



The Lived Experiences of Family-Caregivers of Relatives with Autism Spectrum Disorder

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Abstract

This study explores the lived experiences of Filipino family caregivers supporting relatives with Autism Spectrum Disorder (ASD), focusing on their emotional, social, and financial challenges. ASD is a developmental condition characterized by communication difficulties and repetitive behaviors, presenting unique caregiving demands. Guided by the Resilience Theory, the research investigates how caregivers adapt to these challenges through coping mechanisms and resilience.

Using a qualitative thematic approach, the study delves into caregivers' narratives, revealing themes such as emotional strain, societal stigma, and financial burden, balanced by moments of fulfillment and deep familial bonds. Findings highlight the urgent need for tailored support systems, public education on ASD, and resources to alleviate caregiver stress while enhancing their well-being. The study aims to contribute valuable insights for policymakers, healthcare providers, and support organizations to create inclusive and effective interventions for caregivers and individuals with ASD.

Keywords: Mechanisms, Familial Bonds, Healthcare Providers

1. Introduction

The lived experience of family caregivers for individuals with autism spectrum disorder (ASD) presents a multifaceted challenge deeply influenced by cultural, economic, and social factors. ASD is a developmental disorder characterized by communication difficulties, repetitive behaviors, and varied social interaction challenges. According to the research of Abasola (2023), the Data from the Center for Disease Control and Prevention show that autism affects one out of every 68 persons. In the Philippines, one in every 100 Filipinos has ASD. This prevalence places significant demands on families, especially on primary caregivers who often bear the responsibility of daily care and support.

Even though autism research has attracted much attention in recent decades, much of that attention has been focused on children with autism and very little on the caregivers who are responsible for providing for them. Additionally, the study of Supriya *et al.* (2023) stated that Caregivers of people with ASD frequently encounter significant challenges and difficulties in carrying out their responsibilities. Furthermore, the emotional, financial, and social components of caregiving can all be affected by these difficulties, which can have a severe negative impact on caregivers' mental health and general quality of life.

Toledano-Toledano *et al.* (2020) ^[7] describe a family caregiver as someone emotionally close to the patient, a member of their family, and provides various sorts of assistance and care throughout the patient's long-term illness, acute illness, or disability in the Philippines. It is primarily shaped by a culture that emphasizing familial duty and close kinship ties. However, these caregivers face substantial challenges. Due to limited access to adequate healthcare and specialized education, caregivers are frequently overwhelmed with the need to manage their relative's condition without sufficient support or resources. The high costs of therapies and interventions and the scarcity of specialized professionals in rural areas add to the financial strain many Filipino families experience.

According to national data on Mental Health Services (2019) in the Philippines, the availability of mental healthcare is marked by significant gaps and inefficiencies. These limitations severely affect family caregivers.

Without adequate access to mental health facilities, caregivers frequently face elevated levels of stress and burnout as they struggle to manage complex care responsibilities. Furthermore, the high costs of private mental health services place a substantial financial burden on many families, forcing caregivers to make difficult choices between essential needs and treatment expenses.

Additionally, Mikulić *et al.* (2023) ^[3] highlighted that caregivers may feel a range of emotions, including anxiety, stress, guilt, and compassion fatigue, as they balance the demands of caregiving with their own personal and professional commitments. The intense caregiving duties eventually lead many caregivers to make tough decisions regarding their professional lives. Due to a lack of community resources and limited access to official support services, caregivers frequently have no choice but to quit their jobs or reduce their work hours in order to fulfill the demands of caregiving. This sacrifice puts many families in financial difficulty, as they lose a significant source of income while incurring additional caregiving costs. The financial burden compounds the emotional toll, as caregivers suffer increased stress and anxiety about how to support their home while providing proper care for their loved ones.

