

Parents' future plans for their children with Autism Spectrum Disorders -- a comparison between Asian immigrants and American born population

Chang Liu
Ohio State University

Introduction

This study explores parents' plans for their children with Autism Spectrum disorders (ASD) within Asian immigrant population and American born population. From the onset of the diagnosis, parents experience great shock, grief, and most likely sacrifice their time in participating other social and family roles, such as parents of another child, spouses, and employees (Gael et al., 2007). Parents with autistic children need to be strong enough to manage complicate issues for both themselves and their children, as well as to cope with the negative emotions occurring from the onset of the diagnosis (Seltzer & Krauss, 1989). Studies indicate that families encounter more stresses and have a higher risk of mental health problems among family members compared with families without a child with ASD (Orsmond, Lin, & Seltzer, 2007). The resilience of a family with an autistic child is lower than general family. Parents need to plan for their children's future and help them to be independent. Although increasing interests are showed in this area, policy makers and caregivers still lack of data and effective ways to help parents with life-long disability Children (Smith, Hatfield, Miller, 2000), especially for Asian immigrant population.



Research questions

- What are the current parental plans for their children with ASD?
- What are the parent's expectations of available social services?
- Are there any differences between Asian Immigrant and American Born population?

Methods

This was an exploratory study that used a self-constructed questionnaire that consisted of both close-ended and open-ended questions.

The primary questions addressed were:

- Parents' current plan status for their children's future,
 - Parents' self-assessment of their emotional states and capabilities in the planning process,
 - Parental expectation on their children with ASD,
 - Parental expectation of services support
- This study employed a non-probability sampling method, that is, a convenient sampling design.

Chart 1: Parent Characteristics

N=21	
Average age	51
Age range	32-69
Parent gender	
Female	15 (71.43%)
Male	6 (28.57%)
Population	
Asian Immigrant	7 (33.33%)
American Born	14 (66.67%)
Average Children Number In family	2.48
Have Spouse/partner	16 (76.19%)

Chart 2: Child Characteristics

N=21	
Average age	20
Age range	3-38
Gender of parents	
Female	2 (9.52%)
Male	19 (90.48%)
Diagnosis	
Asperger syndrome	11 (52.38%)
Autism	7 (33.33%)
Others	3 (14.29%)

Results

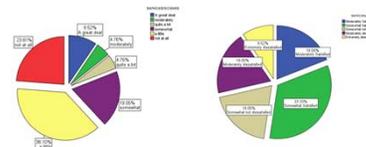
(1) Expectations of the parents

Education	61.9% go to college (community, 4-year, or higher) 23% job related study and training
Employment	100% expect the child to work 57% full time, 23.8% part-time, 19% supported work
Intimate relationship	42.9% get married 52.4% whatever the child like
Friendship	71% have a group of friends 23.8% at least one friend 4.8% popular in peers

(2) Parent self-assessment of relationship and emotional status

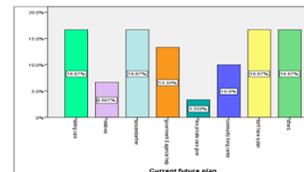
Parent-child(with ASD) relationship	80.95% satisfy, 19.05% dissatisfy
Sibling-child(with ASD) relationship	81% satisfy, 14.3% dissatisfy
Capable to handle the issues	90.4% capable, 9.6% incapable
Stressful	47.6% very stressful 4.8% unbearable amounts 42.8% quite a bit
Optimistic about the future	42.9% looks both good and had 14.3% future looks had or very had 28% looks somewhat bright and 14.3% looks very bright

(3) Services



(4) Asian Immigrant vs. American Born

There is a significant difference between the two populations at when they start to plan for the child's future. There is no significant difference in other research areas. As the result shows, both populations are stressful about the future and feel dissatisfied with the services. Based on the open-ended questions, parents would like to get support on financial issues and services about future plan and independent living skills training.



Conclusions

1. Parents have high expectations on their children with ASD, which may cause more stress in their life.
2. Parents show great worry and stress regarding the future plan of their children with ASD. While there is a lack of services and peer support, parents expect services on how to plan for the future of their children with ASD.
3. Services for helping parents to prepare for the future of their children with ASD are lacking. In addition, parents feel dissatisfied with the current services.
4. Gender, race, education level did not associate with the level of dissatisfaction and stress among parents of children with ASD. However, age of the parents significantly associated with their stressful status. Parents who were between age 41-50 were more stressful than parents who were either younger or older than this age group.

Implications

1. Helping build parents network and social support systems could help parents of children with ASD cope with disability related issues.
2. Asian immigrant parents of children with ASD may need more attention and help regarding difficulties related to cultural adaptation.
3. Effective programs and social policies will be extremely helpful for parents to plan for their children's future.

Literature cited

- Orsmond, G. I., Lin, L., & Seltzer, M. M., (2007). Mothers of Adolescents and Adults With Autism: Parenting Multiple Children With Disabilities. *Intellectual and Developmental Disabilities*, 45 (4), 257-270.
- Seltzer, M. M., & Krauss, M. W., (1989). Aging parents with mentally retarded children: Family risk factors and sources of support. *American Journal on Mental Retardation*, 94, 309-312.
- Abbeduto, L., Seltzer, M. M., Shattuk, P., Krauss, M. W., Orsmond, G. I., & Murphy, M. M., (2004). Psychological well-being and coping in mothers of youth with autism, Down syndrome, or fragile X syndrome. *American Journal of Abnormal Child Psychology*, 20, 503-520.
- Smith, G. C., Hatfield, A. B., & Miller, D. C., (2000). Planning by Older Mothers for the Future Care of Offspring With Serious Mental Illness. *Psychiatric Services*, 51 (9), 1162-1166.

Acknowledgments

First I would like to thank my research advisor Dr. Mo Yee Lee for the guidance and support during this study. I will also thank Dr. Tom Fish and other personnel at OSU Nisonger Center and Asian American Community Services, who helped me recruit participants and send out surveys.

For further information

Please contact Chang Liu liu.1682@osu.edu,
Master candidate of the OSU College of Social Work