GRIT AMONG DOCTORS WHO HAVE AUTISTIC CHILDREN

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ABSTRACT

This study aims to explore the factors that influence grit among doctors who have children with Autism Spectrum Disorder (ASD). Grit, which consists of resilience, perseverance, and sustained passion in achieving long-term goals, is a crucial psychological trait for doctors who must manage a dual role—balancing the demanding profession of medicine while simultaneously fulfilling their responsibilities as parents of children with special needs. The unique challenges experienced by this group often require a higher level of emotional endurance and adaptability. To investigate this phenomenon, researchers employed a qualitative design using a phenomenological approach, enabling an in-depth understanding of the lived experiences of participants. Data were collected through semi-structured interviews with three doctors who are parents of children with ASD. The findings revealed four major themes closely related to grit: religiosity, resilience, knowledge, and long-term commitment. Religiosity emerged as a spiritual strength that provided meaning and coping strategies, while resilience reflected the ability to recover from stress and setbacks. Knowledge, particularly medical expertise combined with parental experience, enhanced confidence in supporting the child's development. Long-term commitment emphasized perseverance despite ongoing challenges. This study highlights the importance of establishing holistic support systems and tailored interventions to maintain doctors' mental health, ultimately fostering their capacity to support both their professional responsibilities and their children's developmental needs.

Keywords: grit, children with ASD, autism, doctor, parents

1. PREFACE

In the world of medicine, the knowledge and skills of doctors are the main foundation for providing the best care for patients. Several studies explain the importance of knowledge, skills, and development in the field of medicine to improve health in the community (Dodson et al., 2024; Grega et al., 2023; Hakimian et al., 2024; Hitchell et al., 2024; Moschella & Burrows, 2023; Schouten et al., 2023; Woo et al., 2024). However, when a doctor faces a situation where their child is diagnosed with autism, the challenges faced become much more complex. This is because of their limited knowledge about autism. This limited knowledge can hinder them from immediately taking therapeutic steps to support their child's development. Doctors' limited knowledge about autism has been conveyed in some studies (Abdelrahman et al., 2024; Corden et al., 2022; Effatpanah et al., 2019; Imran et al., 2011; Mao et al., 2022; Mukhamedshina et al., 2022; Sharma & Andrade, 2020).

The complexity of handling autism spectrum disorder (ASD) causes high psychological pressure/stress for parents of ASD children. This condition has been reported in several studies (Bradley et al., 2024; Effatpanah et al., 2019; Ilias et al., 2018; Smith et al., 2024). Parents of ASD children who work as doctors may also experience high levels of stress, but there is no research specifically discussing this. Having a child with ASD requires parents to be prepared to be on standby with various possible unpredictable behaviors of the child. This means parents of ASD children must be able to manage their time and control themselves, both physically and

mentally. This is important so that in caring for children with ASD, parents can still think clearly and still be able to maintain their mental health.

Autism is a serious neurobiological disorder in a child's development, resulting in difficulties in communicating and interacting with the environment from an early age, and will continue throughout life if left untreated. Some researchers define autism as a neurodevelopmental disorder in children that causes disturbances in various aspects, including communication, social interaction, limited interests, as well as repetitive behavior patterns, as well as several other behavioral problems (Hodges et al., 2020; Loveall et al., 2021; Roehr, 2013; Sivayokan et al., 2023). Caring for children with ASD in high stress lasts a long time. Overcoming this requires a high level of grit, especially for parents of ASD children who work as doctors. High grit is necessary to face various challenges that arise and maintain them over a long period. Grit, which includes perseverance and passion in achieving goals, allows these parents to overcome stress and adversity and continue to look for the best ways to support their child's development amid high professional demands.

Grit is a term that reflects a combination of skill, perseverance, passion, persistence, and resilience, which allows individuals to consistently focus on the field they are working on to achieve long-term goals. Grit serves as a multifaceted construction that is highly influential in influencing outcomes in various aspects of life. For doctors who are also parents of ASD children, grit helps them overcome challenges, maintain concentration on long-term goals, and achieve positive outcomes both in their childcare and in their professional practice. In psychology, Duckworth et al. (2007) put forward the term Grit to describe personality characteristics that include perseverance and motivation in pursuing long-term goals. Essentially, grit is seen in his decision to continue striving to achieve these goals despite the possibility of facing failures and various challenges in the process. Grit has been identified as a significant and powerful personality trait in predicting success as well as performance, and it differs from other characteristics such as prudence (Credé et al., 2016). The Grit level of parents of ASD children determines their involvement in ABA therapy for their ASD children (Miquel, 2022). However, researchers have not found Grit in parents of ASD children who specialize in doctors.

