Adopting a Holistic Parenting Experience for Children with Autism

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Abstract

Autism Spectrum Disorder (ASD) transcends across social class and cultural background. As a developed country, Singapore continues to face challenges posed by ASD. Beyond the family unit, parents of children with ASD experience social stigmatization and difficulties seeking communal support. Caregiving becomes increasingly burdensome. Parents may cultivate negative parenting that further complicates their children’s growth development. This paper presents a holistic approach for parents managing challenging behaviors influenced by ASD. Responsive parenting holds key in aiding parents with their daily struggles. The authors posit five components that contribute to effective parenting, namely mind-set, techniques, time, relational context and parental love. Together, they assist parents to assess and reflect their relational experience. Parents learn to customize their approach to meet the child’s unique needs. This will shape the parent-child interactional pattern and foster positive family relationship.

Keywords: Stigmatization; Autism spectrum disorder; Parentification; Child-centered mentality; Parenting; Intrusive behavior

Introduction

Autism Spectrum Disorder (ASD) is a neurodevelopmental condition that affects an individual’s interpersonal relationships and personality traits [1]. It presents challenges associate with biological, social communication, mental health and daily living aspect.

In Singapore, one in 150 children is diagnosed with autism [2]. This was higher than the one in 160 children suggested by World Health Organization. Medical experts commented that this was contributed by greater public awareness and the broader definition of ASD. According to Autism Resource Centre, individuals with autism are likely to maintain 1 per cent (50,000) of our current population [2]. Of this, 11,500 are below the age of 19.

Research from Ministry of Health (MOH) indicates that ASD-related health issues attribute to high disease burden [3]. This was found to be the highest among children under 15 years. Comorbidity represents two or more medical condition within an individual. Findings suggested that 70% of individuals with autism are diagnosed with at least one psychiatric symptom [1]. This includes condition such as intellectual disabilities, attention-deficit/ hyperactivity disorder, anxiety and mood disorder. Comorbidities found within ASD are prevalent. Thus, providing guidance to children with autism does not merely working with ASD alone. It entails the potentiality of managing other disorder’s characteristics.

Socially, children with ASD often express emotional outbursts and hostile behavior [3]). As compared to children with learning impairment, they tend to demonstrate challenging behavior. Causing harm to self or others and engaging in inappropriate behavior are typical outcome. This is further complicated by their sensory issues that alter their behavior towards some particular sensory stimuli.

Additionally, in comparisons to children with other disabilities or those without, children with ASD receive lesser support from their social settings. Zainal et al., opined that children with autism are prone to stigmatization [1]. Unlike children without special needs, they are likely to encounter exclusion, hostility and...
bullying from peers. These societal factors lead to the formation of unconducive learning environment. They limit interaction opportunities and stifle the child’s developmental progression.

Hence, one can presume the challenges encountered by caregivers for children with ASD. Caregivers are prone to stress associated with the caring process. It predominant their time and diminished their ability to perform self-care. Subsequently, it compromised the caregivers’ ability to support the child adequately and negatively affects the parent-child relationship.

As primary caregivers, parents of children with ASD face tremendous parenting challenges. In comparison to parents of children with other disabilities and typically developing children, these parents report poorer psychological outcomes [3]. They experience higher parental stress and frequent depressive episodes.

Communication represents one of the key barriers encountered by parents of children with ASD. Given their atypical interpersonal response and interactional patterns, comprehending the intention of children with ASD can be laborious [3]. This is especially so among children who are diagnosed with higher ASD severity. Most parents struggle to establish a reciprocal relationship with them. Due to their shortfall with social interaction, children with ASD were ill-equipped to respond adequately towards their parents. For some, exposure to autism is a first-hand experience. In addition to their parenting duties, parents face ASD-related issues. They have to educate their child with managing his ASD-related symptoms. Time is required to study their child’s behavior and develop the appropriate coping strategies. Without which, the lack of understanding will prevent them from effective parenting. This will aggravate the parent-child interpersonal friction and hinders the child’s developmental progression.

