American Journal of Psychiatric Rehabilitation

Expert Opinion Article

Psychosocial support in primary caregivers of children with autism: An empowerment-based approach

Nibu Toms Ninan[1*] & Mangaleswaran [2]

[1*] Ph.D Research Scholar (FT) Department of Social Work, Bharathidasan University, Tiruchirappalli, India-620023.
[2.] Professor, Department of Social Work, Bharathidasan University, Tiruchirappalli India, eeswaran@bdu.ac.in, https://orcid.org/620023, 0000-0003-0760-8687.

***Corresponding Author:** Mr Nibu Toms Ninan
*Ph.D. Research Scholar, Department of Social Work Bharathidasan University, Tiruchirapalli- 620023.
M: 9669368038Email: nibutoms@bdu.ac.in, https://orcid.org/0000-0002-0719-9361.

Received - April, 2025 **Accepted** Letter - June, 2025 **Published - July**, 2025

Abstract

The world of autism spectrum disorders (ASD) spans a complex and multidimensional environment that places demands on the diagnosed category with the illness and their family. This study aims to provide a thorough understanding of the psycho-social support, focusing on its importance and difficulties. The current study adopted a descriptive research in combination with census sampling. The site for this investigation was Tiruchirappalli, TN, wherein the agency "Siirugughal" operates to rehabilitate and provide skill training to adolescents with autism. The Multidimensional Perceived Social Support Scale (MSPSS) was used to learn the extent of support faced by the caregivers. The study group involves 36 primary caregivers who have a son, daughter, or sibling of children diagnosed with ASD. These methods improve the overall standard of support and care provided to adolescents with autism, which benefits both parties and benefits the caregivers themselves. Point in out the significance of psychosocial support to the parents of ASD children. The empowerment-based approaches and social support strengthen them with knowledge, skills, and resources to effectively fulfil their caregiving roles.

Key Words: Autism Spectrum Disorder, Primary Caregivers, Psycho-Social Support, social work intervention, developmental disorder, interpersonal relationships

Introduction

Caregivers are the bedrock of health care for families. Society couldn't be able to provide for the needs of people with disabilities or other people who require temporary or permanent help to recover their lives to the best of their ability. Caregivers are the people who can render care for someone else. They are the real heroes in the lives of people in need. There are many categories of caregivers working for the needful persons. Family members often serve as the primary caregivers for autistic adolescents, a role that may have an impact on the caregiver's well-being and quality of life. The increasing prevalence of autism internationally reflects the increased appreciation of the poor mental health of people suffering from autism and their caregivers (1).

The world of autism spectrum disorders (ASD) spans a complex and multidimensional environment that frequently places heavy demands on those who have been diagnosed with the illness and their family. Primary caregivers are one of the basic foundations of support and have a significant impact on the development, well-being, and general quality of life of autistic teenagers. As caregivers navigate through a web of therapeutic interventions, educational tactics, and emotional landscapes, caring for people with autism presents both unique challenges and pleasures. The importance of psychosocial support for primary caregivers of autistic adolescents is now seen as an essential element in improving the whole family experience and facilitating the successful outcomes of caregivers and their patients, and identifying the psychosocial factors related to differences in the health outcomes of children's parents with disabilities(2). A complete approach that goes beyond conventional medical therapies is required due to the complex interplay between the psychological, emotional, and social aspects of caregiving. As a result, this study explores the complex field of psycho-social support, concentrating on its importance, elements, difficulties, and potential advantages for primary caregivers in the context of caring for autistic teenagers.

This study aims to shed light on the complicated network of incidents, emotions, and coping mechanisms that form the lives of primary caregivers. There are lots of research theories about the possibilities of further study. It does so by drawing on a foundation of psychological theories, empirical research, and practical insights. The researcher understood the research gap on particular subjects because here the writer trying to

reveal the social work interventions for mitigating the psycho-social burden among the primary caregivers of autistic adolescents. This study aims to provide a thorough understanding of the approaches that may effectively promote caregivers' mental health, strengthen family dynamics, and ultimately contribute to the holistic development of autistic adolescents by examining the changing evolving field of psycho-social support interventions.

This article aims to make significant contributions to the domains of healthcare, and social work interventions through a detailed investigation of psycho-social support. Social work organizations may develop personalized interventions that create adaptability, empower caregivers, and ultimately support the well-being of both caregivers and their autistic loved ones by taking into account the different needs and difficulties faced by primary caregivers of autistic adolescents.

