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To Examine the Effectiveness of Available Support Services for Families of Children with Autism: A Case of the Caleb Centre for Children with Autism in Kabwe District of Zambia

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Abstract

This study examined the effectiveness of support services for families of children with Autism Spectrum Disorder (ASD) provided by the Caleb Centre in Kabwe, Zambia. Using a mixed-methods approach, the study assessed the impact of the Centre's services on parents' emotional well-being, children's social skills, and family dynamics. The study used structured questionnaires, administered to 40 parents and caregivers, 71% being females with some level of tertiary education randomly selected from local communities of Kabwe District. The Study explored perceptions on social support. Level of involvement, social networking and parents attitudes towards available support services rendered by the Caleb Center for Autism. and found that the Centre's services had a positive impact on families and the children through the implemented child Centred developmental based curriculum evidenced by the reported milestones achieved. Parents demonstrated a positive attitude towards the services, significantly 96.8% affirmed their belief and confidence in services, with 87.1% affirming the critical role of counselling and awareness interventions in their lives and families as the Centre continues to serve more than 192 children, indicating a high demand for ASD services. The study concludes that local support interventions are making a positive impact, but demand exceeds supply. Recommendations include continued support through collaborations and partnerships, linking parents to government services, strengthened advocacy and resource mobilization, formalization of evidence-based interventions, and empowerment of families as primary care systems. The study highlights the importance of support services for families affected by ASD and the need for increased resources and infrastructure to meet the growing demand.

Keywords: Children, Autism, Caleb Centre, Emotional and Mental, Parents and Therapeutic

1. Introduction

1.1 Background

Autism Spectrum Disorders (ASD) are neurodevelopmental conditions that affect social interaction, communication, and behavior. Each individual with autism experiences unique strengths, symptoms, and challenges. ASD impacts a person's ability to function in daily life, and individuals often experience chronic medical conditions and disabilities. Parents of children with ASD report high levels of stress, anxiety, and depression due to the challenges of caregiving and accessing services (Ingersoll & Hambrick, 2011; Silva & Schalock, 2012) [2, 3]. A study in Zambia confirmed that parents of children with autism experience unhappiness, worry, and stress due to childcare-related duties and lack of knowledge on managing problem behavior (Chalwe *et al*., 2022) [1]. Caring for a child with ASD can be challenging, and parents require support services to cope with the demands of caregiving. Organizations such as the Caleb Centre for Children living with Autism in Kabwe provide essential support services for parents.

1.2 Statement of the Problem

Despite the growing demand for autism-related services in Zambia, as evidenced by increasing number of cases according to

Wonani and Muzata (2019) [4], estimating that there were indications of about 40,000 cases in Zambia the actual impact of the support programs provided by Caleb Centre on family well-being has not been comprehensively assessed. The lack of research on the outcomes of these support services hampers the ability to refine existing practices, allocate resources effectively, and ensure families are receiving the necessary support to improve their quality of life and that of their loved ones born with ASD.

1.3 General Objective

To examine the effectiveness of available support services for families of Children with Autism, provided by the Caleb Centre for Children with Autism in Kabwe district of Zambia.

1.3.1 Specific objectives

1. To assess the effects of Caleb Centre's support services on the emotional and mental well-being of parents with children on the autism spectrum.
2. To examine the effectiveness of Caleb Centre's educational and therapeutic interventions in improving the social skills of children with autism.
3. To evaluate the effects of Caleb Centre's family support programs on the overall family dynamics and quality of life.

1.4 Research Questions

1. What are the support services provided by the Caleb Centre to parents of children living with autism?
2. What social skills has the Caleb Centre for autism passed to the children living with autism?
3. How has the social support provided by Caleb Centre for autism benefited the wellbeing of the families of parents of children living with autism?

1.5 Theoretical Framework

The study is based on Urie Bronfenbrenner's ecological systems theory, which identifies five environmental systems (macro, exo, meso, micro, and chrono) that influence individual development. This theory provides a framework for understanding relationships between individuals and their contexts. The International Classification of Functioning, Disability and Health (ICF) model, established by WHO, complements this theory. ICF provides a standard language and framework for describing health and disability, viewing disability as an outcome of interactions between health conditions and contextual factors. This framework acknowledges that every human being can experience disability and emphasizes the importance of environmental and personal factors in shaping experiences of disability (UNCRPD, 2006; WHO, 2002).

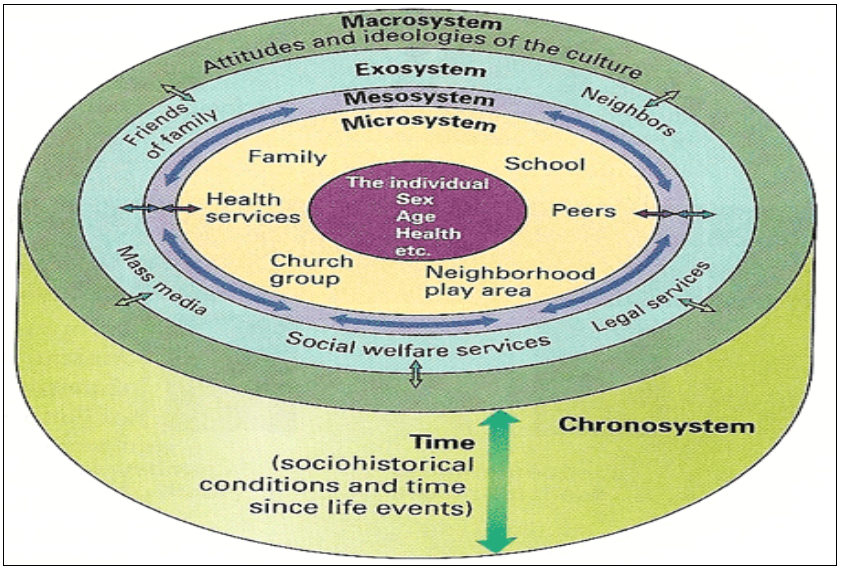


Fig 1: Ecological Perspective or developmental Theory

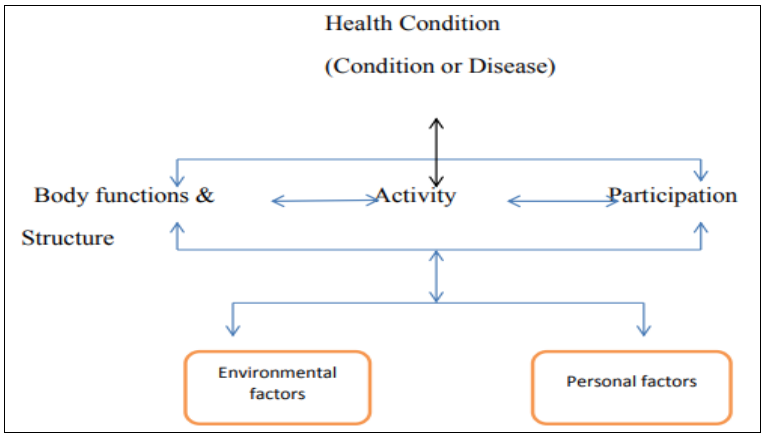


Fig 2: International Classification of Functioning Model

1.6 Significance of the Study

Zambia faces growing demands for autism-related services, with approximately 40,000 cases (Wonani & Muzata, 2019) [4]. There's a need for evidence-based, home-grown support interventions to positively impact family well-being. The study aims to examine support services, lived experiences, and hopes of parents of children with autism, informing future programming and policy development.

2. Literature Review

2.1 Autism support services for coping and mental wellness of parents and Carers

Autism spectrum disorder has been proven to be so complex and dynamic and can be so challenging to not only children but also parents and guardians due to its demanding nature, hence the need for readily available support services. There are no known causes, of autism spectrum disorder it is a lifelong condition with wide variety of treatments and management options according to Donoline (2019) [7]. They are continually presented with a myriad of barriers in their lives such as abuse, violence, deprivation, segregation and denial to access to amenities and a decent living. Exclusion further puts them in perpetual poverty which further predisposes them to disease and other life threatening factors. Autism spectrum disorder has also been reported to have adverse effects on parents and guardians of children with autism spectrum disorder not only during diagnosis stage but throughout the entire life of a child.

Past global studies such as by Liu & To (2021) [9] confirmed that parents of children with Autism spectrum were confronted with stressful parenting events without accessible resources and adequate support or assistance.

Holloway and Mpofu 2017, collated global evidence involving twenty-three studies on the benefits of interventions that aim at supporting the wellbeing of parents and other carers of Children living with autism. The analysis revealed that interventions that tend to meet mental health needs of parents and guardians result in improved attitude and relationships, as well as renewed commitment to care, countering the Caregiver burn out and stress as emphasized. The key findings further suggested to have in place practitioner guidelines to support the mental health and Wellbeing of parent carers, which should include addressing the parent's self-perspective and skills for real time problem solving. It was emphasized that when practitioners address the state of the parents' mental health and psychological wellbeing, their quality of life and that of the whole family will be enhanced.

