

NURTURING THROUGH FAITH: STORIES OF GRANDMOTHERS REARING GRANDCHILDREN WITH AUTISM SPECTRUM DISORDER AND THE VITAL ROLE OF SPIRITUAL RESOURCES

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Abstract: Grandmother resilience is challenged by the demands of rearing grandchildren with autism spectrum disorder. This resilience interest was explored. Using phenomenological design, interviewing 10 grandmothers whom I selected through purposive sampling, and analyzing the experiences using thematic analysis, I found that apart from psychological, social, cultural, and physical aspects as resources of grandmother resilience, the spiritual resource emerged as essential. Systemic supports from communities and LGUs to reduce caregiving strain and strengthen grandmother resilience is proposed. Likewise, future research may use quantitative and qualitative methods to examine how various resources shape resilience.

IndexTerms - *Lived experiences, grandmothers, rearing grandchildren with autism spectrum disorder, stories to share*

I. INTRODUCTION

1.1 The Problem and Its Scope

Grandmothers rearing grandchildren with autism spectrum disorder (ASD) often face a "double burden," experiencing emotional distress (Baena et al., 2024). Hillman (2025) adds that this strain is intensified by gaps in support services and policies.

In Sweden, the resources for childcare available to grandmothers are scarce, and the support they receive is limited (Sarris, 2021), while in the United States, rearing burdens are compounded by limited resources and a lack of access to services (NeuroLaunch, 2024). Similarly, in Spain, grandmothers experience feelings of impotence, face physical limitations, and have limited involvement in caregiving (Almagro et al., 2024).

In the Philippines, grandmothers rearing grandchildren with ASD face a lack of formal support systems (Oman et al., 2024). They often carry the heavy load of rearing without adequate resources or institutional support (Garcia & Dy, 2024). This lack of support exacerbates their difficulties in managing both rearing and aging (Reyes & Domingo, 2025).

Despite the critical role that grandmothers play in rearing children with ASD, there remains a clear research gap, as most studies focus primarily on parents and overlook the experiences of grandmothers (Baena et al., 2024). I find it urgent to address this gap, to create evidence-based policies and support programs that truly assist grandmothers and improve the well-being of families rearing children with autism spectrum disorder (ASD).

1.2 The Significance of the Study

In this study, I highlight the often-overlooked role of grandmothers rearing grandchildren with ASD by exploring their experiences and the gaps in formal support. I aim to amplify their voices, show how rearing shapes family dynamics, and advocate for targeted interventions and policies that support both grandmothers and children with ASD. This study also aligns with Holy Cross of Davao College's mission to empower communities and promote social responsibility, supporting United Nations Sustainable Development Goals (SDG) 3, Good Health and Well-Being, and SDG 10, Reduced Inequalities, advocating for improved support systems for grandmothers rearing children with ASD.

1.3 Statement of the Problem

In this study, I explored the resilience of grandmothers rearing grandchildren with autism spectrum disorder. Specifically, I sought answers to this question: What are the various resources that shape grandmothers' resilience in rearing grandchildren with ASD?

1.4 Theoretical Lens

I anchored this study on Resilience Theory of Ungar (2008, 2011). According to this theory, resilience is both the capacity of individuals to navigate their way to the psychological, social, cultural, and physical resources that sustain their well-being, and their capacity individually and collectively to negotiate for these resources to be provided and experienced in culturally meaningful ways. This emphasizes the processes by which individuals and groups of individuals secure for themselves the psychological, social, cultural, and physical resources that make human development more likely to succeed in contexts of adversity.

The conceptual framework of this study centers on the resilience of grandmothers who raise grandchildren with autism, guided by Ungar's Resilience Theory (2008, 2011). It underscores how these grandmothers navigate a range of psychological, social, cultural, and physical resources as they respond to rearing demands. Through this lens, resilience is viewed not merely as an internal trait but as an adaptive process shaped by their interactions with available resources.

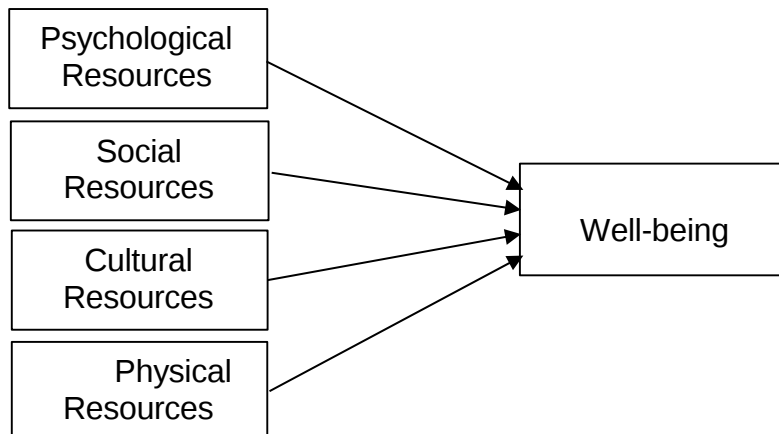


Figure 1. The Research Paradigm

1.4 Assumptions

In this study, I assumed that grandmothers demonstrate resilience by navigating their psychological, social, cultural, and physical resources in rearing their grandchildren with autism spectrum disorder (ASD). However, I also assumed that there are other circumstances that help sustain the well-being of grandmothers rearing children with such concern apart from those mentioned components in the theory.