Understanding Autism Spectrum Disorder (ASD)

Autism is a complicated neurological disorder that lasts a person's whole life and changes how they talk, connect, and think about things. The DSM-5 says that autism is a neurodevelopmental disorder that is marked by persistent problems with social speech and interaction, as well as limited and repetitive patterns of behaviours, activities, or hobbies. Autism spectrum disorders can affect a person's intellectual capacity, whether it be average, high, or disabled. An autistic person may need varying levels of assistance. While autism has a more subtle impact on certain people, some people have complicated demands. Many people with autism have problems, but they also have strengths, hobbies, and potential, just like everyone else. Even though autism is diagnosed everywhere, there may be differences in how it is recognized, interpreted, and reported in different cultures. To increase the early detection of autism and encourage better emotional and behavioural outcomes, reliable instruments are required to measure autistic traits and screen for high-risk children. Several studies have demonstrated how culture can affect the diagnosis, care, and welfare of children with autism. Autism spectrum disorder (ASD) is a neurodevelopmental disorder that is characterized by a persistent deficit in social communication and interaction skills, and repetitive and restricted patterns of behaviour (3). Autism Spectrum Disorder refers to a collection of neurodevelopmental diseases that are marked by ongoing difficulties in social communication and interaction (4).

Autism Spectrum disease is a brain disease that causes people to behave in limited and repetitive ways and have trouble communicating with others. These issues can hinder individuals with autism from developing and maintaining adequate interpersonal relationships in their everyday lives and social environments (5). The root cause of autism spectrum disorder remains uncertain, and continuing research is being conducted to gain a more comprehensive understanding of its underlying factors. Autism Spectrum Disorder (ASD) can lead to notable challenges in social interaction, communication, and behaviour for individuals, especially during adolescence as they navigate the transition into adulthood and encounter heightened expectations and obligations(6).

Importance of Psycho-Social Support for Primary Caregivers

Good parents would like to protect their offspring from external influences, but finally, the world will enter the picture, and the parents will need to give up control. In other words, they must allow their kids to experience life and, more importantly, allow them to make their own mistakes. This will initially increase parental stress, but in the long run, it will benefit their education to do so.

Primary caregivers play a key role in the happiness and development of children with autism, especially during their childhood and adolescent years. They are often primarily responsible for providing support, guidance, and care for their autistic adolescents. During this critical period of development, primary caregivers may face numerous challenges and stressors. These challenges can include navigating the educational system, managing behavioural difficulties, supporting social interactions, and addressing sensory sensitivities (7).In addition, as navigating the difficulties of bringing an autistic adolescent, caregivers may also feel emotional distress and isolation. Therefore, psycho-social support for primary caregivers of autistic children is crucial to ensure the well-being of both the caregiver and the autist. Researchers have found that psychosocial support can help main caregivers deal with their problems by giving those tools and strategies (8).The stress levels and coping mechanisms used by the parent of a child with autism have been talked about in the study by (9). Since parental stress levels before intervention show how well early intervention programs will work and what the outlook is, the paper shows how important it is to provide psychological support to parents of children with autism.

Psycho-social support can also improve primary caregivers' general mental health and well-being by lowering stress levels. By providing psychosocial support to the primary caregivers of Autistic children can help them to increase their flexibility, knowledge and ability to deal with the difficulties in raring an autistic adolescent. It also improves self-efficacy in their role. An increase in negative social

support was linked with increases in depressive symptoms and negative affect, as well as decreases in positive affect (10).

Role of Primary Caregivers in Supporting Autistic Adolescents.

The people who care for autistic adolescents the most are significant to their overall health and happiness. Most of the time, it's their job to ensure that people get the services they need, like medical care, therapy, and help with school.

Primary caregivers must also deal with the daily struggles and unique needs of autistic teenagers, including their sensory sensitivity, communication difficulties, and lack of social skills. Evaluating the stress level among parents of children with Autism Spectrum Disorder (ASD), the coping mechanisms and the level of family support, in comparison with parents of children diagnosed with Intellectual Disability (ID). More families are confronted with distinctive challenges related to raising a child with ASD. Another study, Nolcheva and Trajkovski (2015) highlighted that stress associated with parenting is a crucial component of fulfilling the parental role, and having a kid with ASD significantly impacts the level of stress experienced (11).

The primary caregivers also give adolescents and young adults with autism a sense of stability and safety and offer emotional support. According to Herreros-Fraile, the overall development and health of autistic teens depend on the support and involvement of their primary caregivers. Primary caregivers can benefit from psychosocial support in many forms. It can help them to reduce their stress levels (12).

Caregivers who are grateful report lower psychological distress. This effect might be mediated by social support made by thankfulness and acts as a stress-releasing mechanism. The increased social support could act as a moderator of dispositional gratitude's protective psychological effect. The study investigates the connection between autistic child caregivers' dispositional gratitude, social support, and psychological distress (13). Caring for an autistic adolescent can be demanding and stressful, as it requires constant attention, patience, and understanding. Access to psycho-social support can provide primary caregivers with a network of understanding individuals who can offer guidance, empathy, and practical assistance. This support can help primary caregivers to better understand the daily challenges of caring for an autistic adolescent and reduce their overall stress levels.

