

FATHER'S EXPERIENCE OF HAVING A CHILD WITH AUTISM SPECTRUM DISORDER

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ABSTRACT

Being a father of a child with autism spectrum disorder could be challenging. Parents of children with ASD could experience a wide variety of emotional, financial, and social burdens, as well as compromised mental health due to their child's condition. There is a lack of support provided specifically for the mental health of fathers of ASD children. In addition, the focus of some previous research that discussed similar issues only focused on the perspectives of mothers or both parents, rather than emphasizing on father figures. There is a difference between fathers and mothers whereas father of children with ASD were more likely to suppress their negative emotions, experience anger, and guilt rather than sadness that were experienced by mother of children with ASD. The purpose of this study is to describe, understand, and explore the meaning factors that experienced by fathers. Three fathers of children with ASD participated in this research through semi-structural interview that addressed the response and impact of child's diagnosis, the relationship with family and relatives, the implications for father's mental health, and father's support system. The interview transcripts of fathers of ASD child were processed through the stages of the coding stages and were analyzed in depth using Interpretative Phenomenological Analysis (IPA) approach. The fathers in this study had similar experiences to the findings in previous research. The results of the analysis of the findings in this study were identified into seven "major themes", namely: (a) path of acceptance, (b) autism diagnosis response, (c) father involvement, (d) heterogeneous support systems, (e) father struggles, (f) coping styles, and (g) relationships with others. By understanding the obstacles and supportive circumstances experienced by fathers, this could be a potential to help fathers overcome the challenges of parenting an ASD child.

Keywords: Father's experiences, autism spectrum disorder, interpretive phenomenological analysis, mental health

1. PREFACE

Autism spectrum disorder (ASD) is a neurodevelopmental disorder characterized by deficits or symptoms in communication, limited interests, and repetitive behaviors (American Psychological Association [APA], 2013). Although the exact cause of autism is still unknown, it is estimated that autism is caused by genetic factors around 80-90% and the rest is contributed by environmental factors (Sandin et al., 2017). The symptoms of autism do not only affect the individual with autism, but can also have stressful consequences, especially for their caregivers or parents. This is proven through previous research that has been conducted, where parents of individuals with autism experience high levels of stress, which could affect the parent's adjustment to their children's needs (Radzilani-Makatu, 2014). Furthermore, the symptoms of autism can also affect the functional structure of a family such as: (a) family-orchestrated child experiences; (b) parent-family interaction; (c) child health and (d) safety functions (Estes et al., 2019).

Raising a child with autism is undeniably challenging and can lead to various changes in family dynamics. Some previous studies have also highlighted the emergence of physical and emotional

health problems, as well as excessive and repetitive stress in parents. It can be said that the stress experienced by parents in parenting a child with autism is an inevitable consequence (Rivard et al., 2014b). Some of the triggers of such stress may include: (a) interactions with healthcare providers (Boshoff et al., 2016), (b) *self-management* challenges (Bonis & Sarwin, 2016), and lack of in-depth knowledge about their child's prognosis (e.g. interpersonal difficulties, emotion regulation challenges) (Costa et al., 2017). Furthermore, emotional responses to the stress associated with parenting an autistic child vary among parents, but are more associated with feelings of loss or sadness (Hannon et al., 2019; Mihandoust et al., 2021).

Meanwhile, autism-related stress experienced by parents might also affect their mental health. In previous studies, it has been shown that mothers and fathers respond differently according to their child's diagnosis (Soltanifar et al., 2015). Mothers with autistic children are at risk of depressive and anxiety symptoms based on the severity of autism symptoms (Tomeny, 2017). Then, research conducted by Rivard et al. (2014b) found that the main stressors for fathers were the behavioral and interpersonal challenges of their children. Meanwhile, the main stressor for mothers was concern about their children's ability to regulate healthy emotions.

The experiences faced by fathers could be divided into two categories: (a) experiences related to the father's stereotype such as doubting the father's ability to care for a child with a disability; (b) experiences related to autism itself (Hannon et al., 2019). For example, responses or comments from loved ones regarding parenting from their perspectives are usually unknown. Furthermore, previous research has also examined the relationship between gender differences in dealing with stigma among parents of individuals with autism (Alshaigi, 2020). This provides some perspectives on the experiences of fathers, but little has been done on the topic.

