

Maternal Self Efficacy in Mothers Who Have Children with Autism Spectrum Disorder (ASD)

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ABSTRACT

One of the key factors supporting a mother's success in fulfilling her maternal role is maternal self-efficacy, which refers to a mother's confidence in her ability to care for her child effectively. This research examines maternal self-efficacy in mothers raising children with autism spectrum disorder (ASD). The study aims to analyze the factors influencing maternal self-efficacy in this context. A phenomenological approach was used, employing Interpretative Phenomenological Analysis (IPA). The study involved two mothers of children with ASD, with data collected through structured telephone interviews. The findings revealed that both mothers demonstrated strong maternal self-efficacy, shaped by five main factors: emotional state, appropriate parenting strategies, specialized teaching methods, provision of protection and security, and quality time spent with their children. Support from family members was also crucial in enhancing maternal confidence. Despite initial emotional difficulties, the mothers developed resilience and adaptive strategies to address their children's needs. This research highlights the importance of emotional regulation and social support in fostering maternal self-efficacy, which is essential for positive maternal and child health outcomes. The study's insights can inform interventions aimed at empowering mothers of children with ASD, ultimately improving both parenting effectiveness and child development. Further research with more diverse participants is recommended to broaden the understanding of maternal self-efficacy in families affected by ASD. In conclusion, both participants in this study exhibited strong maternal self-efficacy in carrying out their roles as mothers.

KEYWORDS *maternal self-efficacy; autism spectrum disorder (ASD); qualitative studies; phenomenology; interpretative phenomenological analysis*



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INTRODUCTION

Mothers are one of the influential figures in supporting children's growth and development. This is supported by the responsibility of the mother as the main educator of the child, where the future of the child depends on how the mother educates him. In educating children, mothers will often be faced with various kinds of challenges. The challenges that mothers often experience when caring for their children can be one of the obstacles in carrying out their role optimally. Challenges that may arise include being able to provide emotional support, physical support, and financial support to support the sustainability of children's lives so that they are guaranteed and happy. A good mother is expected to always give full affection to her child. On the other hand, mothers are also expected to have a strong inner bond with children. Being a mother means also being able to prioritize the fulfillment of children's needs over their own needs and must be willing to lose personal time to meet the interests of their children. The above things are one of the roles as mothers that must be carried out as well as possible (Lupton & Fenwick, 2001). One of the important factors that plays a role in the success of mothers in carrying out their role in order to achieve optimal parenting for children is called maternal self-efficacy. Maternal self-efficacy is a mother's self-confidence in her own ability and competence in raising children, as well as how mothers perceive their role when caring for their children, Coleman & Karakker (2003).

Children are a gift that comes from God. Having a child with special needs can be a challenge for some mothers. Parenting a child with special needs is challenging and can often overwhelm mothers. More efforts are needed in caring for children with special needs, especially children with Autism Spectrum Disorder (ASD). Autism Spectrum Disorder (ASD) or commonly referred to as autism is a neurodevelopmental disorder characterized by limited interest and repetitive behavior (Hodges et al., 2020). Children with autism often experience various obstacles in their developmental process. The obstacles experienced usually have a significant influence on communication patterns (verbal, non-verbal) and interaction patterns in the social environment that affect the success of children in developing themselves. Autism disorder is characterized as a disorder of a heterogeneous nature that can begin at a young age. In general, Nahar (2019) mentioned several special characteristics that children with autism often have, including (1) experiencing interaction disorders (being unable to interact in a non-verbal social environment, avoiding eye contact, difficulty playing with peers, lack of empathy, and lack of ability to manage social and emotional relationships in two directions), (2) communication disorders (having a relatively low intensity of verbal

speaking or even have no desire to speak at all, speak in tones (pronunciation) that are classified as difficult to understand, and speak with the purpose of not communicating), (3) sensory disorders (hypersensitivity to sound, temperature, and light), and (4) motor disorders (low levels of independence, more often dependent on other close people, especially mothers).

