



Coping strategies and stress in mothers of children with autism spectrum condition and ADHD during the COVID 19 pandemic

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Introduction. The COVID 19 pandemic and the earthquake, have brought many difficulties for everyone. Families of children with disabilities, face even more difficulties. **Objective.** The aim of this study is to investigate the coping strategies of mothers of children with autism spectrum disorder or attention deficit hyperactivity disorder and to determine how they are related to mothers' stress during the first lockdown in Croatia during the COVID-19 pandemic. At the same time, the capital was shaken by an earthquake, so we further investigated the effects of the earthquake on maternal stress. **Method.** Coping strategies were measured using the Croatian version of the Family Crisis Oriented Personal Evaluation Scales. Stress was measured using the Croatian version of the Perceived Stress Scale. The study was conducted online. The mothers of primary school children (90 of children with autism spectrum disorder and 67 of children with attention deficit hyperactivity disorder) completed the questionnaires. **Results.** The results of the repeated measures analysis of variance showed that both the mothers of children with autism spectrum disorder and those of children with attention deficit hyperactivity disorder used the reframing strategy most frequently and the mobilizing family to acquire and accept help least frequently. The results of the linear regression analysis showed that reframing and acquiring social support were statistically significant predictors of maternal stress. There were no differences in maternal stress from the earthquake-affected areas compared to other parts of Croatia. **Conclusion.** The results indicate a need for psychological support for parents of children with disabilities, especially in crisis situations.

Key words: coping strategies, earthquake, stress in mothers, ASD, ADHD, COVID-19 pandemic

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Introduction

Disasters have different (environmental, biological, social, and behavioral) consequences that may influence well-being of all children, especially those with disabilities (Mann et al., 2021), as well as their parents' mental health (Sprang & Silman, 2013).

In 2020, Croatia was hit by two types of natural disasters: the COVID-19 pandemic and earthquakes. Due to the spread of the disease, the Government of the Republic of Croatia announced a lockdown on March 16, 2020, which made everyday life completely different and much more challenging for many people. In the middle of the pandemic and the start of the lockdown on the morning of March 22, the Croatian capital, Zagreb, was hit by a strong earthquake. The earthquake caused great material damage, 27 people were injured, and one girl died. After that earthquake, the citizens of Zagreb and its surroundings experience a series of aftershocks.

Given the situation of the pandemic (lockdown) and the earthquake that hit Zagreb and its surroundings, and the possible impact on children with autism Spectrum Disorder (ASD) and attention deficit hyperactivity disorder (ADHD), it is assumed that parents are exposed to higher levels of stress, especially mothers who are often more involved in household chores, care, and providing support to children (Bianchi et al., 2012; Del Boca et al., 2020). In a study by Lim et al. (2021), parents of children with disabilities reported more intensive symptoms of stress, anxiety, and depression than the general population.

The lockdown has put an even greater burden on parents of children with disabilities because they no longer receive professional support and therefore have to take on many tasks, such as the role of teacher or special educator (Mann et al., 2021; Neece et al., 2020; Tokatly Latzer et al., 2021).

Parental stress was in correlation with school closures, distance learning, being told to stay at home, lack of access to therapies for children, working online and caring for children at the same time, worry about viral infection, own mental health problems, loss of family and friends due to COVID-19, financial difficulties, increase in children's challenging behaviors, sleep problems and many other stressors (Mann et al., 2021).

Neurodevelopmental conditions, such as ASD and ADHD, affect children's and families' everyday functioning, so it is assumed that parents of those children are facing a lot of challenges and stress during the period of lockdown and an earthquake on top of that. Children and young people with ASD have specific needs for support due to their characteristics of social communication, behavior, and sensory processing issues.

Studies in neighbouring Serbia showed that the greatest concern of parents of children with autism was the fear of worsening symptoms and that most parents felt helpless (Stanković et al., 2022). In addition, underlying

features of ASD and comorbid problems caused more parental stress, which decreased over time (Djuric-Zdravkovic et al., 2023).

ADHD is a disorder characterized by developmentally inappropriate levels of hyperactivity, impulsivity, and inattention (APA, 2013). Despite being two different states, they share some common characteristics. Both conditions include difficulties and differences in socio-cognitive skills (Demopoulos, 2013), difficulties in executive functions such as working memory (Green, 2018), impulse control, and processing speed (Karalunas et al., 2018), communication and attention (Hattori et al., 2006, according to Miranda et al., 2015), and both conditions are diagnosed solely based on behavioral indicators (APA, 2014).