Effects of Autism on Adolescent's Social Life

Adolescents with autism often have trouble making friends because of the way their autism makes them behave. They might have trouble getting along with others, talking to them, and making deep relationships. People who face these problems may be left out of social groups, have fewer chances to connect with others, and be more likely to feel lonely and hopeless. This is especially scary during puberty, when friendships and social interactions with peers are very important for developing social skills, self-esteem, and identity. Also, the main people who care for a teen with autism may have serious problems because of how it affects their social life. When the main person who cares for an autistic teen sees the problems that teen faces in daily life, they might feel sad, guilty, or angry. Parents and other adults who care for teens need to get psychological and social support to help them deal with these problems and give their teens the help and direction they need.

For adolescents with the autism spectrum and their families, entering adulthood is an important turning point that presents both opportunities and challenges. Parental caregivers, as well who always play an important role in the lives of people with autism, are among those who carry a sizable portion of these tasks. Strong social support networks become crucial in impacting these people's well-being, coping skills, and general quality of life as they face the challenges of adulthood. An important turning point for people with autism and their families is the transition to adulthood, which gives an individual a combination of opportunities and challenges. Understanding the changing needs, aspirations, and vulnerabilities of both caregivers and kids is essential to parenting an adult with autism. Due to the distinctive features of autism, caregivers must meet a wide range of demands, from helping with daily routines to promoting community involvement and developing a sense of independence. Social support networks, which include relationships with family, friends, and the community, come into focus in this context as crucial resources that can considerably influence caregiving for autistic people and their families. The study by researchers on "A Snapshot of Social Support Networks among Parental Caregivers of Adolescents with Autism" described types and dimensions of informal and formal social support among ageing parental caregivers of adult children diagnosed with autism spectrum disorder (ASD). Parents participated in a web-based survey regarding the use of and satisfaction with social support services for parents or their adult children. Professionals who are working with parental caregivers and their adult children diagnosed with autism spectrum disorder should be aware of available social support services. (14).

Mental Health Impact on Primary Caregivers of Autistic Adolescents

Being the main helper for a child with autism can have a big impact on the mental health of those who do it. Researchers have shown over and over that people who care for people on the autism spectrum are more likely to have mental health problems like anxiety and sadness (15). This increased vulnerability is especially clear during adolescence when the need for caring tends to grow. Researchers have found that parents of autistic adolescents are more likely to experience anxiety, depression, and burnout than parents of normally developing kids.

Empirical evidence highlights the critical part of psycho-social support in mitigating the psychological health consequences faced by primary caregivers of autistic adolescents (16). Psycho-social support, encompassing guidance, empathy, and pragmatic assistance from either individuals or groups, emerges as a significant means of alleviating the challenges confronted by caregivers. The existing body of literature underscores that social support assumes particular significance within this demographic. Notably, for families caring for children with autism spectrum disorder (ASD), social support serves as an invaluable resource to alleviate caregiver burden, strengthen coping mechanisms, and enhance overall well-being.

The importance of social support becomes more pronounced during the adolescent and adult years, given that formal services for individuals with ASD tend to diminish post-high school. Consequently, the research underlines the crucial need for healthy social support mechanisms during this crucial life stage. Scholarly investigations have diligently sought to comprehend the multifaceted challenges associated with caregiving for children with ASD and to formulate effective strategies to assist parents in navigating these challenges (17). An extensive understanding of the caregiving process from various angles is necessary for helping parental involvement and support.

A separate study explores the incidence of anxiety and depression among primary caregivers and their correlation with the severity of behavioural characteristics revealed by children with autism (18). The study establishes a higher prevalence of depression relative to stress among primary caregivers, attributing this trend to the heightened caregiving responsibilities borne by mothers. The discernible gender-based difference in stress levels emphasizes the unique challenges faced by mothers in this context.

In conclusion, the research highlights the importance of psycho-social support in ameliorating the mental health implications confronting primary caregivers of autistic adolescents. As formal services decline in availability beyond high school, the need for robust social support mechanisms remains imperative. Through rigorous research, a comprehensive understanding of the caregiving process can be cultivated, enabling more effective interventions to support caregivers within this demographic. To link the gap between research and practical implementation, further inquiry is necessary in the proposed areas of study.

Methodology

The research methodology used in this study is described here. The objective of the study, the place where the study was conducted, the design, population, and samples, and the tools and techniques adopted for this study are described.

The present study had three specific objectives, (1) to know the demographic characteristics of the respondents, (2) to understand the social support level of the primary caregivers of autistic adolescents. To address deficiencies observed in prior research, the present study examined three distinct dimensions of social support: familial support, support from friends, and support from significant others.

The current study adopted a descriptive research design in combination with census sampling to investigate the pertinent factors. The research site selected for this investigation was Tiruchirappalli, Tamil Nadu, wherein the agency *"Siirugughal"* operates to rehabilitate and provide skill training to adolescents with autism. The participant for the study was a group of 36 primary caregivers who had a son, daughter or siblings of children diagnosed with autism spectrum disorder. This research study adhered to three specific inclusion criteria: (a) Participants included parents or siblings who had or currently have a familial relationship with an adolescent belonging to the specified age group. (b) These adolescents had received a clinical diagnosis of autism spectrum disorder. (c) Moreover, these diagnosed autistic adolescents were actively engaged with the agency and received the services it offers.

