Parenting Styles and Parents' Perspectives on How Their Own Emotions Affect the Functioning of Children with Autism Spectrum Disorders

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The grounded theory method was used to analyze the parenting styles used by caregivers to rear children with autism spectrum disorders (ASD) and to investigate parents' experiences regarding how to help their child overcome the symptoms. Thirty-two parents from 28 families of children with ASD in mainland China were interviewed. Analysis of interview transcripts revealed four patterns of parenting styles which varied in affiliation to the roles of caretaker and coach. Based on their experience, a sizable group of parents perceived that their own emotions influence the child's emotions and his/her symptoms. The results suggest the value of developing intervention programs on emotion regulation and positive parenting for the parents of children with ASD.

Keywords: Autism Spectrum Disorder; Parenting Style; Emotion Transmission; Emotion—Symptom Link

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A: i m pec m di o de (ASD) i a pe a i e de elopmen al di o de hich i chaac e i ed b impai men in ocial in e ac ion and communica ion, e e el e ic ed
in e e, and highlepe i i e beha io (Ame ican P chia ic A ocia ion, 2000).
Beca e of i ela i el high incidence, nclea e iolog, and he nce ain of effec i e
in e en ion and pogno i, i ha ecei ed much a en ion in ecen ea.

Rea ing a child i h ASD i a g ea challenge fo pa en . A Ca e e al. (2012) a g ed, he diagno i of ASD i a a ma ic e en fo affec ed familie . S ch pa en migh ffe f om po a ma ic e and a e a pa ic la i k fo o he p cho ocial diffic l ie ch a ho ili , elf-con cio ne , and dep e ion. A n mbe of die ha e demon a ed ha he e pa en face ni e diffic l ie and epo g ea e e and poo e men al heal h han he pa en of child en i ho di abili ie and ho e i h o he di abili ie (Inge oll & Hamb ick, 2011; Rao & Beidel, 2009; Wei , 2002). Belief ega ding pa en ing a e al o impac ed b he diagno i . S ch pa en a e mo e likel o belie e he a e no compe en in hei ca e aking ole compa ed i h o he pa en (Ha all, Ro e, & McDonald, 2005; K hn & Ca e , 2006; Mei cha , Roe e , & Wa e n, 2010).

Child en' ph ical/de elopmen al di abili ie and pa en al men al heal h and pa en ing p oce e in e ela e in a bidi ec ional manne. The e ha been ome e idence ha pa en al e and pa en ing elf-efficac infl ence he f nc ional imp o emen of

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child en. Fo e ample, B inke, Seife, and Same off (1994) fo, nd ha pa en al e can p edic he de elopmen al le el of child en i h in ellec, al di abili ie. In ano he d ing a ample ha incl. ded child en i h ph ical di abili ie, in ellec, al di abili ie, and ASD, a ong ela ion hip be een mo he epo ed e and child en' p og e in lea ning a epo ed (Robbin, D. nlap, & Plieni, 1991). In li e a e pecificall abo, child en i h ASD, i ha been fo, nd ha pa en al e impac he effec i ene of ea l in e enion (O bo ne, McH, gh, Sa, nde, & Reed, 2008a). Lo elf-efficac among pa en i al o a ocia ed i h le engagemen in child en' ea men (O bo ne & Reed, 2010).

Al ho gh e ea che ha e gi en m ch a en ion o pa en al e and elf-efficac hen pa en ing a child i h ASD, pa en ing p ac ice hem el e eem o ha e been le e plo ed. E i ing e ea ch gge ha pa en of child en i h ASD make mo e effo o im la e he de elopmen of hei pecial child en and e mo e peciali ed pa en ing beha io compa ed i h pa en of o he child en (Lamb ech , Van Lee en, Boonen, Mae, & Noen, 2011). In line i h hi, T ai, T ai, and Lo Sh (2008) fo nd ha ch pa en in eg a e he ole of coach i h hei ole a ca e ake . The pa en of en ac like coache o help hei child en on peech, mo o, and ocial kill . S ch a d al ole i conide ed o be an impo an fea e of pa en ing in familie of child en i h ASD (Hoog een & Woodga e, 2012; T ai e al., 2008). Al ho gh he e die de c ibed fea e of pa en ing p ac ice in familie of child en i h ASD, he did no e plo e ho pa en ing p ac ice infl ence he child.