Findings about differences in stress between parents of children with ADHD and parents of children with ASD are still inconclusive. Some studies have shown that parents of children with ASD and ADHD show similar levels of parenting stress, both during the COVID-19 pandemic (Nathwani et al., 2021; Operto et al., 2021; Siracusano et al., 2021) and before the pandemic (Predescu & Sipos, 2013; Predescu & Sipos, 2015). On the other hand, Shiltz et al. (2021) have found the highest level of stress in parents of children with both ASD and ADHD, compared to parents with children with either ASD or ADHD. In a recent study by Yang et al. (2021), stress measured as caregiver strain was the highest in parents of children with ASD, then in parents of children with ADHD, and the lowest was in the control group. In contrast to those results, in another study parents of children with ADHD obtained higher levels of parenting stress related to attachment and depression than parents of children with ASD and parents of children with both ASD and ADHD (Miranda et al., 2015).

According to the Resiliency Model of Family Stress, Adjustment, and Adaptation developed by M. McCubbin and H. McCubbin (1991), the family affected by a stressor enters the phase of adaptation. The stressor can change family's balance. This model is about the family strengths and abilities that protect the family from disorders associated with normative family transitions and non-normative stressors. Coping strategies are one of the important factors in coping with stress.

Coping is defined as the family's strategies and behaviors aimed at maintaining and strengthening family stability, as well as the well-being of family members, supplying resources for managing the situation, and encouraging efforts for resolving difficulties caused by stressors (Lustig, 2002; M. McCubbin & H. McCubbin, 1991).

The study of Shamblaw et al. (2021) examined coping strategies during the COVID-19 pandemic in Canada with 1000 adult participants and found positive Reframing as the most effective positive coping strategy, but acceptance did not have a significant effect on stress. The study emphasizes Reframing negative aspects of the pandemic as being the most effective in improving the general well-being of participants (Shamblaw et al., 2021). Indeed, Reframing has been

shown to be one of the coping strategies connected to lower levels of stress in many previous studies before the pandemic in neurotypical population (Liu et al., 2019), but also specifically in mothers of children with ADHD (Podolski & Nigg, 2001) and parents of children with ASD (Al-Kandari et al., 2017; Twoy et al., 2007). Positive appraisals, religion, and acceptance were coping strategies that were also connected to lower stress in parents of children with ASD (Al-Kandari et al., 2017; Twoy et al., 2007). In contrast, negative coping strategies such as avoidance are associated with negative outcomes such as more anxiety and depressive symptoms (Morgan et al., 2022). Several studies of coping strategies during the COVID-19 pandemic have shown that parents of children with ASD used more negative coping strategies. In the study in China, it was shown that parents of children with ASD had lower results for positive and higher results for negative coping, compared to parents of neurotypical children (Wang et al., 2021). And in the study in the USA, parents (mostly mothers) of children with ASD more frequently used disengagement coping strategies (avoidant strategies), compared to parents of neurotypical children (Corbett et al., 2021).

To the best of our knowledge, there are no studies about coping strategies and stress in mothers of children with ASD and ADHD during the COVID-19 pandemic and earthquake. Although there are studies on parental stress of children with ASD and ADHD during the pandemic, there is a lack of studies directed to general stress of mothers. Furthermore, we haven't found studies on the coping strategies of parents of children with ADHD during the pandemic, and there are only a few on the coping strategies of parents of children with ASD. There is also a lack of studies that compare coping strategies between mothers of children with ASD and ADHD.

Aim

The aim of this study was to investigate coping strategies among mothers of children with ASD or ADHD during the first lockdown in Croatia, and to relate the coping strategies with perceived stress.

Specifically, we wanted to determine:

- whether there are differences between mothers of children with ASD and mothers of children with ADHD in coping strategies and stress,
- which coping strategies mothers of children with ASD and mothers of children with ADHD used more and less often,
- whether coping strategies of mothers of children with ADHD and ASD had an effect on stress during the first pandemic lockdown, and whether the type of child disability and experience of earthquake moderates that effect,
- whether stress of mothers of children with ASD and ADHD living in the area affected with earthquake was greater than in other areas.

Method

This study is a part of a larger study of stress in mothers of children with ADHD and ASD during the COVID-19 pandemic in Croatia. Some of the results of that study for participants with ADHD are presented in Cvitković et al. (2023).

