

Loss of identity in mothers of atypical children: an analysis of caregiving contingencies and the suppression of personal repertoires.

Loss of identity in atypical mothers: an analysis of the contingencies of care and suppression of personal repertoires

Loss of identity in atypical mothers: an analysis of care contingencies and suppression of personal repertoires

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SUMMARY

This study analyzes the impacts of diagnosing children with diverse needs on the...

The identity of mothers of atypical children. The intensification of caregiving demands reorganizes the routines of these women, restricting access to social, professional, and emotional reinforcement, as well as favoring the gradual suppression of previously maintained personal repertoires. The phenomenon presents an important social dimension, considering that caregiving is still culturally attributed to women, frequently associated with the absence of a support network, inequality in the division of family responsibilities, and insufficient public policies aimed at neurodivergent families. Research on atypical motherhood indicates high levels of emotional overload, psychological distress, and career abandonment, as many mothers reduce or even abandon work, social activities, and self-care.

The same needs are met to satisfy the incessant demands of their children. In this way, the perpetuated care directly affects the autonomy, mental health, marital relationships, and social involvement of these women. The research is characterized as a qualitative and descriptive-analytical literature review, carried out in the SciELO, PePSIC, and Google Scholar databases, from 2016 to 2026.

Keywords: atypical motherhood. Behavior analysis. Maternal burnout. Identity.

1 INTRODUCTION

Motherhood is an experience marked by emotional, social, and other changes.

Identity issues in women's lives. In addition to the responsibilities historically assigned to the role.

As a mother, many women juggle professional, domestic, and emotional roles, which increases...

significantly increases the demands related to care. When associated with motherhood.

atypical, especially given the diagnosis of a neurodivergent child, these demands

These challenges become even more intense as family life begins to involve therapy.

Constant consultations, interventions, and adaptations.

In this context, the mother often assumes the role of primary caregiver.

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experiencing high levels of physical and emotional overload. Studies indicate that mothers of Children with disabilities exhibit higher rates of stress, emotional exhaustion, and burnout. psychological due to the intensity and continuity of care demands (Lobo et al., 2026). Furthermore, the absence of an equal division of family responsibilities favors The concentration of care on the maternal figure further amplifies the burden experienced. by these women (Danzmann; Lunardi; Smeha, 2024).

Given this reality, it is observed that the intense care routine can cause significant impacts on women's personal lives, promoting social isolation and reduced professional participation and the limitation of activities related to leisure, self-care and to affective bonds. The centralization of female identity in the exclusive exercise of Motherhood tends to promote the narrowing of previously maintained behavioral repertoires. in different social contexts.

Machado et al. (2020) highlight that many women, upon becoming mothers, begin to to put oneself in the background, believing that one's social role is limited to the exercise of motherhood. In atypical motherhood, this reality becomes even more evident, since The ongoing demands of caregiving encourage the suppression of related behaviors. to personal, social, and professional life. Studies also show that mothers of children with Individuals with Autism Spectrum Disorder often abandon personal and professional projects. due to the difficulties of reconciling the demands of caregiving with other areas of life, which contributes to feelings of isolation and loss of one's own identity (Emidio; Castro, 2021).

From the perspective of Behavior Analysis, identity is understood as a set of behavioral repertoires shaped and maintained by contingencies of Reinforcement throughout life experiences. The impact of the diagnosis can significantly alter... repertoires related to autonomy and the perception of competence, given that "the mother of a Autistic children (re)construct their identities after clinical diagnosis" (Oliveira; Pinto, 2025).

From this perspective, environmental contingencies are responsible for the selection. maintenance or weakening of certain behaviors throughout life. Thus, when care-related behaviors become more frequent social reinforcement, while repertoires linked to personal, professional, and emotional life leave Instead of being reinforced, a gradual process of identity restriction and suppression occurs. behavioral.

Furthermore, continuous exposure to aversive contingencies, associated with overload,

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The absence of a support network and the intense demands of caregiving favor the development of emotional suffering, anxiety and psychological exhaustion (Martínez Pizarro, 2020). Studies also point out that mothers of children with atypical development have levels of well-being lower than mothers of typically developing children experienced lower levels of well-being compared to mothers of children due to the intensity of care demands and the fragility of support networks. available (Almohalha; Pereira, 2020).