The necessary information was gathered using a self-structured interview schedule to ascertain the socioeconomic level of the primary caregivers managing the care of autistic teenagers in this study. Additionally, the assessment tool utilized in this research was the Multidimensional Perceived Social Support (MSPSS) Scale, originally developed by Gregory Zimet, 1988. This scale, consisting of 12 items, was specifically designed to assess various facets of perceived social support from three distinct dimensions family support, friend's support and significant support from others. Each of these dimensions comprises four inquiries, serving the purpose of comprehensively assessing the

caregivers' overall level of social support. Simple statistical methods were employed for the data tabulation of this study.

Findings and Discussions.

This part represents a crucial turning point in our research since it gives us a structure within which to present and systematically assess the data collected from the primary caregivers of autistic adolescents. The results of our research were fully examined in the sections that follow, with major carryout, observable patterns, and new findings explained.

Table 1 shows that the significant demographic trends among the respondents. A substantial proportion of respondents are moms who have close familial contact with their autistic adolescent, as evidenced by the fact that the majority of participants (56.6%) identified as female. Regarding religious affiliation, a significant majority (66.7%) identified as Hindu, with a smaller proportion (33.3%) adhering to the Muslim faith; no respondents reported Christianity as their religious affiliation. This religious distribution may potentially influence aspects of the family structure. The prevalence of joint family system (58.3%) is higher whereas the nuclear family system existing by 41.7 % among the primary caregivers of autistic adolescents. The frequency of consanguineous marriages (86.1%) is high among the participants. When it comes to the respondents' educational background, a significant portion (36.1%) had a graduate degree. According to their employment status, a sizable majority (80.6%) said they were involved in entrepreneurship, which included running small businesses such petty shops and small enterprises.

According to the information provided by the respondents (Primary Caregivers), the majority of autistic people (50%) are between the ages of 15 and 20, and 77.78% of them are men (Table 2). In terms of the autistic population's birth order, 58.3% of them are older siblings. These findings support a prior study's finding that older children are more often diagnosed as autistic. The combined impacts of birth order and parental age were examined in this study. According to research, children born later to younger parents had a three times lower risk of developing autism than firstborn children of older parents. Of all autistic people, 33.3% need very substantial support from their caregivers, while 58.3% require substantial support. At the age of one to three years, the majority (47.2%) of individuals recognized their handicap.

To ascertain the extent of social support experienced by primary caregivers of autistic adolescents, the researcher used the Multidimensional Perceived Social Support (MSPSS) Scale (Table 3). Social support was categorized into two levels: high, and low. The study findings indicate that 66.7% of the primary caregivers surveyed exhibited a low level of social support, while 33.3% of them reported experiencing a high level of social support.

The social support dimension of this study is about the support getting from the 'significant others', it may be a third person or an institution (Table 4). The result was same like the friends support, majority (66.7%) of the primary caregivers are low social support related to the dimension of 'significant others'.

Table 5 reveals that the important social support dimension of the study is family social support, the study reveals 58.3% of the primary care givers have low social support by family, and 41.7% of them have high social support. In comparison with other two dimensions, the 'dimension of family' has slight variation in support level. It may be the influence of family systems like result of joint family (58.3%) system and Nuclear family system (41.7%). The inference that the caregivers from the joint family system has low familial support in the caregiving activities.

Table 6 reveals that the results social support rendered by the friends of primary caregivers, majority (66.7%) of the respondents had low social support from their friends group as primary caregivers.

The primary focus of this investigation relates to the assessment of social support received by primary caregivers of autistic adolescents. When considering the three distinct dimensions encompassing significant others, family, and friends, the aggregate findings reveal a diminished level of social support among primary caregivers of autistic adolescents within the specific study population.

Social Work Interventions for Enhancing Social Support

Increasing the level of social support given to parents of autistic teenagers is an essential part of social work practice. Several strategies can be used to achieve this goal. Communication, social interaction, and repetitive conduct are among the symptoms of autism, a neurodevelopmental disorder. Individuals with autism often require continuous additional assistance and attention from caregivers, peers, instructors, parents, and relatives. Because of this, caring for their loved ones who are autistic teens and arranging for their care can be quite challenging on a daily basis. The daily struggles faced by main caregivers of children with autism have an impact on the children's well-being.

Social work interventions have made a big difference in the amount of social help that parents of autistic children get. Several studies have shown that parents of autistic children may feel a lot better when they have a lot of social support. This is

because parenting stress can have negative effects on their mental health. To reach this goal, different kinds of treatments can be used. Because of this, it is important to look into the social work interventions that can help main caregivers of autistic teens receive more social support. Here are some important social work intervention skills that caregivers need to have.