Similarly, another global systematic review and meta-analysis by Li *et al* 2024 on parent focused interventions for improving mental health of parents and their children with ASD highlighted that parent focused interventions can significantly improve parent's mental wellbeing and their children's behavior/ emotional problems post intervention. It was revealed that acceptance or mindfulness based interventions integrated with parent skills can better address these parents' care giving and mental health needs and other psychological needs. Li *et al* recommended a 5-8 weeks' duration group or individual based parent focused intervention.

Another study in South Africa by Lentoor, Mduli *et al* 2024 sought to explore the care giving burden experiences of mothers raising children with ASD and to gain insight into demands mothers experience and endeavored to discover efficacious interventions that could promote the psychosocial and health needs of mothers of children with ASD. Results revealed that raising children with ASD can be strenuous, leading to stress and poor psychological wellbeing of the care givers. Mothers interviewed presented various challenges ranging from high levels of emotional stress to more serious psychological problems associated with caring for their children with ASD.

Mduli *et al* recommended that mental health programs must focus on tailoring psychological interventions that specifically aim to improve the mother's ability to manage stressful emotions and enhance their parenting skills, such interventions as those that further provide mothers with accurate knowledge to challenge stigmatized views about ASD, such as Community based interventions in form of support groups.

This study further recommended that when faced with limited or scarce resources, low resource settings can have Community based psychological interventions delivered by non –specialists. This was found to be a viable and feasible strategy to scale support for families with children ASD.

In Zambia a study by Wonani and Muzata 2022 highlighted the gap in research in the area of Autism, hence the non-availability of data on cases and further reported that most parents had no knowledge. The study showed that parents suffered frustration, stigmatization and psychological stress in the upbringing of their children with autism. In this study it was also reported of parents accessing community support through encouragements, that made them to accept their children's condition resulting in easier life experiences with less stress than before. It appears community and mental health support is crucial in helping parents adopt to having a child with Autism.

Another study by Wallace *et al* 2023 study on parent reported barriers and facilitators for support services. The results suggested that parents experienced several barriers, particularly related to service pathways. Facilitators were also experienced, predominantly related to providers. Financial resourcing predicted the number of parent-reported barriers. Both lower level of family financial resourcing and having a non-binary child predicted parents' rating of the extent of barriers. Child age and level of speech were predictors for reports of experiencing a higher number of facilitators, with parents of younger children or of non-speaking autistic children reporting a greater number of facilitators.

According to Wallace *et al*, parents also reported factors that facilitate their access and participation in autism support services (referred to herein as facilitators), including easily accessible information and education on autism and/or support services, trusting relationships with providers, assistance with navigating service systems, peer support, and/or transparency of support service cost yet others relied on religion for emotional strength, according Wonani and Muzata 2022 recognising that religion has a role in helping parents cope with the difficulties they face in life, and this study, therefore, called on religious leaders and organizations to play a role in helping parents adapt to the disability and manage the stress caused by having a child with ASD.

2.2 Educational and social skills training for children with Autism

According to World Health Organization, Autism spectrum

disorders are a diverse group of conditions characterized by some degree of difficulty with social interaction and communication. Other characteristics include difficulty or unique reactions to sensations. International literature autism has been described as a complex neurological disorder that presents families with complex situations dealing with strange behaviors, and a need for regular medical check-ups, and need for daily close monitoring and care that demands parents' close involvement according to Martin and Sari 2023. It is also known that children living with ASD present with learning challenges as compared to regular children, hence need for specialized and individual centred learning approaches.

Nejati *et al* 2024 in a meta-analysis study on transferability of social cognition training in individuals with ASD, indicated that age, intervention level, setting and implements have a significant impact on the outcomes of transferability. Here age is an influential factor, it was clearly demonstrated that younger participants showed better outcomes than older participants.

Therefore, children with ASD can benefit from social training when engaged as early as possible, through group and individual centred approaches.

Evidence based practice criteria can be used by professionals and practitioners to support children with ASD, training can take place in a school, clinic or other community based settings. Parents and family members are also encouraged to be part of the social skills training efforts as this can be invaluable in supporting the learning, generalization and maintenance of social skills by helping the child to practice the skills in the home and reinforcing social skills they see their child using with family members and peers.

Another global study by Cerezeula *et al* 2018 revealed that group sessions done on a one or two weekly interval focusing on personal interaction, interpersonal relationship, social communication, response and social motivation was beneficial and impactful for children with ASD, it was further noted that involvement of family as a fundamental aspect when carrying out any type of social skills intervention.

Autism work on any front is challenged by system overwhelmed by unmet needs such as funding issues, inadequate services for family and children with ASD and challenges of locating support and much worse lack of space and appropriate education services for children with ASD especially in mainstream schools, while it is now common to find support and linkages from locally supported Centers and community initiatives as confirmed by Hassan *et al* 2024.

There is also evidence that Meta based programs can improve social skills for African children with ASD with real life situations to improve sociality and reduce emotional and behavioral problems. According to Lee *et al*l 2023 such interventions can be delivered at home with a possible extension to target groups that have difficulty in interacting with peers and affected individuals and families.

The concept of ASD cannot be conclusively dealt with without the involving of family and parents who most of the time play the role of care givers to children with ASD. Park *et al* 2023 in a study in Africa suggested that empowering parents has far reaching benefits as agents and results in strengthened sense of parenting, self- efficacy and may reinforce efforts to advocate.

While from Ethiopia it was learnt that Centers can utilize both scientific and nonscientific methods to train and support children in social skills and education in different possible ways, Ayele *et al* 2017.

Yet a study in Zambia by Kabili *et al* pointed out a significant knowledge gap, through a survey targeting 488 University student. It was revealed that 79% students had never head of ASD before the survey, suggesting a knowledge gap among different groups populations and families, whilst Chalwe and Mandyata 2021 identified and reported some severe effects of problematic behavior of children with ASD. These included anger, confusion, avoidance, distress and projection.

To counter and alleviate the effects it was suggested enhanced awareness campaigns that would lead to improved service provision for children with ASD.

Early intervention is ideal and desirable as highlighted by Pierucci *et al* in a local study for parents and showed positive results of the first parent mediated intervention successfully conducted. The study also revealed positive outcomes for children and parents as changed by the parent mediated intervention in local lower income settings, how language skills, pretend play skills significantly improved from pre to post intervention.

2.3 Social Support Services for parents/ family and Children with ASD

Literature and studies have revealed that autism spectrum has a strong influence on the family dynamics, they face various types of challenges, those that start early and lasts a life time. It has been reported that problems occur across a wide social context, marital system, parental system, sibling's system and the extended family system according to Begum *et al* (2019) [5]. This therefore requires a multidimensional array of support and interventions that transcends diverse disciplines such as medical doctors, therapists, physio or speech, teachers, Counsellors and social workers.

Social support was described as a vital resource for families with children with disabilities. Social support was further linked to positive coping strategies and reduced parenting stress, burden, and depression among families of children with autism spectrum disorders.

Literature and studies further reveal that some parents to children living with autism lacked knowledge on how to manage their autistic children and ended up being overly stressed, Kossakowski and Pitula reported that parents became distressed and this resulted in impacted family welfare and function in multiple ways due to nurturing of children with autism.

Requiring time and resources to meet all this. Parents are clearly faced with a myriad of challenges as they care for the child living with ASD, resulting in a toll on their emotional and mental wellbeing.

According to Wonani and Muzata 2019 [4] survey in Zambia, parents suffer stress in managing autistic child behavior mostly because they lack knowledge of the condition. Parents understanding of the autistic condition of their children is influenced by factors such as social support, severity of autism symptoms, financial difficult and parents' perception and understanding of autism. Parents suffer stress when parenting their children with autism to some other extent because of anxiety and worries about their child's future.

Autism spectrum disorders have come to be known as complex in nature by the varied and ever changing presentations across different developmental stages of a child. It is also true that strategies that can work for one family may not work for another as children of different or same spectrum exhibit different and unique behaviours and challenges.

However, parents are not only faced with challenges of behaviour, care and financial and logistics and stress related. Significantly highlighted in a study from South Africa by Karrit *et al* 2024 on how parents of children with ASD faced and managed their lives during COVID 19 pandemic, parents reported that locating services during such disruptive times was difficult and challenging, as many providers had closed without notice and affected the access to services, including financial and other routines necessities. This alone resulted in more stress for parents and anguish others had to resort to alcohol consumption as a coping mechanism.

In Zambia Chalwe and Manyata's study of 2021, it was highlighted that a family raising children with ASD with other family members needs support and assistance in dealing with their emotions. In this study, most parents received support from family members. Most help came from the grandparents of the child with autism, i.e., the child's mother.

The study further recommended that it was essential to introduce parents to other parents living with similar children so that they can appreciate and exchange knowledge, skills, and understanding of the trials they encounter when children with ASD are raised. Support groups may include professional groups that may train children in social skills, communication, therapeutic activities, and daily living skills. Parents need to be introduced to communities of hope that provide counselling and guidance on where to access financial help and other appropriate resources such as the Kabwe based Caleb Centre for autism.

Furthermore, it was revealed that some parents relied on religion for emotional strength, noting that Religion has a role in helping parents cope with the difficulties they face in life, and this study, therefore, called on religious leaders and organizations to play a role in helping parents adapt to the disability and manage the stress caused by having a child with ASD.