The study is very important to conduct in order to fill the existing literature gap in identifying the factors that influence grit in parents of children with ASD who work as doctors. The results of this study will provide better insights into how they can improve Grit in facing the challenge of caring for children with ASD for a long time. In addition, the results of this study are expected to help in designing more effective interventions to support these parents in carrying out their dual roles as medical professionals and as parents of children with ASD. This study is very important because there has been no research related to this in tracing researchers.

2. RESEARCH METHOD

Samples

This study uses a qualitative method with a phenomenological approach. This approach seeks to obtain firsthand the experience of doctors who have children with ASD. Phenomenology emphasizes the importance of understanding phenomena according to their actual circumstances without disturbing their original meaning (Creswell & Poth, 2018; Husserl, 1965).

Three informants were selected using purposive techniques, with the main criteria being parents of ASD children who work as doctors between the ages of 38-45. According to Creswell and Poth (2018), informants in phenomenological research must be carefully selected, that is, only

those who have experienced the phenomenon themselves. The three informants expressed their willingness to participate in this study. Data collection was carried out at each informant's residence. The three informants complement the information consent.

Data collection and analysis

According to Moustakas (1994) in phenomenological research, interviews are an appropriate data collection technique so the author can conclude opinions and perceptions of the phenomenon being studied. This study collected data through interviews with informants using semi-structured and open interview techniques. The interview questions have been pre-validated by experts. Here are the questions for the informants: (a) Why do you suspect your child has ASD?; (b) Your knowledge about autism was certainly gained during your studies in medical school; (c) How did you seek information about autism?; (d) At what age was your child diagnosed with autism?; (e) What did you do after receiving the autism diagnosis for your child?; (f) How do you face the challenges of caring for a child with ASD?.

Documentation is done through voice and image recordings and using WhatsApp voice notes. The author has obtained permission from the informant to use the recording tool and conduct transcripts to facilitate data analysis. The three informants said that their voice and image recordings were only used for this research and not to be shared with other parties.

This study uses data analysis techniques from Miles, Huberman, and Saldaña (2014), which consists of data collection, reduction, display, and conclusion drawing/verification. The three informants provided data and information through interviews, recording, and documentation. Data is reduced by entering relevant information and removing the irrelevant. Data is presented through interview transcripts with systematic coding and description. Data analysis is done by drawing conclusions based on the data obtained and ensuring validity and consistency. Triangulation of sources and time is carried out to ensure the validity of the data. This approach aims to strengthen the reliability of the data and ensure consistency between information sources.

3. RESULT AND DISCUSSION

The results of the semi-structured interviews with the three informants above produced four themes, namely religiosity, resilience, knowledge, and long-term commitment. The following is a discussion of each theme.

Religiosity

Religiosity plays an important role in increasing Grit among parents of ASD children who work as doctors. Spiritual connectedness can provide strength and calm when facing complex challenges. For many parents, religious beliefs are a motivational booster, helping them stay focused on long-term goals in supporting their child's development, even amid adversity. Likewise, for parents of ASD children who work as doctors, here is an excerpt of the interview:

Informant 1

The diagnosis of autism was hard for me, but I believe Allah has a good plan for me and my child. After my son recovered and entered regular school, I understood Allah's plan for me. I can contribute to helping other parents who have children with ASD like me. Although it was hard to carry it out, I was very confident in Allah's help for me and my child.

Informant 2

Allah will not be wrong in giving trust to his servants. I, a doctor with limited knowledge about autism, can only approach Him for help. The test of patience was very strict with me, but there was no doubt about Allah's help. It could be that I have been thinking well to Allah. I was given a gift with my son's recovery: attending a regular and outstanding school, Alhamdulillah.

Informant 3

Allah's help for me and my son was amazing, even though I was initially tested by the lack of progress from SI, OT, and TW therapy that had been carried out for more than two years on my son. I remained patient, and that patience brought me together with Smart ABA and Smart BIT. These two methods, then, with Allah's permission, allowed my child to speak in a relatively short time, approximately four months. I am very touched by what my son has gone through. I have to be very grateful for the good development of my son, who is currently being sent to a regular school. Running therapy for children with ASD is like running a marathon, which, of course, we must prepare carefully and carefully. On that journey, do not be far from Allah

Resilience

The resilience possessed by parents of ASD children who also work as doctors is very important. This resilience involves the ability to face and overcome the various challenges that arise due to their dual roles as medical personnel and parents of children with ASD. The following is an excerpt from the interview:

Informant 1

As a doctor, I have been used to high pressure since studying at the Faculty of Medicine. When receiving the diagnosis my husband and I were immediately able to receive the diagnosis and then seek help for the right therapy for my child. However, the challenges of doing therapy do require me to have high resilience. My lifestyle changed when I started doing Smart ABA and Smart BIT therapy. I will start by arranging to wake up early at 3 am and continue to prepare various things for therapy. Besides that, I am also a therapist for my child, after going through training and internship at KID ABA Autism & Developmental Disorders Center. My child is now in the second grade of junior high school at reguler scholl.