II. METHODOLOGY

In this chapter, I outlined the methodological process, including the research design, sample and sampling, data gathering and analysis techniques, and trustworthiness of the study that I utilized for this manuscript.

2.1 Research Design

In this study, I employed a qualitative design with a phenomenological approach, which focuses on exploring the lived experiences of individuals (Brannan, 2022). The phenomenological approach is ideal for understanding the experiences of grandmothers rearing children with ASD, as it provided an in-depth understanding of their experiences, focusing on how they draw upon psychological, social, cultural, and physical resources while navigating rearing challenges.

2.2 Sample and Sampling Technique

I targeted 10 participants in total: five grandmothers for in-depth interviews and five for focus group discussions (FGD). According to Subedi (2021), a sample size of 6 to 20 participants is sufficient for phenomenological research, making 10 participants appropriate for this study. I conducted each interview via a virtual platform, with participant consent, to facilitate data collection. In identifying participants, I used maximum variation sampling technique, which, according to Patton (2020), it deliberately select participants who differ widely on key characteristics relevant to the phenomenon being studied and the goal is to capture a broad range of perspectives and experiences in order to identify common themes or patterns that emerge across diverse cases. I selected participants who were grandmothers rearing children with ASD enrolled in special programs within the four schools of the Division of Davao del Norte, had been rearing for at least one year, and were willing to share their rearing experiences by signing the informed consent.

2.3 Data Analysis Technique

In this study, thematic analysis was employed as the primary data analysis technique to systematically identify, organize, and interpret patterns or themes within the qualitative data. This approach allows the researcher to extract meaningful insights from participants' experiences, highlighting commonalities and differences across the data (Braun & Clarke, 2026).

2.4 Trustworthiness of the Study

I ensured the trustworthiness of this study by implementing several strategies that protected participants and maintained research rigor. To establish credibility, I conducted member checking, having each grandmother review and confirm the accuracy of their stories. For dependability, I engaged in peer debriefing, inviting a research colleague to review my methodological decisions, data-analysis procedures, and interpretations to ensure consistency and transparency. To enhance confirmability, I employed data triangulation by comparing multiple sources of information; interview transcripts from IDIs and FGDs, to verify findings and minimize researcher bias. I supported transferability by providing rich, thick descriptions of the caregiving context, setting, and participant characteristics, allowing readers to assess whether the findings could apply to other contexts. Through these strategies, I mitigated potential harm by ensuring the grandparents' voices were represented authentically, their identities protected, and their well-being prioritized throughout the study (Ahmed, 2024).

III. RESULTS

In this chapter, I presented the results I collated on grandmothers' experiences rearing grandchildren with ASD.

When Worry Turned into Hope

When my grandson was diagnosed with autism, the first thing I felt was fear. Not fear of him—but fear for him. I would lie awake at night worrying about his future. Who would understand him? Who would protect him when the world felt too loud, too fast, too cruel? The word *forever* suddenly felt heavy on my chest. I was no longer just a grandmother—I had become a second mother in a journey I never expected to take.

My husband stood beside me quietly through those early days. My children stepped in too, helping care for their nephew, supporting us financially when therapy bills piled up like unopened letters on the table. *"Akong bana ug mga anak kauban sa pag-atiman; nagatabang financial ug sila akong kasumbongan kung mastress ko."* Therapy was expensive, sometimes more than we could manage, and there were days my body betrayed me—when my joints ached so badly, I couldn't even lift him. *"Mahal ang therapy ug usahay babag pud akong health; dili ko makabantay kay manakit akong lawas"*. On those days, I felt guilt more than pain. What kind of grandmother cannot carry her own grandchild?

One afternoon, he had a meltdown in the middle of the grocery store. The lights were too bright. The sounds were too sharp. He fell to the floor, covering his ears, crying in a way that broke something inside me. People stared. Some whispered. I felt their judgment pressing against my back. I wanted to disappear. I wanted to cry with him. In that overwhelming moment, all my worries about his future rushed back stronger than ever.

But then my husband knelt beside him without hesitation. My daughter gently spoke to him, her voice steady and calm. A stranger—a mother I barely knew—walked up to me and whispered, "My child is on the spectrum too. You're doing your best." Her words felt like a hand reaching for mine in the dark. I realized I was not as alone as I thought. I had not joined any formal group, but I had acquaintances who shared their stories and advice, *"Wala ko grupo nga naapilan pero naa ko mga kaila nga naga-share pud sa ilang mga kasinatian ug nagahatag og advice"* reminding me that this road, though difficult, was not mine to walk alone.

That night, after the house grew quiet, I sat beside my grandson as he slept. His face looked so peaceful, untouched by the noise of the world. My body ached; my heart was tired—but something inside me had changed. The worry that once consumed me was slowly being replaced by hope. *"Kabalaka sa kaugmaon sa bata... napulihan kini ug paglaom..."* Hope that he would grow in his own beautiful way. Hope that love would surround him long after I am gone.

Raising a child with autism has deepened my faith in God's plan. *"Ang pagpadako sa usa ka bata nga adunay autism makapalambo kanako sa usa ka mas lalom nga pagtuo sa plano sa Ginoo..."* I do not understand everything, and I still have moments of fear. But I have learned to surrender what I cannot control. I see now that this child was not given to us by accident. Through him, our family has become gentler, stronger, and more united. And when he reaches for my hand and looks at me with trust, I no longer see uncertainty—I see purpose.

