

SPIRITUAL WELL-BEING AS PREDICTOR OF PARENTING STRESS AND SOCIO-ECONOMIC BACKGROUND AS MODERATOR IN MOTHERS OF CHILDREN WITH AUTISM

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ABSTRACT

Objective: Parents with autistic children often experience parental stress because caring for them requires different treatment compared to caring for healthy children. Spiritual well-being is one of the factors that can reduce parenting stress levels. The purpose of the current study was to explore the relationship of parenting stress and spiritual well-being as a protective factor for parenting stress and socioeconomic status that thought to influence the relationship between the two.

Methods: This research is a quantitative study using a purposive sampling technique. Participants in this study were 42 mothers who have autistic children. The data collection method in this study was used a spiritual well-being scale, parenting stress scale, and a socioeconomic status questionnaire test. Analysis of data using moderated regression analysis (MRA).

Results: The results showed that parenting stress has a significant negative relationship with spiritual well-being and parenting stress ($B = -0.686$; $p < 0.05$). However, the moderate effect was not found on the socioeconomic status variable with spiritual well-being and parenting stress ($B = -0.014$; $p > 0.05$).

Conclusions: Spiritual well-being has a negative and significant relationship to parenting stress. It shows that if the subject has a high spiritual well being, the parenting stress is low and vice versa. Then if there are socioeconomic status factors that enter, it can not strengthen the spiritual well-being and parenting stress relationship. It shows that the social-economic level of the subject does not affect the level of spiritual well being or parenting stress on the subject.

Keywords: Spiritual well-being, parenting stress, Autism, Socioeconomic status

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I. Introduction

Caring for children with special needs is not easy. Different treatment and specialized care for children with autism who have complex conditions different from healthy children are what makes parents stressed. The term "stress" refers to negative emotional experience is accompanied by predictable physiological, cognitive and behavioral changes, which lead to changes in understanding situations and pressing abilities to deal with (Bawalsah, 2016; Hayes & Watson, 2013; Carpenter et al., 2018). This definition has implications for an individual's perception of stress depending on the personal explanation of the situation, namely stress arising from cognitive processes by individuals to evaluate their potential to determine whether they are sufficient to deal with the demands of stressful situations (Bawalsah, 2016). Stress is a condition where there is a pressure on the body of an individual or organism so that he can adjust (Reilly et al., 2018; Bromley et al., 2004).

Dabrowska & Pisula, (2010) and McCubbin and Patterson, (1983) states that stress will arise when there is an insuperable tension. According to him, stress occurs in families is not stereotypic but varies depending on the nature of the situation, the characteristics of the family unit, and the psychological and physical well-being of its members. Parenting stress is the pressure experienced by parents in caring for their children (Dabrowska & Pisula, 2010), experienced by parents of autistic children when parents are unable to deal with the pressures that exist when caring for their children, especially when helping adapt children in various activities such as school, health and therapeutic centers, managing learning ,treatment, and contacting teachers. While parenting stress is the result of a series of assessments that parents have on the child's parenting role and a psychological reaction originating from the pressure experienced by parents in parenting (Deater-Deckard, 1998; Abidin, 1990; Craig et al., 2016). Parenting is a pressure when parents have less knowledge, less competence, and less emotional and instrumental support (help from friends, family members) (Kuhn & S, 2016). Sharpley et al., (1997) express the same definition, which states that parental stress is pressure experienced by parents when trying to care for children with the most significant sources of stress coming from: (1) permanent conditions ; (2) rejection of children's behavior from the community and family members; and (3) inadequate professional support.

Mothers mainly experience parenting stress as primary caregivers. (Deater-Deckard, 1998); (Roy & Sreenath, 2017). The study of Bromley et al., (2004) found that over half of mothers of children with autism from 68 mothers as participant screened positive for significant psychological distress. Giovagnoli's (2015) study shows that stress related to parent and child relationships influenced by social and cognitive skills, the abilities needed to build functional interactions with caregivers. Some mothers have to make much effort to care for their children, and sometimes their efforts come to no success at all, this condition reduces the motivation and interest of mothers in caring for children. Sometimes mothers feel hopeless, helpless, guilty, every time they have bad moods, isolated, lack of interest in doing activities, irritability and lack of recreational activities (Abbas et al., 2016). The difficulty of caring for children with special needs, especially children with autism disorders, is a challenge for parents, mainly so they do not experience stress that will hinder their task as parents.

