

**A CASE STUDY OF ANXIETY: EFFECTIVENESS OF
SELF-HELP BASED CBT FOR REDUCING ANXIETY
IN MOTHER OF A CHILD WITH AUTISM**

Fareeha Kanwal*

Institute of Professional Psychology
Bahria University, Karachi, Pakistan

ABSTRACT

The aim of this case study was to assess the effectiveness of CBT based self-help manual in helping the mother of a child with Autism to reduce her anxiety. The client was a 30 years old female with moderate levels of anxiety. The self-help manual was used with intend to treat moderate levels of anxiety by working on the awareness about thought patterns, cognitive errors and feelings. Pretest and Posttest assessment of anxiety level was done through the anxiety sub-scale of Depression Anxiety and Stress Scale (DASS) Urdu version (Habib, 2010). Author of this study prepared audios of the manual content and approved them by the panel of experts including Professors of Psychology with the permissions of the author of the manual for the comprehensive understanding. The client was then trained to use the manual and audios after which she was required to practice them independently for 8 weeks with intermittent follow ups. Results showed a significant decrease in client's anxiety. This is significant that when there is limited access to formal therapy or lack of willingness to opt it, self-help approaches are meaningful support to improve mental well-being.

Keywords: *Self-Help, CBT, Audio-therapy, Anxiety, Mother, Autism*

* Correspondence Address: Fareeha Kanwal, PhD; Institute of Professional Psychology, Bahria University, Karachi, Pakistan. Email: fareehakanwal.psych@gmail.com

Kanwal

INTRODUCTION

Having a child is a time of great happiness and joy for the parents. Across the world, parents and caregivers try to do their best to provide a secure and nurturing environment for the physical, psychological, emotional and spiritual development. However, if parents find themselves in a situation where they are unable to meet the universal goals of parenting and perceive that their resources for meeting the demands of parenting are not sufficient, this joyful time becomes stressful (Batool & Khurshid, 2015). This characteristically happens when the family finds itself caring for a child who is either physically or psychologically not able and is not following the typical course of development.

It has been found by numerous researchers that compared to others, parents of children having autism spectrum disorder experience more stress, illness, and psychiatric problems (Dabrowska & Pisula, 2010; Dykens et al., 2014; Estes et al., 2009). Worries of parents of children with autism range from concerns about lifetime dependency to family disharmony, from the unavailability of support networks to low societal acceptance (Schieve et al., 2007; Sharpley et al., 1997)

Compared to fathers, mothers are especially at greater risk of experiencing the adverse effects (Shu et al., 2000). Identified primary reasons for this is having low levels of family support and the fact that mothers put their own health and well-being at risk while assisting their children (Bromley et al., 2004; Tang & Chen 2002 as cited in Bourgondien et al., 2014). However, despite the apparent need to seek counseling or mental health assistance, mothers have been found to resist taking this course of action. Numerous reasons have been debated upon as being the core factors of this resistance. They range from perceived stigma from family, friends, acquaintances and society at large; fear of being judged as a “bad parent;”; financial constraints; and logistical difficulties rendering people unable to have face-to-face therapy (Bilszta et al., 2010; Bowen et al., 2012; Gentile, 2007). Stigma and economic concerns top this list as biggest contributors to the overall burden in mothers that stops them from seeking help for themselves (Grunfeld et al. 2004 as cited in Slosky, 2013).

In an effort to cater to the issues that lead to underutilization of conventional psychotherapy even when much needed, psychologists and researchers diverted their attention towards exploring self-help psychotherapy as a viable option. Almost 40 years ago, self-help treatments started being

Pakistan Journal of Psychology

developed and tested in a number of studies in the western world (Cuijpers & Schuurmans, 2007). Developed countries have even worked on assessing effectiveness of different modalities of this form of therapy. Self-help therapy is defined as any standardized psychological treatment that a person can work with independently at home (Anderson et al., 2005; Apodaca & Miller, 2003; Cuijpers, 1997; den Boer et al., 2004; Marrs, 1995; Spek et al., 2007). There have been an adequate number of research base demonstrating that self-help therapies are effective in improving overall mental health and in reducing specific psychological problems (Cuijpers et al., 2010; Cuijpers & Schuurmans, 2007; Mataix-Cols & Marks, 2006; Newman et al., 2003; van Boeijen et al., 2005; van Straten et al., 2008).

