

RESEARCH ARTICLE

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The psychological experience and type of identification of a mother of an autistic child who underwent a cesarean section

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Abstract:

This study examines the psychological experience of a mother of a child with autism who underwent a cesarean section during her pregnancy. It aims to explore the relationship between psychological experience, mental health, and the quality of the mother's identification with her child, in order to understand the impact of the daily challenges of caring for a child with autism and their repercussions on her mental well-being. The study also seeks to understand the factors that cause stress and exhaustion in these mothers. To clarify the impact of these psychological pressures on mothers of children with autism, this study focuses on analyzing the psychological and social factors related to the mother's psychological experience through a semi-structured interview designed to measure the variables of the topic. The results showed that mental health is clearly and flexibly linked to the topic of childbirth and all related concerns, with this link being relatively strong in two cases. The mother's psychological experience is also linked to her child with autism and the quality of her identification with her role as a mother due to the cesarean section. Furthermore, the birth of a child with autism may raise future anxieties about the child's future.

Keywords: psychological experience, psychological pressures, mental health, identification with her child, child with autism

1. Introduction:

The mother, since she carries her fetus in her womb, she draws the plan of his life, he is charged with carrying all her hopes and desires that she did not achieve by herself, this great event in the life of every mother may suddenly turn into disappointment and sadness and all her hopes and ambitions evaporate from the shock of the surprise, he is a child different from others does not resemble his parents or his siblings he is affected with autism with what this disorder carries from consequences.

The reaction may differ from one mother to another, especially that one who experienced the birth experience through cesarean, the experience of physical pain may be erased by days but the result of all this fatigue is observing strange behaviors in her child, this may create a new pain that only mothers of autistic child feel it, but whatever the available information about autism is, she must be affected with something of surprise and fear and disbelief and sadness and anger and feeling of guilt, and these are

natural feelings that even fathers whose children were affected with autism share with her.

2.1 The Problem:

Children may be exposed to many disorders as a result of genetic causes, or problems during pregnancy and birth, or environmental factors after birth (brain injuries, poisoning, malnutrition, infection), or psychological and social factors and others, which affects their physical and mental and sensory growth and appears in developmental delay and learning difficulties and communication or sensory or motor or mental disabilities.

The pregnancy stage is considered one of the most important stages that every woman capable of reproduction passes through where she lives a series of physiological and psychological changes from the moment of fertilization until the moment of birth, pregnancy changes radically from the psychology of woman and from this the pregnant woman is characterized by a large degree in changing her behaviors and her way of dealing, so the difference appears in her life pattern from what she was previously, as the woman is different physiologically and psychologically from her state before pregnancy and after it, and this is due to the hormonal changes occurring from pregnancy. (Zahran, 10:2005).

Pregnancy and birth are two sensitive processes on the mother and her newborn and any change happens at their level must have follow-up until the child comes out to the external world with health and safety, and the mother returns to her first nature before all this, this period is very important for what it carries from changes, but birth is somehow difficult and sensitive it is linked with a mixture of feelings of fear and pressure especially when its date approaches, there are women who pass through a normal pregnancy and delivery period while others live a dangerous and sudden situation may force to program a cesarean operation in the last minutes of advanced labor because natural birth is impossible, and this without doubt puts the woman in front of a state of severe psychological

pressure may cost her her psychological health afterwards, especially if she passed through all these painful experiences, and ends with raising a different child, and several studies were conducted on the woman exposed to cesarean operation and psychological pressure and anxiety generally, where Rehali (2020) conducted a study of death anxiety among pregnant women approaching the cesarean operation, and concluded that women approaching birth with cesarean operation are susceptible to death anxiety infection and with high degrees also the multiple births of woman increases her exposure to death anxiety (Khoula Rehali, 2020),

In the psychological context resulting from the birth of autistic child, autism is considered one of the most prominent disorders that children are affected with in our era, not only one of the most complex diseases being it is characterized by loneliness and closure on the self but its effect extends to include several aspects including cognitive and linguistic and emotional, and autism is considered one of the most difficult disorders that the child may be exposed to and its effect extends to the family as a whole especially the mother, also it is considered one of the most disorders that are difficult to understand and find treatment for it, Kanner says that autism disorder in children appears in the inability of children in belonging to individuals and situations since the beginning of their lives (Mcgregor, Mnez, Cebula, & Gomez, 2009), and therefore, autism took great attention from scientists and researchers specialized in our contemporary world, and that is because of its effect on the development in this child.

