

# THE RELATIONSHIP OF SEVERITY LEVEL OF AUTISM AND PARENT'S UNCONDITIONAL LOVE ON CHILDREN WITH AUTISM MODERATED BY RELIGIOSITY AND SOCIAL SUPPORT

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## Abstract

Children with autism have difficulties in social interaction, lack of communication, and repetitive behavior. Those conditions make parents come to grips with several drawbacks in taking care of their autistic children. The purpose of this study was to determine the relationship between the severity level of autism and the unconditional love of parents, moderated by religiosity and social support. This study was using a quantitative approach with structural equation model (SEM) analysis. Participants in this study were 200 parents of children with Autism Spectrum Disorder (ASD) aged 2-17 years old and were selected by the non-probability sampling technique. The measurements applied in this study were unconditional love scale, taken from Porter Parent Acceptance scale, which consists of four items ( $\alpha = .802$ ; AVE = .628), social support scale, which consists of three items ( $\alpha = .703$ ; AVE = .628), Brief Multidimensional Measure of Religiousness/Spirituality, which consists of ten items ( $\alpha = .952$ ; AVE = .699), and Childhood Autism Rating Scale, which consists of four items ( $\alpha = .756$ ; AVE = .574). The result indicated that the unconditional love of parents was significantly affected by severity level of autism,  $b = -.162$ ;  $t(196) = 2.849$ ,  $p = .005$ ; religiosity,  $b = .534$ ;  $t(196) = 7.101$ ,  $p = .000$ ; and social support,  $b = .157$ ;  $t(196) = 2.426$ ,  $p = .016$ . Religiosity was proven to be essential in moderating the relationship of severity level of autism and unconditional love,  $b = .249$ ;  $t(196) = 3.262$ ,  $p = .001$ ; while social support was not,  $b = -.020$ ;  $t(196) = .293$ ,  $p = .770$ . Religiosity could help maintain the unconditional love of parents for their autistic children, while social support was not enough to buffer stress caused by them. Thus, parents of children with autism are urged to increase their level of religiosity.

**Keywords:** parent's unconditional love; religiosity; social support; severity level of autism; autism

## INTRODUCTION

Autism Spectrum Disorder (ASD) is a neurodevelopmental condition (disorder) that affects a person's cognition and behavior (Haputhanthri et al., 2019). ASD is a developmental disorder in various areas, namely communication and language, social interaction, as well as repetitive and stereotypical behavior patterns, which appear in the early years of development (American Psychiatric Association [APA], 2013; World Health Organization [WHO], 2019). The prevalence of children with Autism each year has increased in several countries, including Indonesia (Center of Disease Control [CDC], 2020). In 2019, it was estimated that 1 in 160 children would have an ASD (WHO, 2019) and in 2020, it was also projected to soar to about 68.75% (WHO, 2021). In Indonesia, the number of children with Autism climbed to

about 500 cases annually (Kementerian Pemberdayaan Perempuan dan Perlindungan Anak [Kemenpppa], 2018).

The presence of an autistic child in the household leads to a variety of parental reactions, such as shock, confusion, anger, depression, and pessimism regarding the child's life in the future (Girli, 2018). Research conducted by Jiu and Rungreangkulkij (2019) showed that an autistic child in the family could bring about stress on the main caregivers, financial problems, and changes in marital relationships. Concerning this, another study revealed that mothers of children with autism experienced stress (Jose et al., 2021). Parents of children with autism experience more difficult parenting situations and they feel

more stress than those with down syndrome and non-disabled children (Cuzzocrea et al., 2016; Amireh, 2019). As a result, families with autistic children have a high risk of physical, psychological, and social problems (Jiu & Rungreangkulkij, 2019).

Most parents feel disappointed, unhappy, and even refuse the presence of the child (Topan et al., 2019). These kinds of feelings leads them to ignore their offspring (Hurlock, 2013). Algood et al. (2011) suggested that children with learning difficulties, mental disabilities, and emotional disorders have a great chance of being neglected by their parents. A research finding by Estugra (2019) on 204 parents of students from special needs school or *Sekolah Luar Biasa* (SLB) section C in Jakarta, demonstrated, the levels of neglect in parents towards their child with intellectual disabilities (including children with ASD) is relatively high. In addition, parents in the medium category were about 131 parents (64.2%) and 31 parents (15.2%) were in the high category. Subsequently, 80.3% of parents indicated that their quality of relationship with their child decreased after receiving a diagnosis that their child had an ASD (Al-Kandari et al., 2017). A study by Ren and colleagues (2020) revealed that parents of children with ASD listen less attentively, lose their control more often, apply more physical control, and were less proactive and less supportive toward their children. However, the study by Pangestu (2021) identified that most parents of children with ASD had positive acceptance toward them. Jiu and Rungreangkulkij (2019) also found that one of the positive impacts for families with autistic children is to pay more attention and love them unconditionally. This reflected that parents' acceptance toward their children with ASD varies.