To mmaie, alho ghe each odaeha e ealed ha ome paen alfaco, cha paen ale and paen ingelf-efficac, migh be a ociaed ih he fincional impoemen of childen ih ASD, feedie hae emicalledecibed appoache opaen ingand paen alpecepion of ha in hei paen ingpacice help hei childen. To fill hi gap in he lieae, hi daimed o(1) ob ain an in-dephinderanding of paen ingappoache in familie ih childen ih ASD and (2) lean abopaen 'e peience egadingho ohelp hei childen oe come hei mpom.

Thi d foc e paic la l on familie of child en i h ASD in mainland China. Al ho gh i ha been mo e han 20 ea ince a i m a fi diagno ed in China, he e i ill a lack of info ma ion abo, and a a ene of hi di o de in he ocie and among famil membe. Shock and conf ion a e common eac ion o fi ecei ing he diagno i (McCabe, 2008b). Beca e of he lack of fo mali ed ed ca ion p og am and a comp eheni e efe al em, pa en ha e o look fo e pe and elec in e en ion p og am b hem el e (Cla k & Zho, 2005; McCabe, 2008a). F. he mo e, a ed ca ional e ice e o ce a e fa f om fficien, man familie ho a e nable o ge acce o ch e ice each hei child a home (H ang, Jia, & Wheele, 2012; S. n e al., 2013). Beca e of hi i a ion, pa en 'a i de, belief, and beha io o a d hei child i h ASD likel pla a deci i e ole fo he child' p ogno i . Unfo na el, e ea ch on he pa en ing p acice of pa en of child en i h ASD in China i ca ce. To o kno ledge, hi d i he fi o in e iga e pa en ing le in familie of child en i h ASD in mainland China.

METHOD

Design

A g o nded heo app oach a elec ed fo hi d. Thi me hod in ole gene aing ne h po he e and concep abo a paic la phenomenon ing an ind c i e and phenomenological a eg (Co bin & Sa, 2008). Beca e he e ha been limi ed heoe ical and empi ical e ea ch on pa en ing child en i h ASD in mainland China, he go nded heo me hod a con ide ed o be he mo app op ia e me hodolog fo hidd .

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Participants

Pa icipan e e ec i ed ia an ad e i emen po ed on he co e ponding a ho' blog, hich mainl in od ce pop la cience on child p cholog . Incl ion a e ic ed o ca egi e ho ook p ima e pon ibili fo he ca e of child en diagno ed i h ASD b a child p chia i . Familie ho e p e ed in e e in he d e e conac ed o f he e if he diagno i of he child and o e plain he d . Tho e ho me he incl ion c i e ia e e in i ed o pa icipa e in emi- c e in e ie .

T en -eigh familie f om fo ci ie in mainland China pa icipa ed in he in e ie . In o al, 32 pa en pa icipa ed in 28 in e ie . Mo of he pa icipan e e mo he (onl o fa he e e in e ie ed a p ima ca egi e), bo h pa en f om fo familie pa icipa ed, and one a n (fa he 'o nge i e) a in e ie ed a he p ima ca egi e of he child i h ASD.

Data Collection

Eigh g o p of g ad a e den ho e e aking he co e 'Famil The ap e e ained o cond c he in e ie . Each g o p a compo ed of o o h ee in e iga o . Fo each in e ie , one in e iga o a p incipall in cha ge of a king e ion hile he o he ook ob e a ional no e and a ked addi ional e ion o ob ain de ail o o cla if pa icipan poin . Fo he eigh local familie in Beijing da a e e collec ed b face-o-face in e ie , and in e ie b elephone e e e ed fo he 20 familie loca ed in o he ci ie . Each of he in e ie la ed 1–2 ho . Pa icipan e e a ked he follo ing e ion: (1) Wha e e o child ini ial mp om and hich famil membe no iced hem fi ? (2) When and he e did o child ecei e he diagno i and ha e e o eac ion a he ime? (3) In od ce all he in e en ion p og am o child ha e e pa icipa ed in. Wha o hink of hem? (4) Wha a e o ie on a i m, and ho do o ie o child? (5) Acco ding o o ob e a ion, ha help o e come o child mp om?

