

Differences in Spiritual Coping Strategies of Mothers with Autism Children in Developed and Developing Countries: A Qualitative Systematic Review

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Abstract: Comprehensive community support is needed to help mothers cope with the psychological, physical, and social challenges of caring for a child with autism. This study aimed to identify differences in mothers' initial responses, spiritual coping strategies that influence psychological well-being, and factors supporting and inhibiting maternal coping in developed and developing countries. A literature search was conducted on EBSCO, PubMed, Wiley, Science Direct, ProQuest, Research Rabbit, and Google Scholar databases from 2014 to 2023, which was screened using Mendeley. Critical appraisal and data mapping were performed with the Joanna Briggs Institute (JBI) checklist for qualitative research and textual evidence. A total of 18 selected studies were analyzed using a narrative approach. The results identified five main themes: (1) acceptance and love in the face of adversity, (2) resilience through emotional turmoil to social and cultural complexities, (3) strength in community and shared experiences, (4) empowerment, and (5) advocacy. The spiritual coping strategies of mothers in developing countries differ from those in developed countries, influenced by social, cultural, and economic contexts. Social support proved crucial for maternal emotional resilience. Education of health workers on culture-based spiritual coping strategies is needed to support maternal well-being. An approach that considers the social, cultural, and economic context will facilitate access to resources, integration of relevant spirituality, and self-empowerment. This aims to improve maternal mental health and create an inclusive environment that supports families, especially mothers of children with autism.

Keywords: Autism Spectrum, coping strategies, disorder, mother, social support, spirituality

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INTRODUCTION

Autism is a developmental problem that experiences various conditions (WHO, 2023). Characteristics of children with autism include difficulties in social interaction and communication, unusual ways of moving and behaving, difficulty in moving from one activity to another, having an unusual detail focus, and unusual reactions to sensations (WHO, 2023). Autism traits can usually be seen and detected during childhood, but it is not uncommon to be diagnosed later (WHO, 2023). It is estimated that in the world today, about 1 in 100 children have autism (WHO, 2023).

Recent studies have revealed that the global median prevalence of autism is 100 per 10,000 population, with a drastically varying range of 1.09 to 436 per 10,000 population. This variability reflects the dynamic interaction between biological and social factors, including public awareness, access to healthcare, and sociodemographic determinants (Zeidan et al., 2022). A systematic review conducted in developed countries with high-income levels found that parents face challenges in accessing health services, which then trigger stress, especially for mothers (Mcstay et al., 2015). A scoping review conducted in low-income countries revealed a scarcity of research on managing stress among mothers

of children with autism. However, the review highlighted positive coping as a key finding. Identified strategies included spiritual approaches, planning, acceptance of autism, and sharing burdens. (Rahmita & Pratiwi, 2020).

Health system disparities between developed and developing countries pose significant challenges for mothers caring for children with autism. In developing countries, limited healthcare access and inadequate therapy facilities hinder optimal care. Meanwhile, developed countries, despite having more organized systems, face issues such as high costs and long waiting times. Comparing these experiences helps identify unique challenges and opportunities in each context, contributing to the development of more inclusive and effective global policies (Aurora, 2019)(Samiun et al., 2024).

Stress due to parenting a child with autism is related to the negative emotions, the high cost of therapy, the difficulty in interacting with others, and the difficulty in guiding worship (Rahmanawati et al., 2022). Psychological, physical, and social challenges are often faced by mothers caring for children with autism. It is important to provide support in the form of good parenting to allow parents to get some help from family, significant others, and community members to help the parents (Appiah & Appiah, 2023). Mothers of children with autism often find it difficult to come together despite using a variety of strategies, including isolating themselves from others (Moorthy et al., 2023). The importance of the spiritual aspect of health is considered as part of a holistic, person-centered care in modern society (Stripp et al., 2023).

Coping mechanisms are influenced by family demographics, maternal distress, depression levels, child age, and type of disorder. The study found that seeking spiritual support is significantly associated with marital status, with married mothers scoring higher in this area. Additionally, having more children and older children was linked to increased reliance on spiritual support. As children and mothers age, existential concerns and anxiety about the child's future often lead mothers to seek greater spiritual support (Ntre et al., 2022).