In this case, mothers are again one of the important figures that determine the extent to which children with autism are able to develop more optimally in their future. Thus, the challenges of mothers in carrying out their role in caring for children with autism are increasing, and it requires readiness and strong self-confidence, so that mothers can carry out their roles well. According to Wolff et al., (2022), the latest study further reported that 25% of children with autism were in the cutoff range (IQ 71–85), and 44% had IQ scores in the mean to above average range (IQ \geq 85). When having a child with autism, mothers are required to be more dexterous and pay greater attention to their children. As a result, often mothers can feel fatigue with a more frequent frequency when performing their roles. In the context of parenting children with autism, maternal self-efficacy is one of the factors that play a role in strengthening mothers' ability to overcome the challenges of parenting children with autism.

Researchers found several previous studies on maternal self-efficacy that focused on mothers, such as a study conducted by Suherik (2024), that adolescent mothers have relatively low maternal self-efficacy. Research by Gumbardania et al., (2019) states that there is a significant relationship between maternal self-efficacy and the achievement of the role of motherhood. This is emphasized by research conducted by Larasati et al., (2021), that mothers with children with autism have high maternal self-efficacy as shown by positive parenting behavior, an adaptive environment, efforts to stimulate children, and support child growth and development. Meanwhile, Sari (2020) stated that there was no significant difference between the level of maternal self-efficacy in mothers who had children with disabilities and those without disabilities. On the other hand, Hidayati & Dian's (2017) research shows that there is a positive and significant relationship between social support and maternal self-efficacy. Through the increase in the number of children with autism every year, there is a need for regular research novelty. The novelty of research that discusses maternal self-efficacy in mothers who have children with autism is expected to help mothers-to-be prepare themselves when parenting, and can help mothers who have children with autism to grow their confidence in caring for children with special needs. The researcher hopes that this research will be a new source of science in similar research, which in the future can be useful for the development of science, especially in the field of psychology related to maternal self-efficacy in mothers who have children with autism.

Based on the description above, the researcher focuses on answering research questions which include: 1). What is maternal self-efficacy in mothers who have children with autism spectrum disorder (ASD)?; 2). What are the things that affect maternal self-efficacy in mothers who have children with autism spectrum disorder (ASD)?

RESEARCH METHOD

The design of this research uses qualitative research methods. In its implementation, this qualitative research is carried out with the aim of understanding and describing the intrinsic characteristics of the phenomenon that occurs in the individual itself (Sugiarto, 2015). This qualitative research is used to deepen the process of information mining and describe the details of the phenomenon being studied. The approach used in this study is a phenomenological approach. In general, phenomenology can be interpreted as one of the approaches in qualitative research that focuses on exploring the life experiences of individuals as well as how individuals subjectively perceive experiences that have been experienced before.

The researchers used two mothers who had children with autism spectrum disorder (ASD). The method of recruiting research participants uses participants who are selected based on the characteristics and criteria desired by the researcher. The criteria for participants in this study are: 1) Married women; 2) Having a child with autism spectrum disorder (ASD); 3) Being a mother and caring for a child with autism spectrum disorder (ASD); 4) Parenting a child with autism for more than 10 years; 5) Having a child with autism spectrum disorder (ASD) who is currently a teenager (12-21 years old).

The researcher collected data using the in depth interview method conducted by telephone. According to Arikunto (2002), data collection is a method used by researchers to collect information. Meanwhile, an interview is a process in which two parties, namely the interviewer and the participant (interviewee) have a conversation with a certain purpose and purpose (Moleong, 2000). The interviews conducted in this study are structured interviews, where the researcher determines the problem and compiles a list of questions first before being asked to the competition. This aims to keep the conversation directed and focus on the problem being researched.

The analysis technique of this study uses Interpretative Phenomenological Analysis (IPA). Science is one of the analysis techniques that aims to deepen the phenomenon being researched. Science makes it possible to express experiences freely, rather than according to a predetermined category system, (Smith, 2009). IPA gives participants the freedom to express various feelings and experiences that have been experienced before. Brocki & Wearden (2006) explain, IPA recognizes

that interpretation is limited not only by the ability of participants to articulate their thoughts and experiences, but can also be limited by the ability of researchers to analyze. Through IPA, researchers are encouraged to be more imaginative and flexible in designing and carrying out research with clearer parameters (Eatough & Smith, 2017).

