

Quality of Life for Children with Autism Spectrum Disorder after Completing the Rehabilitation Course at ThiQar Autism Center

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Abstract

Study background: Autism Spectrum Disorder (ASD) is a term used to characterize a category of conditions that are categorized as neurodevelopmental disorders in the DSM-5 that are distinguished by social and communication problems, stereotyped or repetitive behaviors and interests, sensory issues, and, in some cases, cognitive delays.

Objectives: The main objective of this study is to assess the quality of life for children with autism spectrum disorder after completing the rehabilitation course.

Methodology: A descriptive (Cross sectional) study conducted at ThiQar Autism Center. From October 1st, 2020 to April 10th, 2021. Instrument designed and developed from extensive review of related literature according to (WHO) was used to assess the quality of life of children with autism spectrum disorder after completion of the rehabilitation course. A targeted sample of (120) children with autism spectrum disorder who completed the rehabilitation course was selected.

Results: The percentage of male children with autism spectrum disorder was 70% higher than females, and the larger age group than the sample was (8 years) by 30%, and the mother's educational level was reading and writing by 37.5%, and the father's educational level was reading and writing by 22.5%. With the monthly household income, most of the study sample members were (601,000 - 900,000) of the monthly income, and they constituted 47 (39.2%) of all the study sample individuals. The quality of life for children with autism spectrum disorder after completing the rehabilitation course in the domains of (physical health, psychological health, social relationship, level of independence, environment and spirituality) was of an moderate level, except for the spiritual health domain was at a low level. The statistical findings indicated that some demographic features in the study have statistically significant variations, while others have no differences.

Conclusion: The study concluded that the quality of life for children with autism spectrum disorder after completing the rehabilitation course for them was at an moderate level.

Recommendations: This study recommended an knowledge of positive behavior supports and how to implement them. Ability to communicate with the person with ASD. Families of children with autism spectrum disorder should give their children a lot of care.

Keywords: Quality of Life, Children with Autism Spectrum Disorder, Completing the Rehabilitation Course

Introduction

Autism Spectrum Disorder (ASD) is a general concept that covers a wide variety of mental health problems. The word "autism" comes from the Greek word "cars," which means "self". It depicts circumstances in which an individual is their "secluded self". ASD is often characterized by difficulties in social collaboration and verbal, nonverbal, and search engine cooperation. It is occasionally accompanied by scholarly handicap and physical medical problems, such as rest and stomach related disorders [1].

Autism is a spectrum disorder , which means that it affects each person differently, that the severity of symptoms varies greatly, and that symptoms vary in type and appearance over time. The primary symptoms of autism can be divided into two categories: recurrent social communication and social interaction deficits, and restricted, repetitive behavioral, interest, or activity patterns [2].

Autism Spectrum Disorder (ASD) is a general term for an estimated 1 in 68 children of school age have been reported as having ASD, which occurs in boys about 4.5 times more often than in girls [3]. Quality of life (QOL) is a multidimensional notion involving subjective measurements of the physical , mental and social well-being of a person [4].

QOL is considered a desirable state of personal well-being according to this model, which has universal and cultural-bound properties, contains both objective and subjective elements, and is affected by individual and environmental factors [5].

Autism Spectrum Disorder is a neurodevelopmental disorder that typically happens in early childhood development, also known as autism [6]. Impairment in the social and communication functions of adolescents, repetitive actions and unusual desires are the main characteristics of this continuum disorder [7].

Children with autism in the intervention group showed decreased signs of anxiety and increased social responsiveness after the intervention. In order to improve the social skills of children with autism, researchers have also intervened and obtained some promising outcomes [8].

Objectives of the study:

1. To assess the quality of life for children with autism spectrum disorder after completing the rehabilitation course.
- 2- To identify the association between child's age, number of children in the family , family's socioeconomic status and children's quality of life.
- 3- To investigate the differences in children's quality of life between the groups of gender, birth order, and family's residence.