Although autism is considered part of human conditions but the appearance of this type of conditions is considered somehow recent, as the American psychiatrist Leo Kanner is considered the first who launched the name of autism and described its pathological condition and that was in the year 1943. (Al-Zuriqat, 2016, 21), and Kanner's goal was to separate this pathological condition, and classify it in a separate way from other psychological

pathological conditions that children suffer from, where the interest in autism disorder started again which is not only a behavioral communicative disorder, according to the American Association of Psychiatrists (APA) in the fifth new edition of the Diagnostic and Statistical Manual of Mental Diseases (DSM-5) it was defined that the deficit in autistic children appears in the form of deficiency in communication with its two types verbal and non-verbal and social interaction and with limitation and repetition of behaviors, interests and activities (American Psychiatric Association, 2013) so some cases can acquire quasi-normal linguistic abilities while other cases remain non-speaking and do not acquire linguistic abilities.

As mentioned previously, the autistic child differs from normal children, this makes him characterized somehow with isolation from others and cutting connection with them, so he becomes unable to learn the skills that the normal child learns, and in the summary of the biological hypothesis which says until this moment that it seems that autistic children are victims of some organic defects that cause them failure socially and mentally and however we are still far from determining the more accurate nature of the organic defect causing autism (Locke, Banken, & Mahone, 1994, Alloy, Jacobson & Acocella, 1999)

All these interactions around this disorder and the research in it affect and are affected on all aspects of his life including the family one, especially the mother being she is the closest person to her child she may be always suffering from the permanent and excessive thinking around the future of her autistic son because she is the responsible for taking care of him and protecting him, this makes her pass through sudden and repeated panic attacks and continues for few minutes or more manifested in panic attacks which are considered among the manifestations of anxiety which is considered one of the symptoms of panic attacks.

What the woman who gives birth by cesarean operation passes through is a state of

psychological pain and suffering as a result of that type of difficult operations especially on the psychological level, this latter is a state that generates enough of anxiety and fear and aggressiveness and disturbed psychological experience on all directions, may return to the quality of her first identifications about the idea of mother generally? or may be linked with sexual fears and fantasies she has in her early childhood stages, but in general the results of this operation expose her to the physical pain first naturally, and here she lives the pain again in her suffering with trying to adjust the behavior of her autistic child which is really what concerns us here, and it is one of the important factors that we seek to develop it in the future, and the psychological experience is considered one of the dimensions of mental health being it is a state in which the person feels with sources of psychological compatibility with himself first then with his society that he belongs to, so the more the compatibility increased she felt happiness and joy and comfort, and this satisfaction that the mother lacks when her son is diagnosed with autism disorder in most cases.

Especially that the reality of taking care of the autistic child in our society is considered low due to the lack of specialists and centers taking care of this category, and this made the families of autistic children suffer from additional pressures and draws many question marks for these families around this disorder.

Psychologists and workers in regular and special education agree on the extent of importance and place of psychological counseling in caring for retarded children or individuals and mental retardation in particular (Nasrallah 150, 2008), so what about all other disabilities, especially those in which the disabled person does not have knowledge that he constitutes a disability for his parents, or that he occupies their mind from all aspects especially the future ones.

As a result of the above, the family of the autistic child needs to shed light on it especially the mother and the psychological experience she

has and this study came in order to raise the following problem:

- Does the subject of the autistic child relate to the psychological experience of the mother and the identifications of the mother about the Mother in the mother who was exposed to cesarean operation?
- What are the perceptions of the mother around the condition that her son will end to in the future?

2.2 Study Hypotheses

The hypothesis has a direct relationship with the research result, it is probabilistic and temporary answers for a question raised in the problem, where the hypothesis is subjected to field testing, and accordingly the research hypotheses were as following:

- The subject of the psychological experience of the mother with her autistic child may relate to the quality of fragile identifications of the mother about the mother due to her exposure to cesarean operation.
- The subject of birth of autistic child may raise future concerns around the future of the autistic child.

2.3 Study Objectives:

Revealing the subject of life satisfaction and its degree in the mother of autistic child and linking it with the quality of psychological identifications she has.

- Knowing whether the mental health in women of the research group is linked in a clear and flexible way with the subject of birth of autistic child and all the fantasies that are linked with them the perceptions of the mother about the image of the mother.
- Revealing the view of the mother around the future of her autistic child.

2.4 Importance of the Study:

Any researcher must seek to study a new and vital subject, and what pushes him to that is observing the phenomenon to be studied and his interest in it, and it remains in his view of importance that is manifested in his outlining of a set of objectives and this is what our study sought, and that is by shedding light on a very important segment which is the mother of the autistic child who was exposed to cesarean operation, and the importance of this study is manifested in providing psychological and social support for mothers who take care of children affected with autism, and that is because of their pivotal role in raising these children and providing the necessary care for them. Also the study contributes in revealing the mental health that these mothers suffer from, and researching in the quality of their identifications which helps in reducing its effects and improving the quality of their lives. And the importance also emerges in shedding light on the size of responsibility that the mother bears, and the need to support her to enable her to perform her role with efficiency, which reflects positively on the child and the family and the society as a whole.