On the other hand, a study by Brodaty (2022) ^[1] said that Family caregivers may be motivated to provide care for several reasons: a sense of love or reciprocity, spiritual fulfillment, a sense of duty, guilt, social pressures, or, in rare instances, greed. Caregivers who are motivated by a sense of duty, guilt, or social and cultural norms are more likely to resent their role and suffer more significant psychological distress than caregivers with more positive motivations. Caregivers who identify more beneficial components of their role experience less burden, better health and relationships, and more significant social support.

Furthermore, Filipino caregivers of children with ASD often express that caregiving brings deep, meaningful fulfillment to their lives. Many caregivers describe a journey marked by initial challenges, emotional adjustments, and a profound sense of purpose. For example, caregivers in one study shared how they found fulfillment in overcoming obstacles and in the love and commitment they invested in their children's well-being. They feel rewarded by small developmental milestones and cherish their unique bond they have with their children. The process often strengthens their resilience and brings out a deep sense of devotion and acceptance in their role as caregivers.

In conclusion, the researcher seeks to delve into the personal experiences of family caregivers providing support to relatives with ASD. In addition, intervention or support programs should be customized to the specific requirements of family caregivers to improve their psychological, emotional, and physical health outcomes.

2. Methodology

A. Research Design

The research study utilized a Thematic Qualitative design to identify, analyze systematically, and report patterns or themes based on the responses or experiences provided by the respondents, which are the family caregivers with relatives with ASD.

Furthermore, the researchers utilized a qualitative research design to understand the lived experiences of the

participants further. Roy (2023) ^[5] cited in an article that Qualitative research is defined as a type of research methodology that focuses on exploring and understanding complex phenomena and the meanings attributed to them by individuals or groups. It is commonly used in social sciences, psychology, anthropology, and other fields where subjective experiences and interpretations are of interest. This design is concerned with capturing the richness and depth of human experiences, beliefs, attitudes, and behaviors. It aims to go beyond simple statistical analysis and uncover insights that quantitative research may not be able to capture. Hence, the researchers decided to apply qualitative research design due to the nature of the problem being addressed in the study, which is to provide in-depth data and prioritize its richness. Additionally, Dawadi (2020) ^[2] cited that Thematic Analysis involves systematically organizing and analyzing complex data sets to identify recurring themes that capture the narratives in the data. Through Thematic Analysis, this study aims to find key themes and sub-themes that summarize family caregivers' various experiences, difficulties, and coping techniques. Therefore, the researchers chose to apply a thematic analysis approach to capture themes and sub-themes that will emerge from the caregivers' responses. Patterns or the everyday shared experiences of the respondents that will appear in the study will be analyzed through a thematic analysis approach and will serve as vital data for the research.

B. Research Locale

The study will be located in Cabuyao, a component city in the landlocked province of Laguna. Cabuyao has a land area of 43.30 square kilometers or 16.72 square miles, constituting 2.25% of Laguna's total area. Its population, as determined by the 2020 Census, was 355,330. This represented 10.51% of the total population of Laguna province or 2.19% of the overall population of the CALABARZON region; population density is computed at 8,206 inhabitants per square kilometer or 21,252 inhabitants per square mile. The city was selected by the researchers due to the proximity of the researchers to the locale, ensuring safety and convenience. In addition, the research study is conducted inside the participant's household through face-to-face interviews.

C. Population and Sampling

This study's inclusion and exclusion criteria have been meticulously designed to ensure that the research findings are both relevant and reliable, addressing the specific needs and experiences of family caregivers of individuals with ASD.

For the study's inclusion criteria, participants must be family caregivers who have been providing active care for at least a year to a relative from ages 3–14 diagnosed with ASD. They must be at least 18 years old, reside in Cabuyao, Laguna, and live in the same household as the relative with ASD. The study exclusion criteria include caregivers who are not biologically related to the person with ASD and formal caregivers.