Love Beyond Fear

The day I found out my grandson was on the autism spectrum, a wave of hurt and confusion washed over me. I felt a deep ache in my chest, a sadness I couldn't shake. How could this be? I asked God why, and I prayed desperately that He would give me the strength to accept this truth. *"Sakit kaayo akong gibati pagkabalo nako nga aduna siya autism... pero nag-ampo ko nga madawat nako..."* Every night, I whispered my fears in prayer, begging for patience, guidance, and the courage to love him exactly as he was.

One afternoon, he had a difficult moment at home. He refused to eat, screamed at every sound, and tossed his toys across the room. I felt the old panic rising—the same frustration I had felt in the early days—but instead of reacting, I closed my eyes and prayed. My hands shook as I reached out to him, and I spoke softly, trying to meet him where he was. My heart broke watching his small body struggle with a world that often feels too loud and too fast. Then my husband and children came to help, gently guiding him, holding him, and assuring me that I was not alone. In that moment, amidst the tears and chaos, I felt a profound shift. My patience had grown. My acceptance had deepened. *"Mas nitaas akong pasensya ug pagdawat sa sitwasyon sa akong apo..."*

Love—steady, unwavering love—filled the space where hurt had lived.

Even with the support of family and acquaintances who share their experiences, there are still moments when my heart aches. Some days my body is too tired to lift him, some nights my mind is too weary to pray as I wish. Yet I have learned that it is okay to feel this way. I do not need to be perfect; I only need to continue showing up, continuing to love, and continuing to pray. These quiet realizations bring a gentle relief, a reminder that progress is not always dramatic, but it is real.

Now, when I watch him laugh at something small, or when he reaches out his hand for comfort, I feel a deep sense of gratitude. Our culture teaches that every family member supports the child, and through that daily care, love flows in every direction. *“Sa among kultura, tanang miyembro sa pamilya mosuporta sa bata, mutabang ug bantay, mutudlo, ug mupakita’g gugma”*. Through prayer, through patience, and through the shared effort of those who love him, I have found peace. *“Sa paagi ra gyud sa pag-ampo kada adlaw ug kada gabie nagsige lang gyud me pangayo sa Ginoo...”*. My grandchild’s journey has become my own lesson in faith, acceptance, and hope. The hurt I once felt has transformed into an enduring love that grows stronger with each passing day.

Carrying Love, One Day at a Time

From the moment my grandson came into this world, I never imagined the challenges that would come with raising him. He is full of life, but he struggles in ways that many cannot understand. From picky eating to moments when the simplest tasks become mountains, caregiving often feels heavy on my shoulders. Therapy could help him, I know, but the cost is far beyond what we can manage. *“Wala pa na therapy akoo apo maam. Kay mahal kaayo dili nako makaya ang gasto.”* Each day, I worry—not just for him, but for how we will make it through, how I can give him the care he deserves.

One evening, after a long day of trying to coax him to eat, he refused everything on his plate again. My body was tired, my mind exhausted. I felt tears well up, the weight of responsibility pressing on me like never before. At that moment, my daughter walked in, followed by my husband and another child, all offering a kind smile, a helping hand, or a comforting word. “It’s okay, Mom,” they said. “We’re in this together.” Their support didn’t erase the challenges, but it lifted the heaviness from my chest. *“Akong pamilya kanunay nagsuporta sa bata, nagahatag financial, advise, ug motivation kung bug-at na ang akong gibati”*. I realized that even in my most vulnerable moments, I was not alone. My family’s love and encouragement became a lifeline, giving me the strength to keep going when I thought I couldn’t.

Even with their help, there are still quiet moments when the burden returns. I scroll through Facebook groups for advice and encouragement from other caregivers, seeking small tips, reassurance, or stories that make me feel less isolated. *“Wala man ko naapilan nga mga organization or grupo... pero naga follow ko og mga groups sa Facebook labi na sa mga naay autism.”* Financial struggles still loom over us, and every mealtime is a challenge, as I search for the foods he will actually eat. *“Lisod ang financial, ug pilian kaayo og pagkaon akong apo; sige ko’g pangita unsa’y iyang ganahan, mao lisod ang pag-atiman.”* Some days, the frustration threatens to overwhelm me. But even in these moments, I remember that this journey is not just about what I cannot do—it is about what I can do: love him, care for him, and never give up.

At night, when he falls asleep in my arms, I whisper a quiet prayer of gratitude. I thank God for a family that supports us, for the small victories in his day, and for the love that continues to grow even in the hardest moments. The path is not easy, and I do not have all the answers, but I have learned that love, patience, and family support can carry us further than money or perfect plans ever could. And as I watch him breathe peacefully, I know that no matter how hard the days may be, this love makes everything worthwhile.

Love That Never Tires

The first days I spent caring for my grandchild, I did not realize how much it would change me. I was quick to anger, frustrated by every spill, every tantrum, every moment that did not go according to plan. *“Taas gyud nga pasensya, sauna dali ra gyud ko masuko karon kabalo nako magpailob”*. I carried the weight of responsibility on my own, unsure if I could manage it. Therapy could help him, but the cost was overwhelming, and I felt trapped between wanting the best for him and knowing I could not provide it alone.