2.5 Defining Concepts Procedurally:

Psychological Experience: It is the total of the psychological state where the woman feels it as a result of her interactions with the social environment, and is affected by several factors including health and material and emotional, and may reflect feelings such as life satisfaction or a state of anxiety and tension.

And it is the analysis deduced through answering the questions of the semi-directed interview prepared especially for studying the psychological experience in the woman exposed to cesarean operation that resulted in an autistic child.

Quality of Identifications: or quality of identifications, and it is unconscious psychological mechanisms in which the pregnant woman adopts the characteristics and behaviors and role of her mother, and makes it part of her identity especially during birth, where she builds on it her personality and her psychological defenses, she evaluates it based on

the extent of its strength or its fragility and its effect on her mental health, so it helps her basically in adaptation and natural birth.

Mothers of Autism Children: They are the mothers who raise children affected with autism who resulted from cesarean operation, and they face big challenges in caring for them and supporting them in communication and behavior development side by side.

Cesarean Operation: It is a surgical operation that the pregnant woman is exposed to after natural birth becomes impossible which pushes the specialist in gynecology and obstetrics to resort to this type of difficult birth through cutting the abdomen of the pregnant woman and extracting the fetus, and it is done under general or partial anesthesia.

2.6 Study Limits:

Temporal and Spatial Limits: The study was applied on several time periods starting from 20/03/2022 until 04/04/2022 the hospital institution Sleiman Amirat in - M'sila - "follow-up with the clinical specialist"

And starting from 18/11/2024 until 05/12/2024 autism children annex in M'sila.

Human Limits: The study sample was represented in women mothers of autistic child who were exposed to cesarean operation and their number reached 02.

3- The Field Side:

3.1- Method and Tools:

Study Methodology: Choosing the appropriate methodology is considered one of the pillars on which scientific research is based, as it contributes directly in directing the researcher's steps towards achieving his objectives with objective accuracy.

And the methodology is defined as it is determined by a set of procedures and accurate methods in order to reach a result, and the methodology in science is an essential issue and where the procedures used during the

preparation of research and its implementation are what determine the results. (Angers, translation Sahraoui and others, 2000, p. 36). (Bushra Sabrina, 2018-2019, p. 48).

And in line with the nature of the current study which aims to study the psychological experience and the quality of identifications in the mother of the autistic child who was exposed to cesarean operation, it was necessary for us to rely on the clinical methodology "clinical" for its suitability with the nature of this study that imposed on us following this methodology without others and which in turn allows studying individual cases in depth study without comparison nor generalization and this is what serves the subject of our study, also it is the most suitable for collecting the largest possible amount of information about the cases through contact with them, in addition to that it is considered one of the most used methodologies and common in psychological studies.

3.2- Study Population and Sample:

The basic study in scientific research is considered the most important step, where it aims to explore the concepts and essential issues linked with the research subject, with focus on building a solid knowledge foundation that supports the deep understanding of the studied problem, and it is also considered the starting point for developing hypotheses and research questions. So starting from the original population the appropriate sample is tested and due to the nature of any scientific study it imposes on the researcher choosing an appropriate and suitable research sample and to achieve the research purposes we must choose the study sample.

Where the sample was represented from two cases each case is a mother of an autistic child resulting from cesarean operation, this and several interviews were conducted by relying on the semi-directed interview guide and applying the life satisfaction scale, and that on several periods.

3.3- Study Sample Characteristics:

Table 1: Shows the study sample characteristics

Case	Age	Number of cesarean birth times	Medical history before performing cesarean	Age of autistic child
First	35	01	None exist	3 years
Second	28	01	None exist	6 years

Table (01) clarifies: and mentioned above the specifications and characteristics of the basic sample represented in two cases who underwent cesarean operation their ages range between 28 to 35 years.

4- Processing and Statistical Methods Used:

4.1 Used Tools:

To conduct a correct study it is required to choose appropriate tools and means that help in collecting the necessary information and data through which reaching accurate results that serve the researcher's study, and accordingly we relied in our research on the following tools.

4.1.1- Semi-Directed Interview:

Perhaps one and the most common techniques in scientific research and most used in social sciences is the scientific interview with its different types because of its importance in collecting information and data that enable the researcher to reach the results to be achieved and accordingly the nature of the research that we conduct imposed on us using the semi-directed clinical interview because it serves the subject of our study.

