Parenting Self-Efficacy, Hardiness and Psychological Well-Being of Parents of Children with ASD

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Highlights

- Parents of children with autism spectrum disorder face higher level of stress in parenting.
- Parents, as the main caregivers of children with ASD, must own a positive self-evaluation (psychological well-being) in order to care for children well.
- This study has suggested factors that influence the formation of psychological well-being in parents, namely belief in self-efficacy and hardiness in accomplishing the developmental tasks of children with complex ASD.

Abstract

The aim of the study was to find the correlations between parenting self-efficacy, hardiness and psychological well-being in parents of children with autism spectrum disorder (ASD). The research subjects were 125 participants, with 92 females (M=32, SD=6.2) and 33 males (M=36, SD=7), obtained using a purposive sampling technique from a population with the following criteria: parents of children with ASD who came from Yamet community in Central Java. Data was collected using the following scales: parenting self-efficacy (α=0.81), hardiness (α=0.84) and psychological well-being (α=0.91). The data was processed to test the hypothesis using multiple regression analysis techniques. The results are F-value: 41.22 > F table, and a significance level of 0.00 <0.05, so it can be determined that there is a significant association between parenting self-efficacy and hardiness in relation to the psychological well-being of parents with ASD children. The research shows no significant differences between the participant groups based on the analysis results using a different test (t-test) on participant demographic data. These results of the study can be used to formulate further research regarding interventions for parents of children with ASD based on the theory of parenting self-efficacy and hardiness because these approaches had effectively increased psychological well-being.

Keywords: Psychological Well-Being; Parenting Self-Efficacy; Hardiness; ASD; Parents
INTRODUCTION

Some parents find it difficult to accept the fact that they have a child with special needs. Parents will perceive children as a problem that harms their survival. The presence of a child with special needs will have a significant impact on both parents (Desiningrum et al., 2019). Initially, parents tend to be difficult to accept these conditions. However, with the family's support, parents can finally adjust and accept the children with special needs. Children with special needs necessitate specialized interventions due to their developmental disorders and aberrations. In the context of the "disability" concept, children with special needs are characterized as individuals who exhibit constraints in one or multiple domains of functioning, encompassing physical impairments (e.g., visual or auditory impairments) and psychological conditions (e.g., autism spectrum disorder and attention-deficit/hyperactivity disorder) (Nik Adib et al., 2019).

Autism is not an isolated phenomenon with limited occurrence in Indonesia; rather, it has become increasingly prevalent, especially among children. According to empirical evidence, ASD have been consistently increasing in the country (Desiningrum, 2016). In 2010, based on the Incidence and Prevalence ASD report, the incidence rate was reported as two new cases per 1,000 population per year, with a prevalence rate of 10 cases per 1,000 population (BMJ, 1997). These statistics point to autism's significant prevalence in Indonesia, with 237.5 million people and a population growth rate of 1.14% (BPS, 2010). There are estimated to be 2.4 million people with ASD in Indonesia, with an additional 500 new people/year (Sari et al., 2011).

Autism is a disorder that covers cognitive, emotional, behavioral, and social impairments, resulting in difficulties engaging with others. The development of autistic children diverges from that of typically developing children due to a progressive decline in cognitive capabilities (Desiningrum, 2019).

Research on autism is carried out on the child, parents, and families. Raising an autistic child is challenging. According to the research conducted by Almansour et al. (2013) and Oprea & Stan (2012), a notable correlation was found between child behavior problems, caregiver well-being, and depression. There is a lack of solid knowledge regarding the mechanisms of autism, as well as the unclear etiology and pathogenesis of this disorder, which makes pathogenetic treatments for autism difficult. Until now, scientists have not provided adequate explanations regarding the neurological impairments that occur in individuals with ASD, including the co-occurrence of hyperactive and hypoactive symptoms. Therefore, research continues to be conducted to address the challenges of autism and its related dynamics (Dirfloortime, 2018).

