PARENTAL INVOLVEMENT IN PEDAGOGICAL AND PSYCHOLOGICAL SUPPORT FOR PRIMARY SCHOOLCHILDREN WITH AUTISM

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ABSTRACT

Parental involvement is an important component of educational and psychosocial support for children with autism. However, meaningful involvement cannot be reduced to parents' attendance at meetings or compliance with professional recommendations. It includes participation in educational planning, communication with professionals, decision-making, implementation of support strategies, and advocacy for the child's needs. This study examined the role of parental involvement in the pedagogical and psychological support of primary schoolchildren with autism and explored factors that facilitate or hinder such involvement. A mixed-methods design was used, combining semi-structured interviews, a structured questionnaire, and observation of non-verbal behavior. The purposive sample consisted of 30 parents of children with autism who were involved in school-based pedagogical and psychological support. The findings indicate a discrepancy between parents' recognition of the importance of their role and their actual participation in some formal educational processes. While 20 of 28 respondents (71.4%) considered parental participation very important, 13 of 27 respondents (48.1%) reported participation in the development of the Individual Education Plan. Twenty of 29 respondents (69.0%) reported cooperation with the support team, while 6 of 29 (20.7%) reported difficulties in such cooperation. Emotional burden was also prominent: 12 parents reported that anxiety, fatigue, and psychological distress sometimes affected their ability to take their child to school regularly. The findings suggest that effective parental involvement requires accessible communication, genuine participation in decision-making, psychological support for parents, and partnership-oriented relationships between families and professionals.

Keywords: *autism; parental involvement; primary school; pedagogical and psychological support; inclusive education; family-school partnership; parent-professional collaboration; parenting stress*

INTRODUCTION

The education of children with autism requires coordinated action among the child, family, school, and multidisciplinary professional team. Within inclusive education, parents should not be regarded merely as recipients of professional information or as persons responsible for implementing recommendations at home. They are important participants in the child's educational and developmental process because they possess extensive knowledge of the child's everyday functioning, communication patterns, preferences, strengths, difficulties, and emotional responses.

Parental involvement in the education of children with autism is a multidimensional phenomenon. It may

include communication with teachers and specialists, participation in educational planning, contribution to decision-making, implementation of recommended strategies at home, monitoring of the child's progress, advocacy, and emotional support of the child. Systematic reviews have demonstrated that parents may participate in school-based interventions in different ways and that their role may extend from communication and consultation to active participation in intervention planning and implementation (Goldman & Burke, 2017; Rispoli et al., 2019).

At the same time, the existence of formal opportunities for parental participation does not necessarily guarantee meaningful involvement. Parents may attend meetings without having sufficient opportunity to influence decisions, may receive information without being able to discuss it, or may be expected to follow professional recommendations without being treated as equal partners. Hodge and Runswick-Cole (2008) have emphasized that the concept of partnership itself may conceal unequal relationships between professionals and parents. Consequently, the quality of parental involvement should be considered not only in terms of its frequency but also in terms of the degree of agency, reciprocity, respect, and influence available to parents.

The family context is particularly important when the child has autism. The period surrounding recognition of developmental differences and diagnosis may be accompanied by uncertainty, emotional distress, changes in family relationships, and increased caregiving demands. Research has consistently identified elevated parenting stress among parents of children with autism compared with parents of children without autism (Hayes & Watson, 2013). The impact of autism on family life may also involve changes in daily routines, social participation, employment, financial resources, and parental well-being (Karst & Van Hecke, 2012).

Parental involvement should therefore be understood within the broader context of parental psychological resources. A parent experiencing substantial anxiety, exhaustion, or family difficulties may recognize the importance of participation while simultaneously experiencing barriers to active engagement. Recent research also indicates associations among parenting stress, family-school partnerships, and parental mental health (McIntyre et al., 2023). Similarly, parental quality of life is relevant to the sustainability and quality of involvement in interventions for children with autism (Musetti et al., 2021).

School-home communication represents another important dimension. Parents of children with autism value communication that is frequent, clear, open, and responsive to their perspectives. Communication patterns can influence whether parents experience themselves as members of the educational team or merely as recipients of information (Li & Burke, 2023). Professional terminology, unclear procedures, limited opportunities for dialogue, and differences in expectations may create barriers to partnership.

The Individual Education Plan (IEP) provides a particularly important context for parental participation. Because parents possess knowledge derived from everyday interaction with their child, their contribution can help professionals understand the child's needs across contexts and develop more individualized educational goals. However, meaningful participation requires that parents understand the purpose and procedures of the IEP and have genuine opportunities to contribute to decisions.

The present study addresses parental involvement as a component of pedagogical and psychological support for primary schoolchildren with autism. The study focuses not only on the extent to which parents participate but also on the relationship between involvement, parent-professional collaboration, parental psychological state, and perceived support needs.

The aim of the study was to identify the role of parental involvement in the pedagogical and psychological support of primary schoolchildren with autism and to examine how different forms and levels of parental participation are associated with the organization of educational and social-emotional support.