And it is one of the types of interviews in scientific research, and it is defined as it is a method from good methods for revealing and solving problems and this requires objectivity and accuracy and that the research be far from bias and personal whims. (Rajai Iman, 2017, 2018, p. 46)

Where it is defined as it is a series of questions from which the researcher hopes to get an answer from the examined person and it is

understood that this method does not take the form of investigation but rather the necessary subjects for the study enter into it during a conversation that ensures a large amount of freedom of action, and the researcher is keen not to suggest direct answers, or indirect (Hassan Ghanem, 17:2003).

And "Chiland Colette" defines it as one of the most common tools for collecting information as the clinical researcher uses it to contact with the examined person and we mean by the clinical interview the exchange of sayings between the examiner and the examined person, and the examiner must be with a listening ear and always facilitates speech taking into consideration the non-verbal communication (Chiland Colette, 1989:22).

4.1.2- Interview Guide:

It is that form that includes the state of the mother subject of the study and is used as a tool for collecting qualitative data with the aim of knowing her psychological experience and the quality of identifications she has due to the cesarean operation and the autistic child, and this interview helps us in collecting important information such as name, age, and type of birth, number of children, social status and other basic data and the interview questions were prepared in a semi-directed style, where it includes basically open questions that allow the sample the freedom in expressing her thoughts and feelings without restriction which allows revealing the extent of her acceptance of her current situation and her satisfaction about her life, also some closed questions were included when needed, to guide the mother and to not go

out from the interview subject we reformulated the questions in simple and understandable language to suit the mother's cognitive and linguistic level, that with the aim of facilitating interaction and ensuring obtaining accurate and complete answers to achieve the study objectives, and it was passed to three professors from the specialization for the purpose of refereeing it and modifying it when needed, and accordingly a set of axes were determined that revolve around the interview questions and they are as following:

- **First Axis:** The psychological experience of the woman before birth aims to know the psychological state of the woman and the quality of her identifications during the pregnancy period and her perceptions about the mother and which contains five questions.

- **Second Axis:** The psychological experience of the woman when she is exposed to cesarean operation aims to know the psychological experience of the woman after birth and which contains six questions.

- **Third Axis:** The mother's perception of her current life with her autistic child and her future expectations after delivery aims to know the mother's future aspirations and consisting of seven questions.

4.2- Life Satisfaction Scale: It was prepared by the researcher "Kaddour Nouibat" in the year (2013) so that it is valid for use in the local environment, and even on other Arab environments for adult individuals males and females. And the scale items were formulated which reached (34) items according to the five-point Likert pattern (applies to me very much, applies to me often, applies to me a little, does not apply to me, does not apply to me at all) and it was adopted in our current study to monitor the psychological state of the mother after her son's diagnosis with autism.

As for the answer method it is by putting the mark (✓) if the statement applies to the examined person and the response is chosen from among five alternatives, where individuals choose between the alternatives (applies to me

very much, applies to me often, applies to me a little, does not apply to me, does not apply to me at all) and the answer with (applies to me very much) means took the mark (05) and the answer with (applies to me often) took the mark (04) and the answer with (applies to me a little) the mark (03) and the answer with (does not apply to me) took the mark (02) and the answer with (does not apply to me at all) the mark (01).

Fields of interpreting the degree obtained through the scale:

- First field: from 34 to 79 low satisfaction about life.

- Second field: from 79 to 123 medium satisfaction about life.

- Third field: from 123 to 170 high satisfaction about life.

5- Results and Discussion:

Presentation of results obtained from the first case:

Personal data: Name: N – Age: 35 – Number of children: 02 – Educational level: university – Type of birth: cesarean

Interview duration: 35 min – Husband: simple worker – Work: housewife.

Summary of interview with the case "N":

The examined person "N" is 35 years old, with university scientific level, staying at home, her social situation is normal, a woman of medium height, slightly full body, her external appearance was characterized by simplicity, she seemed comfortable and signs of fatigue and exhaustion did not appear on her, she entered the hospital on 28/03/2019, she underwent cesarean operation for the first time because her natural birth was impossible in the last minutes of her pregnancy although she gave birth before naturally, she does not have any medical history.

Analysis of interview with case "N":

From the semi-directed interview with the case we noticed that the case is calm always smiling during the interview through her

answers, a set of psychological and emotional indicators can be extracted that reflect the psychological experience that this mother lives being she feels the difference from the rest of mothers, and the case showed her desire to participate as she was very understanding and especially that she is educated and cultured.

And the mother acknowledged her feeling of some difference from the rest of mothers especially that she raises an autistic child the matter that increases her feeling during family meetings and especially that he is the only one with this condition in all the family, but this feeling seems that it no longer constitutes a big crisis for her, where she indicated that she "got used" to this situation, this indicates a certain level of adaptation and acceptance.

