

EDYTA BAŁAKIER

University of Białystok

ORCID – 0009-0001-8562-4052

KAROL KONASZEWSKI

University of Białystok

ORCID – 0000-0003-1362-4245

## THE WELL-BEING OF PARENTS OF CHILDREN WITH AUTISM SPECTRUM DISORDERS. THE ROLE OF POSITIVE AND NEGATIVE EMOTIONS AND COPING STYLES\*

**Introduction:** The United Nations has officially recognized autism spectrum disorders as one of the most serious health problems in the world, next to cancer, diabetes, and AIDS. In the light of the constantly increasing number of people diagnosed with autism spectrum disorders, larger groups of parents are facing a particularly difficult situation. Numerous studies have shown that they experience high levels of stress and reduced well-being.

**Research Aim:** The aim of the study was to analyse the relationship between coping styles, emotions, and well-being, perceived from both a hedonistic (life satisfaction) and a eudaimonistic (psychological well-being) perspective. In total, 184 parents of children with autism spectrum disorders participated in the study.

**Research Method:** Path analysis was performed to examine the relationship between variables. The following measures were used: the Coping Inventory for Stressful Situations (CISS), the Positive and Negative Emotions Scale (SUPIN), the Satisfaction with Life Scale (SWLS), and a short version of the Psychological Well-Being Scale (PWB).

**Results:** It was found that the psychological well-being of parents of children with autism is associated positively with a task-focused coping style and negatively with a focus on emotions. Positive emotions were positively associated with both life satisfaction and psychological well-being. A negative relationship between negative emotions and life satisfaction was also confirmed.

**Conclusion:** The results presented may be helpful in supporting parents of children with autism. Appropriate support strategies can help them to use more adaptive coping and increase their positive emotions and well-being.

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**Keywords:** well-being, emotions, coping, parents of children with autism spectrum disorder

## INTRODUCTION

Autism spectrum disorders (ASDs) are neurodevelopmental disorders with a complex, multifactorial aetiology (genetic and environmental conditions acting at the prenatal, perinatal, and early months of life stages). Axial symptoms of ASDs include difficulties in communication and social relationships as well as the presence of repetitive, stereotyped behaviour patterns (American Psychiatric Association, 2013). Researchers (Abbeduto et al., 2004; Keenan et al., 2016; McStay et al., 2014; Pisula, 2006) have identified autism as a specific type of disability. As Siegel (1997) pointed out, the significance is the great variety in the level of disorders and the unpredictability in the course of children's development, which make it very difficult to prognosticate about their future. All of this makes the situation of these parents peculiar and worth a closer empirical look, especially in the light of data on the frequency of autism spectrum disorders' detection worldwide, indicating one child in every 36 births (Maenner et al., 2023).

In this regard, parents of children on the autism spectrum experience many difficulties daily in caring for and raising their offspring. Compared with other groups of parents, they are distinguished by significantly higher levels of stress (Dabrowska and Pisula, 2010; Pastor-Ceruzuela et al., 2015; Zaidman et al., 2018; Zaidman-Zait et al., 2016) and more frequent use of emotion-focused and avoidance-focused coping strategies (Lai et al., 2015; Lin et al., 2008; Loung et al., 2009). According to research, more frequent task-focused coping protects parents from the effects of perceived stress and translates into a higher quality of life, in contrast to an emotion-focused style (Cappe et al., 2011; Dabrowska and Pisula, 2010; Vernhet et al., 2019; Wang et al., 2013). In addition, the common emotions and feelings experienced by parents of children with ASDs are breakdown, sadness, anxiety, and guilt (Falk et al., 2014; Henry et al., 2014). These significantly impede the stability of family life and reduce the quality of life, well-being, and life satisfaction (Brown et al., 2006; Czenczek et al., 2012; Pozo et al., 2014). The effect of stress and coping as well as perceived emotions on an individual's health and well-being is a widely understood issue (Seltzer et al., 2010). In view of this, studies indicating that various factors can explain this relationship have gained considerable popularity in recent years, emphasizing that the situation of parents of children with ASDs is extremely complex and just finding simple relationships does not fully show it (Dardas and Ahmad, 2012; Hui et al., 2018; Karst and Vaughan Van Hecke, 2012; Vollmann et al., 2011).