The objectives of this qualitative systematic review were (1) to identify the initial response of mothers when their child is diagnosed with autism, (2) to identify how spiritual coping strategies influence the psychological well-being of mothers in caring for children with autism in developed and developing countries, and (3) to identify supporting and barrier factors in mothers' spiritual coping strategies in developed and developing countries.

METHODS

This qualitative systematic review adopted the ENTREQ Guide (Tong et al., 2012). This review is OSF-accredited with DOI <https://doi.org/10.17605/OSF.IO/PJR4Z>. Review questions are prepared based on the PEOS framework. Where (P) mother (E) mother with a child with autism and people living in developed and developing countries (O) mother's spiritual coping strategy (S) qualitative research. Considerations for selecting contexts in developed and developing countries include providing more comprehensive information about the spiritual coping strategies of mothers of children with autism from both country contexts. Boolean codes and truncation include the terms coping strategy* OR spiritual* coping strategy* AND mother OR women AND child* under eight AND child* with autism AND autism spectrum disorder AND developing country* OR developed country*. Search conducted from November 2023 to January 2023. The databases used included PubMed, Wiley, EBSCO, ProQuest, and Science Direct. Manual searches were carried out via Google Scholar and Research Rabbit.

The eligibility criteria were based on the criteria shown in (table 1). Articles that did not meet the eligibility criteria were excluded. Critical appraisal refers to the *Joanna Briggs Institute* (JBI) critical appraisal tool guide. The types of tools used are the JBI checklist for qualitative research and the JBI checklist for textual evidence: Narrative. The reasons for choosing JBI tools are varied, including a reputation for being a reliable and trustworthy critical assessment tool, a clear framework and guidelines, and a focus on quality scientific evidence. These eighteen studies had clear objectives and applied the chosen methodology. All studies used a purposive sampling method except study A3, which used accidental sampling, and study B6, which needed to be explained in detail. There is one article in study A2 that uses a participatory approach. Articles with a participatory approach are still

included because sampling techniques, data collection, and analysis still rely on qualitative research principles. Overall, it is evident that the research reported in the article (study B4) is of higher quality and has a high level of transparency. This can be seen in the article (study B4), which includes a detailed list of questions asked during the interview. In addition to that, the article (study B4) explains in detail the protocol approved by the ethics committee and its number. The article (study B6) is one of the articles that has the lowest quality of the eighteen articles included. This is based on the fact that the article (study B6) did not specifically explain the sampling technique and inclusion criteria. [Table 1](#) describes the eligibility criteria for this study.

Table 1. Eligibility Criteria

PEOS Components	Inclusion Criteria	Exclusion Criteria
P	Mother of children with autism	Mothers who have children with autism and physical disabilities
E	Society in developed and developing countries Implemented in developed and developing countries based on the latest data from the World Bank	
O	Article discussing the mother's initial response in caring for an autistic child. Article discussing coping strategies used by mothers of children with autism. The article discusses the supporting and barrier factors of mothers' coping strategies in dealing with autistic children	Article discussing particular therapy for autistic children.
S	Qualitative research	Quantitative research Mixed methods research
Language	Articles written in the English language	
Publication	Articles accepted come from original research	
Period	2014-2024	

RESULTS

As shown in [Figure 1](#), searches through various electronic databases such as PubMed, Wiley, EBSCO, ProQuest, and Science Direct, as well as manual searches through Google Scholar and Research Rabbit, resulted in the identification of 2,171 unique records, with 14 duplicates detected. After the screening process, only 144 studies had been screened and had their titles and abstracts matched, and 104 studies still needed to be assessed for eligibility. Furthermore, 86 studies were excluded because they were not full text (n=58), quantitative research (n=25), literature review (n=2), and dissertation (n=1). Thus, the remaining 18 articles were included in the review. The eighteen articles consisted of 278 participants who were included in the studies, in [Table 2](#).

Theme 1: Acceptance and Love in the Face of Adversity

Internal Family Acceptance: This subtheme describes how an autistic child is well-accepted within the nuclear family circle. In this context, the mother's role as her child's primary protector will feel calm and comfort. It aims to achieve the mental and emotional well-being of the mother.