Father's involvement in the care of a child with ASD also affects the mother's level of depression (Burrell & Borrego, 2012; Braunstein et al., 2013). Conditions where the father's contribution is insufficient or does not meet the expected needs in maintaining healthy family relationships are essential to fulfill the well-being of the child with ASD. Fathers involved in the care of ASD children support their partners in terms of making a decision and financial needs and as well as the child's future (Rudelli et al., 2021). In the context of ASD children who experience limitations in communication and social interaction, understanding and enhancing the role of fathers is important in terms of both research and practice.

There is very limited, but emerging research on fathers of children with autism. To this extent, there has been little research into how fathers of autistic children describe their experiences of adjusting to their child's diagnosis (Hannon et al., 2019). Thus, it is essential to understand what fathers experience when they experience disruptive behaviors. This is particularly important because responses from others could also influence whether fathers feel bonded or distressed by the stigma caused by their child's condition.

2. RESEARCH METHOD

The criteria for subjects in this study were: (a) parents who have children with autism disorder, (b) have good physical, mental, and spiritual health conditions (c) and are willing to be involved in the study. The sampling in this study used purposive sampling technique which is a technique that has been used in many previous qualitative studies to identify cases that have limited information in depth. In a sense, it requires the identification and selection of individuals specifically who have experience or knowledge with the phenomenon intended by the researcher (Creswell & Plano Clark, 2018). The research used in this study is a qualitative approach with the (IPA) method which

aims to explore how participants feel about their personal and social lives in depth (Frost, 2021). Then, the IPA method also has a core to interpret experiences, events, and circumstances owned by the fathers. Through phenomenological research design, the research team tries to understand stories about understanding life or experiences from the perspective of participants (Smith, 2015).

The data processing and analysis technique of IPA described by Smith and Pietkiewicz (2014) was used in this research such as: (a) multiple reading and making notes, the initial stage involves reading the transcript several times. At this stage, the researcher also makes notes about the observations and reflections on the interview experience or other potential thoughts and comments. Such notes may focus on content, language use (features such as metaphors, symbols, repetition, pauses), context, and initial interpretive comments; (b) transforming notes into emergent themes. At this stage, the researcher pays attention to the notes than the transcript. This is because the aim of this stage is to transform the notes into emergent themes.

The researcher also aims to formulate concise disclosures at a slightly higher level of abstraction that can lead to more psychological conceptualizations; and the last part is (c) seeking relationships and clustering themes, this stage is more concerned with finding relationships between the new themes, clustering them based on conceptual similarities, and providing the groups with descriptive labels. While this stage aims to cluster themes, some themes may be eliminated if they do not fit into the emerging structure or because they have a weak evidentiary basis.

3. RESULT AND DISCUSSION

Three participants have been contacted by the researcher, and are willing to participate in this study. The ages of the participants who were willing to become participants were 33, 40, and 59 years old. Both participants are Indonesians who live in Indonesia, participant WS who lives in Perth, Australia, and participant SJ who lives in Tangerang, Indonesia. All participants have the same job, namely as private employees. The children's levels of ASD are mild and moderate. where each child is 5, 9, and 17 years old, and all of them are male. Each child of the three participants has done therapy in the form of motor, speech, cognitive, and behavioral therapy. And, from the data analysis, seven major themes were identified. The themes are described as:

Table 1

Participant Demographic Results

Demographic	Participant 1	Participant 2	Participant 3
Initials	RA	WS	SJ
Age (years)	33	40	59
Marital Status	Married	Married	Married
Occupation	Private Employee	Private Employee	Private Employee
Gender of Child	Male	Male	Male
Child's age (year)	5	9	17
Number of Children	2	2	3
Order of ASD Children	1	2	3
Place of Residence	Jakarta, Indonesia	Perth, Australia	Tangerang, Indonesia
Child's Level of Autism	Mild	Mild	Moderate
Age of diagnosis (years)	2	2	1
Intervention conducted	Motor, speech therapy	Motor therapy	Speech, cognitive, behavior therapy

Path of Acceptance

According to previous studies, father's experiences have been described as a path with several milestones along the way (Burrell et al., 2017). The process of this journey is seen as a journey

towards acceptance that builds on father's reflections. The journey is described narratively before their children were diagnosed with ASD. According to Mihandoust et al. (2021), before reaching acceptance, there are several characteristics of grief that experienced by the father along the journey, such as: (a) feelings of sadness (b) guilt, (c) anger, (d) helplessness, (e) despair, and lastly (f) hopelessness.