And the mother narrated to us everything related to her pregnancy and her birth and her perceptions in the future, and just entering this subject she revealed her feelings towards this child in the pregnancy period and how she was eager to meet him with health and wellness, so her pregnancy joy was indescribable according to her saying because she was waiting for him she and her husband together very happy to enlarge the borders of their family to the second child, and this indicates the marital understanding and the extent of her compatibility especially the joy of planning for pregnancy.

Then we addressed talking about her pregnancy period and her relationship with her mother but she clarified that she passed through a wonderful state at the beginning of pregnancy but the problems with her mother during her pregnancy period made it somewhat difficult for her what remained from it.

But the examined person blocked our talk around this subject and completed her talk about her joy with her newborn, and by addressing the subject of her feeling that she felt the moment of her knowing that she will undergo cesarean operation "in that minute I thought of mama, and I was afraid that I die while she is angry at me", here the examined person shows her fear from the mother role that she is approaching after

delivering this newborn, and she continues her talk "they told me there are those who they enter them to the operations room and they give birth naturally", and here we conclude that she still wants to try to give birth naturally but her mother's image in front of her in these moments may make her want to keep her newborn in her unconscious inside her womb, but she was repeating in that moment "I wished in that minute that my newborn be okay this is place", which indicates that she did not care about the operation as much as she cared about her newborn's safety and her safety of course, and by returning to evoking her mother's image before performing the operation and that in the last minutes so that returns maybe to the distorted image that she lived in her childhood also it indicates her unconscious unwillingness to give birth being she sees in herself her mother "the mother/projection, this pushed her to the cesarean birth and all that became difficult on her child although she does not suffer from any other diseases.

As for her image of her body the mother expressed "the place did not come in it deformity thank God.....yes there are those who say deformity" change in her voice tone then silence trying to hide her feelings to show that she is not interested at all in that then she continues her talk "thank God that I returned safe to my husband nothing concerns me and the children are in good condition the most important joy" here she shows her positive view with her gratitude for the coming of her child which she considered the most important joy for her instead of caring about her view of her body, and this highlights the role of the cultural factor that differs from one society to another, for example what we find normal in the Algerian environment is not considered normal in Arab societies and vice versa is true, and the same thing for the view of the Algerian woman to her body after performing the cesarean operation differs from the view of the Western woman by virtue of the view of societies and difference of cultures, and therefore we find the examined person not caring to a large extent about her body image if we

compare that with the image of the Western woman.

Then by addressing the way in which the mother sees this child diagnosed with autism spectrum and his age is three years at that time, and the extent of her satisfaction about her current life with him, in addition to her future aspirations, and the goals that she seeks to

achieve despite the existence of that disability, in her answer the examined person expressed that she will stand with her son until he reaches independence and she will do the impossible for him because he is a piece from her, and that she does not consider him a problem in her life but he is a blessing from God and she will be rewarded for it by the Creator.

Table number (02) shows the results of the examined person (N) in the life satisfaction scale

Number	Statements	Applies to me very much	Applies to me often	Applies to me a little	Does not apply to me	Does not apply to me at all
1	I feel confidence when performing my work	×				
2	I feel satisfaction about my family		×			
3	I see that my life is wonderful deserves that I enjoy it		×			
4	My presence inside my family makes me feel reassurance	×				
5	I challenge all difficulties to achieve my ambitions			×		
6	I have successful relationships with my friends		×			
7	I spend most of my time enjoying what I accomplished in life	×				
8	I enjoy strong determination to accomplish what I want	×				
9	I feel security among my neighbors		×			
10	I feel optimism while I look at my future			×		
11	I feel satisfaction with what I achieved from goals until now				×	
12	I practice my hobbies in company of my friends		×			
13	I achieved most of what I planned for			×		
14	I enjoy constructive interaction with others				×	

15	I obtained better than what I was expecting		×
16	My achievements are continuous make me feel self-confidence	×	
17	I love forming strong friendships with others	×	
18	I feel that I have many possibilities for success in life		×
19	Others' criticisms do not affect my determination		×
20	My family is the source of my happiness	×	
21	I feel that life sends peace of mind to me	×	
22	I feel mutual affection with my family members	×	
23	I imagine that my life is a model to be followed	×	
24	My self-confidence is behind what I feel of hope	×	
25	I am happy exchanging opinions with my friends		×
26	I believe that my life has real value	×	
27	My family relationships are filled with love and respect	×	
28	Others praise me for my ability to face life circumstances		×
29	I have ability to solve my problems	×	
30	I find my comfort in the neighborhood where I live	×	
31	I know how to achieve my goals		×
32	Often with what I participate in works that happen in the neighborhood		×
33	Often others admire my advice and opinion	×	

34	I spend enjoyable time with my neighbors	×
Total sum		123

Presentation of test results for case "N": After finishing conducting the first interview with case "N" we applied the life satisfaction test on her with the aim of knowing the level of her acceptance of her life, and accordingly we conclude that what came in the semi-directed clinical interview is compatible with the results of the life satisfaction test on her, where the scale scoring came and collecting raw points from the positive and negative items as shown in the table above to obtain the total sum estimated at (123)

Lowest possible degree $34 \times 1 =$ (if all answers are "does not apply to me at all")
Highest possible degree 34×5 (if the answers are "applies to me very much")

And accordingly this degree indicates a high acceptance level and this is clear through her answers on most of the positive statements with acceptance we mention from them (21, 22, 23) and that with degrees (5, 5, 5, 5) through her feeling of belonging and happiness and satisfaction and acceptance.

