

Autism Spectrum Disorder: Through the Lens of the Significant People in the life of Paulo

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Abstract

This qualitative phenomenological study determined the experiences and challenges of the significant people around Paulo's life, who was diagnosed with autism spectrum disorder (ASD). The purpose of the study is to understand the experiences and challenges of parents, family members, teachers referred to as the significant people in the life of Paulo with autism spectrum disorder. This study is a qualitative research, purposive sampling was done to select key informants and thematic analysis was used to interpret the collected data. The Participants of the study were the significant people around Paulo's life, (3) family members and (3) general education teachers, who participated in the in-depth interview (IDI) and focus group discussion (FGD). Based on the findings of the study, five (5) themes emerged in exploring the experiences of the significant people in the life of Paulo who was diagnosed with autism spectrum disorder namely: (1) supporting the child with ASD is a burden; (2) adjustment of lesson time while the child is in good mood; (3) dropping to the floor to distress himself; (4) late referral to behavioral doctors due to parent's hope; and (5) behavioral problems of an autistic learner that affects teaching-learning process. To address the issues and challenges they shared ways namely: early consultation from behavioral doctor, acceptance, understanding the child's behaviour and uniqueness, give extra care and love, capacitate oneself to handle the child, establish rules and reward system, medical intervention. They point out insights that could help others whenever same problems may arise: ASD is a condition that needs professional assistance, it requires deep understanding and patience, child with ASD has gift and strength. This study provides an avenue for all school administrators, teachers, learners, DepEd officials as well as barangay officials to understand the real-life issues and challenges faced by the significant people in supporting an autistic child in the family, in school and in the community.

Keywords: Autism spectrum disorder , significant people, qualitative-phenomenological;

1. Introduction

What if the things we prayed for is opposite to what is expected? This is the story about a mother who only prayed that the child in his womb will be an intelligent child, while talking to a pastor she said, "When I was

pregnant, one thing that I prayed for is that, God will give me an intelligent child". This was uttered by a loving mother with tears in her eyes, after the confirmation that her child had autism spectrum disorder (ASD). "Since God gave me this, so be it, I will accept this whole heartedly", these were the words when the mother totally accepted the truth about her son.

The problem started when the child is in the second grade in a regular class, the teacher always complained about the behavior of the child, Paulo had no eye contact, he always had tantrums, he was irritated by the noise inside the classroom. His attention span was short, at 10 o'clock in the morning the child would loiter around the school campus. He was destructive of the things inside the school. There was one time when Paulo made trouble when he pushed his classmate who is sitting at the lobby of the school. As a result, the parents of the injured child insisted to have their child CT scanned to make sure that there are no abnormalities in the head area, Paulo's mother could not explain and sometimes confused on how to handle her child's behavior "Am I supposed to kill my child for doing so?", her mother would have said every time complaint arises. There were many undesirable things that Paulo did in school, that his parents decided to consult the behavioral doctor. It was around end of September 2023, when the mother finally received diagnosis that his child had an autism spectrum disorder (ASD).

Whether we like it or not, we shall not make Paulo just stay at home and do nothing since children with special needs including children with autism spectrum disorder (ASD) shall not be deprived with recognition and protection of rights to access health and educational facilities in the Philippines, this is sanctioned to Republic Act 7277 or the Magna Carta for Disabled Persons. It is substantial to make teachers, health providers, volunteers and families be trained on how to handle ASD so as to lessen the risk of stress and be compassionate towards their needs.

Autism spectrum disorder (ASD) is a global public health concern. In African countries such as Kenya, there is a greater need for establishing support services for developmental disorders such as ASD. The emotional, social and economic burden of ASD on caregivers is unknown because of a number of challenges. Citizens of Kenya have a unique view of disability and inclusion (Cloete et.al,2019).

In Eastern Europe, parents of children with autism spectrum disorder (ASD) are often at greater risk of experiencing stress and lower quality of life, in comparison to parents of typically developing (TD) children and other developmental disabilities (Colic et.al,2022).

According to the study made by Chepngetich et.al, (2022) in Mandaue City, Philippines, the study reinforces the need for more support for parents with a child with autism especially during the diagnosis and throughout visits to mental institutions when seeking therapy. Autism is a lifetime disorder that warrants lifetime intervention because change is continual. Lack of knowledge and understanding about autism, parents' attitudes on the disorder and misdiagnosis are the major reasons for delayed diagnosis.

In Davao del Norte, Philippines, there are problems in inadequate understanding of IE teachers and parents towards diversity of learners, difficulty of referral to special education (SpEd) specialists because of in-denial parents, class size, lack of training of teachers and the scarcity of instructional materials (Bongabong et.al, 2022).

These made the researchers decided to study the experiences and challenges of the significant people around Paulo's life, who was diagnosed with autism spectrum disorder (ASD), so that parents, family members and teachers with the same experiences would somehow understand and have the courage to accept and support the child and make some interventions as early as possible.

1.1. Purpose of the Study

The purpose of this qualitative case study was to describe the lived experiences of the significant people in the life of Paulo who was diagnosed with autism spectrum disorder (ASD). It focused on the challenges,

coping mechanisms and insights about the experiences of three (3) members of the family and three (3) teachers who handled Paulo from grade 1, grade 2 and grade 3 at Consolacion Elementary School, Consolacion, Panabo City.

At this stage in the research, autism spectrum disorder (ASD) was generally defined as a neurological and developmental discrepancy that affects the interaction, communication and learning of a certain individual with this kind of disability. The symptoms usually appear at age 2, that's why it is described as "developmental disorder" nevertheless, it can be diagnosed at any age (National Institute of National Health, 2024).

1.2. Literature Review

Autism Spectrum Disorder (ASD) is a developmental disability caused by differences in the brain. According to Centers for Disease Control and Prevention 2022, this disability is caused by genetics conditions, but in some cases the causes are not yet known. Scientists are certain that ASD have various causes that act together to alter the development of individuals. Children in autism spectrum disorder may have difficulty in speech and in controlling their behavior or they may learn differently compared to normal children.

