

GRATITUDE AND OPTIMISM IN PARENTS OF CHILDREN WITH AUTISM SPECTRUM DISORDERS (ASD)

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ABSTRACT

Autism as one of 5 (five) type of Pervasive Development Disorder (PDD) which was increasing from year to year in Indonesia. Patience and a good understanding of their condition is very necessary, especially children with autism. Parents as the closest people caring for children with autism are sometimes pessimistic about the future conditions of their children because people with autism can only be treated therapy or intensive treatment even the disorder are categorized as incurable. The right therapy could be traced from the variables that may influenced the children. The purpose of this study was to examine the relationship of gratitude with optimism in parents of children with autism spectrum disorders (ASD). The research hypothesis was that there was a positive relationship between gratitude and optimism in parents of children with ASD. Research subjects were 125 parents who have child or children with ASD. Instruments used in this research were Gratitude Questionnaire (GQ) to measure gratitude and Life Orientation Test (LOT-R) to measure optimism, and product moment was used to analysis the datas. Interviews were conducted to 15 subjects in order to obtain more comprehensive information about gratitude and optimism in parents of children with autism. The results showed that there was a positive relationship between gratitude and optimism in parents of children with ASD. The analysis also shows that there was no difference in gratitude level when viewed from the sexe dan education level of parents, but father more optimistic than mother. Level of gratitude and optimism belong to the medium category. Other results showed the belief of parents about their children, children with autism was the best gift from God.

Key words: gratitude, optimism, parents, autism

INTRODUCTION

The number of autism spectrum disorders (ASD) in the world increases significantly. In 2011, there were 35 million cases of ASD which means 6 of 100 people in the world inhibit ASD (UNESCO, 2013). The data of CDC (Center for Disease Control and Prevention) the United States of America also showed there was an improvement of the number of the case of ASD from 2000-2016. In 2000-2002, the case of ASD occurred to 1 of 150 children, in 2004, there was case improvement became 1 of 125 children, in 2006 became 1 of 110 children, in 2008, the ratio was 1 of 88 and in 2010 – 2016, the case of ASD was reported to increase became 1 in 68 children.

Based on the data of the World Health Organization (WHO), the autism prevalence in Indonesia also increases amazingly, from 1 of 1000 people became 8 of 1000 people and it exceeded the average world number of autism that was 6 of 1000 people (Labola, 2018). The projection of the Central Bureau Statistics (2015) towards the Indonesian people from 2010-2035 increase extremely. In 2015, Indonesia has 254, 9 millions of citizens which make Indonesia the fourth country with the highest population so that it is estimated there is 1 in 250 children or it reaches 134.000 children inhibit autistic spectrum disorders (<http://harnas.co/2018/04/01/tren-penderita-autisme-meningkat>).

Autism is a part of Autisme Spectrum Disorders (ASD), that is, developmental disability of children and it is 1 of 5 kinds of Pervasive Development Disorder (PDD). Autism spectrum disorder (ASD) is a developmental disability defined by diagnostic criteria that include deficits in social communication and social interaction, and the presence of restricted, repetitive patterns of behavior, interests, or activities that can persist throughout life (APA, 2013). Developmental disabilities are a diverse group of severe chronic conditions that are due to mental and/or physical impairments. People with developmental disabilities have problems with major life activities such as language, mobility, learning, self-help, and independent living. Developmental disabilities begin anytime during development up to 22 years of age and usually last throughout a person's lifetime. (Boyle, Boulet, Schieve, Cohen, Blumberg, Yeargin-Allsopp, 2011).

Support and attention from parents, society, and the neighborhood of the children are very needed because children with autism spectrum disorders are often seen as peculiar children, naughty, difficult to be managed and even crazy so that they easily get violence or discrimination from their environment. Children with ASD can grow and develop optimally if the closest people like parents keep striving for early and intensive distinctive protection. The special acceptance and treatment are the key to the protection of children with ASD. However, some parents who have children with ASD feel depressed (Olsson & Hwang, 2001), stressed (Benson, 2006; Rao & Beiden, 2009), and have lower overall well-being (Ekas, Whitman, & Shivers, 2009) because they face numerous challenges, including obtaining a diagnosis, finding appropriate treatment and educational programs, and struggling with the financial burden of paying for services (Whitman, 2004).