In this scenario, contextual therapies and interventions based on the Analysis of Behaviors are shown to be relevant because they allow for the expansion of repertoires of self-care, the relaxation of rigid social rules, and the strengthening of experiences reinforcing factors in different contexts of a woman's life.

The relevance of this study lies in the need to broaden scientific discussions. Regarding the suffering experienced by mothers of children with disabilities, especially in the face of invisibility. social events that often accompany them. Although the focus of attention usually centers around them. In the diagnosis and assessment of the child's needs, there is little discussion about the emotional impacts. social and identity-related challenges faced by women who are primary caregivers. The absence or fragility of support networks contributes to the maintenance of burnout patterns. physical and emotional strain, reinforcing feelings of loneliness, psychological exhaustion, and restriction of female autonomy. Thus, understanding the environmental variables involved in overload. Maternal understanding becomes fundamental to supporting psychological practices and interventions that favor not only emotional coping, but also the reorganization of Contingencies that maintain restrictive patterns of behavior.

Thus, the general objective of this article is to analyze, through review. bibliographical, how the contingencies of care in atypical motherhood contribute to the suppression of individual repertoires and the consequent loss of personal identity of these women. As specific objectives, the aim is to identify, in the literature, the main variables environmental factors involved in the daily care routine of a mother with atypical individuals, characterizing contingencies of Reinforcement and punishment; describe the process of narrowing the behavioral repertoire. arising from the demands associated with the child's diagnosis; and to understand the repercussions. emotional, social, and relational problems resulting from the deprivation of positive reinforcers in contexts external to maternal care.

The hypothesis is that the intensive care contingencies present in Atypical motherhood favors the maintenance of behaviors exclusively focused on Care, while at the same time contributing to the suppression of behavioral repertoires.

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personal, professional, and social aspects that have been previously established.

It is believed that continuous exposure to aversive contingencies, associated with the absence of these women, centering their self-perception on the exclusive exercise of motherhood. By reinforcing positive patterns in other areas of life, the process of identity restriction is intensified. Thus, the predominance of the maternal role can contribute to the development of Emotional distress, social isolation, and significant impairments to autonomy and quality of life.

life experiences of mothers with atypical lifestyles.

2. Female Identity and Atypical Motherhood

The historical trajectory of women in contemporary times is marked by expansion. their participation in professional, academic, and social spaces, which allows for greater Financial autonomy, social recognition, and personal independence.

Santos (2024) points out that, despite these achievements, motherhood is still associated with social expectations that assign women the primary responsibility for childcare.

In this way, when a woman is placed in the context of atypical motherhood, especially after a child's neurodivergence diagnosis, these demands tend to increase. intensify, which entails changes in routine, social ties, and the way women live. perceives itself (Santos et al., 2025).

According to Bolissian (2024), the process of becoming a mother is marked by pressures. social factors related to the sense of responsibility and maternal obligation, which influences directly impacts the construction of female identity. In this context, motherhood ceases to be It is not just an emotional experience, but also involves reorganizing priorities, behaviors, and interpersonal relationships.

Thus, in atypical motherhood, this reorganization occurs even more intensely. Given the ongoing demands for therapeutic support, specialized care, and Family adjustments resulting from the child's diagnosis. In this context, the woman begins to... to experience significant changes in their routine, social relationships, and perception. constructed from itself, which makes it necessary to understand the impacts of these transformations regarding their identity and behavioral repertoires.

2.1 The Transitional Identity: From the Contemporary Woman to the Post-Diagnosis Mother

The construction of female identity is directly related to experiences. social, cultural, and emotional experiences that women undergo throughout their lives. In society In contemporary times, women have begun to occupy different professional, academic, and... social, expanding their autonomy and diversifying their behavioral repertoires (Neves, 2022).

In the meantime, the advent of atypical motherhood, especially after the diagnosis of The child's neurodivergence tends to abruptly modify these contingencies, causing... that previously reinforced repertoires be progressively replaced by intense ones care demands.

According to Leite (2016), the routine becomes organized according to therapies, consultations, clinical interventions and constant adaptations, centering on the maternal figure, the Most of the responsibilities related to the child's development fall to them. In this scenario, Many women end up reducing their social participation, withdrawing from the job market. work and restricting experiences previously associated with autonomy and self-care.

Mendes (2024) highlights that atypical motherhood often imposes a renunciation. forced into professional life, favoring the suppression of social and individual repertoires. previously held by the woman. This change is marked by intense ambivalence. emotional, in which the woman navigates between historically achieved accomplishments and the new reality imposed by specialized care.

The diagnosis acts as a milestone in identity transformation, causing the Identity previously constructed from social, professional, and individual roles passes to be predominantly associated with the role of mother of a child with special needs. As they state Oliveira and Pinto (2025, p.19), "the mother of an autistic child (re)constructs her identities after the clinical diagnosis", highlighting the subjective impacts resulting from changes in family dynamics and the daily demands of caregiving.

Thus, the loss of a previously constructed identity does not represent just one a change in social role, but also a significant reorganization of repertoires. behavioral patterns maintained throughout life. Barbosa et al. (2025) emphasize that the construction The development of the atypical mother's identity occurs amidst social pressures that reinforce dedication. integral to care, which favors the invisibility of emotional and subjective needs. of the woman.

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Thus, it is understood that atypical motherhood goes beyond the need for adaptation. to a new care routine, achieving significant transformations in how women perceive themselves and position themselves socially. As the demands related to Care begins to occupy a central place in their daily lives, experiences previously associated with autonomy, professional life, leisure, and interpersonal relationships become progressively less frequent.

As a consequence, a narrowing of behavioral repertoires is observed and of female identity itself, which becomes constantly associated with the role of caregiver. In this context, the reorganization of family and social dynamics tends to directly impact the Women's participation in other social spaces, promoting processes of Isolation, invisibility, and the disruption of previously maintained social ties.

2.2 The social perspective and the obstacles to the interruption of social life

According to Leite et al. (2025), the continuous demands present in motherhood atypical development produces psychosocial impacts that go beyond the scope of childcare. directly impacting a woman's autonomy, social connections, and self-perception. As experiences previously associated with professional life, leisure, and... Interpersonal relationships become less frequent, and a progressive narrowing is observed. of behavioral repertoires and female identity, which becomes predominantly linked to the role of caregiver.

Furthermore, intense dedication to care often contributes to the making women's emotional and subjective needs invisible, favoring processes of Isolation and overload. Pastorelli, Viana and Benicasa (2024) highlight that suffering The challenges present in atypical motherhood are not only related to the practical demands of care, but also to the emotional and social transformations experienced by mothers in the face of renunciation. gradually revealing important aspects of their individuality.

In this context, Barbosa et al. (2025) emphasize that social isolation frequently observed in permanent caregivers, it favors the restriction of experiences. external reinforcers of care, contributing to the narrowing of repertoires behavioral and to limit a woman's identity to the exclusive role of caregiver.

Although contemporary society recognizes the transformations that have occurred in roles In women's issues, maternal suffering and exhaustion are still frequently treated as such.

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

individual factors, which obscures the social factors that contribute to the overload of these women.

In atypical motherhood, the woman comes to occupy a space marked by the restriction of social interaction, in which previously reinforcing experiences, present in public life, are replaced by a routine centered almost exclusively on domestic environments, clinical and therapeutic. Furthermore, many mothers still face social judgment regarding the their children's behavior, often being held responsible for their difficulties. inclusion and adaptation of the child in different social spaces.

From an analytical-behavioral perspective, the disruption of social life can to favor the deprivation of positive reinforcers, previously present in interpersonal relationships, in work and leisure activities. In this way, access to reinforcing experiences is reduced. External factors related to care tend to intensify feelings of distress, loneliness, and exhaustion. emotional. Silva (2025) highlights that atypical motherhood produces significant impacts on The lives of these women, especially because the loneliness inherent in ongoing caregiving fosters processes of isolation and physical and mental overload.