Keeping in view the number of researches being done on self-help, it becomes important to also identify the type of psychotherapy that could be utilized best in the form of self-help. Self-help psychotherapy is most suited for illnesses of mild to moderate intensity and is intended to be utilized by people who require minimal supervision thus it is very psycho-educational in nature. Since Cognitive Behavioral Therapy (CBT) also has a teaching and learning component to it hence it becomes best suited for utilization as self-help (Baguley et al., 2010). Different meta-analyses, individual researches, and literature review have all been in favor of CBT based self-help (Coull & Morris, 2011; Danaher et al., 2013; O'Mahen et al., 2014; Przeworski & Newman, 2006). The CBT oriented self-help approaches have also been studied through a number of controlled trials for assessing their efficacy in specifically alleviating symptoms of anxiety (Sethi et al., 2010).

Since in developing countries like Pakistan, any form of self-help based psychotherapy is still a relatively unattended topic, a need was felt to direct our focus towards this area. Therefore, in the present case study, it is being assessed whether CBT based self-help interventions may alleviate the symptoms of anxiety in mother of a child with Autism without her having to opt for individual face-to-face conventional psychotherapy sessions.

Kanwal

METHOD

Research Design

A case study design was used in the study. Pre-assessment of anxiety level prior to the application of intervention as well as post-assessment of anxiety level after the completion of intervention was done.

Participants

One mother was chosen using purposive sampling in accordance with the following inclusion criteria:

- Must be a mother having a child with autism
- Her anxiety level must fall within the moderate range

Case Description

The client was 30 years old married female belonging to a lower-middle class nuclear family. She had three children with her second child having Autism Spectrum Disorder. Client's pre-intervention assessment indicated that she had moderate level of anxiety. Belonging to a nuclear family setup and having a child with Autism Spectrum Disorder, she reported her anxiety to be primarily originating from her perceived inability to look after her children and providing them with best support. Her time was distributed among supporting her child with autism, maintaining a normal family environment for her typically developing children, and performing all other household responsibilities; this proved to be burdensome and anxiety provoking for the client. Furthermore, as her child with autism was unable to communicate his needs effectively, she felt frustrated and inadequate. She also reported to be especially worried about her child with autism's welfare after her demise. She particularly reported experiencing catastrophic thinking and having difficulty in breathing which were clear indicators of her anxiety. Accumulatively, the reported issues were also adversely affecting her marital life with her husband

Pre-Assessment & Post-Assessment Measures

For assessment of anxiety in client, the anxiety subscale of Depression Anxiety and Stress Scale (DASS) is used. The DAS is a 42 items self-report scale

Pakistan Journal of Psychology

which measures depression, anxiety and stress. Each subscale consists of 14 items. Responses are rated on a 4-point severity scale experiencing over the past week. In the current study Urdu version (Habib, 2010) was used.

Procedure

Initially permissions were taken from the authors of the scales and the CBT based Urdu self-help manual "Khushi aur Khatoon" developed by Naeem et al. (2015). For the comprehensive understanding of the material by the respondent, the researcher prepared audios of the manual content with due permission of the author of manual and approved those audios by the panel of professors of psychology. An initial assessment of anxiety was done by using anxiety subscale of DASS to establish a baseline. Then client was briefed about the purpose and use of the manual and audios and was trained to practice the given techniques for 8 weeks. After four weeks interval, follow up was done by meeting the client to address any challenges regarding the use of self-help manual and the audios and to ensure that the procedure was being followed as trained. After completion of 8 weeks, DASS was again administered on the client to assess her post intervention anxiety level.

Case Formulation

Case formulation is based on cognitive therapy model proposed by Aron Beck (1960). This theory explains that individual's thoughts impact the behavior and emotions and psychopathology develops from distorted thinking or cognitive errors. The participant was a mother of a child with autism experiencing moderate level of anxiety, particularly excessive worry, future apprehensions and feelings of being overwhelmed. For her challenges to care for her child as a mother, concerns for the child future and stigma in the society and inadequate support were main triggers.