Higher level of depression, anxiety and other mental-health crisis may affect parents of children diagnosed with autism spectrum disorder. They may suffer difficulty in adjusting and controlling the behavior of the child (Weiss et.al, 2014).

In the analyses of the study revealed that parents with autistic children undergo through a wide variety of emotions, challenges, and difficulties during their daily lives and that good coping skill is the key to normal functioning within the family which had an autistic child (Kocabiyik et.al, 2018).

1.3. Research Objectives

This study sought to answer the following questions:

1. To explore the lived experiences of the significant people around Paulo's life who was diagnosed with autism spectrum disorder.
2. To identify coping mechanisms on issues and challenges of the significant people in the life of Paulo who was diagnosed with autism spectrum disorder (ASD).
3. To gain insights from the significant people in the life of Paulo who was diagnosed with autism spectrum disorder (ASD).

1.4. Theoretical Lens

The study was backed up by the Theory of Mind Deficit, which is the most common theories of autism, it was developed by Simon Baron-Cohen. Individuals with a theory of mind has the ability to identify their mental states and others, they use this to foresee pertaining to others' behavior (Premack & Woodruff, 1978). To the person with autism this ability is impaired, this is referred to as "mindblindness" (Baron-Cohen, 1999). A deficit in Theory of Mind (ToM) in an individual with autism may have difficulty in explaining their behaviors, understanding their emotions, determine the behavior of others, understanding the idea of others, knowing the intention of others, understanding that behavior affects how others think and they could not recognize facts or fiction. Explicit teaching is a useful strategy in understanding the emotions of others and in solving problem in social situations.

This study is also based on Weak Central Cohesion (WCC), this theory states that person on autism spectrum disorder (ASD) struggles to relate idea at different levels, so they failed to integrate small details into a bigger unit (Frith, 1989). They could not able “to see the forest through the trees.” A deficit in WCC will have difficulty in fixation on details, reading comprehension, literal thinking and generalizing information. Person with ASD are detailed-oriented, they have a strong visual processing. Guiding questions and visual organizers would be of great help for them to make connections and relate to the whole scenarios (Merill, A. 2015).

Another theory that could support this study is the theory of Executive Functioning Disorder, this states the ASD struggled in a complex task involving abstract concepts such as reasoning and planning. They may have difficulty in planning ahead, keeping things organized, following multi-steps instructions and solving problems from variety of information from different sources (Merill, A. 2015).

2. Methods

This chapter contains how the study will be conducted and how the data will be gathered and treated. This is divided into several sections, namely: qualitative research design, data collection procedure, data analysis procedure and qualitative write up and ethical consideration.

2.1. Research Design

This is a research utilizing qualitative research by Creswell (2014), where the design was primarily used to describe, explore and understand the common lived experiences of a person in a certain phenomenon or social issues. The researchers collect data and analysis through interviews and focus group discussions. According to Hameed (2020) this design is used to collect and analyze insights from the informants about the research inquiries. The social environment and the situation of a person is being interpreted and convened in this qualitative research (Adedoyin, 2020).

This study aimed to explore and understand the lived experiences of the family members and the teachers referred to as the significant people around Paulo’s life, who was diagnosed with autism spectrum disorder (ASD). This study was participated by 3 (three) participants from family members for IDI and 3 (three) teachers of Paulo from grade 1, grade 2 and grade 3 for FGD. The responses on their insights, coping mechanisms and experiences towards Paulo in an autism spectrum disorder (ASD).

2.2. Research Participants

According to Creswell (2013), a phenomenological study must be from heterogeneous group and should have a minimum of 3 (three) to a maximum of 9 (nine) participants. In this study, the are 6 (six) participants from the family members of the child and teachers of Paulo whom referred to as the significant people in his life. These 6 (six) individuals, 3(three) for the IDI and 3 (three) Consolacion Elementary School teachers for FGD whom experiences in the issues and challenges in supporting Paulo who was diagnosed with autism spectrum disorder (ASD). For the key informants to be guided in answering the interview, the researchers discussed with them the objectives as well as the methodology of the study.

The participants were identified through purposive sampling, according to Creswell (2014) these participants can give perceptions to the research questions or objectives. Selecting them might give the researchers something for analysis. In this study, the researchers selected the participants who are individuals from the family members and teachers referred to as the significant people around the life of Paulo who has a diagnosis of autism spectrum disorder (ASD), they were chosen and asked for a voluntary participation.

2.3. Data Analysis

1. The findings would be the basis on formulating the conclusions and future directions. Creswell (2013), designed six steps in data analysis.
2. Organize and prepare the data by transcribing the interviews, scanning, and cataloging the visual materials.
3. Read and look at all the data, this step gives a general sense of the information and secures the opportunity to reflect according to Creswell (2013).
4. Coding phase is categorizing the images and text and then labeling with a term.
5. The coding process is employed so as to give a description of the people, setting or thematic analysis. This will be represented in a qualitative narrative.
6. The last step is making an interpretation of the findings or the results.

2.4. Ethical Consideration

Exploring the lived experiences and challenges of significant people in the life of Paulo with Autism Spectrum Disorder (ASD) necessitates stringent ethical considerations to ensure respect for autonomy, beneficence, and justice. Informed consent was obtained from all participants, ensuring comprehension and voluntary participation, while also safeguarding against exploitation or harm. Confidentiality and anonymity must be maintained to protect the privacy of both participants and their sensitive personal information. Furthermore, researchers must be vigilant in avoiding stigmatization or perpetuation of stereotypes about ASD through their portrayal of participants' experiences. These ethical principles, as outlined by the Belmont Report (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979), serve as foundational guidelines to uphold the dignity and rights of individuals involved in research endeavors.

3. Results

This chapter presents the results of the study about the lived experiences and challenges of the family members and teachers referred to as the significant people in the life of Paulo, their coping mechanisms as well as their insights in supporting the child who was diagnosed with autism spectrum disorder (ASD) which emerged in the in-depth interview and focus group discussion. The researchers analyzed the data thoroughly and pull out the main idea. The main ideas were determined from the transcription followed by the construction of themes.