The careful selection of these inclusion and exclusion criteria ensures the collection of focused and relevant data that accurately reflect the experiences and challenges of family caregivers for individuals with ASD. The criteria are designed to enhance the validity of the findings by creating a homogenous participant group that shares everyday caregiving experiences without the confounding effects of unrelated health conditions. By adhering to these criteria, the study can provide valuable insights into the specific needs and support mechanisms required for family caregivers of individuals with ASD. The findings are expected to inform the development of targeted interventions and support

programs that can alleviate the burden on caregivers and improve the quality of care provided to individuals with ASD. The researchers employed two sampling methods: Purposive Sampling and Snowball Sampling. Purposive Sampling involves selecting participants based on specific criteria relevant to the study. Qualitative research often used this method to ensure that participants provided unique and valuable information. In this study, participants were carefully chosen based on criteria related to their experience with autism spectrum disorder.

This included individuals who had sought or were currently seeking medical assistance for conditions such as ASD. The aim was to capture a diverse range of perspectives on ASD within the population of Cabuyao. In contrast, Parker, C. *et al.* (2019) ^[4] noted that Snowball Sampling relied on referrals from initial contacts to identify additional participants who met the study criteria. This method helped access hard-to-reach populations and expanded the participant network. Initially, a few individuals who fit the research criteria were selected as key informants. These participants were then asked to refer others in their social networks who might also have had experiences relevant to the study, such as dealing with ASD.

Both purposive and snowball sampling methods were non-probability sampling methods, meaning that participants were intentionally selected rather than randomly chosen from the entire population. While this intentional selection could introduce bias, it was necessary to capture specific population characteristics or perspectives of interest in the study.

D. Research Participants

The study involved five family caregivers residing in Cabuyao, Laguna, who were actively providing care to relatives diagnosed with ASD, aged between 3 and 14 years old. To ensure diversity and depth in perspectives, participants were selected using purposive sampling, focusing on those with substantial caregiving experience. Eligible participants were 18 years old and above, resided in the same household as the individual with ASD, and served as the primary or significant caregiver. To uphold ethical research standards, pseudonyms were assigned to all participants to maintain confidentiality and anonymity.

E. Research Instrumentation

In this study, the researchers utilized semi-structured interviews, recorded conversations, and detailed note-taking as data collection methods. The respondents will be provided with a semi-structured interview. The questions focus on the lived experiences of family caregivers of persons with autism spectrum disorder. The researcher formulated the interview questions based on the research objective and theoretical framework to ensure congruence with the study at hand.

These methods aimed to deepen the exploration of participants' lived experiences, ensuring a more authentic understanding of the phenomena. Recording interviews served for accurate documentation and capturing the authenticity of participants' voices. Meticulous note-taking identified recurring themes, patterns, and insights, contributing to a comprehensive understanding of the Lived Experiences of family caregivers of Relatives with autism spectrum disorder. To ensure the instrument's validity and reliability, the researcher will have a consultation and request approval from the research adviser and three validators.

F. Data Gathering Procedure

At the initial part of the interview, the researchers secured permission from the subject advisor to oversee activities related to the research regarding the survey involving specific individuals qualified for the study's criteria. In addition, a letter of approval was submitted to the college dean of the researchers' department. A letter of consent was provided, outlining the nature of the research and their right to withdraw whenever they deemed it necessary. With these approvals secured, the researchers will gather data utilizing various resources like websites, books, and journals. Interviews were the primary method for collecting data, during which the researchers used recording devices, pens, and notebooks to record important information. To foster smooth conversation and improve data collection, introductory discussions were held to establish rapport with each participant, who was interviewed individually.

The researchers carefully analyzed constructive criticisms based on the data gathered in response to interview feedback. They also sought professional advice and referred to online articles, which played a significant role in enhancing their understanding and obtaining additional facts and information regarding themes that may emerge from family caregivers' lived experiences with relatives with Autism Spectrum Disorder

G. Ethical Considerations

Aside from obtaining informed consent, permission is requested from the respondents to record the interview. The interview will be conducted face-to-face to ensure a secure and comfortable environment for the respondents. The purpose and method of the study are thoroughly explained to the respondents, and only necessary information is collected in proportion to the study's purpose.

