

RELATIONSHIP BETWEEN PSYCHOLOGICAL DISTRESS AND RELATIONSHIP SATISFACTION AMONG MOTHERS OF CHILDREN WITH AUTISM SPECTRUM DISORDER



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January, 2024

Relationship between Psychological distress and Relationship satisfaction among mothers of children with Autism Spectrum Disorder



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A Research Thesis submitted to the
DEPARTMENT OF PSYCHOLOGY
in partial fulfillment of the requirements for the degree of
BACHELOR OF SCIENCE IN PSYCHOLOGY

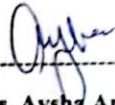
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January, 2024

CERTIFICATE OF APPROVAL

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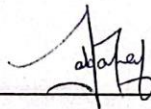
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DEDICATION

Dedicated to my cherished best friend, Gulab, whose constant support and invaluable assistance were pivotal in the successful completion of this thesis. I would also like to extend my gratitude to my other dear friend, Gul, for their unwavering encouragement and assistance. Your significant contributions have truly made this academic accomplishment worthwhile

DECLARATION

It is declared that this is an original piece of my own work, except where otherwise acknowledged in text and references. This work has not been submitted in any form for another degree or diploma at any university or other institution for tertiary education and shall not be submitted by me in future for obtaining any degree from this or any other University or Institution.

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January, 2024

ACKNOWLEDGMENT

I would like to express my heartfelt gratitude to my supervisor Ms. Aysha Aneeq for their unwavering support and guidance throughout my thesis journey. Special thanks to my family for their constant encouragement and understanding. To my sister, your support has been invaluable. Lastly, to my friends who stood by me, I appreciate your encouragement. Without all of you, this achievement wouldn't be possible.

Abstract

This research aimed to explore the relationship between psychological distress and relationship satisfaction among mothers of children with Autism Spectrum Disorder (ASD). Parents of children with ASD face unique challenges that can have an impact on their psychological well-being and their satisfaction with their relationships. Psychological distress encompasses a range of negative emotions and feelings that can affect an individual's mental and emotional state, while relationship satisfaction refers to an individual's subjective evaluation of the overall quality and happiness of their partnership. The study employed a quantitative research design, and data were collected using purposive sampling due to the difficulty in finding participants for this specific study. A total of 106 participants were included in the sample. The Kessler Psychological Distress Scale (K-10) was utilized to assess psychological distress, while the Couple satisfaction index (CSI) was employed to measure relationship satisfaction. These standardized measures have been widely used and validated in previous research. Data analysis was conducted using IBM SPSS, a statistical software package commonly used for analyzing quantitative data. The collected data were subjected to appropriate statistical techniques to examine the relationship between psychological distress and relationship satisfaction among mothers of autistic children. Results shows that there is a significantly negative relationship between psychological distress and Relationship satisfaction ($r=-.426^{**}$).The findings of this research can inform the development of targeted interventions and support programs to address the specific needs of mothers in this population, ultimately promoting their mental health and enhancing the quality of their relationships

Keywords: Psychological distress, Relationship satisfaction, Mothers of Children with Autism Spectrum Disorder(ASD)

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Chapter -1

Introduction

The introduction chapter provides a comprehensive overview of the background, context, and objectives of your research. A well-crafted introduction serves as a roadmap for the reader, outlining the significance of the study and establishing the foundation for the following chapters. The literature review maps the ground of relationship of satisfaction between autistic children of mothers drawing from a rich array of studies that illuminate the relationships between these psychological constructs. From nuanced distinctions between psychological distress and relationship satisfaction among mothers of children with autism spectrum, this chapter synthesizes existing knowledge to pave the way for our exploration. This chapter outlines the specific objectives and hypotheses guiding exploration. Study rationale emphasizes the scarcity of research on the experiences of mothers raising children with ASD in Pakistan. Objectives aim to measure psychological distress and relationship satisfaction, offering culturally sensitive insights for tailored interventions. Hypotheses posit higher psychological distress, lower relationship satisfaction, and a negative correlation between distress and satisfaction among mothers of children with ASD. Through this exploration, we seek to contribute insights for targeted interventions, fostering maternal well-being and enriching family relationships in the Pakistani context.

Autistic spectrum disorder

Caring for a child with autism is a journey laden with both profound joys and formidable challenges, an experience that intricately weaves into the fabric of parents' lives, influencing their psychological well-being and relationship satisfaction. Autism Spectrum Disorder (ASD), as defined by the American Psychiatric Association (APA, 2021), is a complex neurodevelopmental condition that manifests uniquely in each individual, impacting their ability to communicate, interact socially, and exhibit appropriate behaviors. As the prevalence of ASD diagnoses continues to rise, it becomes increasingly crucial to explore the multifaceted dynamics of parenting children with autism.

The complexities of this caregiving journey are underscored by the diverse nature of ASD symptoms. Difficulties in social interaction, repetitive behaviors, and sensory sensitivities form the common threads that weave through the tapestry of autism. Often diagnosed in early childhood, ASD presents a unique set of challenges for parents. The very nature of the disorder necessitates a deeper understanding of the intricacies involved in parenting, as well as recognition of the evolving landscape of ASD within the family unit.

While there are undeniably positive aspects to parenting children with autism, such as the joy derived from witnessing their unique strengths and accomplishments, these positives coexist with the challenges that should not be underestimated. Daily care routines, communication difficulties, and the behavioral intricacies associated with autism contribute significantly to parental stress and a sense of being overwhelmed (Benson, 2020). The financial strain, disruption of family dynamics, and the social stigma attached to raising a

child with autism further compound the stressors faced by parents (Estes et al., 2013). This intricate interplay of positive and negative elements necessitates a comprehensive exploration of the impact on parents' psychological well-being and relationship satisfaction.

Research underscores the pervasive influence of caregiving responsibilities on parents of autistic children. Elevated levels of stress, anxiety, and depression emerge as common responses to the demands of managing the specific needs of children with autism and navigating the array of available therapies and interventions. The need for support and resources becomes evident, transcending the immediate challenges to address the broader implications for the psychological health and relationship dynamics of parents.

In response to these challenges, various studies propose interventions and strategies aimed at supporting parents and enhancing the well-being of both parents and children. Mindfulness-based interventions and cognitive-behavioral therapy emerge as effective tools for managing social anxiety in individuals with ASD, offering avenues for developing coping mechanisms and improving social interaction experiences (Brown et al., 2020). Additionally, recognizing the importance of early intervention, research underscores the value of incorporating sensory integration therapy into programs for children with ASD, presenting a promising approach for improving sensory processing and overall well-being (Smith et al., 2020).

Relationship Satisfaction

The intricate web of challenges faced by parents raising children with autism extends far beyond the individual, significantly influencing the dynamics of their intimate relationships. The focal point of this exploration lies in the concept of relationship satisfaction, a complex and multifaceted construct that encapsulates various dimensions such as emotional intimacy, communication, sexual satisfaction, trust, and commitment (Fincham & Beach, 2010; Hendrick, 1988). Understanding the nuances of how parents navigate these dimensions under the stress and strain of caring for a child with autism is critical for developing a comprehensive view of their experiences.

Numerous studies underscore the pivotal role that paternal support and involvement play in shaping the overall well-being of mothers and, consequently, the satisfaction levels within the parental relationship (Khan et al., 2023). It becomes evident that insufficient support from fathers can contribute to heightened stress levels in mothers and, subsequently, a decline in relationship satisfaction. Conversely, research highlights the positive impact of engaged fathers on family dynamics and well-being, emphasizing the importance of fostering active paternal participation in the context of raising a child with autism.

Beyond the immediate familial context, the challenges faced by mothers of autistic children are compounded when navigating different cultural contexts and support systems. Hussain et al. (2019) shed light on the complexities inherent in this process, acknowledging the potential difficulties it poses for relationships within the family. However, the same study also brings to the forefront the remarkable resilience and resourcefulness exhibited by

these mothers. The interplay between cultural influences, support systems, and familial relationships paints a vivid picture of the multifaceted landscape parents navigate when caring for a child with autism.

Emotional intimacy, a cornerstone of relationship satisfaction, takes center stage in this exploration. It involves the cultivation of feelings of closeness, connectedness, and understanding between partners. In the context of parenting a child with autism, where stressors are abundant, emotional intimacy becomes a crucial buffer against the strains that can permeate the parental relationship. Effective communication, characterized by open and honest dialogue, active listening, and mutual respect, emerges as another critical component. The ability of parents to share their experiences, concerns, and triumphs openly can foster a deeper understanding between partners, serving as a foundation for maintaining relationship satisfaction amidst the unique challenges posed by autism.

Furthermore, research conducted in Pakistan reveals a significant link between lower levels of perceived social support and decreased well-being in mothers of autistic children (Minhas et al., 2015). This connection underscores the importance of community and familial support networks in influencing the overall satisfaction within parental relationships. Strengthening these networks, providing avenues for shared experiences, and creating spaces for mutual support can have a positive impact on families dealing with the intricate demands of raising a child with autism.