1. Psychoeducation: An approach to mental wellness and counselling known as psychoeducation, it provides individuals with structured knowledge and education on their particular psychological issues, life stressors, coping situations and/or mental health conditions. Psychoeducation is meant to provide people with knowledge and awareness so they can better manage their conditions, deal with difficulties, and make decisions that will benefit their mental health and well-being. By providing information and education regarding autism spectrum disorder (ASD), including its traits, available options for treatment, and relevant support services, should be given to primary caregivers. With this information, caregivers are better equipped to comprehend and manage the difficulties they encounter. According to earlier research, psychological mindfulness (PM) can help to explain some of the signs of depression which caregivers of individuals with Autism Spectrum Disorder (ASD) experience and how psychological mindedness (PM) affects the link between unhealthy ways of coping and depressed symptoms (19). This psycho-education involves the sharing of honest information about an individual's mental wellbeing and stressors which may be an obstacle to their caregiving patterns.

2. Support Groups: Support groups are organised groups of people who meet together to discuss issues, conditions, or difficulties in life to share their stories, worries, and feelings. These groups provide a haven where members can connect with others going through comparable situations. Support groups can be very helpful for coping, emotional healing, and encouraging one another and enabling support groups specifically specially designed for primary caregivers of autistic adolescents. These groups provide a platform for caregivers to share their experiences, exchange advice, and offer emotional support to one another. When facing challenges and caregiver burden, families of individuals with an ASD may seek different types of social support and resources to cope with stressful situations (20). These groups provide a warm and understanding environment where members can interact with others going through comparable situations.

3. **Individual Counselling:** Individual counselling, often known as one-on-one counselling or therapy, is a therapeutic process in which a qualified mental health practitioner provides guidance and support to an individual experiencing emotional, psychological, or behavioural problems. The goal of individual counselling is to improve the overall well-being and quality of life of autistic teenagers by helping their primary caregivers better understand and manage their thoughts, feelings, and behaviours. By offering caregivers personal counselling sessions to meet their emotional and psychological requirements. This might help caregivers in successfully handling their stress, anxiety, depression, and other emotional challenges.

4.**Respite care services:** Respite care services are provided to those who require assistance and support due to many circumstances, including disabilities, illnesses, the ageing process, or responsibilities as caregivers. The primary objective of respite care is to provide regular caregivers, typically family members, with a reprieve or respite from their caregiving responsibilities. Respite care allows caregivers to take a break and attend to their own needs while ensuring that their loved ones are properly cared for in their absence. As per earlier studies, respite care is associated with lower psychological distress in parents of children with developmental disabilities (21). Making arrangements for interval care services gives caregivers a temporary break from their caring duties. As a result, caregivers can take breaks, diminish burnout, and promote self-care. To assist caregivers, improve their well-being, and ensure that people with care needs receive high-quality care even when their primary caregivers need a break, respite care services are essential. Social workers can assist primary caregivers in providing care more durably and healthily.

5. **Social Skill Training:** Social skill training is a kind of therapeutic intervention which helps the individual to improve their interpersonal skills and intrapersonal skills. An organised rehabilitation technique called social skill training is intended to assist people in enhancing and developing their communication and interpersonal abilities. These abilities are necessary for creating and maintaining wholesome relationships, navigating social circumstances, and performing well in a variety of social and professional contexts. In the context of mental health treatment, education, and personal development, social skill training is frequently utilized to help people develop interpersonal competence and confidence. This includes the assessment to identify the individual's social skills. This assessment helps to design the

training programme to the individual's needs. Few research studies reveal the possibilities of social skill training for caregivers and autist child will improve their communication and social skills. young adolescents who received treatment reported a significant decrease in feelings of loneliness and an increase in their knowledge of social skills (22). Caregivers also reported significant improvements in the overall social skills, social responsiveness, empathy, and frequency of social gatherings of the young adolescents. The results show that this caregiver-assisted strategy works for young teens and young adults with Autism Spectrum Disorder.

6.**Advocacy and Navigation:** Advocacy and navigation are two important support services that can be very helpful for people who are the main parents of teens with autism. The purpose of these services is to offer caretakers the tools, knowledge, and support they require to give their autistic children the best care possible. Advocacy means constantly working for autistic people and their families to ensure they acquire the resources they need, support, and accommodations to have successful lives. The rights and interests of people with autism are promoted by social workers. To find and make use of services, resources, and support offered to their autistic adolescents, caregivers often require practical assistance. This is known as navigation. It requires assisting decision-makers by directing caregivers through complicated tasks. Few researchers infer through their studies the need and importance of advocacy and navigation of services to the caregivers of Autistic adolescents, which help them to fulfil their aim. A study states, caregivers thought about the people who plan and make it hard for young children with Autism Spectrum Disorder (ASD) to get screened, diagnosed, and find and get other services, as well as what caregivers thought could be done to make the process better(23). A recent study the parental advocacy is a flexible way that changes based on the child and parent's situation and needs (24). Communication problems caused by an Autism Spectrum Disorder (ASD) diagnosis often need parental advocacy. Parents' advocacy process included voicing concerns, asking for help, being assessed and diagnosed, getting services, removing barriers, and learning how to be an advocate. These findings give insight into how parents advocate for their children with ASD, how to strengthen their skills, and what obstacles they face in doing so.

