

COGNITIVE APPRAISAL, EMOTION REGULATION, AND PARENTAL BURNOUT IN UKRAINIAN MOTHERS OF CHILDREN WITH AUTISM SPECTRUM DISORDER: A THREE-GROUP COMPARATIVE STUDY UNDER WARTIME CONDITIONS

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ABSTRACT

Background. Mothers of children with autism spectrum disorder (ASD) report elevated psychological distress. Most evidence, however, comes from peacetime settings and two-group comparisons that cannot distinguish correlates of ASD caregiving from those associated with chronic caregiving more broadly.

Aim. To compare cognitive appraisal, emotion regulation, coping, personal and social resources, subjective well-being, and parental burnout across three groups of Ukrainian mothers assessed during the full-scale war.

Methods. This cross-sectional study included 163 mothers: 56 mothers of children with a documented ASD diagnosis, 52 mothers of children with other neurodevelopmental disorders, and 55 mothers of typically developing children. Nine validated Ukrainian-language measures were administered between February and December 2024. Group differences were examined using Welch's analysis of variance and Games-Howell pairwise comparisons; multiplicity was controlled using the Holm procedure.

Results. The largest between-group effects concerned threat appraisal ($\eta^2 = 0.55$), perceived social support ($\eta^2 = 0.46$), appraised uncontrollability ($\eta^2 = 0.40$), and parental burnout ($\eta^2 = 0.37$). Mothers in G1 differed from clinical controls on most indicators, with the emotion-regulation deficit concentrated in limited access to regulation strategies rather than in emotional awareness. Well-being separated both clinical groups from normative controls, whereas the G1–G2 difference was modest ($d = 0.28$).

Conclusions. In this sample, group differences were largest for cognitive appraisal and perceived social support. The findings support further longitudinal evaluation of appraisal-focused, emotion-regulation, and social-support interventions; they do not establish causal mechanisms or treatment efficacy.

Keywords: autism spectrum disorder; mothers; cognitive appraisal; emotion regulation; coping; parental burnout; social support; wartime stress.

Introduction

Mothers raising children with autism spectrum disorder (ASD) are at an increased risk. A meta-analysis revealed higher parenting stress (Cohen's $d = 0.72$) for parents whose children have ASD when compared to parents who have typically developing children (Hayes & Watson, 2012). Additional reviews of this population have

found increased parenting stress, depression, anxiety, and burnout (Enea & Rusu, 2020; Kütük et al., 2021; Schnabel et al., 2020). Individually, these psychological outcomes deserve attention on their own merits apart from any effect they may have upon interventions designed to assist children with ASD.

Two limitations of previous studies are

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especially crucial to obtaining a proper interpretation of the outcomes about Ukraine. Notably, in many research papers, the samples of parents who have children with ASD were compared to the samples of parents with children who are typically developing as well (Enea & Rusu, 2020). The lack of a clinical comparison group makes it hard to distinguish between differences associated with ASD and those associated with caring for a child having any other form of neurodevelopmental disorder. Another limitation observed while looking through the research papers is that most of these studies were carried out when no ongoing conflicts were happening in Ukraine. The year 2024 alone has brought widespread war-related displacement, loss of services, and breaking of social networks for many Ukrainian families. In this current study, wartime conditions are treated not as an independent exposure variable that can be measured separately and then linked to cause and effect but rather as the overarching context within which all data were collected.

Research followed the transactional model of stress, where a person assesses the threat level of a situation (primary appraisal) and the available coping options (secondary appraisal), thus helping determine how they would respond to that stress. The difficulties in emotion regulation were examined separately because emotional awareness and access to regulation strategies are distinguishable dimensions (Gatz & Roemer, 2004). To assess personal and social resources under constant demand, conservation of resources theory was implemented (Hobfoll, 1989; Hobfoll et al., 2018). Parental burnout was considered a complex concept consisting of exhaustion, contrast with the former parental self, saturation and

emotional distancing; these were all measured as independent dimensions in the study (Roskam et al., 2018).

During the full-scale war, cognitive appraisal, emotion-regulation difficulties, coping strategies and personal/social resources, subjective well-being, and parental burnout were compared in three different groups of Ukrainian mothers.

To get an idea of what the results might be, three hypotheses were made: H1 – distress indicators in mothers of children with ASD were higher than in mothers of typically developing children while resource indicators were lower; H2 – difference regarding accessing regulation strategies was bigger than regarding emotional awareness; and H3 – cognitive appraisal and social support accounted for mostly between-group effects.