Another obstacle lies with the social stigma encountered by children with ASD. Ng, et al. highlighted that parents of children with ASD experienced frequent stigmatization associated with their child’s ASD [4]. Parents often recount the harsh feedback displayed by the public over their child’s behavior [3]. They observed courtesy stigma from the public’s misconception regarding their child’s ASD-related behavior [4]. Members of public would comment on their lack of parental control or discipline with their child with ASD. Overtime, frequent exposures subjected these parents to develop affiliate stigma [4]. This caused them to generate pessimism and self-doubts over their parenting abilities. It resulted them feeling disappointed and incompetent with their provision of care towards their child with ASD. Furthermore, affiliate stigma induces behavioral change within parents of children with ASD [4]. Parents may mask their child’s condition, behave socially withdrawn or worse, and sever their relationships. Such behavior produces adverse effect onto the familial relationship. To a larger extent, it stifles potential assistance that otherwise can be tapped from the community resources. Overcome by their negative mind-set, parents of children with ASD may decide unwisely and worsen their current predicament.

But, the influence of ASD does not confine within the parent-child relationship. It extents to the siblings as well. Studies have indicated that the family’s well-being is affected by the presence of a child with ASD [5]. Due to its chronic nature, parents of children with ASD face the prospect of providing them with long-term care. In Singapore, upon attaining adulthood, children with ASD encounter paucity of resources that restrict their progression towards independence [5]. It is imperative for parents to conceive a reliable and sustainable solution. Inevitably, neuro-typical siblings are engaged to partake in the caregiving process. In the process, they ended up assuming a disproportionate amount of caregiving responsibilities [6]. These neuro-typical siblings may feel obliged to shoulder their parents’ burden to care for their siblings with ASD. Incidentally, parentification is thrust upon these children without their knowledge. It resulted the neuro-typical siblings to provide emotional support and physical care to their siblings with ASD [6]. This role extent further towards their parents as well. Disproportionate level of parentification yields negative outcomes. Reports suggested that the neuro-typical siblings may experience poorer mental health issues that persist into their adulthood [6]. In worse scenario, parents face the long-term predicament of caring for both parties.

Furthermore, ASD shapes the parents’ perspectives towards their neuro-typical children. Chan and Goh commented that siblings of children with ASD are often neglected [5]. Managing the complex needs of children with ASD is central in the parents’ effort to maintain the family unit. Considerable resources were spent to support their children in overcoming their learning difficulties and socio-emotional struggles. As such, it leaves neuro-typical siblings on the periphery of the familial relationship. Parents are left with little time for their neuro-typical children. Likewise, various studies have demonstrated that neuro-typical siblings actually draw little parental attention and differentiated treatment [5]. Thus, the differentiation in parenting approach impacts neuro-typical siblings’ well-being. In their findings, the authors draw attention that all mothers professed to engage in differentiated treatment. These mothers reasoned that the caregiving demand for children with ASD is immense. It denies them the time for their neuro-typical children. Subsequently, the lessen time spent on bonding affect their interactional patterns. During the interview, neuro-typical children expressed their dissatisfaction over the relationship [5]. Despite empathizing with their parents’ predicament, neuro-typical children wrestle to reconcile with their unfulfilled needs. It resulted them turning non-compliance and develop resentment towards their family members.

Challenges dealing with ASD extend to the community as well. Contextual factors represent a significant hurdle for parents to
overcome. It influences their worldviews and alters their behavior. Parental expectations can be shaped by cultural beliefs. Knowing their children diagnosed with ASD cause emotional upheaval within the family. Raffaele Mendez et al. commented that parents were overwhelmed by sadness and feel flabbergasted by the outcome [7]. They struggle to find acceptance with the situation. Within the East Asian context, one’s intellect and academic accomplishment are highly coveted [8]. It suggested future success for their children. Thus, parents experience guilt over their children’s current attributes. They perceived the complications presented by ASD was largely their own doing.