According to Souza (2025), the obstacles faced by atypical mothers are also intensified by social discourses and cultural structures that naturalize the centralization of care is taken with the female figure, disregarding collective and institutional responsibility towards of the demands imposed by atypical motherhood. In this context, difficulties related to Access to social rights, psychological support, inclusion, and state assistance is further aggravated. further increasing the vulnerability of these women.

Thus, the withdrawal from social life, the restriction of autonomy, and the progressive Self-forgetfulness should not be understood as individual choices, but as Responses produced and maintained by social contingencies that reinforce exclusive dedication. to prioritize care over the subjective and emotional needs of women.

3. Maternal Exhaustion: Burnout and Caregiver Syndrome

Staying in a routine marked by intensive and continuous demands of Care encourages the development of high levels of physical and emotional exhaustion. psychological issues among mothers of atypical children. According to Ferreira (2025), this situation has been associated with Parental burnout and the so-called caregiver syndrome are conditions characterized by exhaustion. chronic, psychological distress and significant impairment of mental health.

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

Unlike everyday tiredness, burnout is a persistent state of exhaustion resulting from prolonged exposure to highly demanding situations emotional, accompanied by feelings of inadequacy, overload, and progressive loss of personal fulfillment.

According to Maslach and Leiter (2016), *burnout* constitutes a psychological response associated with continuous exposure to chronic stress, manifesting itself through exhaustion, emotional distress, reduced personal fulfillment, and compromised interpersonal relationships.

Although initially related to the occupational context, recent studies demonstrate that the phenomenon also manifests itself in the family environment, especially in atypical motherhood presents situations requiring intensive and prolonged care. In this sense, characteristics that favor the development of this situation, considering centralization of the care provided by the maternal figure and the high emotional burden associated with accompanying her. continuum of the neurodivergent child.

To that end, Campos (2024) highlights the aversive contingencies present in the routine. Mothers of children with Autism Spectrum Disorder contribute directly to the development of psychological distress, anxiety, and emotional exhaustion.

According to the authors, the constant repetition of demands related to care, associated with the absence of adequate social support, it favors the maintenance of behavioral patterns characterized by exhaustion and deprivation of external reinforcing experiences. to the domestic environment. From this perspective, emotional distress does not stem from not only due to the requirements of the diagnosis, but also due to the absence of conditions. Environmental settings capable of providing support, rest, and reorganization of the mother's routine.

On the other hand, Martínez Pizarro (2020) points out that the so-called Syndrome of Caregiver is characterized by the progressive impairment of the physical and emotional health of individuals subjected to long periods of continuous care, especially when there is no Adequate family and institutional support mechanisms. Among the most recurring symptoms Symptoms include anxiety, insomnia, irritability, constant fatigue, social isolation, and episodes. Depressives. In this context, mothers of atypical mothers become particularly vulnerable to... psychological distress, given that a large part of the responsibilities related to Child development remains socially centered on the female figure.

Furthermore, the overload experienced by these women is often intensified by the so-called triple shift, characterized by the need to reconcile Maternal responsibilities, domestic activities, and professional demands. According to

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

Lobo et al. (2026) point out that mothers of atypical children have significantly higher levels high levels of emotional strain due to continuous dedication to caregiving, and limitations in social life and the inadequacy of support networks. The authors highlight that maintaining Prolonged adherence to this routine fosters feelings of guilt, exhaustion, and inadequacy. contributing to the worsening of psychological suffering and emotional vulnerability of these individuals. women.

From an analytical-behavioral perspective, permanence in contexts predominantly marked by aversive contingencies tends to favor responses associated with emotional suffering, isolation, and behavioral exhaustion. Skinner (2003) states that environments characterized by the predominance of aversive stimuli They produce patterns of avoidance, suffering, and reduced behavioral variability. especially when the individual has little access to positive reinforcing experiences. In atypical motherhood, the absence of opportunities for self-care, rest, leisure and participation Social factors contribute to the progressive narrowing of women's behavioral repertoires. intensifying the emotional impacts resulting from the burden of continuous caregiving.

Furthermore, the invisibility of the emotional needs of mothers of children with disabilities contributes to perpetuate cycles of illness, often neglected by policies. public and health services. In many cases, institutional attention remains focused exclusively on child development, disregarding the impacts on the woman responsible for daily care. Silva et al. (2025) highlight that the absence of Public and family support is one of the main factors associated with suffering. emotional distress in mothers of children with atypical children reinforces feelings of loneliness, helplessness, and exhaustion. psychological.