### **Well-being: Operationalization and links to emotions and coping**

Well-being is one of the most important aspects of human functioning. Questions about the characteristics and sources of a good life have occupied thinkers and scientists for thousands of years. The answers of researchers usually diverge in two directions. Some adhere to the hedonistic tradition, making the feelings of pleasure–unpleasantness and fulfilment–unfulfilment as the basis for evaluating one's life. Adherents to the other direction, the eudaimonistic tradition, take as their measure of happiness a life that is authentic, is grounded on basic virtues, and enables self-realization (Waterman et al., 2008). Increasingly, we are seeing attempts to integrate the two approaches. Waterman (1993) argued that each of us can use two different measures of well-being that are related to each other: one more hedonistic (mood and feelings of satisfaction) and the other closer to eudaimonia (a sense of meaningfulness and the value of one's life). In this paper, to treat the issue holistically, the construct of well-being will be analysed in both hedonistic (life satisfaction) and eudaimonic (psychological well-being) terms.

In the current of hedonistic theory is satisfaction with life (SWL), proposed by Diener et al. (1985). Life satisfaction is defined as a subjective evaluation of the quality of life made according to selected criteria. It is important that these criteria are not imposed from above but that individuals themselves decide what to take into account. Satisfaction with life is one of the elements included in subjective well-being (SWB). It is considered a separate construct representing a cognitive assessment of quality of life as a whole (Pavot and Diener, 1993). Life satisfaction is significantly related to negative and positive indicators of mental health. It correlates moderately with high positive affect (PA) and inversely with negative affect (NA). Research on the relationship between perceived stress and life satisfaction points to the negative nature of this relationship but also emphasizes that, to understand it better, it is necessary to take into account other factors that indirectly affect its outcome (e.g. coping with stress, social support, and self-esteem) (Buser and Kearney, 2017; Crnic and Ross, 2017). Furthermore, life satisfaction tends to show high levels of stability in adulthood (Diener and Larsen, 1984; Diener et al., 2006; Eid and Diener, 2004).

The eudaimonistic approach became the basis for the development of psychological well-being, according to Ryff (1989). The author, in her model of psychological well-being, considered well-being to be steady progress in individual human development. According to this approach, the essence of a person is not so much sensory impressions, emotions, or moods as the mind, goals undertaken, beliefs, views, and values. The meaning given to individual events is important. Ryff (1989) stressed that the value of her theory lies in the fact that it treats well-being more holistically and is an integral part of healthy human development. All dimensions of well-being are related to satisfying family and marital relationships and the fulfilment of social roles. Well-being, according to Ryff (2013), is also pos-



itively related to mental and biological health, and the nature of this relationship is bidirectional. Attention has also been paid to the relationship of well-being with emotions and stress coping styles, indicating that emotion-focused coping and negative emotions translate into lower psychological well-being (Mayordomo et al., 2021; Schmutte and Ryff, 1997).

### **Coping and perceived positive and negative emotions and their effect on the well-being of parents of children with autism in terms of transactional stress theory**

According to Lazarus and Folkman's (1984) transactional theory of stress, coping is an activity aimed at changing a stress transaction. It is defined as "constantly changing cognitive and behavioral efforts to master specific external and internal demands that are judged by a person to be burdening or exceeding his or her resources" (Heszen-Niejodek, 2007, p. 476). One of the important aspects of the theory is stress, which "is defined as a relationship between a person and the environment that is assessed by the person as burdening or exceeding his resources and threatening his well-being" (Lazarus and Folkman, 1984, p. 19). Among coping styles, the concept most often cited in the literature is that of Endler and Parker (1990), which relates to the theory of Lazarus and Folkman (1984) and the functions to be performed by coping. They distinguished three coping styles, task-focused, emotion-focused, and avoidance-focused coping, captured as engaging in vicarious activities or escaping into social contact. The task-focused style manifests itself mainly in the behavioural sphere. It implies the search for information, remedies, and opportunities to cope. Prolonged coping through the task-focused style can result in fatigue, sometimes disappointment with the achieved result, or even suffering from failure. Despite these negative effects, as Heszen (2013) wrote, a positive aspect of it is the change in the object of attention – focusing on the goal rather than on the source of stress. At the same time, if it succeeds in achieving at least minor successes, it becomes a source of positive emotions and raises the sense of self-efficacy and control. The second style, focused on emotions, involves concentrating on one's own emotional experiences – anger, guilt, and tension – within the framework of a stressful situation. People's actions are dominated by the need to reduce the emotional tension accompanying the stressful situation. As a result, they avoid taking action to resolve the stressful situation (Tomczak, 2009). The third style involves rejecting thoughts about the underlying problem. People using this style avoid focusing on the stressful situation and do not seek to resolve it. Instead, they engage in substitute activities. Within this style, Endler and Parker (1990) made a distinction between avoiding confrontation with the problem by engaging in substitute activities and avoiding it by seeking social contact. As a result, stress coping is an extremely important mechanism that affects health outcomes, including individual's well-being.