Methodology

Design of the Study:

A descriptive (Cross sectional) study conducted on the current study, which is the quality of life of children with autism spectrum disorder after completing the rehabilitation course at ThiQar Autism Center. This study started from October 1th, 2020 to April 10th, 2021 in order to achieve the study objective.

Ethical Considerations

First, the researcher meets one by one with the parents of children with autism spectrum disorder, describes the purpose of the study before participating for sample collection purposes, and obtains verbal consent prior to data collection. The parents claimed that the research would raise awareness of the quality of the lives of their children and will not cause any real or possible harm to them.

Setting and sampling of the Study:

The study was conducted in ThiQar Autism Center. The research sample included (120) children who completed the center's rehabilitation course, they were selected using non-probability samples (a purposeful sample).

The Study Instrument:

Instrument designed and developed from extensive review of related literature according to (WHO) was used to assess the quality of life and based on the literature of the attendees to collect data and measure the variable on the quality of life of children with autism spectrum disorder after completion of the rehabilitation course. The questionnaire consists of two parts:

Part 1: Demographic data includes general information about the child such as :(age, gender, how long has your child been diagnosed with autism spectrum disorder ?, the number of children in the family, the sequence of the child among his brothers, residency, the educational status of the father, the educational status of the mother, the profession of the head of the family, the type of family, the monthly income of the family (in Iraqi dinars)), Home ownership.

Part 2: The second part is concerned with a questionnaire on the need to assess the quality of life of children with autism spectrum disorder. This part of the questionnaire is classified into (6) domain and consists of (48) paragraphs.

Statistical Data Analysis:

The data is analyzed using the Social Sciences Statistical Package (IBM-SPSS version 25).

Results and Discussion

Discussion of Children Demographic Characteristics:

Regarding to the children demographic characteristics:in **table (1)**.The age of children ranging from five to eleven years with thirty, twenty-six percent of them aged eight, nine years old respectively. This result close to that by Fayyadh and Faraj (2020)⁹ as their sample included thirty-one percent aged between five to six years old and thirty percent aged between seven to eight years old.

Regarding the gender of children, seventy percent of the children in the sample were males and only thirty percent were females. This result in line with that by Sachit and Obaid (2018)¹⁰ who mentioned that sixty-seven percent of their sample were males, and only thirty-three percent were females.

Concerning the duration of autism, twenty-eight percent of children have autism for four and five years. This result close to that by Fayyadh and Faraj (2020)⁹ who mentioned that thirty-five percent of children in their sample were having autism for three to five years.

Respecting fathers' level of education, twenty-two percent of them read and write followed by seventeen percent having diploma degree and the other classes come after. Mothers' level of education, more than thirty-five percent of them were able to read and write and twelve percent unable to read and write and the other classes come after. This result similar to that by Mohsin and Abed Neamah (2019)¹¹ who submitted that more than sixty percent of the fathers and mothers could read and write .

Discussion of Level of Quality of Life Related to The Six Components of The Scale

The level of quality of life-related to the six components of the scale was moderate: in **table(2)**,so in general, the quality of life for children with autism is moderate. This result agrees with that by Borgi and others (2015)¹², Tavernor and others (2013)¹³, Şipoş and others (2012)¹⁴, Brown and others (2010)¹⁵, Kuhlthau and others (2009)¹⁶, generally, moderate quality of life level. Furthermore, this result did not agree with that by De Vries and Geurts (2015)¹⁷ who stated that the level of quality of life of children with autism was low as compared with those typically developed children in physical, emotional, school, and social relations dimensions.

Conclusions

The quality of life for children with autism spectrum disorder after completing the rehabilitation course in the domains of (physical health, psychological health, social relationship, level of independence, environment and spirituality) was of an moderate level, except for the spiritual health domain was at a low level.The result shows that there is no significant association between child's age, number of children in the family and quality of children, but there is statistically significance differences between family socioeconomic status and quality o for children with autism spectrum disorder.