Rohner and Khaleque (2010) argued that parental acceptance is reflected by loving behavior, verbal and physical affection for their children, as well as warm interaction between them. Unconditional love is a form of parental acceptance towards children, which

is reflected by giving attention, care, affection, also child's comfort by showing happiness (Al-Kandari et al., 2017). Parents of autistic children express their unconditional love in various ways, such as buying toys, food, going to the mall, or spending more time with them (Jiu & Rungreangkulkij, 2019). Ideally, parents give unconditional love toward their child regardless of the child's condition.

Parental acceptance contributes positively to psychological adjustment in children (Carrasco et al., 2019). Loving them conditionally may help parents and children to live life with a lower level of stress (Nandy, 2017). Showering children with unconditional love and accepting them as individuals also would increase life satisfaction (Jigyel, 2014). Unconditional love is one of the strategies for parents to overcome psychosocial problems encountered by their offspring (Macha et al., 2020). This encourages them to apply positive parenting systems to optimize the growth process of their youngsters (Purwaningrum et al., 2018). Guidance and support from a parent can facilitate children with ASD to move forward, socialize, live a better life, and make decisions independently (Singer & Wang, 2016). Furthermore, the parental rejection, identified by loss or lack of unconditional love, may bring them to ignore their child's conditions and needs. As a result, their growth and development are less optimal.

Parental acceptance, including parent unconditional love towards the presence of a child with ASD are influenced by several reasons, such as levels of care (Carlier et al., 2020), parental stress (Crum & Moreland, 2017), perceptions of social stigma, financial condition, quality of life (Al Khateeb et al., 2019), severity levels of ASD (Poslawsky et al., 2014), social support (Gusrianti et al., 2018; Janah & Susandari, 2017; Kandel & Merrick, 2007; Syaputra et al., 2018; Wijaksono, 2016) and religiosity (Desiningrum et al., 2020; Husna & Hamdan, 2020; Pangestu, 2021; Rahmawati, 2018). Poslawsky and his colleagues (2014) found, a

mild level of ASD is associated with parental acceptance. Conversely, the results of meta-analysis research conducted by Yorke and colleagues (2018) showed that the severity levels of ASD were associated with parenting patterns, emotional, and behavioral problems in children with ASD and was positively related to parents' psychological distress. The level of deficiency of children with ASD is also correlated with the level of difficulty of a parent in nurturing and caring for them (Desiningrum et al., 2020; Karst & Hecke, 2012). This result was strengthened by another finding by Drogomyretska et al. (2020) which revealed that the severity level of ASD predicted parental stress. Similarly, Robinson and Weis (2020), found behavioral problems in children with ASD contributed to parental stress levels. Hence, based on the descriptions above, severity levels of ASD has been associated with difficulties in parenting along with parental stress, while factors associated with parents' unconditional love seemed very limited.

Religiosity is one of the factors that influence parents' unconditional love (Desiningrum et al., 2020; Pangestu, 2021; Rahmawati, 2018). Rahmawati (2018) found the more religious commitment parents stuck to, the more motivated they were to accept their child unconditionally. This represented that the commitment of parents was correlated with unconditional love for their children. Desiningrum and her colleagues' research also showed that parental religiosity was positively related to parental affection for their child with ASD. This was supported by another finding conducted by Pangestu (2021) which identified that parental religiosity contributes to parental acceptance towards their children with ASD.

Another research topic on the parent of children with ASD discovered that religiosity was correlated with maternal well-being (Faciane, 2015) and parents' quality of life (Al Khateeb et al., 2019) in which religiosity was one of the coping strategies. Ilias et al. (2018) suggested that religiosity could be a coping

mechanism in taking care of children with ASD. Parents with a high level of religiosity believe that the presence of a child with ASD in their household is God's will so they must be tender in accepting them (Ilias et al., 2018). Religious beliefs can help parents accept and bring up children with ASD (Ilias et al., 2018). In contrast, Gusrianti and colleagues (2018) suggested that religiosity did not significantly affect parental acceptance, including parents' unconditional love. The difference in Gusrianti and colleagues' results are most likely determined by other factors, such as the severity level of ASD, which was not measured in the study. This current study aims to indicate the role of religiosity on parents' unconditional love directly when religiosity interacts with the severity level of ASD.

Social support plays a major role as an extrinsic coping resource and has positive implications for encouraging parents' unconditional love (Al-Kandari et al., 2017). The social support obtained can be a source of strength for parent to adjust their role of being a parent of a child with ASD and they are more likely to be resilient. It turned out that parent can love their children unconditionally, notwithstanding their condition. Social support is essential for a parents and families of individuals with ASD, such as reducing stress levels and increasing well-being (Marsack & Samuel, 2017).