Some days, I felt like I was failing him. I am older now, and my body ached more easily. Simple tasks, like lifting him or keeping up with his energy, became exhausting. *“Nagka-edaran na ko; kung masakit ko, gusto ko maatiman akong apo pero dili na makaya sa akong lawas.”* I worried that my limitations would affect his growth and happiness. The weight of responsibility pressed on me, and I often prayed for patience, for strength, for understanding that would carry me through even the hardest days. One afternoon, after a particularly difficult day, he refused to eat and cried at every sound. I felt my old frustration rising, the anger I used to feel so easily. But then my children came in, offering gentle words, helping hands, and quiet smiles that reminded me I was not alone. *“Ang akong mga anak nagsuporta financially ug emotionally, ug motabang kung masakit ko kay pinangga pud nila ang bata.”* An acquaintance of my grandchild’s even guided us to a cheaper therapy option, something I had thought impossible. *“Naglisod mi sa kamahal sa therapy, pero naa kaila sa akong anak nga nitabang makakita og mas barato”*. In that moment, surrounded by family and hope, I felt a calm strength I had never known before. My patience had grown, and my love for him deepened beyond anything I could have imagined.

Even with that support, there are still moments that test me. Financial struggles linger, therapy is still not easy to access, and my health sometimes prevents me from fully caring for him. Some nights, I lie awake, worried that I am not doing enough, afraid that my limits will let him down. But each time I see his small victories, his smile, his laughter, I am reminded that love, not perfection, is what shapes his world.

Through these struggles, my faith has grown stronger *“Mas nilig-on ang akong pagsalig ug pagtuo sa Ginoo”*. I pray daily for guidance, patience, and strength, knowing that God is walking this journey with us. My children’s love and support—helping watch over him, comforting me, and sharing the burdens—remind me that I am never alone. Even on the hardest days, I can lean on my family and my faith to keep going.

Now, when I watch my grandchild take a step forward, or hear his laughter fill the room, I feel a deep sense of gratitude. The journey has transformed me. I have gained patience I never knew I had, tolerance I could not have imagined, and a faith that steadies me through every challenge. Life is not perfect, and caregiving is never easy, but love, family, and trust in God make every struggle worthwhile. I am no longer just his grandmother, I am his protector, his guide, and his unwavering source of love.

Patience in Every Step

The moment I became responsible for my grandchild's well-being, I carried a heavy heart. I worried constantly about his future, about the challenges he would face, and about whether I could give him the care he truly needed. "*Nabalaka ug naguol ko sa sitwasyon sa akong apo, akong nalang gyud gidawat*". Some days, sadness settled over me like a shadow I could not shake. Therapy was expensive, each session a weight on my already tight finances, and I often felt powerless to give him the help he deserved.

There were days when my heart ached even more. He would fall sick, and the cost of medicine and hospital visits left me anxious and worried. I would watch him shiver or cry in pain and feel helpless, wishing I could do more. Some nights I stayed awake praying, asking God to guide me, give me patience, and help me find a way to care for him even when life felt too heavy. One particularly difficult afternoon, he refused to eat and then became feverish. My exhaustion and worry collided, and I almost broke down. But then I remembered the small hope I had been given someone had told me about free therapy at the regional hospital. Even if the process was long, even if it meant waiting and planning carefully, there was a way forward. "*Mahal kaayo ang therapy per session, pero may gane naa koy kaila nga nagsulti nga libre sa regional hospital, bisan taas ang proseso*." I held his hand, whispered softly to him, and felt a wave of calm. I realized that in taking care of him, my patience had grown stronger, and my tolerance had deepened beyond what I thought possible.

Even with this newfound patience, life is still full of challenges. There are days when I have no money, days when the stress feels overwhelming, and moments when my body aches from caregiving. Therapy remains difficult to access, and each obstacle reminds me of how fragile life can be. Yet, even in these difficult moments, I cling to faith, small victories, and the knowledge that love can carry us further than we imagine.

Over time, I learned to accept my grandchild's situation, no longer letting worry dominate my heart. I found ways to manage the challenges with patience and calm, relying on prayer and quiet moments of reflection. "*Sa akong pag-atiman sa akong apo nabantayan gyud nako nga mas nitaas gyud ang akong pasensya ug pagpailob*". Even without immediate solutions, I discovered that acceptance itself brings strength and hope. I no longer feel powerless—I feel guided, supported, and capable of giving him the care he needs.

Now, when he smiles at me, laughs at something small, or simply rests peacefully in my arms, I feel an overwhelming sense of gratitude. My patience has grown, my tolerance has deepened, and my faith in God has strengthened. The hardships, the hospital visits, and the financial struggles have all shaped a journey of love and resilience. I know that no matter what comes next, I will continue walking this path with him, carrying him forward with a heart that has learned to endure, to hope, and to love unconditionally.

3.1 Modified Paradigm

Figure 2 shows the themes of grandmothers' experiences rearing grandchildren with ASD, highlighting how they draw on interconnected resources to manage rearing and promote well-being.