RESULT AND DISCUSSION

Through the research that has been conducted, the following data was obtained:

Table 1. Participant Demographic Data

	Participant I	Participant II
Mother's Name (Pseudonym)	Mrs. Selly	Mrs. Ria
Mother's Age	46 Years	46 Years
Mother's Work	Housewives	Civil servants in one of the cities in East Java
Marital Status	Marry	Marry
Child's Name (Pseudonym)	Ferdi	Rio
Child's Age	16 Years	15 Years
Child's Gender	Man	Man
Education	SMA	JUNIOR

In the demographic data above (see table 1), there are several demographic points that show similarities and differences in characteristics between participant I and participant II. The similarity of characteristics in the participants can be seen from, (1) the age of the participants, where both participants are currently 46 years old, (2) marital status, in a marital relationship (not a *single mother*, and have never been divorced before), and (3) the gender of the participant's child, namely a male who has the same age range, namely adolescents. The difference in the characteristics of the participants can be seen from, (1) the type of work that is being undertaken, where in this case participant I is a housewife, while participant II is a civil servant in one of the cities in East Java, and (2) the level of education of the participant's child, where the child of participant I is currently studying in class X (SMA), while the children of participant II are currently studying in grade IX (junior high school).

Table 2. Patterns Between Cases/ Patterns Between Participant Experiences

MASTER THEME	
Participant I	Participant 2
Emotional State	Emotional State
Proper Parenting Patterns	Proper Parenting Patterns
Providing Specialized Teaching	Providing Specialized Teaching
Provides Protection and a Sense of Security	Provides Protection and a Sense of Security
Availability of Quality Time with Children	Availability of Quality Time with Children

Based on the results on the intercase/inter-experience patterns formed from the two participants (see table 2), it can be concluded that the two participants have the same master theme. The researchers made the parent theme that had appeared on the table to be a factor of *maternal self-efficacy* that affected mothers' self-confidence when parenting children with autism. The factors of *maternal self-efficacy* in mothers who have children with autism include: (1) Emotional State, (2) Appropriate Parenting Patterns, (3) Providing Special Teaching, (4) Providing Protection and a Sense of Security, (5) Availability of Quality Time with Children.

Maternal Self-Efficacy *Factors* in Mothers Who Have Children with *Autism Spectrum Disorder (ASD)*

Emotional State

Participants are able to manage the emotions they feel when experiencing emotional conditions that they feel uncomfortable. On the other hand, it looks at how the participants' self-confidence to be able to develop these emotions in a more positive direction, even though they are in difficult situations, especially when parenting children with autism.

In participant I, there was a feeling of refusal to accept the child's condition when diagnosed with autism. Rejection in the participants was then followed by the emergence of other negative concerns, such as feeling unable to take care of children, and worrying excessively about the child's future. These things then lead participants to confusion in processing the emotions they are experiencing. Through the process undergone by participant I in parenting a child with autism, participants realized the importance of accepting reality when a child is born with autism. With acceptance, participants believe that they will slowly be able to cultivate a new perspective from a more positive side. Participant I then develops an attitude that does not give up on the condition that is being undertaken, begins to be able to accept themselves and the child's condition, becomes aware of the emotional needs of the child and believes that she is capable of carrying out her role as a mother.

In participant II, in general, the description of the feelings that emerged, had similarities to what appeared in participant I. Emotional states such as shock, followed by feelings of disappointment, and sadness when they first found out the child had autism. But in this case, participant II did not allow his confused emotional state to drag on. Participant II then develops positive feelings, is full of enthusiasm, and tries their best to be able to understand and understand the emotional needs of the child.

Proper Parenting Patterns

Participants meet the needs of children, namely, in terms of providing support and affection, fostering a healthy growth and development environment for children with autism, as well as efforts to continue to improve themselves in order to be able to optimize parenting for children with autism.