Methods

Design and procedure. To conduct this research study, a cross-sectional, three-group comparative design was adopted. The data collection was conducted between February 2024 and December 2024, from seven regions in Ukraine: Kyiv, Lviv, Ivano-Frankivsk, Vinnytsia, Odesa, Dnipropetrovsk, and Poltava. Participants were recruited through several means now made available to the public, such as inclusive resource centres, rehabilitation institutions, educational institutions, parent communities, and peer supporter communities. Questionnaires were distributed to the participants either in paper format at the location(s) where the questionnaires would be completed at the participating site(s) or via a secure online means. Questionnaires were distributed and collected approximately 70-90 minutes in

total, including break times. Written informed consent was obtained from all participants before the completion of the questionnaire.

Participants. The sample included a total of 163 mothers. Group 1 (G1; $n=56$): mothers with children diagnosed with ASD before at least 12 months of the date of assessment based on their medical record as documented by the child's psychiatrist. Group 2 (G2; $n=52$): mothers of children with other neurodevelopmental disorders, but with no documented ASD diagnosis. Diagnoses included developmental delay, attention-deficit/hyperactivity disorder, developmental language disorder, mild intellectual disability, and Down syndrome. Group 3 (G3; $n=55$): mothers whose children had not been diagnosed with any reported neurodevelopmental disorders. The primary inclusion criteria for all three groups were being aged 25–50 years, being the primary caregiver for their child, having lived in Ukraine for a minimum of two years, being able to communicate in sufficient Ukrainian, and having a child between the ages of 3–10 years. The primary exclusion criteria for all three groups were having a current psychotic disorder, having experienced an acute severe mood episode within the previous three months, having current suicidal ideation, suffering from a severe substance-use disorder, or having been involved in an acute traumatic event not related to their child's disorder within the previous three months. The presence of depressive, anxiety and posttraumatic stress symptoms, as well as being an internally displaced person, below the indicated thresholds did not form any of the exclusion criteria for the participation of individuals in this study. An a priori power analysis of a one-way fixed-effect

omnibus test ($f=0.30$, $\alpha=0.05$, $1-\beta=0.80$; 3 groups) resulted in a minimum total sample size of 111.

Measures. The nine self-report scales assessed cognitive appraisals, emotion-regulation difficulties, coping strategies, personal resources, resilience, and general self-efficacy. Cognitive appraisal was measured using the Stress Appraisal Measure (SAM; Peacock & Wong, 1990). The SAM included a subscale that specifically asked about the experience of daily caregiving. The cognitive appraisal subscales had a Cronbach's alpha between .82 and .89 in the current sample. Emotion regulation was evaluated using the 36-item version of the Difficulties in Emotion Regulation Scale (DERS; Gratz & Roemer, 2004; Sak & Fedotova, 2023, in their Ukrainian translation) with a Cronbach's alpha of .93 across all items. Coping was evaluated using the Ukrainian-translated Brief COPE (Carver, 1997; Yablonska et al., 2023) with Cronbach's alphas ranging from .68 to .84 across the subscales and their translated items. General personal resources were measured using the Personal Resources Inventory (Savchenko et al., 2022), assessing sufficiency of resources, methods of resource replenishment, and degree of emotional depletion, with subscales having Cronbach's alphas of .79 to .84. The resilience was measured by the Connor–Davidson Resilience Scale (CD-RISC-10) which has 10 items (Campbell-Sills & Stein, 2007; Connor & Davidson, 2003; Shkolina et al., 2020 in their Ukrainian translation and an alpha of .87). General self-efficacy was evaluated using the General Self-Efficacy Scale (GSE; Schwarzer & Jerusalem, 1995), having an alpha of .84. Perceived social support was measured using the Multidimen-

sional Scale of Perceived Social Support (MSPSS; Zimet et al., 1988; Ukrainian translation: Melnyk & Stadnik, 2023; total alpha was 0.93). Subjective well-being was measured by use of the modified BBC Subjective Well-being Scale (BBC-SWB; Pontin et al., 2013; Ukrainian translation: Karamushka et al., 2022; alpha was 0.90). Parental burnout was measured with the 23-item Parental Burnout Assessment (PBA; Roskam et al., 2018; alpha was 0.93). McDonald's omega was also estimated for total scores and was within 0.01 and 0.02 of the corresponding alpha estimates.