LITERATURE REVIEW

Research on parental involvement in autism education demonstrates that parental participation has multiple dimensions. Goldman and Burke (2017), in their systematic literature review, identified school involvement as encompassing communication, collaboration, participation, and advocacy. This multidimensional understanding is important because parents may be highly involved in one area while having limited participation in another.

Rispoli et al. (2019) similarly demonstrated that parents may occupy different roles in school-based interventions for children with autism. Their role may involve receiving information, assisting with intervention implementation, contributing information about the child, participating in intervention planning, and supporting generalization across settings. This suggests that the quality of parental involvement cannot be captured by a single indicator.

The relationship between parents and professionals is also central. Blue-Banning et al. (2004) conceptualized effective family-professional partnerships around characteristics such as communication, respect, equality, commitment, and trust. Such characteristics are especially relevant in special and inclusive education because families and professionals bring different forms of expertise to the support process.

Parents possess experiential knowledge based on continuous interaction with their child, whereas professionals possess specialized theoretical and practical knowledge. Effective collaboration requires these knowledge systems to be integrated rather than ranked hierarchically. When professional knowledge is treated as superior and parental observations are minimized, parents may become passive recipients of decisions rather than active participants.

Hodge and Runswick-Cole (2008) problematized the assumption that the existence of a formal partnership automatically means equality. Parents may formally be members of a support team while having limited influence over decisions. This distinction between formal participation and substantive participation is particularly relevant to educational planning.

School-home communication is another critical dimension of collaboration. Li and Burke (2023) identified patterns of communication between schools and caregivers of children with autism and emphasized the importance of communication processes that are understandable and responsive to families. Communication that is dominated by professional terminology may create a knowledge imbalance and reduce parents' confidence in expressing their perspectives.

Family stress further complicates involvement. Hayes and Watson (2013) found significantly elevated parenting stress among parents of children with autism. Karst and Van Hecke (2012) similarly described the broader impact of autism on family functioning and parental well-being. Therefore, parental involvement should not be interpreted independently from the resources available to the family.

Đorđević et al. (2021) examined parent-teacher interactions, family stress, well-being, and parental depression as factors related to parental involvement in the education of children with autism. Their work reinforces the need to consider parental involvement within a psychosocial context rather than as an isolated educational behavior.

McIntyre et al. (2023) further highlighted relationships among parenting stress, children's emotional difficulties, family-school partnerships, and parent mental health. These findings support the assumption that improving parent-professional collaboration may require attention to parental psychological well-being.

A systematic review by Musetti et al. (2021) also demonstrated the relevance of parental quality of life and involvement in interventions for children and adolescents with autism. Parent-mediated interventions have additionally demonstrated the potential value of involving parents directly in developmental support (Oono et al.,

2013).

The recent meta-narrative review by Hayward et al. (2025) emphasizes the importance of collaborative relationships between professionals and parents of children with neurodevelopmental conditions. Taken together, the literature indicates that parental involvement should be conceptualized as a relational and systemic process involving the child, family, school, and professional team.

Despite this body of research, there remains a need to examine how parents themselves experience participation within specific educational contexts and how emotional, organizational, and communication factors influence their involvement. The present study contributes to this discussion by combining qualitative accounts with questionnaire-based quantitative data.

METHODOLOGY

RESEARCH DESIGN

A mixed-methods design was employed, combining qualitative and quantitative approaches. The qualitative component was used to explore parents' experiences, perceptions, difficulties, emotional responses, and experiences of cooperation with professionals. The quantitative component was used to complement the qualitative findings and examine parental involvement more systematically.

The combination of methods made it possible to compare parents' reported experiences with the distribution of their responses to structured questions.

PARTICIPANTS

The purposive sample consisted of 30 parents whose children had autism and were involved in school-based pedagogical and psychological support. Parents were selected because they had direct experience of interaction with the educational system and professional support teams.

Among the children represented in the sample, 23 were boys (76.7%) and 7 were girls (23.3%). The children ranged in age from 6 to 10 years and older: 6 children were 6 years old (20.0%), 7 were 7 years old (23.3%), 6 were 8 years old (20.0%), 2 were 9 years old (6.7%), and 9 were aged 10 years or older (30.0%).

DATA COLLECTION PROCEDURES

Three complementary sources of data were used.

First, semi-structured individual interviews were conducted using a pre-developed thematic guide. The interviews addressed parents' experiences, perceptions of educational and psychological support, difficulties encountered in cooperation with professionals, and perceptions of their own role. The order of questions could be adapted and additional probing questions were used when necessary. Interviews were documented through written notes and, when necessary, audio recording.

The interviews were initially planned to last approximately 30–45 minutes. In some cases, however, they lasted 1.5–2.5 hours. The extended duration was associated with parents' need to describe accumulated emotional experiences, unresolved difficulties, and concerns related to the support system.

Second, a structured questionnaire was administered to complement the qualitative interview data. It contained closed and semi-closed questions concerning parental involvement, perceptions of support, cooperation with the professional team, participation in the Individual Education Plan, experiences of diagnosis, and parents'

own support needs. The questionnaire was completed independently in order to reduce researcher influence on responses.

