Title: Associations Between Child Characteristics and Parent Mental Health in Mothers and Fathers of Adolescents with Autism Spectrum Disorder

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Introduction: Raising a child with autism spectrum disorder (ASD) may negatively impact parent psychological functioning. Parents often report elevated levels of stress, depression, and lower well-being compared to parents of neurotypical children. Previous research has found that the children’s symptom severity and comorbid behavior problems are predictors of the parent’s mental health (Davis & Carter, 2008; Hastings, 2002). Only a few studies have compared mothers and fathers; however, those studies were of parents with younger children (e.g., Davis & Carter, 2008). The purpose of this study is to examine associations between child characteristics and parent mental health in mothers and fathers of adolescents with ASD.

Method: Participants consisted of 75 families (mother, father, child). Children ranged in age from 10-17 years and were primarily male (n = 62). Children had a community diagnosis of ASD and diagnostic status was verified using the ADOS and ADI. During a follow-up laboratory visit, parents completed a series of questionnaires. The Inventory of Depression and Anxiety Symptoms (IDAS) was used to measure parent mental health. Parents also rated their child’s behavior using the Child Behavior Checklist (CBCL) and mental health using the Child Depression Inventory (CDI) and the Screen for Child Anxiety Related Disorders (SCARED).

Results: A paired samples t-test found that mothers and fathers did not significantly differ in their levels of self-reported depressive symptoms, \( t(74) = 1.67, p = .10 \), or overall well-being, \( t(74) = .38, p = .71 \). Next, we examined associations between child characteristics (i.e., ASD symptom severity, comorbid internalizing/externalizing behaviors) and parent depressive symptoms and well-being. Mothers of children with greater ASD symptom severity reported lower well-being, \( r = -.30, p = .01 \). Similar associations were not found for fathers. Maternal depressive symptoms were positively associated with children’s internalizing, \( r = .43, p < .001 \), and externalizing behaviors, \( r = .36, p = .002 \), as rated by mothers. Fathers’ ratings of the child’s internalizing behaviors were marginally associated with maternal depressive symptoms, \( r = .21, p = .07 \); however, a significant association was found between fathers’ ratings of child externalizing problems and maternal depressive symptoms, \( r = .27, p = .02 \). Fathers’ depressive symptoms were positively associated with fathers’ reports of child internalizing, \( r = .30, p = .008 \), and externalizing behaviors, \( r = .27, p = .02 \); however, maternal ratings of child behaviors were not significantly associated with fathers’ depressive symptoms.

Discussion: Consistent with research with parents of young children with ASD (e.g., Davis & Carter, 2008), mothers and fathers of adolescents with ASD reported similar levels of depressive symptoms and well-being. Child symptom severity and comorbid internalizing/externalizing behaviors were associated with lower well-being and high depressive symptoms for mothers and fathers. Reporter bias is often an issue in this area of research; however, we were able to examine cross-parent effects and found that father reports of child behaviors were associated with maternal outcomes. Maternal ratings were not associated with paternal outcomes. The results highlight the importance of utilizing multiple informants and extend previous research to mothers and fathers of adolescents with ASD.

References/Citations: