Assessment for Mothers of Children with Autism (AMCA)

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This assessment is based upon the grounded theory known as the Contextual Model of Coping and Acceptance in Mothers of Children with Autism (CMCA) which was developed by Bower, L., Holbrook, D., Mattioli, R.B., Knapp, D., Mack, C., and Fisher, G.S. (2010) at Misericordia University.

Child’s Needs Come First
1. Tell me about a typical day.  Weekday?  Weekend?

2. How do (name of child)’s needs and routines affect the family?

Family and Marital Stress
3. How has your career been impacted by (name of child)’s diagnosis?

4. Could you describe the impact on family relationships?

(If married) How has your quality time with your spouse been impacted?

5. How much free time do you have?

6. How do you spend (or would like to spend) your free time?
7. What financial concerns do you have for the future or present?

8. (If receiving home services) How has having service professionals coming into your home impacted your daily routine?

**Fear and Anxiety**
9. Could you share some of your fears or anxieties with me?

10. How do you feel about trusting (name of child) with others?

11. Tell me about your experiences in public with (name of child).
   
a. Going to religious activities?

   b. Getting a haircut?

   c. Other?

12. What are your concerns about (name of child) running away, wandering off or getting lost?
12. How do you envision (name of child)’s future?

**Coping and Adapting**
13. How do you cope with stress?

14. What role does spirituality or religion play in your life?

15. In what ways has a sense of humor helped you cope with stress?

16. Can you describe your quality and quantity of friendships/family relationships?

17. How have your relationships with your friends/family been impacted by having a child with autism?

**Grief/Denial/Disbelief**
18. How did you feel when you learned of (name of child)’s diagnosis?

How do you feel now?
19. Did you experience denial or disbelief?

(if so) How has it impacted you?

20. Do you think grief played a role?

Then or now?

(if so) How has it impacted you?

Support
21. Have you done or considered the following:

Taken a babysitter on vacation?

Received support or help from church or other community?

Participated in a support group?

Gotten school based support?
Received financial support or state assistance?

Are there other supports?

**Acceptance**
22. Do you consider yourself an advocate for (name of child) or for children with ASD in general?

23. Have you seen your life taking a change for the better?

24. Do you see yourself becoming a better person?

If so how?

25. Can you give examples of adaptive strategies that you have used that might be helpful for other moms?

**Other**
26. Is there anything that you would like to add to help us understand your experience?