The beginning of the journey starts from the point where fathers realize that they have difficulty in adapting to their child's behavior that has unknown cause. In addition, there was an initial view that fathers tended to ignore ASD conditions in individuals other than their children:

"So, I used to think of them (other autistic child) as disabled or horrible. But since the existence of them (his child) I'm kind of like that. Maybe in general, I used to think it was horrible. I might tend to underestimate it" (WS, W-2, 27/5/2023, 141-145).

When knowing the child's development at an early age, participant RA realized the denial of his child's condition:

Autistic symptoms, for example, he needs to uphold the term initial diagnosis, frankly if at the beginning we already know that this is an autism child ... but it's also called a human being when he finds something bad, still try to have a positive thinking ... ah no way ... no way ...but then we entered the phase of let's accept it, let's move on. if you say denial, but realize that we are denial (RA, W-1, 23/5/2023, 509-517).

After knowing the condition of the child's diagnosis, RA participants described "blindness" on what to do afterward. The next step was to seek further information about the ASD condition in order to better understand their child's condition. There is a formed understanding of the responses expressed philosophically about their child's condition:

"At that time we were still really blind, right, whatever we did we still followed the doctor's directions" (RA, W-1, 23/5/2023, 175). "...it's like this if the doctor said what I heard from several webinars, autistic children are actually normal children who are trapped in their own world" (RA, W-1, 23/5/2023, 64-68).

Feelings of regret, despair, sadness, and guilt followed by thoughts of wishing his son dead arose by participant WS, then he compared it with the situation experienced by his wife who seemed to experience deeper sadness:

"There was a time when I was feeling down, if I could make [the child] die in the sense that he died a good death when he was sick..., I didn't expect the situation I realized, I was sad that there was such a period of time like my wife also I guessed there was, like that." (WS, W-2, 27/5/2023, 565-567).

Feelings of guilt often arose compared to feeling hopeless for WS participants. This was followed by his hope to be able to improve the past:

"I often feel guilty to be able to improve the past, you know, from things like that, that's more often than despair" (WS, W-2, 27/5/2023, 615-618).

Such a thing happened to Participant RA, the guilt caused by the thought that having an ASD child is something that arises because of incompatibility with a partner and the problems he has:

Mixed, there is guilt, what did I do wrong with other people or did I have a mistake? or ... whether my wife and I are compatible or not, we have problems or not until we experience it (RA, W-1, 23/5/2023, 83-88).

Although the journey experienced was difficult, there was a process of acceptance described by the father to his son which was aimed at the positive impact that could be taken:

"...until now we have a forward-looking view that can be more accepting, more aware and can take - learn the lessons, you know, yes deck" (WS, W-2, 27/5/2023, 696-700).

The acceptance experienced by fathers seems to lead to a form of recovering negative emotions that were previously felt. The guilt and regret that arose previously were the result of helplessness to change their situation. Fathers realized that they could not change their situation, but could change their perception of it:

As I said earlier, we just started to accept ... what from the start of denying, to accepting so like from starting from the innate boiling when people talk about it, but like it's okay that people can't be in this, we also need time too but ... it takes to that process (RA, W-1, 23/5/2023, 1178-1185).

In the next condition, the fathers reflected and described the positive changes experienced from the experiences they had gone through by bringing themselves closer to God:

"We all become more understanding and the effect is that we are also patient not only with him, but also in everyday life and with other people" (WS, W-2, 27/5/2023, 331-334). "We have to learn to be more patient, closer to God, more able to understand other people" (RA, W-1, 23/5/2023, 115-118).

Meanwhile, there was a difference from the previous participants where participant SJ had already learned to accept his son's condition before he wanted to check about the diagnosis of his son:

"Let's check, I told my wife, we must try to learn to accept" (SJ, W-3, 28/9/2023, 167-170).