Li *et al* (2024) [8] recommended that family focused interventions can be of great benefit in attaining positive health outcomes of children living with autism spectrum disorder, While Russo *et al* (2015) [13] notes that even when parents find quality information to address the child and family needs in one developmental phase, they often must start the search over again because the types of information that are required vary over the life span of the child, from information about diagnosis, to materials about their child's rights, to sources of funding and support. It is clear that families of children with autism spectrum are in dire need of support in understanding and meeting care needs of their children including behaviour challenges, each developmental stage requiring a totally unique set of information and skills as also reported in an international study by McIntyre and Brown (2019) [10].

In Zambia all intervention programs on disability are coordinated by Ministry of Community Development and Social Services. There also responsible for enforcing laws and policies aimed at protecting and guiding implementation of disabilities services.

It is worth noting that in Zambia we have formal state driven services as well as formal private supported services such as those provided by Caleb Centre for Autism. State supported services covers support in situations of shock or acute stress as well as immediate assistance needed be it at household or individual levels. The type of assistance includes, psychosocial and counselling, family tracing, repatriation of stranded persons, assistance in form of food, clothing, beddings, baby formula, and household utensils provided to fire victims, ex-prisoners, vulnerable children, older persons, persons with disabilities, COMDEV 2010.

It is also important that parents are educated about the early signs of ASD so they can recognize these aspects as soon as possible if the signs appear in their child's behaviour. When parents are educated early enough, they accept the condition and work towards improving the quality of life for their children with autism. Chalwe and Mandyata 2021 study findings showed that, when parents with autistic children accept the illness of their children and obtain necessary information for quality child care, they will be able to organize their interests and life schedules as well as the interests and plans of their ASD children and other family members.

2.4 Identified Gaps

There is confirmed lack of understanding of autism in our communities, sadly it has even been revealed through studies that even among the elite and well educated, there is seemingly more people unware of the occurrence of autism spectrum disorders and its challenges as evidenced by the much prevalent stigma associated with autism. This further affects the health and care systems as reported by Hassan *et al* (2024).

Non availability of support services especially in formal sector was also reported in studies not only in overseas but also in Africa due to lack or minimal funding issues, resulting in a lack of specialist help for medicals, therapists and specially trained educators in the school system.

It has also been observed that the complexity of autism poses challenges not just of adequacy of services but appropriateness, as each child or patient has unique needs and the family as a first line of support needs to continually seek support and information to guide them in the management of their child living with autism.

It is also clear that there is little documented information as regards to autism spectrum disorders in Zambia and Africa and coincidentally there are no documented local best practices in the Country around feasible and applicable support services. More work needs to be done.

Zambia is a state party and a member of UN and WHO and has ratified the UN Convention on the Rights of Persons with Disability and the important Convention on the Rights of Children. The state has further enacted several policies to guide and safeguard the rights of children and individuals living with disabilities, such as the Disabilities Act, Act number 6, of 2012, the 2015 National policy on Disability, Mental Health act number 6 of 2019.

The Country has an active Association for Autism that is registered by individuals working together in the disability fraternity.

There is enough literature that reveals that raising children with disability especially autism requires a vigorous and comprehensive level of parenting as the children need and

demand more time, resources and management skills most of which is never in easy reach especially in developing Countries like Zambia.

It is therefore argued that meaningful parental involvement, and support is crucial for the holistic development of children with autism, parents form an integral part of lifelong learning, education and planning of intervention according to Ransburg *et al*.

This is further supported by Einstein's 2019, model of parental involvement that fosters and promotes mutual learning at home and school, and can enhance community partnerships and support to help parents learn strategies on how best to handle their children's melt down at home. Most parents would also want to come to terms with their children's condition and have their curiosity satisfied and have acceptance to help clear the many beliefs and misconceptions of causes and possible diagnosis of autism spectrum disorder.

It is therefore imperative that parents are supported with information, knowledge and skills through training and Counselling on how to care for their children living with autism spectrum disorder by mainstream government institutions as well as local organizations such as Caleb Centre for autism in Kabwe of Central Zambia.

It is also a desired right by every child living with autism according to the Children's Act 0f 2012 to be provided protection and support by state and as an enshrined government obligation to meet their needs as a member state and signatory to the CRPD and CRC. And where and when resources lack or are scarce, significantly strong relationships count the most, but cost the least, for they are a good resource for parents in distress to help them navigate through their difficulty times according to Stark 2019.

3. Research Methodology

3.1 Research Design

The study was be conducted using the Case study research design, qualitative in nature and were involved in depth investigations and will endeavour to examine both qualitative and quantitative data that will be collected to ascertain the effectiveness of support services rendered to parents of children living with autism by the Caleb Centre. Through this methodology the participants will be able to share their real world experiences and benefit of the support rendered by the Caleb Centre, as posited by Yin (2014) [17].

The researcher will further strive to avoid bias by interviewing parents to children living with autism, care givers and other stakeholders. These triangulated findings will be subjected to critical analysis to avoid generalisation. The researcher hopes to use the findings of the study to inform necessary social work theory and practice as well as interventions at Caleb Center and the general practice of social work in Zambia.

3.2 Target Population

The study interviewed parents of children living with autism that are current of past beneficiaries of services provided by the Caleb Center of Autism in Kabwe. For triangulation purposes the other key stakeholders such as officers from the local authority and Ministry of Community Developments and Social Services and line Ministries.

3.3 Sampling Design

The respondents were selected through the use of purposive sampling method. This will be appropriate considering that the target population is a minority group; they shall be traced and identified with the help of Caleb Center Management and the department of Social welfare.

3.4 Sample Size Determination

The researcher interviewed 30 Care providers and parents identified through the Caleb Center, and another 10 include stakeholders from line Ministries and service providers from the Center, for triangulation purposes.

3.5 Data Collection Methods

This researcher intends to use Questionnaires and in-depth interviews. For purposes of triangulation, a focus group will be conducted, participants being drawn from parents to Children living with Autism receiving support from the key informants including stakeholders and service providers.

3.6 Data Analysis

Data was entered using Microsoft excel for coding purposes and presentation. Qualitative data was analysed based on themes, while STAT 16 was used to analyse statistical data.

3.7 Triangulation

While data was collected through one on one questionnaires, and group interviews, it was supplemented by data collected from activity and annual reports generated by the Caleb Centre Management.

3.8 Limitations

The unique operations of Caleb Centre may limit generalisation of findings however, best practices revealed through findings may still be used to inform recommendations for the Centre and for possible replication and use by the disability fraternity in the Country.

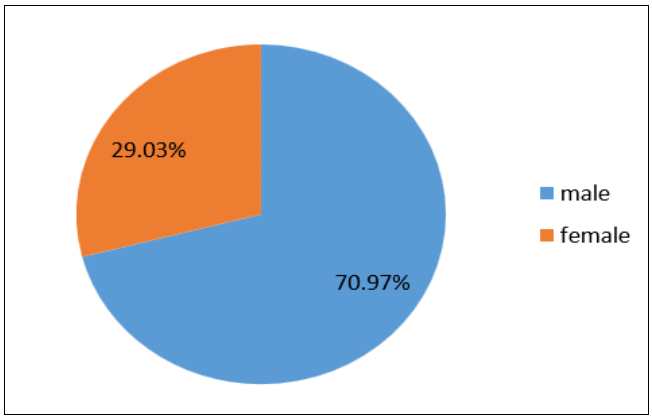
3.9 Ethical Considerations

Ethically, the researcher introduced himself and made known the prime aim and objective of the research to the research participants as well as the benefits that will accrue from the research. The respondents will not be forced to take part in the research as they have the freedom and right to participate or not to in any activities including research. The researcher will ethically respect the decisions of every individual whether they want to participate or not. Participation will be based on voluntarism and openness.

Consent was sought from all before participation in the study. Respondents were assured that the findings of the study are purely for academic purposes and not anything else. Above all express clearance from the school research department was granted, considering the nature of the target population.

4. Data Presentation

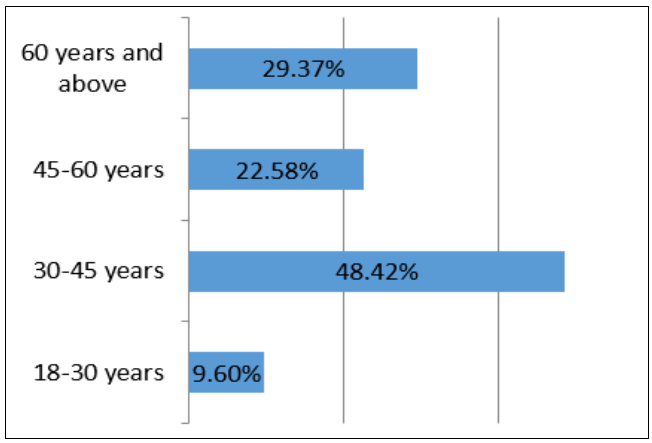
4.1 Background information of respondent



Source: Field Data 2025.