Sexual satisfaction, another dimension of relationship satisfaction, encompasses the fulfillment, pleasure, and compatibility experienced in the intimate aspect of the relationship. It reflects the mutual desire and the ability to meet each other's physical and

emotional needs. In the context of parenting a child with autism, where the demands on time and energy are often heightened, maintaining sexual satisfaction becomes an additional challenge that parents must navigate to sustain a healthy and satisfying relationship.

Commitment, a vital factor in relationship satisfaction, reflects the level of dedication, loyalty, and long-term investment in the relationship. It involves a shared sense of goals and values, as well as a willingness to work through challenges and conflicts together. In the face of the unique stressors associated with caring for a child with autism, commitment becomes a linchpin holding the parental relationship together. The ability of parents to navigate the complexities of raising a child with autism while maintaining a strong sense of commitment to each other contributes significantly to overall relationship satisfaction.

It is crucial to acknowledge the inherent variability in relationship satisfaction among individuals and couples, influenced by factors such as personal expectations, relationship history, and individual characteristics. Benson's work (2020) highlights the impact of stressors, particularly the demands and challenges of caring for a child with autism, on the parental relationship. The increased strain, decreased communication, and diminished intimacy within the relationship are manifestations of the intricate interplay between external stressors and relationship satisfaction.

As the thesis progresses, a deeper exploration into the coping strategies and experiences of fathers raising autistic children in Pakistan becomes paramount (Hussain et al., 2021). This nuanced examination not only sheds light on the challenges faced by fathers but also provides valuable insights for potential interventions aimed at promoting greater

paternal involvement and support. Understanding the experiences of both mothers and fathers in the context of autism contributes to a more holistic perspective on the intricacies of parenting a child with autism and the subsequent impact on relationship satisfaction.

Psychological Distress

The challenges faced by parents of autistic children extend beyond the immediate complexities of raising a child with Autism Spectrum Disorder (ASD) and permeate into the realm of psychological health and relationship satisfaction. Within this intricate landscape, the concept of psychological distress emerges as a significant factor, encompassing a range of unpleasant feelings and emotions that can profoundly impact an individual's mental and emotional well-being (American Psychological Association, 2021). The manifestations of psychological distress, including anxiety, depression, irritability, and feelings of worthlessness or hopelessness, contribute to the intricate tapestry of challenges encountered by parents navigating the complexities of ASD (APA, 2021).

Caring for a child with ASD presents a unique set of demands, encompassing the need to navigate complex behavioral, communication, and developmental difficulties. The journey is often characterized by heightened levels of anxiety, depression, and a pervasive sense of being overwhelmed or isolated among parents (Benson, 2020). The challenges are multifaceted, involving not only the day-to-day responsibilities associated with caregiving but also the additional burden of financial strain and the social stigma attached to raising an autistic child (Estes et al., 2013). The amalgamation of these stressors contributes to psychological distress, further complicating the intricate web of emotions experienced by parents within this context.

Social support emerges as a significant mitigating factor in the realm of psychological distress for parents of autistic children. A study conducted in Pakistan explored the relationship between social support, self-esteem, and well-being in mothers of autistic children, revealing a positive association between higher social support and better well-being, coupled with lower levels of distress (Minhas et al., 2015). Such findings underscore the vital role that support networks play in alleviating the psychological burden carried by parents within this unique caregiving journey. Moreover, a qualitative study delved into the experiences of Pakistani mothers raising autistic children in Ireland, shedding light on their struggles and coping strategies in a foreign context, highlighting the importance of understanding the cultural nuances influencing their psychological well-being (Yasmin, 2006).

The roots of psychological distress in the context of parenting a child with ASD are deeply intertwined with ongoing challenges and stressors. Chronic stress, stemming from the continuous management of the child's behavioral issues and the quest for appropriate services, emerges as a persistent contributor to distress over time. Parents, grappling with the emotional upheaval accompanying their child's diagnosis, may also encounter trauma and the need for significant adjustments in family dynamics (Kuhlthau et al., 2010). Moreover, relationship problems, including marital conflicts or diminished social support, can further exacerbate psychological distress among parents, creating an additional layer of complexity (Benson, 2020)

As the research landscape unfolds, a study published in a Pakistani journal delves into the nuanced factors influencing psychological distress, revealing that mothers of younger children and those with more severe autism symptoms experienced higher levels of

distress, emphasizing the importance of tailored interventions based on child characteristics (Javed et al., 2023). Additionally, another study investigates the impact of family support and social stigma on the mental health of mothers raising autistic children in Pakistan, highlighting the protective role of family support against depression and anxiety, while underlining the detrimental effects of social stigma on overall distress levels (Khan et al., 2022).

Recognizing and addressing psychological distress among parents of autistic children is paramount to promoting their well-being and enhancing their capacity to support their child effectively. Access to mental health services, counseling, and support groups emerges as essential tools to equip parents with the necessary strategies to manage stress, develop coping mechanisms, and fortify their resilience (Estes et al., 2013). Furthermore, building a robust support network, seeking respite care, and incorporating self-care practices into their routines can contribute significantly to reducing psychological distress and improving overall mental health outcomes for parents (Benson, 2020).

Qualitative studies exploring the experiences of Pakistani mothers raising autistic children in different cultural contexts, such as the UK, provide valuable insights into the challenges associated with cultural differences, lack of understanding, and navigating unfamiliar support systems (Hussain et al., 2019). Similarly, another study examines the experiences of families with autistic children in Pakistan, focusing on the impact on family dynamics and communication, offering valuable information on the unique challenges faced by families within the Pakistani context (Haq et al., 2018).

Literature review

Psychological distress and mothers of autistic children

Parenting a child with autism presents unique challenges that often lead to heightened levels of parenting stress, anxiety, and depressive symptoms, particularly among mothers. Numerous studies have consistently demonstrated that mothers of autistic children experience more psychological distress compared to mothers of typically developing children. This heightened distress is attributed to the daily stressors and distinctive demands associated with raising a child on the autism spectrum (Ekas, Whitman, & Shivers, 2009; Estes et al., 2013). The repercussions of this psychological distress extend far beyond the immediate caregiving role, significantly impacting various aspects of a mother's well-being and overall functioning.

Another research findings by Lounds et al. (2015) have indicated that mothers of individuals with Autism Spectrum Disorder (ASD) report lower levels of life satisfaction and higher levels of depressive symptoms when compared to mothers of neurotypical children. This underscores the pervasive nature of the impact of psychological distress, suggesting that it permeates through different facets of a mother's life, transcending the boundaries of the caregiving domain. Notably, the gender disparity in the experience of distress is evident, with mothers consistently scoring significantly higher on measures of stress, anxiety, and depression compared to fathers. Moreover, mothers of children exhibiting more severe autism symptoms tend to experience elevated levels of all three types of distress, highlighting the nuanced challenges associated with the severity of the child's condition (Wang et al., 2022).

Pervious study examine that while the challenges of parenting a child with autism are substantial, additional factors contribute to the psychological distress experienced by mothers. Social support emerges as a crucial protective factor against distress, as mothers who receive higher levels of support from family, friends, and professionals exhibit lower levels of psychological distress (Ekas et al., 2009; Smith et al., 2010). Conversely, limited social support exacerbates the psychological burden on these mothers, accentuating the need for a robust support system. Furthermore, the intricate relationship between maternal emotional well-being and child challenging behaviors in ASD has been established. Mothers experiencing higher levels of stress, anxiety, and depression report more challenging behaviors in their children, creating a bidirectional relationship where child behaviors contribute to maternal distress and vice versa (Maenner et al., 2018).

Social support reiterates its significance in qualitative studies, aligning with quantitative findings that highlight its protective role against distress. The qualitative exploration reinforces the multifaceted nature of the psychological impact of raising an autistic child, emphasizing the need for a comprehensive understanding of the emotional challenges faced by these mothers (Sharma & Bal, 2020).

Research has shown that maternal psychological distress can influence the quality of the mother-child relationship. Mothers experiencing higher levels of distress may have difficulties in engaging with and responding sensitively to their children's needs (Estes et al., 2013; Hastings & Johnson, 2001). This may have implications for the child's social-emotional development and overall well-being. According to study explores the multifaceted effects of ASD on family relationships. Mothers shared experiences of tension, communication difficulties, and challenges within their relationships due to the demands of

caring for an autistic child. Understanding these relational challenges can inform support interventions for families as a whole (Sacks et al., 2022). Another research found that higher maternal anxiety was linked to increased challenging behaviors in autistic children. This highlights the importance of supporting mothers' mental health not only for their own well-being but also for their children's development (Dadds et al., 2018).

Another study found that mothers of children with Autism revealed lower levels of marital satisfaction as compared to mothers of typically developing children. This finding suggests that mothers of autistic children may experience challenges in maintaining a satisfying romantic relationship (Hartley et al, 2010). Additionally study investigated emotion regulation strategies used by mothers of children with ASD. They found that mothers who used less adaptive emotion regulation strategies, such as avoidance or suppression, experienced higher levels of stress and depression. Conversely, mothers who used more adaptive strategies, such as acceptance and reappraisal, reported better mental health outcomes (Dadds et al., 2014). According to psychological distress in mothers, even after their autistic children reach adulthood. Mothers continue to experience elevated levels of stress, anxiety, and depression, emphasizing the need for long-term support and resources throughout the lifespan (Maenner et al., 2023).