Fitria (2019), conducting research on parents of children with special needs, including children with ASD, showed that social support did not contribute significantly to parental acceptance. This explains that the effectiveness of social support for parents of children with ASD varies. The effectiveness of social support is influenced by the quality of social support (Marsack & Samuel, 2017), sources of social support (Drogomyretska et al., 2020; Marsack-Topolewsky, 2020), type of disabilities (Alon, 2019), and subjective burden (Singh et al., 2017). Type of disabilities and subjective burden reflects severity levels of disabilities in children. Hence, the current study aims to prove the

direct contribution of social support to parents' unconditional love as well as the effect of social support while interacting with severity levels of ASD on parents' unconditional love. This study also aims to prove the moderating effect of religiosity and social support on the relationship between severity levels of Autism and parents' unconditional love.

## **METHODS**

### **Research approach**

This study used a quantitative approach with non-experimental research design to prove the relationship between variables but did not explain the cause-and-effect relationships (Gravetter & Forzano, 2018). This study aimed to investigate the severity level and parent's unconditional love moderated by religiosity and social support.

### **Participants**

This study used a non-probability sampling approach by means of purposive sampling. The criteria of this research sample were parents who have children with ASD, aged 2 to 17 years old, both with complete or single parents. In this study, the data was collected online via google form. This process was started by asking for permission from parents with ASD to conduct research in several communities, growth and developmental clinics and special needs school in Jakarta. The parents were also informed the criteria of those who were suitable for this study. After obtaining research permission, the researcher provided a google form link containing an informed consent and a research questionnaire. Data collection was conducted from April 24<sup>th</sup>, 2020, to July 2<sup>nd</sup>, 2020.

### **Measurements**

The instruments of this study measured parents' unconditional love, the severity level of autism, religiosity, and social support. All scales used the Likert scale model. In this study, there were favorable and unfavorable

items. The unconditional love items were divided into two. For the favorable items, response scores ranged from five (very suitable) to one (very unsuitable), whereas the unfavorable ones ranged from five (very unsuitable) to one (very suitable). Furthermore, the favorable items of the severity level of autism, religiosity and social support ranged from four (very suitable) to one (very unsuitable), whereas unfavorable ones ranged from four (very suitable) to one (very unsuitable).

Further explanations about the instruments used in this study are as follows:

#### *Parent's unconditional love scale*

*Porter Parental Acceptance Scale (PPAS)* is a scale for measuring parents' unconditional love, constructed by Porter (1954). PPAS had split-half reliability of .766 and, according to expert judgment of face validity (Porter, 1954). In this study, we used one dimension only, unconditional love. This scale was applied in a study by Hicks and Baggerly (2017). Researchers translated and back-translated 10 items of the scale. The results of the item validity test, using Confirmatory Factor Analysis (CFA), showed five valid items which were used in this study. These items had *t*-values, ranging from 16.35 to 19.22 (Dewi, 2020). An example of the items is, "I still love him/her even though he/she is not obedient.

#### *Severity level of autism scale*

In this study, Childhood Autism Rating Scale (CARS) was used to measure the severity level of autism (Aizar et al., 2015; Chen et al., 2018) on parents' perceptions. CARS has been translated into several languages. This scale consists of 42 questions which are translated into Indonesian and back-translated. The results of the item validity test using CFA showed that 33 of the 42 items were valid with a *t*-value of 2.06 to 10.32 (Dewi, 2020). An example of the items is "Child shows an odd interest towards a toy or

a too childish play (e.g., banging or sucking on toys)”.

### *Religiosity scale*

The religiosity scale is based on the theory of Fetzer (2003). In this study, only 4 of 12 dimensions were used; value, beliefs, religious coping, and religious commitment, as they are the main elements in religion (Wahyuddin et al., 2009). The results of the item validity test with CFA showed that five of seven items were valid with a *t*-value of 9.10 to 19.89; six of seven items for belief, *t*-values of 11.33 to 16.72; four of six items for the religious coping with *t*-values of 13.82 to 19.70; five items (all items) for religious commitment with *t*-values of 10.19 to 15.93 (Dewi, 2020). The examples of the items were, “I try to take all actions based on religious rules” (Value); “God’s goodness and mercy were greater than I expected” (Belief); “Praying to God is the best way to cope with stressful situations” (coping); “I always try to take religion in every aspect of life (commitment)”.

### *Social support scale*

In this study, the social support scale is based on the theory of Sarafino and Smith (2011). Social support consists of four aspects: emotional support, tangible or instrumental support, information support, and companionship support. The results of the validity test of the items using CFA showed that the (five) items of emotional support were valid with *t*-values of 5.08 to 10.53; the (four) items for tangible or instrumental support were valid with *t*-values of 4.89 to 11.22; three of the four items of the information support were valid with a *t*-value of 6.87 to 9.76; the (four) questions of the companionship support were valid with *t*-value 11.45 to 17.70 (Dewi, 2020). An example of emotional support items is: “I feel that the people around me are

ready to listen to the outpouring of my heart.” An example of tangible or instrumental support items is: “When I leave, there is someone else who can help me to take care of my child.” An example of the statement of information items is, “Information, advice, and input from friends really help me in caring and raising children”. An example of tangible or instrumental support items is, “Activities with friends in the community help me to care for children”.