Much importance in the theory discussed by Lazarus and Folkman (1984) is also attributed to the emotions arising as a result of coping. Initially, its authors viewed them only as secondary to cognitive appraisal. Folkman (1997) enriched the original theory by noting the importance of the positive emotions that can arise in stressful situations. According to Folkman and Moskowitz (2004), these stem from positive meaning making as a further function of coping in addition to problem-focused and emotion-focused coping. Meaning-oriented coping can take the form of, among other things, making priorities more realistic, pivoting towards new goals, or finding benefits achieved in the past during a stressful situation. This form of coping is activated when there is an unfavourable outcome to the strategies used and contributes to positive emotions. These emotions reflexively influence not only the coping itself but also the reappraisal process of the situation. Thus, they motivate the individual to continue coping effectively. The modifications introduced by Folkman and Moskowitz (2004) appear to be extremely important because of the clinical implications and their relevance to the process of psychological assistance for people struggling with chronic stress. This group includes parents of children with autism (Barker et al., 2014; Bitsikai et al., 2017). Emotions, in the theory described, are treated as a direct effect of the stress transaction. Among the remote effects, the authors include well-being, social functioning, and health (Frantz et al., 2018; Nikmat et al., 2008).

## RESEARCH AIM AND QUESTION

The study presented here was designed to investigate the relationship between coping styles (task, emotional, and avoidant), perceived emotions (positive and negative), and well-being (life satisfaction and psychological well-being) in a group of parents of children with autism using path analysis. This project analysed a model built on Lazarus and Folkman's (1984) stress theory. On this basis, it was assumed that stress coping styles are related to positive and negative emotions and as a result translate into well-being (life satisfaction and psychological well-being).

## RESEARCH METHOD AND SAMPLE CHARACTERISTICS

The study group consisted of  $N = 184$  parents of children with ASDs (purposive selection). Of these, 89% are mothers, while 11% are fathers. The mean age of the respondents is  $M = 37.5$  ( $SD = 6.8$ ). They are raising children with a mean age of  $M = 7.8$  ( $SD = 3.9$ ). The vast majority of the respondents are college educated (63.1%), and half of them are economically active (50.7%). Most of the families are

full families (77.9%) and single parents account for 16.6%, while fewer than 5% are adoptive or reconstituted families. More than half reside in large cities (over 50,000 inhabitants) (57.5%), 25.3% live in small towns (up to 50,000), and 16% reside in villages. Most families have more than one child (63.1%). Participation in the survey was completely voluntary and anonymous. Since the basic requirement for taking part in the study was to raise a child with ASDs, information was also collected on the children themselves. The majority of the respondents have a child with a diagnosis of childhood autism (83%), while a much smaller group struggles on a daily basis with a diagnosis of Asperger's syndrome (17%). As many as 82% of the children are male. A similar statistic is maintained in both the group of children with a diagnosis of childhood autism and the group with Asperger's syndrome. The ratio of boys to girls is thus 4.6:1, comparable to that in the general population (4.4:1). More than half of the children (66%) have no diagnosed additional conditions, and most do not have a diagnosed intellectual disability (73%). It is worth noting, however, that a significant number of children are in the pre-school age group, in which diagnosticians rarely undertake simultaneous testing of intelligence levels, and therefore the actual number of children developing intellectual disabilities may be higher; this should be kept in mind when analysing the results obtained.

The children are differentiated by their level of communication skills: 18% of children have no problems with verbal communication, 39% have a slight delay in this area, in 23% significant limitations in communication are observed, and 20% do not communicate verbally at all. The sample is somewhat less optimistically distributed in terms of competence in initiating and responding to social relationships: 9% have no problems in relationships with others, 49% have slight difficulties in this sphere, 39% experience major problems in entering relationships, and 4% avoid them altogether. Most parents of children with autism struggle with their children's difficult behaviours on a daily basis. In this study, aggressive behaviours, demonstrative behaviours (shouting and throwing objects), and stereotypical behaviours that hinder daily functioning were included and were assessed in terms of frequency. Aggressive behaviours do not appear at all in 24% of the children, and as many as 49% of the surveyed parents rarely deal with them, while 20% experience them often and 7% do so very often. Demonstrative behaviours do not appear at all in 15% of respondents and appear rarely in 40%, often in 33%, and very often in 13%. Stereotypical behaviours do not occur in 20% of the children, and they appear rarely in 35%, frequently in 35%, and very frequently in 11%.