Statistical analysis. Descriptive statistics were produced for all variables in the study. As the assumption of homogeneous variances was violated for multiple outcome variables, Welch's ANOVA was used for Omnibus group comparison, and Games–Howell was used for pairwise

d. The variables that displayed significant departures from normality were reassessed using a Kruskal–Wallis test along with Dunn's tests, and these analyses did not affect the direction or statistical interpretation of the results. Sensitivity analyses adjusted for child sex and maternal employment, the two demographic characteristics which were found to differ significantly between the groups; the sensitivity analyses did not affect the substantive findings. Procedures were carried out using IBM SPSS Statistics 27, JASP 0.18, and R 4.3.

Results

Cognitive appraisal. All five SAM subsection scales described in Table 2 revealed statistically significant differences between groups. The largest difference was seen between threat appraisals with Welch's $F(2, 106.3) = 93.15$, $p < .001$, $\eta^2 = .547$. Mean threat scores were highest in G1 and lowest in G3. Uncontrollability showed

Table 1

Sociodemographic characteristics of the three groups

Characteristic	G1 (n = 56)	G2 (n = 52)	G3 (n = 55)	p
Maternal age, years: M (SD)	34.8 (5.9)	35.2 (6.1)	33.9 (5.4)	.478
Child age, years: M (SD)	6.4 (2.1)	6.7 (2.3)	6.1 (2.2)	.392
Child sex, % boys	78.6	63.5	54.5	.028
Married, %	73.2	78.8	85.5	.247
Higher education, %	75.0	71.2	78.2	.693
Employed, %	44.6	57.7	76.4	.002
IDP status, %	30.4	26.9	23.6	.711
Time since child's diagnosis, years: M (SD)	3.2 (1.8)	3.5 (1.9)	—	.387

Note. G1 = mothers of children with ASD; G2 = mothers of children with other neurodevelopmental disorders; G3 = mothers of typically developing children; IDP = internally displaced person. Child sex and maternal employment were included as covariates in sensitivity analyses.

comparisons. Holm adjustment was done on each family of pairwise tests. Omnibus effect sizes are presented in terms of η^2 from three-group sums of squares. They should be used descriptively with the heteroskedasticity-robust tests, whereas the pairwise effects are reported in terms of Cohen's

the same trend ($\eta^2 = .399$). Challenge and self-controllability showed the opposite pattern. These findings provide assistance in H1 related to the appraisal dimensions described. Because this study is cross-sectional, the differences discussed

Table 2

Stress Appraisal Measure: between-group comparisons

SAM subscale	G1 M (SD)	G2 M (SD)	G3 M (SD)	Welch F	p	η^2
Threat	21.98 (4.18)	18.56 (3.42)	12.35 (3.50)	93.15	< .001	.547
Challenge	14.11 (4.15)	16.10 (3.52)	18.13 (3.42)	15.66	< .001	.172
Centrality	20.02 (3.97)	16.63 (4.16)	14.58 (4.05)	25.85	< .001	.241
Controllability (self)	13.64 (3.15)	16.06 (3.03)	17.95 (3.49)	23.53	< .001	.237
Uncontrollability	18.52 (4.49)	14.79 (4.01)	10.64 (3.70)	51.67	< .001	.399

Note. All pairwise Games–Howell contrasts (G1–G2, G1–G3, G2–G3) were significant after Holm correction for every subscale shown.

should not be viewed as having been produced by wartime experiences or ASD.

Emotion regulation. The DERS total score followed the predicted ordering, $G1 > G2 > G3$, Welch's $F(2, 106.4) = 28.34$, $p < .001$, $\eta^2 = .268$ (Table 3). The largest subscale effects concerned

Coping strategies. Group differences were observed for most Brief COPE subscales (Table 4). Planning showed the largest effect ($\eta^2 = .188$), with the lowest mean in G1 and the highest in G3. Humour showed the same ordering ($\eta^2 = .143$). Self-blame ($\eta^2 = .105$), venting ($\eta^2 = .104$), and

Table 3

Difficulties in Emotion Regulation Scale: between-group comparisons

DERS scale	G1 M (SD)	G2 M (SD)	G3 M (SD)	Welch F	p	η^2
Total score	108.52 (15.40)	95.73 (15.28)	85.72 (16.61)	28.34	< .001	.268
Nonacceptance	18.78 (4.46)	16.67 (4.43)	14.57 (4.41)	12.41	< .001	.135
Goals	15.67 (3.28)	13.01 (3.46)	12.45 (3.42)	14.68	< .001	.152
Impulse	18.10 (4.55)	15.62 (4.19)	13.25 (3.73)	18.90	< .001	.194
Awareness	15.29 (3.67)	14.45 (3.25)	13.48 (3.83)	3.23	.044	.042
Strategies	26.47 (5.38)	22.72 (5.64)	20.35 (4.66)	20.46	< .001	.196
Clarity	14.21 (3.41)	13.26 (3.34)	11.61 (2.99)	9.45	< .001	.103

limited access to regulation strategies ($\eta^2 = .196$) and impulse-control difficulties ($\eta^2 = .194$); the effect for emotional awareness was smaller ($\eta^2 = .042$). This pattern was consistent with H2, although the significant omnibus awareness result indicates that awareness should not be described as unaffected.