Autism Diagnosis Response

The diagnosis obtained by one of the participants of an ASD child, participant RA, began with early symptoms that identified ASD symptoms. Gradually, leading up to the diagnosis, fathers became aware of their child's difficulties that they did not understand the cause of (Burrell et al., 2017). These symptoms led to worry and anxiety about their child:

My child regressed from being active normally, being able to communicate with others, suddenly it changed, changed completely like staying in the room not daring to socialize with others, fear in crowded places. Well, it started from that age and yes as parents we feel worried about conditions like that where we need about 1 month to think about what this child is experiencing ... (RA, W-1, 23/5/2023, 13-23).

In addition to being diagnosed with ASD, participant RA also felt frightened if his child was indicated to be deaf after being advised by the doctor to do several tests:

After ... in Fatmawati at that time, the doctor suggested doing some tests anyway ... And at that time one of them was a test to check his condition whether there was an indication of deafness or not, so the hearing problem was the response. We were scared too ... "is my child deaf or not" (RA, W-1, 23/5/2023, 154-160).

The literature written by Legg and Tickle (2019b) states that fathers reported mixed responses after hearing the diagnosis from an expert. Previous research suggests that fathers have more difficulty accepting their child's diagnosis than mothers (Legg & Tickle, 2019). Fathers of children with ASD also often feel intense emotions upon hearing an expert diagnosis (Bravo-Benítez et al., 2019). These statements were also felt by participant RA who described the diagnosis response with a simile:

"...it's like we are buried into the deepest earth" (RA, W-1, 23/5/2023, 124-125).

...finally, when I got this, it was like DUAR! It was like the world was broken all this time like there is a problem like this where it does not come from anywhere, but comes from our own children, whereas in our family there was nothing like this before. Well, it's like we were speared several times because we were told to retreat the first time it was like wow it felt like being shot... (RA, W-1, 23/5/2023, 73-82)

Similar to what RA experienced, participant SJ also felt devastated when he learned the results of the diagnosis, but was more prepared to accept the condition of his child:

"I was devastated, but I was more prepared in the sense that I had seen the symptoms first. What is less ready is his mother, she still has not accepted" (SJ, W-3, 28/9/2023, 182-185).

Unlike participant RA and SJ, participant WS felt more surprised and did not feel unpleasant emotions like Participant RA when her child was diagnosed with ASD:

"...then I was shocked, we were shocked too..." (WS, W-2, 27/5/2023, 81-82).

Father's Involvement

A father's involvement with the family can reduce stress levels in both parents and create relationships within the extended family, which can also have a positive impact on children with autism (Rankin et al., 2019). The role of the father is needed in the family to reduce the pressure felt by the wife as mentioned by both fathers:

"Because after all my wife needs me as a general family, she really needs me, especially with HB's condition like that, so I am still looking for the best solution" (WS, W-2, 27/5/2023, 643).

Because I am in a position where of course the wife will feel pressured, right, because she gave birth. Now if the husband is looking for ways to position himself even though the husband is also certainly depressed and does not make the wife feel down even more. Because, yes, we both felt down at that time, but both of us can't feel down at

that time, right. Because we already have two children (RA, W-1, 23/5/2023, 128).

The father's role as head of the family is to be able to think about and direct children so that they can grow and experience personal maturity. This is described by participant RA who considers himself a "captain" in the family in order to steer his family back on the right path:

"The term is that the ship is drifting, we as captains must give it back on the right path" (RA, W-1, 23/5/2023, 150). Yes, we feel that when the child is like this, like it or not, we have to learn, for the sake of our own children, like it or not, we have to do it, like that. (WS, W-2, 27/5/2023, 336).

Sanjaya et al. (2022) in the concept of "father's involvement", made several aspects of involvement as follows: (a) Engagement is defined as the time fathers spend with direct interaction. (b) Accessibility includes the father's presence and ease of interaction. (c) Responsibility includes the psychological well-being of the child and meeting the child's needs () (Çetin, Ş. Ü., & Olgan, R., 2019). Participant RA also felt the responsibility of being a father in caring for his autistic child:

"We can't equate with therapists, but we can try what he does. That's why sometimes I ask, during therapy, "What did you do? What was the activity? What was his response?" (RA, W-1, 23/5/2023, 313).