Difficulties in parenting children with ASD can cause stress for caregivers/parents. Parents' stress levels, social support, coping mechanisms used by families, and resilience when faced with challenges as caregivers were assessed in one study. According to a descriptive statistical analysis, parents of children with autism (CWA) experience stress (Das et al., 2017). As the primary caregivers for children with ASD, parents must possess the ability to provide optimal care for their autistic children without encountering physical and psychological disruptions. This highlights the significance of conducting positive self-assessments, which are recognized as essential for maintaining psychological well-being.

Psychological well-being is the individual's ability to accept himself both positively and negatively, to have a balanced psychological state between himself and the social, and to develop his abilities. According to Keyes et al (2002), six factors can influence psychological well-being, namely: age, gender, social status, socioeconomic status, social relations, and social conditions of society. Age is a critical factor since it positively correlates with psychological well-being related to individual maturity. Psychological well-being is essential for every individual, including adults.
with increasingly complex developmental tasks with the presence of a spouse and children, as well as careers that are increasingly peaking. Moreover, parents who have autistic children need parents who are psychologically healthy and able to develop themselves to care for their autistic children.

The first study of psychological well-being was conducted by Ryff and Keyes (1995). Psychological well-being refers to a condition where individuals are capable of embracing their true selves, cultivating affectionate connections with others, attaining independence from societal influences, exerting control over their external surroundings, finding purpose in life, and consistently actualizing their potential (Keyes et al., 2002).

Psychological well-being is an evaluation of an individual's psychological health, which is influenced by the performance of positive psychological functions. Individuals with high levels of psychological well-being tend to experience more satisfaction in life and have reduced unpleasant emotions, such as sadness and anger (Dewi, 2012). According to Aristotle (in Bornstein 2002), true happiness can only be attained by participating in specific actions that lead to realizing one's potential, not solely by pursuing pleasure and avoiding pain. Ryff suggests that psychologically healthy people have positive attitudes toward themselves and others (Papalia et al., 2009).

Parents' negative perceptions of raising children with special needs can lead to stress. Compared to parents of children with typical development, parents of special needs children face more complex and challenging dynamics in their families. Children with special needs need more attention and care, impacting parents' perceptions, harmony, and careers (Mangunsong, 2011). Parents' perspective or perception of caring for an autistic child will affect parenting actions. Personality is identified as one of the internal factors that impact parents' perceptions of parenting strategies for children with ASD (Lai & Baron-Cohen, 2015).

Parents’ personalities will affect the application of the care given. If parents apply good parenting to their autistic children, they will be able to develop optimally within their limitations. Parenting in child development problems can be stressful due to the heightened complexity and intensity of care required, which differs from the care provided to children with typical development (Hoffman et al., 2009). Furthermore, it takes a belief in parents that they are capable of being the best parents for their autistic children. This term is known as parenting self-efficacy. Moreover, self-efficacy is one of the components of individual personality.

Parenting self-efficacy refers to parents' self-perceived competence in parenting, and how it influences the behavior and development of their children (Emser et al., 2016). Self-efficacy plays an important role in parenting, especially for parents of children with special needs. It has been shown by Jones and Prinz (2005) that parents with high self-efficacy are more confident that they can handle the different characteristics of children and implement effective parenting practices for them, while parents with low self-efficacy have difficulty managing children's behavior.

Parents who have high levels of parenting self-efficacy should be able to adjust to the environment and not let fear, sadness, or negative emotions dominate them (Coleman & Karraker, 2003). Vice versa, parents who have low self-efficacy competencies tend to be unsure of being able to carry out parenting tasks that follow their knowledge. This lack of confidence might result in low aspirations, lack of commitment, doubt, and focus on self-errors are inclined to surrender when faced with challenges. They have a higher susceptibility to stress and depression, and their recovery process tends to be slower, which affects their perception of children's competence (Emser et al., 2016). Donovan (in Coleman & Karraker, 2003) also
reinforces that parents who have high self-efficacy tend to perceive child disabilities as challenging to foster more significant effort creatively in overcoming problems in children. Meanwhile, parents with low self-efficacy tend to perceive disabilities in children as a threat that exceeds their abilities.

