

The Level of Depression and Irrational Thoughts Among Mothers of Children with Autism Spectrum

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Abstract

This study aimed to identify the depression and irrational thoughts level among mothers of children with autism spectrum in Jordan. The researcher applied the descriptive method, and the study population consisted of all the mothers on the autism spectrum who are constant visitors of the Autism Academy of Jordan and have children inside the academy. The sample consisted of (40) mothers of autism spectrum children who were chosen intentionally. The researcher employed the Irrational Beliefs Scale that was used in Al-Nawasreh's study (2017), which consists of 40 items to measure irrational beliefs. Test-retest procedures calculated the scale reliability by calculating Pearson Correlation Coefficient, which amounted to (0.90). Furthermore, reliability was also verified through the internal consistency according to the Alpha Cronbach equation, where the reliability coefficient reached (0.98). Beck Depression Scale was also used (Abdel Khaleq, 2015 translated that), which is valid, reliable, and suitable for the Jordanian environment. The scale consists of (21) items, and every item consists of 4 statements. The study results showed a medium level of irrational thoughts and a medium level of depression among the mothers of children on the autism spectrum. The results also showed a clear relationship between irrational thoughts and the existence of depressive disorder in the mothers.

Keywords: *Depression Level, Irrational Thoughts, Autism Spectrum.*

Introduction

People with special needs are a category of the society representing no less than 10% of it. The disability has its impacts, whether acquired or by birth, on the disabled person and the family. Therefore, the family encounters emotional and behavioral changes and psychological, social, and economic pressures. The family's reactions toward the disability emerge in the form of emotions and behaviors that usually start with a shock and through the inability of the family to deal with the new situation. Then it develops to the denial stage, which is represented by the inability of the parents to believe in what is happening. Then the family experiences a state of feeling guilty, believing that it is the cause of this child's disability, whether because of a lack of following up on the child's condition or neglecting the mother's health. In addition, the family goes through a state of sadness, depression, loss of hope, despair, and fear for the child's future, as well as a state of anger toward the self or others. Finally, it faces a state of bargaining, surrender, and coexistence with the situation (Al-Rihani et al., 2019).

The autism spectrum child's mother faces great amounts of psychological stress, tension, anxiety, and depression, which create a high level of psychological disorder, particularly the depression represented by high levels of sadness, feelings of distress, low effectiveness, loss of interest in things, and obsession of suicidal thoughts (Al-Mushref, 2015).

Due to the psychological disorders that the mother suffers, she tends to avoid others and to social introversion instead of interacting with them. This is clear in the irrational thoughts she holds that reflect her fear of a stigma and how the community views her and her child. The presence of an autistic child leads to more tension and depression, which negatively affects the marital relations, in addition to the irrational thoughts that are clear in the talks of the family members, especially the mothers, as they show a feeling of

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defeat, inferiority, and exaggeration of unpleasant things. The family also freezes both the tasks and facing responsibilities and shows a loss of independence (Al-Rihani et al., 2019).

Normal children are known for their natural childhood characteristics, while children on the autistic spectrum differ in that they are withdrawn, tend not to share with others, and do not like to integrate into the social environment. This issue is an actual problem for them and their relatives as well. For instance, it is quite natural to see normal children play together and interact with others through play with all pleasure. Meanwhile, we find children with autistic spectrum disorder playing and laughing alone during their play. They do not share their play and have a different way from healthy children due to the neurological defect in the nervous system of the autistic child (Al-Qamsh, 2017). Sa'afan (2017) defines autistic children as a group of children who were diagnosed suffering from autism spectrum disorder by one of the scales employed to diagnose the autism spectrum in one of the early diagnosis centers in Jordan, according to the Behavior Rating Scale of the autistic children. These children are those who show a clear deficit in the verbal communication skills, nonverbal communication skills, joint attention, eye contact, imitation, listening, and understanding, pointing to what is desired, distinguishing and understanding facial expressions and tone of voice indicating them, as measured by the Behavior Rating List for the autistic child. The autism spectrum impedes the individuals' social, verbal, and nonverbal communications, as well as their imaginative activity and mutual social interaction. This disorder surfaces during the first three years of the child's life, with its symptoms pretty evident in the first thirty months when it begins to develop abnormal behaviors, repetitive patterns, and autism (Helal, 2017).