Several studies have revealed that stress levels in parents who have autistic children are higher than stress levels in parents who have other developmental disabilities like Down Syndrome, Cerebral Palsy, and Global Developmental Delay (Bromley et al., 2004; Blacher & McIntyre, 2006; Hayes & Watson, 2013; Somasekhar, 2017). Research by Sharma and Das, (2015) which states that 70% of mothers who have autistic children experience higher levels of stress than fathers who have autistic children. This condition is because mothers are usually more involved in parenting than fathers working harder to support their family's financial needs.

Autism is a developmental disorder that appears early in childhood with severe and long-term effects for affected individuals and their families (Somasekhar, 2017); a complex developmental disorder that dramatically affects the lives of patients, family, and a broader community, usually diagnosed in children before three years (Altevogt et al., 2008) and will last a long time which affects human behavior such as social interaction, the ability to communicate ideas and feelings, imagination, and establish relationships with others (Abidin, 1990; APA, 2012). interests and activities for individuals which done repeatedly or present of unusual behavior pattern; impaired developments in verbal and nonverbal communication skills and social interactions, and stereotypes, make repetitive movements without having goals such as rotating objects repeatedly, moving or flapping hands, swinging the body forward and later with the position of the hands hugging the knees. Besides, some autistic children like to hurt themselves such as banging their heads, pulling their hair, slapping their faces, until biting (Hallahan & Kauffman, 2006; APA, 2012; Huang et al., 2014) and environment as a significant role in triggering autism by through interaction with genetic susceptibilities (Altevogt et al., 2008).

This research is important given the increasing number of children with special needs in Indonesia. In 2015 there were an estimated 12,800 children with 134,000 with the spectrum of autism. In 2017 it reached 1.6 million people and increased to 2.4 million in 2018 with an additional 500 people per year with a ratio of every 1000 population there were 10 cases of children with autism (National, 2018). According to epidemiological studies, the median score of this disorder is five cases per 10,000 individuals, and in other reports, there are 2 to 20 cases per 10,000 individuals. (APA, 2012)). This amount is quite large and needs special attention. Especially on how to prepare the readiness of parents in caring for children with autism in order to manage parenting stress levels. According to Dabrowska & Pisula, (2010) The demand related to raising a child with autism is particularly high because parents experienced the most significant sources of stress as permanency of autism's condition, disapproval for the child's behavior demonstrated by the society and family members; and insufficient professional support (Sharpley et al., 1997). Autism's families in Indonesia have the same experienced. They have difficulty diagnosing children's disorders before the age of 3 years, limited therapists so that the high cost of therapy, the lack of government programs that intensively deal with children with autism, and negative views of the environment towards families related to the child's condition. It is the same as parental conditions in Poland where families have difficulty accessing therapy and the absence of government programs of intensive early intervention (Dabrowska & Pisula, 2010).

The study of Abidin (1990) found that the high stress of parenting experienced by mothers who have children with special needs, especially autism, can be influenced by three main aspects, namely Parent domain, Child domain, and Parent-Child relationship. Parent domain aspect includes their ability to care for children, feelings of lack of social support, parents' reactions to their children's needs, feelings of guilt, and depression. The child domain aspect includes the ability of children to adapt to their environment, the demand for children who always need help, children's emotions, children who have difficulty obeying orders. The last aspect is the Parent-Child relationship aspect were the feelings of parents who feel there is no positive reinforcement from their children, the condition of children who do not match the expectations of parents, the lack of attachment between parents and children and feeling unsupported and stigmatized by a member of the community and unable to communicate with a reciprocal relationship with their children and they did not know how to solve this problem (Falk et al., 2014).

Bonab et al., (2017); Weiss et al., (2014) revealed several factors that trigger parenting stress. The first is demands derived from various factors, inherent abilities, including health problems, children's emotional problems, and care. Children's behavior can also affect parenting stress, where the behavior of children who cannot be controlled by themselves and the need for supervision from parents. So much parent time used for children than outside activities such as the time that they should use to gather with friends or during breaks can no longer do by parents who have autistic children. Children's behavior that can lead to unstable emotions can cause parents to experience mental stress, disappointment, sadness and may feel angry. When children enter school, children's behavior problems are present in the school environment. Autistic children can be the target of bullying for healthy children apart from children's achievements that are difficult to follow children's learning in general. The second factor, this "internal ability," refers to the coping abilities possessed by parents, especially mothers. When mothers are unable to overcome they experience in the care process, then the mother will feel that she is not competent, and that will make parents confused and stressed. Another factor that can trigger parental stress is an external ability, for example, lack of support from others, both relatives and the government. Parents who have autistic children need positive support from those around them to be able to live a life of caring for their children (Firth & Dryer, 2013).