Participants

157 mothers aged 30 to 53 years ($M = 41.95$, $SD = 5.46$) participated in the study, of whom 67 were mothers of primary school children with ADHD and 90 were mothers of primary school children with ASD. Most mothers (52.2%) had high school level of education, college and university level of education had a slightly more than a third of mothers in the sample (36.3%). The sociodemographic characteristics of the participants are presented in Table 1.

Table 1

Sociodemographic characteristics of participants (N = 157)

	N	%
Level of education		
Only elementary level	2	1.3
High School graduate	82	52.2
University graduate	57	36.3
Postgraduate	16	10.2
Employment		
Employed	62	39.6
Part-time Employment	44	28.2
Unemployment	30	19.2
Maternity Leave	7	4.6
Status of caregiver	13	8.4
Residence		
Rural	34	21.7
Small city (less than 100,000 residents)	50	31.8
Larger city (more than 100,000 residents)	73	46.5
Total number of children		
1	55	35.0
2	67	42.7
3	27	17.2
More than 3	8	5.1
	M	SD
Children's age	10.7 (7-15)	0.60

Inclusion criteria for participation in the study were that the child had an ASD or ADHD diagnosis and was 7 to 15 years old (primary school age in Croatia). To control for the type of disability, children with both ADHD and ASD were not included. Based on parental confirmation, children with both an ASD and an ADHD diagnosis were not included in the study. For this reason, we used the data from 157 of the total 187 respondents. For this reason, we used the data from 157 of the total of 187 respondents. The socio-demographic characteristics of the children are listed in Table 2. The average age of the children was 10.7 years ($SD=0.604$). All children with ADHD attend regular schools. Out of 90 participants with ASD, 25% children attended special education programs in special institutions, 32% were in mainstream school program with individualization and 43% attended mainstream school program with accommodations.

Table 2

Sociodemographic characteristics of children with ADHD and ASD (N=157)

	ADHD		ASD	
	N	%	N	%
Gender				
Male	54	80.6	78	86.7
Female	13	19.4	12	13.3
School class				
1	7	10.4	10	11.1
2	5	7.5	6	6.7
3	14	20.9	2	2.2
4	9	13.4	59	65.6
5	7	10.4	4	4.4
6	10	14.9	4	4.4
7	6	9.0	4	4.4
8	9	13.4	1	1.1

Measures

Sociodemographic data for all participants included age, education level, employment status, number of children in a family, age of a child with ASD/ADHD and place of residence.

Mother's coping strategies were measured using the Family Crisis Oriented Personal Evaluation Scales – F-COPES (McCubbin et al., 1996). It is based on the Resilience model and identifies behavioral strategies and problem solving in difficult situations. It has 30 coping behavior items organized in five subscales: acquiring social support (9 items), reframing (8 items), seeking spiritual support (5 items), mobilizing family to acquire and accept help (4 items), and passive appraisal (4 items). The respondent rates the items on a 5-point Likert scale, from 1, "Strongly Disagree", to 5,

“Strongly Agree”. Because subscale seeking spiritual support was not applicable due to the lockdown, it was omitted in this study. Cronbach alpha on a Croatian sample varies from 0.65 to 0.86. Cronbach alpha for specific subscales: acquiring social support – 0.82, reframing – 0.85, mobilizing family to acquire and accept help – 0.65, and passive appraisal – 0.66. Higher score indicates that a specific strategy is used more often.

Stress was measured using the Perceived Stress Scale (PSS-10), which was developed to assess current levels of experienced stress and how unpredictable, uncontrollable, and overloaded respondents perceive their lives to be (Cohen et al., 1994). It is a 10-item scale on which respondents rate items on a 4-point Likert scale, where 0 means “never” and 4 means “very often”. A higher score on the scale indicates a higher level of stress. The scale was adapted and applied to the Croatian sample (Hudek-Knežević et al., 1999). The Cronbach’s alpha for this sample was 0.88 and the Screen test resulted in a factor explaining 44.1 % of the pooled variance.

Procedures

The study was conducted in accordance with the Code of Ethics of the University of Zagreb and Ethics Guidelines for Internet-Mediated Research of the British Psychological Society. A cover letter explaining the purpose of the study and ethical principals was included in the introduction to the questionnaire. Answering the questionnaire was taken as consent. An online survey was created and sent to key agencies that support children with disabilities and non-governmental organizations that bring together parents of children with ASD and ADHD. The online survey was also shared on social media among groups of parents of children with disabilities. The questionnaire was preceded by a cover letter explaining the purpose of the study. Answering the questionnaire was taken as consent. Data was collected from the end of May to the end of June 2020. A total of 187 questionnaires were collected. When checking for inclusion criteria, some questionnaires were excluded, leaving 157 questionnaires for further analysis.