Informant 2

During my studies at the Faculty of Medicine, I was indeed filled with high stress, so when my child was diagnosed with autism, I was not too sad. My husband and I received the diagnosis. The problem arose during therapy, which put me under pressure because some therapies could not make my child able to speak, even though it had been done for a fairly long time, approximately two years. My durability was tested here. I have to be able to manage my emotions and stress. Stemming from this resilience, I also moved to seek other help for my

child. Meeting Smart ABA and Smart ABA then led the child to start being able to speak and many more skills. It's like running a marathon if we run Smart ABA and Smart BIT therapy, but the results are real. Right now my son, who was already in junior high school in the first grade at regular school.

Informant 3

Without resilience, it is difficult for me to survive in accompanying therapy for my child. Since studying at the Faculty of Medicine, I am grateful that this resilience has become part of our days as prospective doctors. It's just that the endurance in carrying out therapy for my child must be much higher than the endurance when studying at the Faculty of Medicine.

Overall, the resilience of physician parents who have children with ASD reflects a combination of knowledge, experience, and the ability to adapt, all of which contribute to their success in navigating this challenging role.

Knowledge

Limited knowledge about autism in parents who are doctors can have a major impact on their child's care. Despite having a medical background, doctors may not have a deep understanding of autism, particularly regarding effective interventions and appropriate approaches to support child development. The impact of this lack of knowledge can be seen in the delay in intervention, where parents may not immediately take the necessary therapeutic steps, thus hindering the child's development. Furthermore, insufficient understanding can lead doctors to choose therapies that are not suitable for the needs of their child with ASD. The following is an excerpt from the interview.

Informant 1

Let alone me, who is a general practitioner, a friend who is a pediatrician in one of the countries outside Indonesia; when I asked for a reference on autism, he only gave half a page of his handbook as a pediatrician. Although I am a doctor, my knowledge of autism is very limited. Besides that, I know that all therapy must be diagnosed first, but in my child's case, because it is difficult to get a diagnosis, so I carry out therapy on my child without a definite diagnosis beforehand.

Informant 2

The pediatrician who used to take care of my child when he was sick also conveyed frankly about his limited knowledge about autism. Finally, I chose to go directly to therapy and do therapy on my son even though he has not been diagnosed with autism. I know this procedure is not procedurally correct, but I have no choice. Due to my limited knowledge, my son was a bit late in getting the right therapy.

Informant 3

It is my limited knowledge about autism that makes my child late in getting early intervention. Because of the limitation of my knowledge, it also causes me to provide inappropriate therapy for children with ASD.

Long-term commitment

The long-term commitment that parents of ASD children who practice as doctors must-have is very important in facing unique and complex challenges. Parents need to commit to supporting their child's development throughout their life journey, which often involves a variety of interventions and therapies. The following is an excerpt from the interview:

Informant 1

Caring for a child with ASD is not an instant or quick process. It takes a long time and a mature strategy to accompany them. Therefore, long-term commitments in supporting children with ASD need to be well-planned. I often communicate with parents of older ASD children who are already attending regular school. Through these interactions, I was able to plan the right steps to support my child.

Informant 2

I still have a long way to go in monitoring my child's development. I always communicate with several parents of ASD children who have attended regular school so that we can discuss and share. I must always add and complete my knowledge about autism.

Informant 3

There is still a long way to go for the recovery of my ASD child. I need professionals who are concerned in the field of autism and have led many children with ASD to achieve recovery and then enter regular school and colleges. This journey requires a long-term commitment to my son, a commitment to continue to give the best for my son by Allah's permission.

4. CONCLUSIONS AND RECOMMENDATIONS

Grit is a multifaceted construct that highly influences outcomes in various aspects of life. For doctors who are also parents of children with ASD, grit helps them overcome challenges, maintain concentration on long-term goals, and achieve positive outcomes both in their childcare and in their professional practice. Research shows that individuals with high grit levels tend to have self-control, mental well-being, resilience, and a growth-oriented mindset (Kannangara et al., 2018). Some of the research on Grit includes: (Ben-Sasson et al., 2018; Braund et al., 2020; Khedr et al., 2023; Sutter et al., 2022). However, the author has not found any research that specifically discusses Grit in parents of ASD children who work as doctors. Several factors that appear in the theme of this study are factors that can increase Grit among doctors who have children with ASD. These themes will be discussed below:

Religiosity is also often associated with the practice of self-reflection and emotional control, which can help parents manage stress. In a demanding medical profession, spiritual support can

contribute to Grit, encouraging doctors to persevere in stressful situations. Additionally, religious communities often provide strong social support networks, which can provide emotional and practical assistance for parents in carrying out their roles. Religiosity plays a role in helping individuals to develop and maintain their grit. Attachment to the religiosity aspect can strengthen an individual's determination to achieve the desired goal.