All he in e ie e e ape-eco ded i h pe mi ion. Fo he face-o-face in e ie , e p e ion, po e, and o he non e bal ign e e collec ed o alida e and e pand pon he e bal info ma ion. Fo in e ie b phone, one and o he ali ie of he oice e e al o no ed.

Procedures

Befo e he in e ie e ion, a con en fo m and e ionnai e on demog aphic infoma ion and ea men e pe ience e e en o he pa en b e-mail. Af e he in e ie , pa icipan e e hanked and gi en 50RMB (a o nd \$8). Ve ba im an c ip of he ape-eco ded in e ie a ell a commen f om he co e ponding a ho e e en o he pa icipa ing pa en a fe da af e he in e ie . Pa icipan e e enco aged o check he e ba im an c ip and o con ac in e iga o if he ho gh he e e e an mi nde anding . Af e he p oce of da a anal i , a conci e e ion of he e l a al o en o he pa icipan fo feedback.

Table 1
Children's Demographic and Treatment Data

	A .		Age at	Birth			
Case	Age (years/months)	Gender	Diagnosis (years/months)	Order (rank/total)	Intervention		
1	17/10	Male	8/0	1/1	Sen o in eg a ion aining		
2	5/11	Male	3/0	1/1	Applied beha io al anal i		
3	7/7	Male	4/0	1/1	Applied beha io al anal i		
					P chological co, n eling		
4	6/2	Male	4/0	1/1	Applied beha io al anal i Sen o in eg a ion aining Al e na i e he ap		
5	9/6	Male	2/1	1/1	Sen o in eg a ion aining		
6	4/8	Male	2/0	1/1	Al e na i e he ap		
					Ph ical he ap		
7	22/6	Male	6/0	1/1	Applied beha io al anal i		
8	9/6	Female	2/5	1/1	Applied beha io al anal i Speech he ap		
9	2/6	Male	1/8	1/1	Al e na i e he ap Ph ical he ap		
10	7/1	Male	2/6	1/1	Applied beha io al anal i Sen o in eg a ion aining		
11	4/11	Male	2/0	1/1	Applied beha io al anal i Sen o in eg a ion aining		
12	8/0	Male	3/6	1/1	Sen o in eg a ion aining		
13	5/3	Male	4/0	1/1	Sen o in eg a ion aining		
14	5/8	Male	2/9	1/1	Sen o in eg a ion aining Applied beha io al anal i		
15	5/1	Male	2/9	1/2	Applied beha io al anal i		
16	4/6	Male		1/1	Famil he ap		
17	3/11	Male	3/0	1/1	Applied beha io al anal i		
18	7/2	Male	3/0	2/2	Applied beha io al anal i Al e na i e he ap		
19	4/4	Male	2/4	1/1	Applied beha io al anal i Speech he ap Special da -ca e p og am Al e na i e he ap		
20	5/3	Male	2/11	1/1	Applied beha io al anal i Speech he ap		
21	2/0	Male	1/5	2/2	Sen o in eg a ion aining		
22	6/0	Male	2/0	4/4	Sen o in eg a ion aining		
23	2/6	Male	1/6	1/1	Applied beha io al anal i		
24	3/0	Male	2/7	2/2(in)	Sen o in eg a ion aining Speech he ap		
25	7/7	Male	2/6	1/1	Applied beha io al anal i Ph ical he ap		
26	8/3	Male	3/0	1/1	Applied beha io al anal i Speech he ap Sen o peech he ap		
27	3/10	Male	2/2	1/1	Sen o in eg a ion aining Ph ical he ap		
28	8/5	Male	2/4	1/1	Sen o in eg a ion aining Famil he ap		

Rights of Human Subjects

Thi $\dot{}$ d a app o ed b he In i $\dot{}$ ional Re ie Boa d of he P cholog Depa men of Peking Uni e i . Befo e he in e ie $\dot{}$, pa icipan e e ho n he con en

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fo m hich a ed he main goal and me hod of he _d , hei po en ial i k , and hei igh o i hd a f om he _d a an ime. All he pa icipan ag eed o pa icipa e and none i hd e d ing he in e ie . Fo confiden iali , iden ifica ion info ma ion a elimina ed and a n mbe a a igned o each child befo e da a anal i . Confiden iali a ic l kep b all in e iga o .