Several studies have explored the relationship between psychological distress and relationship satisfaction among mothers of autistic children. For instance, a study shows that maternal stress was negatively related with marital satisfaction among mothers of children with Autism (Baker-Ericzen et al, 2005). Study found that mothers of children with Autism reported lower levels of relationship satisfaction compared to mothers of typically developing children. However, the study also found that fathers of autistic children did not

report lower levels of relationship satisfaction, highlighting the gender-specific effects of caring for an autistic child on romantic relationships (Jones et al., 2010). Another study highlights the harmful consequences of stigma and discrimination faced by parents of autistic children. It found that these experiences contribute to social isolation, feelings of shame, and increased stress, negatively impacting mental health and overall well-being (Woods et al., 2017). Previous study found that mothers of autistic children who experience bullying or peer rejection of their children face additional emotional strain and increased anxiety. It emphasizes the need for fostering inclusive environments and addressing bullying to support both the child and the mother (McDougle et al., 2013). Another study shows that even after their children reach adulthood, mothers of autistic individuals may continue to experience feelings of grief and loss due to missed milestones and unmet expectations. Recognizing and addressing these emotional experiences can be crucial for supporting mothers throughout their journey (Harvey et al., 2022).

The presence of coping strategies and effective communication within the relationship has been associated with higher levels of relationship satisfaction among mothers of autistic children (Pottier & Ingram, 2008; Rodrigue, Morgan, & Geffken, 1990). These factors can play a crucial role in navigating the challenges associated with raising a child with autism and maintaining a fulfilling relationship.

Research shown that maternal psychological distress has emerged as a critical factor influencing the dynamics of the mother-child relationship, with higher levels of distress often linked to difficulties in maternal engagement and responsiveness to the needs of their autistic children (Estes et al., 2013; Hastings & Johnson, 2001). The intricate interplay between maternal mental health and the quality of the mother-child relationship holds

significant implications for the child's social-emotional development and overall well-being. The strain experienced by mothers caring for autistic children is further underscored by studies that delve into the multifaceted effects of Autism Spectrum Disorder (ASD) on family relationships. Mothers, sharing their lived experiences, articulate the tension, communication difficulties, and relational challenges stemming from the demanding nature of caring for an autistic child (Sacks et al., 2022). Understanding and addressing these relational challenges are imperative in informing comprehensive support interventions that target the well-being of families as a whole.

Research has not only emphasized the impact of maternal psychological distress on the mother-child relationship but has also elucidated its broader repercussions on various facets of family life. Higher maternal anxiety has been identified as a correlate of increased challenging behaviors in autistic children, emphasizing the critical importance of supporting mothers' mental health for both their own well-being and their children's development (Dadds et al., 2018). Moreover, mothers of children with Autism have been found to report lower levels of marital satisfaction compared to mothers of typically developing children, indicating potential challenges in maintaining fulfilling romantic relationships in the context of raising an autistic child (Hartley et al., 2010).

Another study investigating emotion regulation strategies employed by mothers of children with ASD revealed significant insights into the association between coping mechanisms and mental health outcomes. Mothers utilizing less adaptive emotion regulation strategies, such as avoidance or suppression, reported higher levels of stress and depression. Conversely, those employing more adaptive strategies, including acceptance and reappraisal, reported better mental health outcomes (Dadds et al., 2014). This

underscores the potential impact of coping strategies on maternal well-being and emphasizes the importance of developing interventions that promote adaptive coping mechanisms.

According to study challenges faced by mothers extend beyond the immediate caregiving years, as studies demonstrate elevated levels of psychological distress persist even after their autistic children reach adulthood (Maenner et al., 2023). This underscores the enduring need for long-term support and resources throughout the lifespan of individuals with autism and their families.

Examining the nexus between psychological distress and relationship satisfaction among mothers of autistic children reveals intricate connections. Maternal stress has been found to be negatively associated with marital satisfaction, highlighting the potential strain on romantic relationships within these families (Baker-Ericzen et al., 2005). Mothers of autistic children consistently report lower levels of relationship satisfaction compared to mothers of typically developing children, showcasing the unique challenges posed by raising a child with autism on romantic relationships. Notably, this study also reveals a gender-specific effect, with fathers of autistic children not reporting lower levels of relationship satisfaction, thus underscoring the gender-specific nuances in the impact of caring for an autistic child on romantic relationships (Jones et al., 2010).

Another study examines the detrimental consequences of stigma and discrimination faced by parents of autistic children further compound the challenges. Experiences of stigma contribute to social isolation, feelings of shame, and increased stress, negatively affecting mental health and overall well-being (Woods et al., 2017). Additionally, mothers

of autistic children who experience bullying or peer rejection of their children undergo additional emotional strain and increased anxiety, emphasizing the critical need for fostering inclusive environments and addressing bullying to support both the child and the mother (McDougle et al., 2013).

According to previous study that even after their children reach adulthood, mothers of autistic individuals may continue to grapple with feelings of grief and loss due to missed milestones and unmet expectations (Harvey et al., 2022). Recognizing and addressing these ongoing emotional experiences is crucial for providing comprehensive support to mothers throughout their unique and enduring journey.

Another study shows that within the realm of relational dynamics, the presence of coping strategies and effective communication has been associated with higher levels of relationship satisfaction among mothers of autistic children (Pottie & Ingram, 2008; Rodrigue, Morgan, & Geffken, 1990).

Psychological distress and Relationship satisfaction

Mothers of autistic children often face unique challenges and stressors that may impact their psychological well-being and their satisfaction with their romantic relationships (Karst & Van Hecke, 2012). According to one study, mothers of autistic children reported significantly higher levels of stress and anxiety than mothers of typically developing children. This high level of psychological distress may negatively impact the mother's satisfaction with their idealistic relationship (Khanna & Madhavan, 2010). Another study found that mothers of children with autism experience higher levels of psychological distress compared to mothers of typically developing children. Additionally, they found a

negative correlation between mothers' psychological distress and their relationship satisfaction with their partners (Luyster et al., 2017). Previous study found that having a child with autism has a negative impact on parental relationships. It found that parents of children with autism reported lower levels of marital satisfaction, more frequent conflicts, and less communication than parents of typically developing children (Raz et al., 2013).

Several studies have highlighted the elevated levels of psychological distress experienced by mothers of autistic children. For instance, (Davis & Carter, 2008) found that mothers of toddlers with autism spectrum disorders (ASD) reported higher levels of parenting stress compared to mothers of typically developing children. This increased stress may contribute to psychological distress and impact relationship satisfaction. Previous research shows the association between parenting stress and psychological distress in mothers of autistic children. They identified various factors contributing to mothers' stress, including challenging child behaviors, lack of social support, and financial difficulties (Chen et al., 2020). According to qualitative study delves into the social isolation often faced by mothers of autistic children. They identified feelings of loneliness, stigma, and difficulty maintaining social connections. The study emphasizes the need for interventions that address social isolation and provide mothers with opportunities for connection and support (Singh et al., 2018).

Research shows that the high levels of psychological distress experienced by these mothers can have negative implications for their romantic relationships. (Estes et al., 2013) found that parenting-related stress in mothers of toddlers with ASD was associated with higher levels of psychological distress and lower levels of relationship satisfaction. Similarly, Gallagher, Whiteley, and McLeod (2014) found that employment, family, and

personal factors related to the caregiving of children with autism had an impact on the psychological well-being and relationship satisfaction of mothers. Another study shows changes in psychological distress and marital functioning of mothers and fathers of autistic children during COVID-19. Mothers reported higher baseline distress but no significant changes over time. Pre-pandemic child functioning and marital satisfaction predicted changes in mother's marital satisfaction during the pandemic (Ekas et al., 2023). According to qualitative study identified common stressors faced by mothers of children with autism, such as financial strain, social isolation, and managing challenging behaviors (Arora et al., 2012).

In addition to these findings, research has explored various factors that may contribute to psychological distress and relationship satisfaction among mothers of autistic children. For example, Pottie and Ingram (2008) investigated daily stress, coping, and well-being in parents of children with autism. They found that effective coping strategies were associated with lower levels of psychological distress and higher levels of relationship satisfaction. Another found that parents of children with autism experience higher levels of stress and lower levels of well-being than parents of typically developing children. It also found that child characteristics, such as autism severity and challenging behaviors, were associated with higher levels of parental stress (Bayo et al., 2013). Another study investigates the physiological and psychological impact of parenting stress on mothers of autistic children. They found that chronic stress led to higher levels of cortisol, a stress hormone, and increased risk for depression and anxiety. This research underscores the importance of stress management interventions for improving mothers' well-being (Korszun et al., 2019). According to research examined the reasons why parents delay or avoid

seeking professional help for their children with autism. They found that stigma, lack of awareness, and financial constraints were significant barriers. The study emphasizes the need for educational campaigns and increased accessibility of resources to encourage early intervention and support for autistic children and their families (Singh et al., 2021).