The research was conducted throughout Poland, with the cooperation of seven centres providing assistance to people with autism and their families, among other locations in Sopot, Warsaw, Gliwice, Lublin, and Białystok. Designated persons in contact with the diagnostician approached the parents under the care of the





respective centre directly. Each parent willing to participate in the study received a battery of tests and an envelope marked with the researcher's signature, in which the parent later made a return. The respondents, in a brief cover letter, were informed that participation in the study was voluntary and that the results would be collected in a way that ensured their anonymity. The surveys were completed by the respondents at home and then placed in a designated space (box/collection envelope, etc.). Packages with closed envelopes were sent to the researcher via the Polish mail or courier companies. Only the researcher had access to the data. The study lasted about 10–15 minutes and did not involve remuneration. Approval was obtained from the Research Ethics Committee of the Institute of Psychology of the Catholic University of Lublin.

### Measures

The Coping Inventory for Stressful Situations (CISS), by Endler and Parker (1990), was used to measure styles of coping with stress. The Polish adaptation of this tool was developed by Strelau et al. (1996). It consists of 48 questions and contains three scales that simultaneously identify three coping styles: (1) SSZ: task-focused style (e.g. "I focus on the problem and think about how I can solve it"), (2) SSE: emotion-focused style (e.g. "I worry that I won't cope"), and (3) SSU: avoidance-focused style (e.g. "I try to sleep"), including two subscales: (4) ACZ: engaging in vicarious activities (e.g. "I buy something for myself") and (5) PKT: seeking social contact (e.g. "I visit a friend"). Respondents answer by responding to the given statements on a 5-point scale, where 1 means never and 5 means very often. The Cronbach's alpha reliability coefficients for each scale are, respectively, SSZ 0.86, SSE 0.82, SSU 0.75, ACZ 0.73, and PKT 0.75.

Positive and negative emotions were measured with the Positive and Negative Emotions Scale, which is a Polish adaptation of the Positive and Negative Affect Schedule (PANAS) by Watson and Clarck (1988). The Polish adaptation was made by Brzozowski (1995). The scale is designed to measure the emotional states that generally accompany a person. It consists of 20 items, each with 10 emotions, PA: positive (e.g. active) and NA: negative (e.g. anxious or worried). Responses are given on a 5-point scale (1 means *slightly or not at all*; 5 means *very strongly*), determining the extent to which the listed adjectives describe the respondent's usually felt state. The Cronbach's alpha coefficients are PA 0.88 and NA 0.87.

The Satisfaction with Life Scale (SWLS) of Diener et al. (1985), in the Polish adaptation by Juczyński (2001), was used to measure satisfaction with life. The tool involves a general index of feelings of satisfaction with life, which is a cognitive aspect of hedonic well-being. The SWLS scale contains five statements (e.g. "In many ways my life is close to ideal"). The respondent has a choice of responses on a 7-point scale, where 1 means *I completely disagree* and 7 means *I completely agree*. The Cronbach alpha reliability index is 0.81.



Psychological well-being was examined using a short version of the Psychological Well-Being Scale (PWB) by Ryff (1989) in the Polish adaptation by Karaś and Ciecuch (2019). The questionnaire is a self-report scale that examines the level of eudaimonic psychological well-being. The tool consists of 18 statements (e.g. “The demands of everyday life overwhelm me”). Respondents provide answers on a scale from 1 (*strongly disagree*) to 5 (*completely agree*). The reliability of the entire tool, as estimated by the Cronbach alpha coefficient, is 0.79.

## STATISTICAL DATA ANALYSIS PROCEDURE

To determine the relationship between variables, the Pearson  $r$  correlation coefficient was used to find the strength and shape of the linear relationship between two variables. Values from 0 to 0.30 were interpreted as low correlation, 0.3 to 0.5 as moderate correlation, 0.50 to 0.70 as high correlation, and 0.70 to 1 as very high correlation. We then performed path analysis to look for relationships between variables using the AMOS program. The model parameters were estimated using the maximum likelihood (ML) method. The goodness-of-fit index (GFI), comparative fit index (CFI), root-mean-square error of approximation (RMSEA), and relative chi-squared ( $\chi^2/df$ ) were used to evaluate the model's goodness-of-fit to the data. Values of  $GFI \geq 0.90$ ,  $AGFI \geq 0.90$ , and  $CFI \geq 0.95$  indicate a good and adequate fit of the model to the data. Values of  $\chi^2/df < 2$  also suggest a good fit of the model to the data. Furthermore, RMSEA values  $< 0.08$  can be interpreted as a good fit to the data.

## RESULTS

Table 1 shows the descriptive statistics and correlations between variables. The correlation analysis showed that both psychological well-being and life satisfaction are associated strongly positively with positive emotions and strongly negatively with negative emotions. Life satisfaction is weakly positively related to task style and moderately negatively related to emotional style. Life satisfaction is also positively moderately associated with seeking social contacts. There is no association between life satisfaction and avoidant style and engaging in vicarious activities. Psychological well-being is positively strongly associated with task style and negatively strongly associated with emotional style. There is no relationship between well-being and avoidant style. In contrast, well-being is positively moderately related to social contact seeking and negatively weakly related to engaging in vicarious activities.