Demands of caring for a child with special needs and difficult behaviors most likely result into negative thoughts like "she must not fail as a parent"; "something bad can happen to my child in the future"; and "no one can accept him and harm him." Due to such automatic thoughts and beliefs, she over indulges herself and being overprotective to the child to protect herself from the anxiety. She is strongly motivated and good in problem-solving, and more importantly she has an easy access to services. The aim of CBT was to

Kanwal

restructure catastrophic automatic thoughts, to strengthen her coping strategies, and to help her enhancing her self-care and support.

Intervention

In this case the anxiety of the client was handled by self-help Cognitive Behavior Therapeutic approach.

Cognitive Behavior Therapy

CBT was developed by Aaron Beck in 1960. The CBT aims at identifying negative thoughts and evaluating whether these thoughts are realistic or not. With the awareness of these thoughts' clients can evaluate them and feel better. CBT also helps to restructure the negative thoughts with alternate positive thoughts and assists the clients in problem solving, in learning new skills and to set and achieve meaningful goals. It has been designed by the authors for treating anxiety and depression of mild to moderate degrees. In this study a CBT Self-Help Manual "Khushi Khatoon" was used. The manual is based on 8 weeks sessions containing different homework assignments that the clients have to complete on their own. The purpose of this manual is to help people become self-reliant by making them aware about their issues, thinking patterns, feelings and behaviors. With the permission of first author, the manual was converted entirely to audios for better usability by the clients.

Therapeutic Process

The therapeutic process was of 08 weeks. Session plans for each week were as follows:

Session No.	Session Plan
Session 1	<p>The primary objective was to help the client understand the causes and symptoms of stress, anxiety and depression. Some basic tips were also given for immediate improvement in client.</p> <p>First activity of this week was focused on explaining concepts of fight and flight. The symptoms and causes of stress, anxiety and depression were then listed down so that client could relate to them through deciding what symptoms are present in her.</p>

Pakistan Journal of Psychology

Session No.	Session Plan
Session 1 <i>(Continued)</i>	<p>Second activity of this week revolved around sleep and its importance in improving mental health. It then elaborated upon the tips to improve sleeping. It also explained how breathing and muscle exercises, imagery, attention diversion and a change in lifestyle can be means of further improvement.</p>
Session 2	<p>The aim of Second Session was to establish relationship between emotions and behaviors and explaining how stress leads to reduction in activities which further exacerbates disturbance.</p> <p>This session thus focused on helping client do activity planning and scheduling as means of improving emotions and behaviors.</p>
Session 3	<p>The focus was on problem solving.</p> <p>Identifying and defining the problem was explained along with teaching how possible solutions can be listed down and the best one is chosen. Most important component of this activity was helping the client understand that chosen solution should be one that is specific, clear and unambiguous, realistic and is able to bring about a positive change</p>
Session 4	<p>Fourth Session was most important one as it included understanding of major concepts of CBT.</p> <p>In this week, cognitive errors were understood and it was also learned how thoughts, emotions and behaviors impact each other.</p> <p>This session also incorporated education and awareness about vicious cycle and ongoing process of negative thoughts leading to disturbed emotions, physical issues</p>

Kanwal

Session No.	Session Plan
Session 4 (Continued)	<p>and dysfunctional behaviors.</p> <p>After understanding and making vicious cycle, client was explained about the concept of <i>Thought Diary</i> and was required to make it as well.</p>
Session 5	<p>Before introducing fifth session the researcher called the client for the follow up session to take a comprehensive feedback about the completed self-helped sessions and to discuss if any challenges were encountered.</p> <p>Her concerns in some areas were answered and cleared.</p> <p>She also discussed about the benefits of the process and work she has done related to her anxieties with a brief discussion of improvements she noticed.</p> <p>After the feedback, she was prepared to conduct the fifth session with the provided manual and related material.</p> <p>Then the aim of fifth session was facilitating the client in challenging her thoughts. In <i>Thought Challenging</i> activity client had to go one step beyond just identifying her thoughts in various situations and was required to find evidences for and against them</p>
Session 6	<p>Sixth Session was about learning to develop alternate positive thoughts.</p> <p>Having identified her thoughts as unrealistic or faulty, this session was about teaching client how to have an alternate thought that is more realistic and positive in nature.</p>
Session 7	<p>Seventh Session aimed to work on improving client's relationships by understanding errors of behaviors.</p> <p>This activity focused on helping client understand and</p>