Commonly, the first parents' responses when they know that their children are autism are sad and not accept the condition. They blame themselves and others because they know that people with autism can only be treated therapy or intensive treatment even the disorder are categorized as incurable. The right therapy could be traced from the variables that may influenced the children. Some parents also feel shy, weak, helpless. They give up on the situation and worried about children's future, and feel that their lives are less fortunate compared to others. This condition indicates that parents are less optimistic.

Optimism is one positive characteristic that may be important to mothers of children with ASD (Ekas, Lickenbrock, & Whitman, 2010). Optimism may impact how parents perceive their children (Nelson & McIntyre, 2017). The parents who cannot accept their children will tend to ignore them whereas children need a person that can understand their condition, give them attention, taking care of them well and properly so they can grow and develop to be a tough person.

Gratitude is one factor associated with positive outcomes in the general population and also be associated with positive outcomes for mothers of children with ASD (Timmons, Ekas, & Johnson, 2017). Gratitude means a confession that there is a good and pleasing thing in the world (Emmons, 2007). Some researches have proved that gratitude is a very important resource for each people (Emmons & Shelton, 2009) and it is correlated with optimism (Emmons & McCullough, 2003).

Many kinds of research about optimism have done such as the research on a prisoner (Agripinata & Dewi, 2013.), lupus sufferer (Permitasari, Nurudhin, & Wicaksono, 2014), uterine myoma sufferer (Cahyasari & Sakti, 2014), tsunami victim (Vastfjall, Peters, & Slovic, 2008), yet there is still rarely done to the parents of children with ASD. The research about optimism also has done on mothers and fathers of children with ASD (Willis, Timmons, Pruitt, Schneider, Alessandri, & Ekas, 2016), parents of young children with developmental delay (Nelson & McIntyre, 2017) or mothers of children with ASD (Ekas, Lickenbrock, & Whitman, 2010). The research about religiosity and spirituality in mothers of children with ASD (Ekas, Whitman, & Shivers, 2009) and gratitude intervention parents of children with ASD (Timmons, 2015) also has ever done before. However, limited studies are examining the effects of gratitude and optimism among parents of children with ASD. Due to that reason, the present study examined the relationship between gratitude and optimism, in a sample of parents (father and mother) of children with ASD. The research hypothesis was that there was a positive relationships between gratitude and optimism in parents of children with ASD.

Optimism

Optimism is a cognitive disposition to expect and anticipate positive outcomes in life (Scheier, Carver, & Bridges, 2001; Srivastava, Richards, McGonigal, Butler, & Gross, 2006; Srivastava & Angelo, 2009; Carver & Connor-Smith, 2010). Optimism is the generalized expectation that good rather than bad events will occur (Carver, Scheier & Segerstrom, 2010). Based on Expectancy-Value theory, the differences between optimism and pessimism can be distinguished. Optimism is the propensity of individuals to have a complete positive expectation for their future, while pessimism is the propensity of individuals to have negative expectation for their future. It relates to how individuals evaluate their coping situation and strategies in the past. An optimistic individual perceives that obscurity can be overcome lucratively, therefore, they will produce positive emotions like pleased, satisfied, and joyful. On the contrary, the pessimistic individual perceives difficulty as a disaster that will bring negative emotions such as anxiety, sadness, and dissatisfaction (Carver & Scheier, 2003).

Optimism has been characterized as a health asset. In other words, optimism can be considered a psychosocial resource that may protect health over the life course (Rasmussen, Scheier, Greenhouse, 2009). Optimism is influenced by genetic factors, abstract thinking, age, parenting patterns, social feedback, experiences (e.g., trauma) (Benson, 2008), socio-economic (Carver, Scheier & Segerstrom, 2010), self-concept and self-identity (race, gender, religion, age) (Burant, 2006) and gratitude (Emmons & McCullough, 2003).

Gratitude

Gratitude is described as an individual predisposition (Chan, 2010) and an effective trait that we call the grateful disposition or disposition toward gratitude (McCullough, Emmons, & Tsang, 2002). The grateful disposition is an affective tendency toward recognizing and responding to the role of other moral agents' benevolence in one's positive outcome (Emmons, McCullough, Tsang, 2003). Gratitude as a grateful trait, refers to a wider life orientation based on a sense of abundance, the appreciation of little things in life, and the appreciation of what others have done for us (Thomas and Watkins 2003). The grateful trait has been suggested to be an important source of human strength in achieving and maintaining good mental health (Emmons & Crumpler, 2000; Snyder and Lopez 2009). Although people of a grateful disposition may not experience gratitude at any given moment, they are more likely than others to feel thankfulness in particular situations (Chan, 2010).