Table 1.  
*Correlation matrix between the analysed variables*

	M(SD)	SWLS	PWB	PU	NU	SSZ	SSE	SSU	ACZ	PKT
SWLS	19.2(6.88)	-								
PWB	77.6(12.3)	.56***	-							
PU	31.4(8.17)	.51***	.69***	-						
NU	25.3(9.24)	-.51***	-.52***	-.46***	-					
SSZ	59.3(8.48)	.24***	.58***	.55***	-.20**	-				
SSE	41.0(11.83)	-.44***	-.65***	-.48***	.71***	-.29***	-			
SSU	38.3(8.45)	.06	-.06	.03	.01	-.01	.25***	-		
ACZ	16.5(5.19)	-.09	-.26***	-.19**	.22**	-.18*	.40***	.81***	-	
PKT	14.7(4.41)	.30***	.32***	.36***	-.26***	.26***	-.10	.68***	.18*	-

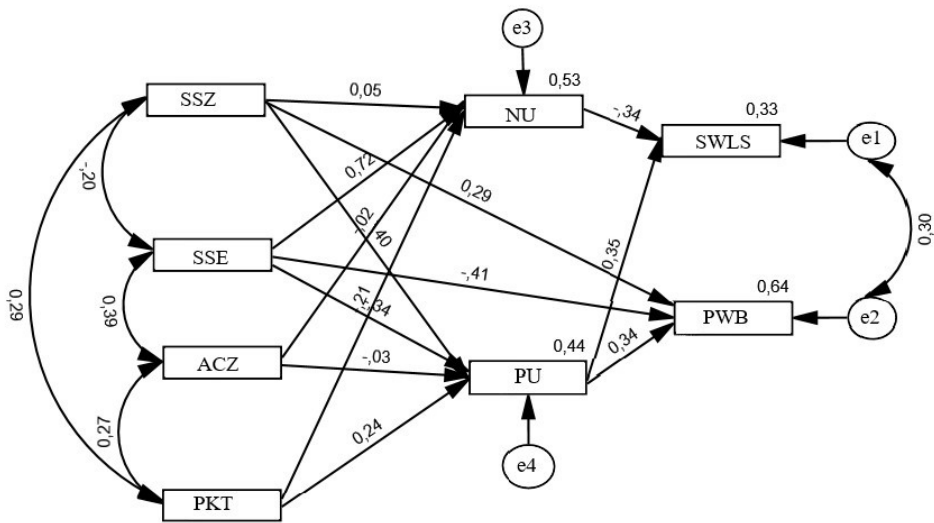
\*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$ .

Note. SSZ: task-focused coping style; SSE: emotion-focused coping style; SSU: coping by avoidance; ACZ: engaging in alternative activities; PKT: seeking social contact; NU: negative emotions; PU: positive emotions; SWLS: life satisfaction; PWB: psychological well-being.

Source: Authors' own study.

Path analysis was then applied to verify the hypotheses. The relationships between positive and negative emotions, coping, life satisfaction, and psychological well-being were analysed. The first model tested considering the study's hypotheses was found to have an unacceptable fit to the data:  $\chi^2 = 12.06$ ;  $p = 0.017$ ;  $\chi^2/df = 3.01$ ; RMSEA = 0.104; GFI = 0.98; AGFI = 0.85; CFI = 0.95. The second model tested used a modification of the indices. The relationships between life satisfaction, well-being and emotions, and coping, which were found to be insignificant, were not included. The fit of the second model was acceptable:  $\chi^2 = 19.69$ ;  $p = 0.032$ ;  $\chi^2/df = 1.96$ ; RMSEA = 0.072; GFI = 0.98; AGFI = 0.91; CFI = 0.98. Figure 1 shows the standardized path coefficients: for one-way paths, these are the standardized regression coefficients, and for two-way "arrows", these are the correlation coefficients. Positive and negative emotions and coping styles explain 33% of the variance in life satisfaction and 64% of the variance in well-being.

Figure 1.  
*The tested model: Stress coping, emotions, life satisfaction, and well-being*



Note. SSZ: task-focused coping style; SSE: emotion-focused coping style; ACZ: engaging in alternative activities; PKT: seeking social contact; NU: negative emotions; PU: positive emotions; SWLS: life satisfaction; PWB: psychological well-being.

Source: Authors' own study.

There is a positive direct positive effect of task style on psychological well-being ( $\beta = .29, p < 0.001$ ) and a negative effect of emotional style on psychological well-being ( $\beta = -.41, p < 0.001$ ). Positive emotions are positively related to both life satisfaction ( $\beta = .35, p < 0.001$ ) and psychological well-being ( $\beta = .34, p < 0.001$ ). A negative association between negative emotions and life satisfaction was also confirmed ( $\beta = -.34, p < 0.001$ ).