Fig 1: Gender

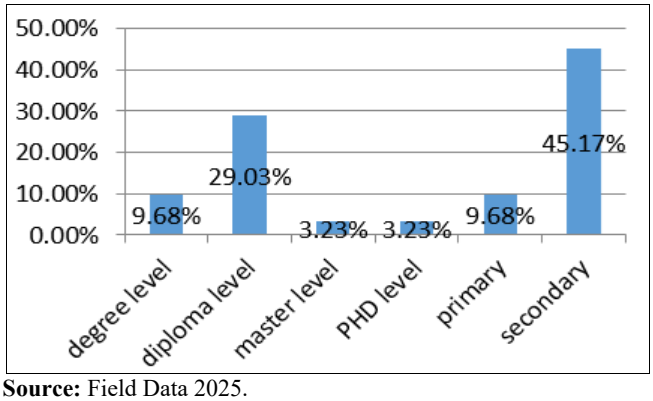
The figure presents a distribution of respondents by gender, revealing a notable disparity. Out of a total of 31 respondents, 22 (approximately 71%) are female, while 9 (about 29%) are male.



Source: Field Data 2025.

Fig 2: Age Range

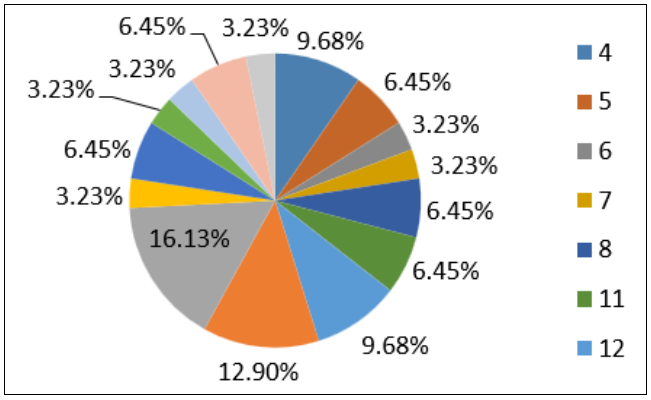
Figure above shows the distribution of respondents across different age ranges. Combining the frequencies for each age group, we get: 3 respondents (9.68%) are between 18-30 years, 15 respondents (48.39%) fall within the 30-45 years range, 7 respondents (22.58%) are between 45-60 years, and 6 respondents (19.35%) are 60 years or older.



Source: Field Data 2025.

Fig 3: Education Level

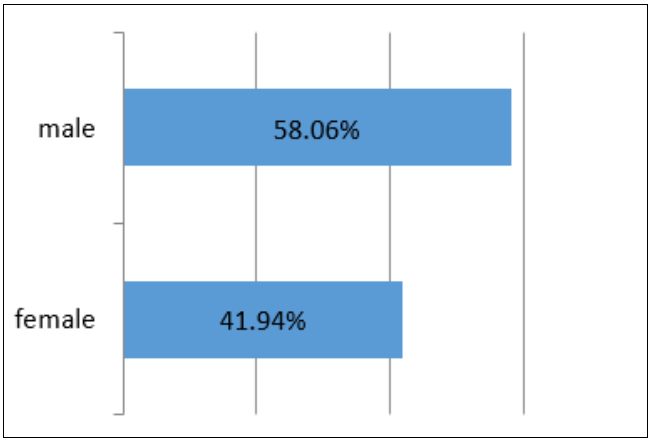
Figure above shows the educational level of respondents. The tabulation of education levels among the respondents shows that the majority had attained Secondary Level education, which accounted for 45.17% of the sample. The second largest group was those with a Diploma qualification at 29.03%, Smaller proportions were observed among those with Degree Level and Primary education, each representing 9.68% of the sample. Only one respondent each reported attaining Master's Level, PhD Level, each contributing 3.23% to the total.



Source: Field Data 2025

Fig 4: Child Status Age

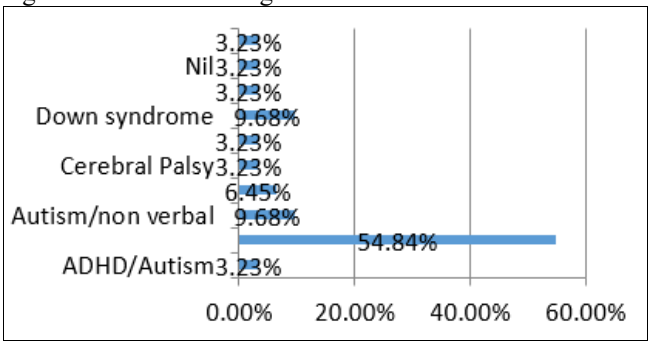
Figure above shows the age distribution of Children of respondents.



Source: Field Data 2025.

Fig 5: Child's Gender

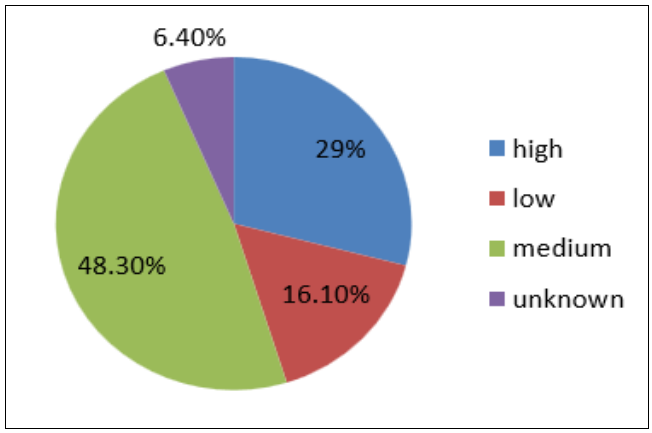
Figure above shows the gender of children.



Source: Field Data 2025

Fig 6: Diagnosis

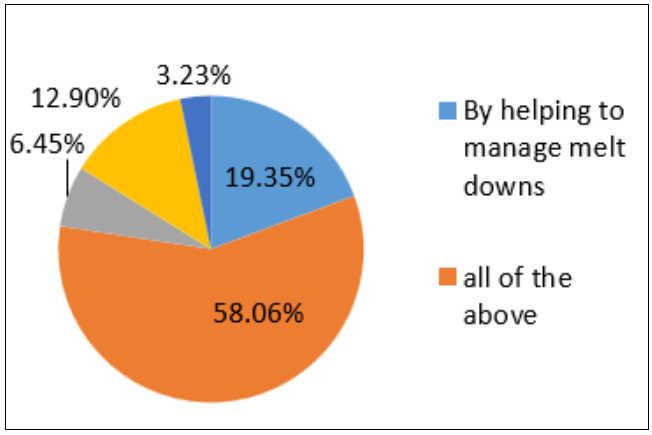
The figure above shows data on the diagnosis of children.



Source: Field Data 2025.

Fig 7: Level of spe

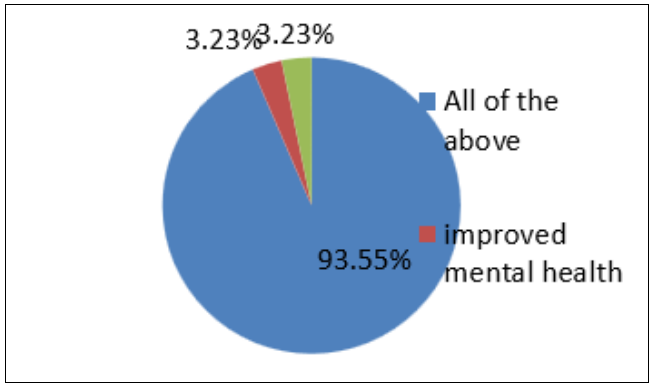
Figure above shows the level of spectrum for children out of 31 children, 15 (48.39%) are classified as medium, 9 (29.03%) as high, 5 (16.13%) as low, and 2 (6.45%).



Source: Field Data 2025.

Fig 8: How social support helps parents

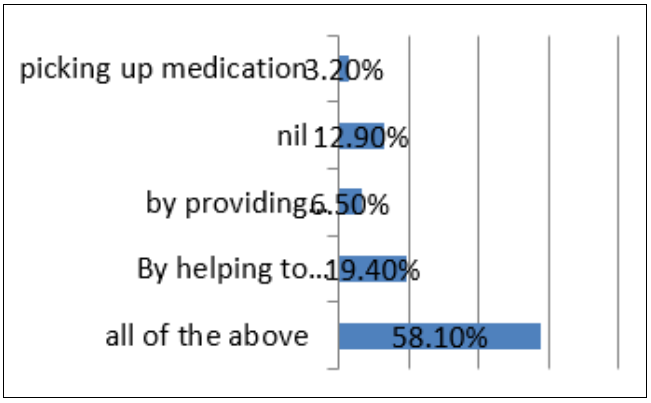
Figure above shows how social support helps parents Out of 31 respondents, 18 (58.06%) selected "all of the above," indicating that social support contributes to multiple aspects of caregiving, including managing meltdowns, reminders to take medication, and picking up medication. Additionally, 6 respondents (19.35%) noted that social support helps specifically by managing meltdowns, 2 (6.45%) mentioned receiving reminders to take medication, and 1 (3.23%) reported assistance with picking up medication. A small proportion, 4 respondents (12.90%), indicated "nil,".



Source: Field Data 2025.