Gratitude can be given transpersonal/nonhuman (such as God, nature, animal) and interpersonal/human (to another person) (Emmons & Shelton, 2002; Ruini, 2017). However, an individual cannot point it out toward himself (Snyder & Lopez, 2009). Gratitude is a form of personal characteristics that thinks positively and represents life which becomes more positive (Wood, Joseph, & Maltby, 2009). Gratitude are anchored in two essential pieces of information processed by an individual: (a) an affirming of goodness or "good things" in one's life and (b) the recognition that the sources of this goodness lie at least partially outside the self (Emmons & Stern, 2013).

Emmons, McCullough and Tsang (2003) distinguished four facets of grateful disposition: intensity, frequency, span, and density. Grateful individuals may experience thankfulness more intensely during the occurrence of positive events, and may report gratefulness more frequently throughout the day. Grateful people may also feel thankful in greater number of life circumstances (e.g. thankful for their jobs, their families, and their health) and may experience gratitude in their life with higher density (towards more people) (Gilek, Finucane, Austin, 2010).

Gratitude will give benefits, these are, the life is calmer, personal relationship is more satisfying, and pleased (Emmons & McCullough, 2003; McCullough, Emmons, & Tsang, 2002), improve the psychological and physical health, give positive effect, prosocial, religiosity, optimism, enthusiasm (Bono, Emmons, & McCullough, 2004), social support, positive reinterpretation and growth, active coping, and planning (Wood, Joseph, & Linley, 2007), life satisfaction (Szczesniak & Soares, 2011).

METHOD

Procedure

Participants were recruited from local autism support groups and a regional autism service center. A total of 125 parents (father or mother) of children with ASD participated in this research. The subjects were given the requisite instructions on the Gratitude Questionnaire (GQ-6) and The Revised Life Orientation Test (LOT-R) at a time.

Measure

The Revised Life Orientation Test (LOT-R; Carver & Scheier, 2003) was used to measure optimism as it relates to outcome expectancies. The LOT-R contains 10 items asking parents to indicate their agreement using a 5-point Likert-type scale (1 = strongly agree to 5 = strongly disagree. Sample items included: “In uncertain times, I usually expect the best.” A higher score on the LOT-R indicates higher global optimism. Cronbach’s alpha for the LOT-R in this sample is $\alpha = 0.84$, indicating high internal consistency (Weels & Wollack in Azwar, 2018).

Gratitude Questionnaire (GQ-6; McCullough, Emmons, & Tsang, 2002) was used to measure one’s general tendency to feel grateful towards perceived benefactors. GQ contains 6 items asking parents to indicate their agreement using a 5-point Likert-type scale (1 = strongly agree to 5 = strongly disagree). Sample items included: “I have so much in life to be thankful for”. A higher score on the GQ indicates higher gratitude. Cronbach’s alpha for the GQ in this sample is $\alpha = 0.86$, indicating high internal consistency (Weels & Wollack in Azwar, 2018). Interviews were conducted to 15 subjects to obtain more comprehensive information about gratitude and optimism in parents of children with an autism spectrum disorder. This subjects had high, moderate, low score of gratitude and optimism. They were also willing to be interviewed by signing informed consent.

Analysis

Pearson product moment analysis is used to examine the relationship between gratitude and optimism in parents of children with ASD. Whereas Anova is used to see the difference between gratitude and optimism based on the gender and education level of the parents.

RESULTS

The subjects of the research were 125, aged 25 - 58 years old (M=36.7 years old), consisting of 59 fathers (47%) and 66 mothers of children with ASD (53%), middle education (52%) and higher education (48%). The majority of subjects were Muslim (75%).