Challenging External Judgment: In developed countries, the negative attitudes against autistic children are because autism is considered a disability, which leads to the view that having an autistic child is considered a shame. As a result, children with autism are not well-accepted in society

Theme 2: Resilience Through Emotional Turmoil

Coping with Diagnosis: The situation in which a mother faces great difficulty in accepting the fact that her child has been diagnosed with autism often creates a varying level of emotions, ranging from confusion sadness, and denial.

Enduring Emotional Struggles: In developed countries, when a mother finds out that her child has been diagnosed with autism, she experiences an emotional breakdown when thinking about and reflecting on the situation. In this context, support from friends, family, or mental health professionals is important to help mothers overcome the depression they experience.

Theme 3: Navigating Societal and Cultural Complexity

Language and Cultural Barriers: Difficulty in communicating in Cantonese with the NDIS (National Disability Insurance Scheme) Office is a challenge for the mother to get the assistance they need. This language barrier creates obstacles and difficulties in obtaining services that match the desired needs. In the context of China's cultural barriers, gender inequality in the role of educating and caring for children occurs because mothers have to bear all the responsibilities in the process of educating children. Therefore, the importance of communication and involvement of both parents in supporting children's development becomes increasingly better.

Discrimination and Lack of Support: This individual's experience highlights the existence of stereotypes and prejudice against ethnic identity, particularly against Chinese people, who may be perceived as easily oppressed and passive. This situation reflects discrimination that focuses on certain ethnicities, although there are no concrete actions that produce inequality. Given the subjective perception of individual treatment, it is emphasized that public awareness and education about diversity, as well as efforts to avoid ethnic prejudice, are fundamental.

Theme 4: Finding Strength in Community and Shared Experiences

Isolation and the Search for Understanding: A mother who has an autistic child experiences feelings of loneliness and finds it difficult to share her experiences. Difficulty in openly conveying the suffering they experience creates obstacles to socializing with their community, and this leads to the feeling of being isolated. This means there is a need for support and understanding from the surrounding environment.

Connecting with Others: Mothers who feel positive get the benefit of having support from the community. Such supports include emotional support, understanding, and a sense of connectedness

Theme 5: Empowerment and Advocacy

Personal Growth and Advocacy: Society needs to understand that autism is not a deficiency but a diversity. Every autistic child has their own value and is able to make a positive contribution to society. This is very important to create an inclusive and supportive environment for children with autism.

Seeking Resources and Support: The mother's responsive and proactive actions after receiving a diagnosis of autism demonstrate the importance of seeking information and resources to provide appropriate support. This awareness is considered important preparation for mothers in supporting the growth and development of their children with autism