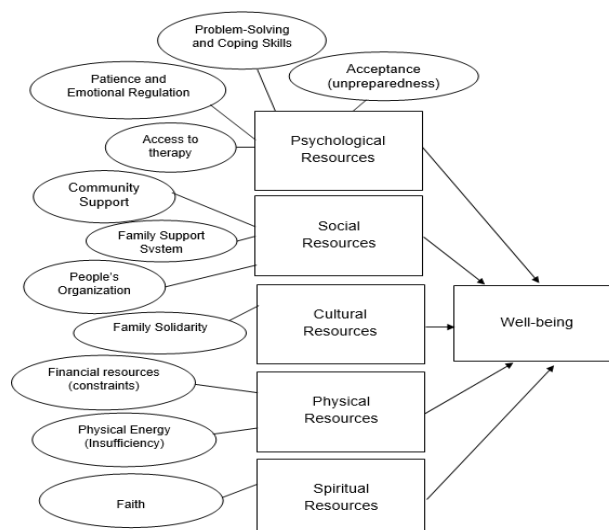


Figure 2. Experience of Grandmothers in Rearing Grandchildren with Autism Spectrum Disorder

Experience of Resilience of Grandmothers in Rearing Grandchildren with Autism in the Eyes of the Theory

As I read their stories, carefully unraveling each one like fragile threads, their faces came alive in my mind as I listened. I saw their expressions—heavy with sorrow as deep as the ocean and worry that clung to them like shadows at dusk. Some of them wept rivers of grief, their tears carrying the sharp sting of pain and the bitter taste of sacrifice from their experiences caring for their grandchildren. As I read on, chills raced down my spine, my tears fell like an unending storm, my chest felt as if it were being pounded by the weight of their sorrow, as if my heart could no longer contain the flood of emotions their stories had unleashed.

I carefully analyzed and found that there are five resources that help grandmothers sustain their well-being: psychological resources, social resources, cultural resources, physical resources, and spiritual resources.

On psychological resources. The grandmothers' stories suggest that patience and emotional regulation did not emerge fully formed but were gradually cultivated through the prolonged and intimate work of rearing grandchildren with autism. In the early stages, emotional responses were often immediate and reactive, shaped by fatigue, uncertainty, and the unfamiliar demands of the role. Yet repeated exposure to these situations appeared to nurture a more reflective emotional stance. One grandmother quietly observed that *"Sa akong pag-atiman sa akong apo nabantayan gyud nako nga mas nitaas gyud ang akong pasensya ug pagpailob,"* revealing how patience became something learned through lived experience rather than something merely possessed. Over time, emotional regulation evolved into a practiced discipline, reinforced daily by the need to remain gentle and steady despite mounting pressures, with another admitting that *"dili lalim usahay, pero ginahinay-hinay nako akong kaugalingon aron dili ko masuko dayon."* As this acceptance deepened, the grandmothers became more receptive to learning opportunities that could strengthen their caregiving confidence. Access to therapy and professional guidance served as an important psychological anchor, offering both practical direction and emotional reassurance. Even limited exposure to therapists and teachers appeared to reduce feelings of helplessness, allowing the grandmothers to approach rearing with greater intentionality. The quiet relief in the statement *"Dako kaayo'g tabang tong tambag sa therapist"* illustrates how expert guidance translated into renewed confidence, echoed further when another grandmother noted that *"kung naa koy matun-an sa mga teacher ug therapist, mas kampante ko mag-atiman."* In this way, knowledge became a stabilizing force within their emotional landscape. With growing emotional control, acceptance, and guided learning working together, the grandmothers gradually strengthened their problem-solving and coping skills. Daily caregiving challenges became, in effect, repeated rehearsals in adaptive thinking. Situations that once triggered immediate stress were increasingly met with calmer, more deliberate responses. Experience itself functioned as their teacher. This developmental movement is captured when one grandmother reflected that *"mas kabalo nako karon musulbad ug mga problema dili na kaayo ko dali mastress,"* a sentiment reinforced by another who shared that *"sa sige nakog atubang sa mga kalisod, nakakat-on gyud ko unsaon pagdala."* Through time and persistence, coping competence became embedded in their everyday practice of rearing.

On Social Resources. While psychological strength sustained the grandmothers internally, their capacity to continue rearing was significantly reinforced by the relational networks surrounding them. Family support system emerged as the most immediate and dependable buffer against the cumulative demands of caregiving. Assistance often arrived in quiet, practical forms—financial help when available, shared household tasks, or simply the reassurance that they were not alone in carrying out the responsibility. The comfort embedded in one grandmother's reflection that *"Ang akong mga anak nagasuporta financially ug emotionally, ug motabang kung masakit ko"* illustrates how family involvement distributed both emotional and material weight. Similarly, another acknowledged that *"kung kapoy na kaayo ko, naa ra gyud akong pamilya motabang,"* underscoring how shared responsibility sustained their endurance. Beyond the household, community support or connections with fellow caregivers or provided a different but equally meaningful layer of support. Conversations with others who understood the same rearing journey created moments of emotional release and normalization. Within these informal exchanges, the grandmothers found validation for feelings that might otherwise remain unspoken. The sense of lightness expressed in *"naa koy mga kaila nga caregiver pud; mugaan-gaan akong gibati"* reflects how shared experience softened emotional strain. For some, simply talking with peers who were *"parehas nako"* made the burden feel less isolating, suggesting that empathy itself functioned as a psychosocial resource. Participation in people's organizations further expanded these support systems by offering structured spaces for engagement beyond the immediate caregiving role. Even occasional involvement appeared to restore emotional balance and social connectedness. As one grandmother shared, *"maibsan akong gibati basta makaapil ko sa grupo,"* participation created brief but meaningful pauses from the continuous rhythm of rearing, reinforcing the importance of community belonging in sustaining long-term caregiving.