In compliance with the Data Privacy Act of 2012 (Republic Act No. 10173) of the Philippines, the respondents' information is kept strictly confidential, and research reports or publications do not reveal the respondents' identity. The researcher is the only one with access to the respondents' personal information and is only used within the study duration. Personal information or other documents (e.g., audio recordings) are destroyed when no longer required for the research.

Since data collection requires translators and validators, the researcher ensures that the identity of the respondents remains anonymous and that they only have access within a specified period. The Data Privacy Act mandates that respondents' data is protected against unauthorized access, and strict measures are taken to maintain data security and privacy.

It is also assured that no risk is directly linked to the respondents, and the data collected is treated with the utmost importance. Furthermore, the respondents will be informed that participation in the study is voluntary and that they can withdraw or refuse at any time without any personal consequences. The PNC-UC first approves the study to ensure the protection of research data and participants from harm that may result from breaches of confidentiality.

3. Results and Discussions

This chapter presents the findings of the study and explores their significance in relation to the research objectives. The data gathered from participants has been systematically analyzed to identify key themes, patterns, and insights that represent their experiences. Each result is carefully examined to uncover its deeper meaning and relevance. The discussion contextualizes these findings.

Table 1: Demographic Profile of the Participants

Barangay	Participant ID	Duration of Active caregiving for a relative with ASD	Relationship to a Relative with ASD
Mamatid	001	3 years	Auntie
Gulod	002	9 years	Mother
Mamatid	003	10 years	Mother
Baclaran	004	9 years	Mother
Gulod	005	14 years	Mother

Table 1 presents the demographic characteristics of the study's participants. All participants were family caregivers of individuals diagnosed with ASD and were residents of certain barangays in Cabuyao. The sample consisted of individuals with varying durations of caregiving, ranging from 2 to 12 years, indicating a broad spectrum of

caregiving experiences. The majority of participants were mothers, with others including a grandmother and an aunt, reflecting a familial caregiving structure commonly observed in Filipino households. This profile provides context to the participants' insights and lived experiences explored in the study.

Table 2: Annotated Exemplars on the Challenges Faced by Participants in their Caregiving Role.

Participants	Excerpts from Participants	Observation
Participants 1	"Ang pinakamahirap dun yung 'di mo maintindihan yung gusto niya. Kasi kadalasan, syempre 'di pa siya nagsasalita, di mo ma gets kung ano yung gusto ng bata"	Participant 1 expressed frustration and concern, highlighting the difficulty of understanding a nonverbal child's needs, which poses a significant challenge in caregiving.
Participant 4	"Nakakapagod, nakakaano talaga, pero hindi pwedeng sumuko... pwedeng mag pahinga, pwedeng kunwari syempre tantrums nya tapos mainit ang ulo mo."	Participant 4 conveyed a sense of exhaustion but also resilience, emphasizing the need for perseverance despite the challenges, such as managing tantrums and personal stress.
Participant 1	"Yun yung para sakin na pinakamahirap na ano ko araw araw kong naririnig yun sa mga bata na tatawagin siyang abnormal."	Participant 1 expressed emotional pain and frustration, highlighting the difficulty of hearing their child being labeled as "abnormal" by others, reflecting the impact of social stigma.

Table 2 presents the challenges encountered by participants in their caregiving roles. The data revealed three major concerns: difficulty in understanding the needs of nonverbal children, emotional burnout due to caregiving demands, and the emotional toll of social stigma. Participants described

daily struggles in interpreting their children's behaviors, managing intense emotional and physical fatigue, and coping with societal judgments. These challenges reflect the complex and multifaceted nature of caregiving for individuals with ASD.