Pakistan Journal of Psychology

Session No.	Session Plan
Session 7 <i>(Continued)</i>	<p>identify errors of her behaviors that have a negative impact on her interpersonal relations with her husband.</p> <p>These errors primarily included inability to effectively communicate her feelings, having low conflicts resolution ability and having either passive aggressive or manipulative style of communication</p>
Session 8	<p>The aim of eighth session was to conclude the sessions by viewing the therapy process holistically.</p> <p>This week focused on providing client with general tips to continue dealing with stressors effectively.</p> <p>These tips included doing one thing at a time, being mindful of one's limitations and communicating them to others too, knowing own strengths and weaknesses, seeking guidance, improving sleeping schedule, eating healthy, exercising, doing enjoyable activities, being social and staying positive</p>

RESULTS

Table 1
Demographic Information of the Case

Age	Gender	Marital Status	No of Children	Education	Occupation
30	Female	married	3	BA	Housewife

Kanwal

Table 2
Comparison of Pre-Intervention and Post-Intervention Anxiety Levels of a Mother having Child with Autism in

Pre-Intervention Anxiety Score	Post-Intervention Anxiety Score	Percentage Change (Pre-Post/Pre)*100
12	6	50%

DISSCUSION

Post-assessment using DASS indicated that there was significant decrease in the level of anxiety in the mother of a child with Autism Spectrum Disorder after using the self helped manual, Khushi Khatoon and audios of CBT based self-help manual for the designated 8 weeks. The client reported feeling more confident about running her daily affairs and looking after her children effectively. Being equipped with the knowledge to recognize her triggers, excessive use of cognitive errors especially that of catastrophizing and knowing how to replace her anxious thoughts by calmer alternate ones, she felt more in control. Thought diary and breathing activities were the ones that helped her most. One of the important feedbacks by the client indicates the effectiveness of the self helped approach of CBT in anxiety reduction *“I’m absolutely more assured of myself. I no more like to be a super human to deal with my child with no anxieties and keep an open communication with others about my child needs and my own challenges. Now I am able to understand that no one can be very happy all the time and control everything.”*

The obtained findings aligned with the existing studies. Previous studies emphasized that ASD not only have an impact on the sufferer but its effects range beyond the caregivers especially on mothers (Odo et al., 2023). They face substantial psychological distress because of the chronic impacts of the symptoms of ASD (Tathgur & Kang, 2021). The distress is intensified by wider social issues, encompassing stigma, difficulty in acceptance, and limited support system (Tathgur & Kang, 2021). Literature (Al-Shammary et al., 2023) focuses on the effective management of such distress with intervention like CBT to enhance the coping strategies of the caregivers (Fordham et al., 2018). In this

Pakistan Journal of Psychology

regard programs for mothers including CBT showed drastic reduction in the symptoms of the anxiety and distress leading to an overall better psychological well-being (Ozonoff et al., 2005). Further these advantageous effects were considered to be because of the cognitive restructuring and skills related to emotional regulation and problem-solving learned in CBT, which boosted self-awareness and positive thoughts or cognitions (Abdelaziz et al., 2024; Fordham et al., 2018).

In conclusion, the results of the present suggest that self-help therapy was successful in not just curtailing the issue from exacerbating but was actually effective in reducing the anxiety level of client successfully. In a country with limited resources and even more restrained understanding of mental health issues, this research proves to open wide arenas of possibilities. It proves that at places where manpower is inadequate and people struggle with numerous barriers that stop them from seeking the much needed professional help, psychotherapeutically oriented self-help may provide the answer. Self-help is an option that if explored further and developed well can bring about a positive change.