Fig 7: Benefits of Support

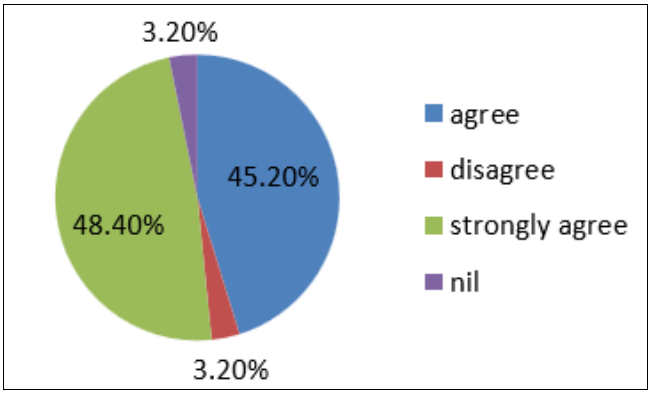
The figure above shows data on the benefits of support.



Source: Field Data 2025

Fig 9: How social support Helps parents

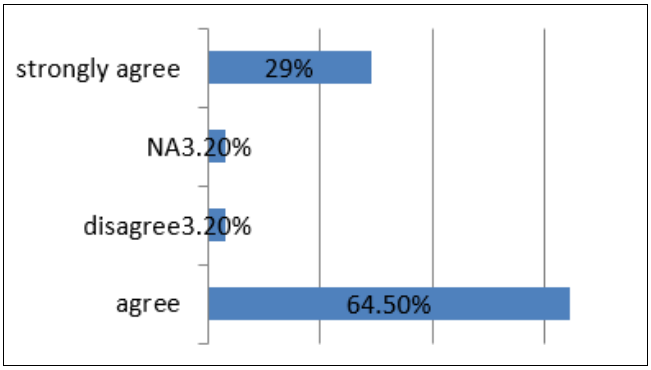
The figure above show findings on how social support helps parents.



Source: Field Data 2025

Fig 10: Counselling and awareness can help parents to better manage children's behavior and wellbeing

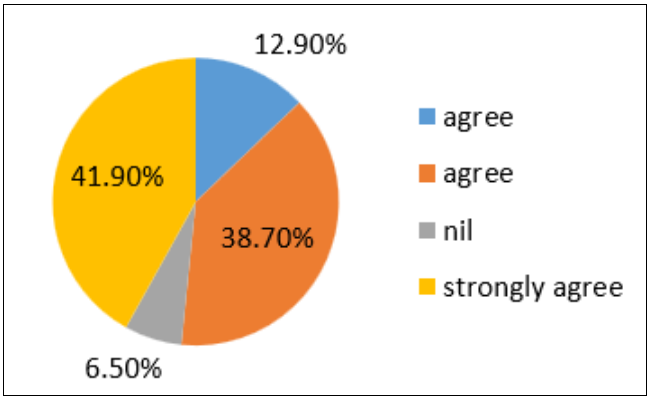
The figure above shows findings on whether counselling and awareness can help parents better manage children's behavior and wellbeing.



Source: Field Data 2025

Fig 17: Counselling and awareness is an effective way to improve medication adherence among children

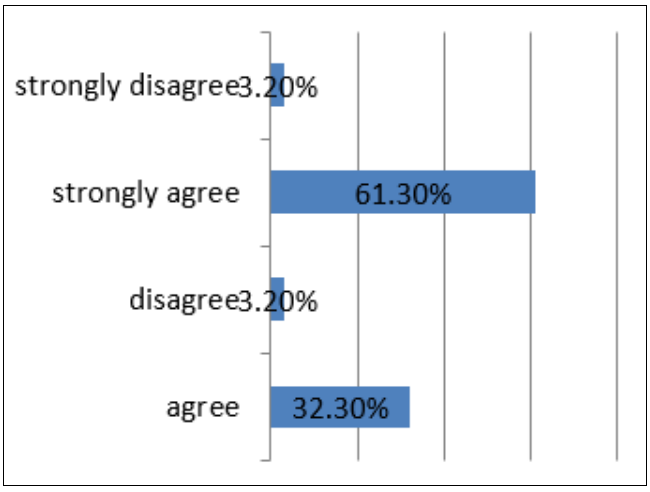
The figure above shows results on Counselling benefits.



Source: Field Data 2025

Fig 12: Counselling and autism awareness can help parents to develop coping skills to manage autism related challenges

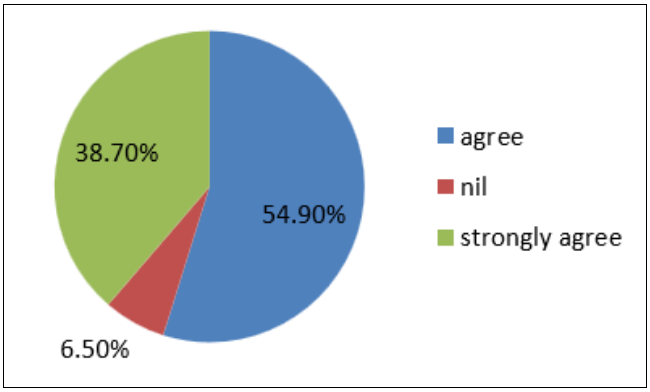
The figure above shows findings on importance of Counselling and Autism awareness.



Source: Field Data 2025

Fig 14: Counselling and autism awareness can help parents to better understand child's condition and treatment options

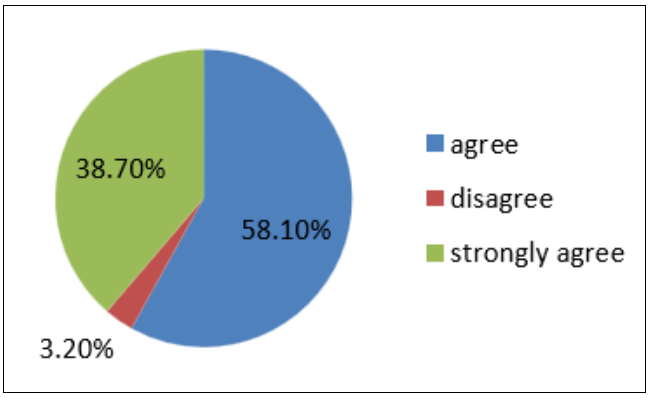
The above figure shows responses to the statement "Counselling and autism awareness can help parents to better understand their child's condition and treatment options".



Source: Field Data 2025

Fig 11: Counselling and awareness can help improve overall quality of life

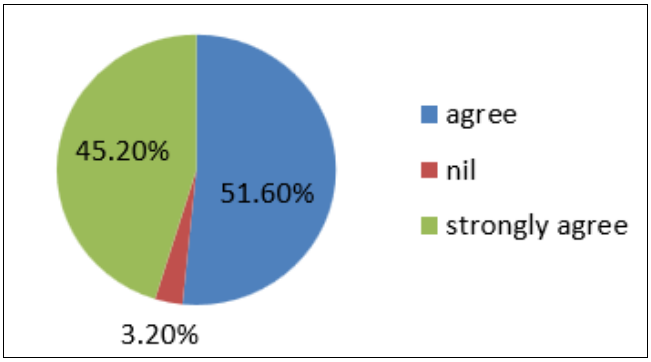
The figure above shows responses to the statement "Counselling and awareness can help improve overall quality of life".



Source: Field Data 2025

Fig 13: Parents believe that Caleb Centre support services helps them to better manage children's condition

The responses to the statement "Parents believe that Caleb Centre support services helps them to better manage children's condition".



Source: Field Data 2025

Fig 17: Parents think Caleb Centre support services helps to reduce stigma and discrimination

The responses to the statement "Parents think Caleb Centre support services helps to reduce stigma and discrimination"

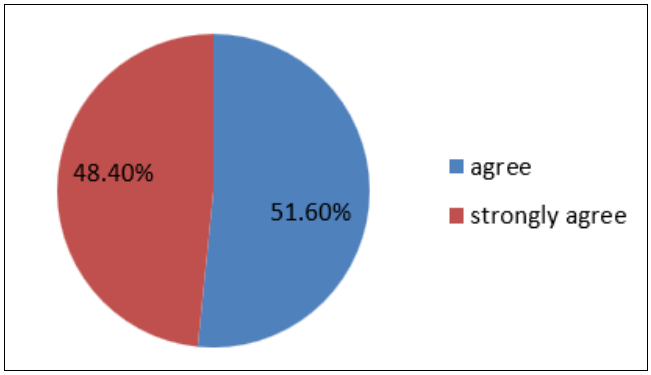


Fig 15: Parents believe that Caleb center support services helps them to access treatment and care for children

The responses to the statement "Parents believe that Caleb Center support services helps them to access treatment and care for children".

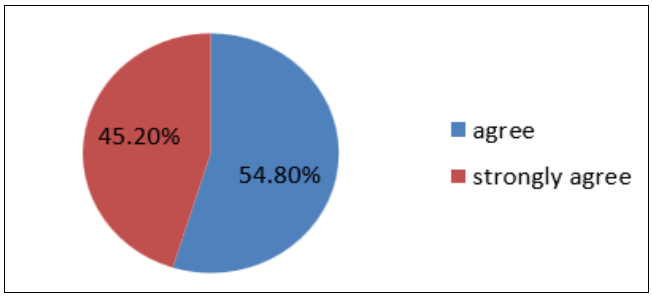


Fig 16: Parents think that Caleb Centre Support services helps to improve overall quality of life

The responses to the statement "Parents think that Caleb Centre support services helps to improve overall quality of life".

