandparents, he went there to play sports and he became very happy... my mother also supports me spiritually. We talk on the phone every day” (Sevgi, 40).

Some participants have received professional support by chance. However, none of them mentioned the institutional and institutional support. “My husband’s relative is a social worker. That girl helped us. She always arranged the appointments and the reports and she was very supportive” (Umut,38). The social support offered to women and their families are often based in special care. “I had to go to Antalya. It was very difficult. When I was pregnant, I went to my parents’ house. They looked after me and helped me a lot... There is a specialist whom I follow all the time. When I was raising my child, I managed a lot of things including toilet training with the help of the education specialist” (Hayal, 32).

Women have stated that they have received support from their husbands in housework in their daily life. Also, those with older children also emphasize this support. Payments of bills or shopping at the market have also been done by the husbands. This is an obstacle to the socialization of mothers who spend all day at home with their children. “He says to me: you have a duty to children. Thank God, now my husband is helping. He and my other son are dusting, so I’m doing other things. For example, if I have a lot of housework to do, he helps by sweeping.” (Rüya, 38). Or this phrase can be shown in the sample: “My husband pays the bills and does other paperwork regarding our house. I do not know those things at all, but nevertheless, sometimes we do it together.” (Ümit, 38).

Lack of Support: “They need to stop making me sad, it is enough!”

Lack of support mostly causes sadness and frustration in individuals. The person asks for help from her own family members first. When asked about this subject, participants mostly told us that there isn’t anyone answering their pleas. “There was no one to help me. I have a sister and a brother. My mother lives in Sincan, too. I asked them to help

me, all of them. They weren't there and this is just enough to make me sad. I did everything on my own. We had an old house. My husband goes in the morning and comes in the evening, staying away from home all day. He could not help either" (Ümit,44).

The concept of mother mostly expressed by women. One of the participants had a serious illness. She expressed her expectations concerning her mother: "... but in these situations, my mother never asked me to help or called and came. I said that "Mom, you never supported me. No matter what you do, your daughter tries to be alive. My mother was never there. I cried for days because of my children. I was seriously diagnosed and every time I had to go to the hospital, I had to take them too. There was fluid in my brain and my spine was curved... my mother was never there for me" (Umut, 38).

One of the woman explains the situation from the perspective of her mother and says she didn't get help from her: "... I have two brothers, twins. My mother could not leave them (also implying that she has not received sufficient help from her husband) Because I don't understand, my husband only helps our child with English lessons" (Sevgi, 40). It is seen that women expect more help from their husbands however, the expectation of help is not always within the family. Sometimes women seek help from the population: "We were living in the village, there was no help. I did all the work myself. My family did not help either. There was a problem with water supply there, I was carrying big, big jugs to our house. No one helped me. Who would? My husband did not even care" (Rüya,38). Sometimes the expectation of help is towards friends. (referring to the situation) "I had to make explanations to my friends. Neither my friends nor my family supported me. " (Hayat, 33). To summarize, the following expression of one of the participant will suffice: "It would not make everything a hundred percent easier, but my parents helped to solve a lot of things" (Sevinç,39).

"Summer Does Not Come with A Single Rose": Relations Between Spouses

Partner relationships can be influenced by many factors besides whether or not the child has special needs. For example, if personality structures of the couple are incompatible with each other, many problems emerge and support they provide to each other deteriorates: "No matter how much I try to be a giving person, my husband stays closed and keeps his problems to himself. He stays away from everything that may have a consequence. I think it's about the character... He closes himself to a great

extent. I want to share more things with him. I am open to all kinds of requests from him. When I see him downed, I ask him about his frustration, but I cannot take any answers. When I feel sorry, if he gives me to hug it would fill me with bliss, but he does not hug me. My husband says: "What will you do when you hear about my sadness? You can't solve it and you will also be sorry." But it is not like this to me, we can overcome everything if we share. I am ready to offer support but he does not accept it "(Sevgi, 40).

Disputes and anger by participants were also frequently mentioned. "...Besides all the problems I have, my husband has anger issues. He suddenly gets angry and cools off. He is only at home for one day a week. I said to him that "you didn't marry with a woman, in this house, I am like a convict. I cannot take my time for five minutes." (Umut, 38). The participant expresses in this marriage that she feels like a convict in prison and cannot devote any time to herself. And women are also paying attention to ever-changing marriage structures and their own feelings in a relationship: "My husband is a good person. We were in love and we got happily married. But we are currently in a point which love starts to disappear. There is love for us. Yes, there is definitely. But not enough. Summer does not come with a single rose. Our relationship is just like that. He is a good man, but other than that, why mustn't I feel more love again? "(Hayal, 32). Spousal relationships are something that is known to negatively affect child-related stress factors. But the answer to the question of how the relations are affected is quite uncertain. "We argued a lot with my husband, so I took away my child. We were divorced after that but every couple in this situation also experience this kind of communication issues "(Emel,45).