The subjective appraisal, which is a subjective assessment of mothers about their life status and their perception of the challenges of their lives by caring for autistic also a factor in the emergence of parenting stress. For example, when mothers perceive their lives negatively, which results in high-stress levels and the intensity of negative emotions such as the emergence of feelings of frustration, emotional instability, apathy, anxiety, and panic (Weiss et al., 2014; Bonab et al., 2017).

Giovagnoli et al., (2015) study revealed that significant predictors of parental stress were behavioral and emotional problems. According to him, stress conditions experienced by parents who have autism children can overcome by increasing the spiritual well-being of parents. Spiritually as a fundamental human experience and development and experience common to all people, culture, and religions (Ali et al., 2015) The results of (Roy and Sreenath's research (2017) show that spiritual well-being may move as a buffer for parental stress and can be a protective factor against parenting stress faced by parents in caring for their autism child. The burden experienced by parents that leads to the stress of parenting can overcome by drawing closer to God, who believed to be able to help someone overcome difficulties. This belief is called spiritual well-being.

Spiritual well-being is conceptualized as a configuration between two spiritual sources namely existential welfare and religious welfare (Ellison, 1983), as an essential factor in people and provide an answer for all the problem today (Hage, 2006). Lamis et al., (2014) revealed that spiritual well-being is a combination of extension welfare (the purpose and meaning of life) and religious (relationship with god). Existential well-being touches extensive spiritual resources related to individual awareness of purpose, meaning in life, ability to go beyond daily struggles, and find inner strength. Spiritual well-being is uniquely related to religious beliefs, practices, and relations with higher powers and often involves institutional affiliation (Fowler & Hill, 2004). Ali et al., (2015) found that spiritual well-being has a significant relation with quality of life. Although everyone can access existential resources to deal with stressors, not everyone embraces religion, using it as a way to overcome difficulties (Ellison, 1983). According to Ali et al., (2015) spiritual well-being is a belief system, a total relation between self and a god and as essential wholeness and intermingled between body, spirit and mind and all human experience that have two dimensions. The first is spiritual well-being (relation with God and heaven), and

Existential well-being (a sense of purpose and meaning in life) and characteristics of people who believe in spiritual well-being are satisfaction, feeling alive, and purposefulness.

Research by Lamis et al., (2014) shows that the existential and religious well-being of spiritual well-being has a positive correlation with lower levels of parental stress. Research Gallagher et al., (2014) found that spirituality is a mediator of social support and depression in parents who have children with special needs. Spirituality has a positive relationship with depression, where parents who have low social support and profound spirituality have higher levels of depression in caring for their children. Conversely, parents who have firm spirituality have low depressive symptoms. Research conducted in the United States shows that religion and spirituality provide health benefits, including reducing the impact of depression on satisfied parents (Bonab et al., 2017; Tarakeshwar & Pargament, 2001). Gupta et al., (2012a) found that the majority of their respondents turned to God when all paths and hopes were exhausted during the crisis, leaving everything to God's will. Study of Roy and Sreenath (2017) proves that spirituality and parenting stress of parents with special needs children have a significant negative correlation between spirituality and parenting stress of parents with special needs children where parental spirituality causes parental stress to be lower.

Spiritual well-being operations as a intermediary of stress and spiritual agency that a person feels through their relationship with God (Ali et al., 2015). When individuals have high spiritual well-being, they are able to accept and submit to God, and fight for their goals. So, when the individual receives pressures from outside and inside himself, he will give it to God and try to accept all the trials that exist. The results of Roy and Sreenath's (2017) research findings feature the different role played by spiritual well-being in alternating as a intermediary for parenting stress. The research emphasizes that the higher the spiritual well-being of parents, the lower the stress level they will involvement. Besides, a close relationship with God will bring up the power to overcome pressure. When they face subjective and extraneous needs, most parents identify spiritual ways to overcome pressures rather than escape them.