3.1. Issues and Challenges of Family Members and Teachers on Handling Paulo who had a Diagnosis of Autism Spectrum Disorder (ASD).

After analyzing the inner feelings of the participants about the issues and challenges on handling the child with autism spectrum disorder (ASD), five (5) major themes emerged: (1) supporting the child with ASD is a burden; (2) adjustment of lesson time while the child is in good mood; (3) dropping to the floor; (4) late referral to behavioral doctors due to parent's hope; and (5) behavioral problems of an autistic learner that affects teaching-learning.

3.1.1. Supporting the Child with ASD is a Burden

Supporting the child in an autism spectrum disorder is a burden on the part of family members and parents.

This concept is linked to the responses from family members and teachers who expressed their experiences:

“Naka decide ko nga ipa diagnose nako kay dili na nako makaya iyang behavior, kay kung masuko ko unya akong disiplinahan, musamot man siya ka unmanageable, na stress ko.” (IDI_T01)

(I decided to seek medical assessment since I cannot anymore manage the behavior of my child, if I disciplined him his behavior got worst, it is stressful.)

“There are few times nga dili masabot ang iyang behavior, masapot siya sayo pa sa buntag.” (FGD_T01)

(There are few times that I cannot understand his behavior, he is upset early in the morning.)

“ASD learners have repetitive behavior, unpredictable, emotional outburst that sometimes lead to physical struggle, mugubot jud ang akong klase kung nay mga kabag-uhan nga iyang makita. Pacing of the lesson is a bit slow, assisting him in writing.” (FGD_T02)

(ASD learners have repetitive behavior, unpredictable, emotional outburst that sometimes lead to physical struggle, our classroom will be in chaos if I implement changes. Pacing of the lesson is a bit slow, assisting him in writing.)

“Challenging kaayo, hard to handle, uneasy feeling and a burden.” (FGD_T03)

(It is a challenging experience, it is so hard to handle, uneasy feeling and a burden.)

3.1.2. Adjustment of Lesson Time while the Child is in Good Mood

“For 16 years of my teaching, that was my first time that I handled one (1) diagnosed with autism. I have 32 learners by that time, I have lots of experiences in handling Paulo. First hour in the morning I need to start my lesson right away especially in Reading because I considered my pupil with autism, naa pa siya focus sa pagpaminaw sa akona, attentive pa siya, that’s the reason ako ng itudlo ang mga importante para maka learn siya. I observed that he can read and spell well. After reading and spelling, directly I started my Mathematics lesson kay naa pa siya focus maminaw, he can recognize numbers 0-100 and able to subtract and add numbers.” (FGD_T01)

(For 16 years of my teaching, that was my first time that I handled one (1) diagnosed with autism. I have 32 learners by that time, I have lots of experiences in handling Paulo. First hour in the morning I need to start my lesson right away especially in Reading because I considered my pupil with autism, he still has focus and he is listening and still attentive, that’s the reason why I taught only basic subjects while he is still attentive. I observed that he can read and spell well. After reading and spelling, directly I started my Mathematics lesson while he is attentive, he can recognize numbers 0-100 and able to subtract and add numbers.)

3.1.3. Late Referral to Behavioral Doctor Because of Parent's Hope

This referral is about consulting the right professional to detect any behavioral problems for further actions or interventions.

"Nakitaan nako og mga behavioral problems akong anak tong mga 3 years old pa ug ni eskwela sa kinder hantud grade 1 siya, pero hopeful ko nga mausab ra siya inig dako na niya or inig abot na niya sa higher grade level." (IDI_FM01)

(I observed some behavioral problems with my son when he was 3 years old and when he was in kindergarten and grade 1, but I still have hope that changes would happen as he grow and when he reaches in the higher-grade level.)

3.1.4. Dropping to the Floor

Behavior that some autistic children may exhibit when they are overwhelmed by anger or distress is dropping to the floor.

These are extracted to the responses of the participants during the interviews.

"Naay times nga akong gidala sa mall, nihigda ug nagligid-ligid jud siya didtu sa tiles nga salug mga murag gi feel niya ang kabugnaw sa salug, ako nalang siya kuguson ug manguli nalang me." (IDI_FM01)

(There were times I brought my son to the mall, he lies down and rolled himself to the tiled floor, finding pleasure to the coldness of the floor, I lift him up and went home.)

"After our Mathematics subject, approximately 1 (one) hour and 30 (thirty) minutes, wala na siya'y focus, magligid-ligid na siya ilalom sa teacher's table." (FGD_T01)

(After our Mathematics subject, approximately 1 (one) hour and 30 (thirty) minutes, he lost his focus, he rolled himself under the teacher's table.)

"Naa siya unpredictable behavior outburst pareha anang mukalit lang og siyagit og kusog, unya moligid na dayun siya sa salug." (FGD_T02)

(He had unpredictable behavior outburst like shouting to the top of his lungs and then rolled himself on the floor.)

"He did not participate inside the classroom most especially in our lessons. Dili siya ka follow og instructions, he is not attentive during our lesson. Kung kapoy na siya mohigda na dayun sa salug." (FGD_T03)

(He did not participate inside the classroom most especially in our lessons. He could not follow instructions; he is not attentive. When he is tired, he lies down on the floor.)

3.1.5. Behavioral Problems of an Autistic Learner that Affects Teaching-Learning Process

Behavior problems are those that are not considered typically desirable or acceptable. It affects the perception of the people around much more to the teaching-learning process inside the classroom.

This concept is supported by the responses of the participants.