In participant I, childcare was carried out in a *team* together with the husband. With good cooperation between husband and wife, participants are more confident in their ability to carry out their role as mothers. According to participants, various challenges in parenting can be overcome more easily. In terms of providing support and affection,

participant I always gave small appreciation in the form of praise as well as physical touch (hugging) when every time the child did an action that was considered good. Basically, participant I felt confident that he had provided the right care for his child and was able to become a fully functioning mother.

In participant II, proper parenting can be seen from the support and cooperation of other people (rewang's mother) who help take care of children. Participant II revealed that expressions of love and affection are more often shown by tangible deeds such as supporting any positive activity that the child likes and providing time to take the child to activities. Furthermore, participant II said that parenting a child with autism has its own level of difficulty. With the help of the right energy from the people closest to you, it will be helpful to overcome any difficulties that may occur.

Providing Special Teaching

Participants are able to be actively involved and pro-active in children's lives, understand the right way to teach children with autism, apply discipline, and train children with autism on independence. In participants I and participant II provide special teaching, it can be seen when the participants teach discipline to children with autism by repeating instructions every day.

In participant I, this was seen when the participant reminded the child to fold the blanket. Participant I revealed that continuous repetition and patience are needed in directing children with autism to understand their discipline and responsibility.

Meanwhile, in participant II, the provision of special teaching with the repetition of instructions was seen when the participants taught the child to be independent during activities, such as making the bed, eating, and using a dispenser. The results of the teaching by participant II can be seen from how the child is able to cook on his own, as well as use his own dispenser.

Provides Protection and a Sense of Security

Participants do not leave children unattended. There is a desire to accompany children, care about children's health, and try their best to maintain their health.

In participant I, it provides protection and a sense of security seen from participants who have high concerns if they have to leave their children alone without supervision from other adults. Participant I explained that full assistance to children is highly recommended for parents who have children with autism. In protecting children from unwanted dangers, participants provide full assistance to children, such as accompanying children when they are in the kitchen to protect children from the danger of fire that can be caused by the stove, and protecting children from the use of sharp objects such as knives and other kitchen utensils. Not only in the kitchen, participants also assisted Ferdi in the crowd, as well as in the toilet. Related to health, participant I always tries to do the best for the child's health. In terms of self-confidence in caring for children's health, participants revealed that they were always ready to take care of children when they were sick. According to the participants, when the child is sick, as much as possible, all the attention and energy and focus will be given to the child who is sick.

In participant II, providing protection and a sense of security, it was seen when participants initially had high enough anxiety if they had to leave their children alone without

supervision from other adults. There was a feeling of self-doubt in participant II regarding her role as a mother. Participant II admitted that the anxiety felt began to decrease as the child grew older and began to be able to take care of himself. Good development in children in taking care of themselves is the result of routine therapy. Even so, participants still provide protection (not excessively) to children, by always providing adult assistance when they are doing activities in daily life. Related to health, participant II paid full attention to maintaining children's health. Furthermore, participants explained that not only by giving medicine when their children are sick, but also by seeking the maximum possible treatment by choosing treatment options that accelerate the recovery of children's health, such as choosing to be hospitalized when sick with typhoid and dengue fever, while the doctor allows it to be outpatient.

Availability of Quality Time with Children

The availability of quality time with children can be seen from how participants are able to provide playtime with children, and do fun activities together.

In participant I, the availability of quality time with children can be seen from the participants who always use their time at the end of the week to play with their children. By always taking the time to play with the child, participants feel that they can become closer to the child. According to the participants, the play activities carried out are also very good for channeling excess children's energy. Playing with children also makes participants understand what types of *refreshing* activities can make children with autism happy.

In participant II, the availability of quality time with children can be seen from the participants always taking their time to play with their children. Participant II admitted that his busyness at work sometimes also made him not have much free time. Nevertheless, participants always took time to play with their children. Participant II assessed that spending time with children is an obligation that must be done to help maintain the bond between mother and child. In the context of parenting children with autism, good *bonding* through play activities is very necessary. According to the participants, their child is a child with autism who is classified as liking outdoor activities *such* as swimming.