Overall, the existing literature suggests that mothers of autistic children are at increased risk of experiencing psychological distress. The demands and stressors associated with raising a child with autism can take a toll on their mental well-being. Further research is needed to better understand the factors contributing to psychological distress in this population and to develop effective interventions to support the mental health of these mothers.

Theoretical framework

The contextual model of family stress (Boss, 2002) is a theoretical framework that explains how stressors in the environment can impact family functioning and individual well-being. According to this model, stressors are not solely determined by objective events, but also by the subjective appraisal and interpretation of these events by family members. The ABCX is a simple, linear model that suggests that stressors lead to stress, which leads to an outcome. We are only using this model as our theoretical framework and are not practically testing this model.

According to this model, stressors in the environment can impact family functioning and individual well-being, leading to various outcomes within the family system. In the context of mothers of autistic children, stressors can include the challenges and demands associated with parenting an autistic child, such as managing therapy appointments, addressing behavioral issues,

and navigating the educational system (Karst & Van Hecke, 2012). These stressors can contribute to increased levels of psychological distress among mothers.

Psychological distress refers to the negative emotional and psychological symptoms experienced by individuals, which can include anxiety, depression, and feelings of overwhelm (Estes et al., 2013). Mothers of autistic children may experience heightened levels of distress due to the chronic stress and additional responsibilities associated with caring for their child.

The relationship satisfaction component of the contextual model of family stress refers to an individual's subjective evaluation of the overall quality and happiness of their intimate relationship (Boss, 2002). Research suggests that mothers of autistic children may experience lower levels of relationship satisfaction compared to mothers of typically developing children (Hartley et al., 2010; Khanna&Madhavan, 2010). The added stress and demands of parenting a child with autism can strain the marital relationship and impact the satisfaction experienced by mothers.

The relationship between psychological distress and relationship satisfaction among mothers of autistic children can be explained within the framework of the contextual model of family stress. The chronic stress and demands associated with parenting an autistic child can contribute to higher levels of psychological distress, which in turn may negatively impact relationship satisfaction. The elevated distress levels experienced by mothers can affect their emotional well-being, communication patterns, and ability to engage in positive interactions within the relationship (Khanna&Madhavan, 2010).

Understanding this relationship is crucial for researchers and practitioners working with mothers of autistic children. It highlights the need for interventions and support systems that

address both the psychological distress and relationship satisfaction of these mothers. Providing resources for stress management, coping strategies, and enhancing communication skills within the relationship can help alleviate psychological distress and promote greater relationship satisfaction among mothers of autistic children.

In summary, the contextual model of family stress offers a theoretical framework for understanding the relationship between psychological distress and relationship satisfaction among mothers of autistic children. The stressors associated with parenting an autistic child can lead to increased psychological distress, which can negatively impact relationship satisfaction. Recognizing and addressing these factors can contribute to the well-being of both mothers and their intimate relationships.

Rationale

Raising an autistic child presents a distinctive set of challenges and stressors for parents, underscoring the imperative need to investigate the profound impact on their mental health and relationships. While previous studies, such as the notable work conducted by Karst and Van Hecke in 2012, have scrutinized the intricate relationship between psychological distress and relationship satisfaction across various populations, there exists a conspicuous void in research specifically investigating these factors among mothers of children with autism in Pakistan. This evident gap in knowledge accentuates the critical necessity to explore the nuanced dynamics shaping the relationship between psychological distress and relationship satisfaction within this specific population.

The dearth of research in this domain raises fundamental questions and highlights the urgency of addressing the unique challenges faced by mothers of autistic children in Pakistan.

The seminal work by Karst and Van Hecke has laid a foundation, but the cultural context and societal nuances in Pakistan demand a focused inquiry into the psychological well-being and relationship satisfaction of these mothers. The absence of tailored research in this area magnifies the significance of the current study, aiming to bridge this substantial gap and contribute valuable insights to the broader discourse on autism and maternal well-being.

Delving into the intricate relationship between psychological distress and relationship satisfaction among mothers of autistic children in Pakistan holds multifaceted significance. Firstly, it serves as a beacon illuminating the mental health implications and formidable challenges that these mothers confront on a daily basis. The relentless demands, unique responsibilities, and emotional stress entwined with raising an autistic child can exert a profound toll on the psychological well-being of mothers. This exploration becomes paramount in identifying the specific areas where targeted support and interventions can be strategically implemented to alleviate the burden and enhance the mental resilience of these mothers.

Secondly, a nuanced examination of relationship satisfaction among mothers of autistic children provides invaluable insights into the dynamics of their interpersonal relationships, particularly within the rich tapestry of Pakistani culture. Cultural and societal factors inherently shape the experiences and support mechanisms available to these mothers. By scrutinizing relationship satisfaction, researchers can discern potential areas of strain or dissatisfaction that may be influenced by cultural nuances. This understanding is essential in informing interventions that not only address the challenges within the family unit but also respect and integrate cultural sensitivities, ultimately contributing to the holistic well-being of mothers.

Moreover, a comprehensive understanding of the interplay between psychological distress and relationship satisfaction among mothers of autistic children in Pakistan carries practical implications. This knowledge serves as a compass guiding the development of culturally sensitive and contextually relevant support programs and interventions. Tailored strategies and resources can be curated to address the specific challenges encountered by mothers in the Pakistani cultural context, thereby fostering mental well-being and amplifying relationship satisfaction within the family unit. The design and implementation of these interventions can be instrumental in providing the requisite support that mothers need, thereby radiating positive effects on the overall well-being of both the mothers and their families.

Objectives

1. To measure the level of psychological distress among mothers of children with autism spectrum disorder.
2. To measure the level of relationship satisfaction among mothers of children with autism spectrum disorder.
3. To explore the relation between psychological distress and relationship satisfaction among mothers of children with autism spectrum disorder

Hypotheses

1. Mothers of children with Autism Spectrum Disorder will experience higher levels of psychological distress.
2. Mothers of children with Autism Spectrum Disorder will report lower levels of relationship satisfaction.
3. There will be a negative relationship between psychological distress and relationship satisfaction among mothers of children with autism spectrum disorder.

Chapter 2

Method

In order to unravel the intricate relationship between Psychological distress and Relationship satisfaction among mothers of children with Autism Spectrum Disorder, methodology chapter describes the methodological framework employed in this research. A cross-sectional study design was selected to examine the coexistent dynamics of these variables, offering a picture of their relationship without implying causation or tracking changes over time. Ethical considerations formed the foundation of this research, with a firm commitment to safeguarding participant welfare, privacy, and preventing stigmatization. Strict measures, including informed consent, confidential data handling, and a focus on minimizing potential harm, underscored the ethical conduct of the study.

The sample of 106 participants, representing the age group of 5-12 years, was strategically determined. G-Power software and a purposive sampling method were employed, aiming to ensure both statistical power and practical feasibility. Inclusion criteria embraced mothers of autism children; Children aged between 5-12 years. A comprehensive set of measures, including the Kessler psychological distress and couple satisfaction index was meticulously chosen for their established reliability and validity. A demographic sheet preceded the scales, capturing vital participant information.

Research design

The research design for this study was cross-sectional. A cross-sectional study design involved the collection of data at a single point in time, enabling researchers to gather

information on a specific population at a particular moment. By using this design, the researchers aimed to examine the relationship between psychological distress and relationship satisfaction among mothers of autistic children within a specific timeframe. This approach allowed for the exploration of the associations and potential correlations between these variables within the specific context of the study. This design enabled the researchers to examine how these variables coexisted and potentially influenced each other at a specific moment in time.

Participant

Data for this study was gathered from mothers residing in the Rawalpindi and Islamabad who had children diagnosed with Autism Spectrum Disorder (ASD). The research design employed in this study was quantitative, aiming to analyze data through statistical methods. To determine the appropriate sample size, G. power software was utilized, which initially calculated a sample size of 145 participants.

However, the existing literature on similar topics and the sample sizes used in previous studies. Based on this review, it was determined that a sample size of 145 participants would provide a more comprehensive and robust analysis.

Ultimately, after careful consideration of both the G. power software suggestion and the literature, the intended sample size for the study was set at 106 participants. This decision was made to balance the statistical power of the analysis with the available resources and time constraints.

By adhering to this intended sample size, the researchers aimed to gather sufficient data to conduct a rigorous quantitative analysis of the relationship between various factors and the experiences of mothers of children with ASD. This sample size would allow for meaningful statistical analysis while considering the existing literature and practical constraints.

Sampling

In this research, the data collection employed the purposive sampling technique. Purposive sampling was used as a non-random sampling method to select participants based on specific criteria that aligned with the research objectives. The criteria focused on recruiting mothers of autistic children within a specific age range.