### **Data analysis techniques**

This study aims to examine the moderating effect of religiosity and social support on the relationship between the severity level of ASD and parents’ unconditional love. Figure 1 shows the research model to be tested. To examine the proposed hypothesis, data analysis techniques in this study used Structural Equation Model (SEM), supported by SMARTPLS 3.0 software.

This study tested the following hypotheses:

H<sub>1</sub>: there is a significant relationship between the severity levels of autism and parents’ unconditional love.

H<sub>2</sub>: there is a significant relationship between religiosity and parents’ unconditional love.

H<sub>3</sub>: there is a significant relationship between social support and parents’ unconditional love.

H<sub>4</sub>: there is a significant moderating effect of religiosity on the relationship between severity levels of autism and parents’ unconditional love.

H<sub>5</sub>: there is a significant moderating effect of social support on the relationship between severity levels of autism and parents’ unconditional love.

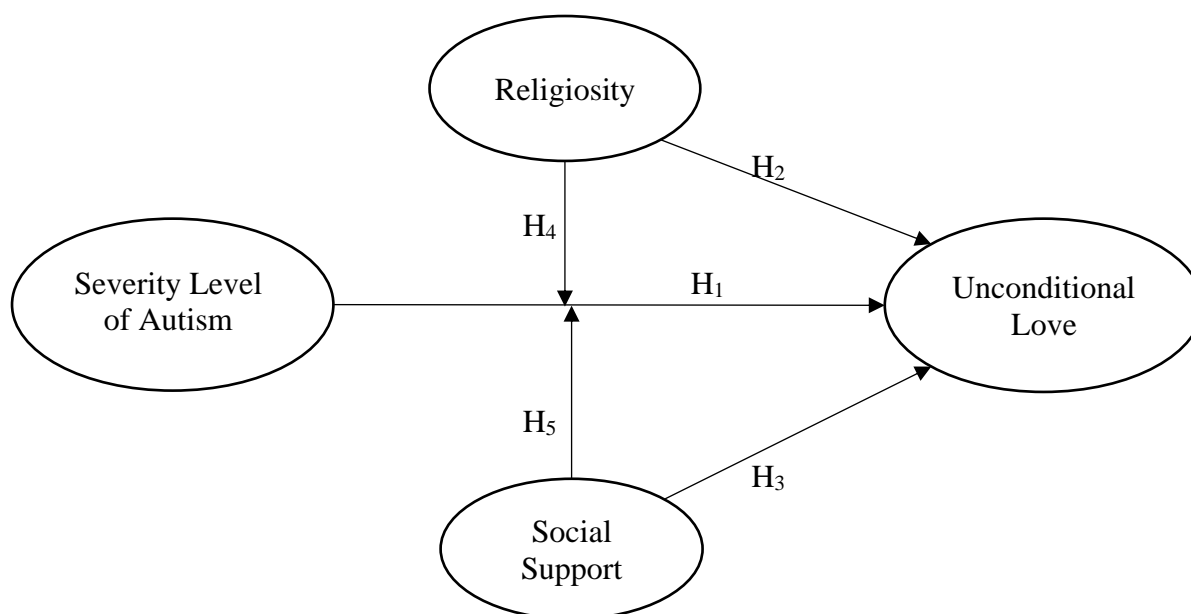


Figure 1. Research Model

RESULT AND DISCUSSION

criteria for the research. Table 1 shows the characteristics of the study participants.

In this study, there were 200 parents of children with ASD who met the appropriate

Table 1. Characteristics of Research Participants

Characteristics	n	%	Characteristics	n	%
<b>Parents' Genders</b>			<b>Monthly Income</b>		
Male	36	18%	<Rp 1.000.000	36	18%
Female	164	82%	Rp 1.000.000 – Rp 3.000.000	42	21%
<b>Parents' ages</b>			Rp 3.000.000 – Rp 5.000.000	36	18%
20-30	11	5.5%	Rp 5.000.000 – Rp 7.000.000	19	9.5%
31-40	98	49%	>Rp.7.000.000	67	33.5%
41-50	82	41%	<b>Children's Genders</b>		
51-60	9	4.5%	Male	162	81%
<b>Domiciles</b>			Female	38	19%
Jakarta	60	30%	<b>Children's Ages</b>		
Banten	52	26%	2-10	121	60.5%
West Java	71	35.5%	11-17	79	39.5%
Central Java	4	2%			
East Java	5	2.5%			
South Sumatera	1	.5%			
West Sumatera	1	.5%			
Riau	1	.5%			
Riau Islands	1	.5%			
West Kalimantan	1	.5%			
East Kalimantan	2	1%			
South Sulawesi	1	.5%			

Table 1 shows that the study participants were dominated by females or mothers of children with ASD. According to Frye (2016) in his study, the number of fathers was less than mothers. That being said, both fathers and mothers had the same needs, such as the need for social support, either informational or emotional support, that could help them in caring for and educating their children. Sahida and Allenidekania (2018) discovered, there was no significant relationship between parent gender (father and mother) and parental

rejection of the ASD child. This means that even though the number of fathers and mothers was not balanced, it will not cause bias in the results of the study. The gender of children with ASD is mainly males. These findings are in line with CDC (2020), where males experienced ASD five times more than females did (Kemenpppa, 2018).

