



## Review

## Interventions that target improvements in mental health for parents of children with autism spectrum disorders: A narrative review



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## HIGHLIGHTS

- Narrative review of mental health interventions for parents of autistic children
- Some treatments reported improvements in stress, depression, and anxiety.
- Post-test produced weaker effects than follow-up assessments two months and beyond.
- Small sample size, homogeneity, and self-report limited generalizability of results
- Outcomes encouraging, but existing data cannot yet support definitive conclusions

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## ABSTRACT

Prevalence of autism spectrum disorders (ASD) suggest that one in 68 children is affected. With convincing evidence that parenting a child with ASD is associated with elevated distress and mental health problems, researchers have begun to investigate treatments that directly target parents' psychological well-being. We conducted a narrative review of studies that empirically tested the effects of interventions targeting improvements in the mental health of parents of children with ASD. Following a range of search strategies, a total of 13 studies, seven randomized controlled trials (RCTs) and six pre-post test designs, met inclusion criteria. We calculated and reported effect sizes for all RCTs. On average, treatment produced medium to large effect sizes with improvements in parenting stress and general health, and reductions in depression and anxiety. Interventions that appeared promising included: Stress Management and Relaxation Techniques, Expressive Writing, Mindfulness-Based Stress Reduction, and Acceptance and Commitment Therapy. However, only one study conducted a follow-up assessment >3 months post intervention. Study populations primarily consisted of English-speaking mothers, ages 39 to 42 years. Conclusions were limited by small sample sizes, homogeneity of sample population, and reliance on self-report. Therefore, this body of research contains significant limitations in need of improvement for this field to move forward and benefit a sizable number of parents.

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By definition, children with autism spectrum disorders (ASD) exhibit restricted and repetitive behaviors with qualitative impairments in communication and social interaction (American Psychiatric Association, 2013). These collective deficiencies oftentimes negatively impact the parents, resulting in deleterious health consequences, such as diminished maternal health related quality of life (HRQOL) (Allik, Larsson, & Smedje, 2006) or increased problems in physical health and reported bodily pain (Khanna et al., 2011). In comparison to parents of typically functioning children or parents of children with other developmental disabilities (i.e. intellectual disability or cerebral palsy), parents or caregivers of children with ASD also experience a higher incidence of negative psychological outcomes, such as depression, anxiety, and emotional distress (Mugno, Ruta, D'Arrigo, & Mazzone, 2007; Weiss, 2002).

Extensive research has examined factors associated with adverse effects on the mental health of parents caring for a child with ASD. Some have found that a positive linear relationship exists between severity of the child's autism symptoms and an increase in maternal stress levels (Hastings et al., 2005). From a literature review, Boyd (2002) concluded that a paucity of social support contributes to a deterioration in maternal mental health. Dunn, Burbine, Bowers, and Tantleff-Dunn (2001) provided evidence that avoidant coping styles, such as distancing and escape, significantly correlated with depression in parents of children with ASD. Further research suggests that elevated stress levels, lack of social support, and ineffective coping styles are leading predictors of unfavorable psychological outcomes (Mancil, Boyd, & Bedesem, 2009; Tehee, Honan, & Hevey, 2008). While some research has indicated positive effects associated with parenting a child with ASD such as increased spirituality (Ekas, Whitman, & Shivers, 2009) or increased compassion and acceptance of differences (Pakenham, Sofronoff, &

Samios, 2004), accumulating evidence maintains that a vast majority of parents experience negative psychological outcomes when caring for a child with ASD.

In light of the challenges and adverse consequences that these parents experience, researchers have tested two intervention modalities: (1) parent training, which targets the improvement of parenting skill for dealing with difficult child behaviors and (2) parent education, a modality that shapes parental expectations and understanding of the child's behavior (Kaminski, Valle, Filene, & Boyle, 2008). Several reviews have systematically evaluated the effectiveness of these programs on outcomes specific to *children with ASD*, such as improvement in language skills, development of social skills, and behavior management (Brookman-Frazee, Stahmer, Baker-Ericzen, & Tsai, 2006; Matson, Mahan, & Matson, 2009; McConachie & Diggle, 2007; Patterson, Smith, & Mirenda, 2012; Schultz, Schmidt, & Stichter, 2011).

Although intervention was focused on child outcomes, some reviewers have also discussed indirect outcomes related to parental mental health. For example, Brookman-Frazee et al. (2006) reviewed parent training and parent education interventions that primarily focused on managing and improving child behaviors. However, parental effects were considered collateral outcomes and not targeted directly. Matson et al. (2009) reviewed interventions training parents as child therapists and noted parental increases in knowledge about autism and parent-reported improvement in the parent-child relationship. However, they did not formally examine parental psychological health. McConachie and Diggle (2007) reviewed studies of parent-implemented interventions for preschool children with ASD and concluded that limitations in these studies prevented examining significant treatment effects for parental mental health.

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