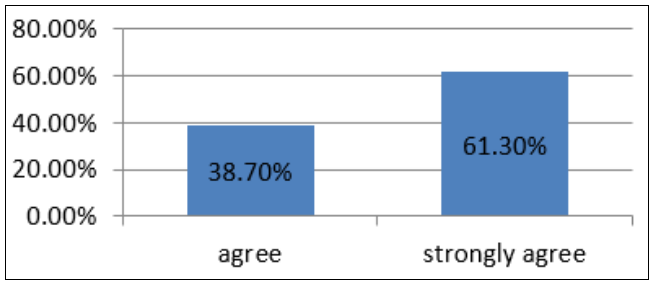
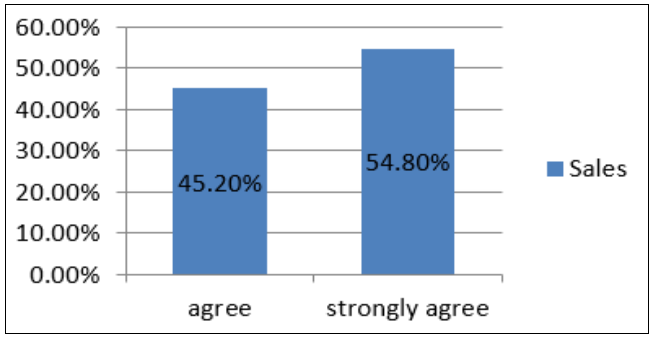


Fig 18: Parents feel that the Caleb Center support services they receive are adequate

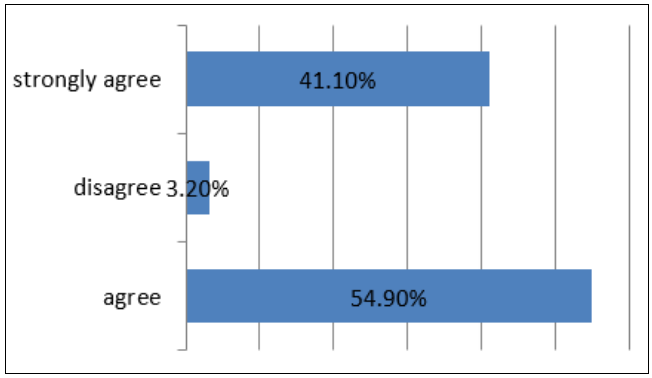
The responses to the statement "Parents feel that the Caleb Centre support.



Source: Field Data 2025

Fig 19: Parents are grateful for the Caleb Center Support Services

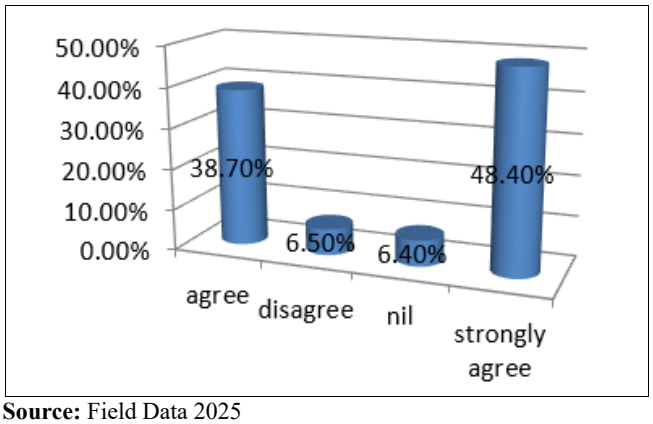
The figure above shows responses to the statement "Parents are grateful for the Caleb Centre Support Services".



Source: Field Data 2025

Fig 21: Parents think that Caleb Centre support helps to improve their mental and emotional wellbeing

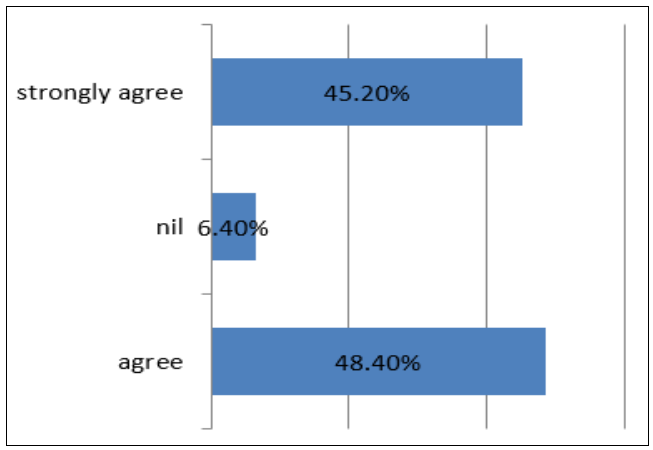
The responses to the statement "Parents think that Caleb Centre support helps to improve their mental and emotional wellbeing".



Source: Field Data 2025

Fig 23: Parents feel that Caleb Center support helps to improve their social support network

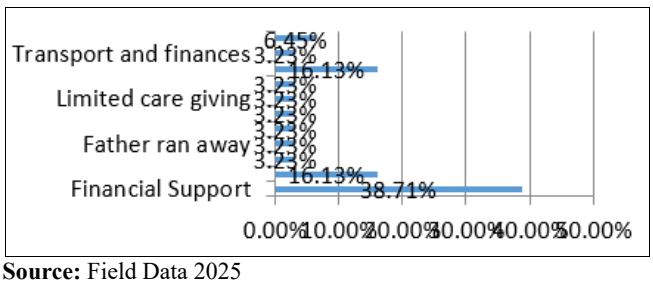
The responses to the statement "Parents feel that Caleb Centre support helps to improve their social support network".



Source: Field Data 2025

Fig 22: Parents are satisfied with the level of involvement

The responses to the statement "Parents are satisfied with the level of involvement fig 30 of challenges.



Source: Field Data 2025

The figure above shows findings on challenges.
The tabulated data on challenges faced by parents.

4.2 Discussion of the Findings

4.2.1 Discussions of findings on background information

Background data collected on respondents by gender, revealed a notable disparity. Out of a total of 31 respondents, 22 (approximately 71%) are female, while 9

(about 29%) are male. This indicates that females make up a significant majority of the sample, out numbering males by a ratio of roughly 2.4 to 1. This gender imbalance may have implications for the study's findings, particularly if there are differences in perspectives, experiences, or responses between males and females. Overall, the table provides insight into the demographic characteristics of the sample, highlighting the predominance of female respondents. Just as it has been widely known that females participate more in health engagements.

Respondents also came from across different age range, Combining the frequencies for each age group, we get: 3 respondents (9.68%) are between 18-30 years, 15 respondents (48.39%) fall within the 30-45 years range, 7 respondents (22.58%) are between 45-60 years, and 6 respondents (19.35%) are 60 years or older. This suggests that the majority of respondents (48.39%) are between 30-45 years old, indicating a potentially active working-age demographic. The age distribution provides insight into the demographic characteristics of the sample, which can be useful for understanding the perspectives and experiences of parenting and care giving children with ASD.

4.3 Background of Children

The tabulated data on the age distribution of children shows a wide range, from 4 to 29 years, with most children concentrated in the early teens. The highest frequency is observed at age 14, with 5 children (16.13%), followed by age 13 with 4 children (12.90%), and ages 4 and 12 each with 3 children (9.68%). Other age groups have smaller representations, with one or two children in each category, indicating a diverse age range among the children served. This distribution suggests that Caleb Centre supports children across multiple developmental stages, from early childhood to late adolescence and even adulthood in rare cases (e.g., age 29). The concentration in the early teenage years (ages 13–14) may reflect a peak in service utilization, possibly due to increasing care needs or the transition to more structured educational and social support systems. Such as the demanded for young people with ASD skills being offered by Caleb Center such as gardening, poultry and tailoring and needle work. The wide age range also highlights the need for age-appropriate interventions and tailored support programs to address the varying developmental, educational, and social requirements of children at different stages, as provided for through the evidence based curriculum being implemented at the Center.

The tabulated data on the gender of children shows that out of 31 children, 18 (58.06%) are male and 13 (41.94%) are female. This indicates a higher representation of male children compared to female children within the sample. This gender distribution may reflect trends observed in certain developmental or behavioral conditions, where males are more frequently diagnosed or identified for support services. It also underscores the importance of ensuring that programs at Caleb Centre are inclusive and responsive to the needs of both male and female children. The data provides a basis for designing gender-sensitive interventions and monitoring whether support services meet the specific needs of all children effectively. Which the Center strictly adheres to and have a guided code of conduct for teachers and all support staff that is signed after thorough orientation.