High parenting self-efficacy is able to stimulate parents to apply good parenting to their autistic children. So, when parents provide good attention to their children so that they achieve optimal development amidst their limitations as autistic children, parents will achieve satisfaction and well-being. However, dealing with autistic children is still not an easy thing. Even parents who are used to caring for their autistic children still experience difficulties with the increasingly complex developmental tasks of children with increasing age. It takes strong mental endurance. The personality that is felt to have the function of stress resistance is the "hardiness" personality. Hardiness is a personality that emerges from within the individual as patterns, attitudes and strategies that turn stressful situations into opportunities for growth (Maddi et al., 2006).

Hardiness has many positive benefits in helping the individual problem-solving process related. Parents who care for their autistic children face considerable challenges and consequences due to constraints on the child's communication skills which can be accompanied by a child's intellectual decline, so parents are at risk of experiencing emotional exhaustion both physically and psychologically (stress). Weiss et al. (2013) conducted research that provides support for the statement, as their findings indicated that both hardiness and social support play crucial roles in predicting successful parental adaptation to autism.

Another theory asserts that one of the personality characteristics considered to have a protective function against stress is "hardiness" or "hardy personality". According to Kobasa (in Fitriani & Ambarini, 2013), hardiness is a personality characteristic that serves as a resource against stress's harmful effects. He developed the concept of hardness from existentialist philosophy, which is the best way to deal with, utilize, and shape a life that is constantly changing and causing stress. Kowalski and Schermer (2018) state that two main mechanisms have been suggested to explain this hardiness effect: optimism in view or perception of events and using specific coping strategies. Hardiness consists of attitudes, beliefs, and behaviors that make individuals more resistant to the harmful effects of stress. Individuals with a high hardiness level will be healthier than those with a low hardiness level.

Research has indicated that hardiness serves as a reliable predictor of health, even in stressful life events (Smith, 2018). Hardiness is also associated with a decrease in diastolic blood pressure under laboratory test conditions, and individuals with a hardiness personality are more actively involved in solving problems, seeking resources, and stimulating individual psychological well-being (Roberts et al., 2017).

According to all the descriptions above, the purpose of this study was to determine if parenting self-efficacy and hardiness are associated with psychological well-being in parents of children with ASD.
METHOD

Study design

This research used a quantitative design and has been worthy of ethical testing by UNDIP Psychology Research Ethics Committee (KEPPU), No: 203/UN7.F11/PP/IV/2022. The research was conducted on parents from PLA and Yamet communities in Semarang, Solo and Yogyakarta in April-June 2022.

Participants

This study included 230 parents of children with ASD who attended Yamet Child Development Center, Central Java branch. Participants for this study were selected using purposive sampling, with specific inclusion criteria targeting parents of children with ASD residing in Central Java. Parents of children with ASD with comorbid disorders were excluded from the study. The second criteria resulted in 125 participants being involved in this study.

Instruments

- Variable
  Variables of the study are:
  1. Predictor Variable (X1) : parenting self-efficacy
  2. Predictor Variable (X2) : hardiness
  3. Criterion Variable (Y) : psychological well-being

- Operational Definition and Data Collection Method

Psychological well-being is the ability to function positively psychologically and emotionally (Keyes et al., 2002). There are six components of the construct, including self-acceptance, environmental mastery, life purpose, autonomy, personal growth, and positive relationships with others. A second-order confirmatory factor analysis (2nd Order CFA) was conducted on 142 adult subjects (M=37, SD=2.6) who were parents of children with ASD (Desiningrum et al., 2019). Consequently, 33 items were operationalized from the construct. The discrimination index of the instrument ranged from .31 to .74, with a scale reliability of .91. Each item is rated on a 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree), indicating the extent to which it is suitable for the participant's situation.