DISCUSSION

The purpose of the following project was to investigate the relationship between stress coping styles (task-focused, emotion-focused, and avoidance, distinguishing the two forms of engaging in vicarious activities and seeking social contact), perceived emotions (positive emotions and negative emotions), and well-being in parents of children with autism (life satisfaction and psychological well-being). It was hypothesized that stress coping styles are related to positive and negative emotions and consequently translate into well-being. These hypotheses received partial confirmation.

The task-focused style was assumed to translate positively into both life satisfaction and psychological well-being. An association of the opposite sign was expected for an emotion-focused style. The results confirm the assumptions made but only in the case of psychological well-being. The associations of both styles with life satisfaction did not turn out to be statistically significant. Understanding the results obtained requires a better look at the different types of well-being analysed in the study. Life satisfaction is an indicator of well-being viewed in hedonistic terms. It represents a subjective assessment of quality of life. Generalizing, respondents evaluate it by answering questions about how satisfied they are with their life at a given moment. As Endler and Parker (1990) stated, task focus translates positively into individual health, in contrast to emotion focus. This was confirmed by Tran and Chantagul (2018), who showed that life satisfaction is positively related to a task-focused style and negatively related to an emotion-focused style. The research on which these regularities were based was conducted on the general population, in which stressful situations tend to be transient. Against the background of this group, the situation of parents of children with autism appears to be significantly different. On a daily basis, they face numerous challenges related to the functioning of their children. Many of them present difficult behaviours; in addition, they have difficulties in communicating with the environment, requiring parents' constant attention and attempts to anticipate possible threats. Analysis of the relationship between coping and adaptation of parents raising children with developmental problems is no longer so clear-cut (Smith et al., 2008). The task-focused style manifests itself mainly in the behavioural sphere. It implies the search for information, remedies, and opportunities to cope. The possibilities for applying it seem to be limited in situations in which the source of stress is unmanageable (as in the case of incurable, progressive diseases). Such situations can certainly include raising a child with an autism spectrum disorder. Long-term coping by focusing on a task can result in fatigue, sometimes disappointment with the result achieved, or even failure. Similar conclusions were reached by Hastings et al. (2005), who indicated that, in a group of parents raising preschool-aged children with ASDs, problem-focused coping was not associated with stress or mental health.

An emotion-focused style refers to actions aimed at reducing perceived tension and anxiety, for example through denial. This should not be understood to mean that focusing on one's own emotions is an inappropriate strategy – on the contrary, it is a natural process of coming to terms with a child's disability, and, over the course of a human life, each of us has moments when we use more strategies that fall under this style (Wang et al., 2011; Wei et al., 2015). When raising a child with a disability, parents pass through successive stages of reconciliation – often referred to as stages of bereavement – in which each style will come to the fore in turn (Bristol, 1984). However, viewing the problem from a broader perspective, focusing on emotions does not help to overcome the difficulties encountered and,



as a result, can increase them while creating feelings of guilt in the parent. The inclusion of factors directly related to the child, such as age or the time that has passed since the diagnosis, may also contribute to a better understanding of the above relationship. The older the child is, the longer the time in which parents struggle with the disability, gradually learning to live with it. In addition, different developmental periods pose different challenges, and the passing of time can change the parents' perspective on their own situation, translating into an evaluation of their own lives in the context of their assessment at the present time.

The interpretation of the assessment of one's own life adopted in the second indicator of well-being analysed, which is psychological well-being, is completely different. The emphasis here is not on sensory impressions, emotions, or moods but on the mind, goals undertaken, beliefs, views, and values. Evaluation of one's own life is undertaken in the context of the meaning given to particular events. The strong link between the task-focused style used by parents and psychological well-being can be seen in the meaning attributed to the parents' activities. According to Heszen (2013), a positive aspect of such coping is a change in the object of attention – focusing on the goal rather than on the source of stress. At the same time, if, as a result of its use, it manages to achieve at least small successes, it becomes a source of positive emotions and increases the sense of self-efficacy and control. In the case of assisting another person (such situations include helping one's own child), it provides considerable positive reinforcement, both externally from the assisted person and the social environment and internally in the form of a sense of fulfilled duty. This is supported by the results of a study by Pozo and colleagues (2014) showing that more frequent coping through a task focus translates into higher psychological well-being scores in mothers of children with ASDs. In light of these data, an emotion-focused style has the opposite effect. Its main emphasis is on one's own well-being and the reduction of perceived tension. Psychological well-being is more than just current good emotions or satisfaction with lived experiences. It encompasses positive self-perception, positive relationships with others, mastery over the environment, autonomy, purpose in life, and emotions focused on healthy development (Ryff, 1995). Research on stress experienced by parents of children with autism has indicated that one significant predictor of high stress is the emotion-focused coping style used (Dabrowska and Pisula, 2010). The negative impact of the emotion-focused style on psychological well-being assumed in the study was confirmed, which is consistent with reports by other researchers (Tavakolizadeh et al., 2017). Similar conclusions were also reached in the study by Sagone et al. (2019), who studied parents of hospitalized children (for various reasons), showing that more frequent task-focused coping and less frequent emotion-focused coping promoted higher psychological well-being scores.