Similarly, despite greater public awareness, parents are not forthcoming with seeking help. Nah et al. highlighted that the prevailing stigma attached to ASD has prevented parents from sharing their experiences [9]. Children with ASD are largely excluded from communal activities. The belief further reinforces parents’ resistance towards tapping on community resources. Furthermore, the study suggested that parental expectations were low. Parents of children with ASD dismissed the prospect of having their children gaining independence nor accessibility into the community [9]. As a result, parents of children with ASD shouldered greater caregiving responsibilities. Such caregiving arrangement may not be sustainable in the long-term.

Infrastructural readiness represents another hurdle for parents as well. With more than 20 Early Intervention Program for Infants and Children (EIPIC), Singapore boasts a healthy level of support for early intervention effort [9]. In recent years, mainstream schools have intensified efforts to cater the demands of children with special needs. Yet, inclusivity remains an ongoing concern within the education system. Nah, et al. highlighted that teachers are not well-equipped to implement inclusive education in class setting [9]. Part of the reasons lies with the insufficient training given. It induces a lack of confidence among mainstream teachers to create an inclusive classroom experience. Likewise, the adult services for special needs face similar encounter. Over the years, rising attention to employability among adults with special needs has gained traction. Still, little research is done to ascertain the efficacy of these employment agencies. More so, parents of adolescent with ASD continue to perceive their children’s longstanding dependency on them [9]. These views imply that much is left to be desired towards building an inclusive society. Without which, children with ASD are without a conducive environment to develop and gain independence. This prevents them from realizing their fullest potential.

**Parenting Behaviour**

In general, ASD has complicated the nature of caregiving process. Most new parents were unprepared to manage the challenges associated with ASD. Reluctance amongst parents of children with ASD to share and discuss about their struggles is a key hurdle. New parents have to rely upon themselves with seeking help for their child. They navigate across various channels seeking suitable treatment options for their children with ASD [7]. Furthermore, they have to organize these programmes against their schedule and exercise prudence in financing them. Thus, one can hypothesize that these parents grapple with time management. Balancing ASD against other aspects of child development leaves them little to negotiate within their familial relationship. Parents are time-pressed to handle ASD-related issues and their children’s growing needs. Consequently, parents turn intrusive. During an experiment, parents of children with ASD tend to interfere with their children’s play as compared to mainstream parents [10]. Behavior supervision and physical prompting were noticeable in these parents’ mannerism. Losh et al. commented that high parental intrusiveness impedes the child’s learning development and interpersonal relationship [10]. Yet, the desire to manage their children’s ASD-related challenges may explain their behavior. Additionally, it may also imply that parents are compensating their children’s inadequacies.

Exposure to negative parenting is widely associated with children’s externalizing behavior. Inappropriate behavior can be expressed either overtly or covertly manner. Instances such as physical aggression, vandalism and verbal bullying are manifestations of the behavior. Individuals with certain biological traits or poor temperament were prone to externalizing behavior [11]. As early childhood is characterized by rapid neurological development, children are vulnerable to their environmental influences. Ooi, et al. highlighted that anxiety induced distress affects between 11% and 84% of children with ASD [12]. Thus, children with ASD are susceptible to acquire externalizing behavior. Further findings illustrate that children with predisposed reactive temperament tend to react inappropriately against negative parenting [11]. In their response to parents’ hostility, children with ASD may retort to aggression caused by their neurological sensitivity. Worse still, the impact of negative parenting continues to linger within children even till they reach adolescence. To introduce positive parenting at adolescent stage will not reverse the trend [11]. Therefore, parental intrusiveness is deemed undesirable for child development. Failure to address one’s negative parenting will impact the child’s growth and attitude toward the familial relationship.

