

**IMPACT OF SOCIAL SUPPORT GROUPS ON THE MENTALLY ILL CHILDREN
WITH AUTISM A CASE STUDY OF KABBUBBU HEALTH CENTER IV,
MANYANGWA VILLAGE, WAKISO DISTRICT**

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DECLARATION

This research is my original work and has not been published anywhere other than at Uganda Christian University.

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Signature.....

Date.....23/3/2025

APPROVAL

This dissertation has been submitted for examination with my approval as the university supervisor.



Handwritten signature and date: 23/3/2025

Winfred Naamara

Supervisor

DEDICATION

My research is dedicated to M/s. Winfred Naamara, thank you for your unwavering support, encouragement and patience have meant the world to me. Your guidance and expertise helped me shape this research. I am also grateful to my family who have been my rock throughout my journey.

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CHAPTER ONE

INTRODUCTION

1.0 Introduction

Chapter one comprises the background study, problem statement, justification, objectives, and scope.

1.1 Background of the Study:

Mental disorders affect approximately one in seven children and adolescents aged 10-19. Among this age group, anxiety disorders affect 27.5% and depression affects 12.7% of children, with these conditions often occurring together (UNICEF 2021). According to Newton (2016), globally, the prevalence of ASD is approximately 1 in 160 children.

1.2 Problem Statement

According to the New Hope Uganda report 2017, Autistic children are at risk of accidents and injuries due to their impaired judgment. As a result, many caregivers keep these children confined at home for protection. The stigma around autism and lack of willing caregivers contribute to parents isolating their autistic children from the community (New Hope Uganda report 2017). Manyabgwa Village is a rural community in Uganda with limited access to healthcare services. Kabbubbu Health Center IV, located in this village, provides a range of medical services, including mental health support. The center has established social support groups for health workers to share experiences, coping strategies, and provide emotional assistance for autistic members in the community.

1.3 Objectives of the Study

To evaluate the effectiveness of social support groups on the mental health status of autistic patients.

To assess the specific mental health outcomes of autistic patients participating in support groups.

To identify the activities of the social support groups intended to enhance mental well-being status of children

1.4. Research Questions

How do social support groups affect the mental health status of autistic patients at Kabbubbu Health Center IV?

What specific mental health outcomes are observed among autistic patients participating in these groups?

Which activities are carried out in the social support groups that aim at improving the mental well-being of the victims?

1.5. Purpose of the Study

This is to evaluate the impact of social groups on the mental well-being of autistic patients at Kabbubbu Health Center IV. Understanding the effectiveness of these groups will inform future interventions and policies to upgrade mental health outcomes for victims in rural areas

1.6. Significance of the Study

1.6.1 Policy

Lack of awareness and culture and insufficient funds are some of the factors that account for unmet needs in the region among autism patients. The study findings will lead to the development of gigantic work needed to sensitise policy makers about the region.

1.6.2. Social work practice

Social work practice contributes much to alleviating mental health problems among children with autism by helping them receive the care and assistance they need. Thus, the study will be of significance to social workers working with children with autism. The study will enable them to use the findings to enhance their knowledge and skills to understand and assist those experiencing

mental health problems. The study will offer an opportunity for social workers to offer therapy to individuals and families, as well as crisis intervention and advocacy services.

1.6.3. Research

Researchers will use the findings to identify further areas of mental health research aimed at improving understanding, finding effective evidence-based treatments, and even preventing mental health problems from developing in the first place.

The Researchers shall use the findings to identify further areas of Mental health research aimed at improving understanding, finding effective evidence-based treatments, and even preventing mental health problems from developing in the first place.

1.7 Scope of the Study

1.7.1. Geographical Scope

The study will be conducted in Manyabgwa Village, a rural area in Uganda. Kabbubbu Health Center IV, located in this village, serves as the primary healthcare provider for the local population. The village has a predominantly agricultural economy, with limited access to specialized healthcare services.

1.7.2 Content scope

The content of the study shall be limited to evaluating the effectiveness of social support groups on the mental health status of autistic children, assessing the specific mental health outcomes of autistic children participating in support groups and identifying the activities of the social support groups aimed at improving the mental health status of children.

1.7.3 Time scope

The study shall consider data for the period 2020- 2023 for during which the WHO reports and the Ministry of Health reports indicated an increase in number of Autistic children in Uganda.