7.**Family Therapy:** Family therapy sessions are one of the most successful social work interventions for primary caregivers of autistic teenagers, providing family therapy sessions for improving communication and family relations. An adolescent with autism might benefit from having stronger relationships and a more welcoming house. A study on family therapists who want to help parents stay close while they make a "new normal" (25).However, family therapists need to know more about autism and how family therapy can help parents of children with autism. Because having a child with autism affects many areas of family life, this paper looks at how family therapists can work with parents using an integrative approach that lets them work with action, meaning, and emotion differently. Thus family therapy can assist adolescents with autism in need of caregivers by giving them emotional support, coping mechanisms, information, and tools they need to satisfy the needs as well as goals of the autistic person.

8. **Crisis Intervention:** Crisis intervention is a way to help someone who is having a mental or emotional crisis, like anxiety, sadness, suicidal thoughts, or anger. It seeks to lessen the possibility of harm, restore stability and safety, and link the individual with the necessary tools and resources. Caregivers of autistic adolescents might discover crisis intervention useful when they are dealing with difficult circumstances or problems involving their loved ones. Crisis intervention is the provision of prompt assistance to caregivers who are faced with a crisis involving their adult autist, particularly the situations marked by extreme behavioural difficulties and emotional outbursts. study offers a helpful method for applying crisis intervention frameworks (26).
As previously said, there is little evidence to support the claim that crisis intervention therapies are successful in truly lowering the problematic behaviour exhibited by people with developmental disorders. Organising Function Based Interventions (FBI) in line with the framework is one method for successfully utilising crisis intervention frameworks to get rid of challenging behaviours. In summary, crisis intervention is critical in helping parents of autistic teenagers who are experiencing extreme distress or a crisis.

9. **Cultural Competency:** Social workers who are engaged in assisting primary caregivers of autistic adolescents must prioritize the incorporation of culturally sensitive interventions that are precisely tailored to align with the distinctive requisites and cultural beliefs held by the caregivers and their familial contexts. Cultural competency refers to the capacity of people, groups, and institutions to work well together and give suitable care and support to those from various cultural origins. It entails recognising and respecting the cultural norms, practices, beliefs, and values of individuals and communities as well as customising services to fit

their particular requirements. There are cultural norms surrounding common and uncommon behaviour, parenting styles specific to certain cultures, mental health literacy, cultural attitudes, beliefs, and stigma, as well as the accessibility, affordability, and acceptability of services (27). These cultural and contextual factors are linked to each of these levels. This framework, mapping out the cultural and contextual factors that can affect the identification, help-seeking, and diagnosis of ASD may function as a springboard for the development of culturally appropriate autism screening and diagnostic instruments, and inform future cross-cultural autism research directions. As a social work intervention technique, cultural competency guarantees that caregivers may provide care that is attentive to the cultural, linguistic, and social features of the people they are serving, making it especially pertinent in the context of support services and medical care for autistic adolescents.

10. **Empowerment-Based Approaches:** Empowerment-based approaches are beneficial for caregivers of autistic adolescents as they promote the empowerment, self-efficacy, and overall well-being of these caregivers. This is a kind of social work intervention that focuses on providing caregivers with the knowledge, skills, and resources they need to make informed decisions and effectively care for their autistic adult family members. Empowerment-based approaches allow caregivers to access information on the characteristics, difficulties, and accessible interventions of autism spectrum disorder (ASD). This information enables caregivers to gain an understanding of their loved one's situation and determine the best way to support them. Numerous scholars have discussed empowerment-based approaches in the context of supporting primary caregivers of autistic adolescents. As parents or primary caregivers spend the most time with their children, they are the ones who can most benefit from training them in behaviour management and intervention strategies. A book offers a thorough overview of the major parent training programmes for parents of children with Intellectual or Developmental Disabilities (IDD), including Autism Spectrum Disorder (28). By developing this intervention caregivers can learn problem-solving skills. By acquiring this skill caregivers can address various challenges and obstacles related to caring for an autistic adult. Through the implementation of this intervention, caregivers can acquire problem-solving skills, enabling them to effectively address a multitude of challenges and obstacles associated with the care of autistic adolescents. In conclusion, the empowerment-based approaches strengthen the caregivers of autistic adolescents by providing them with knowledge, skills, and resources to effectively fulfil their caregiving roles. These methods improve the overall standard of support and care provided to adolescents with autism, which benefits both parties and benefits the caregivers themselves.