Table 1: Subject distribution

Criteria	Number	%
Gender		
Male (Father)	59	47
Female (Mother)	66	53
Education level		
Junior High School (JHS)	5	4
Senior High School (SHS)	60	48
Bachelor (Bach)	51	41
Master degree (MD)	9	7
Age		
20-30	15	12
31-40	57	46
41-50	46	37
50-60	7	5
Religion		
Islam	94	75
Christian	17	14
Catholic	14	11

Table 2: Product-moment analysis

	N	Mean	SD	r	Sig.(1 tailed)
Gratitude	125	19.39	5,20	0.619	0.000**
Optimism		31.11	8.05		

Note : ** p<0.01

The analysis showed that there was positive relationship between gratitude optimism ($r = 0.619$; $p = 0.000$). Mean of gratitude is 19.39 (medium category), and mean of optimism is 31.11 (medium category). This research proved the hypothesis that there was positive relationships between gratitude and optimism in parents of children with ASD.

Table 3: Anova analysis between gratitude and optimism

		N	Mean	F	Significance
Gratitude	Gender				
	a. Male (father)	59	19.32	0.811	0.370
	b. Female (mother)	66	19.42		
	Education level				
a. Middle (JHS, SHS)	65	19.55	2.256	0.136	
b. Higher (Bach., MD)	60	18.87			
Optimism	Gender				
	a. Male (father)	59	33.10	9.645	0.002**
	b. Female (mother)	66	30.51		
	Education level				
a. Middle (JHS, SHS)	65	31.27	2.685	0.104	
b. Higher (Bach., MD)	60	32.54			

Note : ** p<0.01

Analysis showed that:

- a. There was not any different gratitude between father and mother who have children with ASD (F = 0.11; p = 0.370; p>0.05).
- b. There was not any different gratitude between higher (Bach., MD) and middle educated parents (JHS, SHS) (F = 2.256; p = 0.136; p>0.05).
- c. There was different optimism between father and mother (F = 9.45; p = 0.002; p<0.01) where father was more optimistic (mean = 33.10) than mother (mean = 30.51).
- d. There was not any different optimism between higher (Bach., MD) and middle educated parents (JHS, SHS) (F=2.685; p=0.104; p>0.05).

DISCUSSION

Gratitude has positive relationship with optimism, it means the parents who are grateful for the condition that they accept will have positive hope toward the next future. On the contrary, the parents who are not grateful for the condition that they accept will have negative hope toward the next future. Gratitude occurs when someone accepts the other's benefit as a moral obligation. Gratitude is the key to the element that triggers positive changes in the individual and family (Bono, Emmons, & McCullough, 2004). Grateful parents will realize and thank for everything that they accept as well as when they get autism children as kindness from God so they feel that they require to reply to the kindness from God by always think positive. The grateful parents assume that children are the fortune from God that must be taken care of. As cited in the interview follows:

"I am grateful because I have a child AA as a part of our family. Whatever his condition (ASD) ... he is livelihood which is given by God for us so that we must take care of him well. We hope we can take care of him well and in the future AA can be independent and has a better life."

Before the parents accept their children's condition, the first parents' responses when they know the condition of their children vary such as surprised, sad, confused, shy, worried, feel guilty, and feel unlucky. The parents of children with ASD will have a different experience as well in taking care of their children compared with the other common parents. These various life experiences can create a grateful feeling which comes up from the perception that someone has received the giving from others (Emmons, McCullough & Tsang, 2003). They feel grateful because God has given them children even though their conditions are not perfect. However, by having children who do not have perfect condition make them get supports from the family, friends, and society. These supports will create the feeling that they are not alone and alienated, admitted that their lives are connected with people around them as family and friends. It makes someone feels better and makes the world becomes a peaceful place and full of love (Emmons & Hill, 2001). Finally, this condition will strengthen the parents' mentality and make them believe that they can take care of the children better compared to other parents. As cited in the interview follows:

"In the beginning, I was confused and very sad ... I did not expect that my children are like this (ASD) ... but after time went by I can accept the decision from God ... and with the condition of my children like this (ASD), there are many supports to me ... start from the parents, friends, and neighbors ... they strengthen me to be patient, convince me that I am strong and give information about the treatment for autism children. My parents in law also become more care than before. *Alhamdulillah.*"