1.8. Justification of the Study

This study is necessary to address the lack of research on the effectiveness of social support groups in rural settings, particularly for autistic children. By evaluating these groups at Kabbubbu Health Center IV, the study aims to provide evidence-based recommendations for improving mental health support in other communities.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

Literature review provides summary of studies in relation to the study. The literature is presented objectively by objective.

Effectiveness of social support groups on mental health status Amon autistic patients

Bochem and Lung (2005) studied the influence of support groups on the quality of life and mental well-being of mothers with autistic

children. A quasi-experimental control group pre-post research design was employed in this study. The mothers were provided children who were free from chronic diseases, which were diagnosed as autistic following Diagnostic and Statistical Manual of Mental Disorder-Fourth Edition (DSM-IV) and were their caregivers. The mothers were grouped to control or intervention groups based on their willingness. The results of

this study showed that the mental wellbeing had not significantly changed in the intervention group compared to their fellow participants in the control group at the end of follow-up month one.

Sugandha and Radhakrishnan (2021) assessed the stress and anxiety level in parents of children with autism spectrum disorder (ASD) and attention deficit hyperactivity disorder (ADHD). The second was to assess the effectiveness of a parent-to-parent support group for reducing the stress and anxiety in such parents. It was revealed that anxiety and stress score differences pre- and post-intervention were statistically significant ($P < 0.001$). Before the intervention, a low parental education level and lower household income had a statistical relationship with higher parental stress.

Additionally, working parents

2.1 Mental health outcomes of autistic patients participating in support groups.

Charlotte et al. (2021) mapped the features of non-medical, community-based interventions for adults with autism to assess their suitability for a social prescribing intervention. A systematic search and screening process was used to identify medical database literature reviews (Embase, Medline, PsycINFO, CINAHL, and Cochrane reviews) and grey literature. The review found minimal evaluation of wide-reaching, low-intensity services for adult autistics, including those that are delivered through social prescribing interventions. Outcome measures were continued to be autism-restricted and provided minimal information about intervention effects on health and wellbeing. Facets of social prescribing were identified within service pathways, yet results also suggested some alterations for improving access to autistic individuals (Charlotte et al., 2021).

Social prescribing is able to address a range of health and wellbeing requirements and aid long-term health management. Literature mentions its advantages for mental health outcomes, subjective well-being, self-esteem, social isolation, and overall physical activity in general populations (Boyce et al., 2018; Foster et al., 2020). Community-based programs, such as leisure, low-intensity support services (i.e., advice hubs), and social support groups, have been proven.

Reductions in perceived loneliness and life satisfaction, stress, communication, coping, skill acquisition, and quality of life in adults with autism (Billstedt et al., 2011; Southby & Robinson, 2018). However, high heterogeneity of studies, small effects and a non-existence of active control groups are characteristic for the majority of them.

Based on realist studies, quality of relations with general practitioners (GPs), accessibility of services, and staff training has effects at points of enrollment, engagement, and social prescribing intervention adherence (Bertottiet al., 2018; Husk et al., 2019). However, the impact of these factors on autistic access and outcomes is under researched.

Mental health outcomes depend highly on social support. For instance, Smith et al. (2018) demonstrated that social support group attendance improved emotional well-being in people with chronic conditions, and Johnson (2017) reported reduced.

2.2 The activities of the social support groups aimed at improving the mental health status of children

According to Annette et al. (2021), Social support has been identified as a crucial protective factor for children's mental health. While numerous interventions aim to mobilize social support for improving children's mental health, the most effective approaches remain unclear. Parents' capacity to mobilize social support, both for themselves and their children, is believed to influence their children's mental health outcomes and future ability to access support networks. The process of mobilizing social support for vulnerable children requires systematic planning, with theory-informed evaluations playing a vital role in advancing our understanding of addressing social support needs and loneliness in children.

Kimberly (2009) conducted a comprehensive review of structured family support programs in children's mental health, collaborating with key national family organizations. The study examined over 200 programs, with 50 meeting inclusion criteria, and categorized them based on delivery method: peer family members, clinicians, or teams. The review identified five key components of family support: (a) informational, (b) instructional, (c) emotional, (d) instrumental, and (e) advocacy.