The family plays a major role in coping with the autism disorder because the family is the first environment that sees the child and controls its activities. Thus, it is essential to develop family skills to deal with the autistic child and train it, especially the mother, because she is the first communicator with the child. This training is essential in any treatment program for autistic children (Mustafa & Al-Sharbini, 2011).

The mother needs to train extensively so that she can master the appropriate methods and ways for teaching her autistic child academically and dealing with it psychologically. In addition, we should not neglect the need for parents to be trained in the ways and methods that enable them to socialize with the autistic child according to his level of performance. (Al-I'nizi, 2020).

Abdel Ghani (2009) confirms a positive relationship exists between the high levels of psychological pressures and depression and sadness among the parents of autistic children. In general, there is a pool of pressures that prevail among the parents of these children, such as psychological and psychosomatic symptoms; feelings of despair and frustration; psychological and cognitive problems of the child; family and social problems; concern about the child's future; problems of the child's independent performance; and inability to bear the child burden.

Moreover, deficiency in the social skills of the autistic child increases pressure on the parents and the family, as the family members lack the appropriate skills to spend their free time. They often need a fixed schedule of their times, which is not found in their homes. Therefore, families are forced to change their daily routines, increasing their familial burdens compared to the parents of typical children (Kasari & Sigman, 2004).

Predicting the pressure that the autistic child's mother experiences comes through the child's behavioral problems and her husband's depression level. Meanwhile, the pressure that the autistic child's father experiences are predicted through the depression level of the mother only. Fathers place more assertion on their role as a definite source of support and encouragement for their wives. On the other hand, mothers with high self-confidence showed less pressure related to the negative impacts (Busch, 2007).

The family generally suffers throughout the several life stages from many events, such as birthdays and vacations. The autistic children's mothers particularly suffer from hard times due to the continuous attempts to avoid or terminate the undesired thoughts, feelings, or memories that are connected with the presence of an autistic child in the family, which in turn burden the mother with the first and foremost responsibility

to take care of this child and fulfill its needs. This further leads the mother to become easy prey to many psychological disorders, especially anxiety, depression, loneliness, and loss (Atiyyeh, 2011).

Bouma and Schweitzer (1990) compared the mothers of autistic children, mothers of children with motor disabilities, and mothers of healthy children. They found that the mothers of the autistic children suffered more neurological fatigue due to the problems linked with the child's cognitive development, the need for continuous supervision, and the child's constant dependence on care.

The behavioral problems of autistic children are among the noticeable influences that are associated with psychological stresses. The study of Asfoor (2012) revealed the psychological stresses of the mothers of autistic adolescents and found that these pressures increase with the adolescent age of the autistic; and that there is a relationship between the behavioral problems of the child and the mothers' exposure to depression. This is because the inappropriate emotional responses resulting from the mother's depression affect the interaction between the mother and the child. The study also showed a decrease in autistic children in terms of language, eye contact, increase in aggressive behavior, in addition to an increase in the child's frustration.

The autism spectrum in itself, in its current form, is still in a relatively recent era, as the references are very few in this area. However, many studies agreed that Kanner was the first to indicate the autism spectrum as a disorder that occurs during childhood. In 1943, he published his distinguished study about psychological communication problems and autism spectrum disorders. Following the study's publication, this type of childhood disorder was termed "the early autism spectrum in childhood". After that, many other terms followed (Mustafa & Al-Sharbini, 2016).

Mothers of autism spectrum children suffer from several disorders, such as anxiety, aggression, and lack of attention, which are directly related to the severity of the children's behavioral symptoms that are the most important reasons for the mother's suffering from the pressures (Al-Nawasreh, 2017).

The beginning of the twenty-first century witnessed noticeable interest in looking into the care of autistic children and their families, especially their mothers. The interest increased in the problems and needs of these women, and this interest was crystallized in conducting studies and research that dealt with these problems, needs, and pressures, as well as their experiences in dealing with them. In addition, promoting positive adaptation among the mothers of autistic children is an essential issue because they suffer from fatigue, depression, and anxiety. Working on giving the mother certain positive qualities, such as acceptance, optimism, hope, feeling of consistency, and adopting a positive view on life, reduce stress and depression. Therefore, recent research works began shifting the focus from examining the harmful factors to factors that affect the mothers (Al-I'nizi, 2020).