**Responsive Parenting**

Today, healthcare professionals recognize that many children with ASD face difficulties with emotion regulations [13]. One of the primary obstacles lies with their difficulties with comprehending emotional facial expression. Children with ASD struggle to interpret nonverbal communication between people. Besides, studies have consistently demonstrated that children with ASD encountered emotional dysregulations throughout their
growth [13]. They exhibited diminished social ability to handle negative feelings. When faced with uncomfortable affect, they tend to display disruptive behavior. Overtime, if left unattended, these negative emotions encountered by children with ASD will intensify. Consequently, due to fewer coping mechanisms, they would pick up maladaptive practices that leads to greater externalizing behavior in their later childhood.

Hence, parenting plays a vital role in childhood development. Parents are instrumental in cultivating their children with appropriate socializing skills. Their parenting behavior shapes their children’s progression against the influences of ASD [14]. For instance, parental intrusiveness impedes children’s inclination to establish self-regulation skills and healthy relationship with people [10]. It caused children to acquire feelings of inferiority and incompetence. Gradually, it resulted them to display unhealthy interactional pattern in their daily conversations. Given the ASD context, children with ASD may not possess qualities to establish positive social relationships. As such, these conditions conflate with parental intrusiveness and affect relational outcomes. Moreover, Losh, et al. highlighted that parents’ intrusive behavior has significant impact over their children’s student-teacher relationship [10]. Their research suggested that high parent intrusiveness corresponds poor student-teacher relationship outcome. This illustrates that parental interaction has a far-reaching effect over the child’s social behavior.

Studies have shown that responsive parenting is crucial to the child’s formative years [14]. It has contributed quality developmental outcomes in domains such as language ability and social proficiencies. Parent behavior is characterized by attentiveness and non-directive attitude over the child’s here-and-now experience. Thus, parents are attuned to the child’s immediate behavior and dialogue. During their conversation with the child, parents adopt a child-centric outlook. They alter their approach in accordance to the child’s body cue and interest level. Doing so promotes joint-engagement and encourages the child to explore his environment actively. Furthermore, various research suggests an association between responsive parenting against language and social development for children with ASD [14]. Taken together, these findings suggest that responsive parenting can be employed effectively onto children with ASD. It also showcases its positive influences over the child’s social development to the wider context.

Applying responsive parenting to children with ASD

Yet, responsive parenting cannot be deemed as a linear approach. Children with ASD are not the sole beneficiaries of an effective parenting style. Rodriguez, et al. view parent-child interactions behave in an interdependent manner [15]. The behavioral issues displayed by children with ASD resulted parental stress, which inadvertently influence the parenting style and vice versa. Moreover, Rodriguez, et al. have unraveled bidirectional association between parental stress and behavioral pattern in children with ASD [15]. That high parental stress will escalate the externalizing and internalizing behavior of children with ASD. This further reinforce the reciprocal ties within the family unit.

Recognizing the reciprocity between the parent-child relationships is imperative towards cultivating healthy parenting behavior. With this awareness, it enables parents to optimize family-based intervention holistically. During their intervention, parents take into considerations its impact on the family instead of the child alone. They gain awareness over their child’s behavior on them. In turn, they learn to avoid negative parenting response that trigger their child’s challenging behavior. Doing so changes parents’ outlook on parenting their child. It redirects the parents’ attention away from the child and focus their resources on managing family dynamics. Stabilizing the familial interactional pattern fosters positive communications that encourage healthy learning in children with ASD.

To concretize responsive parenting approach

Five components contribute to effective responsive parenting, namely mind-set, techniques, an appreciation of time, developing understanding over context and unconditional love. They combine to offer parents an increased awareness over their children with ASD. When applied, it provides parents a comprehensive and holistic understanding over their interactions. This enables them to derive better assessment and implement timely intervention in their parental approach. Yet, one cannot view these factors in its absoluteness. The complexities found within parent-child relationship necessitates a multifaceted solution. Recognizing these factors gives parents fresh impetus to explore and embrace new knowledge. This prepares parents to tackle the ever-changing needs of their children with ASD.