Besides, the condition of economic condition of parents is a factor triggering parenting stress and also thought to be another factor that can affect parental stress. The inability of parents to meet their needs will create stressful situations such as feelings of hopelessness that make mothers more sensitive to stressful events. Study of Rajner and Wrowniszewski (in Dabrowska & Pisula, 2010), family with low social economic status (SES) and those living in small towns and village has very minimal access to therapeutic help. The results of the study by Wilson et al., (2014) found that spiritual well-being as a mediator that influent parenting stress in Low-income family in African-American Families. Demographic factors mentioned include gender, ethnic group, religious group, socioeconomic status (SSE). Parents from the high SSE group experience more stress than the medium and low SSE groups. Gupta et al., (2012b) state that parents who engage in more profitable and prestigious jobs have more stress than parents who engage in less prestigious and profitable jobs regardless of their income work. Conversely, in several studies show that families with low SSE often face many stressors, such as financial uncertainty, distress, noise, household chaos, fewer family routines, and generally higher levels of uncertainty, all of which can contribute to increased stress for both parents and children (Adler & Snibbe, (2003); Combs-Orme & Cain, (2006); Evans et al., (2005)). Research Hatton (in Emerson, 2003) showed that families from minority ethnic groups and lone parents are particularly in families from minority ethnic groups, and lone parents are particularly at risk of facing significant economic disadvantage. Research by Pereira et al., (2015) proves that socioeconomic status is a strong moderator of the relationship between several risk factors and parenting

outcomes. Likewise with research and Dowd et al., (2009) prove that socioeconomic loss conditions lead to higher stress levels, both in behavior (for example, stress perception) and physiological level (for example, salivary cortisol). Jenkins et al., (2003) research found that the temperament of difficult children and negative care are strongly associated in families with low socioeconomic status. Likewise with the research of Deater-Deckard, Chen, Wang, and Bell (2012) research found that the temperament of finicky children and harmful care is strongly associated with families with low socioeconomic status.

More significant income and educational status can also provide higher social capital, indirectly affecting people's parenting strategies (Weiss et al., 2014) when parents have a significant income, the financial burden to raise children is getting smaller, so the economic pressure in parenting will be smaller. Besides, parents with good educational background have a better knowledge of parenting, compared to parents who lack educational background. The Family investment Model states that parents with high socioeconomic status have more capital to contribute to better child development outcomes, whereas parents in low-income families must pay more attention to essential and urgent needs for the family (Weiss et al., 2014). The aim of this research is (a) to know the relationship between spiritual well-being and parenting stress, (b) knowing whether socioeconomic condition can moderate the relationship between spiritual well-being and parenting stress.

This study designed to resolve the relationship between spiritual well-being and parenting stress with socioeconomic conditions as a mediator between the two in the parent of children with autism. Specifically, the study aimed to investigate the following research question:

1. Is parenting stress associated with spiritual well-being?
2. Is socioeconomic status as a mediator between parenting stress and spiritual well-being?

Two specific hypotheses for this study were: 1) There is a negative relationship between spiritual well-being and parenting stress, the higher the spiritual well-being, the lower the parental stress level, and vice versa. 2) Socioeconomic status can moderate the relationship between spiritual well-being and parenting stress, the higher the parent's socioeconomic status, the spiritual well-being of parents increases, and parental stress become low, and vice versa.

II. Experimental, Materials and Method

Participant and setting

As many as 42 mothers of autistic children attend an inclusive school in Malang. Through class teachers, they are asked to fill out informed consent, then given three scales that they fill while waiting for their children to go to school. The questionnaire was filled in by a research assistant. Of the 55 parents who asked to fill out informed consent, only 42 people were willing to take the time. To be included in this study, participants had to meet the following criteria: (a) having an autistic child aged 7 to 12 years, (b) aged over 20 years. As many as 42 mothers were willing to become participants with the age of 20-35 years as many as 17 people (40.5%), 25 people with ages 36-55 years (69.7%). They have autism children aged between 7-10 years as many as 32 people (76.3%) and aged 10-12 years as many as ten children (23.8%). This study uses a correlational research design (correlation research design). According to Creswell, (2012) the design of this study is a design that uses statistical correlation techniques to describe and measure the level of correlation between two or more variables or scores.