Another of the coping styles analysed was the avoidance-focused style. According to Endler and Parker's (1989) approach, it can be investigated as a single variable

or separated into two smaller variables: engaging in vicarious activities and seeking social contacts. The study assumed that engaging in vicarious activities would be negatively related to well-being while seeking social contacts would be positively related. The two variables showed no significant relationship with either life satisfaction or psychological well-being. In addition, analysing the two subscales together, an avoidance-focused style was not found to be significantly related to well-being.

Analysis of the relationship of the avoidance-focused style and its various forms with well-being often shows ambiguous results. Indeed, considering this style as a single variable, we see its duality and ambiguity. While engaging in surrogate activities directly indicates an attempt to separate oneself from the worries of raising a child with a disability, seeking social contact may turn out to be an important source of support, in which case we can expect a positive relationship between this variable and well-being. These were the assumptions made in this study. However, this was not reflected in the results. According to Goldbeck (2001), when assessing the adaptability to stress of a particular coping strategy, one should take into account numerous factors arising from the situation of the subject as well as their personal circumstances. When examining parents of children with autism spectrum disorders, one should be aware that many of them meet the criteria for the so-called broader autism phenotype. This means that they may have selective and less severe features of autistic disorders than their children (Hurley et al., 2007; Pisula, 2012). As reported by Whitehouse et al. (2010), these parents are more likely than the control group to manifest difficulties in social functioning. Reaching for strategies based on entering social contact may therefore be a hindered process for them. This is supported by the results obtained by Dabrowska and Pisula (2010), who found that parents of ASD children were less likely to use this strategy than parents of typically developing children.

The second assumption made in the study involved analysing the relationship between positive and negative emotions and life satisfaction and psychological well-being. It was predicted that positive emotions would be positively related to dimensions of well-being, while negative emotions would negatively predict well-being. The results confirmed that positive emotions are positively related to life satisfaction and psychological well-being. In the case of negative emotions, only their association with life satisfaction was confirmed. The relationship between positive emotions and well-being can be explained using the theory of extending and building positive emotions (Fredrickson, 1998; Fredrickson and Cohn, 2008). It suggests that positive emotions are a form of adaptation that translates into building sustainable resources. Unlike negative emotions, which narrow attention, cognition, and physiology towards coping with an immediate threat or problem (Carver, 2003; Cosmides and Tooby, 2000), positive emotions trigger new and wide-ranging thoughts and actions. Over time, however, these new experiences merge into further resources that can change people's lives.



A similar relationship was highlighted in the study by Kuppens et al. (2008), who claimed that positive emotions are more strongly related to life satisfaction than negative emotions. In the present study, this was reflected only in the context of psychological well-being. However, as these authors emphasized, predicting these relationships may be difficult due to the cultural and personal conditions of the subjects (Kuppens et al., 2008). The different relationship between positive and negative emotions and well-being can also be explained by the two-factor theory of affect (Diener and Emmons, 1984; Emmons and Diener, 1985), which assumes that positive affect is more situational while negative affect is more dispositional and probably genetically rooted. More recently, this thesis was confirmed in a twin study by Zheng and colleagues (2016). It showed that the average of negative affect over 40 days was more stable in nature, while the average of positive affect was subject to significant environmental influences. The different effects of positive and negative emotions on well-being became apparent. In light of the studies and theories cited, one may wonder why, in the case of life satisfaction, differences between positive and negative emotions did not occur. Both positive and negative emotions were strongly related to life satisfaction. Similar results were indicated by Liberska and Deja (2021) in their study of parents welcoming their first child into the world.

## CONCLUSIONS

As already emphasized, the situation of families raising children with autism is extremely difficult. For one student with autism, the Polish state allocates more than 85 thousand zlotys per year (Rozporządzenie...). Despite the huge financial outlay, children with ASDs very often do not achieve full independence in adulthood. Their fate often changes drastically at the end of their education, making them spend most of their time at home, dependent on their own aging parents. Many years of personal experience show that the progress children often make through therapy is not generalized to other environments, including the home environment. Parents place a great deal of emphasis on school skills, underestimating the importance of social communication, independence, or building satisfying relationships with others. Very often, they lack a full understanding of what autism spectrum disorders are and how they change the way in which a child functions and their needs. Many times, they themselves also need support and assistance, to which they unfortunately have limited access.