Table 3: Annotated Exemplars on Instances When Participants' Personal Needs Were Overlooked While Caring for a Relative with ASD

Participants	Excerpts from Participants	Observation
Participants 1	"Yun nga sobrang pagod kasi, kahit sarili ko napabayaan ko na dahil inuna ko yung bata."	While speaking, Participant 1 showed signs of exhaustion and weariness, conveying the emotional and physical strain of caregiving while expressing the personal sacrifices made for the child's well-being.
Participant 2	"Kailangan namin i-sacrifice yung mga needs namin para sa kanya, lalo na't nagte-therapy siya, ayun, nagsa-sacrifice kami kasi malaki talaga ang (gastos). Isa-sacrifice namin yung mga needs namin para lang sa kaniya na nagte-therapy siya."	As they described the tough decisions their family faced, they likely thought about the many times personal expenses and desires were sacrificed to prioritize funding their child's therapy.
Participant 5	Participant 5: "Para sa'kin ang hindi ko nabigyan ng time sa sarili ko e yung makapagtrabaho ako."	Participant 5 spoke with a hint of regret, reflecting on how their caregiving responsibilities have left them with little time for personal pursuits, particularly their career, which they had to put on hold.

Table 3 presents the participants' accounts of situations where their personal needs were neglected due to caregiving responsibilities. Common themes included the physical and emotional exhaustion from prioritizing the child's needs, financial sacrifices made to afford therapy, and missed

opportunities for personal and professional development. Participants reported deprioritizing self-care, delaying career pursuits, and redirecting family resources to meet their child's therapy requirements. These findings highlight the personal trade-offs experienced by caregivers in fulfilling their roles.

Table 4: Annotated Exemplars on Participants' Perception of their Role as Caregivers for Relatives with ASD

Participants	Excerpts from Participants	Observation
Participant 1	<i>"Itinuring ko s'yang anak ko kasi ayoko rin mangyari [siya] sa iba na pinababayaan o 'di i-tinatrato nang maayos... kaya inilagaan ko siya nang husto"</i>	As Participant 1 spoke, she seemed emotional, perhaps reflecting on the vulnerability of the child.
Participants 2	<i>"As a mother, kailangan mo talaga siya alagaan nang mabuti. Kung ano yung kailangan niya, [kailangan i-provide] na mas maganda talaga kung galing sa magulang o mother... tutukan mo siya ng pag-aalaga kasi nga iba po siya sa ibang bata e"</i>	The Participant voice was filled with a strong sense of dedication and responsibility.
Participant 5	<i>"dapat mahaba pasensya mo kasi minsan may kakulitan sila. Lalo pag sila yung kahit sawayin mo, ayaw mag pasaway ah"</i>	As Participant 5 spoke, there was a sense of both frustration and understanding in her voice. She acknowledged the challenges of managing a child's behavior, especially when conventional methods of discipline seem ineffective.

Table 4 presents participants' views on their role as caregivers of individuals with ASD. Responses revealed a strong sense of responsibility, emotional investment, and the need for patience and understanding. Participants emphasized treating the child with care and dignity, actively providing for their needs, and exercising patience in managing behavioral challenges. These perceptions reflect a

deep commitment to individualized caregiving, driven by empathy, resilience, and a desire to support the child's overall well-being. Together, these insights underscore that caregivers play an essential role in creating a supportive environment that enables children with ASD to thrive, despite the emotional and practical difficulties they may face

Table 5: Annotated Exemplars on Practices and Strategies Used by Participants to Maintain Emotional Well-Being as Caregivers

Participants	Excerpts from Participants	Observation
Participant 2	<i>"Dasal, na magiging normal po siya. Na gabayan kami, panalangin na maging normal yung anak ko."</i>	As she spoke, there was a noticeable sincerity in her voice, suggesting that prayer plays a vital role in her emotional coping.
Participant 4	<i>"Dapat masaya... hindi mo iniisip, ay paano ba ito, paano ba ko kukuha nito..."</i>	There was a tone of reassurance in her words, suggesting that focusing on joy and letting go of worries

Table 5 outlines the practices employed by participants to maintain their emotional well-being while caring for individuals with ASD. Two key strategies emerged: reliance on faith and the cultivation of a positive mindset. Participants described prayer as a primary coping mechanism that offered

emotional strength and guidance. Others emphasized the importance of focusing on happiness and letting go of worries as a way to manage daily stress. These strategies illustrate the emotional resilience developed by caregivers in navigating the challenges of their role.