Data Analyses

Da a e e anal ed f om he e ba im an c ip of ape-eco ded in e ie . Geneall, e ed anal ic ind c ion in da a anal i , and a con an compa a i e me hod in he coding p oce . The eepe of coding e e in ol ed: open coding, a ial coding, and heo e ical coding. The ini ial code e e gene a ed f om open coding in hich ni of meaning e e de i ed f om line-b -line anal i follo ed b in eg a ion and ed c ion in ni (e.g., "a ming hi i a life-ime p oblem a an ini ial code). When he fo mal code e e c ea ed, a ial coding a pe fo med o diffe en ia e bca ego ie (e.g., "a ming hi i a life-ime p oblem a p nde he code "e pec a ion adj men). Theo e ical coding a finall ed o iden if ela ion hip among ca ego ie (e.g., connec ion a made be een "e pec a ion adj men and "po i i e pe cep ion of he child; Cha ma, 2006).

The e in e iga o (Ch nli Yi, an e pe ienced clinical p chologi and famil heapi, Ting Zho, and Wen ing Zho, bohgadae, den) emicalle ie ed he e ba im an c ip and did he coding. Da a anal i a cond c ed im laneol ih he da a collection. The code each did open coding of fie in e ie individually and gene a ed a compehen ie li of code baed on he da a fom he fi 15 pacicipan. Then meeing e e held o dic, code cle ing and con olidaion. Af e e e al dic, ion, a codebook a de eloped o effect heme common o mo of he pacicipan 'da a. The fi 15 in e ie e e e-coded and emaining in e ie e e coded collectiel baed on hi code book. Dic, ion e e held hen code had differen opinion. Memo e e i en o eco d po ible link among heme implied b pacicipan 'decipion. Theo e ical coding a cond c ed collaboai el b he hee code, d ing hich connection among heme e e made.

The c edibili of he da a a enhanced b iang la ion, ha i, collec ing da a b diffeen me hod (in e ie and ob e a ion). Confi ma ion of meaning i h pa icipan a done af e e ba im an c ip e e eco ded and af e he e l e e i en p. A confo mabili a di a cond c ed b going back o he o iginal an c ip and ob e a ion no e af e he hole coding p oce a comple ed. Pee deb iefing, in hich impa ial pee e amined gene al me hodolog, a alogili ed o impo e o e all o hine (Lincoln & G. ba, 1985).

RESULTS

Parenting Styles

Pa en ing le e e ca ego i ed in o fo pe: aining p io i , ela ion hip p ecedence, al e na ing, and le ing alone (Table 2).

Training priority

The aining-p io i pa e n efe o he le in hich pa en placed p io i on kill aining fo hei child. Pa en ho e da a fi hi pa e n pen a lo of ime aining hei child and had g ea e pec a ion fo p og e . The pa ed no effo o find

Table 2

Demographic Data of Parents Categorized in Four Parenting Styles

	Education Level						
Parenting Style	Mean Age	High School	Bachelor	Master	Doctor	Occupation	Case Involved
T aining p io i	38.89	1	4	3	1	Ci il e an (3), Ho e ife (2), Enginee (1), Office o ke (1), Teache (1), Compan o ne (1)	#1, 3, 4, 8, 14, 19, 25, 28
Rela ion hip- p ecedence	38.15	2	4	6	1	Office o ke (3), Ci il e an (2), Teache (2), Enginee (2), Ho e ife (2), Compan o ne (1)	#1, 2, 3, 9, 10, 12, 14, 18, 19, 23, 27, 28
Al e na ing	33.89	2	5	2	0	Ho. e ife (3), Office o ke (2), Ci il e an (1), Teache (1), Re ea che (1), Enginee (1)	#6, 11, 13, 15, 16, 17, 21, 22, 24
Le ing alone	41.00	0	2	1	0	Manage (1), Co me de igne (1), Office o ke (1)	#5, 7, 26

ea men e o, ce and ied man me hod. D, ing he aining p oce, he e e, all highl demanding and ic. If he child did no concen a e o ho ed li le imp o emen, he pa en migh p, ni h he child: 'If he pe fo med a f, ll, I o, ld bea him $(\#3)^1$; 'Some ime he made me o, p e ha I bea him. (#4) Thi kind of pa en empha i ed he coach ole mo e han he ca e ake ole. One mo he aid, 'I ha e o, pe i e him ic l 24 ho, a da and do m, mo o ain him. (#19)