Recommendations

Knowledge of positive behavior supports and how to implement them. Skill to assess the sensory needs of the person with ASD and to modify the work environment to meet these needs. Families of children with autism spectrum disorder should give their children a lot of care, care and attention to them, and give them their lives and love for them instead of remote vision, entertainment and modern technology due to their danger and negatives on their quality of life. Providing scientific books, educational materials, pictures and scientific journals to caregivers and parents who have children with autism spectrum disorder for the purpose of guidance and direction and how to successfully rehabilitate children with autism spectrum disorder.

Table (1): Distribution of children with autism spectrum disorder after completion of the rehabilitation course according to demographic characteristics:

Basic Information	Groups	Frequency	Percent
Age groups	5 years	6	5.0
	6 years	9	7.5
	7 years	21	17.5
	8 years	36	30.0
	9 years	26	21.7
	10 years	14	11.7
	11 years	8	6.7
	$\bar{x} \pm S.D.$	8.2 \pm 1.482	
Gender	Male	84	70.0
	Female	36	30.0
How long has your child been diagnosed with ASD?	1 year	1	0.8
	2 years	4	3.3
	3 years	15	12.5
	4 years	34	28.3
	5 years	34	28.3
	6 years	17	14.2
	7 years	13	10.8
	8 years	1	0.8
	9 years	1	0.8
Number of children in family	0	3	2.5
	One Child	12	10.0
	Two Child	37	30.8
	Three Child	52	43.3
	Four Child	16	13.3
Child sequence between siblings	1	66	55.0
	2	40	33.3
	3	12	10.0
	4	1	.8
	5	1	.8
Continue Table (4-1).....			
Basic Information	Groups	Frequency	Percent

Residence	City	111	92.5
	Rural	9	7.5
Father Level of Education	Do not Read and Write	10	8.3
	Read and Write	27	22.5
	Elementary School Graduate	12	10.0
	A Middle School Graduated	19	15.8
	High School Graduate	11	9.2
	Graduate Institute	21	17.5
	Bachelor	17	14.2
	Master	3	2.5
Mother Level of Education	Do not Read and Write	15	12.5
	Read and Write	45	37.5
	Elementary School Graduate	13	10.8
	A Middle School Graduated	12	10.0
	High School Graduate	11	9.2
	Graduate Institute	14	11.7
	Bachelor	9	7.5
	Master	1	.8
Households Occupation	Employee	39	32.5
	Gainer	73	60.8
	Housewife	1	.8
	Retired	2	1.7
	Does not work , unemployee	5	4.2
	Total	120	100.0
Family Type	Single	67	55.8
	Extended	53	44.2
Family Monthly Income (in Iraqi dinars)	Less than 300.000	23	19.2
	300.000- 600.000	31	25.8
	601.000- 900.000	47	39.2
	901.000- 1.200.000	6	5.0
	1.201.000- 1.500.000	12	10.0
	More than 1.501.000	1	0.8
Home ownership	Owned	49	40.8
	Rent	38	31.7
	Mutual	33	27.5
	Total	120	100.0

Freq.=Frequencies, %=Percentages, $\bar{x} \pm S.D$ =Arithmetic Mean and Std. Dev. (S.D.)

Table (2): Summary Statistics Quality of Life for Children with Autism Spectrum Disorder after Completing the Rehabilitation Course of Main Domains

No	Domains	N	MS	SD	Ass.
1	Physical Health Domain	120	2.09	0.312	M
2	Psychological Health Domain	120	1.91	0.238	M

3	Social Relationship Domain	120	2.11	0.438	M
4	Level of Independency Domain	120	2.04	0.382	M
5	Environmental Domain	120	1.90	0.408	M
6	Spiritual Health Domain	120	1.34	0.441	L
	Weighted Overall Main Domains (*)	120	1.95	0.206	M

N= Number of Sample ,M.S. =Mean of score , SD. = Standard Deviation , Ass.= Assessment, No.= Number of items , Level of Evaluation: (1-1.67) = Low ;(1.68-2.33) = Moderate; (2.34-3.00) = High, M = Moderate, H= High, (*) Weighted by the number of items in each main domain

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