Table 6: Annotated Exemplars on Participants' Perception of Support Systems and Suggested Improvements for Their Effectiveness.

Participants	Excerpts from Participants	Observation
Participant 4	<i>"Siguro yung government lang natin ang inaano na wala syang ano, wala syang... Diba dapat pagka ganyan meron syang ano center yung walang bayad"</i>	As she spoke, there was a sense of frustration in her voice, perhaps stemming from the difficulty in accessing affordable or free resources.
Participant 5	<i>"Di kami nakakalapit sa mga ganun eh, kasi ang hirap din mag pila-pila, mahaba kasi mga pila, ang haba na ng pila ang dami pang requirements."</i>	While answering, disappointment and frustration were evident in Participant 5's expression.

Table 6 presents participants' views on the effectiveness of existing support systems for families caring for individuals with ASD. Caregivers expressed dissatisfaction with the lack of accessible and affordable services. They reported difficulties accessing government assistance due to long

queues, numerous requirements, and limited availability of free resources. These responses indicate that systemic barriers hinder caregivers from obtaining necessary support, contributing to a sense of frustration and unmet needs.

Table 7: Annotated Exemplars on the Types of Support or Resources Participants Believe Would Alleviate Challenges as Family Caregivers

Participants	Excerpts from Participants	Observation
Participant 2	<i>Yung sanang lahat ng mga parents meron sanang mga group at sana iparating yung mga [hinaing] nila, oo, yung experiences nila yung sa anak nila, ganun, magsha-share sila ng experiences, para may matutunan and supports."</i>	While answering, Participant 2 appeared thoughtful and hopeful, possibly reflecting on the importance of shared experiences among caregivers.
Participant 4	<i>"Tsaka sabi nila may allowance daw yan buwan buwan pero wala kami natatanggap, dapat nga may allowance, senior citizen, PWD, dapat may allowance kahit 500 pambili man lang nila ng diaper, gatas."</i>	Participant 4 seemed frustrated and disappointed, as they expressed concerns about the lack of support they believed should be provided.
Participant 5	<i>"Ay talagang malaking bagay yung magkaroon sila ng sa school ng ano Pediatrician, Developmental Pediatrician. Tsaka yung libreng ano OT (Occupational Therapy), speech therapy, malaking bagay yon meron lalo na kung malapit sayo."</i>	Participant 5 appeared hopeful and perhaps slightly relieved, as they spoke about the potential benefits of having the facility they want.

Table 7 presents the types of support and resources that participants believe would help ease the challenges of caregiving for individuals with ASD. Key suggestions included the establishment of caregiver support groups, provision of financial assistance, and improved access to specialized healthcare services. Participants emphasized the

need for emotional support through shared experiences, monthly allowances to ease financial strain, and proximity to developmental pediatricians and therapy services. These responses highlight caregivers' desire for both practical and emotional support systems that are accessible, affordable, and community-based.

Table 8: Annotated Exemplars on Participants' Motivations for Continuing to Provide care to Relatives with ASD

Participants	Excerpts from Participants	Observation
Participant 1	<i>"Gusto ko kasi siya gumaling... yun ang number one [priority] na gumaling siya"</i>	Participant 1 conveyed an overwhelming sense of hope and determination.
Participant 4	<i>"Goal ko lang yun bang lumake syang... mawala man kami yung lumake syang ano kaya nya yung sanli nya"</i>	Participant 4 conveyed a sense of hope, dedication, and love.