Parenting self-efficacy refers to the self-evaluation by parents regarding their level of competence in fulfilling their role to positively impact their children's behavior and development (Coleman & Karraker, 2003). The dimensions of parenting self-efficacy are discipline, achievement, recreation, nurturance, and health. The scale used in this study is an adaptation of the Karraker and Coleman scale (2005), namely the results of the second-order confirmatory factor analysis (2nd Order CFA) test. The test was conducted on 42 adult subjects (M=35, SD=2.7) as parents of children with ASD (Siswati & Desiningrum, 2019). It resulted in 40 valid items; the discrimination index of the instrument ranged from 0.35-0.78, with the scale reliability of 0.81. Each item is rated on a 5-point Likert scale (1: strongly disagree with my situation to 5: strongly agree with my situation).

Hardiness consists of a series of attitudes, beliefs, and behaviors that result in individuals becoming more resistant to the harmful effects of stress (Bartone, 2022). The three "C" aspects reflect hardiness: commitment, control, and challenges (Kowalski & Schermmer, 2018). The scale used in this study is an adaptation of the hardness scale from Kobasa et
al. (1985), with 65 participants (male and female) who are parents of children with ASD. The discrimination index of the instrument ranged from 0.32-0.76, with a scale reliability of 0.84. Each item is rated on a 5-point Likert scale (1: strongly disagree with my situation to 5: strongly agree with my situation).

**Procedure**

Data collection was performed following the ethical approval granted by the Research Ethics Committee of Psychology, UNDIP. The scales were disseminated through a google form, including informed consent at the beginning. All subjects who met the criteria and agreed to the informed consent became participants in this research and received research incentives. Subsequently, participants were provided with valid and reliable scales on psychological well-being, parental self-efficacy, and hardiness through the google form.

**Data Analysis**

The hypothesis in this study was tested using multiple regression analysis. This test was run in SPSS 26.0. Normality and linearity tests were carried out to determine further tests on the hypothesis.

**RESULT**

**Participant’s characteristics**

The study involved 125 subjects consisting of 92 mothers and 33 fathers. The majority of subjects in the study possess a diploma-level educational background, accounting for 41.6% of the total participants. Based on the occupation, 57 of them are housewives or equivalent to 45.6%. The children ranged from toddlers to adolescents, where most were in the range of 1 to 5 years, with a presentation of 44%.

**Data analysis**

The Kolmogrov-Smirnov test resulted in normally distributed data. The ANOVA test was employed to conduct a linearity test of each independent variable. The results showed that both are linearly related. Then the F/ANOVA test was carried out for a hypothesis test.

**Table 1.**

*The Result of F Test.*

The correlation between parenting self-efficacy, hardiness, and psychological well-being is presented in Table 1.

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>1997.112</td>
<td>2</td>
<td>978.324</td>
<td>41.22</td>
<td>.000</td>
</tr>
<tr>
<td>Residual</td>
<td>2999.998</td>
<td>123</td>
<td>26.121</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>4997.110</td>
<td>125</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: psychological well-being
b. Predictors: (Constant), parenting self-efficacy, hardiness

Ho: There is no significant relationship between parenting self-efficacy and hardiness on the psychological well-being of parents of children with ASD.
Ha: There is a significant relationship between parenting self-efficacy and hardiness on the psychological well-being of parents of children with ASD.
Based on the ANOVA table, the F-value is $41.22 > F_{\text{table}}$. While the significance level is $0.00 < 0.05$, it can be concluded that the null hypothesis ($H_0$) is rejected, and the alternative hypothesis ($H_a$) is accepted. It suggests a significant relationship between parenting self-efficacy and hardiness on psychological well-being of parents of children with ASD.

The table 2 displays the coefficient of determination ($R$), which indicates the degree to which the model explains the variability in the dependent variable.