REFERENCES

Abdelaziz, E. M., Alsadaan, N., Alqahtani, M., Elsharkawy, N. B., Ouda, M. M. A., Ramadan, O. M. E., Shaban, M., & Shokre, E. S., (2024). Effectiveness of Cognitive Behavioral Therapy (CBT) on psychological distress among mothers of children with autism spectrum disorder: The role of problem-solving appraisal. *Behavioral Sciences (Basel, Switzerland)*, 14(1), 46. <https://doi.org/10.3390/bs14010046>.

Al-Shammary A. A., Hassan S. N., Alshammari F. S., & Alshammari M. R. R. (2023). A mixed-method analysis to identify the current focus, trends, and gaps in health science research in Saudi Arabia. *Frontier of Public Health*. 10, 1028361. doi: 10.3389/fpubh.2022.1028361

Anderson, G., Bergström, J., Holländare, F., Carlbring, P., Kaldo, V., & Ekselius, L., (2005). Internet-based self-help for depression: Randomised controlled trial. *The British Journal of Psychiatry*, 187 (5) 456-461. doi: 10.1192/bjp.187.5.456. <http://bjp.rcpsych.org/content/187/5/456.full>

Kanwal

Apodaca, T. R. & Miller, W. R., (2003). A meta-analysis of the effectiveness of bibliotherapy for alcohol problems [Abstract]. *J Clin Psychol.*, 59(3), 289–304. doi: 10.1002/jclp.10130. Retrieved from <http://onlinelibrary.wiley.com/doi/10.1002/jclp.10130/abstract>

Baguley, C., Farrand, P., Hope, R., Leibowitz, J., Lovell, K., Lucock, M., O'Neill, C., Paxton, R., Pilling, S., Richards, D., Turpin, G., White, J., & Williams, C. (2010) *Good practice guidance on the use of self-help materials within IAPT services*. Technical Report. IAPT.

Batool, S. S., & Khurshid, S. (2015). Factors associated with stress among parents of children with Autism. *Journal of the College of Physicians and Surgeons Pakistan*, 25(10), 752-756.
<http://www.jcpsp.pk/archive/2015/Oct2015/11.pdf>

Bilszta, J., Ericksen, J., Buis, A., & Milgrom, (2010). Women's experience of postnatal depression-beliefs and attitudes as barriers to care. *Australian Journal of Advance Nursing*, 27(3), 44-54.
http://www.ajan.com.au/Vol27/27-3_Bilszta.pdf

Bourgondien , M. E. V., Dawkins, T., & Marcus, L. (2014). Families of adults with Autism Spectrum disorders. F.R. Volkmar et al. (Eds.). *Adolescents and Adults with Autism Spectrum Disorders*, (pp. 15). New York, Springer Science+Business Media. doi 10.1007/978-1-4939-0506-5_2, ©2014

Bowen, A., Bowen, R., Butt, P., Rahman, K., & Muhajarine, N. (2012). Patterns of depression and treatment in pregnant and postpartum women. *Canadian journal of psychiatry. Revue Canadienne de Psychiatrie*, 57(3), 161–167.
<https://doi.org/10.1177/070674371205700305>

Bromley, J., Hare, D. J., Davison, K., & Emerson, E. (2004). Mothers supporting children with autistic spectrum disorders: social support, mental health status and satisfaction with services. *Autism : the international journal of research and practice*, 8(4), 409–423.
<https://doi.org/10.1177/1362361304047224>

Pakistan Journal of Psychology

Coull, G., & Morris, P. G. (2011). The clinical effectiveness of CBT-based guided self-help interventions for anxiety and depressive disorders: a systematic review. *Psychological medicine*, 41(11), 2239–2252. <https://doi.org/10.1017/S0033291711000900>

Cuijpers P. (1997). Bibliotherapy in unipolar depression: a meta-analysis. *Journal of Behavior Therapy and Experimental Psychiatry*, 28(2), 139–147. [https://doi.org/10.1016/s0005-7916\(97\)00005-0](https://doi.org/10.1016/s0005-7916(97)00005-0)