Data Analysis

All analyses were conducted using SPSS 25 for Windows (IBM, Chicago, IL, USA). Descriptive analysis included means and standard deviations. A repeated measures analysis of variance was used to examine differences in frequency of coping strategy use. T-tests were calculated to compare the groups. Pearson’s correlation coefficients were used to calculate the relationship between the variables. Linear multiple regression analyses were conducted to identify predictors of stress.

Results

As shown in Table 3, the t-test results indicate that there is no difference in the F-COPES variables nor in the stress scale between mothers of children with ASD and mothers of children with ADHD.

Table 3

T-test results for the differences in coping strategies and stress between mothers of children with ASD and mothers of children with ADHD

	Mothers ASD (N = 90)		Mothers ADHD (N = 67)		t
	M	SD	M	SD	
Acquiring Social Support	22.24	6.61	24.02	5.91	-1.42
Reframing	28.67	5.96	29.67	4.52	-1.57
Mobilizing Family to Acquire and Accept Help	8.96	3.04	9.56	3.41	-0.97
Passive Appraisal	10.47	2.76	11.08	2.70	-1.06
Stress	25.89	4.80	22.77	4.62	0.58

Repeated measures analysis of variance on the coping scores for both samples of mothers of children with ASD and ADHD was done to see which stress coping strategies during the lockdown mothers used the most and the least.

The results of repeated measure analysis of variance for the sample of mothers of children with ASD show a significant effect ($F_{3,5} = 311.58 = 105.725$, $p < 0.01$). Since the assumption of Sphericity has not been met, the Greenhouse-Geisser correction was applied. The Bonferonni post hoc test showed that Reframing is the most used coping strategy. This is followed by Passive Appraisal and Acquiring Social Support. The Mobilizing Family to Acquire and Accept Help strategy was used the least.

Another repeated measure analysis of variance on coping strategies scores for the sample of mothers of children with ADHD was done. Since the assumption of Sphericity has not been met, the Greenhouse-Geisser correction was applied. The results show a significant effect ($F_{1,60} = 2144.51$, $p < 0.01$). The Bonferonni post hoc test showed that Reframing was the most used strategy. This is followed by Passive Appraisal and Acquiring Social Support, between which there is no statistically significant difference. The lowest results are on the scale for the Mobilizing Family to Acquire and Accept Help strategy.

A regression analysis was done to determine whether coping strategies of mothers of children with ASD and ADHD have an effect on stress during the first COVID-19 lockdown, and whether the type of child disability moderates this effect. Bivariate correlation coefficients among predictor variables and stress in mothers were previously calculated.

Table 4*Correlation coefficients among predictors and criteria variable*

Variables	2	3	4	5
Acquiring Social Support	0.16*	0.59**	0.31**	-0.18*
Reframing		0.02	0.24**	-0.51**
Mobilizing Family to Acquire and Accept Help			0.22**	-0.03
Passive Appraisal				-0.04
Stress				

* $p < .05$ ** $p < .01$

The bivariate correlation coefficients between Perceived stress scale and coping strategies are shown in Table 4.

As shown in Table 4, the ways of coping with stress, such as Reframing, Acquiring Social Support, are associated with less amount of stress experienced.

Table 5*Linear regression analysis on stress considering child disability and coping styles (N = 157)*

Predictors	Stress		Collinearity Statistics	
	β	t	Tolerance	VIF
Child Disability	-0.02	-0.29	0.975	1.026
Acquiring Social Support	-0.17	-1.93*	0.603	1.659
Reframing	-0.51	-7.06**	0.917	1.090
Mobilizing Family to Acquire and Accept Help	0.06	0.69	0.640	1.561
Passive Appraisal	0.12	1.60	0.865	1.155
R ²	0.28**			

* $p < .05$ ** $p < .01$

Overall multiple regression was statistically significant ($R^2 = 0.28$, $F(5,151) = 11.78$, $p < 0.01$).

The results shown in Table 5 indicate that Reframing has a statistically significant effect on perceived stress ($\beta = -0.51$, $p < 0.01$) as well as Acquiring Social Support ($\beta = -0.17$, $p < 0.05$), regardless of the type of difficulty the child has. Other means of coping did not prove to be statistically significant predictors.