The tabulated data on the diagnosis of children shows that the majority of children at Caleb Centre are diagnosed with autism in its various forms. Out of 31 children, 16 (51.61%) are diagnosed with autism, while 2 (6.45%) have both autism and non-verbal characteristics, and 1 (3.23%) is listed as non-verbal. Additional combinations such as ID/Autism and CP/Autism are reported in smaller frequencies, each accounting for 3.23% to 6.45% of cases. Other diagnoses include Down syndrome (3 children, 9.68%), cerebral palsy (1 child, 3.23%), and ADHD/Autism (1 child, 3.23%). One child had no diagnosis recorded (3.23%). This distribution highlights that autism, in its various forms, is the predominant condition among children receiving support at Caleb Centre. The presence of comorbid conditions such as intellectual disability and cerebral palsy indicates a need for specialized, multi-faceted care approaches. The data underscores the importance of individualized interventions tailored to specific diagnoses, as well as comprehensive support services that address both primary and secondary developmental or cognitive challenges. It also reflects the need for continued diagnostic assessments to ensure accurate identification and appropriate service provision.

On diagnosis, and specialized services to aid diagnostics are scarce and some parents have not had their children formally diagnosed, as reported by Hassan *et al* (2024), however Caleb Center carries out some detailed assessment of Children at enrollment to fully plan and identify need and child focused interventions to be applied at school and home with aid of parents.

Children are catered according to the level of care need and attention, mostly guided by their level of spectrum of their ASD. Findings on the level of spectrum among children shows that the majority of children fall within the medium spectrum category. Out of 31 children, 15 (48.39%) are classified as medium, 9 (29.03%) as high, 5 (16.13%) as low, and 2 (6.45%) have an unknown spectrum levels. This distribution indicates that nearly half of the children require a moderate level of support and intervention, while a significant portion (29.03%) has high support needs, highlighting the demand for intensive care and specialized programs. The smaller proportion in the low spectrum category suggests that some children may require minimal support, whereas the unknown cases point to gaps in assessment or documentation. Overall, the data emphasizes the need for individualized care plans tailored to each child's spectrum level to ensure effective intervention and optimal developmental outcomes. This is also evidenced by the individualized education curriculum and support plan tailored to suit each child and that is enrolled at Caleb Center with their strong belief that every child is able to achieve milestones as long as they are supported with appropriate skills based on their developmental level, complimented by home based care and support, as posited by the Epstein (2019) model of parenting.

4.4 Autism support services for coping and mental wellness of parents and Carers

Data on how social support helps parents shows that the majority perceive social support as providing comprehensive benefits. Out of 31 respondents, 18 (58.06%) selected "all of the above," indicating that social support contributes to multiple aspects of caregiving, including managing meltdowns, reminders to take medication, and picking up medication. Additionally, 6 respondents (19.35%) noted that social support helps specifically by

managing meltdowns, 2 (6.45%) mentioned receiving reminders to take medication, and 1 (3.23%) reported assistance with picking up medication. A small proportion, 4 respondents (12.90%), indicated "nil," suggesting they did not perceive social support as helpful in these areas. This data highlights the significant role of social support in assisting parents with the practical and emotional demands of caring for children with special needs. The high selection of "all of the above" reflects the multifaceted impact of social networks, peer support, and community assistance in improving caregiving effectiveness and reducing parental stress. The small proportion indicating no benefit suggests that some parents may not be fully integrated into support systems, pointing to an area for improving outreach and engagement. Overall, the findings underscore the value of social support in enhancing parental capacity and wellbeing.

The study did endeavor to explore the benefits parents get through social support from Caleb Centre, and it was significantly demonstrated through the findings that the vast majority of respondents recognize multiple advantages of support services. Out of 31 participants, 29 (93.55%) selected "all of the above," indicating that support contributes simultaneously to various outcomes, such as improved mental health, increased knowledge on autism, and overall caregiving effectiveness. Only 1 respondent (3.23%) singled out improved mental health, and 1 (3.23%) highlighted increased knowledge on autism individually. This indicates that parents overwhelmingly perceive support services as multifaceted, providing both practical and emotional benefits resulting in mental wellness. The high selection of "all of the above" underscores the integrated impact of support services in enhancing parental capacity, knowledge, and wellbeing. The very small number of respondents focusing on a single benefit may reflect individual experiences or emphasis on a particular aspect of support, but the overall pattern strongly validates the comprehensive value of evidence based support programs offered by Caleb Centre.

Results on examples of peer support programs for parents reveals varying levels of understanding and perception among respondents. A notable 48.4% (n=15) correctly identified a support group led by a trained facilitator as an example of a peer support program. This reflects a sound awareness among nearly half of the participants, aligning with existing literature which emphasizes that peer support is most effective when facilitated by individuals with shared lived experiences, offering emotional, informational, and practical guidance within a group setting. This high response rate underscores the recognition of peer-led initiatives as the most authentic form of social support for parents navigating similar challenges.

The results on the potential drawbacks of solely relying on social support for parents highlight diverse perceptions among respondents. The majority, 51.6% (n=16), selected “all of the above”, suggesting that over half of the participants recognize the multi-dimensional risks associated with depending exclusively on social support. This response reflects an awareness that while social support is beneficial, it cannot comprehensively address parents’ needs in areas such as healthcare access, emotional independence, or stigma reduction.

The varied perceptions are consistent and aligns with ecological systems or perspectives, by Bronfenbrenner which posits that parent care givers require multi-layered interventions spanning medical, psychological, and community-based services to achieve holistic well-being. Academically, these findings emphasize the necessity of integrated intervention frameworks that combine community-based peer networks with professional and structural support systems.

The responses to the statement "Parents think that Caleb Centre support helps to improve their mental and emotional wellbeing" indicate that the majority of participants perceive the Center’s services as beneficial to their psychological health. Out of 31 respondents, 8 (25.8%) strongly agreed, 5 (16.1%) strongly agreed (likely a reporting duplication), 15 (48.4%) agreed, and 2 (6.5%) agreed, giving a combined total of approximately 96.8% expressing some level of agreement. Only 1 respondent (3.2%) disagreed. This suggests that Caleb Centre’s support services, which may include counselling, guidance, and community support, positively impact parents’ mental and emotional wellbeing by reducing stress, providing reassurance, and offering strategies for coping with the challenges of caring for children with special needs. The high level of agreement demonstrates the Center’s role in fostering emotional resilience and psychological stability among parents. The small percentage of disagreement may reflect individual differences in experiences or unmet expectations, highlighting the need to continue and potentially enhance support services to ensure all parents benefit fully. The study also revealed the high level of attitude and positivity and regard parents held towards the Caleb Center. The responses to the statement "Parents are satisfied with the level of involvement they have in the development and implementation of Caleb Centre support programs" indicate that the majority of participants are positively satisfied. Out of 31 respondents, 14 (45.2%) strongly agreed and 15 (48.4%) agreed, showing that 93.6% of participants feel satisfied with their involvement. A small number of respondents either did not respond (1, 3.2%) or selected "nil" (1, 3.2%), indicating minimal uncertainty or non-participation. This suggests that Caleb Centre actively engages parents in program development and implementation, giving them a sense of ownership and inclusion in decisions that affect the support they receive. Such involvement likely enhances program relevance, effectiveness, and parental satisfaction, as it allows parents to share insights and feedback based on their lived experiences. The high levels of agreement highlight the Center’s success in fostering participatory approaches and ensuring that programs are responsive to the needs of families, while the small number of non-responses indicates an area where engagement could be strengthened further. Practitioners understand that positive regard by carer givers and parents can influence positive health outcomes for the child with ASD and the whole family, Epstein 2019.

4.5 Discussions on the findings of the Education and therapeutic interventions for social skills training for children

Caleb Center for Children with Autism is a non-profit making Organisation that offers rehabilitation and educational support to children and with autism and their parents, the Center is located in Kabwe District of Zambia. Caleb Center believes that all children regardless of ability can learn when education is structured, individualized and delivered with respect to their developmental, sensory,

communication and emotional needs. They implement a curriculum that is evidence based, functional, inclusive, child centred and development based or strength focused and Contextualised. According to the curriculum being implemented Caleb Centre has about five different categories or profiles of learners including early learners, these are normally nonverbal or those with minimally verbal, developing attention and play. The second profile are the emerging communicators beginning to use words, signs, gaining independence, then there are the structured learners who focus on functional academics and basic social interaction, then the transitional learners these focus on pre vocational community awareness and self-help. Lastly they have the independent life skills learners focusing on vocational training such as tailoring, gardening, fostering independence and inclusion readiness. To support school learning Caleb Center teachers implement a supplementary home learning approach that enables guardians and parents as carers supporting children with autism by enforcing positive interventions such as communication and activity integration and behaviour monitoring. Carers are also supported through tailored discussions with the Center social Worker and teachers based on the daily behaviour records of each child generated by teachers, this also includes milestones achieved such as toileting, dressing and personal hygiene. Parents have access to a lager network of parents, as peers, teachers and other stakeholders.

4.6 Discussions on the effectiveness of Support programs for family

The discussion highlights key findings from the study on the effectiveness of support services for families of children with Autism Spectrum Disorder (ASD) provided by the Caleb Centre in Kabwe, Zambia. The study reveals that the majority of children at the Centre are diagnosed with autism in its various forms, with 51.61% of children having a diagnosis of autism. The study also shows that nearly half of the children (48.39%) require a moderate level of support and intervention, while 29.03% have high support needs, making it imperative to access support for full family functioning as suggested by previous studies conducted locally as well as globally.