denial ($\eta^2 = .089$) were higher in G1 than in G3. Instrumental support did not differ significantly among groups ($p = .072$). These cross-sectional results describe differences in reported coping; they do not establish whether particular strategies were adaptive in the situations encountered by participants.

Table 4

Brief COPE: between-group comparisons

Strategy	G1 M (SD)	G2 M (SD)	G3 M (SD)	Welch F	p	η^2
Active coping	4.66 (1.58)	5.23 (1.52)	5.60 (1.29)	5.90	.004	.069
Planning	4.46 (1.35)	5.21 (1.40)	6.02 (1.28)	19.26	< .001	.188
Positive reframing	4.48 (1.41)	4.98 (1.58)	5.24 (1.48)	3.90	.023	.044
Acceptance	4.73 (1.24)	4.87 (1.43)	5.42 (1.24)	4.60	.012	.051
Humour	3.39 (1.30)	3.94 (1.21)	4.62 (1.24)	12.90	< .001	.143
Emotional support	4.84 (1.41)	5.29 (1.43)	5.67 (1.28)	5.29	.006	.060
Instrumental support	4.70 (1.28)	5.19 (1.24)	5.20 (1.46)	2.70	.072	.032
Denial	3.75 (1.27)	3.10 (1.24)	2.95 (0.95)	7.37	.001	.089
Venting	4.41 (1.45)	4.31 (1.34)	3.44 (1.17)	9.94	< .001	.104
Behavioural disengagement	3.54 (1.21)	3.04 (0.99)	3.07 (1.10)	3.20	.045	.042
Self-blame	4.16 (1.58)	3.62 (1.14)	3.13 (1.11)	8.19	< .001	.105

Personal and social resources. Perceived social support showed one of the largest group differences in the study (MSPSS total $\eta^2 = .457$), and G1 had the lowest mean across all three support sources (Table 5). Resilience ($\eta^2 = .337$) and self-efficacy ($\eta^2 = .283$) followed the same ordering. Effects for resource sufficiency ($\eta^2 = .039$) and replenishment strategies ($\eta^2 = .056$) were smaller, whereas emotional depletion differed more clearly ($\eta^2 = .095$). These findings indicate lower perceived support and greater depletion in G1 but do not show that available resources had become inaccessible or that wartime displacement caused the differences.

Table 5

Resource indicators: between-group comparisons

Indicator	G1 M (SD)	G2 M (SD)	G3 M (SD)	Welch F	p	η^2
CD-RISC-10 (resilience)	20.80 (4.75)	26.96 (5.77)	29.71 (5.71)	43.29	< .001	.337
GSE (self-efficacy)	23.66 (4.92)	27.62 (4.76)	30.49 (4.09)	31.49	< .001	.283
MSPSS — Family	17.20 (4.61)	21.29 (3.65)	22.71 (4.52)	22.02	< .001	.236
MSPSS — Friends	15.59 (4.95)	20.23 (4.35)	22.04 (5.65)	23.10	< .001	.234
MSPSS — Significant others	16.93 (4.52)	20.48 (4.85)	21.40 (4.89)	14.15	< .001	.147
MSPSS — Total	49.71 (7.26)	62.00 (7.64)	66.15 (8.45)	68.52	< .001	.457
PR — Resource sufficiency	18.37 (3.85)	19.56 (4.31)	20.26 (3.65)	3.55	.032	.039
PR — Replenishment strategies	12.01 (3.23)	13.04 (2.71)	13.71 (2.86)	4.30	.016	.056
PR — Emotional depletion	9.82 (3.28)	8.67 (3.27)	7.46 (2.66)	8.75	< .001	.095

Note. PR = “Personal Resources” inventory (Savchenko et al., 2022).