"Sauna when my child was 3 years old, ginabasahan nako siya og bedtime stories, unya lagi kay teacher man ko, akong butangan og mga tingug ang animals nga akong na mention sa akong ginabasa, pareha anang tingug sa suko nga buaya,

unsa ba nga gisagpa man hinuon ko ni Paulo kay murag nahadlok siya sa sound, naisip nako lahi jud ni siya nga bata.” (IDI_FM01)

(When my child was 3 years old I used to read books in his bed time stories, and because I am a teacher, I put voices for animals that I mentioned in the story just like the sound of a fierce crocodile, suddenly Paulo slapped my face because it seemed like he was afraid of the sound of the angry crocodile and I realized this child is different.)

“I observed basta naa siya’y tantrums, wala gud learning mahitabo on that day kay dili gud siya maminaw.” (FGD_T01)

(I observed if he is in tantrums; no learning would take place on that day since he will not listen anymore.)

“Sensitive kaayo siya sa sound (noise), sabaan siya sa tingog sa iyang mga classmates, maglisud siya magcommunicate sa iyang classmate labi na kung nay ipahimo na group activity sa among mga lessons.” (FGD_T02)

(He is sensitive to sound (noise), he did not like the loud voices of his classmates, he had difficulty in communicating with his peers especially in doing group works.)

“Disturbance sa among classroom learning, tungod kay musinggit lang kalit unya muhilak. Way siya’y pasensiya sa tanang butang. Didn’t like to write and did not participate during teaching-learning process. Short attention span and lack of attention.” (FGD_T03)

(Disturbance in our classroom learning because of his sudden scream and cry. Impatience in everything. Didn’t like to write and participate during the teaching-learning process. Short attention span and lack of attention.)

3.2. Coping Mechanisms of the Family Members and Teachers in the Behavior Problem in Autism Spectrum Disorder (ASD)

This part of the study is about the coping mechanisms of family members and teachers on the issues and challenges they faced in supporting Paulo who was diagnosed with autism spectrum disorder. Upon analyzing the responses, four (7) themes emerged: (1) consultation from behavioral doctor, (2) acceptance and understanding the child’s behavior (3) give extra care and love (4) capacitate yourself on how to handle the child (5) establish rules and reward system (6) medical intervention.

3.2.1. Consultation from Behavioral Doctor

This refers to doctor’s referral for proper diagnosis. If you rely on your own observations, you cannot simply solve the problem, instead you are making the problem worse, you need the right person to give you the exact data related to your concerns.

This concept is linked to the responses mostly from family members, who stated that,

“Naay mga friends namo nga naka dungog sa among problema sa among anak ug nag suggest siya nga ipa consult among anak kay pareha og behavior ang among anak sa classmates sa iyang anak. Mao to nga naka seek jud me og consultation para sa among anak.” (IDI_FM02)

(I have friends who suggested that we should have a consultation because she noticed that the behavior of our son is the same with the behavior of their son’s classmate and so we seek consultation for our son.)

“Naka decide ko nga ipa diagnose akong anak kay dili na nako makaya iyang behavior, kung masuko ko unya akong disiplinahon musamot siya ka unmanageable, sa kadaghan nakong bata nga naagian kay teacher man ko, lahi jud siya sa typical nga bata, destructive kaayo siya sa mga butang, among tv iyang giguba ug daghan pang mga butang nga iyang gidaut sa balay man o sa eskwelahan. Daghan kaayo mga reklamo sa teachers sa iya sa akong ka stress akong matubag nalang, alangan unsaon ko na patyon? Eventually nakakuha me og schedule for consultation unya na diagnosed siya na naay Autism Spectrum Disorder (ASD).” (IDI_FM01)

(I decided to have him diagnosed since I cannot control his behavior, If I got mad and disciplined him, he became unmanageable, I’ve handle a lot of children since I am a teacher by profession I could say that he is different from other typical children, he is so destructive, our tv was destroyed by him and there are a lot of things that he destroyed whether at home or at school. Teachers are complaining and it’s so stressful, sometimes I uttered bad words like, should I kill him for doing that? Eventually, we got scheduled for consultation and the doctor diagnosed him with autism spectrum disorder (ASD).

3.2.2. Acceptance of the child and Understanding the Behavior and Uniqueness of a Child in Autism Spectrum Disorder (ASD)

Acceptance is to receive something wholeheartedly. The participants expressed their acceptance of the child as one of their coping mechanisms in handling the learner with autism spectrum disorder (ASD). When you understand someone, you open your heart and mind and perceive the reasons of his/her actions. Based on the participants responses, another coping mechanism in supporting Paulo is understanding him and his behavioral problems. This was extracted in the responses of the participants.

This captured in the responses below:

“Tong nabuntis ko, isa ra jud akong giampo, nga mahimo siyang intelligent nga bata, pero kay mao man gihatag, wala koy mahimo kundi dawaton.” (IDI_FM01)

(When I was pregnant, one thing that I prayed for is that, God will give me an intelligent child, since God given me this, there’s nothing I can do but accept!)

“Dawaton nato atua man ng anak, alangan ato nang ilabay.” (IDI_FM02)

(Let’s accept, he’s our son, we’re not supposed to throw him away.)

“Acceptance kabahin sa sitwasyon sa bata.” (FGD_T02)

(Acceptance of the situation of the child.)

“Kung masuko akong anak, hinayon lang nako pag-estorya, pasabton lang nakog maayo aron mukalma.” (IDI_FM01)

(If my son got mad I talk to him in a soft voice and explain to him why things go wrong so as to calm him down.)

“I always put in my mind and heart that my pupil with ASD is unique and need extra care, love, patience and attention, with these naa a koy guide para makasabot sa iyaha.” (FGD_T01)

(I always put in my mind and heart that my pupil with ASD is unique and need extra care, love, patience and attention, these are my guides in understanding him.)

“Nakasabot nako sa hinay-hinay that an iron fists and a disciplinarian environment will not be enough to sustain the child’s focus or attention. Letting him learn in their own pace is a good thing, because learners with ASD have a different

potential and perspective. They have bright minds but in their own time.” (FGD_T02)

(I slowly understood that an iron fists and a disciplinarian environment will not be enough to sustain the child’s focus or his attention. Letting him learn in their own pace is a good thing, because learners with ASD have a different potential and perspective. They have bright minds but in their own time.)