Analysis of the first case "N":

It becomes clear to us that the first case enjoys a high level of life satisfaction through what the results of the life satisfaction scale and the semi-directed interview indicated to, also it became clear to us that the case does not suffer from psychological pressure resulting from the autistic child but on the contrary completely, and that confirms her acceptance of her situation as a woman subjected to cesarean operation, and her not caring about her body image and her acceptance of her child and her readiness to raise him whatever his disability is, and despite all this but we sensed through some of her answers that she sometimes finds herself in conflicting situations and the feeling of exhaustion and intellectual fatigue comes to her but this is considered a natural thing that any raising woman can feel, and accordingly we conclude

that case "N" in general lived a distorted childhood through her identification with the mother role, the matter that programmed her to cesarean operation in the last minutes despite not recording any medical history for her, and her conflict with the mother during the pregnancy period is what revived this image during delivery and made this operation difficult, but we do not have any evidence that these fragile identifications affected this child with this disorder, but also we cannot say that this operation as a whole may pass peacefully naturally, and in general case "N" is not afraid at all and this indicates that she is accepting of her situation and not anxious about giving birth again in the future.

And finally we say that what came in the semi-directed clinical interview is compatible with the test results which is that the examined person has high life satisfaction.

Presentation of results obtained from the second case:

Personal data: Name: M – Age: 28 – Number of children: 01 – Educational level: secondary – Type of birth: cesarean

Interview duration: 35 min – Husband: worker in a company – Work: housewife.

Summary of interview with case "M":

The examined person "M" is 28 years old, with secondary educational level, staying at home, married since about 2017 approximately, her social situation is normal, she does not have any medical history, thin body, with simple dress and low voice tone, signs of exhaustion appeared on her a little, she entered the hospital on 14/07/2018, she was subjected to cesarean operation after her first natural birth became impossible, her son was diagnosed later with autism spectrum and he is registered at the autism children annex in M'sila state.

Analysis of interview with the second case "M":

Through the semi-directed clinical interview the case's answers were direct and she was frank, so she confirmed that her pregnancy period was not normal and that she was feeling this catastrophe according to her saying from the beginning, and she reached thinking about getting rid of the pregnancy in a period from the periods, but her faith in her God was stronger, the examined person declared that she does not like raising children much and that she got tired with her child, and she got married at an age that was supposed she continues in it her study, but her parents insisted on marriage, and her answers contained many details, and the first thing is her husband's joy with her pregnancy after hearing the news in her saying "don't tell me you are with pregnancy..." unlike her completely, she was living a kind of depression and feeling of failure, because she knew in her inner self that she deserves what is better in terms of her educational level she wanted to complete the study.

The examined person stated that pregnancy was very easy on her and she did not pass through any complications during it, in her saying "everything normal coming normal alive I don't have at the last moment everything changed" her facial expressions suggest astonishment, as for her fear from birth "no I wasn't afraid when they gave me my date and they told me where you will give birth I remained fighting normal until that day came.", she was waiting for her birth date normally considering that her health condition is good, except that she was shocked after everything changed in a moment, she still remembers that day, this is what we noticed in her talk and what affected her strongly is that it never occurred in her mind that she may be exposed to cesarean operation so often she was indicating that her conditions are stable and her health condition is good, and by addressing what she felt after she learned about the necessity of her undergoing the operation "the midwives came to me and kept turning me I started saying what's wrong with me praise God I said they found something in me or

the child has something" it becomes clear to us her fear and anxiety especially that she was not aware previously that she will undergo cesarean operation, here the mother evoked the situation with all its details, and according to her saying she until now did not understand the reason for the transformation of her birth type from natural to cesarean.