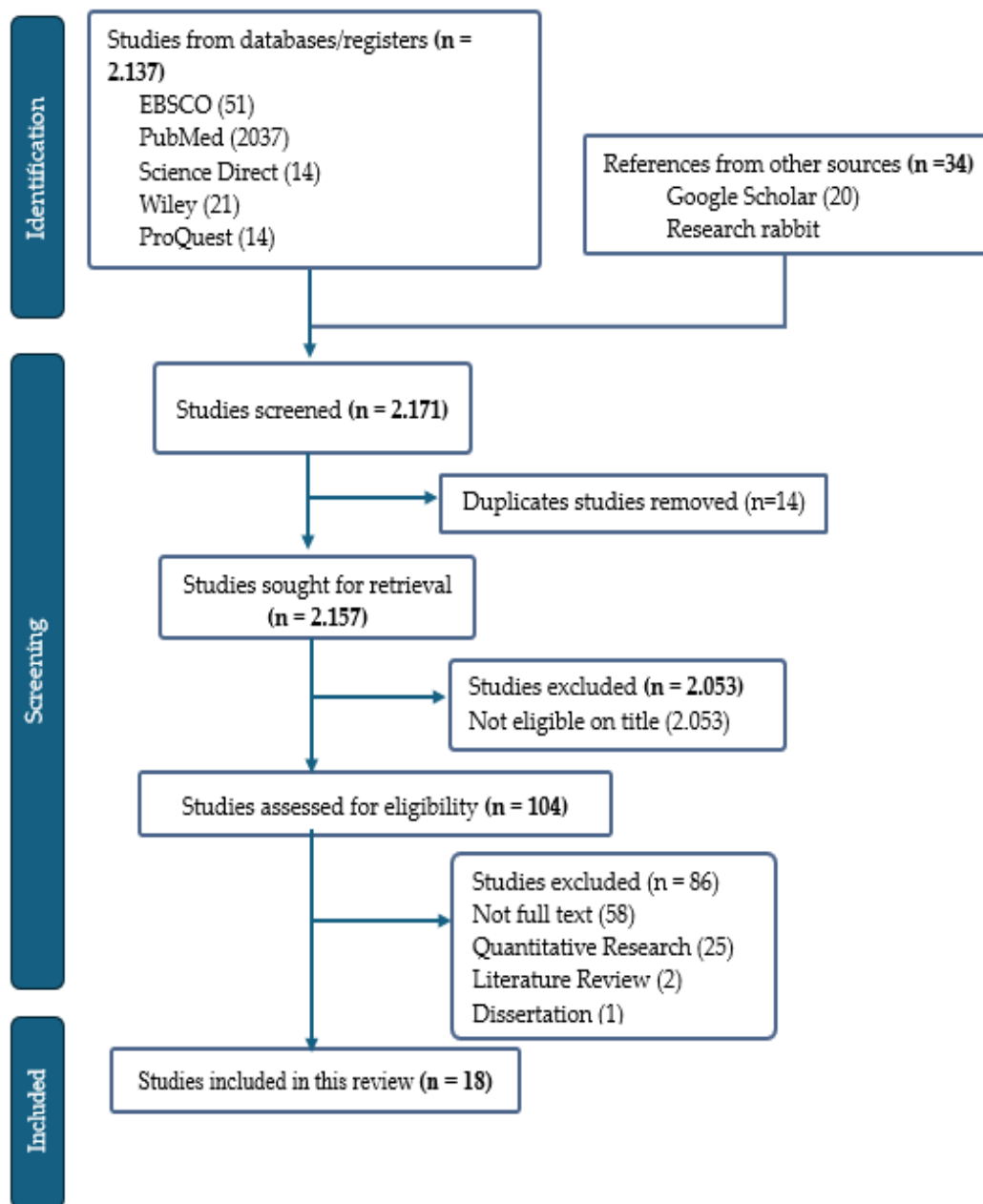


Figure 1. PRISMA Flowchart

Table 2. Data Charting

Study ID; Title: Design/ Theoretical perspective/ Country	Eligibility criteria	Research Methods	Result
A1/ Experiencing problem in making problems in making social connections: A qualitative study of mothers of nonspeaking autistic children/ PHENOMENOLOGY/ United States of America (Jaswal et al., 2020)	Mothers of children with autism aged 5 years or older, who are nonverbal, and have shared parenting experiences through blogs or public speaking.	Purposive sampling was used, involving 13 mothers aged 35 to 52 years, with an average age of 44 years. Data collection utilized a phenomenological interviewing technique, and thematic analysis was applied for data interpretation.	Mothers' confidence to help create and maintain relationships with their children.
A2/ "What is early intervention? I had no idea": Chinese parents' experiences of early support for their autistic children in Australia/participatory approach/ Australia (Smith et al., 2023)	Australian parents of Chinese descent with children with autism, aged over 18, who are actively involved in early intervention efforts.	Purposive sampling included 19 parent informants, 18 of whom were women. Among them, 15 held bachelor's degrees, and 12 were born in China. Informed consent was obtained, followed by a background questionnaire via REDCap. In-depth interviews were conducted primarily through Zoom, and thematic analysis was employed for data interpretation.	Chinese parents' experiences in accessing desired services. Including the challenges Chinese parents face in receiving services for their children.
A3/Mothers' Experiences of Children in the Autistic Spectrum in Greece: Narratives of Development, Education and Disability Across their Blogs/ Qualitative Method/ Greece (Loukisas & Papoudi, 2016)	A Greek open-access blog, written by a mother of a child with autism, containing over 20 pages.	Accidental sampling involved 5 mothers, most with higher education. Three were actively engaged in a community supporting parents of children with autism. Data included a blog post by a mother of a child with autism on a Greek online platform, analyzed using narrative analysis.	Acceptance and rejection and the mother's process of resistance to discrimination and social exclusion
A4/On My Own: A Qualitative Phenomological Study of Mothers of Young Children with Autism Spectrum Disorder in Taiwan/ Hermeneutic phenomenological approach / Taiwan (Hsu et al., 2017)	Possess cognitive and mental competence for active participation Able to communicate in Mandarin, Taiwanese, or Hakka Express a voluntary willingness to take part.	Purposive sampling involved 7 mothers with an average age of 37 years. Educational backgrounds included 2 postgraduates, 4 university graduates, and 1 high school graduate. Each participant participated in 1 to 3 interview sessions using an open interview guide. Data analysis followed Agar's (1986) hermeneutic circle.	A mother's life is very different from any other. Feeling guilty for what happened to his child and feeling like he is living two lives in one.
A5/Mothers' Experiences and Challenges Raising a Child with Autism Spectrum Disorder: A Qualitative Study/ exploratory qualitative method/ Greece (Papadopoulos, 2021)	Mothers who are fluent in Greek live with their children and have full responsibility as mothers.	Purposive sampling included nine mothers, eight of Greek descent and one of Albanian descent. Seven were married, and two were divorced, with three reporting a history of depression. Data were collected through in-depth interviews using eight open-ended questions and analyzed using Interpretative Phenomenological Analysis (IPA).	Related to emotional, family, and social burdens.
B1/ Spiritual Journey in Mother's Lived Experiences of caring for Children With Autism Spectrum Disorders/ Phenomenological hermeneutic study/Iran (Heydari et al., 2015)	The inclusion criteria involved mothers, each of whom had a child with ASD whom they had cared for for at least one year and who expressed their willingness to	Purposive sampling included 18 Muslim mothers aged 25 to 48 years. Their children, aged 4 to 11, were diagnosed with autism between ages 5 and 6. Face-to-face in-depth interviews were conducted, and data were analyzed using the interpretative	The spiritual journey of a mother who has a child with autism.