“I support him through wide understanding about his personality. I told his classmates to understand him.” (FGD_T03)

(I support him through wide understanding about his personality. I told his classmates to understand him.)

3.2.3. Give Extra Care and Love

Paulo needs extra in everything, especially extra care and love. This was extracted through the responses of the participants.

“Kung naka pahiram ta og kuwarta sa uban, nganu man dili ta ka pa therapy sa atong anak?” (IDI_FM02)

(If we can lend money to others why we can’t send our son for therapy?)

“A soften words and explanation, I listened to him if he wants to talk. I show to him by touching his hands or hug him.” (FGD_T03)

(A soften words and explanation, I listened to him if he wants to talk. I show love to him by touching his hands or hug him.)

“I always put in my mind and heart that my pupil with ASD is unique and need extra care, love, patience and attention, with these naa a koy guide para makasabot sa iyaha.” (FGD_T01)

(I always put in my mind and heart that my pupil with ASD is unique and need extra care, love, patience and attention, these are my guides in understanding him.)

3.2.4. Capacitate Oneself on How to Handle the Child with ASD

Capacitate means finding ways to acquire skills or techniques to be used in a certain situation or problem. For the participants capacitating themselves is one of the coping mechanisms they employed.

“Mag-tan aw ko og mga videos on how to deal with this kind of behavior, movies on you tube about autism, didtu nako na learn na dili daw ipilit sa bata ang dili niya gusto buhaton.” (IDI_FM01)

(Watching videos on how to deal with this kind of behavior, movies on you tube about autism, there I learned not to force the child to do the things that they don’t like to do.)

“Watching videos on you tube, listening to health professionals discussing about this matter. Browsing google and reading online publication that tends to explain ASD to people who are confused as to what ASD is all about.” (FGD_T02)

(Watching videos on you tube, listening to health professionals discussing about this matter. Browsing google and reading online publication that tends to explain ASD to people who are confused as to what ASD is all about.)

3.2.5. Establish Rules and Reward System

Establishing rules and a reward system is another coping mechanism to support Paulo who was diagnosed with autism spectrum disorder. This was stated in some of the responses of the participants.

“Kung mahuman niya ug insakto ang iyang trabaho naay siya nakabutang na checklist, butangan dayun og check tapad sa iyang name.” (IDI_FM01)

(There is a checklist in his task, if he does it correctly, he will have a check sign beside his name.)

“Some of them may have poor communication skills, strong behavioral outburst due to their repetitive behavior, so a thorough repetitive cycle should be established for them to follow.” (FGD_T02)

(Some of them may have poor communication skills, strong behavioral outburst due to their repetitive behavior, so a thorough repetitive cycle should be established for them to follow.)

3.2.6. Medical Intervention

Applying behavioral therapy to lessen and correct the behavioral problems of Paulo.

“Supposed to be twice a week iyang therapy session pero kay wala naman slot maong once a week nalang, usahay pod ma busy me dili me maka adtu sa iyang session, I think ika 8th pa lang me naka pa therapy, naay mga few improvements like mo respond og imong estoryahon, musulti na siya na gusto siya mukaon ug medyo slight na naay eye contact.” (IDI_FM01)

(Supposed to be his schedule for therapy is twice a week, since there is no slot available, we only have it once a week and sometimes we cannot make it due to conflict in schedule, I think for the 8th sessions in his therapy, I observed few improvements, like responding to a conversation, he would tell me If he wants to eat, eye contact is slightly established.)

“Naay slight nga improvement kay Paulo tong nag therapy na siya like dili na niya saktan ang iyang sarili, dili na pod kaayo siya musinggit og kalit.” (FGD_T02)

(I noticed slight improvements to Paulo when he started his behavioral therapy, screaming to the top of his lungs and inflicting pain to himself were minimized.)

3.3. Insights of Family Members and Teachers Whom Referred to as the Significant People in the Life of Paulo who was Diagnosed with Autism Spectrum Disorder (ASD).

This portion highlighted on the insights of the significant people in Paulo’s life who was diagnosed with autism spectrum disorder (ASD). Upon reviewing the participants’ responses three (3) major themes emerged: (1) autism spectrum disorder is a disorder that needs professional assistance; (2) ASD requires deep understanding and patience; and (3) a child with autism spectrum disorder (ASD) has gift and strength.

3.3.1. Autism Spectrum Disorder is a disorder that Needs Professional Assistance

Autism spectrum disorder is a developmental disability caused by differences in the brain, this requires professional practitioner for proper care and intervention.

“Dili lalim kung naa kay anak na naay ASD, e love lang jud siya ug ipa diagnose jud ang bata para matagaan og insaktong intervention. Kung kita lang dili ta trained kung unsaon paghandle, we need professionals about this matter.” (IDI_FM01)

(It’s not easy to have a child with ASD, just love your child and seek medical diagnosis for proper intervention. We need professionals about this matter.)

3.3.2. ASD Requires Deep Understanding

Deep understanding is needed in dealing individuals with ASD.

“Gisabot ra jud nako nig maayo si Paulo, dili nako ginapakita nga nasuko ko sa iya, ginapakita ra nako kung unsaon ang tama nga buhaton.” (IDI_FM03)

(I deeply understand Paulo, I did not show to him that I am mad, I just show him the right thing to do.)

“Impulsive attitude is also evident, coz when they want something they would get it to the highest extent. So, in the end a deep understanding, patience, physical and emotional strength is highly needed.” (FGD_T02)

(Impulsive attitude is also evident, coz when they want something they would get it to the highest extent. So, in the end a deep understanding, patience, physical and emotional strength is highly needed.)

3.3.3. Child with ASD has Gifts and Strengths

Children with autism spectrum disorder (ASD) have gifts and strengths. This was evident on the responses given by the participants.