The responses in Table 8 highlight the deeply personal motivations that drive participants to continue providing care for their relatives with ASD. These narratives reveal the emotional core of caregiving: hope intertwined with a steadfast commitment to the child's well-being and

independence. The participants' words suggest that their motivations are not solely about immediate caregiving responsibilities but also about ensuring the child's ability to navigate life successfully in the future.

Table 9: Annotated Exemplars on the Most Rewarding Experiences in Participants' Caregiving Journey

Participants	Excerpts from Participants	Observation
Participant 1	<i>"Tuwang-tuwa na ko kasi nakikita ko yung paghihirap ko nagbunga... nagbunga lahat ng kabutihan at naging maayos yung [development ng] bata; nakakapag-aral na siya ngayon sa normal na school."</i>	Participant 1 reflects a deep sense of fulfillment and pride, as they celebrate the positive outcomes of their dedication and efforts.
Participant 4	<i>"Pag inutusan mo ng ganto nakakaano sya (comply) saakin natutuwa na ko don pati nag lalakad na kahit saan ko is (sya)... dalhin."</i>	The caregiver takes pride in the small yet meaningful milestones.

Table 9 presents the most fulfilling experiences shared by participants in their caregiving roles for individuals with ASD. Participants described feelings of pride and joy upon witnessing their child's developmental progress ranging from academic achievements, such as enrollment in a regular school, to everyday milestones like following instructions

and walking independently. These moments were viewed as meaningful indicators of growth and validation of their caregiving efforts, reinforcing their sense of purpose and perseverance.

Table 10: Annotated Exemplars on How Participants' Roles as Caregivers Have Contributed to Their Personal Growth and Development

Participants	Excerpts from Participants	Observation
Participant 1	<i>"...di ko masyadong nagawa sa mga anak ko yun e. Yung paglalambing na sobrang [pag-aalaga] kay claire, sa kaniya ko naibuhos."</i>	While answering, Participant 1 shows a bittersweet sense of emotional dedication and sacrifice.
Participant 4	<i>"...akala mo alam mo na yon pero iba padin pala pag naranasan mo."</i>	Participant 4's shows a sense of realization and humility.

Table 10 presents participants' reflections on how caregiving for individuals with ASD contributed to their personal growth and development. Participants described gaining emotional depth, patience, and greater self-awareness. One caregiver noted a deeper expression of care in their current role compared to past parenting experiences, while another highlighted how direct caregiving offered unexpected lessons and realizations. These narratives underscore how caregiving shapes personal development through emotional sacrifice, patience, and the acquisition of invaluable life lessons. The caregiving experience often necessitates self-reflection, adaptability, and resilience, leading to significant personal transformation.

4. Discussions

The findings of this study reveal the complex, emotional, and deeply personal nature of caregiving for individuals with ASD. Participants' narratives consistently point to an enduring sense of love, resilience, and hope that drives their caregiving efforts, despite the many sacrifices and challenges they face. Caregivers experience emotional burnout, neglect of personal needs, and financial strain, yet they persist out of a profound sense of duty and affection.

Notably, the study highlights both the internal coping strategies and external support systems or lack thereof that shape the caregiving experience. Faith and optimism were central emotional resources, while systemic inadequacies such as inaccessible government services added to the burden. These insights echo previous studies that emphasize the need for holistic, accessible, and culturally relevant support systems for caregivers.

Caregivers also expressed strong desires for structured support such as peer groups, financial aid, and nearby developmental services. Their insights affirm the importance of recognizing caregivers not merely as providers of support but as individuals who also require care, guidance, and empowerment.

This study contributes valuable knowledge to the existing literature on autism caregiving, particularly in the Philippine context. It affirms the need for policy-level changes to provide sustainable assistance to families and to reduce the emotional and economic strain on caregivers. More importantly, it underscores the humanity and strength of caregivers whose stories deserve visibility and support.

Ultimately, these findings emphasize that caregiving, while

challenging, can also be a transformative journey shaping not only the development of the child but also the growth and resilience of the caregiver.

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