On Cultural Resources. Underlying these social dynamics is a deeply embedded cultural orientation toward family solidarity that quietly sustains the grandmother's commitment to rearing. Within their shared worldview, stepping in to rear a grandchild is not framed as an extraordinary burden but as a natural extension of kinship responsibility. This cultural script appears to normalize sacrifice while simultaneously providing emotional justification for continued involvement. The collective belief voiced in *"Sa among kultura, tanang miyembro sa pamilya mosuporta sa bata"* reflects how caregiving is morally distributed across the family network. In many accounts, helping the grandchild simply felt like the expected and proper thing to do *"natural ra gyud sa amo nga motabang sa apo kung kinahanglan"* suggesting that cultural meaning-making significantly cushions the psychological weight of the role.

On Physical Resources. Despite strong emotional and cultural foundations, the grandmothers' rearing efforts were continually shaped by material realities. Financial constraints surfaced repeatedly as persistent structural pressure influencing daily decisions about healthcare and therapy. Limited income required careful prioritization, often forcing difficult trade-offs. The strain is evident in the admission that *"naay panahon walay kwarta; kung masakit siya, mahal ang hospital ug tambal,"* revealing how economic scarcity complicates already demanding caregiving work. Yet even within constraint, determination remained evident, as reflected in the quiet resolve, *"lisod usahay ang kwarta, pero maningkamot gyud ko para sa akong apo."*

Insufficient Physical Energy added another layer of challenge, particularly as many grandmothers navigated rearing responsibilities alongside the realities of aging bodies. Daily supervision, mobility demands, and emotional attentiveness required sustained energy that was not always readily available. The embodied strain surfaces when one grandmother acknowledged that

“nagka-edaran na ko... dili na makaya sa akong lawas,” while another admitted *“dali ra ko kapoyon ug magsakit akong lawas.”* Yet rather than withdrawing, many adapted their pace and routines, demonstrating a quiet but powerful form of endurance rooted in commitment to the child’s well-being.

On Spiritual Resources. And then, almost softly woven between fatigue and hope, another source of strength emerged—one that sits gently beyond Ungar’s four-resource framework. It was not material, not social, and not purely psychological. It was quieter, more intimate, and often spoken of only after the practical struggles had been described. In moments when emotional strength was stretched, when finances were uncertain, and when the body felt too tired to continue, many grandmothers turned inward and upward. Faith served as a deeply personal and quiet refuge for the grandmothers, offering solace when the weight of caregiving became overwhelming. In moments of physical exhaustion, emotional strain, and uncertainty about the future, prayer was not just a ritual it became both a source of comfort and a form of renewal. It provided a safe space where fears, anxieties, and uncertainties could be acknowledged and released, even when no practical solution or tangible support was available. This process of turning inward and upward allowed them to regain emotional equilibrium, replenishing the inner strength needed to continue their demanding rearing responsibilities. The steady rhythm of daily prayer, as described in *“Sa paagi ra gyud sa pag-ampo kada adlaw ug kada gabie nagsige lang gyud me pangayo sa Ginoo,”* illustrates how spiritual practice created a structured framework for emotional recovery. The repetition and constancy of prayer offered both predictability and reassurance, helping grandmothers navigate the uncertainty and fatigue of daily life. For some, faith also became a source of active energy and motivation: *“kung kapoy na kaayo ko, mag-ampo nalang ko kay didto ko makakuha’g kusog.”* In these moments, prayer provided not only emotional relief but also internal strength to continue despite physical strain or financial hardship. Ultimately, spirituality anchored their perseverance at the deepest level. It functioned as a foundation from which all other coping mechanisms—material, social, and psychological—could operate more effectively. This profound reliance is captured in the simple affirmation of one grandmother: *“Ang Ginoo ra gyud akong sandigan sa tanan.”* In essence, faith offered an enduring, intimate, and stabilizing form of resilience, allowing grandmothers to carry on with caregiving with hope, courage, and a sense of purpose, even when every other resource seemed limited or insufficient.

Summary of findings

In this study, I have identified five resources that help sustain the well-being of grandmothers rearing grandchildren with autism spectrum disorder. These are psychological, social, cultural, physical and spiritual resources that sustain grandmothers’ well-being.

DISCUSSIONS

In this chapter, I presented the discussion of the study’s results on the lived experiences of grandmothers rearing grandchildren with autism spectrum disorder, including implications for practice, and identified future direction of the study.

Psychological resources that sustain grandmother’s well-being

In this study, I have identified four psychological resources of grandmothers that sustain their well-being. These resources are access to therapy, patience and emotional regulation, problem-solving and coping skills and acceptance.

On access to therapy through supportive social networks that eases the grandmother’s psychological problem. In this study, I found that supportive social networks help grandmothers access therapy, easing their psychological burden, although barriers such as complex processes, long waiting times, and financial constraints remain. These findings align with Wallace-Watkin et al. (2023), who reported that financial limitations, limited-service availability, and long waiting lists restrict therapy access for families raising children with ASD. Similar barriers were documented by Dababnah et al. (2022), of Dababnah et al. (2022), who found that systemic limitations in healthcare systems often prevent underserved families from obtaining autism services. However, the findings of this study contradict Fisher et al. (2023), who suggested that improvements in service accessibility alone may not fully address persistent gaps in care. A contrasting view, the present findings indicate that accessibility combined with strong social support networks can significantly improve therapy access for caregivers. The study of Fisher et al. involved five participants only, whereas I had ten.