DISCUSSION

The purpose of this study is twofold; first, to explore their perspectives on children and social support systems of women with children who have autism spectrum disorder (ASD) and second, to unfold their life experiences. Interviews were conducted with 11 middle age, unemployed Turkish mothers. Mothers with limited social support are more likely to face difficulties in adapting to motherhood and that increases the risk of postnatal depression and low parental self-efficacy (Leahy-Warren et al., 2012). When compared to parents of children with other types of a developmental disabilities, evidence suggests that being a parent of children with ASD is proved to be more stressful (Bromley et al., 2004; Dabrowska and Pisula, 2010; Pisula, 2007; Sanders

and Morgan, 1997). 191 mothers of 3-7-year-old children with developmental disability were examined in a study aimed at investigating the risk factors for happiness, specific stress and guilt, attachment and social support, and the happiness of having a special needs child. Feeling guilty was negatively associated with happiness and identified as an intermediary between attachment anxiety, support, and happiness (Findler et al., 2016). Çoşkun and Akkaş (2009)'s research shows that there was a reverse relation between the high continual anxiety level of mothers who have disabled child and continual anxiety level. The findings from the current study support past researchers on topics of social support and relationships of mothers who have a child with ASD. In Turkey, another study about women who have a child with special needs has been made in a feminist perspective. It was aimed to reveal information about family roles, social life participation and how they define themselves in a social context. According to the analysis made, the results are interpreted in four main themes. The themes are, the life after the birth of the disabled child, being a woman in the context of family life (participation in decisions, domestic and business life), participation in social life and relations with women organizations and, knowing oneself (Cankurtaran Öntaş and Tekindal, 2016). Parallel to this work, participation in social life seems to be greatly influenced. It is also understood that the perceptions of women about motherhood have changed.

If parents do not see adequate support in childcare, return to business life is delayed. Bünning's study shows that the facilitation of social support by family or friends has positive effects on cases of limited childcare and mother's employment in the first 72 months (Bünning, 2016). Women who participate in this study didn't work in a full-time job. And they mostly spent their first years alone with their babies.

Generally, when mothers are to be the subject of research, social support system and personal relationships topics are investigated. It is a common challenge to indicate when, how and why personal relationships play important roles in individual lives (Lumino et al., 2016). For exceeding the challenge chosen interview method is studied. In this case, in-depth information was provided about the interpersonal relationships of women. According to Henly et al., (2005), strong personal ties and social support have an important role in solving everyday problems. A study shows that parents have expressed concern about the future of their children, depending on the strength of their children's self-expression. It has been determined that the society has negative

attitudes towards autistic children and that parents would like to see the society to be more moderate towards autistic children (Nuri et al., 2018).

There are many different ways to study women's social support systems. In research of social support for mothers who need online support via social media; income, level of education and marital status were examined and associated with social support resources. The study also lists the sources of online support received by mothers. The results show that the participants have received the most amount of social support from the family, friends and other important sources, and there is no significant difference in the educational level or marital status (Hartwig, 2016). In this study, women's educational levels differ from each other too, supporting Hartwig's results. Another research shows that having a child with special needs makes mothers do their best in raising the child, be a better person, develop new skills and enhance spiritually (Hastings, 2002).

In qualitative research conducted with mothers who were rejected to participate in a playgroup, social support topic came into being. Those who voiced the lack of support among women who participated in the work often expressed that they did not get help from one of their families when they needed it. Another woman who had given birth for the second time stated that she withdrew into herself. Mothers are beginning to establish an isolated life when they cannot get the support they need (Davies and Harman, 2016).

A study from Indonesia shows that parents who have a child with ASD received less support than the typical developed children's parents (Riany et al., 2017). Also, parents of children with ASD encounter conflicts more than parents of typically developing children (Hartley et al., 2017). Even if only one of the participants was divorced, information gained from this subject is enough to be added to the research. In the majority of these studies, parents of children with ASD were found to have a higher rate of divorce (Hartley et al., 2010).

Cachia et al. (2016)'s study investigated the efficacy of interventions in reducing stress and increasing psychological wellbeing in parents of children with ASD. As a result of the study interventions potentially have long-term positive effects on stress levels and psychological wellbeing of parents of children with ASD. Findings from the present study suggest that effective intervention programs are needed to reduce the stress of the mothers.

Research has shown that parents exhibit self-blame and guilt-free behavior regardless of the specific needs of the child (Findler et al., 2016). Mickelson et al., (1999)'s study shows that these implications for specific needs are attributed to biological origins/desire of God. What's more that parents believe biological tendency or God is the reason behind this situation. The women interviewed in this study talked about their own blame or family history about the late speech. Also, more than one participants express that they see this situation as a trial that comes from God.

According to Caplan, (2010), mother-blaming can later manifest itself in the mother's environment (family, friends, or neighbours, for example) as it can also arise from the mothers' own feelings of guilt in relation to social and individual expectations about being a mother (self-blaming mother). Some studies also examined the stress levels of mothers who have a child with ASD from different ethnic backgrounds (Bishop et al.2007; Carr and Lord, 2013). In Turkey, there are many different ethnic groups or migrant women who have a child with ASD. From the point, future research might aim to explore this group's life experiences or social support systems.

RESULTS

In this study, mothers don't have enough social support and losing their connection with close people in time. In order to strengthen the social support systems of the mothers who have children with ASD, women should be supported since the diagnosis of the child. Because of these issues, more research and service plans are needed in Turkey. Only with these, mothers can achieve greater advancements in socioeconomic status and on a social support network. This study has a limited perspective because all participants come from close economic backgrounds. Similar studies will be carried out with working women and will provide more specific information on the impact of the economic situation in their social lives. Also, participants ages were close too. Children who have ASD know little to none about their young mothers. Especially in the early years of the child's diagnosis, women's social support needs can be analyzed and supported in the early period. Future research in this field could focus on these issues.

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