Therefore, it is understood that maternal exhaustion in atypical motherhood should not be... to be interpreted not as an individual weakness, but as a result of social contingencies, cultural and institutional norms that center care on the female figure without offering support. proportional to the demands imposed by this reality. In this context, it becomes fundamental Strengthening psychological, social, and institutional support strategies capable of to minimize the impacts of continuous overload and to promote better health conditions. mental health and quality of life for these women.

4. The Support Network as a Protective Factor for Mental Health

MATERNA

Given the multiple demands of atypical motherhood, the support network plays a crucial role. a key role in reducing emotional overload and preserving mental health. of mothers who are caregivers. The support offered by family members, institutions, health professionals and Social groups contribute not only to the division of responsibilities related to care, but also for the expansion of reinforcing experiences, capable of minimizing the impacts of isolation and continuous exhaustion (Campos, 2022).

In this context, the presence of an effective support network enables better coping mechanisms in the face of the demands imposed by the therapeutic routine and the Everyday challenges associated with the development of neurodivergent children.

According to Danzmann, Lunardi and Smeha (2024), the father's active participation in Caring for a child with special needs promotes greater balance in family dynamics and reduces... significantly centralizing responsibilities in the maternal figure. However, the The authors emphasize that, in most families, caregiving remains distributed among... in an unequal way, causing women to continue to bear the greater share of the demands. emotional, domestic, and therapeutic aspects related to the child. This unequal distribution It intensifies feelings of exhaustion, loneliness, and overload, directly contributing to... compromising the quality of life of these women.

According to Santos et al. (2023), the absence of adequate social support constitutes one of the main factors associated with emotional distress in mothers of atypical children, especially due to the reduction of social interaction and the limitation of self-care experiences. According to the Authors, structured support networks favor not only the sharing of practical responsibilities of care, but also the creation of spaces for listening, of Emotional support and validation of maternal experiences. From this perspective, support social services cease to have an exclusively welfare-oriented character and begin to act as an important a tool for psychological protection against aversive contingencies present in atypical motherhood.

In addition to family support, the work of multidisciplinary teams and services is crucial. Specialists also play a significant role in reducing maternal overload. Interventions based on Applied Behavior Analysis (ABA). Psychological support and therapeutic guidance can help not only in

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

child development, but also in the reorganization of the family routine and in reducing stress faced by the mother caregiver. As highlighted by De Moraes et al. (2024), care aimed at mothers of children with Autism Spectrum Disorder, it directly benefits the It promotes family emotional well-being and contributes to strengthening the bond between mother and child. generating positive impacts throughout the family context.

On the other hand, there is a lack of public policies aimed at protecting health. The mental health of mothers with atypical children reveals the persistence of a social logic that individualizes the care and renders invisible the subjective needs of these women. In many cases, the State assistance focuses exclusively on childcare, neglecting other aspects of well-being. emotional impacts resulting from continuous dedication to specialized care. setting, support groups, collective spaces for interaction and welcoming services Psychological factors become fundamental strategies for breaking social isolation and enabling the building of bonds of belonging among women who share experiences similar.

From an analytical-behavioral perspective, environments that foster acceptance and listening... Emotional support expands access to positive reinforcers capable of strengthening repertoires. related to self-care, autonomy, and social participation. Therefore, the presence of A consistent support network can help reduce aversive contingencies. associated with ongoing care, reducing the emotional impacts resulting from overload. Maternal mental health. Thus, understanding the support network as a protective factor for maternal mental health is crucial. This becomes essential for building social and institutional strategies aimed at promotion. of the quality of life and dignity of mothers with atypical characteristics.

4.1 Rescuing self-confidence and self-care: from invisibility to the subject

Rebuilding self-confidence in women experiencing atypical motherhood. requires interventions that go beyond focusing exclusively on the child's needs, directing Attention should also be paid to the emotional, subjective, and social needs of the female caregiver.