Mind-set

Cultural background influences our subjective interpretations of surrounding environment [16]. Parents are exposed to the societal values brought across by past generations. For example, fate-based beliefs have substantial persuasion over the parents’ perception of their children. Within Hindu communities, the notion of Karma has significant influence over parents’ view towards disability and misfortune [16]. Inheriting autism is deemed as a deed committed by the parents or child in their past lives. It is subjected to individual interpretation, with some parents view themselves or the child responsible for the outcome. Therefore, one should consider the cultural-based explanatory models embedded within parents’ decision-making process. It determines their outlook and response over parenting style. Moreover, it shapes their attitudes towards seeking help and reasons to abstain it.
Singapore is a globalized society. Its global trader status exposes the population to an intermix of eastern and western cultures. Despite the cultural differences, commonalities continue to endure among people. Zhang, et al. opined that social face is a universal concern shared across various cultural settings [17]. It comprises of multidimensional construct that induce positive or negative experiences in an individual. Face consciousness arise in response to social stigmatization. Failure to meet societal expectations have resulted feeling of shame and embarrassment in people [17]. As a consequence, the affected party may attempt to protect or restore lost face. Such thoughts may resonate to parents of children with ASD. Parents face the social dilemma of seeking help or shielding their children from the public. This creates stress over the family dynamics.

Adopting a strength-based parenting approach introduces parents an alternate perspective. It redirects parents from societal pressures and cultivates a child-centered mentality. According to Jach, et al. strength-based parenting invites parents to recognize and utilizes their children’s abilities when interacting [18]. Parents learn to identify their children’s positive qualities and assist them to realize their hidden potentials. With time, children foster a growth mind-set towards overcoming their adversities. By embracing positive parenting practices, parents develop self-efficacy from within. In a separate finding, Shochet, et al. observed that parents’ self-efficacy is vital in helping adolescents with ASD towards depression prevention [19]. Thus, positive parenting traits instill sustainability to one’s parenting style. It establishes a strong foundation and positive influences to the parent-child relationship. For children with ASD, this enhances their growth development which in turn, enables them to embark on new learning experiences.

Techniques

Over the decades, rise in children with ASD has led to a knowledge expansion on the effective learning techniques. A range of educational programmes were introduced namely, Treatment and Education of Autistic and Related Communication Handicapped Children (TEACCH), Floor Time, Pivotal Response Training and so forth. However, contentious disagreements among various professionals arise over their applications. Surging awareness of ASD, literature research and a lack of standardization across all pedagogies have contributed to the situation [20]. Likewise, the authors highlighted that no intervention was singled out as appropriate and effective for children with ASD. And that no approach is better than the others. Rather, research reveals the inclination to adopt a range of practices in one’s intervention. The dynamism associated with ASD necessitates an integrative method to address a complex issue.

In Singapore, despite its infrastructural readiness, interventional effectiveness on ASD remains ambiguous. With exception to structured teaching, little research is conducted to assess the implementation efficacy [9]. Efficacies of evidence-based approaches found within early intervention programs adopted by the Early Intervention Programmed for Infants and Children (EIPIC) centers were inconclusive. Given the distinctive features of each teaching pedagogy, the skillsets and knowledge differ between teachers as well. This further complicates intervention studies to identify one practice that best meets the need of children with ASD. Therefore, insistence to apply one technique over the rest misrepresents the current context. Conversely, the phenomenon reflects the neurodiversity among children with ASD. It epitomizes the uniqueness and attributes encompassed within in the child. Hence, it demonstrates the differentiation among parenting styles. Parenting style should customize to suit the child’s preferences and learning ability.

Iovannone, et al. highlighted six essential factors that deemed effective when designing educational programmed for children with ASD [20]. They are individualized support and services, systematic instruction, structured learning environment, specific curriculum content, a functional approach to problem behavior and family involvement. Discussion on these elements are beyond this paper. Nonetheless, the study suggested the commonalities shared across the therapy options. Despite their differences in theoretical assumptions, interventions largely strive for similar outcomes. Distinctions between various treatments may not be the impetus of change among children with ASD. Rather, change is initiated by a set of common factors. Intervention uniqueness simply reflects the child’s specific inclinations and ability. By adopting a broader perspective, parents cultivate flexibility in their parenting approach. They learn to embrace new techniques and make timely response to their child’s emerging needs.