Data analysis begun with an analysis of the measurement model and continues with the structural model analysis.

## Measurement model

**Table 2.**  
Results of Measurement Model

Construct		Items	FL	Cron. $\alpha$	CR	AVE	$R^2$	$Q^2$	
Variables	Dimensions								
Unconditional Love (UL)				.802	.871	.628	.623		
		UL2	.759					.157	
		UL4	.788					.157	
		UL7	.791					.268	
		UL10	.830					.193	
Severity Level				.751	.843	.574			
	Receptor Responsivity (RR)	RR2	.805	1.000	1.000	1.000	.648	.645	
	Relationships With Objects (RO)	RO2	.721	1.000	1.000	1.000	.519	.516	
	Anxiety (A)	A1	.789	1.000	1.000	1.000	.560	.621	
	Verbal Communication (VC)	VC3	.711	1.000	1.000	1.000	.361	.500	
Religiosity				.952	.959	.699			
	Beliefs (RB)			.808	.912	.839	.872		
			RB1	.881					.770
		RB2	.827					.677	
	Commitment (COM)				.789	.877	.703	.874	
			COM1	.812					.652
			COM2	.755					.572
		COM3	.783					.613	
	Coping (COP)				.887	.888	.930	.925	
			COP1	.854					.725
		COP2	.883					.774	
	COP3	.869					.750		
Value (RV)				.811	.813	.841	.846		
		RV2	.870					.755	
		RV3	.819					.666	

**Table 2.**  
(Continued)

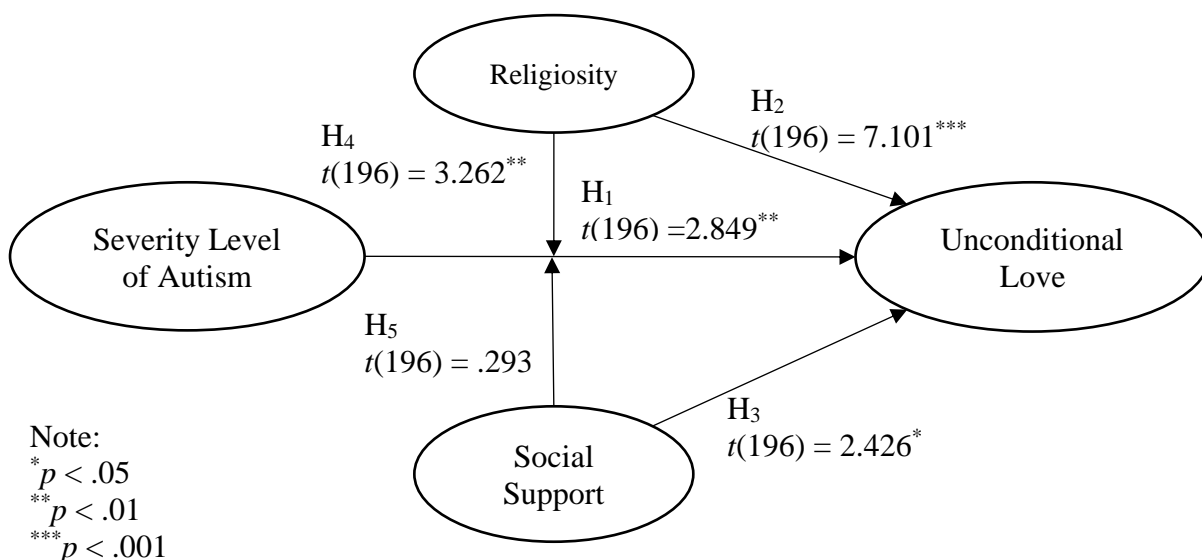
Construct	Items	FL	Cron. $\alpha$	CR	AVE	$R^2$	$Q^2$
Social Support			.703	.835	.628		
Emotional Support (ES)			.722	.878	.783	.849	
	ES1	.829					.683
	ES2	.798					.636
Informational Support (IS)			1.000	1.000	1.000	.506	
	IS1	.749					.557

Note. FL = Factor Loading; Cron.  $\alpha$  = Cronbach's Alpha; CR = Composite Reliability.