The interest in the needs of the mothers of children with autism spectrum disorders became one of the modern directions in both special education and family counseling. Mothers play a major role in providing care to autistic children. Subsequently, knowing the degree of these needs may contribute to the design of familial counseling programs that work toward self-confidence development and help in overcoming the psychological pressures and emotional challenges resulting from the presence of an autistic child in the family (Ellis, 2004). Psychotherapists believe that irrational thoughts are the thoughts that some people perceive inaccurately. Most often, these patterns of thinking reinforce the negative thoughts or feelings; the irrational thoughts tend to overlap with how the person looks at certain events. Since the individual's sensing method interferes with his thinking method, these thoughts can nurture negative emotions and lead the individual, who is affected by irrational thoughts, towards a generally negative view of life. As a result, these irrational thoughts distort the individual's perception of reality and understanding of events mostly negatively. In turn, they cause psychological burnout and permanent social isolation and directly and negatively affect performance and abilities; the individual finds himself unable to achieve and realize the anticipated objectives (Al-I'nizi, 2020).

Understanding the levels of these thoughts and areas is of significant importance for educators, counselors, and special education institutions, to focus on the weaknesses and treat them to achieve the social

adaptation and psychological adjustment of the autistic child's family. In this regard, Ellis (2004) sees a pool of irrational thoughts, beliefs, and pertinent suppositions as responsible for the emotional disorders. This is because when people accept the disorders and deviations that embed irrational thoughts, they tend to be depressed, aggressive, anxious, guilty, ineffective, self-introverted, and unhappy. They will not develop these emotional disorders if they attempt to help themselves eliminate these irrational thoughts (Taher, 2015). The inaccurate beliefs are a group of irrational beliefs that the individual uses to alter the characteristics and experiences he receives from the surrounding environment, which leads to feeling sad. They are the thoughts that lack the sound logics the individuals adopt as unrealistic, impossible, and perfect goals (Ellis, 2004).

This study is very important, as it deals with a susceptible and often ignored population, namely the mothers of the children with autism spectrum disorders. Mothers are usually at the center of daily care and support for their children, so that their well-being has a direct bearing on the quality of the care provided. The level of depression and irrational thoughts among the mothers can be perceived from this study, which puts into light the emotional and psychological burdens carried by these mothers. Understanding the prevalence and the associated correlation between depression and irrational thinking informs the formulation of mental health interventions targeting such mothers as a way of alleviating their distress and enhancing their ability to cope with challenges associated with raising an autistic child.

This study is important for raising awareness among mental health professionals, educators, and policymakers about the needs that this particular group faces. Considering the high demands these mothers face, findings from the study can be used in informing the development of support systems for them in areas like counseling services and community-based programs for unique challenges. It also supports the need for early intervention in mental health disorders that could prevent these long-lasting psychological problems, thus benefiting not only the mothers but also the whole family atmosphere and the development of a child with autism.

The Study Problem

Many studies (Abu Zaid, 2017; Al-Jalamdeh, 2017; Yahia, 2017; and Al_Qamsh & Al-Saideh, 2016), in addition to plentiful data on the psychological literature, proved and confirmed that the autistic children's mothers face multiple psychosocial problems, disturbances, influences and pressures, which are related to the hard situations they live in the shade of their direct contact with the disorders of their children. Most probably, the psychological problems are multiple depending on the factors that cause them. For instance, irrational thoughts with the associated disorders can increase the psychological disorders and self-burnout, which may make the mother socially isolated from the others and the community due to the autism problem and feeling ashamed of the appearance of her autistic child in front of the others. Therefore, our current study revealed irrational thoughts and depression among autistic children's mothers. Specifically, the study attempted to answer the following two questions:

What is the depression and irrational thoughts level among a sample of autistic children's mothers?

Is there a relationship between depression and irrational thoughts among autistic children's mothers?

Significance of Study

The significance of this study is that it targeted an essential category of the community, i.e., the mothers of autistic children. It also aimed at drawing the attention of the specialists and stakeholders to identify the level of depression and irrational thoughts among a sample of autistic children's mothers.