The use of purposive sampling allowed the researchers to target a specific population of interest and gather in-depth information regarding the relationship between psychological distress and relationship satisfaction among mothers of autistic children. The researchers identified potential participants by collaborating with special education school and organizations that catered to autistic children in the designated area. This collaboration facilitated access to a pool of eligible participants who met the specified criteria

Inclusion Criteria:

Mothers of autistic children: The study specifically included only mothers who had children diagnosed with autism. This criterion ensured that participants had firsthand experience and understanding of the challenges associated with raising a child with autism.

Children aged between 5-12 years: The study included mothers whose children fell within the age range of 5 to 12 years. This criterion allowed for a focused analysis of the impact on the mothers' psychological distress and relationship satisfaction within a specific developmental stage of the children.

Exclusion Criteria:

Mothers with autism: The study excluded mothers who had a diagnosis of autism themselves. This criterion aimed to examine the unique challenges faced by mothers of autistic children without the influence of the mothers' own autism diagnosis. By excluding mothers with an autism diagnosis, the researchers aimed to isolate the experiences and perspectives of mothers who do not have autism themselves. This approach allowed for a more targeted exploration of the unique challenges and stressors that mothers of autistic children may encounter. The decision to exclude mothers with autism from the study was motivated by the aim to differentiate the experiences of mothers who are neurotypical or do not have an autism diagnosis from those who have autism. By doing so, the researchers sought to gain a clearer understanding of the specific factors influencing the well-being and support needs of mothers raising autistic children.

It is important to note that the exclusion criterion was implemented with careful consideration for ethical considerations and respect for the experiences of individuals with autism. The intention was not to disregard or marginalize the perspectives of mothers with autism, but rather to create a focused investigation into the experiences of mothers without an autism diagnosis.

Instruments

Prior to administering the scales, participants were first asked to complete a demographic sheet. This sheet aimed to gather essential information about the participants, such as their age, gender, educational background, and any other relevant demographic details. Collecting demographic data is a common practice in research studies as it helps provide a contextual understanding of the sample characteristics.

Once the participants completed the demographic sheet, they were then provided with the scales to fill out. The scales used in this study included the Kessler Psychological Distress Scale (K-10) for measuring psychological distress and Couple satisfaction index (CSI-16) for measuring relationship satisfaction. These scales are widely recognized and validated measures commonly employed in psychological research.

Kessler Psychological Distress Scale (K-10)(Kessler et al., 1990s)

The Kessler Psychological Distress Scale (K-10) is a self-report questionnaire developed by Dr. Ronald Kessler and colleagues in the late 1990s to measure psychological distress and assess emotional well-being in the general population (Kessler et al., 2002). It is widely used in both research and clinical settings.

The K-10 consists of ten items that capture an individual's emotional state over the past four weeks. Respondents rate each item on a five-point Likert scale, ranging from "none of the time" to "all of the time." The scale covers a range of psychological symptoms including anxiety, depression, and general psychological distress.

The ten items of the K-10 are as follows: feeling tired out for no good reason, feeling nervous, feeling so nervous that nothing could calm you down, feeling hopeless, feeling restless or fidgety, feeling so restless that you could not sit still, feeling depressed, feeling that everything was an effort, feeling so sad that nothing could cheer you up, and feeling worthless.

To obtain a score, the ratings for each item are summed, resulting in a total score ranging from 10 to 50. Higher scores indicate a higher level of psychological distress.

The K-10 has demonstrated good reliability (ranging from 0.86 to 0.93) and validity across different cultural contexts and has been translated into various languages (Furukawa et al., 2003). It is considered a practical and efficient tool for assessing psychological distress.

Couple satisfaction index (CSI-16)(Funk &Rogge, 2007)

The assessment of relationship satisfaction utilized the Couples Satisfaction Index (CSI-16), a 16-item scale developed by Funk and Rogge in 2007. This shortened version was deemed more suitable for the Pakistani population, given potential cultural and religious sensitivities. The original 32-item scale contained questions that might elicit discomfort or biased responses due to cultural and religious backgrounds. For instance, questions like regret over entering a current relationship or the possibility of someone else being available besides the current spouse were considered potentially inappropriate.

The CSI-16 consists of mixed response style questions, encompassing the frequency of certain behaviors, Likert-type scales, and rating questions. Participants were asked to express their opinions on aspects such as the frequency of positive interactions with their partner, feelings of being part of a team, and overall satisfaction with the relationship. The final score on the Couples Satisfaction Index is obtained by summing the scores of all 16 items, ranging from 0 to 81. A score below 51.5 indicates relationship dissatisfaction, with 0 representing the lowest level of satisfaction and 81 the highest and in the current study, it exhibited outstanding internal consistency across all 16 items ($\alpha = .97$).

Procedure

In this study, data was collected from mothers of children with Autism Spectrum Disorder in the Rawalpindi and Islamabad using purposive sampling. Purposive sampling was

employed as a non-random sampling technique, where participants were selected based on specific criteria aligned with the research objectives. The criteria included being a mother of an autistic child between the ages of 5-12 years attending special schools in the Rawalpindi and Islamabad.

The research collaborated with special schools in the Rawalpindi and Islamabad to identify eligible participants. Potential participants were identified, and the researcher reached out to them to explain the purpose and procedures of the study. Detailed explanations of the participants' rights, including the right to withdraw from the study at any time without penalty, were provided. Informed consent was obtained from the participants who voluntarily agreed to participate.

After obtaining consent, the participants were given self-report questionnaires to complete. The Kessler Psychological Distress Scale (K10) was used to measure the participants' psychological distress. The K10 is a widely used measure that assesses levels of anxiety and depressive symptoms. Additionally, the Couple satisfaction index (CSI-16) was used to measure the participants' relationship satisfaction. The CSI-16 is a reliable and validated tool for assessing relationship quality and satisfaction.

Once the data collection phase was complete, the collected data were analyzed using IBM SPSS (Statistical Package for the Social Sciences). SPSS is a statistical software package commonly used for analyzing quantitative data. Appropriate statistical techniques, such as correlation analysis, were employed by the researchers to examine the relationship between psychological distress and relationship satisfaction among the mothers of autistic children. The

analysis provided insights into the nature and strength of the correlation, shedding light on potential associations between these variables.

Importantly, the researcher ensured the confidentiality and privacy of the participants' data throughout the data collection and analysis process. Identifying information was kept separate from research data, and only authorized members of the research team had access to the data. The findings of the study were reported in an aggregated and anonymized manner, safeguarding the participants' anonymity and confidentiality.

Ethical consideration

This study adhered to the ethical guidelines set by the American Psychological Association (APA) to ensure the protection and well-being of the participants involved. Several ethical considerations were implemented, including obtaining participants' informed consent, ensuring confidentiality and privacy, and providing support resources for participants who may have experienced distress during the study.

Informed consent was obtained from all participants. Detailed information about the purpose, procedures, potential risks, and benefits of the study was provided prior to their participation. Participants had the opportunity to ask questions and fully understand the nature of their involvement. Informed consent was obtained voluntarily, and participants were made aware of their rights, including the ability to withdraw from the study at any time without facing any penalty.

Confidentiality and privacy were strictly maintained throughout the study. All collected data were treated with utmost confidentiality, and participants' personal information was kept protected. Identifying information was stored separately from research data, using unique

participant identifiers to maintain anonymity. Access to the data was limited to authorized researchers involved in the study, and all information was securely stored to prevent unauthorized access.

To address potential distress experienced by participants, appropriate support resources were provided. Participants' well-being was closely monitored throughout the study, and measures were taken to minimize any potential harm or distress that may have arisen from their participation.

Ethical considerations extended to every stage of the study, from recruitment to data collection, analysis, and dissemination of results. The study was designed with the primary goal of ensuring the well-being and rights of the participants, while also contributing valuable knowledge to the field of research. Ethical review boards or committees may have been involved to provide oversight and guidance on the study's ethical practices, ensuring alignment with the principles of ethical research conduct.

Chapter 3

Results

This study aimed to find out the relationship between Psychological distress and Relationship satisfaction among mothers of children with Autism Spectrum Disorder. Means and standard deviations were computed as descriptive statistics to offer an overview of the data and to summarize the characteristics of the research participants. Furthermore, the study assessed the reliability of the measurement scales used to assess Psychological distress and Relationship satisfaction. Reliability analysis, such as Cronbach's alpha, was conducted to evaluate the internal consistency of the measurement instruments and ensure that they were reliable measures of the constructs under investigation.

In addition to descriptive statistics and reliability analysis, spearman correlation coefficients were computed to examine the relationships between psychological distress and Relationship satisfaction. This statistical technique allows for the quantification of the strength and direction of associations between variables, providing insights into the potential connections among the study variables.