On emotional resilience through patience and emotional regulation. In this study, I observed that patience and emotional regulation help grandmothers maintain emotional stability, with caregiving experiences gradually strengthening their ability to remain calm and respond effectively to behavioral challenges. These findings are consistent with Lozano and Brooks (2021), who reported that caregivers who develop positive coping strategies and receive social support experience improved family well-being and adaptive functioning. Padden and James (2023) similarly found that psychoeducational support programs enhance caregivers’ emotional regulation and resilience. However, these findings diverge from Chen et al. (2025), who reported that caregiver burden may continue to weaken resilience even when structured support is available. In a different perspective, the present findings suggest that structured support systems—such as caregiver training, counseling, and emotional coaching—can strengthen emotional regulation and resilience. The study of Chen et al. involved seven participants only, whereas I had ten.

On adaptive coping and problem-solving in daily caregiving challenges. In this study, I found that problem-solving and adaptive coping skills help grandmothers manage daily caregiving challenges, gradually enhancing their patience, flexibility, and

positive thinking. These findings corroborate with Martins et al. (2021), who reported that long-term caregiving can foster adaptive coping strategies and resilience among family caregivers. Similarly, Zhou et al. (2023) emphasized that active coping strategies and cognitive reframing improve the psychological functioning of caregivers raising children with ASD. However, these findings challenge Johnson and Herrera (2021), who reported that prolonged caregiving without sufficient support may lead to emotional fatigue. In opposition, the present findings suggest that patience and adaptive coping strategies can strengthen resilience despite caregiving challenges. The study of Johnson and Herrera involved six participants only, whereas I had ten.

On acceptance through resilience, faith, and emotional adaptation. In this study, I observed that grandmothers gradually develop acceptance as they emotionally adapt to raising a grandchild with ASD, with resilience, faith, and emotional regulation helping them move beyond initial distress and uncertainty. These findings reinforce Martins et al. (2021), who described caregiving as a grief-like process in which acceptance develops through emotional adaptation and spiritual grounding. Kwon et al. (2022) similarly reported that meaning-making and emotional processing help caregivers gradually accept their caregiving roles. However, these findings contrast with Nguyen et al. (2021), who reported that caregivers may remain in denial or experience prolonged emotional exhaustion when psychosocial support is lacking. On the contrary, the present findings suggest that resilience, faith, and emotional regulation can facilitate acceptance even amid caregiving challenges. The study of Nguyen et al. involved five participants only, whereas I had ten.

Social Resources that Sustain Grandmothers' Well-Being

In this study, I identified three social resources that sustain the well-being of grandmothers raising grandchildren with autism spectrum disorder (ASD). These resources include people's organizations, family support systems, and community support.

On people's organizations through shared support and collective experience. In this study, I observed that participation in people's organizations serves as an important social resource, providing grandmothers with emotional support, shared learning, and practical advice. By joining formal and informal groups—such as caregiver circles, online communities, and neighborhood gatherings—they felt understood, reduced feelings of isolation, and strengthened their coping abilities.

These findings confirm Lozano and Brooks (2021), who reported that group participation and peer engagement enhance caregiver resilience through shared empathy and emotional validation. The findings also align with McCoy et al. (2022), who found that peer-support communities increase caregiver confidence and emotional well-being by providing shared knowledge and practical guidance. However, the findings differ from Klein and Morales (2023), who argued that informal support networks may lack the structure needed to address complex caregiving challenges. Conversely, the present study suggests that even informal caregiver networks can provide meaningful emotional support and experiential learning that strengthen coping. The study of Klein and Morales involved eight participants only, whereas I had ten.

On family support systems through shared responsibility and emotional support. In this study, I observed that family support systems are crucial for sustaining grandmothers' well-being, as shared caregiving responsibilities and emotional reassurance from children, spouses, and extended family help reduce stress, strengthen family unity, and maintain emotional balance. These findings agree with Lee and Whitmore (2021), who reported that family cohesion strengthens caregivers' coping abilities by fostering shared responsibility and a collective sense of purpose. The findings also align with Oti-Boadi et al. (2022), who found that strong family networks significantly buffer caregiver stress and improve emotional well-being. However, the present study does not support Nguyen and Hall (2022), who suggested that family support alone may not be sufficient to address caregiving stress under socioeconomic pressures. In opposition, the present study indicates that family support plays a significant role in sustaining caregivers' emotional well-being when responsibilities are shared among family members. The study of Nguyen and Hall involved six participants only, whereas I had ten.

On community support through social engagement and shared understanding. In this study, I found that community support is an important social resource, reducing isolation and boosting grandmothers' confidence in caregiving. Interactions with neighbors, shared advice, and practical assistance fostered understanding, belonging, and a sense of collective responsibility in supporting families raising children with ASD. These results echo Hayes et al. (2023), who reported that community-based support networks improve family resilience and caregiver mental health among families raising children with ASD. The findings also align with O'Donnell et al. (2022), who found that community inclusion initiatives significantly reduce caregiver isolation and promote social connectedness. However, the results of this study depart from Aithal et al. (2023), who suggested that social support alone may not prevent ongoing caregiver isolation due to broader environmental challenges. On the contrary, the present study indicates that consistent social engagement and supportive community interactions can meaningfully reduce isolation and strengthen caregivers' emotional well-being. The study of Aithal et al. involved eight participants only, whereas I had ten.