The same thing happened to participant WS who felt a responsibility to find the best solution so that he could live with his wife and child again:

"...But I am still trying to find the best solution so that we can live together" (WS, W-2, 27/5/2023, 640).

According to Saunders et al. (2015), families with children diagnosed with ASD experience significant financial difficulties due to the specialized care required for their children. Participant SJ spends a lot of time earning money to ensure CK gets proper care. Also, Participant SJ spent a lot of time giving his attention to his son:

...I definitely have to try to have more income for therapies, for going to the doctor, for medication, everything, it definitely requires more funds, that's one. Also, CK can't be left alone, we still have to look after almost 24 hours... (SJ, W-3, 28/9/2023, 477).

Heterogeneous Support System

A Heterogeneous support system refers to a set of varied individuals or groups that can provide social support. Varied social support is significant for parents of children with ASD (Drogomyretska et al., 2020). These statements also apply to the experiences of fathers regarding how important the influence of social support is when parenting a child with ASD.

Alhamdulillah, some of our support systems are like a lot of willingness to help anyway, for example, there are some brothers, ... coincidentally Ustadz tries to tell us "Once in a while don't just try to learn the religion, but also to join the people like for their desire to learn to be better, like their desire is contagious to us to also become better". Well, that is one of the terms taught like that... (RA, W-1, 23/5/2023, 1186-1998).

Social support provided by the family is very influential in caring for children with ASD as mentioned by participant WS. This is also supported by previous research which revealed that family is one of the most influential forms of support (Peer & Hillman, 2014):

"... or my wife's parent's house, so they are very supportive and my wife's siblings, her brother, and sister are very supportive, very good, which is very helpful" (WS, W-2, 27/5/2023, 671-674).

Similarly, participant SJ felt that support in the form of moral support from his friends and the acceptance from his extended family were very valuable:

"Yes, mostly moral support, they give support, encouragement like that, and also in the extended family, they accept CK like that, it's already a support in my own opinion" (SJ, W-3, 27/5/2023, 548-552).

Although support is important in the experience of fathers with ASD, participant SJ stated that agreement is the most crucial part of the family:

Support is arguably quite important, but I think the most important thing is the agreement within the family itself. That's the most important thing, in the family we agree, we have to guide, together guide CK. If in our own family, we don't agree, that's what I think is quite troublesome. (SJ, W-3, 27/5/2023, 796-804)

Father's Struggles

Based on previous research, some fathers who became participants felt that everything they had done was a struggle (Rafferty et al., 2020). When compared to this statement, fathers feel a struggle due to the mood or attraction of their autistic children's conditions, so that fathers have difficulty regulating their autistic children's emotions. This is one of the difficulties experienced by participant RA because of the need for knowledge related to the moods or interests of their children:

The most difficult thing is when he is emotional, we need to regulate his emotions. That's the most difficult. When children get older, automatically they have more energy, especially when they are angry. Such as kicking, hitting, it drains out our energy and emotions as well, ... (RA, W-1, 23/5/2023, 266-271).

The inability of autistic children to communicate is also one of the biggest stressors for fathers (Rafferty et al., 2020). This is reflected in the experience experienced by participant WS. With the condition of his son's inability to communicate, WS participants find it difficult to know what his son wants, so he has to obey all his son's wishes:

If he (HB) plays, we have to watch him even though we don't play. If I lie down, even though I'm sitting, he will wake me up, wake us up, so that's one of them. Actually, there are many more besides sleeping, what is it? For example... many things... Besides sleeping, he is active, then he asks to be accompanied, he likes to mess up his stuff like that. (WS, W-2, 27/5/2023, 231-239).

Participant RA realizes the limitations that his child has in terms of communication due to the ASD condition. Thus, he felt that this was one of the obstacles and difficulties he experienced:

"With normal children, we can communicate what we want. With him, he cannot communicate, he can only get angry" (RA, W-1, 23/5/2023, 276-279).