Well-being and parental burnout. BBC-SWB total scores were lowest in G1 and highest in G3 ($\eta^2 = .137$; Table 6). Low well-being was observed in 48.2% of G1, 46.2% of G2, and

20.0% of G3. The similar proportions in the two clinical groups suggest that reduced well-being was not specific to ASD caregiving in this sample. PBA total scores showed a larger group difference ($\eta^2 = .368$), again with the highest mean in G1. All four PBA subscales differed among groups, with effects ranging from $\eta^2 = .320$ to .360.

Hierarchy of effects. The largest η^2 estimates were observed for threat appraisal (.547), total perceived social support (.457), uncontrollability (.399), and parental burnout indicators (.320 –.368). These estimates were larger than those for the DERS total (.268) and the coping indicators.

The descriptive ordering was consistent with H3; however, differences in scale reliability and score variance preclude treating η^2 rankings as a formal test of causal or temporal priority.

Discussion

Table 6

Subjective well-being (BBC-SWB) and parental burnout (PBA): between-group comparisons

Indicator	G1 M (SD)	G2 M (SD)	G3 M (SD)	Welch F	p	η^2
BBC-SWB — Psychological	39.06 (9.25)	40.57 (9.21)	44.32 (8.07)	5.53	.005	.062
BBC-SWB — Physical health	19.70 (5.03)	20.56 (4.54)	24.41 (5.25)	13.05	< .001	.150
BBC-SWB — Relationships	15.37 (5.28)	17.34 (3.82)	19.10 (3.34)	10.42	< .001	.131
BBC-SWB — Total	74.13 (15.94)	78.47 (14.59)	87.84 (13.50)	12.95	< .001	.137
PBA — Total	48.91 (11.62)	39.00 (12.83)	26.95 (11.57)	49.56	< .001	.368
PBA — Emotional exhaustion	17.12 (4.36)	13.79 (4.67)	9.27 (4.12)	47.81	< .001	.360
PBA — Contrast with former self	9.64 (2.55)	7.71 (2.69)	5.36 (2.56)	38.76	< .001	.320
PBA — Saturation	12.07 (2.95)	10.00 (3.50)	6.76 (2.96)	44.98	< .001	.335
PBA — Emotional distancing	9.82 (2.62)	7.73 (2.72)	5.22 (2.47)	45.32	< .001	.352

As expected, the outcomes were in line with all three hypotheses; however, the magnitude of the group differences was larger for some hypotheses than others. Specifically, the largest differences between women were found for threat appraisal, social support, uncontrollability, and parental burnout. A smaller but significant group difference was also observed for emotional awareness. The pattern supports a differentiated view of how mothers adjust.

The DERS profile of participants was larger than that of H2 in terms of access to regulation strategies versus emotional awareness. This implies that future research should consider how to assess and intervene on specific regulation skills in conjunction with emotion identification. The fact that between-group effects for regulation strategies are larger than for emotional awareness should not be interpreted to mean that emotion-recognition interventions are ineffective, or that the difference in effect is a mechanism of intervention. Meta-analytic evidence suggests that parent-focused interventions can improve a select number of parental outcomes, though intervention type and results vary significantly (Conrad et al., 2021; MacKenzie & Eack, 2022).

Perceived social support was markedly different among the groups, whereas there were few differences in self-reported resource sufficiency, with larger differences in emotional depletion. This trend supports the conservation of resources theory (Hobfoll, 1989; Hobfoll et al., 2018), although the current research did not investigate the processes of resource loss throughout the sample. An important area of future research would be to determine whether alterations

in social support and depletion lead or follow alterations in well-being or exhaustion.

The clinical control group lends support to the claim of ASD specificity. While G1 and G2 had a similar proportion of mothers with low well-being, they differed more on threat appraisal, access to emotion-regulation strategies, social support, and parental burnout. Since the groups were not matched according to all childhood clinical characteristics and children's behaviour was not measured, these differences should not be blamed solely on ASD.

We need to be careful in interpreting this study because it was conducted during wartime. All groups were exposed to the same national conditions during wartime, increasing their comparability. However, there were many differences between the groups in terms of exposure to war, severity of displacement, disruption of services due to the war, and experience of trauma. The results of this study should therefore not be considered representative of group differences during peacetime.

Limitations. The cross-sectional design will not allow for inferential or causal reasoning. The sampling method used was purposive and nonprobability sampling; this means that the sampling was done through service and support providers and there is an oversampling of mothers who utilize services. All study variables were self-reported, and that presents a risk of common method bias. There were differences in both child sex and maternal employment between the groups, and even after adjusting all analyses for these two variables, a group pattern was still apparent, and residual confounding can still occur. The sample size was too small to detect small ef-

fects of the study variables on the study outcomes; thus, the number of subgroup analyses performed was restricted. Factors such as child adaptive functioning, autism severity, co-occurring conditions, and behaviour problems were not assessed uniformly across the studies; however, they can affect caregiver outcomes (Nahar et al., 2022). The mixed-mode administration of tests may also add to the variance in measured outcomes. There was a lack of male participation as either fathers or other male caregivers in this study.