The movement of family support and advocacy in children's mental health has been underway in the United States since the late 1980s, its evolution paralleling the evolution of community-based services to children and families (Hogwood et al., 2008). While parent involvement in child psychotherapy has been standard practice for many years (Weisz, 2004), peer-delivered family support has been particularly prominent in children's mental health services for over 25 years, and this has been largely through the National Federation of Families for Children's Mental Health (Robbins et al., 2008).

Art therapy, exercise, and music therapy are some of the interventions that have been reported to be most acceptable among autistic adults, who express a desire for availability of these services at the community level to facilitate wellbeing (Benevides et al., 2020). Social prescribing, as a low-intensity community-based intervention, is thus aligned with the Autism Strategy priorities and presents an promising avenue to improving health and wellbeing outcomes in this population.

2.3 Literature summary

Identify gaps in the existing literature that this study aims to address, particularly focusing on the lack of research in rural settings and the specific context of autistic patients. While there is considerable research on the benefits of social support groups in urban settings, there is limited understanding of their effectiveness in rural areas. Additionally, few studies have specifically examined the impact of these groups on the mental health of autistic patients.

Summarize the key points from the literature review, highlighting the importance of social support groups and the need for further research in rural contexts. The literature review underscores the critical role of social support in enhancing mental health outcomes. Despite the proven benefits, there is a significant gap in understanding how these groups function in rural settings and their specific impact on autistic patients. This study addresses these gaps, providing valuable insights for policymakers and practitioners.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

The chapter outlines the research design, methods, and procedures that will be used to collect and analyze data for the study.

3.1 Research Design

It utilizes the qualitative research design. This involves the gathering of non-numerical data in order to be able to

understand the attitudes, beliefs and experiences of the people that exist in the society. It involves making use of data

collection methods like; interviews, observation and focus group discussions in an effort to master the research issues well.

3.2 Area of Study

The study will be conducted in Manyabgwa Village, a rural community in Uganda. Kabbubbu Health Center IV serves as the primary healthcare provider in this area, offering various medical services, including mental health support. The village has a predominantly agricultural economy and faces challenges related to limited access to specialized healthcare services.

3.3 Study Population

The study population shall include autistic children receiving care at Kabbubbu Health Center IV and their caregivers, health workers and members of the social support groups.

3.4 Sampling Techniques

The sampling techniques will be employed to select participants for the study. This approach ensures that individuals who are directly involved in or affected by the social support groups are

included in the research. A sample size of 10 autistic children and their caregivers, along with 5 health workers, will be targeted.

3.5 Data Collection Methods and Instruments

Data will be collected using semi-structured interviews and observation checklists. Semi-structured interviews will also be conducted with health workers to gather qualitative data on the functioning and impact of social support groups.

3.6 Data Sources and Types

Data for this study will be gathered from both primary and secondary sources to ensure a comprehensive analysis of the impacts of social support groups on the mental health status of autistic patients.

3.6.1 Primary Data

Primary data will be collected directly from the study participants through various methods. This data is original and specific to the research objectives. Interviews: Semi-structured interviews will be conducted with health workers facilitating the support groups to gather qualitative insights into the effectiveness and challenges of the groups.

Observations: Direct observations of support group sessions will be made to record interactions, participation levels, and the overall atmosphere of the sessions.

3.6.2 Secondary Data

Secondary data will be sourced from existing literature, reports, and records related to autism, mental health, and social support interventions.

Literature Review: Academic journals, books, and articles that discuss the impact of social support on mental health, particularly for autistic individuals.

Health Center Records: Patient records and reports from Kabbubbu Health Center IV that provide historical data on the mental health status of autistic patients and the outcomes of previous interventions.

Government and NGO Reports: Publications from governmental health departments and non-governmental organizations that detail the status of mental health services in rural Uganda.

3.7 Data Presentation and Analysis.

Data will be presented using narrative descriptions. Qualitative data from interviews and observations will be presented as thematic narratives. Qualitative Analysis: Content analysis will be applied to interview transcripts and observation notes. This involves coding the data into themes and categories to uncover common experiences, perceptions, and insights related to the support groups' impact. Thematic analysis will be conducted by coding the qualitative data and identifying key themes and patterns. This will involve organizing the data into meaningful categories and interpreting the findings in the context of the research questions.