In a study conducted by Potter (2017), it was found that fathers of autistic children had problems related to their children's sleep patterns. This also happened to participant SJ who had little sleep due to his son who had difficulty sleeping. Participant SJ considers this as a tough challenge:

"Sleep time, there are times when we, especially me, sleep maybe only 3 or 4 hours a day because CK can't sleep and can't be separated from supervision, right. So, it's a very difficult challenge, yes..." (SJ, W-3, 28/9/2023, 935-930).

Coping Styles

According to Zhang et al. (2013), a person will conclude that they are doing better when they compare themselves with others who are considered more unfortunate or less fortunate. The same thing happened to participant RA who claimed to be more grateful because the level of autism that his child had was not as severe as other autistic children he had met:

Yes, that's why I said yes, one of the things to learn to be grateful too, that's why I said, like "oh, our current condition is still good actually" because in terms of obstacles, maybe there is still something that everyone is facing like that, ... (RA, W-1, 23/5/2023, 935-941).

Gratitude was described by participant WS when he narrated that by comparing his son with his cousin who has a child with autism with a higher level of autism:

My uncle, who I told you about earlier, my father's uncle, has a child who - he - honestly, I don't know what -, but he can talk but there are abnormalities, he's already working now, but his hyperactivity is nothing like HB.... so all of these things are not just one, there are many, it makes us all more grateful because HB is not like that at all - thank God, - not like that (WS, W-2, 27/5/2023, 729-743).

Hope arises as a coping mechanism to be able to get lessons that can be learned and make this hope an encouragement for WS participants. According to Ekas et al. (2016), hope can be a sustaining force in overcoming stress permanently, and become a guide to future events rather than an unattainable goal:

"...hoping that there are lessons that I can learn and there are - in the future. There is a word that is "beautiful in its time" what is it, hmm that - that's actually what yes - my self-encouragement" (WS, W-2, 27/5/2023, 636-639).

According to Gall et al. (2013), some people "look" to religion to be able to find meaning, seeking physical, psychological and emotional well-being in their lives. Just like what was done by participant WS who tried to find meaning as an individual who was Muslim:

"So what I learned, we got this that something is not in vain.... So, as a Muslims who - i also believe that other people and all religious teachings taught that everything has a meaning" (WS, W-2, 27/5/2023, 1076-1080).

According to research conducted by Salas et al. (2017), it was found that fathers with autistic children used coping strategies to avoid situations that could potentially trigger stress, while mothers with autistic children used social support as a coping strategy. Just like what was done by participant RA who avoided individuals who had the potential to trigger upset. RA participants described this with a parable:

People's mouths are like swords that are not supposed to stab us, you know, or like if they throw the sword, we just have to avoid it, "instead of being upset with this person, it's better if we just keep our distance" like that. (RA, W-1, 23/5/2023, 785-791).

Participant SJ considers that going to work is not a burden and is a way to reduce the stress experienced at home:

"so if i flip it over, if people perceive going to work as a burden or heavy, for me going to work is like a picnic, like a vacation from what we face at home." (SJ, W-3, 28/9/2023, 708-712).

Relationships with others

Previous research related to father involvement in the care of ASD children by Braunstein et al. (2013) suggests that fathers are more sensitive to the stigma that exists in society and frustrated about how society cannot understand ASD in general (Lashewicz et al., 2017). As stated by participant RA who felt frustrated regarding the stigma and understanding of ASD by his colleagues:

Yes, seriously, because what I realized was that the further we went- it's already called people- whether the difference in era or how, I don't know too. He (colleagues) knows that AA is special, and he is educated, when he was able to talk like that, I - I just can say "where is this person's brain" (RA, W-1, 23/5/2023, 794-800).

Previous research shows that there are assumptions from others who assume that children's naughty behavior represents bad parents (McStay et al., 2014). This also happens to the father of an ASD child described in the experience of participant WS, where there is a community stigma that assumes he is a bad parent because his child behaves badly:

When we played in Gresik, there is a place called alun-alun, the alun-alun is used for children and there are balls like that, so he ran there and there. People said "your son is really naughty" (WS, W-2, 27/5/2023, 364-368).