“They have gift and strengths, for example my pupil with ASD, he is my Best in Reading during the recognition ceremony. He excels in reading and able to read high frequency words, he knows how to spell words too. He knows how to add and subtract numbers and can identify numbers from 0-100.” (FGD_T01)

(They have gift and strengths, for example my pupil with ASD, he is my Best in Reading during the recognition ceremony. He excels in reading and able to read high frequency words at age seven (7), he knows how to spell words too. He knows how to add and subtract one-digit numbers and can identify numbers from 0-100.)

“Hawod kaayo siya mo operate og computer, kabalo siya unsaon pag connect sa wifi, kay naa man me silingan nga naay wifi, naay one-time iyang gi ingnan among silingan dili e off ang Inday Wifi (peso wifi), na shock lang ang silingan kay kabalo siya.” (IDI_FM01)

(He is good on operating the computer, he knows how to connect his gadget to wifi, we have neighbor who had peso Wi-Fi, one time he told our neighbor not to turn off Inday Wi-Fi (peso wifi) our neighbor was shocked that he knows this thing.)

“Maayo siya mukanta, naa isa ka beses nga nag kanta siya kauban iyang mama during sa among school program kabalo siya musabay sa beat sa music, nikanta sila og In the Eyes of a Child of course with reward after singing.” (FGD_T03)

(He knows how to sing, one time he and his mother render a song number during our school program, he knows how to follow the beat of the music, he sang In the Eyes of a Child of course with reward after singing.)

4. Discussions

The purpose of this phenomenological study was to explore and understand the lived experiences of the significant people in the life of Paulo who was diagnosed with autism spectrum disorder, how they coped with the issues and their insights that could be shared to other people. To extract the important details, IDI and FGD were employed using the validated questionnaires by three (3) Master Teachers. All the participants answered the questions and had given significant information for analysis.

4.1. Issues and Challenges of Family Members and Teachers Referred to as the Significant People in the Life of Paulo who was Diagnosed with Autism Spectrum Disorder (ASD).

The family members and teachers who were chosen as the participants expressed their issues and challenges in handling Paulo who was in autism spectrum disorder, five (5) major themes emerged: (1) supporting the child with ASD is a burden; (2) adjustment of lesson time while the child is in good mood; (3) dropping to the floor; (4) late referral to behavioral doctors due to parent's hope; and (5) behavioral problems of an autistic learner that affects teaching-learning.

4.1.1. Supporting the Child in ASD is a Burden

Based on the data collected it was found out that having a child with ASD is a burden. This showed that having children with autism spectrum disorder is difficult and is stressful to family members and teachers.

In line with this there are also studies said that higher objective and subjective burden of parents and frequent psychological stress were reported among parents who have ASD children (National Library of Children, 2018).

Sixty-five percent of Greek mothers reported having health issues and depression symptoms. A kid with ASD placed a heavy financial burden on the family; monthly payments ranged from €401 to €1,000, and in half of the cases, a family member had to take a job or put in more hours to pay for the child's therapy. The majority of mothers (58.18%) expressed concern about the child's future development and said they needed more knowledge on the subject. Seventy-three percent of respondents said the family environment was pleasant. They found that mothers and fathers disagreed a lot on matters pertaining to raising their children (Ntre et al. 2018).

According to Ashley Lengyel, Clinical Director of ABA services, supporting a child with ASD is a long-term burden in terms of finances with respect to raising a child on the spectrum. The financial burden could take on many forms be it using personal transport instead of public modes of transport, hiring a caregiver on a regular basis, quitting a job to take care of the child, and rising expenses associated with raising a child. Sometimes parents are unable to express or are hesitant to reveal their precarious financial situation which can have an adverse impact on the family in general, down the road.

4.1.2. Adjustment of Lesson Time While the Child is in Good Mood

Adjusting or modification of the class time when the student is feeling well created an impact to the academic performance of Paulo. The teacher utilized this technique since she observed that when students is in control of his emotion he learns well.

Students who can control their emotions will perform better academically. Research suggests that emotional control improves cognitive function, especially in adults (Phillips, Bull, Adams, & Fraser, 2002). Blair (2002) posits that a child's inability to regulate their emotions effectively hinders their ability to employ higher order cognitive processes in the classroom, such as working memory, attention, and planning, which in turn affects their academic performance. An inability to pay attention to and recall new information offered by the classroom teacher (National Library of Medicine, 2010).

4.1.3. Late Referral to Behavioral Doctor due to Parent's Hope

Parent's hope led to a late referral to a behavioral doctor, while this is good but in autism spectrum disorder this is not the right thing to do, it may worsen the problem.

The problem is not just about accessing timely support. Late diagnosis, defined in the grant as 12 years or older, is also linked to greater mental health difficulties. One recent study, (Charles Q. Choi, reporter who

wrote for Scientific American, The New York Times, Wired, Science, Nature, The San Diego Union-Tribune, Newsday, Popular Science and National Geographic News) found that people diagnosed with autism in adulthood are nearly three times as likely as their childhood-diagnosed counterparts to report having psychiatric conditions.

4.1.4. *Dropping to the Floor*

The floor feels better, this is how autistic children perceived the floor. This is one way of distressing themselves. This is also one of the manifestations that a child is autistic just like the behavior shown by Paulo when he was about 3 years up to 9 years old.

Speech and control by the social environment are limited or absent; tantrums and atavistic behaviors are frequent and of high intensity; and most activities are of a simple sort, such as smearing, lying about, rubbing a surface, playing with a finger, and so forth. Infantile autism is a relatively rare form of schizophrenia and is not important from an epidemiological point of view. The analysis of the autistic child may be of theoretical use, however, since his psychosis may be a prototype of the adult's; but the causal factors could not be so complicated, because of the briefer environmental history (Fester, 1964).

Since autistic children love the floor, there is a technique called "Floor Time Approach", a typical floor time session wherein it is also referred to as the naturalistic environment and that requires therapist or parents to sit on the floor and work with the child. This helps the child achieve the stages of development and also helps establish relationships between the child and the adult (Lal et.al 2012).