The mo alien emo ion of he e pa en a an ie, and he clea l de c ibed he ela ion hip be een an ie and high demand in aining. Fo e ample, one pa en aid, 'I became e an io and i i able af e ob aining he diagno i. I had o do ome hing o make me feel be e. (#19) In en i e aining eemed o be a a o ed ce pa en al an ie. In he pa en 'de c ip ion, o kind of cogni ion e e a ocia ed i h an ie and in en i e aining. Fi, ome pa en ackno ledged ha he e e ill no able o comple el accep he diagno i, and he an ed o find e idence o confi m ha hei child a no mal: 'When he pe fo med ell, I ho gh he diagno i, he e e eage o ee he child eco e ickl, a ing, fo e ample, 'We m ge him o eco e a a ela i el o ng age. O he i e, he p ogno i i le p omiing. (#3) Beca, e of he e pec a ion of ge ing id of he ASD label a oon a po ible,

¹Bea ing child en a once common in adi ional Chine e familie. Al ho gh hi beha io ha been dec ea ing, i ill e i . Beca e a fo mal legal epo ing em ha no been e abli hed, f om o po i-ion e can onl op ch iolence ho gh p chological ed ca ion. We en a le e i h common f om he co e ponding a ho o each pa icipa ing pa en , hich con ained ong appeal o no bea hei child.

pa en fel a en e of genc and had high demand in aining. In he aining p oce, he eemed o ha e lo ole ance fo lo p og e and e e ea il f - a ed. Bea ing he child en a a common eac ion.

Relationship precedence

The ela ion hip-p ecedence pa e n i defined a he pa e n in hich pa en empha i ed he impo ance of he pa en -child ela ion hip and p, he ole of ca eake o e he ole of coach. T pical a emen incl ded: 'I hink he ela ion hip i h he child i he ba i of e e hing, (#12) and 'Yo, ha e o e abli h a good ela ion-

Letting Alone

The la pe a labeled 'le ing alone, deno ing a le in hich pa en had li le hope fo he child' imp o emen and had li le mo i a ion o pa icipa e in an ea men. The ee pa en (#5, #7, and #26) in he in e ie ho ed hi pa e n ela i el cleal. One pa en aid 'We ha e no good idea abo, ho o help him, o e choo e o le him be. (#7) Po e le ne and hopele ne eemed o be hei pical emo ion. Nega i e pe cep ion of he child eemed common among hi pe of pa en: one fa he aid, 'He ha no pecial abili ie. Mechanical memo i meaningle and o hle. (#5) Ob io, l, he e pa en ga e, p he ole of coach: a one mo he aid, 'T, ed o each him a home, b, he f, a ed me o m, ch ha I do no each him an mo e. (#26) Ho e e, he ole of ca e ake a al o eakened. One fa he ho a no he p ima ca e ake e en di anced him elf f om he child; he mo he eco, n ed, 'M h, band did no like o alk o he child and a oided oppo, ni ie o ake he child o. (#26)

I i impo an onoe ha he fo pe of pa en ing le colld change o e ime. The ale na ing pa en lall occe ed in he eal age af e diagnoi, hen pa en had li le kno ledge abo. ASD and alo limi ed pa en ing e pe ience. The ela ion hippecedence pa en ome ime occe ed af e a pe iod of in en i e aining hen pa en o gho epai he pa en -child ela ion hip (#1, #3, #14, #19, and #28). The le ing alone pe i lall no p ima be econda, follo ing for a ion be he child' poblem.