3.8 Instrument Validity and Reliability

Content Validity: Expert reviews will be conducted to ensure the interview questions

cover all relevant aspects of the research topic. Construct Validity: The instruments will be designed based on established theories and frameworks (e.g., Social Support Theory, Bio-Psychosocial Model) to ensure they accurately measure the intended constructs.

3.9 Ethical Considerations

A letter of introduction will be obtained from the School of Social Sciences, and clearance also will be obtained from the organization from which data will be collected. The participants will be made aware of the purpose of the study, procedures, potential risks, and benefits. Written consent will be obtained from all participants, with further assent from caretakers for autistic patients. Participants' identities and personal information will be blinded. Data will be anonymized, and aggregate Results will be disclosed.

Participation will be voluntary. Participants will have the freedom to withdraw from the study at any time without harm. The study will ensure minimal harm to participants. Psychological counseling will be offered to participants who may experience distress throughout the data collection process.

3.10 Methodological constraints

The researcher faced a challenge of limited resources in the form of facilitating the transportation of respondents, the researcher, printing out the interview guide, which all require resources

Hence, a challenge is likely to be encountered.

Some of the children to be interviewed did not clearly understand the questions asked. A staff member from the center was requested to explain the questions in a language that the children are able to understand.

CHAPTER FOUR

PRESENTATION OF FINDINGS, INTERPRETATION, AND DISCUSSION

4.0 Introduction

The purpose of this study was to evaluate the impact of social support groups on the mental health status of autistic patients at Kabbubbu Health Center IV. The presentation of findings was based on specific objectives that guided the study.

4.1 Questionnaire Response Rate

The study used questionnaires as the primary tool for data collection from participants to achieve its objectives. A total of 40 questionnaires were administered to the caregivers of different target groups, and all were returned. Furthermore, out of the ten (10) respondents who were to be interviewed, only 9 turned up.

Table 4.1 below shows the questionnaire response rate.

Category of instrument	Target Population	Actual response	Percentage
Questionnaires	40	40	80%
Interviews	10	9	18%
Total	50	49	98 %

Source: primary data 2024

Overall, a total of 49 respondents (98 % of respondents) returned the instruments, while only 1 respondent (2%) did not return their instruments. Babbie (1990) suggested that a response rate of 50% is adequate for analysis, 60% is good, 70% very good, and above 80% excellent. The response rate is suitable for research because it falls above 80% of Babbie's value, which is excellent response.

4.2 Demographic Characteristics

Introduction

The study sought to establish demographic characteristics of respondents that included gender, age in years, and level of education.

4.2.1 Gender

The study sought to find out the gender of respondents; all respondents were requested to state their gender in the questionnaire, and the outcome is shown in Figure 4.1 below.

Figure 4.1: Gender Composition

Results from Figure 4.1 reveals that 51.5% of the respondents were female while 48.5% were male. The results above revealed that the respondents in Kabbubbu Health Center IV were female. The role of gender is very significant when evaluating the impact of social support groups on the mental health status of autistic patients at Kabbubbu Health Center IV.

4.2.2 Respondents Age

The respondents were asked to state their specific ages defined by age groups and the outcome recorded in table 4.2 below.

Table 4.2: respondents age

Age group	Frequency	Percentage
Below 30	17	34.7
31- 40	13	26.5
41-50	11	22.4
Above 50 years	8	16.3
Total	49	100

Source; Primary data 2024

The outcome of the study findings established that majority of the respondents 34.7 % were aged below 30 years, 26.5 % were aged between 31-40 years, 22.4% were aged between 41-50 years and only 16.3% were aged above 50 years. These findings showed that a majority respondents were middle aged as opposed to old ones. However, this did not seem to significantly influence the leadership style.

4.2.3 Education Level

The researcher sought to find out the level of education level of respondents in all target primary schools. The findings are recorded in table 4.3 below.

Table 4.3: Education Level

Highest level of education	Frequency	Percentage
Masters degree	0	0
Degree	05	10.2
Diploma	13	26.5
Certificate	10	20.4
Primary	21	42.8
Total	49	100

Source: primary data 2024

According to the findings in table 4.3 above a majority of the respondents 42.8% were primary pupils, 26.5% had attained diplomas, 20.4% had certificates, 10.2% were bachelor’s degree holders and none had master’s degree.