Procedure

This research consists of several stages, including the preparation stage. At this preparation stage, the researcher carefully prepares the instruments used. Tryouts or trials conducted by researchers using used tryouts, where the data took for analysis, is also the same data for testing the validity and reliability. It is due to the very minimum subjects obtained by researchers, and subjects used by researchers include minorities. Researchers managed to gather mothers with the autistic child as many as 42 people. Howitt & Cramer, (2011) mentioned that most of the studies used samples of more than 30 and less than 500. The research itself conducted in Lamongan District. The way researchers get the subject is to go to all SLB in Lamongan Regency to find out information on mothers who have autistic children. After getting this information, the researchers then distributed questionnaires to mothers who had autistic children following school data. Then after the user tries out is done, the researchers then carry out the data and do a calculation using SPSS 21. An analysis performed to determine the validity and reliability of the instrument. The way the researcher knows the wrong items is by comparing the corrected item-total correlation values (R arithmetic) that are in the item-total statistical table with the R table, which is worth 0.26. The item that is said to be valid is an item whose corrected item-total correlation (R count) is more significant than the R table's value. The reliability value saw from Cronbach's alpha in the reliability statistics table. After obtaining valid items and the scale reliability value, it continued by analyzing the correlations between variables and seeing whether the socioeconomic status variables can be moderate.

Measures

This study consists of three variables, namely independent, bound, and moderator variables. The variable that acts as an independent variable is the spiritual well-being variable. The parenting stress variable is the dependent variable and the socioeconomic status variable as a moderator variable.

Spiritual well-being is the level of the spiritual well-being of individuals, which is judged by the combination of religious and extensional welfare. An essential component in spiritual well-being is religious welfare and extensional welfare, which includes the relationship with God and the purpose of one's life. The instrument to be used for this variable is the modified scale of the spiritual well-being scale developed by Ellison, (1983). This scale consists of 20 items, ten items about religious welfare, and ten items about extension welfare. Items are scored from 1 to 6, with higher numbers representing better welfare, whereas ratings for items labeled negative are the opposite. Odd-numbered items evaluate religious/religious welfare, while even-numbered items assess existential welfare. The shape of the scale used is a Likert scale.

Parenting stress is a condition when parents experience stress resulting from parenting. There are three aspects, namely the parent distress, consisting of six indicators including competence pleasure, social segregation, the constraint appointed by parent roles, relationships with spouse, the strength of the parent, parent depression. Furthermore, the parent-child inhibited communication, consisting of three indicators, namely child reinforced parent, prominence of child to parent, attachment. Then the last is the difficult child, consisting of Child adaptability, Child demands, Child mood, District ability. The instrument used to measure this variable is the modification scale of the parenting stress index short form (PSI-SF) created by Abidin, (1983) and (Abidin, 1990). The items are 36 items; items 1-12 describe aspects of the parent distress, items 13-24 describe aspects of the parent-child dysfunctional interaction, items 25-36 describe aspects of the problematic child, each item gave a

score of 1 to 5. Item worth 5 points indicates strong agreement while item worth 1 point indicates strong disagreement. This instrument uses a Likert scale.

Socioeconomic status is the view of society about a person's life position seen from his work, income, and position. The socioeconomic status variable has several components used to measure namely residence, educational background, main occupation before 60 years, and the current financial situation (Wang, et al., 2018). For this variable, the researcher tries to develop his questionnaire by referring to four components that can use to measure socioeconomic status. The questionnaire that the researcher made consisted of 11 items, using choices of answers a, b, c, d, each of which had values ranging from 1 to 4 points except for items number 2, 3, and 8, which consisted of several choices each worth 1 point. Scores with high scores reflect a high socioeconomic status if a score with a low score reflects a low socioeconomic status.

Data Analysis

The data analysis technique used in this study uses moderated regression analysis (MRA). In this analysis, we must compare the three regression equations first to determine the moderating variable. Then we can find out whether the variable Z can moderate the relationship between X and Y (Howitt & Cramer, 2011). After conducting an MRA analysis, researchers found the results of the effects of moderation on socioeconomic status variables on the variables of spiritual well-being and parenting stress and the correlation between spiritual well-being and parenting stress.