Table 1*Demographic Characteristics of the Participants*

<i>Sample characteristic</i>	<i>f</i>	<i>%</i>
Age of mothers		
20-30	17	16.0
31-40	61	57.5
41-50	26	24.5
51-60	2	1.9
Educational level of mothers	1	.9
High school	42	39.6
Undergraduate	60	56.6
Postgraduate	3	2.8
Other		
Employment status of mother	37	34.9
Employed	66	62.3
Un employed	2	1.9
Retired	1	.9
Other		
Annual household income		
50k-150k	50	47.2
160k-250k	26	24.5
260k-350k	24	22.6
Above 350k	6	5.7
Age of child with ASD		
5-8 years	72	67.9
9-12 years	34	32.1

Couple Satisfaction		
Notable Relationship	81	76.4
dissatisfaction		
Relationship satisfaction	25	23.6
Psychological distress		
No PD	31	29.2
PD	75	70.8

Note: f= frequency, %=percentage, NO PD= Number of Psychological Distress

According to the table 1, the majority of mothers in the sample are in the age range of 31-40 (n= 61) (57.5%), followed by 20-30 (n= 17) (16.0%), and 41-50 (n=26) (24.5%). There are very few mothers in the age groups of 51-60 (n=2) (1.9%). Most mothers have completed their postgraduate education (n=60)(56.6%). A significant portion have under graduate education (n=42)(39.6%). A smaller percentage have high school education (n=1) (.9%). The majority of mothers in the sample are unemployed (n=66)(62.3%). A smaller percentage are employed (n=37)(34.9%). Most mothers who are unemployed have their postgraduate degree. The largest proportion of households falls within the income range of 50k-150k (n=50)(47.2%). A significant portion falls in the range of 160k-250k (n=26) (24.5%) and 260k-350k (n=24)(22.6%). Most children with Autism Spectrum Disorder (ASD) in the sample are between the ages of 5-8 years (67.9%) and rest of the sample children are in 9-12 years age group (n=34)(32.1%). The majority of participants report relationship satisfaction (76.4%). A notable proportion reports notable relationship dissatisfaction (23.6%). Participants' psychological distress levels are distributed as no psychological distress (n= 31)(%=29.2) and participants with psychological distress (n=75)(%=70.8). Most mothers who show psychological distress are unemployed.

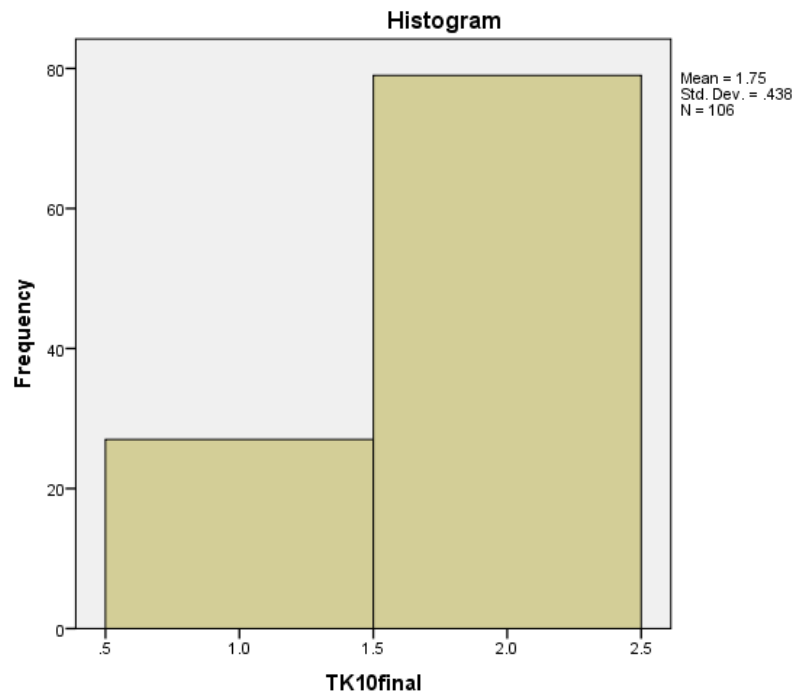
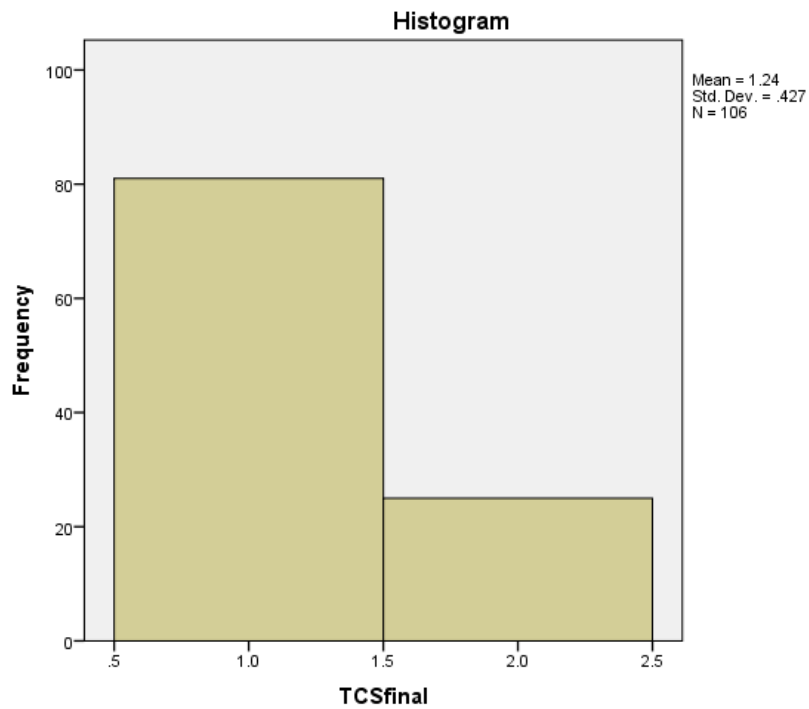
Figure 1.1 Measure the level of psychological distress**Figure 1.2 Measure the level of relationship satisfaction**

Figure 1.3 Normality Testing

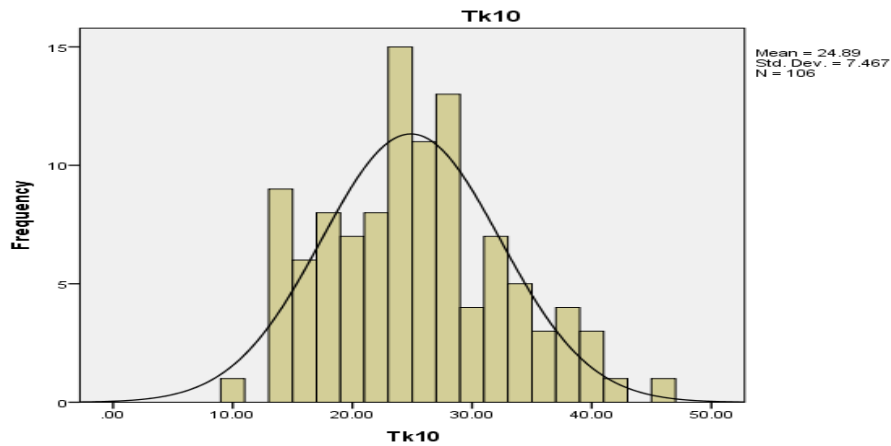
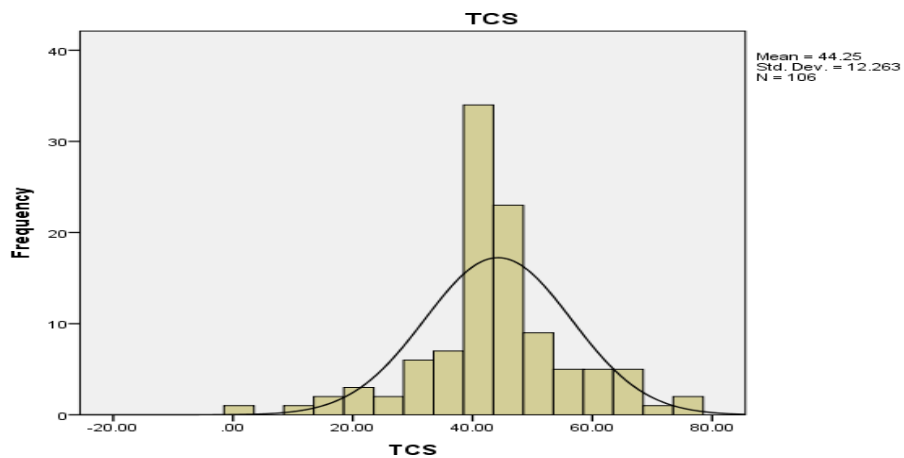


Figure 1.3 demonstrates the distribution of Kessler psychological distress scale skewness and kurtosis which shows that the distribution is normal for Kessler psychological distress scale.

Figure 1.4 Normality testing



The figure 1.2 demonstrates the distribution of Couple satisfaction index scale skewness and kurtosis shows that there is non-normal distribution of data in Couple satisfaction index scale.