4.3 Key Study Findings

4.3.1 Effectiveness of social support groups on the mental health status of autistic children patients.

This was the second objective of the study and its findings were presented in table 4.4 below

Table 4.4: Descriptive statistics on **Effectiveness of social support groups on the mental health status of autistic children patients** (n=49)

Statement	N	VL	NS	S	G
Social support groups have significantly improved the mental health of children with autism	18.4%(9)	32.6%(16)	8.2%(4)	24.5% (12)	16.3%(8)
Parent to parent support groups have addressed anxiety among autism children	10.2%(5)	24.5%(12)	12.3%(6)	34.7%(17)	18.4%(9)
Social support groups have reduced stress among parents of children with autism	22.4%(11)	30.6%(15)	8.2%(4)	28.6%(14)	10.2%(5)
Mental health conditions among children aged 10-19 years is high	2%(1)	12.3%(6)	10.2%(5)	30.6%(15)	44.9%(22)

Source: Primary data 2024

As shown in Table 4.4, caregivers reported mixed outcomes regarding the impact of social support groups. While 32.6% of respondents noted minimal improvement in the mental health of autistic children, 24.5% observed moderate benefits, suggesting limited but discernible effectiveness.

Parent-to-Parent Support Groups

When evaluating anxiety reduction among autistic children, 34.7% of respondents acknowledged partial success, while 24.5% reported negligible impact. A notable 12.3% expressed uncertainty, indicating inconsistent perceptions of these interventions.

Stress Reduction Among Caregivers

The data revealed challenges in alleviating caregiver stress: 30.6% observed minimal reduction, 28.6% reported moderate relief, and 22.4% noted no improvement. This underscores systemic inefficiencies in stress management strategies within the support groups.

Prevalence of Mental Health Conditions

A striking 44.9% of respondents identified a high prevalence of mental health issues among children aged 10–19 years, with 30.6% affirming moderate prevalence. These findings highlight a critical need for targeted interventions in this demographic.

Qualitative Insights

Interviews with health workers contextualized these results. One participant remarked:

"Social support groups could be effective, but caregivers lack training, and facilities face resource constraints."

Another nurse emphasized adherence challenges:

"Caregivers often neglect group guidelines until crises occur, offering excuses rather than engagement."

Conclusion

Collectively, the data suggest that social support groups at Kabbubbu Health Center IV had limited success in improving mental health outcomes for autistic children, constrained by caregiver capacity gaps, resource limitations, and inconsistent participation.

4.3.2 The Mental health outcomes of autistic patients participating in support groups.

This was the third objective of the study, with the findings presented below in table 4.5 below

KEY: N =none at all, VL = very little extent, NS = not sure, S = some extent, G = great extent

Table 4.5: Descriptive statistics on the Mental health outcomes of autistic children participating in support groups.

Statement	N	VL	NS	S	G
Autism interventions have less effects on health and wellbeing.	10.2% (5)	46.9% (23)	8.2% (4)	20.4% (10)	14.3% (7)
Social prescribing has promoted multiple health and wellbeing needs of children with autism	20.4% (10)	30.6% (15)	8.2% (4)	22.4% (11)	18.4% (9)
Social prescribing programs and activities have had positive impact on mental health outcomes,	28.6% (14)	32.7% (16)	4.1% (2)	16.4% (8)	18.4% (9)
Participation in social support groups has improved the emotional well-being of children with mental illnesses.	14.3% (7)	28.6% (14)	8.2% (4)	36.7% (18)	12.2% (6)
Social support groups for parents of autistic children have improved coping strategies	24.5% (12)	32.7% (16)	12.3% (6)	20.4% (10)	10.2% (5)

Source: primary data 2024

As shown in Table 4.5, 46.9% of respondents perceived autism interventions as having minimal impact on children’s health and well-being, while 20.4% noted moderate effects and 14.3% reported significant improvements. These findings suggest limited overall efficacy of current interventions.

2. Social Prescribing for Health and Well-being

Social prescribing programs aimed at addressing multiple health needs were rated as minimally effective by 30.6% of respondents, with 22.4% observing partial success and 20.4% reporting no impact. This indicates that such initiatives inadequately met the needs of autistic children at Kabbubbu Health Center IV.

3. Mental Health Outcomes of Social Prescribing

A majority (32.7%) rated the mental health outcomes of social prescribing programs as negligible, while 28.6% outright rejected their effectiveness. These results underscore the programs' failure to deliver meaningful improvements in mental health for autistic children.