Conclusions

Over the period of the full-scale war, the greatest differences between Ukrainian mothers on the sample studied, were observed concerning threat appraisal, sense of uncontrollability, experience of social support, and parental burnout. The differences were more extensive about emotion-regulation strategies than about emotional awareness. Additionally, emotional depletion was a more prominent marker of stress than the feeling of lacking resources. The findings from the design with three groups indicate that some correlates were shared in the context of chronic caregiving, while other correlates were enhanced in the ASD group. The study justifies future research, both longitudinal and intervention-focused, that examines appraisal, regulation skills and social support. These findings do not provide causal explanations, do not provide information on the impact of the war on mothers, nor do they answer questions regarding how to implement a particular intervention through relevant research designs effectively.

Declarations

Author declare that, during the preparation of this manuscript, she used auxiliary artificial intelligence tools: Grammarly, ChatGPT (OpenAI), Claude (Anthropic, 2026), and Consensus—exclusively for language editing, stylistic refinement, and analytical support in the processes of literature exploration, information structuring, and drafting assistance. These tools were used to improve clarity of expression, consistency of terminology, and the organisation of review materials; however, they were not used as substitutes for scholarly judgement, critical interpretation, or authorial decision-making. All substantive arguments, scientific interpretations, conclusions, and final formulations presented in this article were developed and approved by the author, who retains full responsibility for the content of the work.

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COGNITIVE APPRAISAL, EMOTION REGULATION, AND PARENTAL BURNOUT IN UKRAINIAN MOTHERS OF CHILDREN WITH AUTISM SPECTRUM DISORDER: A THREE-GROUP COMPARATIVE STUDY UNDER WARTIME CONDITIONS

ABSTRACT

Background. Mothers of children with autism spectrum disorder experience sustained psychological demands related to intensive caregiving, unpredictable child behaviour, restricted social participation, and limited access to specialised services. During the full-scale war in Ukraine, these demands have coincided with displacement, disruptions to educational and rehabilitation services, deterioration of established social-support networks, and pervasive uncertainty. Most previous studies, however, were conducted in peacetime settings and used two-group designs that could not distinguish characteristics associated specifically with raising a child with autism from the broader psychological burden of caring for a child with another neurodevelopmental disorder.

Aim. To examine cognitive appraisal of stressful situations, emotion-regulation difficulties, coping strategies, personal and social resources, subjective well-being, and parental burnout among Ukrainian mothers of children with autism spectrum disorder in comparison with mothers of children with other neurodevelopmental disorders and mothers of typically developing children.

Methods. A cross-sectional, three-group comparative design was employed. The sample comprised 163 women: 56 mothers of children with a documented autism spectrum disorder diagnosis, 52 mothers of children with other neurodevelopmental disorders, and 55 mothers of typically developing children. Data were collected between February and December 2024 across seven regions of Ukraine. Nine validated Ukrainian-language instruments were administered: the Stress Appraisal Measure, Difficulties in Emotion Regulation Scale, Brief COPE, Personal Resources Inventory, Connor–Davidson Resilience Scale-10, General Self-Efficacy Scale, Multidimensional Scale of Perceived Social Support, modified BBC Subjective Well-being Scale, and Parental Burnout Assessment. Group dif-

ferences were examined using Welch's analysis of variance and Games–Howell post hoc comparisons with Holm adjustment for multiple testing.

Results. The largest between-group differences were observed for threat appraisal ($\eta^2 = .547$), perceived social support ($\eta^2 = .457$), appraisal of uncontrollability ($\eta^2 = .399$), and parental burnout ($\eta^2 = .368$). Mothers of children with autism spectrum disorder reported the highest levels of threat, uncontrollability, emotion-regulation difficulties, emotional depletion, and parental burnout, together with the lowest levels of resilience, self-efficacy, perceived social support, and subjective well-being. Within the emotion-regulation profile, the largest differences concerned limited access to regulation strategies ($\eta^2 = .196$) and impulse-control difficulties ($\eta^2 = .194$), whereas the difference in emotional awareness was small ($\eta^2 = .042$). Total subjective well-being differentiated both clinical groups from mothers of typically developing children; however, the proportions classified as having low well-being were similar among mothers of children with autism spectrum disorder and mothers of children with other neurodevelopmental disorders, at 48.2% and 46.2%, respectively.