Thus, religiosity not only strengthens grit but also helps doctors who are parents of children with ASD to be more effective in navigating parenting challenges and maintaining a balance between professional responsibilities and their child's needs. This shows the importance of integrating religiosity aspects in developing support programs for doctors. Although there are not many studies, several studies discuss Grit and religion (Agrawal & Kehksha, 2015; Ahmed, 2009; Hodge et al., 2019). The resilience possessed by parents of ASD children who work as doctors is very significant. This resilience includes the ability to face and overcome the various challenges that arise in their dual roles as medical professionals and parents. First, this resilience allows them to navigate the stress associated with a child's diagnosis, including the challenges of caring for a child with ASD. Some research on resilience in parents of children with ASD (Dey & Amponsah, 2020; Ghanouni & Eves, 2023; Maharani & Panjaitan, 2019; Nunnally et al., 2023). As doctors, they have medical knowledge that can help them understand a child's condition, but they also have to deal with the emotions and worries that arise as parents.

Second, resilience helps them focus on long-term goals supporting children's development. While there may be difficult days, they tend to have a clear vision of what they want to achieve for themselves and their child. This encourages them to continue to seek the right information, therapy, and support. Third, this resilience is often strengthened by social support from the medical community and a network of family and friends. They can share their experiences and get advice from other parents who understand their challenges, thus creating a sense of solidarity and mutual support. Finally, resilience also involves regulating emotions and maintaining mental health.

The limited knowledge about autism that parents of ASD children who work as doctors can have an impact on the way they care for their children. Despite having a medical background, doctors may not have a deep understanding of autism, especially when it comes to the most effective interventions and appropriate approaches to support a child's development. The impact of this limited knowledge can be seen in the delay in intervention. Lack of understanding can hinder parents from taking the necessary therapeutic steps immediately. This can result in delays in getting important interventions for child development. In addition, without adequate knowledge, doctors may choose inappropriate therapies or treatment methods that do not suit their child's specific needs, resulting in suboptimal therapy outcomes.

This limited understanding can also reduce the opportunity to connect with relevant support communities, making it difficult to share experiences and get advice from other parents who have children with ASD. Overall, limited knowledge about autism can hinder the ability of physician parents to provide optimal care for their child and lead to broader consequences for both the child's health and the emotional well-being of the parents. Therefore, doctors who are parents of children with ASD need to continue to improve their understanding of autism through relevant education and training.

The long-term commitment that parents of ASD children who practice as doctors must-have is very important in facing unique and complex challenges. Parents need to commit to supporting their child's development throughout their life journey, which often involves a variety of interventions and therapies.

First, this commitment includes ongoing efforts to understand children's needs. Parents of children with ASD who are certified as doctors should invest time and energy in continuing to learn about autism, including the latest treatments and therapies. This knowledge is important so that they can make informed decisions about the care of children.

Second, long-term commitment also means adapting to changes that may occur as children grow. Every child with ASD has different needs, and parents should be prepared to adjust their approach as the child develops and responds to the intervention given.

Third, they need to build and utilize a strong support network. This can include engaging professionally and personally in the community to share experiences and strategies with other parents facing similar situations. Emotional and practical peer support can go a long way in maintaining long-term commitments.

Finally, this commitment also includes attention to their mental health and well-being as parents of children with ASD. Facing the challenges of parenting an ASD child can be significantly stressful, so it is important for them to maintain a balance between their medical career and personal needs. This way, they can continue to provide the best support for their child in the long run. Overall, the long-term commitment of parents of ASD children who practice as doctors reflects their dedication to providing optimal and sustainable care for their children while continuing to develop themselves as parents and professionals.

Conclusion

This study shows that Grit has an important role for doctors who have children with ASD in facing a variety of complex challenges. The high level of grit allows them to stay focused and committed long-term to support their child's development despite stress and difficulties. Additionally, the study identified several factors that affect grit, including religiosity, resilience, knowledge, and long-term commitment. The results of this study emphasize the need for a comprehensive support system to assist doctors in carrying out their dual roles.

By understanding the importance of Grit and integrating limited medical knowledge about autism with personal experience in caring for children with ASD, doctors can champion appropriate and effective interventions to improve their child's various skills. These findings provide new insights that have the potential to support the development of support programs for parents who work as doctors. The results of this study are expected to encourage further research.

Suggestions and limitations of the research

The subject of this research focuses solely on doctors who have children with ASD in Indonesia. Future research could be expanded to include doctors with children with ASD from various countries and cultures.

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