The first stage is to test the external model, including reliability and construct validity. Construct reliability was measured based on internal consistency reliability and indicator reliability. It is measured then by convergent validity and discriminant validity. On top of that, the internal consistency reliability was measured by the composite reliability value with the provision that it should be greater than .7. The indicator with external loading between .40 to .70 is eliminated if it could increase the composite reliability and the AVE values above the recommended value. Subsequently, the indicator reliability was evaluated based on the external loading of the indicator with the provision that it should be greater than .7. Finally, the convergent

validity is measured based on the AVE with a provision that it must be greater than .5 or standardized external loading must be greater than .708 (Hair et al., 2017). Based on these criteria, there are some items of each variable that do not fit the provisions. As a consequence, those items should be eliminated. Table 2 shows the factor loading scores for all items in each variable after removing the non-fit items.

Table 2 displays composite reliability, Cronbach's alpha, AVE, and  $R^2$  for each construct. All constructs have met the criteria of validity and reliability of the measurement. The measurement model shows that each construct is valid and reliable (see table 2).



**Figure 2.** Partial Least Squares Result



The path coefficient analysis is used to test the effect of the independent variables on the dependent variables, according to the value of

the *t*-statistic and the significance level. Table 4 shows the path coefficients of independent variables to dependent variables.

**Table 4**

Path Coefficients

Path Relationship	<i>R</i> <sup>2</sup>	<i>SD</i>	<i>b</i> <sup>a</sup>	<i>t</i>	<i>p</i>
SLA → UL	.026	.057	-.162	2.849	.005**
R → UL	.285	.075	.534	7.101	.000***
SS → UL	.025	.065	.157	2.426	.016*
SLA and R → UL	.062	.076	.249	3.262	.001**
SLA and SS → UL	.0004	.067	-.020	.293	.770

Note. SLA = Severity Level of Autism; UL = Unconditional Love; R = Religiosity; SS = Social Support.

<sup>a</sup>*b* = Original Sample (*b*).

\**p* < .05, \*\**p* < .01, \*\*\**p* < .001

The results of the statistical analysis in Table 4 shows that the level of severity of autism has a significant negative correlation with unconditional love,  $b = -.162$ ;  $t(196) = 2.849$ ,  $p = .005$ . This means, the higher the severity level of autism, the lower the unconditional love of the parents. This finding is in line with the results of Kandel and Merrick's (2007) research which showed that the level and type of children's disability affect parents' reactions. The results of research by Weiss and his colleagues (2012) showed, with the increase of behavioral problems of children with autism, the psychological acceptance of parents will decrease. Parents' perceptions about the severity level of their child's autism correlate with the level of stress experienced by the parents (Cuzzocrea et al., 2016). The heavier the parents perceive the level of autism experienced by their children, the higher the stress level of the parents and the impact on the parents' unconditional love for their children.

Religiosity and unconditional love showed a significant positive correlation,  $b = .534$ ;  $t(196) = 7.101$ ,  $p = .000$ . In other words, the higher the level of parental religiosity, the higher the unconditional love of parents for their children with ASD. This finding is in line with the results of Weyand et al. (2013), and White (2009) which showed that the higher the level of parental religiosity the higher the

parents' level of acceptance of their disabled children. Religiosity can generate and maintain positive condition within individual. The more religious a person is, the more they accept children well in any condition (Husna & Hamdan, 2020). The religious values and beliefs parents hold to could help them determine a positive attitude toward the presence of their child who has ASD (White, 2009). Parents who have a religious belief about the importance of patience and gratitude, even if they are experiencing negative events, such as the presence of children with special needs, are encouraged to be more accepting of whatever their child's condition may be (White, 2009). In general, religiosity is used as a coping mechanism when dealing with unexpected circumstances, such as the birth of a child with ASD in the family (Karaca & Konuk Şener, 2019; Cuzzocrea, et al., 2016; Weyand et al., 2013). Religious coping will make it easier for parents to accept the reality of their child's condition.

Religiosity was also proven to significantly moderate the relationship between autism severity level and unconditional love,  $b = .249$ ;  $t(196) = 3.262$ ,  $p = .001$ . This shows that the interaction between severity level of autism and religiosity can predict parents' unconditional love significantly for their children in a positive direction. The presence

of children with ASD, especially those with a severe level of autism will cause various negative reactions so that there are parents who refuse their presence. This situation is understandable since the more severe the severity of autism experienced by the child, the greater the psychological burden on the parents. Parents find it increasingly difficult to care for them (Desiningrum et al., 2020; Karst & Hecke, 2012). A mother's acceptance of the presence of her child who has autism is a process, even though initially experiencing negative emotions but as time goes by, she begins to accept and even really loves her child (Karaca & Konuk Sener, 2019). This process is influenced by the religiosity of parents (Karaca & Konuk Sener, 2019; Weyand et al., 2013). Religiosity can be one of the coping strategies used by parents in nurturing children with ASD (Karaca et al., 2019; Cuzzocrea, et al., 2016; Ilias et al., 2018; Weyand et al., 2013). Religiosity encourages parents to believe that the presence of children with ASD is God's destiny that they must accept (Ilias et al., 2018). They look for positive meaning regardless of their child's condition. This is in line with the findings of Rahmawati's research (2018) which revealed that the stronger the religious commitment of parents, the more it encourages parents to accept their children. This also reflects that parental religiosity has a meaningful role in strengthening parents to give unconditional love continuously regardless of the severity of their child's autism level.