4.1.5. *Behavioral Problems that Affect Teaching-Learning Process*

Behavioral problems are most common to children with autism spectrum disorder. It is our role as teachers to devise strategies that lessen or control such problems.

Behavioral problems can significantly impede the teaching-learning process, especially for learners like Paulo who have autism spectrum disorder (ASD). Research by Allison F. Gilmour et. al. highlights the challenges faced by educators in managing the classroom dynamics of students with emotional and behavioral disorders (EBD), which often include learners with ASD. These challenges may manifest in various forms, such as disruptive behavior, difficulty in following instructions, social communication deficits, and sensory sensitivities. Paulo's autism may exacerbate these issues, making it challenging for him to engage effectively in the learning environment and for teachers to meet his unique needs.

In addressing the complexities of teaching learners like Paulo, it is crucial to implement effective strategies tailored to support students with emotional and behavioral disorders. Studies by Paul Mooney and Joseph B. Ryan emphasize the importance of employing evidence-based interventions and individualized support systems to promote positive behavior and academic success among students with EBD, including those with autism. These strategies may involve establishing clear expectations, implementing visual schedules and prompts, incorporating sensory accommodations, providing positive reinforcement, and fostering a supportive classroom climate. By recognizing the specific needs of learners like Paulo and implementing targeted interventions, educators can create inclusive learning environments that optimize teaching and learning outcomes for all students.

According to five special educators, the majority of children with autism exhibit poor socializing skills and a lack of eye contact, and slurred speech, which range in severity from mild to severe. When there's a lack of eye contact, attention-grabbing techniques are employed; group activities, greeting exercises, turn-taking exercises, and for poor socializing.

Teaching includes speech, vocabulary recognition, and generalization. Special educators revealed a range of instructional resources utilized in the classroom, such as reading books, puzzles, scissors, cutting boards,

pencil holders, jigsaw puzzles, workbooks, speech flashcards, and problem-solving puzzles (Azeem et.al, 2019).

4.2. Coping Mechanisms of Family Members and Teachers Referred to as the Significant People in the Life of Paulo who was Diagnosed with Autism Spectrum Disorder (ASD)

Family members and teachers have coping mechanisms in handling Paulo who was diagnosed with autism spectrum disorder, six (6) major themes emerged: (1) consultation from behavioral doctor; (2) acceptance and understanding of child's behavior; (3) give extra care and love; (4) capacitating oneself on how to handle the child; (5) establish rules and rewards; and (6) medical intervention.

4.2.1. Consultation from behavioral doctor

It is substantial to seek consultation from behavioral doctor for proper diagnosis and treatment.

There is a spectrum of intellectual and linguistic functioning in people with ASD. Symptoms usually early childhood (by the age of 2-3): present with or without linguistic delay and could be linked to early delays in growth and/or loss of language or social skills abilities. But many people might not be diagnosed with ASD until they are adults. This could result from a number of among other things, such as the general lack of awareness of ASD longevity, inadequate understanding of ASD in women, and/or absence of services (Young et.al, 2020).

4.2.2. Acceptance and understanding of the child

Despite the difficult situations the participants encountered in supporting Paulo, they managed to slowly accept the child wholeheartedly, with this acceptance they would be able to widen their mind and avoid stress for themselves and to Paulo as well.

In Jordan, family members and teachers are being aware of the degree of societal acceptance of autism spectrum disorder in youngsters allows us to offer suitable services. Additionally, it aids in achieving a smooth and successful assimilation into society in addition to aids in achieving thorough integration in the appropriate how society views and accepts kids with autism spectrum disorder has a favorable impact on the family's the child's acceptance and care, in addition to supplying all facilities necessary for children with autism to practice their many pursuits in the neighborhood and their organic surroundings (Al-Shenikat, 2022).

4.2.3. Give Extra Care and Love

ASD learner needs extra care and love, neglecting them is detrimental to their whole being. They are human beings that needs much care and love.

When parents are confronted with a diagnosis of autism in their child, seeking the advice of experts in neurodevelopmental disorders is seen as the obvious path for developing their parental love. The neurodevelopmental diagnosis of autism has an exculpatory effect that might be necessary to safeguard parental love, as it relieves parents of some of the responsibility they feel for the child's challenging behavior (Jacobs et. al, 2018).

4.2.4. Capacitating Oneself on How to Handle the Child

It is but normal to parents or teachers when one of the learners manifest unusual behavior inside the classroom, they tend to find ways, ask someone or search something that could lessen their problems, they capacitate themselves so that they will be able to manage or give solutions to the problem they are facing., this what the participants did in supporting Paulo who had a diagnosis of autism spectrum disorder (ASD).

In a study, to explore mentors' and mentees' reflections about their experiences of participating in an inclusive education professional development program in United Arab Emirates (UEA), it was found out that professional development program provided a momentous achievement in implementing inclusive pedagogical practices. If teachers or faculty members are committed to dedicating time to read and learn it, inclusive education can be achieved (Meda et.al, 2023).

4.2.5. Establish Rules and Reward System

Children with autism spectrum disorder like Paulo, controlling their behavior is difficult and can hinder the learning of the child, family members and teachers must establish rules and need to be firm in the implementation and should be followed by a reward and it really works according to the responses of the participants.

According to the research conducted by Glademair Alcazar, Jessielyn Nemenzo, and Marilou Peralta focuses on the implementation of a reward system to foster good study habits among Grade Two pupils in the Philippines. The study investigates the impact of integrating a reward system into the academic environment and its effects on the academic achievement of students. By establishing rules and implementing a structured reward system, the researchers aim to incentivize positive behaviors and academic engagement among pupils. Through empirical analysis and observation, they assess how the introduction of rewards influences students' motivation, study habits, and overall academic performance. The study underscores the significance of creating a supportive learning environment that incorporates clear rules and positive reinforcement mechanisms to enhance students' academic outcomes.