During the ongoing care process, many mothers end up restricting their personal experiences and completely reorganizing their routines according to needs of the son, which favors the weakening of repertoires related to individuality, to leisure, autonomy and social participation (Braga, 2015). In this context, the recovery of Self-care represents not only a strategy for promoting mental health, but also

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

an important movement of identity reconstruction.

Machado et al. (2020) highlight the transformations resulting from motherhood. significantly impact a woman's self-perception, especially when the Caregiving needs become central to a woman's routine. According to the authors, psychological support plays a fundamental role in the elaboration process. of these changes, helping women to recognize their emotional needs beyond the The exclusive exercise of motherhood. Thus, strengthening self-confidence is directly linked to this. related to the possibility of reclaiming spaces of belonging, listening, and appreciation subjective.

Furthermore, access to social rights and public policies constitutes an element Essential for promoting the autonomy of these women. Welfare benefits, support. Institutional support, access to mental health services, and support programs contribute to reduce some of the social vulnerability often associated with atypical motherhood. In this sense, understanding women beyond their role as caregivers becomes indispensable for to break with cultural patterns that normalize female self-sacrifice as an obligation. inherent to motherhood (Da Conceição Costa; Gonçalves, 2019).

Therefore, the recovery of female autonomy does not occur solely through individual changes, but also through the reorganization of social contingencies that Historically, they reinforce the idea of women's exclusive dedication to family care.

Finally, the reconstruction of the atypical mother's identity depends on the recognition of their subjectivity, their emotional needs, and their condition as a subject for Beyond motherhood. Valuing women in their entirety enables a return to normalcy. gradual experiences related to autonomy, social belonging, and quality of life. life, favoring a healthier identity reorganization less marked by invisibility resulting from the intensive demands of continuous care.

5 METHODOLOGY

This research is characterized as a literature review of the following approach: Qualitative, with an exploratory and descriptive nature. According to Gil (2008), bibliographic research It is developed from materials already produced, especially books, scientific articles, dissertations and theses, which allows the researcher to critically analyze different productions. on a specific topic.

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

In this sense, the study is based on academic productions about motherhood. atypical, maternal overload and suppression of personal repertoires, with the aim of understanding How caregiving contingencies influence the reorganization of female identity.

Regarding the qualitative approach, Minayo (2001) states that this type of research It works with meanings, beliefs, values, experiences, and human relationships, which allows to understand subjective aspects present in social phenomena. Therefore, the choice for Qualitative research proves to be suitable for the present study, since the investigation seeks to understand the emotional, social, and behavioral impacts of motherhood. atypical, especially with regard to caregiving burden and narrowing of The identity of the female caregiver.

The research also has an exploratory and descriptive character. Gil (2008) highlights that Exploratory research aims to provide greater familiarity with the problem. The research investigates, while descriptive research seeks to describe the characteristics of a given subject. population or phenomenon.

Thus, the study seeks to analyze, in light of Behavior Analysis, the environmental contingencies related to the routine of mothers with atypical lifestyles, observing how Certain social and family conditions can contribute to the weakening of repertoires. of autonomy, self-care, professional life and interpersonal relationships.

The bibliographic survey was conducted in the SciELO and PePSIC databases. The Virtual Health Library (BVS) and Google Scholar, because they are widely used in Scientific research in the fields of psychology, health, and the humanities. In pursuit of... The following descriptors were used in the materials: "atypical motherhood", "maternal overload", "female identity", "autism", "parental burnout", "support network", "Analysis of Behavior, caregiver, and repertoire suppression, combined together through the Boolean operators "AND" and "OR".

The time frame adopted covers publications from 2015 to 2025, aiming to guarantee the most up-to-date scientific information on the topic investigated. However, other methods were also used. classic authors and reference works in Behavior Analysis, especially BF. Skinner, whose theoretical work remains fundamental to understanding the concepts of Contingencies, reinforcement, and human behavior.

The inclusion criteria included scientific articles, books, dissertations, theses and academic works related to atypical motherhood, maternal overload, quality of life The life of the caregiver mother, parental burnout, and female identity, provided they made it possible.

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

an analysis grounded in the principles of Behavior Analysis.