	participate in the study. Mothers who had a history of drug abuse, divorce status, a background of mental disorders, and mothers who had other children suffering from different illnesses were not included in this study.	method of Diekelmann, Allen, and Tanner (1989).	
B2/Spirituality in Latino families of children with autism spectrum disorder/ Cross-sectional design/Latin America (Kosta Rika, Kolombia, Peru, Honduras)(Salkas et al., 2016)	The inclusion criteria for this study were mothers of Latin American descent who had children with autism aged 2 to 22 years.	Purposive sampling involved 34 mothers aged 26 to 61 years, with an average age of 40 years. The children had an average age of 9 years. Data were collected through interviews with 11 open-ended questions and analyzed using a thematic approach.	There are negative cultural attributions for children with disabilities, including autism, and the opposite belief says that children are not a sign from God.
B3/"Peole keep staring at you in public for no reason":Experiences and coping strategies of parents WITH autistic children in Accra/ Exploratory study/Ghana (Appiah & Appiah, 2023)	The inclusion criteria for this study were parents who had children with autism in Accra, Ghana, and lived with their children for more than 3 years.	Purposive sampling included 10 participants, comprising 8 women and 2 men. Data were collected using a semi-structured interview guide aligned with the research objectives and analyzed through content analysis.	Parental knowledge regarding autism, parents' beliefs and attitudes towards their children diagnosed with autism, experiences in caring for children with autism, and coping strategies that parents have adopted.
B4/A Journey towards Resilience: Coping Strategies Adopted by Parents with Children Having Autism Spectrum Disorder in Northeast Malaysia/ Phenomenology/ Ethiopia (Natrah & Yaacob, 2022)	The inclusion criteria for this study were parents who care for children with autism.	Purposive sampling included 21 parents (8 fathers and 15 mothers) with an average age of 38 years. Their children ranged from 2 to 14 years old. Interviews were conducted in the Malay dialect, and data were analyzed using a thematic approach.	The results found are related to the acceptance of children with autism and solutions for facing the challenges of caring for children with autism.
B5/ Understanding autism spectrum disorder and coping mechanism by parents: An explorative study/ Phenomenological approach / South Africa (Shilubane & Mazibuko, 2020)	The inclusion criteria for this study were women who had children with autism aged 5 to 12 years. She lives in Mpumalanga, Africa.	Purposive sampling involved 15 mothers. Data were collected through semi-structured interviews and analyzed using thematic analysis.	Cultural beliefs, prayer, knowledge about autism, and acceptance.
B6/The Lived Experiences of Mothers of Children with the Autism Spectrum Disorders in Egypt/ Grounded theory/Egypt (Gobrial, 2018)	not explained in detail.	Fourteen mothers of children with autism aged 5 to 14 years participated as informants. Data were collected through in-depth interviews conducted in Arabic.	Stigma, health services, and education are the main challenges for mothers who have children with autism.
B7/Interplay between Tradition and Modernity: Stress and Coping Experiences among Parents of Children with Autism in Beijing, China/ Qualitative research approach/China (Wang et al., 2023)	The inclusion criteria for this study were having a child diagnosed or suspected of being diagnosed with autism. Parents are the primary caretakers of the child. As well as seeking services for their child in Beijing in the last 3 years.	Purposive sampling involved 12 mothers. Data were collected through in-depth interviews in Mandarin, conducted in person and by telephone, between August and October 2019.	Related to traditional perceptions about autism, parenting children with autism, and overcoming social challenges.
B8/Lived Experiences of Mothers Raising Children with Autism in Chitwan District, Nepal/ Qualitative phenomenological study design/Nepal (Acharya & Sharma, 2021b)	The inclusion criteria for this study were mothers who had children diagnosed with autism who were under 14 years	Purposive sampling included nine mothers aged 23 to 36 years, all residing in urban areas, with seven being Hindu. Data were collected through in-depth	Mothers who care for children with autism are found to be physically tired. Emotional problems such as