Table 2

Mean, Median, Mode, Standard deviation, skewness, Kurtosis, and Kolmogorov-Smirnov test statistics of of Kessler psychological distress and Couple satisfaction index CSI-16 scales

Scales	M	Median	Mode	SD	Skewness	Kurtosis	K-S	P
K-10	24.8	24.0	14.0	7.46	.389	-.210	.076	.184
CSI-16	44.2	43.0	43.0	12.78	-.278	1.85	.147	.000

Note: M= Mean, SD= Standard Deviation, K-S= Kolmogorov-Smirnov, p= K-S significance value, Kessler psychological distress scale= K10, Couple satisfaction index scale=CSI-16

Table 2 shows that k10 scale shows normal distribution as its significance value is (p= 0.184) also keeping in view its mean, median and skewness value whereas CS1-16 scale shows non normal distribution as its significance value is (p=.000)and also it shows negative skewness of -.278.

Table 3

Psychometric Properties for Kessler psychological distress scale(k10) and Couple satisfaction index scale (CSI-16)

Variables	M	SD	Range		A
			Actual range	Potential range	
K10	24.8	7.46	1-76	0-80	.91
CSI-16	44.2	12.26	1-4	10-50	.95

Note: Note: M = mean, SD = standard deviation, α = alpha reliability, Kessler psychological distress scale= K10, Couple satisfaction index scale=CSI-16

Table 3 exhibits that Kessler psychological distress scale ($\alpha= .91$) and Couple satisfaction index ($\alpha=.95$) of both scales are reliable concerning the Cronbach's alpha values mentioned above in the table which shows the ($M=24.8$, $SD=7.46$) K10 and ($M=44.2$, $SD=12.26$) CSI-16 are highly reliable.

Table 4

Descriptive Statistics and Correlations for Kessler psychological distress scale= K10, Couple satisfaction index scale=CSI-16

Variables	M	SD	1	2
K10	24.88	7.46	-	-.426**
CSI-16	44.25	12.26	-	-

Note: Kessler psychological distress scale= K10, Couple satisfaction index scale=CSI-16

Table 4 shows spearman correlation analysis was used to analyze the relationship between psychological distress and relationship satisfaction as the data was non-normally

distributed. Results shows that there is a significantly negative relationship between psychological distress (K10) and Relationship satisfaction (CSI-16) ($r=-.426^{**}$) with significant correlation 0.00 (1-tailed). This shows that as psychological distress increases relationship satisfaction decreases and vice versa.

Chapter 4

Discussion

This study aimed to explore the relationship between psychological distress and relationship satisfaction among mothers of children with Autism Spectrum Disorder (ASD). The objectives and hypotheses guided the investigation, and the findings provide important insights into the challenges faced by this specific demographic.

The first objective sought to measure the level of psychological distress among mothers of children with Autism Spectrum Disorder (ASD). The results indicate a substantial prevalence of psychological distress, with 70.8% of participants reporting distress. This aligns with existing literature highlighting the increased stress levels experienced by parents of children with ASD (Davis & Carter, 2008). The elevated distress levels emphasize the urgent need for targeted mental health interventions for this population.

The second objective focused on assessing relationship satisfaction among mothers in the sample. The majority (76.4%) reported notable relationship dissatisfaction, but 23.6% expressed satisfaction. This result underscores the diversity of experiences within this group and highlights the challenges mothers of children with ASD face in maintaining satisfactory relationships.

The third objective aimed to explore the relationship between psychological distress and relationship satisfaction. The Spearman correlation analysis revealed a significantly negative relationship ($r = -0.426^{**}$) between psychological distress (measured by K10) and relationship satisfaction (measured by CSI-16). This result implies that as psychological

distress increases, relationship satisfaction tends to decrease, and vice versa. The moderate strength of the correlation suggests that the mental well-being of mothers is intricately linked to their relationship satisfaction.

The first hypothesis posited that mothers of children with ASD would experience higher levels of psychological distress. The findings support this hypothesis, emphasizing the considerable burden on the mental health of these mothers. Elevated distress levels may be attributed to the unique challenges associated with caring for a child with ASD, such as increased caregiving responsibilities and potential social stigmatization (Davis & Carter, 2008). Another study found that mothers of children with ASD reported significantly higher levels of stress, anxiety, and depression compared to mothers of typically developing children. The fathers also reported higher levels of distress, but to a lesser extent than mothers (Oran & Sagarat, 2016). Additionally, the study confirmed that mothers of children with ASD experience significantly higher levels of anxiety and depression compared to mothers of typically developing children. It also identified several contributing factors, such as the severity and nature of ASD symptoms, limited social support networks, and inadequate access to specialized services (Bayat et al., 2015). According to a previous study, it was found that mothers of children with ASD reported significantly higher parenting stress compared to mothers of typically developing children. However, social support and quality of life emerged as protective factors, mitigating the impact of stress (Yazdani et al., 2022). Another study examined the relationship between parental stress and social support in families with children with ASD. It found that mothers reported significantly higher levels of stress compared to fathers, and that higher levels of social support, particularly from

spouses and friends, were associated with lower levels of psychological stress (DeWinter & Van den Auweele, 2019).

The second hypothesis suggested that mothers of children with ASD would report lower levels of relationship satisfaction. The results validate this hypothesis, indicating that a significant portion of mothers in the sample experiences dissatisfaction in their relationships. Balancing the demands of caregiving, managing potential disruptions in family routines, and coping with the impact on personal and social life could contribute to lower relationship satisfaction (Hartley et al., 2010). Another study examined the dynamics of co-parenting stress in couples with children with ASD. It identified factors like child severity, lack of shared coping strategies, and insufficient support as contributors to marital conflict and decreased satisfaction. However, the study also explored the potential of mindfulness interventions to improve communication and reduce co-parenting stress, paving the way for more positive relationships within ASD families (Saposnek et al., 2008). Additionally, study shows that marital satisfaction and perceived family support in families with children with Autism Spectrum Disorder (ASD). It found that couples with Autism Spectrum Disorder (ASD) children reported lower levels of marital satisfaction compared to couples without Autism Spectrum Disorder (ASD) children. However, perceived family support acted as a buffer, with higher levels of support associated with greater marital satisfaction (Bayat et al., 2013). Another study investigated the trajectories of relationship satisfaction and well-being over time in parents of children with Autism Spectrum Disorder (ASD). It found that couples' satisfaction typically declined in the early years after (Hastings et al., 2013). Additionally, study employed a qualitative approach with in-depth interviews. It identified stress as a key factor impacting relationships in families with

Autism Spectrum Disorder (ASD). Couples reported communication difficulties, increased conflict, and decreased intimacy due to the demands of raising a child with ASD (McIntyre et al., 2005). Previous study found that parents of children with Autism Spectrum Disorder (ASD) over time. It found that couples with lower levels of social support from friends, family, and professionals reported lower relationship satisfaction over time (Hastings et al., 2015).

The third hypothesis proposed a negative relationship between psychological distress and relationship satisfaction. The correlation analysis confirmed this hypothesis, indicating that the mental well-being of mothers is indeed inversely related to their satisfaction in relationships. This finding emphasizes the interconnectedness of psychological distress and relationship dynamics, highlighting the need for comprehensive support programs that address both aspects simultaneously. According to study delved deeper into the complexities of this relationship. While confirming higher maternal distress correlated with lower marital satisfaction, it identified specific distress symptoms playing a significant role. Increased anxiety in mothers was associated with greater communication difficulties and emotional withdrawal, hindering couple intimacy and satisfaction (Bayat et al., 2013). Study shows that mothers experiencing higher levels of depression displayed more negative interactions with their partners, further straining the relationship and reinforcing their own distress. Additionally, mothers reported feeling unappreciated and lacking their spouse's understanding of the challenges they faced, leading to greater dissatisfaction and emotional distance. (Goetz et al., 2019). Additionally study found that couples raising children with ASD experienced lower relationship satisfaction compared to those without ASD children. Mothers' psychological distress (e.g., depression, anxiety) was

consistently identified as a significant predictor of relationship satisfaction (Buescher et al., 2017). According to (Smith et al., 2013) found that mothers who perceived themselves as burdened by their child's ASD and lacked adequate social support experienced lower relationship satisfaction. Another study found that Mothers of children with ASD in the UAE reported significantly higher levels of anxiety and depression compared to mothers of typically developing children. This finding also highlights the challenges faced by mothers of children with ASD, regardless of cultural context and found that higher levels of anxiety and depression were associated with lower relationship satisfaction and quality of life, emphasizing the need for culturally relevant support systems addressing mental health alongside family dynamics (Al-Saidi et al., 2022).

Conclusion

This study examined the complex interplay between psychological distress and relationship satisfaction among mothers of children with Autism Spectrum Disorder (ASD). The research objectives and hypotheses provided a structured framework to explore the unique challenges faced by this specific demographic. The findings contribute valuable insights into the multifaceted experiences of these mothers, shedding light on the need for targeted interventions and support services.

The study revealed a significant prevalence of psychological distress among mothers of children with Autism Spectrum Disorder (ASD), with 70.8% of participants reporting distress. This underscores the substantial burden on the mental health of these mothers, aligning with existing literature highlighting the elevated stress levels in this population. A substantial portion (76.4%) of mothers reported notable relationship dissatisfaction,

emphasizing the challenges they face in maintaining satisfactory relationships while navigating the complexities of raising a child with Autism Spectrum Disorder (ASD). This finding underscores the diversity of experiences within the group. The Spearman correlation analysis confirmed a significantly negative relationship between psychological distress and relationship satisfaction. The moderate strength of the correlation ($r = -0.426^{**}$) indicates that as psychological distress increases, relationship satisfaction tends to decrease, highlighting the intricate link between maternal mental well-being and relationship dynamics.