Parents' Perceptions on How to Help the Child Overcome His or Her Symptoms

When a ked abo, hich fac o , in hei e pe ience, helped he child o o e come hi o he mp om , 23 pa icipan p e en ed hei opinion hile nine pa icipan (mainl of he al e na ing pe and he le ing alone pe) co ld no hink of an effec i e fac o . T o impo an fac o e e fo nd ba ed on he 23 e pon e e ob ained: (1) he e le el and emo ion of he child and (2) he pa en 'emo ion . In e e ingl , mo pa en fel ha emo ion po e f ll infl enced hei child' mp om , and poke of emo ion hen a ked abo, fac o affec ing hei child' mp om .

Thi een pa en f om 12 familie, ho e e mainl f om he aining-p io i g o p and he ela ion hip—p ecedence g o p (# 1, 2, 3,4, 6, 8, 10, 12, 19, 25, 26, 28), men ioned ha, acco ding o hei ob e a ion, he mp om of he child dec ea ed hen he child a in a po i i e mood; a ing, fo e ample, "He look j like a no mal kid hen he i happ. (#1) S e le el al o eemed o ha e impac on he child mp om. One mo he aid, "He faced a lo of diffic l ie hen fi en e ing he kinde ga en. And he c eamed, c ied and e hibi ed e eo ped beha io a lo a ha ime. (#12)

Pa en al emo ion eemed o be a fac o infl encing he emo ion of child en i h ASD. Ele en o of 32 pa en pe cei ed emo ional an mi ion f om hem el e o hei child (# 2, 3, 8, 9, 10, 12, 13, 18, 26, 27, 28), mo of hem f om he ela ion hip-p ecedence g o p. One pa en aid ha 'Pa en 'emo ion ha e a de e mining infl ence on he emoion of he child. (#2) Ba ed on he in e ie , bo h po i i e and nega i e emo ion of pa en eemed o ha e an impac on he child. Fo e ample, 'If I a in a good mood, m on o ld be happ, (#3) and 'Ad l in he famil e e ad, and he child of en c ied. (#13) One pa en men ioned a figh be een he g andpa en : 'The fo gh and m on became, nea and i i able. (#9)

On he ba i of hei pa en ing e pe ience, 13 pa en f om 11 familie (# 6, 8, 13, 17, 18, 19, 20, 22, 23, 25, 26) pe cei ed ha he e eemed o be a link be een pa en al emoion and he mp om of hei child i h ASD; he e familie a ied in pa en ing le i h fo, f om he ela ion hip—p ecedence g o, p, fo, f om he al e na ing g o, p, o f om he aining-p io i g o, p, and one f om he le ing alone g o, p. Ob e a ion incl ded he follo ing: "The link be een m emo ion and hi p oblem i ob io. When I

a in a lo mood hi mp om became e e e, hile hen I a ela ed he pe fo med ela i el ell (#19); 'When ad l , e peciall he mo he , looked an io, , he child o ld be e an io, and e hibi man beha io al p oblem . (#23) The pe cei ed inflence of pa en al emo ion on p og e in aining a al o men ioned: 'If I a in a good mood, he co ld fini h he o k. Ho e e , if I a an io, , he co ld no fini h no ma e ho m ch ime he pen (#8); 'M mind e had a g ea inflence on he child. If I did no adj, m emo ion , he o ld no make an p og e in he aining. (#18)

Perceived Feedback Loops between Parental Emotions and the Child's Emotions and Symptoms

I eem ha he fo, pa e n of pa en ing e e ela ed o diffe ence in he na, e of he emo ion- mp om link. On he ba i of pa icipan ' de c ip ion, a icio, c cle eemed oeme ge in he aining-p io i pa e n: pa en 'an ie , ange , and f made he child e ed and he efo e e hibi mo e mp om . In , n, he child p oblem made pa en mo e an io : a one mo he aid, 'M emo ion en e in o a icio c cle: hi e og e ing make me e ed and m bad mood make him e en (#22) On he con a , emo ion in he ela ion hip-p ecedence pa e n eemed o e hibi a i o c cle: nde he infl ence of pa en al ela a ion and po i i e pa en ing, he child a mo e ela ed, ho ed fe e mp om, and made g ea e p og e . Pa en e e enco, aged b he imp o emen of he child and became highl efficacion ela ed. A one mo he aid, 'I fo nd m po i i i did ha e an infl ence on m child' beha io . Hi p og e made me feel hopef l and eall ela ed. (#10) Some pa en ha help o e come he child' fi he al e na ing pa e n did no epo an fac o mpom, i hone mo he a ing ha 'hi p oblem come o a andom. (#13) Some of hem did men ion he emo ion- mp om link, b, claim, ch a "[I] can no con ol m emoion (#17) e e pical. One pa en ho fi he le ing alone pa e n ob e ed emo ional an mi ion be een pa en and child (#26), b, he o he o had no idea abo, fac o ha helped hei child en (#5 and #7).