	of age and were willing to be included in the research.	interviews with 11 open-ended questions and analyzed using Colaizzi's (1978) content analysis approach.	sadness, rejection, and worry. Apart from that, there are social problems—mothers always isolate themselves—and economic problems. The coping strategies applied by the mother were focusing on problems, religious coping, and positive coping.
B9/Lived experiences of caregivers of children with autism spectrum disorder in Kenya/ Descriptive phenomenological study /Kenya, South Africa (Cloete et al., 2014)	The inclusion criteria for this study were adults who cared for children with autism and visited the hospital three months before the start of the study and who were willing to take part in the study.	Purposive sampling involved 24 primary caregivers of children with autism. Data were collected through monthly focus group discussions held over four sessions and analyzed using content analysis.	The findings from this research include the burden of caring for children with autism, stigmatization, and isolation.
B10/Towards s “New Mothering” Practice? The Life Experiences of Mothers Raising a Child with Autism in Urban Ethiopia/ Qualitative Research Design /Ethiopia (Asmare et al., 2023)	The inclusion criteria for this study were mothers who have and care for children with autism, mothers who use services for their children at the Brigh and Joy autism center, and mothers who are willing to be included in this study.	Purposive sampling involved 20 mothers aged 30 to 57 years, with an average age of 39.8 years. Eighteen were married, and two were divorced. Their children ranged from 4 to 17 years old, with an average age of 11.8 years. Data were collected through semi-structured interviews conducted face-to-face and by telephone, then analyzed using thematic analysis.	The findings from this research include denial of grief and emotions, understanding related to autism, acceptance, and looking for coping strategies.
B11/Autism: impact of the diagnosis in the parents/ Narrative approach/Brazil (Aguiar & Ponde, 2020)	The inclusion criteria for this study were parents who have children with autism and students in special needs schools.	Purposive sampling included 30 participants, comprising 21 mothers (aged 21 to 82 years) and 9 fathers (aged 30 to 50 years) of children with autism. Data were collected through interviews with six questions, and analysis categories were established.	The findings from this research include the impact that parents have on their child's diagnosis and strategies for how to overcome it.
B12/Life Stories of Parents with Autistic Children/ Interpretative phenomenological analysis of the qualitative research Turkey (Kocabiyik & Fazlıoğlu, 2018)	The inclusion criteria for this study were parents who had children who had been diagnosed with autism.	Purposive sampling involved 10 families, including 4 fathers and 6 mothers aged 28 to 37 years, with children aged 3 to 7 years. Data were collected through semi-structured interviews with open questions and analyzed using Interpretative Phenomenological Analysis (IPA) following Smith, Jarman, and Osborn (1999).	The findings of this research are related to diagnosis, parental feelings, parental hopes and plans, worries, stigma, coping, and understanding the meaning of life.
B13/Wellbeing of mothers of children with “A-U-T-I-S-M” in Malaysia: An interpretative phenomenological analysis stud/ Interpretative phenomenological analysis design / Malaysia (Ilias et al., 2017)	The inclusion criteria for this study were mothers who had children diagnosed with autism using DSM-IV-TR by health workers.	Purposive sampling involved 8 participants: 4 of Chinese descent, 3 of Malay descent, and 1 of Indian descent. Data were collected through structured interviews and face-to-face meetings, with qualitative design and Interpretative Phenomenological Analysis (IPA) applied for analysis.	The findings of this research are that maternal well-being in overcoming self-defense includes acceptance, spirituality, community support, and a proactive perspective.