Conclusion

Primary caregivers of autistic adolescents face various emotional, psychological, and social challenges, making psychosocial support essential for their well-being. While research on social support specific to caregivers of autistic adolescents is limited, existing studies highlight its importance at this life stage. Such support is vital not only for caregivers but also influences the quality of life of the adolescents they care for. This study emphasizes the diverse difficulties these caregivers encounter, from daily caregiving responsibilities to managing psychological impacts. It explores various forms of psychosocial assistance, including therapy, support groups, and educational resources, that equip caregivers with necessary tools and foster community belonging. Improving knowledge in this area is critical for public health; it can enhance caregivers' readiness to tackle challenges, reduce burnout, and elevate the overall welfare of adolescents with autism. To achieve better future outcomes, healthcare systems and communities must facilitate greater access to psychosocial support for caregivers. By creating supportive environments that address specific challenges, society can help these parents provide optimal care for their children. Ultimately, empowering caregivers through targeted psychosocial support is key to mitigating the adverse effects on their mental health and enhancing the well-being of both caregivers and autistic adolescents.

Acknowledgement

We convey our sincere thanks to the Department of social work, Bharathidasan university for their unwavering support and encouragement to complete this study.

Declaration

Funding

Nil

Conflicts of Interests

No conflicts of interest.

Data availability

All the data in this study is completely incorporated in the manuscript

Reference

1 McConkey R. Nurturing the positive mental health of autistic children, adolescents and adults

alongside that of their family caregivers: A review of reviews. Brain Sci. 2023;13(12):1751

2 Nyoni J. A participatory action research project on family needs: Experiences of formal and informal support services available among Zambian families of children with autism spectrum disorders [dissertation]. Cape Town: University of Cape Town; 2022. Available from: http://hdl.handle.net/11427/36708

3 American Psychiatric Association. *Diagnostic and statistical manual of mental disorders*. 5th ed. Washington, DC: American Psychiatric Publishing; 2013.

4 Gal E, Selanikyo E, Erez AB, Katz N. Integration in the vocational world: How does it affect quality of life and subjective well-being of young adolescents with ASD? *Int J Environ Res Public Health*. 2015;12(9):10820–35.

5 Tsamoura E. The integration of preschool children with autism spectrum disorder in kindergartens of general education. *[Journal or publication info missing]*. 2020.

6 Manders E, Essame C, Payne HG. The mirroring dance: Synchrony and interaction quality of five adolescents on the autism spectrum in dance/movement therapy. *Front Psychol*. 2021;12:717389.

7 Wang Z, Wang L, Chang S, Wang H. The mediating effect of parenting stress on the relationship between social support and quality of life in parents of children with autism spectrum disorder: A meta-analytic structural equation modelling. *Front Psychol*. 2022;13:713620.

8 Martindale-Adams JL, Clark CD, Martin JR, Henderson CR, Nichols LO. Text Messages to Support Caregivers in a Health Care System: Development and Pilot and National Rollout Evaluation. J Particip Med. 2022 Oct 17;14(1):e35318.

9 Gupta A, Singhal N. The stress levels and coping mechanisms used by the parents of a child with autism. *Asia Pac Disabil Rehabil J*. 2005;16(2):16–22.

10 Smith LE, Greenberg JS, Seltzer MM. Social support and well-being at mid-life among mothers of adolescents and adults with autism spectrum disorders. *J Autism Dev Disord*. 2012;42(9):1818–26.

11 Nolcheva M, Trajkovski V. Exploratory study: stress, coping and support among parents of children with autism spectrum disorders. J Spec Educ Rehabil. 2015;16(1–2):66–78.

12 Herreros-Fraile A, Fernández S, López M, Martínez I, Martínez-Molina A, Gómez R. Parental incarceration, development, and well-being: A developmental systematic review. *Int J Environ Res Public Health*. 2023;20(4):1–15.

13 Lovell B, Wetherell MA**.** Social support mediates the relationship between dispositional gratitude and psychological distress in caregivers of autistic children. *Psychol Health Med*. 2023;28(6):1287–1294.

14 Marsack-Topolewski CN. A snapshot of social support networks among parental caregivers of adolescents with autism. *J Autism Dev Disord*. 2020;50(4):1111–22.

15 Weir E, Allison C, Ong KK, Baron-Cohen S. An investigation of the diet, exercise, sleep, BMI, and health outcomes of autistic adolescents. *Front Neurol*. 2021; 12:741.

16 Kopcakova J, Husarova D, Sigmund E, Banik G, Sokolova L. Editorial: Health of adolescents: Quantitative and qualitative perspective. Front Psychol. 2023;14:1135020.

17 Samadi H, Samadi SA. Understanding different aspects of caregiving for individuals with autism spectrum disorders (ASDS): A narrative review of the literature. *Brain Sci*. 2020;10(8):557.

18 Aslam Z, Ghani M, Kausar S, Maqbool S, Mukhtar F, Qama M. Psychological health of primary caregivers: An association of primary caregiver's stress and depression with behavior severity of autistic children. *Pak J Med Health Sci*. 2022;16(12):46.

19 Pang PNT, Masiran R, Tan K, Kassim A. Psychological mindfulness as a mediator in the relationship between dysfunctional coping styles and depressive symptoms in caregivers of children with autism spectrum disorder. Perspect Psychiatr Care. 2020;56(4):830–6.