Social support and unconditional love showed a significant positive correlation,  $b = .157$ ;  $t(196) = 2.426$ ,  $p = .016$ . This indicates that the greater the social support, the greater the unconditional parental love. In line with the results of previous studies that social support contributed to parental acceptance (Gusrianti et al., 2018; Janah & Susandari, 2017; Kandel & Merrick, 2007; Syaputra et al., 2018; Wijaksono, 2016). Support from those around them is one of the external coping mechanisms that can help parents adjust to the presence of children with ASD around them.

Sarafino and Smith (2011) suggested that individuals who perceive that they do receive social support will feel loved, appreciated, and have a sense of belonging to a social group, making them more likely to cope with sources of stress and overcome their problems, compared to those who do not. Proper social support, such as providing the information needed by parents of children with ASD, may facilitate parents to identify and recognize their children better (Sarafino & Smith, 2011). Information and advice received by parents may help parents in caring for and nurturing their children. Hence, the informational support plays a significant role in constructing parental acceptance, such as unconditional love (Janah & Susandari, 2017). Emotional support, such as expressions of empathy, affection, positive appreciation, and motivation may increase parental unconditional love. This is consistent with the findings of Kandel and Merrick (2007) which showed that emotional support was effective in dealing with challenging situations (the presence of children with ASD) that were difficult for parents. The findings in the research by Alat (2017) indicated that the formation of a community of parents of autistic children could provide support, both informational support, sharing experiences and providing mutual support in overcoming drawbacks when caring for and accompanying their children, as well as emotional support. They could strengthen each other so that they could reduce feelings of helplessness and increase parental efficacy in caring for and educating their children (Alat, 2017; Wijaksono, 2016). The findings of Wijaksono (2016) suggested that various social supports can help parents accept their autistic child which is characterized by attention and affection, parent-child interaction and communication, and parental involvement.

The impact of social support interaction and severity level of autism on unconditional love is not statistically significant,  $b = -.02$ ;  $t(196) = .293$ ,  $p = .770$ . This finding differs from the research by Indiarti and Rahayu (2020) that

mothers could accept autism in various conditions because of the social support they receive. The results of the research by Weiss et al., (2021) showed that the severity level of autism was positively related to the stress level of parents. Severity levels of autism correlate with the difficulty level of parents in caring for and caring for their children (Desiningrum et al., 2020; Karst & Hecke, 2012) and predict parental stress (Drogomyretska et al., 2020) as the social support is one of the external coping strategies. However, the findings of Weiss and colleagues (2021) showed that perceived social support from parents was negatively correlated with the severity level of autism. In fact, parents of ASD children with a severe level of autism require more social support. This is in line with the research by Khusaifan and El Keshky (2020), showing that social support could moderate the relationship between family stress and satisfaction at low-stress levels and moderate-stress levels but at high-stress levels, the moderating effect is not significantly. In this study, social support was

also inconsequential to predict the relationship between severity level of autism and unconditional love of parents,  $f^2 = .001$ ,  $p = .770$ . On top of that, the study conducted by Cuzzocrea and colleagues (2016) showed that in parents of children with high autism severity, social support did not function, or parents perceived the social support received was low. They feel dissatisfied with the help they receive (Cuzzocrea et al., 2016). The social support received by parents of children with ASD is not strong enough to buffer the stress caused by their child's condition, thus preventing parents from giving unconditional love.

The results of statistical analysis showed that social support only had a direct effect on unconditional love, but social support could not significantly moderate the effect of the severity level of autism on unconditional love. The result of this statistical analysis is explained by looking at the contribution and effect size of social support to unconditional love, as shown in Table 5.

**Table 5.**  
The Coefficient of Determination and Effect Size towards Unconditional Love

Variable	$R^2$	Effect Size		$Q^2$
		$f^2$	$p$	
Severity Level of Autism	.026	.039	.005**	.293
Religiosity	.285	.379	.000***	.624
Social Support	.025	.033	.016*	.265
Moderating effect Religiosity	.062	.078	.001**	1,000
Moderating effect Social Support	.0004	.001	.770	1,000

Note. \*  $p < .05$ , \*\*  $p < .01$ , \*\*\*  $p < .001$

Hair et al. (2017) stated that it is difficult to determine the practical terms of the value due to the complexity of the model and the area of research. However, for convenience,  $R^2$  of .25, .5 and .75 are classified as weak, medium, and substantial, respectively. An example of research explaining customer satisfaction and loyalty have a value of .2 is highly rated (Hair et al., 2017). In this study, religiosity has an  $R^2$  value of .285 which could be considered high, while autism severity level and social support could be assessed as weak (see Table 5).