DISCUSSION

This systematic review identified five themes: acceptance and love in adversity, resilience through emotional turmoil, navigating social and cultural complexity, finding strength in community and

shared experiences, and empowerment and advocacy. These themes aligned with the research objectives. The first theme, with its subthemes of internal family acceptance and challenges of external assessment, deals with mothers' initial responses to their child's autism diagnosis, highlighting their journey towards acceptance despite societal stigma. The second theme, which dealt with coping with the diagnosis and severe emotional struggles, reflected how spiritual coping strategies influenced psychological well-being by fostering resilience during emotionally challenging times. The third theme, which addressed language barriers, discrimination and lack of support, highlighted the enablers and barriers that affect spiritual coping strategies in developed and developing countries. The fourth theme emphasizes the role of community and shared experiences in reducing isolation and enhancing spiritual coping, while the fifth theme highlights how personal growth, advocacy and access to resources empower mothers in navigating their parenting journey. Together, these findings provide a comprehensive understanding of the diverse experiences of mothers caring for children with autism.

The acceptance of an autistic child in the nuclear family has a major impact on the mother's emotional well-being. In developed countries, the nuclear family is often the main source of support that helps mothers feel emotionally comfortable. This support can be seen in the active role of the husband or other family members in helping with the mother's daily tasks ([Jaswal et al., 2020](#)). For example, one mum shared, "We accept you at home, but the big world outside doesn't." ([Jaswal et al., 2020](#)). Practical support, such as helping with shopping or accompanying a child's activities, is a tangible way families show their acceptance (Fima, A4). In developing countries, acceptance of autistic children is often linked to religious beliefs. Autistic children are seen as a gift from God, so mothers face the situation with a positive mindset. This creates a more favourable environment for the child's development ([Appiah & Appiah, 2023](#)). One mother said, "After accepting that an autistic child is also a gift from God, it became easier to deal with it." ([Appiah & Appiah, 2023](#)).

However, external challenges often arise in the form of social stigma. In developed countries, autism is considered a shameful disability. This leads to the autistic child being less accepted in society, creating additional emotional stress for the mother ([Smith et al., 2023](#)). In addition, conflicts within the extended family regarding the child's diagnosis are also common. One mother revealed that her in-laws tried to link her child's condition to the family history, which added to her emotional burden. (Qian-qian, ([Hsu et al., 2017](#)). In developing countries, religious beliefs are an important foundation for dealing with stigma, but social stigma remains a major obstacle to creating inclusive environments ([Appiah & Appiah, 2023](#)).

An autism diagnosis often triggers a wave of complex emotions in mothers, both in developed and developing countries. In developed countries, mothers often experience deep sadness, confusion, and even denial of their child's diagnosis ([Smith et al., 2023](#)). One mom revealed, "*I was so depressed before he was diagnosed... I have an emotional meltdown every time I think about it...*" ([Smith et al., 2023](#)). Support from family, friends and mental health professionals is essential to help mothers through this difficult time. In developing countries, mothers often rely on religious beliefs as a source of strength. They believe that an autistic child is a test from God, so prayer becomes the main way to find peace and hope. One mother shared, "*If God is giving us this challenge, then we are the chosen ones. Don't worry, leave it to God, and soon I felt calmer.*" (Amina, ([Ilias et al., 2017](#)).