Grateful people will not feel lacking in his/her life and will respect the contribution from others towards him/her (Watkins, Woodward, Stone, & Kolts, 2003). Gratitude can raise the individual's orientation of life which gives more attention and respects the good things (Wood, Froh, & Geraghty, 2010). Grateful people feel better about their life as a whole and are more optimistic about the future (Emmons and McCullough, 2003). By being grateful, the parents still hope about something good or are optimistic to their children's future because optimism are people who expect good things to happen to them while pessimists are people who expect bad things to happen to them (Carver & Scheier, 2003). The parents do not see the children as obstacles and pressure so that they do not get stressed. Meanwhile, the less grateful parents will complain more and feel lacking

in their life. This will affect the feeling of hopeless, less persistent in taking care of their children because they feel the condition of autism children will not be as like the other normal children. As cited in the interview follows:

“Why my life is like this ...? 2 of 4 of my children are a disorder (ASD) ... my life is like less fortunate. I have survived for 10 years with all of my limits to look for the best medication for my children ... but the result has not maximized yet ... it is okay..... I must accept it even it is hard. Sometimes, I cry if I think about their future which possibly will always become troublesome to people, cannot go to school normally and especially work by themselves. I do not know how my life and my children will be”

This research is also reflected in other studies, which found positive relationships between gratitude and optimism (McCullough, Emmons, Tsang, 2002; Emmons, McCullough, 2003; Rash, Matsuba, Prkachin, 2011; Kerr, O'Donovan, Pepping, 2015). Grateful people experience higher levels of positive emotions such as joy, enthusiasm, love, happiness, and optimism, and gratitude protects us from the destructive impulses of envy, resentment, greed, and bitterness. People who experience gratitude can cope more effectively with everyday stress, showing creased resilience in the face of trauma-induced stress, recover more quickly from illness, and enjoy more robust physical health. Results indicate that gratitude is incompatible with negative emotions and pathological conditions and that it may even offer protection against psychiatric disorders (Emmons & Stern, 2013).

There was same gratitude level between father and mother who had children with ASD. This result is different from the previous research that male and female different way in the gratitude (Tudge, 2015). Female is more grateful than male (Kashdan, Mishra, & Froh, 2009; Jans-Beken, Lataster, Peels, Lechner, & Jacobs, 2018) or male is more grateful than female (Khan & Singh, 2013). Women are found to be more likely to express gratitude for interpersonal events such as being helped, whereas boys are more likely to express gratitude for material things (Gordon, Musher, Eizenman, Holub, & Dalrymple, 2004). Female is more grateful than male because of societal expectations, cultures socialize men and women differently, hormonal differences (estrogen/testosterone), men and women acquire different values. Gratitude is associated with indebtedness and dependency among some people (Froh, Yurkewicz & Kashdan, 2009). In this research, father and mother were same in gratitude level. The majority of the subjects are Muslim that is taught to be grateful as the lesson in Islam, as in the Qur'an surah Al-Baqarah:152: “... and be grateful to Me (God) and do not deny Me (God)”. Gratitude is done by saying *Alhamdulillah* and do a good deed to others. In Islam, children are trusteeship and livelihood that are given by God and are required to be thankful for. Therefore, being grateful becomes an obligation as a Muslim. Someone who has religion will realize that the sources of goodness are from God. Life is from God and responds it humbly and admits how lucky he/she is because he/she has the opportunity to learn, love, share, and help others (Emmons & Hill, 2001). Many studies have shown that females are often more emotionally expressive than males (Gordon & Kring, 1998) which caused females are more grateful. However, Indonesian culture teaches to their society either male or female to say thank if they get something from others so that there is not any significant difference.

Older individuals, women, more highly educated individuals, and employed individuals reported higher scores of the grateful trait than younger individuals, men, individuals with lower education levels, and unemployed individuals, respectively (Jans-Beken, Lataster, Peels, Lechner, & Jacobs, 2018). However, in this research, there was not any different gratitude between higher and middle educated parents. It is because the majority of the subjects are Muslim who get religious education which teaches gratitude starts from the elementary level until higher education so they tend to mean gratitude in the almost same way. Even more in the elementary education curriculum, the material of character building is more given than in the higher education which is vocational, so starts from an early age, they already learned to be grateful which will internalize in their behaviors.