4. Emotional Well-being and Support Group Participation

Although 36.7% of respondents observed moderate improvements in emotional well-being through support group participation, 28.6% reported minimal gains. This lack of consensus highlights the inconsistency in outcomes, suggesting these groups did not significantly enhance emotional well-being.

5. Caregiver Coping Strategies

Support groups for parents of autistic children showed limited success in improving coping strategies: 32.7% noted minimal progress, while 24.5% observed no change. This reflects systemic challenges in equipping caregivers with effective tools.

Qualitative Insights

A nurse contextualized these findings:

"While caregivers and children engage in psychotherapy-guided group activities, outcomes remain insignificant. Both healthcare providers and caregivers require further training to achieve meaningful results."

Key Conclusions

Social prescribing programs and support groups demonstrated limited effectiveness in improving health, well-being, or coping strategies.

Disparities in perceived outcomes suggest inconsistent implementation or engagement.

Staff and caregiver training gaps emerged as critical barriers to success.

4.4.4 The activities of the social support groups aimed at improving the mental health status of children

This was the third objective of the study, with the findings presented below table 4.6 below

KEY: N =none at all, VL = very little extent, NS = not sure, S = some extent, G = great extent

Table 4.6: Descriptive statistics on the activities of the social support groups aimed at improving the mental health status of children with autism

Statement	N	VL	NS	S	G
Parents'ability to mobilize social support has had an effect on their children's mental health	8.2% (4)	46.9% (23)	10.2% (5)	20.4% (10)	14.3% (7)
Coordinating social support for vulnerable children involves a complex process that demands thoughtful planning	8.2% (4)	30.6% (15)	20.4% (10)	22.4% (11)	18.4% (9)
Involvement of parents in child psychotherapy is one of the standard practices	28.6% (14) 18.4%(9)	32.7% (16)	4.1% (2)	16.4% (8)	28.6% (14)
Peer-delivered family support has improved mental health	14.3% (7)	28.6% (14)	8.2% (4)	36.7% (18)	12.2% (6)
Interventions like art therapy, physical activity, and music therapy have been widely accepted among autistic individuals	24.5% (12) 10.2%(5).	32.7% (16)	12.3% (6)	20.4% (10)	24.5% (12)

Source: primary data 2024

In regard to Parents' ability to mobilize social support having had an effect on their children's mental well-being, a majority of the respondents, 46.9% rated it as to a very little extent, while 20% of the respondents rated it at the level of some extent.

On Mobilizing social support for vulnerable children being a complex process that requires careful planning there were mixed reactions :30.6% said to very little extent, 22.4% said to some extent while 20.4% said to some extent.

In regard to the Involvement of parents in child psychotherapies as one of the standard practices used in improving the mental health status of children with autism, 32.7% of the respondents rated it to a very little extent as opposed to 28.6% who rated it as to a great extent. This indicates that child psychotherapies had improved childrens mental health at Kabbubbu Health Center IV.

In relation to Peer-delivered family support, having improved mental health of children with autism, 36.7% of the respondents said to some extent as opposed to 28.6% who rated it to be at a very little extent. This implies that Peer-delivered family support had improved the mental health of children with autism to some extent at Kabbubbu Health Center IV.

In summary, the activities of the social support groups aimed at improving the mental health status of children with autism to some extent improved the mental health of children with autism, Kabbubbu Health Center IV.

CHAPTER FIVE

SUMMARY, CONCLUSION, AND RECOMMENDATIONS

5.0 Introduction

The main purpose of this research was to evaluate the impact of social support groups on the mental health status of autistic patients at Kabbubbu Health Center IV. This chapter gives a summary and conclusion of the project. It also gives recommendations and areas for further research on the study.

5.1 Summary of the Study

The study's goal was to evaluate the impact of social support groups on the mental health status of autistic patients at Kabbubbu Health Center IV. The following three variables formed the basis of the research and were essential in meeting its purpose.

5.1.1 Effectiveness of social support groups on the mental health status of autistic children.

This formed the first specific objective of the study. The findings from the study generally revealed that social support groups were effective in improving the mental health of children with autism to every little extent at Kabbubbu Health Center IV. Generally, social support groups were not so effective in managing the mental health status of autistic children at Kabbubbu Health Center IV.