In the realm of motivation and rule learning, E. J. H. Jones explores the role of rewards within the context of autism spectrum disorder (ASD). The research delves into how individuals with ASD perceive and respond to different types of rewards in social contexts. By investigating the interplay between reward type and social context, Jones aims to deepen understanding of how individuals with ASD navigate rule-learning tasks and social interactions. The study sheds light on the complexities of motivation and reward processing in individuals with ASD, highlighting the importance of tailoring intervention strategies to accommodate diverse learning styles and cognitive profiles. Through a nuanced examination of reward mechanisms, the research contributes to the development of effective interventions and support systems for individuals with ASD, ultimately promoting their social and academic inclusion.

4.2.6. Medical Intervention

After the diagnosis of Paulo, the parents seek for medical intervention and therapy to correct the behavior of the child, slight improvement was detected by the participants.

According to the study made by Filipek et.al (2006), medical intervention for children with autism highlights potential benefits though others may respond differently compared to other children, the research suggests, it can significantly improve the quality of life for both the child and their family.

Moreover, evidence suggests that the earlier the onset of intervention, the greater of an improved developmental progress. It is claimed that early intervention is more of more cost and time efficient than a "wait and see" approach (Koegel et.al, 2014).

4.3. Insights of Family Members and Teachers Referred to as the Significant People in the Life of Paulo who was Diagnosed with Autism Spectrum Disorder (ASD)

Family members and teachers developed insights while they are supporting Paulo who was diagnosed with autism spectrum disorder (ASD), three (3) themes manifested: (1) needs professional assistance; (2) requires deep understanding and (3) a child with ASD has gifts and talents.

4.3.1. Needs Professional Assistance

In autism spectrum disorder (ASD) cases, this professional refers to an expert who had a thorough knowledge about this disease. Regular teachers need support in order to meet the needs of children in autism spectrum disorder (ASD).

In a mixed method study developed by Corkum et.al (2014), identifying the educators need for professional development to determine how best to support them in providing quality program design for children with Autism Spectrum Disorders (ASD) in an inclusive educational system. Information was collected through focus groups with key school board informants (n = 33) and a survey of educators (n = 225). The results indicate that educators have found it difficult to meet the wide-ranging and varying needs of children with ASD within a strictly defined model of inclusive education. Educators consistently emphasized the need for multileveled and multipronged professional development that is accessible in a timely fashion and available as needs arise. The need for educational programs that work for children with ASD being taught within inclusive education settings is highlighted.

Moreover, according to Kester et.al (2019) in U.S they investigated the perceived interdisciplinary needs of transition professionals who support youth with autism spectrum disorders (ASD) in special education and public state-federal vocational rehabilitation (VR) systems the result underscores the importance of interdisciplinary collaboration and ongoing professional development in effectively supporting individuals with ASD during the transition process.

4.3.2. ASD Requires Deep Understanding & Patience

Family members and teachers must understand and must have patience in dealing children with autism spectrum disorder (ASD).

It is vital to understand that autism is a chronic illness that is stressful to the family since autism is severely disabling disorder. Autistic children manifest difficulty in speech, social behavior and tantrums. Moreover, the longer period of therapy and the idea of no cure for autism spectrum disorder, that families have to care for the disabled members for many years (Gray,1994).

In addition, there are negative psychological effects to family members with autism children. Higher risk of depression, social isolation, and marital discord have found to parents according to studies. They may have a feeling of deep sadness, disbelief, self-blame, anger, helplessness, inadequacy, shock and guilt (Gupta, 2005).

4.3.3. A Child with ASD has Gifts and Strengths

Children with autism spectrum disorder have discrepancies in their behavior but they have extraordinary talents and physical strengths.

Autistic children need more attention and in-depth investigation about their prevalent ETs, it is suggested to consider areas of talent separately rather than combining them into one group of children with any talent. Exploration of PS is encouraged for future studies. ASD has many challenges but understanding their strengths is needed to inform educational scholar and treatment programs and support plans. To foster positive self-image for autistic children recognizing and celebrating their strengths bring impact to their mental health and well-being (Bal et.al, 2022).

In a study result, some parents also identified talents and strengths for their autistic child. Enhanced cognitive ability, intelligence, and learning reflects on cognitive and learning skills category. It was addressed by 24 participants (62%) as the most frequent category. Majority of the parents addressed academic success in Language Arts, Math, Science, Geography etc. Parents also reported their child as being smart, analytical, or logical and having good memory (Warren et.al, 2021).

5. Recommendations

Autism spectrum disorder is one of the conditions that the family is suffering from nowadays. The presence of this condition brought a dilemma to the family and the school. The study successfully gathered the experiences, coping mechanisms and insights of the family members and teachers referred to as the significant people in the life of a child who had a diagnosis of autism spectrum disorder. Their overall perspectives were summarized, and so general themes emerged from the responses of the family members and teachers of Paulo who had a diagnosis of ASD. This study provides an avenue for all school administrators, teachers, pupils, DepEd officials as well as barangay officials to understand the real-life issues and challenges faced by the significant people in supporting an autistic child in the family and in school.

In light of the results of the study, DepEd officials may conduct training to teachers who lacks knowledge and skills and so to effectively implement the inclusive education. They may put up SPED schools in remote areas to cater learners with ASD not yet ready for mainstream school. They may also help the parents by hiring behavioral doctors for easy access and to diagnose their children if they found some abnormalities in the behavior of their child. They may also conduct seminars to parents about the acceptance and proper handling of ASD to lessen their burden. Barangay officials are encouraged to monitor their constituents to also give access to health professionals especially in the detection of children with ASD in their barangay.

Finally, everyone is encouraged to be open minded about Autism Spectrum Disorder, to have an open hearts and minds to accept and understand someone who had this condition.

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We also acknowledge the methodological guidance provided by Creswell (2013), which emphasized the importance of a heterogeneous participant group in phenomenological studies. Adhering to these principles, our study comprised six participants, including family members and teachers of Paulo, who participated in in-depth interviews (IDI) and focus group discussions (FGD), respectively.

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