The study also explores the perceptions of social support among parents of children with autism. The tabulated data on how social support helps parents shows that the majority perceive social support as providing comprehensive benefits. Out of 31 respondents, 18 (58.06%) selected "all of the above," indicating that social support contributes to multiple aspects of caregiving, including managing meltdowns, reminders to take medication, and picking up medication. Additionally, 6 respondents (19.35%) noted that social support helps specifically by managing meltdowns, 2 (6.45%) mentioned receiving reminders to take medication, and 1 (3.23%) reported assistance with picking up medication. A small proportion, 4 respondents (12.90%), indicated "nil," suggesting they did not perceive social support as helpful in these areas. This data highlights the significant role of social support in assisting parents with the practical and emotional demands of caring for children with special needs. The high selection of "all of the above" reflects the multifaceted impact of social networks, peer support, and community assistance in improving caregiving effectiveness and reducing parental stress consistent with Chalwe and Manyata 2021 *et al* findings on parents and ASD stress related. The small proportion indicating no benefit suggests that some parents may not be fully integrated into support systems, pointing to an area for improving outreach and engagement. Overall, the findings underscore the value of social support in enhancing parental capacity and wellbeing widely championed by practitioners and most studies reviewed.

The findings on whether counselling and awareness can help parents better manage children's behavior and wellbeing show overwhelmingly positive perceptions among respondents. The majority, 48.4% (n=15), selected "strongly agree", while an additional 38.7% (n=12) chose "agree." Combined, this indicates that 87.1% of respondents affirmed the critical role of counselling and awareness programs. This strong consensus demonstrates that parents value structured psychoeducational interventions as key tools for strengthening parenting skills, enhancing coping mechanisms, and promoting children's holistic wellbeing. Such responses are consistent with empirical evidence in family psychology, which shows that counselling empowers parents with practical strategies for managing behavioral challenges while awareness programs reduce stigma and improve social acceptance.

A smaller proportion, 6.5% (n=2), indicated "agree" in lowercase, which is functionally the same as "Agree," suggesting a data entry inconsistency rather than a divergent perception. When combined, these responses further consolidate the strong agreement trend. Conversely, a minimal number of respondents expressed reservations. Only 3.2% (n=1) disagreed, suggesting that very few parents doubt the effectiveness of counselling and awareness in managing children's needs. Another 3.2% (n=1) selected "nill", which appears to be either a coding error or a non-response. These outliers represent marginal skepticism but do not substantially alter the overwhelmingly positive pattern. The cumulative percentage reaching 100% by "strongly agree" highlights a clear upward progression of endorsement, with the vast majority clustering at the highest end of the agreement scale. Academically, this reinforces the notion that interventions grounded in counselling and awareness are perceived as evidence-based, socially acceptable, and impactful in addressing the emotional and behavioral dimensions of parenting.

In summary, the results strongly suggest that parents view counselling and awareness not just as supplementary interventions but as integral strategies for improving both their children's behavior and overall wellbeing. This finding justifies continued investment in counselling services, parental education workshops, and awareness campaigns as part of a holistic support system for families.

The responses to the statement "Parents feel that the Caleb Centre support services they receive are adequate" indicate a strong positive perception among participants. Out of 31 respondents, 19 (61.3%) strongly agreed and 12 (38.7%) agreed, meaning that all participants perceive the services provided by the Center as adequate. There were no neutral or negative responses recorded. This demonstrates that Caleb Center effectively meets the needs and expectations of the parents it serves. The high level of agreement suggests that the support services ranging from counselling, awareness programs, guidance on treatment, and access to care are sufficient to address the challenges parents face in managing their children's conditions. The findings highlight the Centers efficiency in delivering comprehensive support

and justify the continuation and potential expansion of its programs to maintain and enhance service quality for a larger number of families.

This underscores the need for families to work alongside the school teachers to compliment efforts of individualized learning provided at school and home setting.

The Study also explored possibilities of networking among parents. The responses to the statement "Parents feel that Caleb Centre support helps to improve their social support network" shows that most participants perceive the Centre's services as beneficial in enhancing social connections. Out of 31 respondents, 15 (48.4%) strongly agreed and 12 (38.7%) agreed, making a combined total of 61.1% expressing clear agreement. A small number of respondents either disagreed (2, 6.5%), selected "nil" (1, 3.2%), or left the response blank (1, 3.2%), indicating limited or no perceived impact for a minority. This indicates that Caleb Centre plays a significant role in helping parents build and strengthen social support networks through community engagement, peer interactions, and awareness programs. These networks can provide emotional support, shared experiences, and practical advice, which are crucial for coping with the challenges of raising children with special needs. While the majority report positive effects, the small proportion of disagreement or uncertainty highlights the need for the Center to ensure that all parents are equally supported in accessing and benefiting from social connections. Overall, the data underscores the Centre's contribution to fostering a supportive community for families. Some parents further highlighted how that they have grown their social networks by finding and getting to know and meet other parents with like experiences and situations. Some parents also shared how that they had been linked to other community services through the Center such as Social welfare and Community development service providers.

4.7 Discussion findings on Challenges faced by parent of children with ASD

The study also highlights the significant challenges faced by parents, including financial constraints (38.71%), transport-related issues (25.8%), and the need for diapers (16.13%). These findings underscore the need for a comprehensive approach to supporting families of children with ASD, one that addresses not only their emotional and psychological needs but also their practical and material needs, finances seemed a big need for respondents.

The study also highlights the importance of counselling and awareness programs for parents of children with autism. Most significantly locally a majority of respondents (87.1%) agreed that counselling and awareness can help parents better manage children's behaviour and wellbeing. The findings suggest that parents value structured psychoeducational interventions as key tools for strengthening parenting skills, enhancing coping mechanisms, and promoting children's holistic wellbeing confirming the findings of previous studies conducted such as Wonani and Muzata 2022 study. The study's findings have implications for the development of support services for families of children with autism in Zambia. The study highlights the need for increased resources and infrastructure to meet the growing demand for ASD services. The study also emphasizes the importance of formalizing evidence-based interventions and empowering families as primary care systems.

The discussion highlights the complexities of supporting parents of children with Autism Spectrum Disorder (ASD) and the potential drawbacks of solely relying on social support. The findings suggest that over half of the participants (51.6%) recognize the multi-dimensional risks associated with depending exclusively on social support, including dependence on others, increased stigma, and lack of access to medical treatment. This awareness is consistent with ecological systems theory, which emphasizes the need for multi-layered interventions to achieve holistic well-being.

The study also reveals that parents value counselling and autism awareness as essential tools for improving their understanding of their child's condition and treatment options. The vast majority of respondents (93.6%) hold a favourable view of the benefits of counselling and awareness, with 45.2% strongly agreeing that it can help parents better understand their child's condition. Similarly, 83.9% of respondents recognize the beneficial role of Counselling as an intervention to support family functioning.

The responses to the statement "Counselling and awareness can help improve overall quality of life" reflect a strong positive perception among participants regarding the impact of counselling and awareness programs. Out of 31 respondents, 12 individuals (38.7%) strongly agreed, while 14 respondents (45.2%) agreed, showing that a substantial majority (83.9%) recognize the beneficial role of counselling and awareness in enhancing life quality. Additionally, 3 participants (9.7%) also agreed, while only 2 respondents (6.5%) indicated "Nil," which may suggest uncertainty or lack of experience with such interventions. This trend suggests that counselling and awareness initiatives are perceived not only as informative but also as transformative, contributing to emotional, social, and practical improvements in the lives of individuals and families. By educating parents and caregivers about coping strategies, treatment options, and support networks, such programs can alleviate stress, improve decision-making, and foster a more supportive home environment. The high proportion of agreement justifies the integration of counselling and awareness campaigns into broader health and social support frameworks, highlighting their importance in promoting holistic well-being. The small percentage of "Nil" responses indicates that while the majority experience clear benefits, there may be gaps in exposure or accessibility, reinforcing the need to ensure that these services reach all targeted participants effectively.

5. Conclusion

The Study explored perceptions on social support. Level of involvement, social networking and parent's attitudes towards available support services rendered by the Caleb Center for Autism and found that the Centre's services had a positive impact on families and the children through the implemented child Centred developmental based curriculum evidenced by the reported milestones achieved. Parents have demonstrated a positive attitude towards support services received from Caleb Centre, this indicates high level of benefit not only for them, their children and families. Parents have also demonstrated a positive attitude towards the services, with 96.8% significantly affirming their belief and confidence in services, while 87.1% affirmed the critical

role of counselling and awareness interventions in their lives and families as the Centre continues to serve more than 192 children, indicating a high demand for ASD services. Parents collaboration and enrollment of their children at Caleb Center, reaching more than 190 Children is another testament of the faith and trust parents have in the services. It can as well be an indication of the many children affected by ASD in Kabwe and the Country as a whole, local support interventions being implemented are without doubt impacting the lives of parents, children and families. Caleb Center for Autism has demonstrated best practices and evidence based impact on families and children with Autism, and can be supported as a Centre of excellence in Autism related issues. Demand for ASD services remains high and considerably in short supply as evidenced by few service Organizations including those offering assessments and the much needed diagnostic aid in the District.

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