And the mother expressed her feelings clearly in our question about the moment of her child's diagnosis, where she expressed her feeling of fear and said frankly that the news *failed me and I will be fooled* especially that she was not aware previously of autism disorder, and she sufficed by saying: *I didn't know, and I cried a lot*. This ignorance of the disorder increased her feeling of anxiety and confusion after diagnosis, she started feeling that her life changed greatly, and she described her condition with: *everything changed on me, and I'm not like I was, I got tired psychologically*, which reflects the effect of the condition on her psychology and her social life. The mother talked about the lack of support clearly: *there is no one who feels me, even those with me at home did not understand me*. confirming her feeling of loneliness. Despite that, she tries to adapt, but she also says *I got tired, I feel I'm not able to reach everything alone*, and it is a sincere statement that reflects her emotional exhaustion what increases her pain is the society's view, where she expressed with bitterness: *people look at us with an incomplete look I got tired*, and it is a heavy phrase that reveals the extent of the negative effect that floats from the society on the individual.

Regarding the future, her answer was a mixture of anxiety and hope, as she said: *I don't know what will happen after, I'm afraid to leave him alone*, but she hopes that her son becomes stable and independent, then she was silent a little "and works", but she admits the lack of guidance: *there is no one who guides me and advises me, and from among them I learn alone*, and despite moments of weakness she repeats: *my God is with me*, then she addressed talking about her desire to have children in the future yes not now but I will have more" although she

showed her desire to give birth in the future but we noticed her fear somewhat from the idea of her undergoing cesarean operation again.

Table number (03) shows the results of the examined person (M) in the life satisfaction scale

Items	Applies to me very much	Applies to me often	Applies to me a little	Does not apply to me	Does not apply to me at all
1- I feel confidence when performing my work			×		
2- I feel satisfaction about my family			×		
3- I see that my life is wonderful and deserves that I enjoy it				×	
4- My presence inside my family makes me feel reassurance		×			
5- I bear all difficulties to achieve my ambitions		×			
6- I have successful relationships with my friends			×		
7- I spend most of my time listening to what I accomplished in life		×			
8- I enjoy strong determination to accomplish what I want		×			
9- I feel security among my neighbors		×			
10- I feel optimism while I look to my future				×	
11- I feel satisfaction on what I achieved from goals until now				×	
12- I practice my hobbies in company of my friends				×	
13- I achieved most of what I planned for				×	
14- I enjoy constructive interaction with others				×	
15- I obtained better than what I was expecting				×	
16- My continuous achievements make me feel self-confidence				×	

17- I love forming strong friendships with others		×
18- I feel that I have many possibilities for success in life		×
19- Others' criticisms do not affect my determination		×
20- My family is the source of my happiness	×	
21- I feel that life sends peace of mind	×	
22- I feel mutual affection with my family members	×	
23- I imagine that my life is a model to be followed	×	
24- My self-confidence is behind what I feel of hope		×
25- I am happy exchanging opinions with my friends		×
26- I believe that my life has real value		×
27- My family relationships are filled with love and respect	×	
28- Others praise me for my ability to face life circumstances	×	
29- I have the ability to solve my problems	×	
30- I find my comfort in the neighborhood where I live		×
31- I know how to achieve my dreams	×	
32- Often I participate in works that happen in the neighborhood	×	
33- Often others admire my advice and opinions		×
34- I spend enjoyable time with my neighbors		×
Total sum		104

Presentation of test results for case "M":

After finishing conducting the interview with case *M* we applied the life satisfaction test on her with the aim of knowing the degree of satisfaction she has, and that by calculating the satisfaction perception indicator through scoring the scale and collecting raw points from positive and negative items as shown in the table above so we obtained a total of raw points equal to (104)

And accordingly this degree indicates a medium satisfaction level in case *M* and this becomes clear through her answer on the items.

Analysis of case "M":

Through all the results obtained in the clinical interview and the results of the life satisfaction scale test it became clear that case *M* lives medium life satisfaction, where her degree was estimated at 104 and that through the answers of case *M* on the items.

The results of the life satisfaction scale and the semi-directed interview show that the examined person *M* enjoys a medium level of satisfaction about the different aspects of her life. The answers showed a balance between the statements that apply to her with varying degrees, which reflects the existence of a general feeling of acceptance of her life, even if some anxiety or dissatisfaction accompany it in specific aspects, but she prefers isolation sometimes, from the psychological side it seems that the examined person suffers from internal conflicts she lived during childhood the matter that was revived during delivery and which led to her programming to cesarean operation despite the ease of the pregnancy period, in addition to that the examined person does not feel that she always has strong social support, with the presence of social psychological needs she is still dealing with them until our day.