Validity and Reliability of Measurement

Following are the results of the validity and reliability of research measuring instruments

Table 1. Measurement of Validity And Reliability Index

Measure	Valid Items	Validity Index	Reliability Index
Spiritual well-being	17	0,284 – 0,751	0,897
Social Economic status	8	0,293 – 0,776	0,828
Parenting Stress	23	0,310 – 0,790	0,909

Judging from the validity and reliability tests of spiritual well-being, socioeconomic status, and parenting stress measures. The result of the validity and reliability tests of spiritual well-being, socioeconomic status, and parenting stress Showed that there are three wrong items and 17 valid items that can measure the spiritual well-being of 20 items from the spiritual well-being scale. The validity index of the spiritual well-being measure ranges from 0.284 to 0.751 and has a reliability of 0.897. The socioeconomic status measure has 11 items. There are three wrong items and eight valid items that can measure socioeconomic status. The validity index of this measuring instrument is 0.293 - 0.776, and the reliability index is 0.828. While the results of the parenting stress scale have 36 items, 23 items are declared valid so that it can measure parenting stress, and 13 other items are declared invalid. The validity index, which is owned by the parenting stress scale, ranges from 0.310 to 0.790, and its reliability is 0.909.

III. Result and Discussion

Data Analysis Result

Based on the results of the Kolmogrov-Sminov normality test conducted on the three variables produce a significant value of 0.275, this proves that the three variables are normal because they have a significant value above 0.05 ($p > 0.05$).

To find out the correlation between spiritual well-being and parenting stress with socioeconomic status as a moderator for mothers with autistic children, researchers used moderated regression analysis (MRA), with the following result.

Tabel 3. correlation Between Variables

correlation Between Variables	B	P-value
Spiritual well-being → Parenting Stress	-0.69	.000 (<.05)
Spiritual well-being*Status Sosial Ekonomi → Parenting Stress	-0.01	.576 (>.05)

Moderation result of Spiritual Well Being, Parenting Stress and Socioeconomic Status

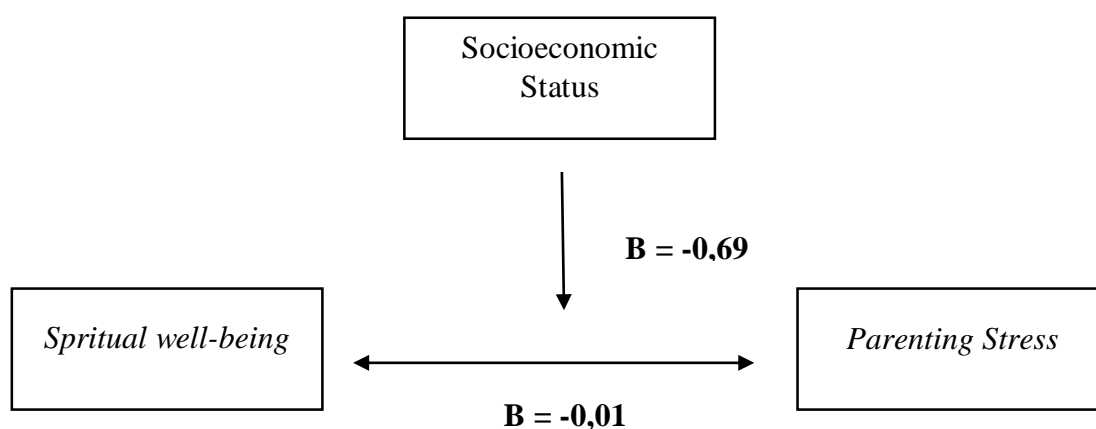


Figure 3. X moderation result (spiritual well-being)→Y(Parenting Stress) and Z (Socioeconomic Status)

The Figure 3 shows that there is a significant negative correlation between spiritual well-being and parenting stress. This shows that the higher the spiritual well-being, the lower the level of parenting stress, and conversely, the lower the spiritual well-being, the higher the level of parenting stress. Meanwhile, the socioeconomic status variable is not able to moderate the correlation between spiritual well-being and parenting stress, meaning that the mother's socioeconomic status does not affect the level of stress of caring for mothers

who have autism children.