Time

Time perspective plays a direct bearing over parents’ caregiving behavior. Chand, expressed that time is forward-moving and operates in a linear dimension. Coupled with the child’s irrepresible growth, parents face the unenviable role prioritizing caregiving responsibilities over other life priorities [21]. Since the onset of diagnosis, parents journeyed into a ‘trial and error’ period for suitable ASD intervention [22]. Parents require time to familiarize themselves with their child’s condition. By getting acquainted with ASD, parents become increasingly confident exploring other sources of information. Besides, time is necessitated for parents to examine existing interventions that suit their children’s preferences. This involved spending time on gathering information from other fields such as social media and healthcare professionals. The information enhances parents’ intervention decision-making process and prevents them from being overwhelmed with caregiver burden.
Moreover, parenting behavior and child development change across over time. Gray, observed a shift in stance as parents aged [23]. They adopt a variation of interventions appropriate to their child’s developmental level. Gradually, young adult parents would alter their approach from problem-focused to emotion-focused strategies. According to Gray, the former suggested one’s resolute to address the presenting issue [23]. Whereas the latter indicates the individual’s attempts to redirect attention from the stressful situation. This phenomenon demonstrates the transitional nature of parent-child relationship. As the child matures, he routinized his daily schedule and mastery over emotions. The improvement means less disruptions in the parents’ lives. Consequently, the familial interaction becomes stabilized. Parents perceived themselves feeling less distress, thus requiring lesser coping strategies. Rather, they channeled their attention onto appreciating their child’s intrinsic worth and values.

Still, it would be ingenuous to interpret the child’s maturity equates an improvement in totality. A child’s growth does not operate in a linear fashion. Contextual considerations matter too. Resources availability may influence the parents’ decision-making ability. In Singapore, parents’ reliance on service providers declined as their child aged. Nah, et al. reported the uncertainties surrounding the structural support for adolescent and adults with ASD [9]. Parents face the inevitable lack of age-related services that restricted their choices. Gradually, they turn their attention to their inner resources. In the process, they learn to cultivate new meanings and gain acceptance over the situation. Hence, setting aside realistic future expectations for their child is vital. Parents need to acknowledge the time constraint imposed them and the contextual fluidity. It enables them to prioritise their resources effectively and reap long-term benefits.

Relational Context

In 2013, Singapore signed and confirmed its commitment to the United Nations Convention on the Right of Persons with Disabilities [9]. It recognizes people with disabilities enjoy similar rights and interests as the mainstream. Since then, Singapore experiences exponential growth in the provision of services for individuals with ASD and caregivers. The amendment of Compulsory Education Act in 2019 has hastened inclusivity effort. From 2021 onwards, the government has announced the setup of three new autism-related schools [9]. These highlighted the government’s acknowledgement over the increasing needs of the autism community.

With increasingly change to autism support and services, it necessitates parents to comprehend its relational influence over their child. The Bronfenbrenner’s Ecological Theory offers parents a framework that conceptualizes the interconnectedness and intersectionality within the child’s environment [24]. It classified our ecological system into different levels namely, Microsystems, mesosystems, exosystems, macro systems and chronosystems. With microsystems as the focus, it is nested within each larger system in the similar order. Bronfenbrenner perceived that individual does not operation in isolation, but in relation to the external environment [24]. And that each system plays an influential role in an individual’s development. From this viewpoint, one can appreciate the reciprocity and dynamism between these systems.