DISCUSSION

Taking ca e of a child i h ASD mean g ea e and diffic l fo he pa en . Coni en ihpeio, e each on paen al e, paen in hi, depo ed in en e nega i e emo ion , ch a an ie , hopele ne , ange , and po e le ne af e he diagno i and in dail in e ac ion i h he child. The e l e ealed pa en al emo ion a ocia ed i h pa en ing cogni ion and beha io . Fo e ample, he g ea an ie of paen in he aining-p io i g o p a all ela ed i h fail e o adj ega ding p ogno i , and i mo i a ed hem o p, h hei child in o in en i e aining. In con a , pa en e hibi ing he ela ion hip-p ecedence le elie ed , ch an ie b adj ing hei e pec a ion, and he e e mo e ole an of he child' p oblem . F, he mo e, pa en pe cei ed ha hei o nemo ion eemed o infl ence he emo ional eacion of he child en a ella hei mp om . Thi ob e a ion i in line i h he e . l of e ea ch in ample of child en i ho, di abili ie and ho e i h ph ical di abili ie (Ha ing, 2002; Ha ing & Beck, 2008). De o he a ocia ion be een pa en al emoion and pa en ing p oce e a ell a i po ible infl ence on he child' nega i e pa en al emo ion de e e a en ion.

Al ho, gh p e io, e ea ch ha fo, nd ha child en' f, nc ional imp o emen ed, ce

elf-diffe en ia ion ho ld be able o adj hei o n p chological a a he han ing hei e pe ience o hei child en' beha io (Nichol & Sch a , 2004). If pa en adj hei o n mind e, he ma ha e mo e po i i e pe cep ion of he child and mo e ole ance fo hi /he mp om . And if pa en can main ain a po i i e a i de hen he child can e pe ience hei ncondi ional lo e, hich migh be helpf l in le ening he impac of he a i m on he child.

In line i h hi ea oning, e belie e ha helping pa en i h hei emo ional eg laion i a good ini ial in e en ion fo he familie of child en i h ASD. Dec ea ing an ie ho ld be a cen al goal. I o ld be helpf l o o k on an ie - ela ed cogni ion o make pa en adj, hei e pec a ion, ake a po i i e ie of he child, and find meaning in hei ca e aking p ac ice. Social ppo i al o an impo an e o ce fo elie ing e (Inge oll & Hamb ick, 2011). Fo he e pa en in mainland China, beca e ocial eice and commini ppo a e ill e eak (Sine al., 2013), ppo f om o he pa en of child en i h ASD i cen l a i al a of e changing info maion, elea ing e, and ob aining encolagemen (McCabe, 2008a). Famil he ap o ld al o be helpf l fo he e pa en . Al ho gh famil he ap all doe no ea he mp om of he child di ecl, i help pa en in hei da - o-da life and in dealing i h hei emo ion (Solomon & Ch, ng, 2012).

A ano he main finding of hi _ d , e _ l _ gge ed he impo ance of he balance be een he ole of ca e ake and coach. Too m ch e on he ole of coach ma make pa en oo ic and le a m, po en iall damaging he pa en —child ela ion hip. Beca e he co e p e en ing p oblem of ASD i a defici in ocial kill , a poo pa en —child ela ion hip ma make he child feel e en le mo i a ed o ini ia e ocial in e ac ion , hich o ld con i e a h ge ob acle o p og e . Mo eo e , o e aining ma e he child and he/he ma e hibi mo e mp om and beha io al p oblem a a mean of elea ing an ie . The , in en i e aining and di p opo iona e e on he ole of coach ma lead o a deg ee of imp o emen on e e al pecific kill , be i ma do ha m o he pa en —child ela ion hip and po en iall ha m he de elopmen of ocial in e ac ion abili ie .