Only materials published in Portuguese were selected.

fully available in electronic format and that had a direct relationship with the research objectives. On the other hand, studies focused exclusively on were excluded. clinical protocols for neurodivergent children, without discussion of maternal experience, well such as simple summaries, duplicate materials in databases, and productions without consistent scientific basis.

The initial search on the platforms resulted in 58 studies related to the descriptors. used. After reading the titles and abstracts, 26 papers were excluded because they did not either present a direct relationship with the proposed theme or exclusively address aspects clinical child care. Then, the remaining 32 studies were submitted for full-text reading, and 14 texts were excluded for not meeting the established inclusion criteria.

At the end of the selection process, 18 academic works comprised the corpus of Analysis of this article, including scientific articles, dissertations, and undergraduate theses. and theoretical works relevant to the discussion of the topic.

The data analysis was qualitative and interpretive. To that end, the aim was to identify, In the selected productions, the environmental contingencies related to the care routine are... maternal, observing how certain stimuli and social conditions contribute to the maintenance, strengthening, or suppression of behavioral repertoires in atypical mothers.

Furthermore, concepts related to reinforcement and control were analyzed. aversive, deprivation, avoidance, and behavioral extinction, with the aim of understanding how The absence of a support network and the centralization of care in the maternal figure favor processes isolation, emotional overload, and identity restriction.

Therefore, since this is a bibliographic research based on materials Since the present study has already been published and is publicly available, it is exempt from submission to the Research Ethics Committee, in accordance with Resolution No. 510/2016 of the National Health Council, a since it does not involve the direct participation of human beings.

6 ACADEMIC AND SOCIAL CONTRIBUTIONS

This research contributes to broadening discussions about motherhood. atypical from the perspective of Behavior Analysis, especially regarding the impacts of environmental contingencies on the identity and behavioral repertoires of mothers. A

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

Starting from a non-mentalistic reading of the so-called loss of identity, the study understands that Human behaviors are selected and maintained by environmental consequences.

which allows for the analysis of atypical motherhood beyond individualistic explanations or pathologizing.

In this sense, the work relates fundamental concepts of Analysis of Behavior, such as reinforcement contingencies, extinction, aversive control, and suppression. of repertoires, to the context of intensive care provided by mothers of children Neurodivergent individuals. The research seeks to demonstrate how the reorganization of family routines, associated with continuous overload and a lack of social support, it favors the weakening of repertoires related to autonomy, professional life, leisure, and interpersonal relationships. In addition Furthermore, this study could serve as a basis for future research aimed at understanding the... psychological and social impacts of atypical motherhood, especially from an analytical perspective. behavioral.

In the social sphere, the research contributes to bringing visibility to the reality of overwork. faced by atypical mothers, highlighting the emotional suffering and feeling of "Self-annihilation" does not stem exclusively from individual factors, but also from social and cultural contingencies that concentrate care almost entirely on the figure maternal. In this way, the study helps in understanding that the restriction of social life, The professional and emotional well-being of these women is directly related to the absence of support networks. effective and to inequality in the division of family responsibilities.

Furthermore, the research could contribute to the development of more effective practices. empathetic and humane treatment on the part of society and professionals who work with families atypical, favoring psychological interventions that are more suited to their needs. women. By emphasizing the importance of strengthening autonomy, self-care and expanding reinforcing experiences outside the exclusive context of care, the work It also encourages reflection on the importance of quality of life, mental health, and... Social support targeted at mothers of children with disabilities.

7 RESEARCH OUTCOMES

7.1 Primary outcome: social aspects and impact of visibility.

The burden on mothers of children with disabilities can be understood as the result of a

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

an environment with a high density of aversive stimuli and a scarcity of positive reinforcers for the woman. The "triple functionality" outlines a routine of evasive and avoidant behaviors, with the aim of satisfying domestic, professional and therapeutic needs, resulting in numerous occasions, this has led to parental burnout and emotional exhaustion. The hidden clarity of this suffering in society serves as a form of social censorship, in which the expressions of mothers are silenced or belittled, thus favoring the continuation of isolation and... marginalization of these women in the professional environment and in community life.

However, the lack of support networks and effective public policies creates a context... of heightened vulnerability, in which the presence of the maternal figure, in the face of inability to manage the excessive demands and isolation involved in the process, lack of care reveals a significant likelihood of triggering mental disorders, such as depression and anxiety.