Additionally, within the ecology model lies the microsystem relationships that promote development. Bronfenbrenner [25] referred the phenomenon as the proximal process. It specified the developing individual’s immediate interaction with other persons, objects and symbols. That one perceives relational event of greater importance as compared to circumstantial situation. The father-child interpersonal relationship is one such example. Plus, uniqueness in each parent’s approach encourages certain development that is not capture in other interactions [25]. Relationships with significant others help simulate the child’s growth into adulthood. Hence, parents play a pivotal role in the lives of children with ASD. Beyond that, the remaining four interrelated systems form one’s presenting context. Through them, parents can evaluate its influences on the proximal processes of interest [26]. The child’s reaction within the school setting can be determined by parental relationship. Likewise, parents can assess school’s indirect influence over their child’s behavior at home. Reviewing the systems using the ecology model allows parents to evaluate the relational impact on their child’s growth. It takes parents out of their static situation and identify positive connection at different ecological levels. Concurrently, they can work towards bridging the existing systemic gaps to establish an autism-friendly environment.

Parental Love

Finally, parental love is crucial in the provision of care for children with ASD. It is expressed through emotional attachment, warmth, appreciation and support by parents [27]. Through parental love, children obtain benefits that were otherwise unattainable independently. Solheim, suggested that parental love enables children to develop trust, promotes intimacy, establishes relationships with others and cultivates self-respect. Parents’ genuine interests are conveyed through their emotional tones [27]. It in turns fosters deeper connection within the parent-child relationship. Therefore, adopting a child-centred perspective aids parents to empathise their children’s viewpoint. The approach redirects parent to prioritise their children’s lived experience [28]. This encourages children to partake an active role with their care. It removes the paternalistic attitude maintained by most professionals and caregivers. Instead, parents assume a broader understanding of the child’s immediate relationships and wider community.

Plus, Barkauskiene, remarked that parents’ conduct and
affection are beneficial to children with learning disabilities [29]. The author shared that poor parenting practices coupled with negative emotions are detrimental to children’s upbringing. According to Erikson’s model of psychosocial development, relationships are vital to one’s growth[30]. Upon birth, individuals undergo a series of psychosocial stages. Resolving each stage positively prevents individual to bring forth his unresolved issues to the subsequent one. To establish trust, the child’s relationship between the maternal persons is essential to lay the foundation for future stages. This parallels with the influence brought by parental love. Without which, the child acquires mistrust and jeopardizes his relationships with people. Gradually, the feeling of mistrust leads the child to develop insecurity and hinders his future development. 

Eventually, Erikson’s theory hypothesizes that the individual will look beyond himself and contributes to his environment [30]. It illustrates that parental love offers long-term positive consequential outcome for children. Likewise, Schnyders, et al. observed that parent attachment plays an influential role in the lives of emerging adults [31]. That the emerging adults’ life satisfaction is positively related to parent attachment. Besides, emerging adults’ ability to seek support from external parties stems from parental influences too. In light of this, parents should not overlook the relational experience towards their children with ASD. Rather, parents must identify opportune moments to reinforce the parent-child relations. Doing so will bring stability to their children’s development. With a healthier familial bond, parents will encounter lesser caregiver burden and enjoy quality family time together.

**Conclusion**

To conclude, ASD presents numerous challenges to caregivers’ experiences. Parents of children with ASD are prone to caregiver stress. Being a developed country, improvement within the disability sector remains much desirable. Besides communication barriers, parents must manage familial dynamics associated with their children’s behavior. At a communal level, they faced social stigmatization and systemic hurdles when seeking support. Along with cultural influences, these factors compounded and made parenting complicated as compared with neuro-typical children. New parents, especially, were unfamiliar and inexperienced to the scenario. Subsequently, parents resort to unhealthy parenting practices that contribute to the onset of their children’s inappropriate behavior.

The authors hold beliefs that parental efficacy can be enhanced. Parenting remains fundamental to the child’s upbringing. By embracing responsive parenting, parents learn to be mindful over the parent-child interaction. It encompasses five components, namely adopting a strength-based perspective, recognizing the common factors among techniques, cognizant of the child’s development trajectory, appreciating the relational influences over the child’s growth, and the provision of parental love. Together, they offer parents a comprehensive perspective to their parenting approach. With it, parents gain mastery over their inner resources and community assets. This will result in a paradigm shift within them over their care for children with ASD.

**References**