### Table 2.
**Coefficient of Determination**

<table>
<thead>
<tr>
<th>Model</th>
<th>$R$</th>
<th>$R$ Square</th>
<th>Adjusted $R$ Square</th>
<th>Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.711a</td>
<td>.289</td>
<td>.315</td>
<td>5.077</td>
</tr>
</tbody>
</table>

a. Predictors: (Constant), parenting self-efficacy, hardiness

The table shows that the Adjusted $R$ Square value of 0.315 or 31.5% of the psychological well-being variable can be explained by the parenting self-efficacy and hardiness variables. In contrast, the remaining 68.5% of the difference can be attributed to other variables that were not examined in this research.

### Table 3.
**Participant Demography**

<table>
<thead>
<tr>
<th>Category</th>
<th>Characteristic</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parental Role</td>
<td>Mother ($M=32; \text{SD}=3.4$)</td>
<td>92</td>
<td>73.6%</td>
</tr>
<tr>
<td></td>
<td>Father ($M=37; \text{SD}=3.6$)</td>
<td>33</td>
<td>26.4%</td>
</tr>
<tr>
<td>Educational Background</td>
<td>SLTA</td>
<td>20</td>
<td>16.0%</td>
</tr>
<tr>
<td></td>
<td>D3</td>
<td>52</td>
<td>41.6%</td>
</tr>
<tr>
<td></td>
<td>S1</td>
<td>50</td>
<td>40.0%</td>
</tr>
</tbody>
</table>
|                   | S2                        | 3         | 2.40%
| Job               | Housewife               | 57        | 45.6%|
|                   | Civil servant            | 20        | 16.0%|
|                   | Employee                 | 30        | 24.0%|
|                   | Entrepreneur             | 18        | 14.4%|
| Child’s Age       | 1-5 years old            | 55        | 44.0%|
|                   | 6-10 years old           | 45        | 36.0%|
|                   | 11-13 years old          | 20        | 16.0%|
|                   | 14-17 years old          | 5         | 4.00%|

T-test was conducted for all categories, and the results showed a t-value <1.96, meaning there was no significant difference (Ghozali, 2005).

### DISCUSSION

The aim of this study was to discover whether there is a relationship between parenting self-efficacy and hardiness with psychological well-being in parents of children with ASD. The description in the research results section shows a significant relationship between parenting self-efficacy and hardiness on the psychological well-being of parents of children with ASD. This is evident from the F value ($41.22 > F_{\text{Table}}$ and a significance level of $0.00 < 0.05$. Furthermore, the study revealed that 31.5% of the variance in psychological well-being variables could be accounted for by parenting self-efficacy and hardiness variables.
The concept of parenting self-efficacy is one of the components of individual self-efficacy and refers to the way an individual perceives their competence as parents (Bandura, 1977). This is also an important factor in determining whether parenting training programs for families with children with ASD are effective (Russell & Ingersoll, 2020). Parenting success is more likely to be higher for parents with higher levels of parenting self-efficacy (Jones & Prince, 2005). Parents with lower levels of parenting self-efficacy may also experience difficulties and frustration, and this can lead to suboptimal child development.

Zhou et al (2019) conducted an experimental study that found evidence suggesting that parents of children with ASD tend to have lower levels of parenting self-efficacy when compared to parents of children without disabilities. Parents of children with ASD face more severe parenting challenges related to parenting difficulties that require intense attention, behaviors related to autism, and difficulties accessing appropriate services for autistic children (Patel et al., 2022). Previous research revealed that parents who have children with ASD experience higher levels of stress (Ilias et al., 2016), anxiety and depression (Al-Farsi et al., 2020), feel isolated (Papadopoulos, 2021), and have decreased quality of life compared to parents who have children who develop typically or children with other disabilities, such as Down's Syndrome (Wang et al., 2011). In line with the research of Taylor et al. (2021) that behavior related to high autism in children is associated with low well-being in mothers and fathers. So parenting self-efficacy plays a crucial role in enhancing parental well-being (Taylor et al., 2021) as it has been found to have a negative association with autism symptoms severity. Higher levels of parenting self-efficacy have a positive impact on parents' psychological well-being.