20 Lin LY, Orsmond GI, Coster WJ, Cohn ES. Families of adolescents and adults with autism spectrum disorders in Taiwan: The role of social support and coping in family adaptation and maternal well-being. *Res Autism Spectr Disord*. 2011;5(1):144–56.

21 Mullins LL, Aniol K, Boyd ML, Page MC, Chaney JM. The influence of respite care on psychological distress in parents of children with developmental disabilities: A longitudinal study. *Child Serv*. 2002;5(2):123–38.

22 Gantman A, Kapp SK, Orenski K, Laugeson EA. Social skills training for young adolescents with high-functioning autism spectrum disorders: A randomized controlled pilot study. *J Autism Dev Disord*. 2012;42(6):1094–103.

23 Crais E, McComish CS, Kertcher EF, Hooper S, Pretzel R, Mendez L, et al. Autism spectrum disorder identification, diagnosis, and navigation of services: Learning from the voices of caregivers. *Focus Autism Other Dev Disabl*. 2020; 35(4):246–56.

24 Smith-Young J, Chafe R, Audas R, Gustafson DL. "I know how to advocate": Parents' experiences in advocating for children and youth diagnosed

with autism spectrum disorder. *Health Serv Insights*. 2022; 15:11786329221078803.
25 Solomon AH, Chung B. Understanding autism: How family therapists can support parents of children with autism spectrum disorders. *Fam Process*. 2012; 51(2):250–64.
26 Stevenson BS, Wood CL, Iannello AC. Effects of function-based crisis intervention on the severe challenging behavior of students with autism. *Educ Treat Child*. 2019; 42(3):321–44.
27 De Leeuw A, Happé F, Hoekstra RA. A conceptual framework for understanding the cultural and contextual factors on autism across the globe. *Autism Res*. 2020; 13(7):1029–50.
28 Lutzker JR, Guastaferro KM. *A guide to programs for parenting children with autism spectrum disorder, intellectual disabilities, or developmental disabilities: Evidence-based guidance for professionals*. London: Jessica Kingsley Publishers; 2018.

Table 1:Socio-Demographic Features of the Respondents

Sl. No	Descriptions of the Respondents	Frequency (n=36)	Percentage
1.	Gender of the respondents with Autists	Male :16	Male : 44.4%
		Female :20	Female : 56.6%
2.	Relationship of the Respondents with Autists	Father :16	Father :44.4%
		Mother :20	Mother :56.6%
3.	Religion of the Respondents	Hindu :24	Hindu :66.7%
		Muslim :12	Muslim :33.3%
		Christian :00	Christian :00
4.	Type of family	Joint Family:21	Joint Family:58.3%
		Nuclear Family:15	Nuclear Family:41.7%
5.	Consanguinity of Marriage	Yes : 31	Yes : 86.1%
		No : 5	No : 13.9%
6.	Educational Qualification of the Respondents	Middle School :12	Middle School: 33.3%
		High School :02	High School : 5.6%
		Higher Sec.School:09	Higher Sec.School: 25%
		Graduation:13	Graduation: 36.1%
7.	Occupation of the Respondents	Daily Waged :3	Daily Waged: 8.3%
		Private Sector:4	Private Sector: 11.1%
		Own Business: 29	Own Business: 80.6%

Table 2: Details of the Autist by the Respondents based on the age.

Sl. No	Descriptions of Autist	Frequency	Percentage
1.	Age of the Autists	15 to 20 :18	15 to 20 : 50 %
		21 to 25 :6	21 to 25 : 17.67%
		26 to 30 :12	26 to 30 : 33.33%
2.	Gender of the Autists	Male : 28	Male : 77.78 %
		Female : 08	Female : 22.22%
3.	Birth Order of the Autists	Elder :21	Elder : 58.3%
		Younger : 15	Younger : 41.7%
4.	Level of Disability and Associated Conditions	Requiring Substantial Support (RSS):24	RSS : 66.7 %
		Requiring Very Substantial Support (RVSS) : 12	RVSS : 33.3 %
5.	Disability was first recognized	Below 12 Months :7	Below 12 Months : 19.4
		Between 1 to 3 years : 17	Between 1 to 3 years : 47.2
		Between 3 to 5 years : 12	Between 3 to 5 years : 33.3

Table 3: Social Support Factors

S No	Classification of Social Support Scale	Frequency	Percentage(%)
1	High	12	33.3 %
2	Low	24	66.7 %

Table 4: Dimension of Social Support by Significant Others

Sl.No	Dimension of Social Support by Significant Others	Frequency	Percentage(%)
1	High Social Support	12	33.3%
2	Low Social Support	24	66.7%

Table 5: Dimension of Social Support by Family

Sl.No	Dimension of Social Support by Family	Frequency	Percentage(%)
1	High Social Support by Family	15	41.7%
2	Low Social Support by Family	21	58.3%

Table 6:Dimension of Social Support by Friends

Sl.No	Dimension of Social Support by Friends	Frequency	percentage
1	High Social Support by Friends	12	33.3%
2	Low Social Support by Friends	24	66.7%