This study provides a good learning experience for practitioners and researchers in the fields of psychology, counseling, and special education. The investigation into the association between depression and irrational ideas demonstrates some of the cognitive and emotive processes that predispose this group to unsatisfactory states of mental health. This can better allow practitioners to formulate more specific therapeutic interventions directed at irrational thinking—a major determinant of emotional disorders,

including major depression. Thus, cognitive-behavior methods might be tailored to allow mothers specifically to challenge and reappraise their irrational beliefs in a manner that reduces symptoms of depression and improves their coping responses.

This research extends the knowledge of how mental health affects parents not only themselves but also the child with autism. This can also be used to bring even greater sensitivity into training counselors and educators working with families dealing with autism; making sure holistic care attends to the emotional needs of the parents. The current study has opened a new direction for the researcher to investigate the interaction of cognitive distortions and emotional disorders within the context of taking care of a child with special needs as a potentially modifying variable and refinement of theories and models in the sphere of mental health.

Previous Studies

Al-Graiti & Öz (2024) in this descriptive study aimed to examine the frequency of mental health issues among Iraqi moms whose children attend an autistic facility. Two hundred and eighty-eight mothers participated in the research that took place at Iraq's Dhi Qar Autism Centre between September 2022 and May 2023. The participants filled out a Personal Information Form and filled out the Depression Anxiety Stress Scale to contribute to the data set. The majority of participants were literate, had two children, and were 40 and up, according to the data. They also reported struggling to meet their financial obligations. Mothers showed signs of mild stress, severely increased anxiety, and high despair. Depression and anxiety were found to have a strong positive relationship ($r=0.647$, $p<0.001$), while stress and depression showed a slight positive correlation ($r=0.219$, $p=0.001$). In conclusion, healthcare providers should provide mothers with preventative, therapeutic, and mental health services. Research like this shows how important it is to help moms who have autistic children deal with their own mental health.

Abdelaziz et al. (2024) highlighted the importance of problem-solving evaluation in reducing distress via CBT in this study's assessment of a tailored CBT program. A total of sixty moms were divided into two equal groups: one that received cognitive-behavioral therapy intervention and another that received no such treatment at all. From October 2022 through April 2023, the CBT group met for three months to go over a CBT curriculum that included problem-solving appraisal training. In order to reduce stress and improve the capacity to handle difficult situations, problem-solving approaches teach people how to recognise problems, formulate solutions, and implement them. The mothers were assessed for age, education level, marital status, occupation, and family income sufficiency, among other socio-demographic characteristics. Prior to and during the program, they were also given the Depression Anxiety Stress Scale (DASS-21) and the Problem-Solving Inventory (PSI). From before to after the session, the CBT group showed considerable decreases in depression, anxiety, stress, and total psychological distress when compared to the control group (all $p < 0.05$). They showed significant improvements in their abilities to solve problems, their way of approaching problems, and their sense of personal control (all with $p < 0.05$). When Egyptian moms whose children were diagnosed with autism spectrum disorder (ASD) participated in the personalised CBT therapy, their mental health improved dramatically. It is possible that the benefits of CBT could be amplified across various cultures by including problem-solving approaches. The implementation of evidence-based support services for families impacted by ASD on a worldwide scale is affected by these findings.

Ede et al. (2022) Depressive symptoms in parents of children with intellectual disability of Down syndrome during the COVID-19 pandemic were studied to determine the efficacy of the family health model of rational-emotive behavior therapy. In this study, 88 parents of children with intellectual disability due to Down syndrome participated as a control group in a randomized pre-posttest design. Using the Beck Depressed Inventory and the Hamilton Depression Rating Scale, we assessed parental depressive symptoms at Time 1, Time 2, and Time 3. When dealing with the parents' depression, we used a REBT-based family health model intervention. Covariate analysis revealed no significant difference in participants' depressed symptoms between the treatment and comparison groups at baseline evaluation. Participants' depressed symptoms decreased significantly after the intervention, as measured by the posttest. A similar outcome from a follow-up study demonstrates that the intervention still significantly reduced participants' depression

symptoms. In conclusion, this study provides evidence that the treatment variable was responsible for the observed improvement in participants' ratings of their depression symptoms.