It is evident based on previous research that parents' self-efficacy in parenting is positively correlated with other factors, including their psychological well-being and health outcomes (Luque et al., 2017; Russell & Ingersoll, 2020; Zhou et al., 2019). According to Luque et al., (2017) a cross-sectional study of 129 parents of children with autism found that higher levels of parenting self-efficacy were associated with higher psychological well-being. This suggests a positive relationship between parenting self-efficacy and psychological well-being in parents of children with ASD.

Hardiness is a personality trait or style that combines commitment, control, and challenge (Kobasa., 1985). With hardiness, parents have a sense of control over stressors in parenting, a perception that change is a good thing, a tendency to adapt to stressors, and the belief that they can survive to face challenges (Weiss, 2002).

A previous study conducted by Weiss et al. (2013) compared hardiness among different groups of parents and identified the relationships between hardiness and other psychological constructs using a cross-sectional method. The findings of the study revealed that mothers of children with ASD had lower levels of hardiness compared to mothers of children with intellectual disabilities or typically developing children. This lower level of hardiness was associated with higher levels of depression, anxiety, and depersonalization (Weiss, 2002).

In parenting children with ASD, parents are more prone to experience stress, depression, anxiety, and difficulties in being responsible for raising children (Ebrahim & Alothman, 2021). According to Hayes and Watson (2013), the negative emotions experienced by parents are further amplified by the presence of maladaptive behavior, repetitive behavior, tantrums, aggression, hyperactivity, and a lack of social interaction in the child. In addition, the response of other people or the surrounding environment that does not readily accept children's unusual behaviour makes
parents more vulnerable to stigmatization, resulting in poor psychological well-being (Broady et al., 2017).

Previous research has corroborated the psychological well-being of parents affected by chronic stressors, such as the severity of the child's behavior problems, symptoms, or stress "build-up" (Weiss et al., 2013). Therefore, parents need to know the factors that can help the family remain resilient in dealing with stressors (Gardiner & Iarocci, 2012; Lloyd & Hastings, 2008). One of the important aspects that families need to have in dealing with stress is hardiness (Weiss et al., 2013). Parents with parenting hardiness can maintain control over difficult situations, have a high commitment to the role of parents, and see challenges as opportunities for growth and development.

Fitriani and Ambarini (2013) have found that the level of parenting stress experienced by parents of children with ASD is strongly correlated with hardiness. Increased hardiness is associated with reduced stress in parents of children with ASD (Plumb, 2011). Therefore, it can be concluded that increasing hardiness influences a decrease in stress and indirectly leads to an improvement in the psychological well-being of parents of children with ASD. A study conducted by Beasley et al. (2002) found that hardiness is negatively correlated with psychological pressure and depression, but positively correlated with adjustment and well-being (Maddi et al., 2006). Moreover, Smith (2018) found a positive correlation between hardiness and variables of psychological well-being, such as job and life satisfaction, positive affect, personal growth, happiness, and engagement.

The level of parenting self-efficacy plays an important role in determining parenting behavior and child-rearing practices. Inductive reasoning and communication are two of the most effective ways for parents with high parenting self-efficacy to guide their children, communicate expectations, and enforce rules (Jones & Prinz, 2005). Explaining instructions, discussing norms, and illustrating the consequences of children's actions are common examples of inductive reasoning (Wittkowski et al., 2017). On the other hand, parents with low self-efficacy rely less on induction and engage in more manipulation (Murdock, 2013; Trecca et al., 2022).

Furthermore, research conducted by Jones and Prinz (2005) reveals that mothers who possess high levels of parenting self-efficacy tend to exhibit more warmth and acceptance towards their children. This, in turn, can lead to heightened satisfaction in their daily lives. Pajares (2006), as suggested by Cachia et al. (2016), further proposes that parents with elevated self-efficacy levels contribute to fostering a greater sense of well-being in their children.