Limitations

Several potential limitations needed to be considered in this research when interpreting the findings. One significant limitation was the reliance on self-reported measures, which could have introduced biases and inaccuracies into the data. Self-report measures were susceptible to social desirability bias, where participants may have responded in a manner they perceived as socially desirable, potentially leading to an over- or underestimation of psychological distress and relationship satisfaction levels.

Another limitation of the study was its focus on mothers of children with autism, which restricted the generalizability of the findings. Autism is a complex neurodevelopmental disorder that affects both genders, and the experiences of fathers or other caregivers may have differed from those of mothers. Thus, it is important to acknowledge that the findings may not fully captured the experiences and challenges faced by other populations, such as fathers or caregivers from diverse cultural backgrounds. Future research should aim to include a more diverse sample to obtain a comprehensive understanding of the experiences of parents in different contexts.

The study's cross-sectional design posed a limitation in establishing causality. Cross-sectional studies assessed variables at a single point in time, providing a snapshot of the associations between variables. Therefore, it was not possible to determine the temporal sequence of events or whether psychological distress led to decreased relationship satisfaction or vice versa. Conducting longitudinal studies that followed parents over time would have provided a more robust understanding of the dynamic relationship between psychological distress and relationship satisfaction.

Suggestions/implications

The findings of this study carried important implications for clinical practice and interventions targeted at parents of children with Autism Spectrum Disorder (ASD). A significant correlation was observed between psychological distress and relationship satisfaction, highlighting the need to develop and implement programs specifically designed to address the unique challenges faced by this population. These programs played a crucial role in reducing stress and improving the mental health of parents of autistic children.

It is crucial to acknowledge that raising a child with autism can be demanding and emotionally challenging. Parents often experienced heightened levels of psychological distress due to factors such as navigating the complex healthcare system, managing behavioral difficulties, and coping with the emotional impact of their child's diagnosis. Consequently, interventions aimed at reducing stress became imperative.

These interventions included various components. Firstly, access to mental health resources such as counseling or therapy was provided to parents, offering them a safe space to express their emotions, develop coping strategies, and receive tailored support. This helped alleviate psychological distress and promoted overall well-being.

Secondly, programs focused on improving relationship satisfaction between parents. Raising an autistic child put strain on the parent's relationship, and addressing this aspect was crucial. Interventions provided couples with tools and strategies to enhance communication, build resilience, and strengthen their partnership. By fostering understanding and empathy, these programs helped parents navigate the challenges together, enhancing their overall relationship satisfaction.

Furthermore, programs were developed specifically to cater to the needs of parents of autistic children. These programs offered education and resources on autism, equipping parents with a better understanding of the condition and its implications. They also provided practical strategies for managing behavioral challenges, fostering positive interactions, and promoting the overall well-being of both the child and the parents.

Implementing these programs had far-reaching benefits. By reducing psychological distress and enhancing relationship satisfaction among parents of autistic children, the entire family system was positively impacted. When parents were better equipped to manage stress, their ability to support their child's development and well-being was strengthened. This, in turn, contributed to better outcomes for the child with autism.

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Appendix A

Support letter

 Capital University of Science and Technology
Islamabad

Islamabad Expressway, Kahuta Road,
Zone - V, Islamabad, Pakistan
Telephone : +92-(51)-111-555-666
 : +92-51-4486700
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Email: : info@cust.edu.pk
Website: : www.cust.edu.pk

Ref. CUST/IBD/PSY/Thesis-587
August 7, 2023

TO WHOM IT MAY CONCERN

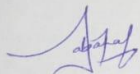
Capital University of Science and Technology (CUST) is a federally chartered university. The university is authorized by the Federal Government to award degrees at Bachelor's, Master's and Doctorate level for a wide variety of programs.

Ms. **Hafza Asif**, registration number **BSP201034** is a bona fide student in BS Psychology program at this University from Spring 2020 till date. In partial fulfillment of the degree, she is conducting research on "Relationship between psychological distress and relationship satisfaction among mothers of children with autism spectrum Disorder". In this continuation, the student is required to collect data from your institute.

Considering the forgoing, kindly allow the student to collect the requisite data from your institute. Your cooperation in this regard will be highly appreciated.

Please feel free to contact undersigned, if you have any query in this regard.

Best Wishes,



Dr. Sabahat Haqqani
Head, Department of Psychology
Ph No. 111-555-666 Ext: 178
sabahat.haqqani@cust.edu.pk

21/28/2023
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Appendix B
INFORMED CONSENT FORM

I agree to take part in a research project led by a student from the Psychology Department at Capital University of Science and Technology in Islamabad. The purpose of this research is to fulfill the academic requirements for their degree program. I acknowledge _____ that _____ the researchers will handle all the data collected during this study with the utmost confidentiality. By signing this consent form, I affirm that I have read and understood the information provided, and I voluntarily agree to participate in the research thesis project. I have had the opportunity to ask any questions or seek clarification about the study, and all my concerns have been addressed to my satisfaction.

Signature: _____ Date: _____

Appendix C

Demographic Sheet

Fill these questions carefully

Age: _____

Marital Status: _____

(Married/Divorced/Widowed/Other)

Educational Level: __ (Highschool/Undergraduate/Postgraduate/Doctorate/Other)

Employment Status: _

(Employed/Unemployed//Retired/Other)

Annual Household Income: __

Number of Children: _

Specify the age of the child with Autism Spectrum Disorder (ASD) _____

How long ago was the diagnosis made? _____ (In months/years)

Appendix D

Please tick the answer that is correct for you:	All of the time (score 5)	Most of the time (score 4)	Some of the time (score 3)	A little of the time (score 2)	None of the time (score 1)
1. In the past 4 weeks, about how often did you feel tired out for no good reason?					
2. In the past 4 weeks, about how often did you feel nervous?					
3. In the past 4 weeks, about how often did you feel so nervous that nothing could calm you down?					
4. In the past 4 weeks, about how often did you feel hopeless?					
5. In the past 4 weeks, about how often did you feel restless or fidgety?					
6. In the past 4 weeks, about how often did you feel so restless you could not sit still?					
7. In the past 4 weeks, about how often did you feel depressed?					
8. In the past 4 weeks, about how often did you feel that everything was an effort?					
9. In the past 4 weeks, about how often did you feel so sad that nothing could cheer you up?					

10. In the past 4weeks, abouthow oftendidyoufeelworthless?					
-------------------------------------------------------------------	--	--	--	--	--

Appendix E

Please indicate the degree of happiness, all things considered, of your relationship.

Extremely Unhappy	Fairly Unhappy	A Little Unhappy	Happy	Very Happy	Extremely Happy	Perfect		
0	1	2	3	4	5	6		
			All the time	Most of the time	More often than not	Occasi onally	Rare ly	Never
			5	4	3	2	1	0

In general, how often do you think that things between you and your partner are going well?

	Not at all TRUE	A little TRUE	Some -what TRUE	Most ly TRUE	Almost Complet ely TRUE	Complet ely TRUE
Our relationship is strong	0	1	2	3	4	5
My relationship with my partner makes me happy	0	1	2	3	4	5
I have a warm and comfortable relationship with my partner	0	1	2	3	4	5
I really feel like <u>part of a team</u> with my partner	0	1	2	3	4	5

	Not at all	A littl e	Some- what	Most ly	Almost complet ely	Complet ely
How rewarding is your relationship with your partner?	0	1	2	3	4	5
How well does your partner meet your needs?	0	1	2	3	4	5
To what extent has your relationship met your original expectations?	0	1	2	3	4	5
In general, how satisfied are you with your relationship?	0	1	2	3	4	5

For each of the following items, select the answer that best describes *how you feel about your relationship*. Base your responses on your first impressions and immediate feelings about the item.

INTERESTING	5	4	3	2	1	0	BORING
BAD	0	1	2	3	4	5	GOOD

FULL	5	4	3	2	1	0	EMPTY
STURDY	5	4	3	2	1	0	FRAGILE
DISCOURAGING	0	1	2	3	4	5	HOPEFUL
ENJOYABLE	5	4	3	2	1	0	MISERABLE

Appendix F

Permission letter

Permission requests

Use of the K6 and K10 is free and does not require any formal permission or approval. We do ask that you please cite the below article and using these scales. In addition, we would appreciate it if you would send us the citations to all final publications that use the K6/K10.

Kessler, R.C., Barker, P.R., Colpe, L.J., Epstein, J.F., Gfroerer, J.C., Hiripi, E., Howes, M.J., Normand, S-L.T., Manderscheid, R.W., Walters, E.E. Screening for serious mental illness in the general population. *Archives of General Psychiatry*, 60(2), 184-189.

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