Papadopoulos (2021) research aimed to learn more about the challenges faced by Greek mothers raising children with autism spectrum disorder. Researchers conducted semi-structured interviews with nine mothers of children with ASD. The interviews were evaluated using interpretive phenomenological analysis, which involved reading and rereading the transcripts. The research pointed to three interwoven themes: (a) personal emotional burden, (b) family hardship, and (c) social weight. One significant finding was that the moms felt a heavy load, emotional discomfort, and a sense of helplessness. These results shed important light on the challenges faced by mothers in one of Europe's middle-income countries as they care for children diagnosed with autism spectrum disorder. More than that, academics, doctors, mental health providers, and policymakers can use the findings to better understand and meet the specific requirements of families who are providing care for and support to children with ASD.

Ugwuanyi et al. (2022) The primary purpose of the research was to measure the prevalence of psychopathology, specifically parental depression, among children who had intellectual and reading difficulties. Control groups of 198 parents (99 fathers and 99 mothers) of 100 children with an IRD diagnosis participated in a pre- and post-test design. Information was gathered using the Beck Depression Inventory (BDI). Analysis of variance (ANOVA) with repeated measurements was used to examine the data. Parents of children with intellectual and reading difficulties were shown to have significantly higher rates of depressive symptoms than the general population. Also, parents in the treatment group showed a statistically significant decrease in depression after receiving the REHT intervention compared to parents in the control group. It is not the presence of a child with intellectual and reading problems that causes parents to become melancholy, but rather illogical ideas about such deficits that might lead to unhealthy ways of thinking and feeling about the future of their children. When used with depressed parents of children with intellectual and reading impairments, REHT can help them think more rationally about their children and overcome illogical ideas related to the children's disabilities and their conduct. Counselors, therapists, and other mental health professionals should use the REHT to help manage the emotional distress of their clients, particularly the depression that may affect the parents of children with learning difficulties.

Alenezi et al. (2022) The purpose of this study is to examine the degrees of burnout, anxiety, and depression among HCWs whose primary job duties involve assisting children with autism spectrum disorder (ASD). We used the Arabic translations of the Maslach Burnout Inventory (MBI), the Areas of Worklife Survey (AWS), the Patient Health Questionnaire for Generalized Anxiety Disorder (GAD-7), and the Patient Health Questionnaire for Depression to perform a quantitative cross-sectional study (PHQ-9). The majority (326) of the 381 participants were young Saudi women working full-time in the commercial sector as specialists in autism who had less than five years of experience. There was a significant difference between the HCWs' mean scores on the three subscales of the Maslach Burnout Inventory (MBI): emotional exhaustion (EE), depersonalization (DP), and personal accomplishment (PA). Overall, 51.4% of HCWs scored high on the GAD-7 and 47.8% scored high on the PHQ-9, indicating that they both suffer from moderate to high levels of anxiety and depression, respectively. Their overall mean reported satisfaction with AWS converged strongly but negatively on their mean felt EE ($p < 0.001$), showing that more emotional exhaustion predicts less happiness with their work. The PA scores had a positive and statistically significant relationship with the subjects' mean level of contentment with their AWS scores ($p < 0.001$). With respect to demographics, HCWs between the ages of 20 and 29 have considerably lower mean PA scores than their older counterparts ($p = 0.007$). In addition, male HCWs reported considerably higher work-related DP than females. More study is needed to identify the specific factors that put health care workers who work with children who have autism spectrum disorder at risk for burnout, depression, and anxiety.

Ede et al. (2022) In light of the current global COVID-19 pandemic, the study's authors investigated how the family health model of rational-emotive behavior therapy affected depressed symptoms among parents of children with intellectual disability of Down syndrome. In this study, 88 parents of children with intellectual disability due to Down syndrome participated as a control group in a randomized pre-posttest design. Using the Beck Depressive Inventory and the Hamilton Depression Rating Scale, we assessed parent

depressive symptoms at Time 1, Time 2, and Time 3. In order to alleviate the parents' depression, we used a REBT-based family health model intervention. At baseline, participants in both the treatment and comparison groups had similar levels of depressive symptoms, as determined by analysis of covariates. Intervention significantly reduced depression symptoms as measured by posttest. A similar outcome from a follow-up study demonstrates that the intervention still significantly reduced participants' depression symptoms. Overall, the results of this study indicate that the treatment variable was responsible for the observed improvement in participants' ratings of their depression symptoms.