Analysis of case "M":

Through the results obtained in the semi-directed clinical interview and the life satisfaction scale, it became clear to us that the examined person "M" suffers from high psychological pressure, and this is due to her not comprehending her ambiguous situation, her

pregnancy period was normal and her health condition was stable and everything was natural, and that made her very reassured and waiting for her birth day normally, but suddenly and in the last minutes of her pregnancy the situation changed to find herself in severe fear and anxiety trying to understand what is happening around her to discover after that the necessity of her undergoing cesarean operation and this was like a shock for her especially that she was not prepared psychologically for that, and this was apparent in some of her answers on the scale, also her feeling of losing determination appeared, and however she was accepting of her situation and satisfied with her child and ready for motherhood and not caring about her view of her body as a woman subjected to cesarean operation and this is what she declared during the interview, but this does not necessarily mean that she does not suffer from high psychological pressure, and what we noticed is that she still remembers the day of her undergoing the operation and she still looks forward to knowing the reason for that happening, as for her relationship with her mother she clarified that it is a relationship that is considered somehow dry but it is improving in the recent period, but she does not consider it an approach she follows during raising her children in the future, she does not provide her that great support now and does not expect that from her according to her description, and accordingly we concluded that the case suffers high pressure and we find this clear in her answers, and the examined person confirmed that despite her undergoing the cesarean operation but she is still under shock, especially that her child is diagnosed now with autism, she did not pass through one shock only, but her child now is the bigger shock and she does not know if she can bear more, and this indicates the lack of feeling of case (M) with complete comfort yet, she feels exhaustion and intellectual fatigue, also she finds herself worried and this is due to the fear that she lived and lives now with her child, but we find her optimistic about the future and ready to raise and care for her child and she has the desire to give birth despite her fear somewhat from the idea of her undergoing cesarean operation again.

Discussion of Study Results:

Discussion of the first hypothesis: "The subject of the psychological experience of the mother with her autistic child may relate to the quality of fragile identifications of the mother about the mother due to her exposure to cesarean operation."

After applying the psychological test on the two cases and through the semi-directed clinical interview, we found that the first hypothesis was achieved relatively and this appeared through the mental health of the two cases, where it appeared to us that the two cases enjoy a medium to high level of mental health and life satisfaction as a result of supporting factors, such as continuous family support "the husband" and awareness of autism disorder and ways of dealing with it also experience and training and psychological support play a big role in enhancing mental health which allows the mother to adapt better and achieve balance between child care and caring for herself and her mental health, on the other hand we find that case (M) her mental health is medium and tense and anxious and exhausted because of the continuous pressures related to child care and his special needs, in addition to society's view and absence of sufficient support sometimes, also her view of herself and her attempt to achieve herself alongside raising her child the matter that made the task somewhat difficult for her.

Discussion of the second hypothesis: "The subject of birth of autistic child may raise future concerns around the future of the autistic child."

And it becomes clear to us through the interview and the test that the two cases are satisfied with God's decree and destiny towards their autistic child, sometimes the cultural level plays a big role and other times the religious factor plays a bigger role in facing all challenges related to patience on affliction and faith in fate and destiny, the matter that raises the level of mental health in the mother and her satisfaction about her life, so the challenges associated with caring for the autistic child may be high and similar in effect on mental health regardless of

the mother's age, and regardless of the autistic child's order, as all mothers face a set of pressures associated with the stereotypical behaviors of the autistic child, and communication difficulty, in addition to social and economic challenges, despite this but there are perceptions that indicate the possibility of differences existence, where it is possible that younger mothers are more exposed to anxiety and pressure because of lack of experience, or that older mothers may deal with the matter in an opposite way.

General Conclusion:

Women are considered among the most categories exposed to psychological pressures and conflicts, especially when she becomes on the verge of performing her role as a mother, so all sexual fantasies that are considered a pillar for good identifications about the mother's role as a mother are revived, and therefore the more the identifications were fragile the woman was exposed to cesarean operation the matter that may affect the newborn afterwards especially if she passed through long and difficult labor, and considering that many women refuse to be exposed to this type of birth although it is the only solution to save her life and her fetus's life together in difficult situations in which natural birth becomes difficult, and accordingly the current study targeted the woman exposed to cesarean operation and excluded from all chronic diseases that may push her to this type of operations especially that which was programmed in the last minute then resulted from this type of birth an autistic child, and that with the aim of knowing if there was a connection between this cesarean birth and psychological pressure and the autistic child, and revealing the quality of psychological pressures in the pregnant woman subject of the study.

And the results of the current study resulted in the following:

- The subject of the psychological experience of the mother with her autistic child relates to the quality of fragile identifications of the mother about the

mother due to her exposure to cesarean operation.

- The subject of birth of autistic child raises future concerns around the future of the autistic child.

From the above, we can say that the results reached remain within the limits of the current study and cannot be generalized, and we extracted through our research the necessity of supporting the woman during the pregnancy period and after it, and it would be better if this support is psychological and this to reduce the difficulties and fears that come to her during this period and during delivery and after delivery especially if it is proven that the child is autistic, and therefore preparing her in a better way so that she helps her child on the difficulties of the coming life.

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