Cultural Resources that Sustain Grandmothers' Well-Being

In this study, I identified family solidarity as a key cultural resource that sustains the well-being of grandmothers raising grandchildren with ASD.

On family solidarity through intergenerational resilience in caregiving. In this study, I observed that family solidarity strengthens resilience in multigenerational caregiving by promoting emotional support, shared responsibility, and cultural commitment. Cultural traditions emphasizing family unity encouraged extended relatives to provide both emotional and practical support, fostering stability for grandmothers and the children they care for. These findings support Rahman and Ibrahim (2022), who reported that cultural expectations of family unity and interdependence enhance caregivers' emotional well-being. The findings

also align with Mofokeng and Du Plessis (2023), who found that intergenerational solidarity strengthens resilience within family caregiving systems. However, the findings of this study contradict Delgado et al. (2023), who suggested that cultural expectations of family duty may not sufficiently reduce caregiver stress when caregiving demands are high. In contrast, the present study indicates that family solidarity can strengthen resilience and emotional stability among caregivers when extended family members actively participate in caregiving responsibilities. The study of Delgado et al. involved five participants only, whereas I had ten.

Physical Resources that Sustain Grandmothers' Well-Being

In this study, I identified two physical resources that influence the well-being of grandmothers raising grandchildren with autism spectrum disorder (ASD).

On managing limited physical energy through adaptive caregiving practices. In this study, I found that age-related fatigue and health limitations pose significant challenges for grandmothers raising children with ASD. Despite physical strain, they managed caregiving through adaptive strategies such as pacing activities, seeking help, and adjusting routines. These results reflect Aranda and Zamora (2024), who reported that age-related physical decline often intersects with the demanding responsibilities of caregiving. The findings also align with Chen and Clark (2022), who documented increased physical strain among older caregivers of children with ASD. However, the findings present a different perspective from Smith and Allen (2023), who suggested that resilience alone may not sufficiently prevent physical exhaustion among older caregivers. On the contrary, the present study indicates that adaptive caregiving practices can help grandmothers manage physical fatigue while sustaining caregiving responsibilities. The study of Smith and Allen involved six participants only, whereas I had ten.

On navigating financial constraints in grandmother caregiving. In this study, I observed that financial constraints significantly affect grandmothers' well-being, with high therapy, healthcare, and caregiving costs creating strain. Despite these challenges, grandmothers showed resourcefulness by seeking affordable services, prioritizing essential expenses, and adjusting family budgets to meet their grandchildren's needs. These findings are parallel with Martinez and Johnson (2022), who reported that economic constraints limit access to therapy services and increase caregiving stress among families of children with ASD. The findings also align with Taylor et al. (2022), who documented significant financial burdens among caregivers raising children with autism. However, the findings are inconsistent with Rivera et al. (2021), who suggested that teletherapy services and outreach programs can significantly reduce financial barriers for families raising children with ASD. Conversely, the present study indicates that financial strain remains a persistent challenge despite the availability of alternative services. The study of Rivera et al involved five participants only, whereas I had ten.

Spiritual Resources that Sustain Grandmothers' Well-Being

In this study, I identified faith as a key spiritual resource that sustains the well-being of grandmothers raising grandchildren with autism spectrum disorder (ASD).

On faith through spiritual beliefs and religious practices. In this study, I observed that faith is a key spiritual resource, helping grandmothers cope with the emotional and physical challenges of raising a grandchild with ASD. Through prayer, reflection, and religious practices, they found comfort, maintained hope, and derived meaning in their caregiving role. These findings add support to Almeida and dos Santos (2021), who reported that spirituality acts as a protective factor that buffers psychological stress among caregivers. The findings also align with Walton and Takeuchi (2022), who emphasized that religious coping strengthens caregivers' meaning making and endurance when facing long-term caregiving responsibilities. However, the findings oppose Evans and Brown (2021), who suggested that reliance on faith alone may delay caregivers from seeking professional or practical support. In contrast, the present study indicates that faith can strengthen emotional resilience while complementing other forms of social and practical support. The study of Evans and Brown involved eight participants only, whereas I had ten.

Implications for Practice

The study calls for broader systemic support to ensure that rearing does not come at the expense of grandmothers' well-being. LGUs and community organizations may provide accessible therapy, financial assistance, and health services tailored to older grandparents, helping to alleviate the physical and emotional strain of rearing. By fostering environments where grandmothers are empowered, supported, and connected, society can honor their sacrifices while strengthening the resilience of families and children with ASD. In this way, resilience becomes not just a personal achievement but a shared, community-supported journey, one that uplifts rearing grandmothers, nurtures children, and strengthens the social fabric that sustains them all.

Future Directions

Based on my findings, I propose the following research: multiple linear regression utilizing psychological, social, cultural, physical, and spiritual resources as determinants of well-being; exploratory factor analysis to develop questionnaires for the elements mentioned, and utilizing their corresponding subthemes as indicators; and qualitative research to generate subthemes for well-being which were not explored in this study.

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