Alghamdi et al. (2022) Researchers in this study examined the mental health of moms of children with ASD with typically developing children through a quantitative cross-sectional survey. The researchers also looked at whether or not feeling supported by others correlates with happiness. Study participants included 143 moms of children with autism spectrum disorder (ASD) and 143 mothers of typically developing children (typically developing group). The Multidimensional Measure of Perceived Social Support and the 21-item Depression, Anxiety, and Stress Scale (DASS-21) were used in an online survey to collect information about maternal mental health and social support, respectively (MSPSS). As the data revealed, the rates of despair and anxiety were similarly low in both study groups. However, 23.1% and 27.3% of moms in the ASD group had extremely high levels of depression and anxiety, compared to 11.9% and 16.8% of mothers in the control group, respectively. Alternatively, the stress levels of the two groups are very different from one another. One-seventeenth of moms of children with ASD reported experiencing "very severe stress," compared to only 6.3% of mothers in the control group ($p = 0.04$). Last but not least, the researchers discovered a strong link between MSPSS and stress, anxiety, and depression ratings. It is advised that efforts be made to both provide mental health assistance to moms in need and to investigate the causes of extraordinarily high rates of depression and anxiety.

Method and Procedures

Methodology

The researcher applied the descriptive methodology as it most suited the nature and objectives of our study.

Population and Sample

The study population consisted of all the autistic children's mothers in the Autism Academy of Jordan, and the sample comprised (40) autistic children's mothers.

Sampling Method

A purposive sampling method was utilized in this study. The population included all mothers of children with autism spectrum disorder who frequently visited the Autism Academy of Jordan and had their children enrolled in it. The sample of 40 mothers has been intentionally selected from this population. It can be assumed that the reasons for using purposive sampling might relate to the accessibility of this particular group and to their relevance regarding the purposes of the study.

Study Instruments

Beck Depression Scale: which was translated by Abdel Khaleq (2015) was used as it enjoys both validity and reliability and suits the Jordanian environment. The instrument includes (21) items: sadness, failure, feelings of guilt, lack of self-love, suicidal ideation or desire, irritability or agitation, hesitation, loss of energy, susceptibility to anger or irritation, difficulty in concentration, loss of interest in sex, glumness, loss of enjoyment, feelings of punishment, self-criticism, weeping, loss of interest, worthlessness, excess or lack of sleep, poor or increased appetite, tiredness, and fatigue.

Correction of Beck's list is made by gathering the ratings the examinee allocates for every item in the list, and every item consists of four phrases, which degrees are (0-3), and the maximum total score of the list is (63). Depression levels are categorized as per the following degrees: (0-20): no depression; (21-31): there

are mild depression symptoms; (32-42): there are moderate depression symptoms; and (43-63): there are severe depression symptoms, above the average level.

Furthermore, the researcher applied the Irrational Thoughts Scale, which was used in the Study of Al-Nawasreh (2017), and consisted of (40) items, which also enjoys validity and reliability and fits the Jordanian environment. The correlation coefficients of the scale with the total degree were obtained in an exploratory sample (n=40) from outside the study sample. The correlation coefficients with the instrument, as a whole, ranged between (0.32) and (0.76). The Scale reliability was also calculated using the test-retest method by calculating Pearson Correlation Coefficient, which amounted to (0.90). Furthermore, the reliability coefficient was also obtained through the internal consistency according to the Alfa Cronbach Equation, which amounted to (0.98), i.e., values suitable for this study's objectives.

Statistical Processing

The researcher obtained the means (M's) and standard deviations (S.D.'s) of the respondents' scores on the Beck Depression Scale and Irrational Thoughts Scale, as well as the Pearson Correlation Coefficient between the scores of both Scales.

Results and Discussion

Results of Question One: What is the level of depression and irrational thoughts among a sample of autistic children's mothers? To answer this question, the researcher obtained the M's and S.D.'s of the scores of the sample participants on both scales of depression and irrational thoughts, as illustrated in Table (1).