Table 6

Earthquake exposure. T-test results for the differences between those exposed and not exposed to the earthquake

	Yes			No			t	p	Df
	M	SD	N	M	SD	N			
Stress	23.12	4.94	87	22.12	4.19	65	1.32	0.18	150

Independent samples t-test (Table 6) revealed no statistically significant differences on the Perceived Stress Scale between those who were and those who were not in Zagreb when the earthquake took place.

Discussion

This study has shown that there are no differences in either stress or coping between mothers of children with ASD and mothers of children with ADHD.

That result is in line with previous research in this area which investigated stress and parental stress. Siracusano et al. (2021) have found out that there were no differences in the level of stress during the COVID-19 pandemic between parents of children with ASD and ADHD, but both groups had higher parental stress compared to parents of neurotypical children. The severity of difficulties not the type of neurodevelopmental condition has been shown to have a greater impact on parental stress for parents of children with ASD and ADHD (Nathwani et al., 2021). It was also shown that the stress was the same in those two groups, but it was higher than the stress in parents of neurotypical children and of those with children with specific learning disabilities (SLD) (Operto et al., 2021).

Furthermore, the type of disability was not a predictor of stress in mothers. We can assume that the type of disability is not so important in creating stress by itself. The study of Jacques et al. (2021) about the experiences of children with ASD and their families during the COVID-19 pandemic showed correlation between parent's concerns about the child's behavior and development before and during pandemic. Pandemic worsened difficult behavior that had already existed in children and intensified parents' concerns about it (Jacques et al., 2021).

Stress can be connected to the parental experience of the severity of children challenging behavior during the pandemic. Studies have shown that challenging behavior increased in those children both in intensity and frequency (Colizzi et al., 2020; McGowan et al., 2020; Nonweiler et al., 2020).

Some parents of children with disabilities may become even more overwhelmed in the post-disaster period because of the need for greater support for children with disabilities (Cobham et al., 2016; Stough et al., 2017). That is

why we expected participants who experienced the earthquake also had more traumatic experiences and, consequently, higher levels of stress. The results did not show the differences in perceived stress between mothers from earthquake-affected areas and mothers from other areas. That can perhaps be explained by the fact that this research was conducted two months after the earthquake, and although aftershocks were still present, the time has passed after the initial, strong earthquake. Although in the survey the participants were asked to answer according to their perception of stress in the last two months, we can presume that their answers were perhaps led by current experiences. It could be assumed that other factors (for example, stress connected to the pandemic) had more impact on the stress in mothers of children with ASD and ADHD at that time. Those assumptions can be connected to the research conducted by Margetić et al. (2021), on a sample of a general population (N = 2818), as much as with the results by Ali et al. (2022). The effect of the earthquake(s) in Zagreb on stress of population was statistically significant but rather small (Margetić et al., 2021). It is possible that differences were found because that research was conducted two weeks after the earthquake.

The results on coping strategies showed that mothers of children with ASD and mothers of children with ADHD during the lockdown used Reframing the most, and then Acquiring Social Support and the Passive Appraisal strategies equally. A study by Tway et al. (2007) on a sample of parents of children with ASD also showed that parents used Reframing the most, followed by Social Support.

Reframing focuses on the participant's ability to redefine stressful events in order to make them more manageable. For example, accepting a stressful event as a reality of life, faith in their own strengths, the family's strength to solve the problem, etc. In this strategy of coping with stressful events, the individual relies on their own strength which is extremely important in a situation of limited opportunity to gaining support from the outside (lockdown). That is consistent with some evidence that indicate positive Reframing of potentially traumatic and stressful events as one of perhaps the most effective coping strategies under extreme conditions where it is very difficult to act directly to reduce the impact of the stressor (Hastings et al., 2005).

This research showed that Reframing has a positive effect on the intensity of stress. Similar results were obtained by Podolski and Nigg (2001); Reframing has been associated with lower levels of distress in both mothers and fathers of children with ADHD.

Acquiring Social Support from friends and relatives was used frequently, and the research showed that this strategy also has a positive effect on the intensity of stress experienced. This result is consistent with research that have shown that seeking social support is associated with resilience in the families of children with ADHD and in the families of children with disabilities (Barkley,

1998; Baqutayan, 2011; Brown et al., 2010), and with lower levels of stress in parents of children with disabilities (Baqutayan, 2011).

Mothers of children with ASD and ADHD also used the not-so-successful Passive Appraisal strategy, that is, avoiding dealing with the problem. This strategy can lead to unfavorable outcomes in the long run, both for the general population in the form of higher stress levels and depression (Holahan et al., 2005) and for the person and for the family of children with ASD, such as depression, isolation, and marital problems (Dunn et al., 2001).