Cuijpers, P., Donker, T., van Straten, A., Li, J., & Andersson, G. (2010). Is guided self-help as effective as face-to-face psychotherapy for depression and anxiety disorders? A systematic review and meta-analysis of comparative outcome studies. *Psychological Medicine*, 40(12), 1943–1957. <https://doi.org/10.1017/S0033291710000772>

Cuijpers, P., & Schuurmans, J. (2007). Self-help interventions for anxiety disorders: an overview. *Current Psychiatry Reports*, 9(4), 284–290. <https://doi.org/10.1007/s11920-007-0034-6>

Dabrowska, A., & Pisula, E. (2010). Parenting stress and coping styles in mothers and fathers of pre-school children with autism and Down syndrome. *Journal of Intellectual Disability Research: JIDR*, 54(3), 266–280. <https://doi.org/10.1111/j.1365-2788.2010.01258.x>

Danaher, B. G., Milgrom, J., Seeley, J. R., Stuart, S., Schembri, C., Tyler, M. S., Erickson, J., Lester, W., Gemmill, A. W., Kosty, D. B., & Lewinsohn, P. (2013). MomMoodBooster web-based intervention for postpartum depression: feasibility trial results. *Journal of Medical Internet Research*, 15(11), e242. <https://doi.org/10.2196/jmir.2876>

den Boer, P. C., Wiersma, D., & Van den Bosch, R. J. (2004). Why is self-help neglected in the treatment of emotional disorders? A meta-analysis. *Psychological Medicine*, 34(6), 959–971. <https://doi.org/10.1017/s003329170300179x>

Dykens, E. M., Fisher, M. H., Taylor, J. L., Lambert, W., & Miodrag, N. (2014). Reducing distress in mothers of children with autism and other

Kanwal

disabilities: A randomized trial. *Pediatrics*, 134(2), e454–e463. <https://doi.org/10.1542/peds.2013-3164>

Estes, A., Munson, J., Dawson, G., Koehler, E., Zhou, X., & Abbott, R. (2009). Parenting stress and psychological functioning among mothers of preschool children with Autism and developmental delay. *Autism*, 13(4), 375-387. <https://doi.org/10.1177/1362361309105658>

Farooqi, Y. & Habib, M. (2010). Gender differences in anxiety, depression and stress among survivors of suicide bombing. *Pakistan Journal of Social and Clinical Psychology*, 8(2), 145.

Fordham, B., Sugavanam, T., Hopewell, S., Hemming, K., Howick, J., Kirtley, S., das Nair, R., Hamer-Hunt, J., & Lamb, S. E. (2018). Effectiveness of cognitive-behavioural therapy: a protocol for an overview of systematic reviews and meta-analyses. *BMJ Open*, 8(12), e025761. <https://doi.org/10.1136/bmjopen-2018-025761> doi: 10.1136/bmjopen-2018-025761.

Gentile S. (2007). Use of contemporary antidepressants during breastfeeding: a proposal for a specific safety index. *Drug Safety*, 30(2), 107–121. <https://doi.org/10.2165/00002018-200730020-00002>

Marrs R. W. (1995). A meta-analysis of bibliotherapy studies. *American Journal of Community Psychology*, 23(6), 843–870. <https://doi.org/10.1007/BF02507018>

Mataix-Cols, D., & Marks, I. M. (2006). Self-help with minimal therapist contact for obsessive-compulsive disorder: a review. *European psychiatry : the journal of the Association of European Psychiatrists*, 21(2), 75–80. <https://doi.org/10.1016/j.eurpsy.2005.07.003>

Naeem, F., Irfan, M. & Ayub, M., (2015). *Khushi and Khatoon: Zehni dabao or tanao ka apni madad aap kay tehat elaj (Urdu Title) (Khushi and Khatoon: A Culturally adapted CBT based self-help manual for Stress)*. Pakistan: Pakistan Association of Cognitive Therapists. <http://www.pactorganization.com/portfolio/khushi-aur-khatoon/>