The effect size  $f^2$  is used to assess the contribution of independent variables (severity level of autism) to the dependent variable (unconditional love),  $f^2$  score of .02 is classified as small, .15 as moderate, and .35 as large (Hair et al., 2017). This study shows that autism severity level and social support has a small contribution to unconditional love, and religiosity has a large contribution to unconditional love (see Table 5). The moderating effect of religiosity is greater than the moderating effect of social support.

The  $Q^2$  score is used to determine the predictive relevance of independent variables for dependent variables, provided that the  $Q^2$  value is greater than zero (Hair et al., 2017). This study shows that autism severity level, religiosity, and social support are greater than zero. As a result, it might be concluded that all independent variables in this study, namely, autism severity level, religiosity, and social support, has predictive relevance for the dependent variable. The results of this study are shown in Table 5.

The results of the statistical analysis in Table 5 shows that the contribution of religiosity to unconditional love is high ( $R^2 = .285$  or 28.5%) while the contribution of social support is low ( $R^2 = .0246$  or 2.46%). The effect size of religiosity is great ( $f^2 = .379, p = .000$ ) while the effect size of social support is small ( $f^2 = .033, p = .016$ ). The moderating effect of religiosity is much higher and greater than the moderating effect of social support. It means that the interaction between religiosity and autism severity level is meaningful to predict unconditional love. On the other hand, the interaction of social support and autism severity level is inconsequential to predict unconditional love. This finding indicates that religiosity plays an important role in the construct of unconditional love for parents. However, it does not mean that social support has no role in the construct of unconditional love for parents since social support also has predictive relevance for unconditional love ( $Q^2 = .265 > 0$ ). The contribution of social support is classified as weak, and the effect size is small since not all dimensions of social support were included in the statistical analysis. This is because none of the elements of the tangible and companionship dimensions meet the required statistical criteria. Whereas tangible support in the form of materials or services such as helping to care for or caring for children with ASD affects parental acceptance, including unconditional love (Wijaksono, 2016).

Another explanation regarding the finding of a moderating effect of social support on the relationship between the level of severity of

autism and unconditional love is that social support is not always perceived and received correctly. According to Cuzzocrea and colleagues (2016), there are several things that make social support considered useful, including the type and quality of support, the person providing the support, and contextual problems. Parents can judge certain social support as a negative matter instead of reducing stress, it exacerbates stress and causes "social strain" (Cuzzocrea et al., 2016). As the findings in the research of Elkfrawy and Ibrahim (2021) showed that social support was not correlated with unconditional love. Parents of children with autism experience chronic stress that can erode the support provided by the source of support from time to time. Sources of support do not realize how to provide appropriate assistance (Cuzzocrea et al., 2016). As Sarafino and Smith (2011) stated that the support offered and available is not considered as being supportive. The reasons of this condition are the insufficient and inappropriate supports (Sarafino & Smith, 2011). The interaction of social support and autism severity level cannot predict unconditional love. The possibility is that the social support available and offered may not be sufficient or suitable enough to change the parents' perception of their child's autistic condition, thus parents still find it difficult to love their child unconditionally.

One of the limitations of this study is that some items cannot be included in the statistical analysis because the items do not fit the required criteria, which causes some unmeasurable dimensions of the independent variables. Therefore, future researchers are recommended to conduct a readability test before taking data. Another limitation is that participants in this study has a fairly wide age range from 2 to 17 years, which allows for differences in acceptance, including unconditional love due to the age of the child. The results of research by Sahida and Allenidekania (2018) showed that the age of the child was negatively correlated with parental rejection. This reflects that parents' acceptance of their child's ASD diagnosis is a

process that takes time (Poslawsky et al., 2014).

Further research is suggested to explore the development of unconditional parental love at each stage. In addition, the mixed methods research could be conducted to explore or explain parents' unconditional love for their children. The findings of this study indicate that the variables of religiosity and social support have predictive relevance for unconditional love, so further research can be suggested to investigate the factors that can increase religiosity and social support that are effective and efficient in parents of children with ASD.

## CONCLUSION

The results of this study indicate that unconditional parental love are influenced by the level of autism severity in a negative direction, religiosity in a positive direction, and social support in a positive direction. Parental religiosity may moderate the relationship between severity level of autism and unconditional love. This means that the religiosity of parents can reduce the effect of parental rejection of their autistic children. The religiosity of parents can maintain unconditional love for their children, but the role of social support is inconsequential in reducing the effect of parental rejection of their autistic children. The implication of this study is that parents of children with special needs are suggested to increase their religiosity. Providing information and emotional support may help parents develop unconditional love for their children.

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