Table (1). M's And S.D.'S Of the Sample Participants' Scores on The Depression and Irrational Thoughts Scales

Scale	M	SD	Degree
Depression	45.97	9.63	Over the Medium
Irrational Thoughts	10.67	79.10	Over the Medium

Table (1) shows a level slightly higher than the medium on depression and irrational thoughts scales among mothers of autistic children. The reasons are the psychological stresses that burden the mother, starting with care for these children, fear, anxiety for them, and fear of their future. In this concern, many studies emphasized that most autistic children's families suffer from disorders, such as anxiety and depression, due to the irrational beliefs that dominate them, especially the painful memories associated with an autistic child inside the family. This entails the mother burdening the childcare's first responsibility and fulfilling its multiple and endless needs. Moreover, the mother suffers severe sadness because of losing a natural child, which the family imagined would be, in addition to a global change in the lifestyle. As a result, the mothers express a higher emotional level of feeling angry, depressed, and guilty due to their children's disease, who have high levels of behavioral problems, such as agitation, crying, inappropriate talking, inability to follow instructions, and an inability to communicate with others. In addition, mothers have a lot of irrational thoughts, such as (why me?), (I am the reason), (life is unjust), and (future is gloomy), as well as many other thoughts that fetch more sorrow for her and her family.

These results align with the study of Asfoor (2012), which indicated that the level of psychological pressure on autistic children's mothers falls within the medium. In addition, the results are in line with the studies of Imtair & Al-Zulaitani (2015); Al-Khateeb (2009); Al-Mutairi (2006); Malkoush & Yahia (1995), which all indicated the existence of a degree of depressions, adaptive problems, psychological pressures, sufferings of the fathers and mothers, family disintegration, and worry about the future.

Results of Question Two: Is there a relationship between depression and irrational thoughts among autistic children's mothers? In order to answer this question, the researcher extracted the values of the Pearson Correlation Coefficient among the scores of the sample participants on both scales of depression and irrational thoughts, as stated in Table (2).

Table (2). M's, S.D.'s, and Correlation Coefficient of the Sample Participants Scores on Both the Depression and Irrational Thoughts Scales

Scale	M	SD	Correlation Coefficient	Sign.
Depression	45.97	9.63	0.63	0.01
Irrational Thoughts	79.10	10.67		

Table (2) indicates a correlation relationship among the scores of the sample participants on both the depression and irrational scales amounting to (0.63), which is statistically significant at the ($\alpha=0.05$) level. This result shows that the depression levels among autistic children's mothers increase with the increase of their irrational thoughts among them. This, in turn, ascertains that irrational thoughts cause many bad reactions, which are reasons underlying our feelings. Ellis (2004) emphasized that psycho-emotional disorder results from irrational and illogical thoughts. Emotion is biased thinking of a subjective, high, and illogical nature. These irrational thoughts distort the individual's perception of reality and understanding of events mostly negatively.

Consequently, the individual finds himself sunk in worries and a pessimistic view of the self, the future, and the world. When the individual is subject to a specific problem due to the negative thoughts that lead him to the "Depression Triad," he indicates that he holds evil thoughts about himself (I am bad). Such thoughts lead him to feel low self-esteem, low self-confidence, difficulties in relations, and resistance to any work that leads to improvement. As for the evil thoughts of the world, the depressed person does not see the actual life course and perceives others negatively and critically, in addition to the negative view of the future, which puts him in extreme despair of improvement or better expectations. The results of this study are in line with the studies of Al-Shawashreh & Mahmoud (2014), Haseeb (2005), Marcott (1996), and Hayslip et al. (1994), all of which confirmed the existence of a correlation between depression and irrational thoughts among the individuals.

Limitations

The study has several limitations. First, bias existed due to how the researcher chose the study sample. Second, the results are generalizable only to the target population and to the same setting (all the mothers on the autism spectrum who are constant visitors of the Autism Academy of Jordan). Finally, the results of the study were based on the perspective of the participants themselves. However, an instrument of this study needs to be further developed and tested on a wider group of different subjects to figure out the broader and more significant implications of its suitability and reliability and to identify the level of depression and irrational thoughts among mothers of children with autism spectrum in Jordan in a larger context. Therefore, further research is suggested to touch on this issue.

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