Overall, when viewed from the five *factors of maternal self-efficacy*, both participants still often experienced difficulties and felt unsure in carrying out their roles as mothers. This inconfidence is seen through the upheaval of the mother's emotional state when she first finds out that her child has autism. Despite this, both participants still tried to give the best for their children. With good emotional management, self-reflection, and changing perspectives to accept reality related to the child's current condition, participants regrow their confidence in carrying out their role as mothers. In other factors, namely, the right parenting pattern, providing special teaching, providing protection and a sense of security, and the availability of quality time with the child, from both participants have done well. Apart from the mother herself, another thing that is also considered to increase *maternal self-efficacy* in mothers who have children with autism is the existence of external support from the closest people in helping to care for children with autism. In both participants, this can be seen by the presence of a supportive husband (partner) and the closest people (such as other family members) who help and work together to provide care and moral support to the mother.

Discussion

Maternal self-efficacy can be seen through the behavior shown by the mother in daily parenting activities. *Maternal self-efficacy* is directly related to the enthusiasm, compatibility, and devotion of mothers when caring for their children (Sekarhani, 2019). The treatment of participants in raising children and fulfilling children's needs is a real effort and devotion to carry out their role as a mother. The level of *maternal self-efficacy* in mothers can be seen through parenting behaviors that support the optimization of child development (Yantina, 2024). Optimizing child development is one of the things that is very necessary to be done, especially in terms of parenting children with autism. In the studies that have been conducted, participants tend to be able to complete their tasks as mothers optimally because they have *good maternal self-efficacy*. Mothers with good self-confidence are less likely to avoid difficult parenting tasks and will be more adaptable in various situations (Kusumawati & Surjaningrum, 2021). The difficult situations that participants face when parenting children with autism can be seen when the child is experiencing emotional upheaval that tends to change quickly and can often explode over time.

The emotional upheaval felt by children with autism can be divided into three classifications, namely mild, moderate, and severe. In children with mild autism, emotional upheaval can arise through stimuli from other individuals or situation-based stimuli that can ultimately lead to negative emotional responses (Langaru, *et al.*, 2023). However, the negative response that arises will also be followed by the emergence of positive emotions as a result of the interaction that occurs between the child and the people around him, in this context what is meant is the mother figure. The two children participating in this study were children with autism who were classified as mild autism. Both of them still have a good response in responding to something that happens around them, are still relatively easy to be given certain teachings, and can carry out daily activities such as taking care of themselves with teaching through repeated instructions given by the mother figure. The level of independence of the children participating in this study can be formed and honed periodically but still under the supervision of other adult individuals. Through the promptness of mothers in nurturing, the development of children with autism can be seen clearly even though it takes a little longer teaching time than other children in general. A quick mother is a mother who has good confidence in raising children. Mother's confidence in her ability to nurture is very necessary because it will affect the child's development in the future (Kurniawati & Utaminingsih, 2017). Good self-confidence is one of the things that is included in mothers' self-confidence when parenting children with autism. Both participants are mother figures who are agile and dexterous, understand the needs of their children, and try their best for children's development through optimal parenting efforts. Some of these things are forms of real action for mothers who have *good maternal self-efficacy* when carrying out their role in caring for children with autism.

CONCLUSION

This study concludes that both participants demonstrated good maternal self-efficacy in fulfilling their roles as mothers of children with autism, as reflected in their descriptions of parenting behaviors. Key factors influencing maternal self-efficacy included emotional

state, appropriate parenting strategies, specialized teaching, providing protection and security, and quality time spent with children, with additional support from close family members further enhancing their confidence. However, the study's qualitative data collection was limited to single telephone interviews with each participant. For future research, it is recommended to explore maternal self-efficacy across more diverse populations and to observe how self-efficacy is manifested in actual parenting behaviors. Despite its limitations, this research contributes valuable insights to the field of psychology and offers important information for mothers raising children with autism.

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