A similar experience was also shared by participant SJ where he also needed to explain to others about the condition experienced by his child when his child is perceived as a naughty child:

I was once offended when my child was said to be naughty, so what, even though the person knew that my child had autism, but said my child was naughty, well I was offended and I explained that CK did not yet understand about manners, ethics, everything had not yet been understood (SJ, W-3, 28/9/2023, 615-621).

The purpose of this study was to describe the experiences of fathers who have a child with ASD. Seven main themes were identified, namely: path of acceptance; autism diagnosis responses; father involvement; heterogeneous support system; father's struggles; coping styles; and relationship with

others. The fathers in this study described experiences similar to those in previous studies. A prominent finding in this study was that they gave similar meanings to some experiences and moved toward acceptance. Furthermore, existing research on mother's experiences suggests that there is a profound impact of having a child with ASD (Papadopoulos, 2021). And, this is replicated in research that shows that there is a similarity between the level of impact received between mothers and fathers.

Burrell et al. (2017) argue that acceptance can help fathers to cope with negative emotions such as frustration and anger. This study found similar results, with participants describing their journey towards acceptance, and an acceleration in the variation of father's coping styles, which is in line with previous research (Vernhet et al., 2018). Fathers discussed how despite varying types of barriers and difficulties with their child with ASD, they still had a close relationship. Furthermore, compared to mothers, fathers of children with ASD were more likely to experience anger, despair, guilt than sadness, and also sought to suppress negative emotions such as anger rather than express them to others which is consistent with research exploring the relationship between gender and coping (Mihandoust et al., 2021).

In addition, fathers also face challenges stemming from other people's relationships or their external environment. This is in line with research conducted by Ooi et al. (2016) who found that parents including fathers were socially stigmatized and had less favorable experiences. Current study found that negative responses given by close people such as family would be more psychologically harmful for fathers rather than public responses. In this study, fathers also tended to experience anger more often than sadness and tried to suppress the negative emotions they felt. This is in line with research conducted by Burrell et al (2017). Fathers of children with ASD described their lives as a difficult and emotional experience, likening it to the grief associated with losing the child they were expecting (Bravo-Benítez et al., 2019).

4. CONCLUSIONS AND RECOMMENDATIONS

In this study, the child with ASD greatly impacted the father's life. They felt many feelings such as guilt, regret, and helplessness on their journey to accept their autistic child. The journey began with the realization that they were struggling because of symptoms and they did not understand the cause, which led to worry and anxiety. Fathers also felt emotions such as shock and described the 'world as breaking' when their child was diagnosed with autism. Although the fathers felt these emotions and feelings, the fathers still realized that the role of the father in the family was needed and very important to reduce the distress felt by the wife.

The existence of a support system is also very influential for the father's mental health to be maintained because if the fathers do not feel any support, it could trigger emotional exhaustion. The obstacles and difficulties experienced due to their autistic children are also a challenge for fathers to maintain their mental health. By comparing their autistic children with other autistic children with higher levels, fathers also feel more grateful. In addition to comparing, one of the fathers used hope to find meaning through religious beliefs to keep thinking positively. Relationships with others can also cause frustration for fathers where people do not understand ASD in general, so it is highly important to educate the public about information regarding children with ASD. However, the journey also had a positive impact, meaning that they felt a positive change from the experiences they had gone through.

This study aims to expand the literature on involvement, mental health, and coping styles of fathers of children with ASD. The subjects used in this study were not broad enough considering that this study only involved three subjects as participants. In future research, it is expected that the number of participants will be multiplied in order to produce more empirical-based research. Future research is expected to include a broader view of acceptance from fathers who have ASD children. In acceptance, there is an emotional process experienced by parents, especially fathers. Fathers' involvement in caregiving can be influenced by how fathers accept the diagnosis.

However, caring for ASD children by mothers is different from fathers. In normal children, the parenting done by the mother is more directed towards how the mother nurtures and raises the child while the father is more directed and focused on achieving family welfare. Future research can find out about the differences in parenting to ASD children by mothers and fathers. Gender differences in children also affect the parenting done by fathers. The development process experienced by daughters and sons is different in several aspects, so the parenting patterns that need to be done should also be different. Thus, future research could analyze specific differences between fathers who have daughters or sons with ASD.

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