Scientific novelty. The study applies a three-group design that makes it possible to differentiate psychological characteristics shared across prolonged caregiving for children with neurodevelopmental disorders from characteristics that are more pronounced among mothers of children with autism spectrum disorder. The findings indicate that the largest group differences are concentrated not only in emotional outcomes but also, and more prominently, in threat and uncontrollability appraisals, perceived social support, and parental burnout.

Practical significance. The findings may inform the development of psychological screening and support programmes for mothers of children with neurodevelopmental disorders. Assessment should encompass cognitive appraisal of stressful situations, access to emotion-regulation strategies, perceived social support, subjective well-being, and parental burnout. The results also provide a rationale for further experimental evaluation of interventions addressing regulation skills and the restoration of social connections.

Conclusions. Psychological difficulties among mothers of children with autism spectrum disorder under

wartime conditions constitute a differentiated rather than uniform profile. The most pronounced between-group differences concerned threat and uncontrollability appraisals, limited perceived social support, and parental burnout. Mothers of children with different neurodevelopmental disorders shared some reduction in subjective well-being. In contrast, limited access to emotion-regulation strategies and parental burnout were more pronounced in the autism group. Because the study was cross-sectional, the findings do not establish causal relationships and require confirmation in longitudinal and intervention studies.

Keywords: autism spectrum disorder; mothers; cognitive appraisal; emotion regulation; coping; social support; subjective well-being; parental burnout.

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КОГНІТИВНЕ ОЦІНЮВАННЯ, ЕМОЦІЙНА РЕГУЛЯЦІЯ ТА БАТЬКІВСЬКЕ ВИГОРАННЯ В УКРАЇНСЬКИХ МАТЕРІВ ДІТЕЙ ІЗ РОЗЛАДОМ АУТИСТИЧНОГО СПЕКТРА: ТРИГРУПОВЕ ПОРІВНЯЛЬНЕ ДОСЛІДЖЕННЯ В УМОВАХ ВІЙНИ

АНОТАЦІЯ

Актуальність. Матері дітей із розладом аутистичного спектра зазнають тривалого психологічного навантаження, пов'язаного з інтенсивністю догляду, непередбачуваністю поведінкових проявів дитини, обмеженням соціальної участі та труднощами доступу до спеціалізованої допомоги. В умовах повномасштабної війни в Україні ці чинники поєднуються з вимушеним переміщенням, перериванням освітніх і реабілітаційних послуг, руйнуванням звичних мереж соціальної підтримки та загальною невизначеністю. Водночас більшість попередніх досліджень проведено у мирних умовах із використанням двогрупових дизайнів, які не дають змоги відокремити особливості, пов'язані з вихованням дитини з аутизмом, від загального психологічного навантаження, притаманного тривалому догляду за дитиною з іншими порушеннями нейророзвитку.

Мета дослідження. Визначити особливості когнітивного оцінювання стресових ситуацій, труднощів емоційної регуляції, копінг-стратегій, особистісних і соціальних ресурсів, суб'єктивного благополуччя та батьківського вигорання в українських матерів дітей із розладом аутистичного спектра порівняно з матерями дітей з іншими порушеннями нейророзвитку та матерями дітей із типовим розвитком.

Методи дослідження. Застосовано поперечний тригруповий порівняльний дизайн. Вибірку становили 163 жінки: 56 матерів дітей із документально підтвердженим діагнозом розладу аутистичного спектра, 52 матері дітей з іншими порушеннями нейророзвитку та 55 матерів дітей із типовим розвитком. Дослідження проводилося протягом лютого–грудня 2024 року в семи регіонах України. Використано дев'ять валідованих україномовних психодіагностичних інструментів: Stress Appraisal Measure, Difficulties in Emotion Regulation Scale, Brief COPE, методику «Особистісні ресурси», Connor–Davidson Resilience Scale-10, General Self-Efficacy Scale, Multidimensional Scale of Perceived Social Support, модифіковану BBC Subjective Well-being Scale та Parental Burnout Assessment. Міжгрупові відмінності перевіряли за допомогою дисперсійного аналізу Велча та апостеріорного критерію Games–Howell із поправкою Голма на множинні порівняння.