"Caregiver Syndrome" is, therefore, a product of social control contingencies, and patriarchal systems that punish female autonomy and reinforce exclusive and unilateral dedication to child with a disability. This environmental setting keeps the mother in a cycle of deprivation, self-care and social reinforcement, turning suffering into a neglected constant.

7.2 Secondary outcome

Subjective re-signification and identity reconstruction depend on altering the reinforcement contingencies, which allows the mother to develop new behavioral repertoires in the post-diagnosis period. Evidence-based interventions, such as the Analysis of Behavior, when applied with equal attention given to the caregiver, acts as support tools that structure the environment, reduce tension, and offer guidance practices. In preparing the mother to face the challenges arising from her child's diagnosis, such interventions broaden their perception of self-efficacy and promote a more supportive family environment, harmonious, minimizing the negative pressure of daily routines. The reconstitution of psychosocial well-being becomes stronger when the mother participates in support groups (territoriality), in which interaction with other individuals acts as a powerful social reinforcement, validating their experiences and fostering the formation of new identities.

This procedure involves the exclusion of restrictive verbal rules, such as the "maternal instinct" or the romantic idealization of motherhood, which often inhibits the woman. A woman may choose between seeking psychological support or prioritizing her own needs.

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

to reclaim social roles beyond the maternal one and to count on greater paternal involvement (which
By dividing responsibilities and increasing marital satisfaction, the woman is able to give new meaning to her life.
her story, transitioning from a position of isolation to one of protagonism and well-being.

FINAL CONSIDERATIONS

The analyses developed throughout this research have allowed us to understand that...
Loss of identity in mothers of atypical children cannot be interpreted as a consequence of
individual fragilities, but rather as a result of established environmental contingencies.
following the diagnosis of a neurodivergent child. The reorganization of the family routine, marked
due to ongoing care, intense therapeutic demands, and responsibilities concentrated in
The maternal figure favors the gradual suppression of repertoires previously associated with life.
professional, social, and emotional well-being, as well as self-care. In this context, atypical motherhood
It comes to occupy a central position in the daily lives of women, significantly reducing
experiences of external reinforcement of care.

From the perspective of Behavior Analysis, it was found that the scarcity of
positive reinforcers in different areas of life, associated with constant exposure to
Aversive contingencies contribute to the strengthening of patterns of self-sacrifice and exhaustion.
Emotional and behavioral restriction. Prolonged maintenance of these conditions favors
development of psychological distress, anxiety, social isolation and symptoms of
Exhaustion, such as parental burnout and caregiver syndrome, directly compromises
autonomy, quality of life, and the perception these women have of themselves.

Furthermore, it was observed that maternal overload is embedded in a social context.
and a culture historically marked by inequality in the division of responsibilities.
Family responsibilities and expectations that almost exclusively associate caregiving with women.
Insufficient effective support networks, both within the family and in institutions.
It intensifies the invisibility of maternal suffering and contributes to the perpetuation of a
A social logic that normalizes women's renunciation in favor of providing full-time childcare.
In this way, the absence of emotional, social, and political support reinforces processes of isolation and
It hinders the maintenance of repertoires related to female individuality and autonomy.

Therefore, the study highlights the need to broaden scientific discussions.
social and institutional aspects of atypical motherhood, especially from the perspective of Analysis of
Behavior. The development of psychological interventions becomes fundamental and

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Year VII, v.1 2026 | Submission: May 29, 2026 | Accepted: May 30, 2026 | Publication: June 2, 2026

Welcoming strategies that promote the strengthening of self-care skills, autonomy and social participation, enabling these women to be recognized for in addition to their exclusive role as caregivers.

Finally, it is concluded that building more effective support networks and expanding Public policies aimed at neurodivergent families and promoting the mental health of For mothers with atypical children, measures are essential to minimize the impacts of the burden on... Care. Thus, ensuring spaces for listening, acceptance, and strengthening individuality. female reproductive health represents not only a clinical and social need, but also an important an instrument for promoting dignity, quality of life, and the preservation of identity. of these women.

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