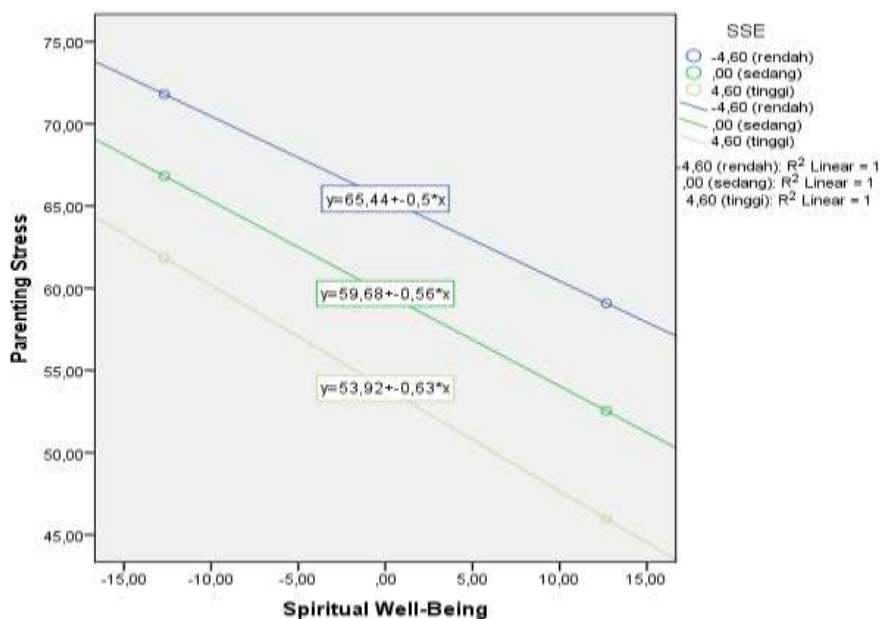


Figure 4. Moderation Graphic

The Figure 4 shows that there is no significant difference in the level of parental stress between mothers who have low, moderate, and high social status. When spiritual scores increase, stress increases with parenting this experienced by all groups of mothers who have low, medium, and high socioeconomic status.

Discussion

The study investigated correlation between spiritual well-being and parenting stress and socio-economic status as moderator between both of variables in mother of children with autism. The results revealed that there was a significant negative correlation between spiritual well-being and parenting stress in mothers of children with autism ($B = -0.69; p < 0.05$). Then the moderating effect was not found on the socioeconomic status in relation with spiritual well-being and parenting stress and was not significant ($B = -0.01; p > 0.05$). This shows that when spiritual well-being has a high number, a low number in parenting stress is followed. Then if there are socioeconomic status factors that enter it cannot strengthen the correlation between spiritual well-being and parenting stress. The results of this study indicate that the first hypothesis stating the existence of a correlation between spiritual well-being and parenting stress is acceptable. But on the contrary, the second hypothesis cannot prove that socioeconomic status can moderate the correlation between spiritual well-being and parenting stress, so the second hypothesis cannot be accepted.

The results of this study reinforced that spiritual well being can be a protective factor of parenting stress as mentioned by Wilson et al., (2014) in their research that states that spiritual well-being is one of the protective factors that are specifically relevant in the African Americans women's community to reduce the level of parenting stress. Higher levels of spiritual well-being were associated with improved mental health functions and outcomes in many samples, including African-American women with HIV / AIDS (George Dalmida et al., 2011). When a person has high spiritual well-being, he also has good mental health (Ali et al., 2015). Therefore she can overcome the pressures that come to him. Spirituality appears to facilitate interpersonal and intrapersonal processes that lead

to increased bonding and conflict resolution abilities with family members (Tarakeshwar & Pargament, 2001). Religious beliefs, religious activities, and spirituality are coping resources used by many mothers of children with autism (Ekas et al., 2009). Spiritual well-being also proved from research that has been done by researchers on mothers who have autism children. Fewster et al., (2019) caring for a child with autism-related with high parenting stress. In fact, according to Ludlow et al., (2012) mothers often face a heavy burden and responsibility in educating and caring for their children, thus causing increased mental tension and makes mothers experience depression and anxiety (Ludlow et al., 2012). Spiritual well-being as a protector from the pressures they experience. Tarakeshwar & Pargament, (2001) explore the correlation between positive and negative spiritual coping in families of children with autism who experience stress and depression. Positive coping defined as seeking a positive relationship with God and experiencing closeness and harmony with God, while negative coping involves blaming God or belief that God has left or punished them (Timmons & Ekas, 2018; Ekas et al., 2009).