Результати. Найбільші міжгрупові відмінності встановлено за показниками оцінювання ситуації як загрозливої ($\eta^2 = 0,547$), сприйнятої соціальної підтримки ($\eta^2 = 0,457$), оцінювання ситуації як неконтрольованої ($\eta^2 = 0,399$) та батьківського вигорання ($\eta^2 = 0,368$). Матері дітей із розладом аутистичного спектра мали найвищі показники загрози, неконтрольованості, труднощів емоційної регуляції, емоційного виснаження та батьківського вигорання, а також найнижчі показники резиліентності, самоефективності, соціальної підтримки та суб'єктивного благополуччя. У структурі труднощів емоційної регуляції найбільш виражені відмінності стосувалися обмеженого доступу до регулятивних стратегій ($\eta^2 = 0,196$) та труднощів у контролі імпульсів ($\eta^2 = 0,194$), тоді як відмінності в усвідомленні емоцій були незначними ($\eta^2 = 0,042$). Загальний показник суб'єктивного благополуччя розрізняв обидві клінічні групи та групу матерів дітей із типовим ро-

звитком, однак частка учасниць із низьким благополуччям була подібною серед матерів дітей із розладом аутистичного спектра та матерів дітей з іншими порушеннями нейророзвитку — відповідно 48,2% і 46,2%.

Наукова новизна. Наукова новизна полягає у застосуванні тригрупового дизайну, який дозволив диференціювати психологічні характеристики, спільні для тривалого догляду за дитиною з порушеннями нейророзвитку, та характеристики, більш виражені серед матерів дітей із розладом аутистичного спектра. Встановлено, що найбільші міжгрупові відмінності зосереджені не лише у показниках емоційного неблагополуччя, а передусім у когнітивному оцінюванні загрози й неконтрольованості, сприйнятій соціальній підтримці та батьківському вигоранні.

Практичне значення. Отримані результати можуть бути використані для вдосконалення програм психологічного скринінгу та підтримки матерів дітей із порушеннями нейророзвитку. Доцільним є комплексне оцінювання когнітивного сприйняття стресових ситуацій, доступності стратегій емоційної регуляції, соціальної підтримки, суб'єктивного благополуччя та ознак батьківського вигорання. Результати також обґрунтовують необхідність подальшого експериментального вивчення програм розвитку регулятивних навичок і відновлення соціальних зв'язків.

Висновки. Психологічні труднощі матерів дітей із розладом аутистичного спектра в умовах війни мають диференційовану, а не однорідну структуру. Найбільш виражені міжгрупові відмінності стосуються когнітивного оцінювання загрози та неконтрольованості, дефіциту сприйнятої соціальної підтримки й батьківського вигорання. Частина зниження суб'єктивного благополуччя є спільною для матерів дітей із різними порушеннями нейророзвитку, тоді як у групі матерів дітей із розладом аутистичного спектра більш вираженими є труднощі доступу до стратегій емоційної регуляції та батьківське вигорання. Поперечний дизайн не дає підстав для причинних висновків, тому встановлені закономірності потребують перевірки у лонгітудинних та інтервенційних дослідженнях.

Ключові слова: розлад аутистичного спектра; матері; когнітивне оцінювання; емоційна регуляція;

копінг; соціальна підтримка; суб'єктивне благополуччя; батьківське вигорання.

How to cite (як цитувати):

Chuprii, A. (2026). COGNITIVE APPRAISAL, EMOTION REGULATION, AND PARENTAL BURNOUT IN UKRAINIAN MOTHERS OF CHILDREN WITH AUTISM SPECTRUM DISORDER: A THREE-GROUP COMPARATIVE STUDY UNDER WARTIME CONDITIONS. *PSYCHOLOGICAL JOURNAL*, 12(6), 113–125. <https://doi.org/10.31108/1.2026.12.6.8>

Чупрій, А. (2026). КОГНІТИВНЕ ОЦІНЮВАННЯ, ЕМОЦІЙНА РЕГУЛЯЦІЯ ТА БАТЬКІВСЬКЕ ВИГОРАННЯ В УКРАЇНСЬКИХ МАТЕРІВ ДІТЕЙ ІЗ РОЗЛАДОМ АУТИСТИЧНОГО СПЕКТРА: ТРИГРУПОВЕ ПОРІВНЯЛЬНЕ ДОСЛІДЖЕННЯ В УМОВАХ ВІЙНИ. *ПСИХОЛОГІЧНИЙ ЧАСОПИС*, 12(6), 113–125. <https://doi.org/10.31108/1.2026.12.6.8>

Дата отримання статті: 26.05.2026

Дата рекомендації до друку: 21.06.2026

Дата оприлюднення: 30.06.2026