The efo e, e belie e ha he ole of ca e ake i mo e ba ic han ha of he coach, and ha a good pa en -child ela ion hip i a p e e i i e fo effec i e aining. P e io e ea che ha e fo, nd ha po i i e pa en ing and he , ali of pa en -child in e ac ion he ocial compe ence of child en i h ASD (Bake, Fenning, C nic, Bake, & Blache, 2007; D che, Smih, Koh, Rope, & Mandleco, 2012; Mahone & Pe ale, 2003; Meek, Robin on, & Jah omi, 2012; Sille & Sigman, 2002). In clinical p ac ice, pa en ing p og am foc, ed on eaching po i i e pa en ing kill and enhancing he, ali of he pa en -child ela ion hip ha e ho n effec i ene in leading of nc ional imp o emen in child en. Fo e ample, The S epping S one T iple P p og am, hich eache pa en po i i e child-managemen kill a an al e na i e o coe ci e pa en ing p ac ice (Sande, 1999), ha ho n effec i ene in dec ea ing pa en al e (Whi ingham, Sof onoff, Sheffield, & Sande , 2009b) and leading of, nc ional imp o emen in he child (Ma on, Mahan, & Ma on, 2009; Whi ingham, Sof onoff, Sheffield, & Sande, 2009a). Pa en -Child In e ac ion The ap hich foc, e on enhancing he pa en -child ela ionhip and c ea ing a po i i e en i onmen fo child en ha been confi med a effec i e in child en i h high-f nc ioning ASD (Ha am adeh, Po, e emad, & Ha anabadi, 2010) a ell a in child en i h men al e a da ion como bid oppo i ional defian di o de (Bagne & E be g, 2007).

The ell of hild poide e idence for he alle of in elen ion a geing paen in he ealmen of child en i h ASD, and allo ha e implication for he con en of chine en ion. All holgh in he field of ASD in elen ion a geing paen a eno ne, he mo commonle ed paen ing poglam ealpaen a coache and each

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hem ho o ain hei child en (Ma on & Smi h, 2008). De pi e ome e idence fo he effec i ene of ch pa en - aining p og am (Lafa aki & S me , 2007; Sheinkopf & Siegel, 1998), mo indica o ho ed imp o emen on pecific beha io al kill , lea ing ocial compe ence ne amined. We belie e ha pa en al in e en ion a he kill le el i no ade a e. Pa en ho ld be a gh o be mo e a a e of hei emo ional e pe ience and o pa a en ion o he po ibili of emo ional an mi ion f om hem el e o he child. Pa en al emo ion eg la ion and balance be een he ole of ca e ake and coach ho ld al o ecei e m ch mo e a en ion.

I i al o impo an o ackno ledge he limi a ion of hi d. Fi , ali a i e me hod canno p eci el di en angle ca al ela ion hip . Al ho gh emo ional an mi ion and an emo ion- mp om link e e epo ed in hi d, he e phenomena a e ba ed on he pe cep ion of pa en and lack objec i e mea e confi ming hem. Second, he p og e of child en a no objec i el mea ed b a onl ba ed on he pe cep ion of pa en . The e l of hi ld be f he confi med and alida ed ing a diffe en me hodolog and a la ge ample. Thi d, pa icipan in hi d e e ela i el highl ed ca ed. Thi migh be ela ed o he ec i men me hod, hich elied on acce ing a blog. The e pa en migh ha e mo e kno ledge abo, a i m and g ea e oppo ni ie o acce ed ca ional e ice han pa en ed ca ion le el. Hence, he e l of hi d migh ha e limi ed gene ali a ion o familie i h diffe en ocial backg o nd . Finall , i i ill nkno n ho he cha ace i ic of pa en and child en a e ela ed o he adop ion of diffe en pa en ing le, a e ion hich de e e f he in e iga ion in he f e. Ne e hele, o finding e pand he liea, e on he pa en ing of child en i h ASD h o gh an in-dep h de c ip ion of pa en ing le and an e plo a ion of he infl ence of pa en al emo ion on mp om in child en i h ASD. The e l of hi d ma mo i a e heal h e ice p o ide o de elop in e en ion p og am fo he pa en of child en i h ASD.

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