The results show that positive coping is associated with positive changes in social relationships and personal resources. Conversely, the use of harmful coping methods is associated with an increased effect of depression and anxiety (Ekas et al., 2009). Mothers who have children with autism in this study, mostly choose positive coping through increasing their spiritual well-being, because by increasing their spiritual through their relationship with God can lead to positive things that happen and not increasing stress. Apart from the religious aspect, other factors are found in spiritual well-being, namely, extensional welfare. In the research of (Lamis et al., 2014) female caregivers who had higher levels of existential well-being reported lower levels of drug abuse and lowered parental stress. Bester, Naidoo, and Botha (2015) revealed that mindfulness could moderate the relationship between life satisfaction and spiritual well-being. According to Chan and Lam's (2017) research, mindfulness is also able to moderate the relationship between child behavior problems and parental stress. Both of these studies show mindfulness to be an essential factor that can influence the relationship between spiritual well-being and parenting stress with other variables. Although this also does not make mindfulness can moderate the relationship between spiritual well-being and parenting stress, it shows that other factors can use as a choice in finding a moderator between the two variables.

Even in numerous studies have found that socioeconomic status (SES) impacts well-being children, family and neighborhood at multiple levels, health and psychological distress in children and adolescents (Falk et al., 2014) (Bradley, 2001) (Dowd et al., 2009), psychological distress in children and adolescents (Bradley & Corwyn, 2002) and socioemotional adjustment (Evans et al., 2005.) The result of this study showed that no moderating effect found on socioeconomic status variables in the correlation between spiritual well-being and parenting stress. Although spiritual well-being and parenting stress have a significant negative relationship, in this study, socioeconomic status did not reinforce these relationships. The important thing in the findings in this study is that there is no difference in the level of spiritual well-being and parenting stress mothers with special need children between mothers who have high, moderate, and low socioeconomic status. It shows that no matter which social-economic status, if they have high spiritual well-being, it can reduce their parenting stress level. Several reasons can explain why socioeconomic status is not able to be a moderator in this study. One of them is because this study used mothers as their subjects. Different from father, that has dominated the focus in work and career, while women are more prominent in terms of family. It shows that the stress of the mother is more focused on how to care for the child and the child's development. While matters relating to socioeconomic status are more directed to the stress experienced by fathers (Santrock, 2011).

Secondly, the low level of education and limited access to information because they live in the countryside makes them do not understand the importance of ongoing assessment and intervention, they are only designed to their situation and consider the disruption experienced by children is a test that must undertake. They think that with time, the disruption of children can reduce so that the absence of facilities and infrastructure for their children's education, those with special needs can accept without having to make them feel depressed. They also assume that the needs of children and households are the responsibility of fathers so that in this case, the stress related to the social economy is more experienced by fathers. This study contrasts with research conducted (Pereira et al., 2015) which found that socioeconomic status moderates the relationship between stress caregiving, and family conflict with harsh maternal discipline. The adverse effects of parenting stress and family conflict on the use of harsh discipline only found for the most severely deprived mothers.

However, this study proves that the importance of increasing spiritual well-being in parents who have autism children can reduce the level of stress in their caregiving. The low level of education and limited access to information because they live in the countryside makes these autistic parents need special attention and support from the government and practitioners so that they can reduce the level of parental stress. The need to teach an understanding of the religious values they profess and training in psychological therapy techniques based on religious values that they can practice when they experience stress in caring for children with special needs.

The implication of this research is for mothers who have children with special needs, especially autism, to increase spiritual well-being in order to reduce the level of parental stress by understanding religious values, carrying out religious rituals and always having faith that all problems will have a solution if we get closer to God.

Some limitations in this study are the subjects in this study came from rural areas with inadequate levels of education; this affects the understanding of the subject of the scale of research provided. Another limitation of this study is the lack of items in the scale of socioeconomic status so that it is less able to measure the level of socioeconomic status on the subject more deeply. Besides that, the use of scale in data collection is less able to dig deeper into other factors that influence the stress of parenting autism.

The finding of this study showed that the spiritual well-being has negative correlation with parenting stress. As mentioned before, if parents have higher spiritual well-being, they will have the lower level of parenting stress, and conversely, the lower the spiritual well-being, the higher the level of parenting stress. Meanwhile, the socioeconomic status variable is not able to moderate the correlation between spiritual well-being and parenting stress, meaning that the mother's socioeconomic status does not affect the level of stress of caring for mothers who have autism

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