In addition, many mothers in developing countries adopt a positive outlook by comparing their situation with the more difficult conditions of others. They see their child as an individual with unique potential, despite facing great challenges. One mother noted, "*When I go to the hospital for my child's therapy, I see other children in worse conditions. I think I should be grateful that my child is physically healthy.*" ([Natrah & Yaacob, 2022](#)). As stated by Emmons (1999), quoted in [Ekşi & Kardaş \(2017\)](#), engagement in spiritual activities can improve health and well-being. This is also relevant for mothers in developing countries who rely on spirituality as a key support in facing challenges.

Cultural and social barriers create unique challenges for mothers caring for autistic children. In developed countries, language barriers are one significant barrier. For example, a mother in China had difficulty communicating with the National Disability Insurance Scheme (NDIS) because she had to use English, even though she was only fluent in Cantonese ([Smith et al., 2023](#)). In developing countries,

social stigma is often exacerbated by incorrect traditional beliefs. In Ghana, for example, autistic children are considered a curse or a bringer of disaster, and in some extreme cases, children are left to die ([Appiah & Appiah, 2023](#)). These beliefs demonstrate a lack of medical understanding of autism, which is often replaced by a belief in witchcraft or supernatural practices, such as visiting sangomas in South Africa ([Heydari et al., 2015](#)). In addition, discrimination is also a significant challenge. In developed countries, ethnic stereotypes against certain communities, such as the Chinese, add to the social pressure for mothers. A quote noted, *"They think that because you are Chinese, you are easily pressured... I feel discriminated against"* ([Smith et al., 2023](#)). In developing countries, discrimination often comes in the form of denying autistic children basic rights, such as not being provided with art supplies during class. ([Hsu et al., 2017](#)).

Community can be a source of emotional and moral strength for mothers. In developed countries, support groups help mothers feel less alone. One mother said, *"We have a group with similar backgrounds... It was very helpful and made a big difference"* ([Smith et al., 2023](#)). In developing countries, spiritually-based communities are often a place for mothers to gain moral strength and share experiences. One mother shared, *"When we meet for regular check-ups, we, parents of autistic children, encourage each other and share tips to keep going."* (P8, ([Appiah & Appiah, 2023](#)). Despite the challenges, many mothers show a positive attitude towards their child and see them as a gift. In developed countries, medical information and professional support help mothers understand autism better. One mother noted, *"When the doctor said they were autistic, the world seemed to collapse. But doctors say there is treatment, that some children can make progress. That calmed me down"* ([Aguilar & Ponde, 2020](#)).

In developing countries, a spiritual approach is often the main pillar. Mothers believe that prayer can bring miracles and provide solutions to the challenges they face. One mother said, *"I visited various temples, hoping for miracles to happen. My son started speaking a few words after I worshipped God."* (P5, ([Acharya & Sharma, 2021](#)). As stated by [Eksi & Kardas \(2017\)](#), Spiritual beliefs play an important role in improving maternal well-being. In both developed and developing contexts, communities with similar backgrounds are an important source of support that helps mothers through their challenges ([Daulay et al., 2018](#)).

CONCLUSION

Spiritual coping strategies among mothers of children with autism differ between developed and developing countries. In developed countries, family and social networks play a crucial role in coping, while in developing countries, spirituality and faith serve as the primary pillars of support. Mothers in developing countries rely heavily on internal family support and husband-wife relationships, emphasizing the critical role of spiritual beliefs and community involvement. A global, holistic approach is needed to address cultural and social aspects of support for mothers caring for autistic children, including raising awareness and educating medical professionals.

Medical professionals must consider the social, cultural, and economic contexts of these mothers and provide tailored support, such as facilitating access to support groups and mental health services. Strategies should integrate spiritual elements aligned with the mothers' cultural values and beliefs. Additionally, empowering mothers, enhancing communication skills, and involving them in designing social support policies are essential to improving their mental health and fostering a more inclusive environment for families of children with autism.

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AUTHOR CONTRIBUTION

GND, the first author, is responsible for the study's conceptualization, manuscript writing, and main analysis. CSP was responsible for the review process and translation of the article. DA is responsible for the review process and translation of the article

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ETHICAL STATEMENT

This review study does not involve human or animal subjects, so it does not require ethical approval.

AVAILABILITY STATEMENT

The data used in this study are available upon request to the first author.

CONFLICT OF INTEREST STATEMENT

The authors declare that there is no conflict of interest in this study.

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