It has been proven that hardiness improves symptoms associated with stress, such as anxiety, depression, and depersonalization, as reported by Weiss (2002) among parents of children with autism or intellectual disabilities, as well as parents of typically developing children. It was also found that parents with higher levels of hardiness are less likely to suffer from anxiety, depression, and depersonalization than parents with lower levels of hardiness.

Supported by Fitriani and Ambarini's research (2013), mothers with autistic children who have strong hardiness will perceive a problem or stressful condition. In this case, parenting autistic children is challenging and an opportunity to grow. In addition, mothers are also involved in and face various parenting situations without avoiding them and are responsible for every parenting situation encountered. Resilient individuals typically exhibit a more positive and confident attitude when it comes to effectively managing stressful situations (Smith, 2018). Resilient individuals support more positive self-assessments and exemplary performance in stressful situations compared to individuals with low levels of resilience.
Psychological well-being has a vital role in parenting children with ASD. Parents of children with ASD who have a high level of psychological well-being can maintain a positive perspective on parenting, have the belief to commit and prioritize parenting, and stay in the present or focus on life and find the best experiences in the present (Larson, 2010). Furthermore, caregivers with high levels of psychological well-being change the meaning of parental life globally by making parenting an essential part of their life goals, taking control over their life boundaries, seeing parenting demands from a broader perspective, and seeking the best experience at the moment. In contrast, parents with low psychological well-being feel that parenting is necessary and are mired in the present, so they do not see other opportunities or chances.

In addition, an increase in parents' psychological well-being also positively affects children's psychological well-being. Ben-Zur's study (2003) provides evidence to substantiate the claim that there is a positive correlation between the well-being of children during adolescence and the well-being of their parents. Furthermore, research by Avrech Bar et al. (2016) suggests that parenting optimism is linked to an improvement in parental well-being. According to research conducted by Ben-Zur (2003), there is evidence to support the statement that a positive correlation exists between the well-being of children and the well-being of their parents during adolescence. Additionally, a study by Avrech Bar et al. (2016) highlights the role of optimistic parenting in enhancing the well-being of parents.

Based on the description above, it can be concluded that both parenting self-efficacy and hardiness have a positive relationship with the psychological well-being of parents with children with ASD, and all three variables play an important role in parenting children with autism. However, this study has limitations, including a limited number of subjects, which affected the use of data analysis techniques using non-probability sampling methods, specifically purposive sampling. As a result, the statistical calculations and data analysis need to be carefully considered. Therefore, the results of the study cannot be generalized to a larger population. Additionally, this study did not classify the ASD disorders in children, which can have an impact on the quality of parenting and the psychological well-being of parents with children with ASD.

The implications of this study are that the results will help formulate further research regarding interventions for parents of children with ASD, using a parenting self-efficacy and hardiness theory approach to improve psychological well-being because the results of the study show a significant correlation between the three these variables.

CONCLUSION

The results of this study confirm the hypothesis that there is a significant relationship between parenting self-efficacy and hardiness with the psychological well-being of parents of children with ASD. Enhancing parenting self-efficacy and hardiness can contribute to improving psychological well-being. The findings of this study also indicate the importance of parenting self-efficacy and hardiness in enhancing the psychological well-being of parents of children with ASD. Parenting self-efficacy and hardiness play a role in reducing levels of stress, anxiety, and depression that may arise from parenting children with autism, as well as helping parents adapt and feel confident in facing the challenges of parenting. Ultimately, increasing psychological well-being provides a positive perspective on parenting, encourages commitment and prioritization in parenting, and focuses on the present life to create the best experiences in parenting.
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CONFLICT OF INTEREST

The authors have no conflicts of interest to disclose. All co-authors have reviewed and endorsed the manuscript without any financial interests to disclose. We affirm that the submission is an original piece of work and has not been submitted elsewhere for review.

REFERENCE