Previous research has shown that both mothers and fathers reported similar levels of optimism (Willis, Timmons, Pruitt, Schneider, Alessandri, & Ekas, 2016). However, in this research the father was more optimistic than mother. The father has more positive hope towards his children's life. In the beginning, the father and mother have less information about autism. In this condition, commonly, the male tends to be more confident compared with the female (Barber & Odean, 2001) because the father has broad access to get information than the mother. The continuous treatment of children with autism needs a lot of costs so it requires supports with the adequate economic condition. In this case, the role of the father as the head of the family becomes very important. On the other hand, the male tends to be more rational in seeing the condition of children with ASD than the woman. This research supports another research that men appear to be more optimistic than women in a variety of settings, for example, online purchases (Garbarino and Strahilevitz 2004), strain in spouses of people suffering from Parkinson's disease (Lyons, Stewart, Archbold, & Carter, 2009), marriage and relationship survival (Srivastava, Richards, McGonigal, Butler, & Gross, 2006; Assad, Donnellan, & Conger, 2007), risky investment choices (Jacobsen, Lee, Marquering, & Zhang, 2014).

Greater optimism is associated with higher education among older community members (Robb, Simon, & Wardle, 2009). Optimistic people expect favorable outcomes, persist at goals, use effective coping strategies, and engage with attainable goals or disengage from unattainable goals (Rasmussen, Wrosch, Scheier, & Carver, 2006). Higher levels of education may foster such skills, as well as the opportunity for positive feedback loops to develop about goal attainment that validates optimistic perspectives. Individuals with persistently higher education across generations had significantly greater optimism than lower educated (Boehm, Chen, Williams, Ryff, & Kubzansky, 2015). However, this research showed different results. There was not any different optimism between higher and middle educated parents. In the beginning, the father and mother tend to have less understanding of the condition of autism children. Their lack of understanding makes both low and highly educated parents attempt to look for information related to diagnosing, treatment, and the future of autism children through many various ways such as online news, book, ask to the expert, neighbor, friend or parents who have autism children so they tend to have same optimism. The parents understand that autism relates with an expectant mother, stress, abortion attempt, drugs, food ingredients, chemicals, radiation, and even cures/torment/punishment from God.

Gratitude and optimism level of the subject is in the medium category so it needs to be increased. However, some subjects consistently show positive perceptions of their children. The parents have beliefs that their autism children are the best gift from God. As cited in the interview follows:

"My child ... whatever his condition is the best giving from God ... he is the one who gives strength for me to keep alive, survive, and work ... he is the one who also teaches me about patience until now...."

Gratitude refer to a person's tendencies to experience gratitude over time and across situations (Emmons, McCullough & Tsang, 2003), so that in any situation remain grateful, including when getting an autism child. The ability to perceive the negative and positive in one's life, and even life itself, as gifts, would appear essential if tragedies can be transformed into healing opportunities. Cultivating this level of gratitude allows healing from past wounds and a look to the future with a fresh affirmation toward life (Emmons & Stern, 2013). Gratitude is the expression of thank will make someone accept the kindness with full of willingness without grumbling, complaining, or blaspheming to God. Someone actualizes his/her gratitude when their heart and mind realize how big the gift, the grace, and the protection which are given to them so they can always think positive in their life. Someone who wants to have a better future will always attempt to create a better situation (Seligman, 2008). Meanwhile, the pessimistic person tends to give up and feel desperate when they face a serious problem in his/her life (Berk, 2010).

CONCLUSION

Children with ASD need special attention and care from professionals and those closest to them, especially parents. Parents need to have acceptance, patience and toughness in caring for children with ASD. If parents accept children with sincerity, it is not easy to despair in caring for children. This study strengthens the previous research that gratitude has a positive relationship with optimism. Gratitude happens when someone realizes that there is a contribution from others to his/her life personally and transpersonal. Gratitude will not make someone feel deprived in his/her life, and accept a giving with full of willingness without grumbling, complaining, blaspheming. Parents have beliefs that autism children are the best gift from God. Parents who can be grateful in the presence of autism children will give a positive effect so that they will give more attention and respect to their children. Parents realize how big the gift and the grace which are given to them that will make them prepossess good things in their life. They hope there will be a good future for their children. The subjects' gratitude and optimism level are in the medium category so it still needs to be increased by the various interventions. Gratitude values are not only learned but need to be internalized in life. Indonesian society which is predominantly Muslim from birth is taught to be grateful and to be strengthened by culture to thank for whatever is obtained in life. This makes it easy to develop grateful values and behavior. Grateful people make their thoughts and emotions more positive when they have to care the children with ASD.

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