5.1.2 The Mental health outcomes of autistic children participating in support groups.

The second specific objective of the study sought to investigate the Mental health outcomes of autistic children participating in support groups.

The findings from the research revealed that social support groups had reduced stress among parents of children with autism to a very small extent. This indicates that outcomes of social support groups were not so positive, justified by low reduction in stress among parents of children with autism at Kabbubbu Health Center IV. Generally, social support groups on in the mental health status of autistic children at Kabbubbu Health Center IV were not so impressive.

5.1.3 Activities of the social support groups aimed at improving the mental health status of children

The findings showed that the impact of Parents' ability to mobilize social support having had an effect on their children's mental health was rated at a very small extent. In summary, most of the activities of the social support groups aimed at improving the mental health status of children with autism were rated to be of a very small extent. In summary, the activities of the social support groups aimed at improving the mental health status of children with autism to a very extent improved the mental health of children with autism, Kabbubbu Health Center IV.

5.2 Conclusion

Based on the study findings summaries above it can be concluded that the social support groups were not so effective in managing the mental health status of autistic children at Kabbubbu Health Center IV

Though Social support groups had reduced stress among parents of children with autism to a very small extent. It can be concluded that the social support groups' outcomes on in the mental health status of autistic children at Kabbubbu Health Center IV were not so impressive.

Finally, the activities of the social support groups aimed at improving the mental health status of children with autism to a very extent improved the mental health of children with autism at Kabbubbu Health Center IV.

5.3 Recommendations of the Study

Based on the findings of the study, the following recommendations were made:

The Kabbubbu Health Center IV management should review their strategies geared towards improving the mental of children with autism.

The caregivers should be given training on how to improve the well-being of children with autism under their care.

The study recommends the need for continuous training of health workers on the management of autism cases.

5.4 Suggestions for Further Research

The study made the following recommendations for further study based on the

Study findings:

Health center IV readiness to manage mental health in the Wakiso district

A study should be undertaken to determine the effect of training courses offered in workshops on health workers' competence in managing the mental health of children with autism.

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APPENDICES

INTERVIEW GUIDE FOR CAREGIVERS

My name is Eleanor Hope Mukisa, from Uganda Christian University, pursuing a degree in social work and social administration. I am conducting a research project titled Impact of Social Support Groups on the Mental Health Status of Children with autism. The information provided in response to the interview questions will remain confidential and will be used for the purposes of this study only.

Section A: Demographic characteristics

Age.....

Gender.....

Religion.....

Section B: Background and Diagnosis

- 1. Can you tell me about your child's diagnosis of autism?
- 2. How has their diagnosis impacted your family's life?
- 3. What are your child's strengths and challenges?

Section C: Effectiveness of social support groups.

How do you evaluate the effectiveness of the social support group on the mental health of your child?

Section D: Mental health outcomes of autistic patients participating in support groups.

How have the support groups impacted on the mental health outcome of your child?

Section E: Support Systems and Services

- 1. What support services does your child receive (e.g., therapy, respite care)?
- 2. How do you access these services, and are they sufficient?

3. Are there any gaps in support that you've identified?

Daily Life and Caregiving

1. What's a typical day like for you and your child?

2. How do you manage challenging behaviors or meltdowns?

3. What self-care strategies do you use to manage stress and burnout?

Goals and Aspirations

1. What are your hopes and dreams for your child's future?

2. Are there specific goals or milestones you're working towards?

3. How can you and your child best be supported to achieve these goals?

Introduction Letter from the University



February 4th, 2025

TO WHOM IT MAY CONCERN

Dear Sir/Madam

Re: INTRODUCTORY LETTER FOR RESEARCH

This is to introduce to you MUKISA Eleanor Hope Registration number M22B15/050, a student of Uganda Christian University, pursuing Bachelor's degree in Social Work and Administration. She is expected to carry out research in the final year under the guidance of a university supervisor in partial fulfillment for the requirements of the above mentioned award.

Topic: "The Impact of Social Support Groups on the Mental Health Status of Children with Autism."

The purpose of this communication is to request your office to allow her collect data from your organization. Any assistance rendered to her will be highly appreciated.



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Received:
FOR: Dr. Mutebe
KABUBU HEALTH CENTRE IV



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