In this study, we have had no insight to what extent the mothers were experiencing stress and which coping strategies the mothers used before the pandemic and earthquake. Considering that some studies show a positive relationship between perceived stress before and during the pandemic in the general population (Shanahan et al., 2020) it might be interesting to investigate that in the future.

Since some studies showed association between level of education of parents of children with disabilities and coping strategies (Azar & Badr, 2010; Judge, 1998), it is important, while discussing our results, to consider that the mothers in this study had higher levels of education compared to the general population. For example, a study that investigated the relationship between parental perceptions of coping strategies and family strengths in families of young children with disabilities showed that parents' use of coping strategies that focus on wishful thinking and self-blaming is more frequent in mothers with lower educational attainment. The family challenge strength was negatively associated with the educational level of the mother (Judge, 1998). So, we can speculate that mothers in our study might use, to a greater extent, positive strategies since they attained generally higher levels of education.

This study has limitations. The study was conducted on a convenient sample of mothers, and it is possible that the results would be different in a larger, representative sample. In the study, there is a slightly higher proportion of mothers with a higher level of education, which may also have influenced the results. There is also no data on how to deal with stress before the COVID lockdown; therefore, it is not possible to compare the results obtained with ways of coping with mothers before the pandemic.

Results of this study indicate a need for psychological support (counselling, support group, parent training) for parents, especially during crises, that will enhance the use of positive coping strategies in dealing with stress.

Conclusion

The aim of this study is to examine coping strategies in mothers of children ASD and ADHD and how they relate to maternal stress during the initial lockdown of Croatia during the pandemic COVID -19. Results showed that mothers of children with ASD and mothers of children with ADHD most

frequently used reframing during the lockdown as a very successful strategy in such circumstances as a pandemic, which significantly helped to reduce stress. They used strategies such as obtaining social support and passive appraisal equally. Social support is also a successful strategy and contributes significantly to stress reduction, while passive appraisal is not as successful. For those mothers who predominantly used passive appraisal strategy, other forms of support are needed.

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Prediktori stresa kod majki dece sa poremećajem iz spektra autizma i ADHD-om tokom pandemije COVID-19

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Uvod: Prirodne katastrofe poput pandemije COVID-19 i zemljotresa izazvale su mnoge poteškoće svima. Porodice dece sa smetnjama u razvoju, kao posebno ranjiva grupa, suočavaju se sa još većim poteškoćama. *Cilj:* Cilj ove studije je da se istraže strategije suočavanja kod majki dece sa poremećajem iz spektra autizma i poremećajem hiperaktivnosti i deficita pažnje i kako su one povezane sa majčinim stresom tokom prvog zaključavanja Hrvatske tokom pandemije COVID-19. Zemljotres je istovremeno pogodio glavni grad, pa smo dodatno istražili uticaj zemljotresa na majčin stres. *Metod:* Strategije

suočavanja izmerene su korišćenjem hrvatske verzije “Evaluaciona skala orijentisana na porodične krize” („Family Crisis Oriented Personal Evaluation Scales – F-COPES”). Stres je izmeren korišćenjem hrvatske verzije Skala doživljenog stresa („Perceived Stress Scale – PSS-10”). Istraživanje je sprovedeno onlajn. Devedeset (90) majki dece osnovnih škola sa PSA i 67 majki dece osnovnih škola sa poremećajem hiperaktivnosti i deficita pažnje ispunilo je upitnike. *Rezultati:* Rezultati ponovljene analize mera varijanse pokazali su da su i majke dece sa poremećajem iz spektra autizma i majke dece sa poremećajem hiperaktivnosti i deficita pažnje najviše koristile strategiju reframinga, a najmanje strategiju mobilizacije porodice da steknu i prihvate pomoć. Rezultati linearne regresivne analize pokazali su da su reframing i sticanje socijalne podrške statistički značajni prediktori majčinog stresa. Među majkama iz oblasti pogođenih zemljotresom nije bilo razlika u odnosu na majke u drugim delovima Hrvatske. *Zaključak:* Rezultati ovog istraživanja ukazuju na potrebu psihološke podrške roditeljima dece sa poremećajem iz spektra autizma i poremećajem hiperaktivnosti i deficita pažnje, posebno u kriznim situacijama.

Cljučne reči: strategije suočavanja, zemljotres, majčin stres, ASD, ADHD, COVID-19 pandemija

PRIMLJENO: 9.10.2023.

REVIDIRANO: 8.03.2024.

PRIHVAĆENO: 10.03.2024.