Continuing research in this area is an effort to learn as much as possible about parents' situation and to include them more broadly in their child's therapeutic process. The child should be viewed as part of a larger community. The first such community is the family environment, which, when faced with the child's diagnosis, is put to a great test. Faced with a new situation that they feel threatens the



well-being of the family, parents undertake numerous strategies to cope with the stress that they feel. According to the study, the way in which parents respond to perceived stress translates into their emotions and broader well-being. The results developed can be the basis for adjusting training programmes for professionals to provide the best support for parents. From a broader perspective, the positive effects on children themselves should also be apparent. After all, a calm and effective parent is the best partner for them in this extremely demanding and challenging journey through life.

### STUDY LIMITATIONS

The present study, while it has shown a number of interesting relationships, is not free from limitations. The first is that the study did not use random sampling, which is important for the interpretation of the results obtained. The study included parents of children aged 2 to 20 years, which is a very wide age range. Every family has its own dynamics, and the well-being of its members changes over the years. This may be especially true for parents of children with disabilities who, as their children grow up, experience a process of coming to terms with the diagnosis. In future studies, it would be worthwhile surveying a larger group of parents, for each age range, and including a longitudinal study design. In assessing parental well-being, correlations related to the child's characteristics, especially communication and social skills and the occurrence of challenging behaviours, may be important. Perhaps they act as moderators of the relationship shown.

The present research project touched on important issues related to raising a child with autism spectrum disorders: parents' well-being, emotions, and coping styles. The predictions about the role of coping styles and perceived emotions were confirmed. However, this is not necessarily the end of analyses devoted to this arrangement of variables and the inclusion of variables such as personality traits and psychological situations.

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## DOBROSTAN RODZICÓW DZIECI ZE SPEKTRUM AUTYZMU. ROLA POZYTYWNYCH I NEGATYWNYCH EMOCJI ORAZ STYLÓW RADZENIA SOBIE ZE STRESEM

**Wprowadzenie:** Organizacja Narodów Zjednoczonych oficjalnie uznała zaburzenia ze spektrum autyzmu za jeden z najpoważniejszych problemów zdrowotnych świata, obok raka, cukrzycy czy AIDS. W świetle danych wskazujących na rosnącą liczbę osób z diagnozą zaburzeń ze spektrum autyzmu w szczególnie trudnej sytuacji stają coraz większe grupy rodziców. Z licznych badań wynika, że doświadczają oni bardzo wysokiego stresu a ich dobrostan jest obniżony. **Cel badań:** Celem badań była analiza związku pomiędzy stylami radzenia sobie ze stresem, odczuwanymi emocjami oraz dobrostanem ujmowanym zarówno w ujęciu hedonistycznym (satysfakcja z życia) oraz eudajmonistycznym (dobrostan psychologiczny). Badaniami objęto 184 rodziców dzieci z zaburzeniami ze spektrum autyzmu.

**Metoda badań:** Do poszukiwania związku pomiędzy zmiennymi wykorzystano analizę ścieżek. W badaniu zastosowano następujące narzędzia badawcze: Kwestionariusz Radzenia Sobie w Sytuacji Stresu (CISS), Skalę Uczuć Pozytywnych i Negatywnych (SUPIN), Skalę Satysfakcji z Życia (SWLS) oraz krótką wersję Skali Dobrostanu Psychologicznego (PWB).

**Wyniki:** Stwierdzono, że dobrostan psychiczny rodziców dzieci z autyzmem wiąże się pozytywnie ze stosowaniem przez nich stylu radzenia sobie ze stresem skoncentrowanego na zadaniu oraz negatywnie z koncentracją na emocjach. Pozytywne emocje były związane pozytywnie zarówno z satysfakcją z życia, jak i dobrostanem psychicznym. Potwierdzono również negatywny związek między negatywnymi emocjami i satysfakcją z życia.

**Wnioski :** Zaprezentowane wyniki badań stanowią istotną przesłankę do podejmowania działań na rzecz rodziców dzieci z autyzmem. Odpowiednio dobrane wsparcie może być dla nich podstawą do stosowania bardziej adaptacyjnych sposobów radzenia sobie ze stresem, przekładając się tym samym na pozytywne emocje i dobrostan.

**Słowa kluczowe:** dobrostan, emocje, radzenie sobie ze stresem, rodzice dzieci z autyzmem