Pakistan Journal of Psychology

Newman, M. G., Erickson, T., Przeworski, A., & Dzus, E. (2003). Self-help and minimal-contact therapies for anxiety disorders: Is human contact necessary for therapeutic efficacy?. *Journal of Clinical Psychology*, 59(3), 251–274. <https://doi.org/10.1002/jclp.10128>

Odo, V. O., Ukeme, W. V., Nwanosike, L. C., Karatu, B. A., Urama, S. I., & Nzenwaku, J. U. (2023). Moderating role of motivational preference in the relationship between attachment quality and emotional empathy among autistic caregivers. *Psychology, Health & Medicine*, 28(4), 867–875. <https://doi.org/10.1080/13548506.2021.1990359>

O'Mahen, H. A., Richards, D. A., Woodford, J., Wilkinson, E., McGinley, J., Taylor, R. S., & Warren, F. C. (2014). Netmums: a phase II randomized controlled trial of a guided Internet behavioural activation treatment for postpartum depression. *Psychological Medicine*, 44(8), 1675–1689. <https://doi.org/10.1017/S0033291713002092>

Ozonoff, S., Goodlin-Jones, B. L., & Solomon, M. (2005). Evidence-based assessment of autism spectrum disorders in children and adolescents. *Journal of clinical child and adolescent psychology : the official journal for the Society of Clinical Child and Adolescent Psychology, American Psychological Association, Division 53*, 34(3), 523–540. https://doi.org/10.1207/s15374424jccp3403_8.

Przeworski, A., & Newman, M. G. (2006). Efficacy and utility of computer-assisted cognitive behavioural therapy for anxiety disorders. *Clinical Psychologist*, 10(2), 43–53. <https://doi.org/10.1080/13284200500378779>

Schieve, L. A., Blumberg, S. J., Rice, C., Visser, S. N., & Boyle, C. (2007). The relationship between autism and parenting stress. *Pediatrics*, 119 Suppl 1, S114–S121. <https://doi.org/10.1542/peds.2006-2089Q>

Sethi, S., Campbell, A. J., & Ellis, L. A. (2010). The use of computerized self-help packages to treat adolescent depression and anxiety. *Journal of Technology in Human Services*, 28(3), 144–160. <https://doi.org/10.1080/15228835.2010.508317>

Sharpley, C. F., Bitsika, V., & Efremidis, B. (1997). Influence of gender, parental health, and perceived expertise of assistance upon stress, anxiety, and

Kanwal

depression among parents of children with autism. *Journal of Intellectual and Developmental Disability*, 22(1), 19-28.
<https://doi.org/10.1080/13668259700033261>

Shu, B. C., Lung, F. W., & Chang, Y. Y. (2000). The mental health in mothers with autistic children: a case-control study in southern Taiwan. *The Kaohsiung Journal of Medical Sciences*, 16(6), 308–314.

Slosky, L., (2013). *Primary caregivers of children with williams syndrome: posttraumatic growth and related health outcomes* [Doctoral dissertation]. Virginia Commonwealth University, Virginia.

Spek, V., Cuijpers, P., Nyklícek, I., Riper, H., Keyzer, J., & Pop, V. (2007). Internet-based cognitive behaviour therapy for symptoms of depression and anxiety: a meta-analysis. *Psychological Medicine*, 37(3), 319–328. <https://doi.org/10.1017/S0033291706008944>

Tathgur, M. K., & Kang, H. K. (2021). Challenges of the Caregivers in Managing a Child with Autism Spectrum Disorder- A Qualitative Analysis. *Indian Journal of Psychological Medicine*, 43(5), 416–421. <https://doi.org/10.1177/02537176211000769>

van Boeijen, C. A., van Balkom, A. J., van Oppen, P., Blankenstein, N., Cherpanath, A., & van Dyck, R. (2005). Efficacy of self-help manuals for anxiety disorders in primary care: a systematic review. *Family Practice*, 22(2), 192–196. <https://doi.org/10.1093/fampra/cmh708>

van Straten, A., Cuijpers, P., & Smits, N. (2008). Effectiveness of a web-based self-help intervention for symptoms of depression, anxiety, and stress: randomized controlled trial. *Journal of Medical Internet Research*, 10(1), e7. <https://doi.org/10.2196/jmir.954>