Third, non-verbal behavior was observed during interviews. Attention was paid to facial expressions, gestures, posture, tone of voice, and other non-verbal indicators. Observational notes were compared with the verbal content of interviews.

DATA ANALYSIS

Quantitative responses were summarized using descriptive percentages and corresponding frequencies where these could be reconstructed from the source data. Because not all questionnaire items had the same number of valid responses, denominators were retained at the item level rather than assuming that every percentage was based on the full sample of 30 participants.

Qualitative interview material and open-ended questionnaire responses were examined thematically, with attention to recurring experiences concerning parental involvement, parent-professional communication, emotional responses to diagnosis, barriers to participation, and perceived support needs.

ETHICAL CONSIDERATIONS

Participation was voluntary. Confidentiality and anonymity were maintained. Given the sensitive nature of the topic, particular attention was paid to participants' psychological well-being during the interviews. Participants were informed in advance about the purpose of the study and the intended use of the findings.

RESULTS

EDUCATIONAL PARTICIPATION

Twenty-five of the 30 children (83.3%) were reported to attend school, while 5 children (16.7%) were not attending school at the time of the survey. Thus, school attendance represented the situation for the clear majority of children in the sample.

The findings indicate that school was perceived by many parents as an important environment for learning, communication, social interaction, and participation with peers. At the same time, non-attendance was associated in parents' accounts with different possible barriers, including the child's needs, the accessibility of the school environment, availability of support, and family circumstances.

PARENTS' EVALUATION OF EXISTING SUPPORT

The questionnaire data showed that, among 28 respondents to this item, 4 parents (14.3%) reported being satisfied with the support provided by the school, 7 (25.0%) reported dissatisfaction, and 17 (60.7%) believed that the existing support required revision or modification.

Thus, only a minority of respondents considered the current support fully satisfactory. The largest group—17 of 28 respondents—identified a need for changes. This finding is important because it coexists with relatively high reported parental involvement, suggesting that parents may remain actively engaged while simultaneously perceiving limitations in the support system.

LEVEL AND PERCEIVED IMPORTANCE OF PARENTAL INVOLVEMENT

The source data indicate that 24 of 29 respondents (82.8%) reported active participation in the support process. However, this high level of general participation was not mirrored across all forms of involvement.

Twenty of 28 respondents (71.4%) considered their participation in the child's educational process very important. Only 1 of 28 respondents (3.6%) considered parental participation unimportant.

These results demonstrate a substantial discrepancy between perceived importance and participation in specific formal decision-making processes. Parents generally recognized their role as important, but recognition did not necessarily translate into participation in educational planning.

PARTICIPATION IN THE INDIVIDUAL EDUCATION PLAN

Participation in the Individual Education Plan represented a particularly important indicator of substantive involvement. Thirteen of 27 respondents (48.1%) reported participating in the development of the IEP, while 4 of 27 respondents (14.8%) reported that they did not know what the IEP was.

The difference between general active participation and participation in the IEP is noteworthy. While 24 of 29 respondents reported active involvement in the broader support process, only 13 of 27 reported participation in educational planning through the IEP.

This finding suggests that parental involvement may be relatively high at the level of everyday support, communication, and monitoring but more limited at the level of formal educational decision-making.

PARENT-PROFESSIONAL COLLABORATION

Twenty of 29 respondents (69.0%) reported cooperation with the professional support team. Six of 29 respondents (20.7%) reported difficulties in such cooperation.

The reported barriers included lack of time, incompatibility of schedules, inaccessible or overly complex information, and the use of professional terminology that parents found difficult to understand. Some parents also reported a need for greater recognition and encouragement from professionals.

Qualitative data further indicated that communication was sometimes experienced primarily as information transmission rather than dialogue. Parents could feel that they were expected to listen to professional recommendations rather than contribute equally to decisions.

Six parents specifically reported that their opinions were sometimes insufficiently incorporated into decision-making. This finding provides qualitative support for the discrepancy between general parental involvement and more substantive participation in planning.

EARLY RECOGNITION OF DEVELOPMENTAL DIFFERENCES AND DIAGNOSIS

Fourteen of the 30 parents (46.7%) reported noticing developmental difficulties or distinctive characteristics when their child was 2 years old. Eight of 30 parents (26.7%) reported noticing such characteristics at age 3.

The most frequently reported age at diagnosis was 3 years, reported by 11 of 30 parents (36.7%). Approximately 30% reported diagnosis at a later age.

These findings suggest that parents often notice developmental differences before or around the period when a formal diagnosis is established. They also highlight the importance of parental observations as an early source of information concerning children's development.

Interpretation of the reasons for later diagnosis should remain cautious because the present study did not independently measure access to diagnostic services or systematically investigate causal factors. Parents' concerns

nevertheless referred to uncertainty, delayed recognition, psychological adjustment, information gaps, and limitations in access to professional services.

PARENTS' EMOTIONAL STATE

The qualitative analysis of open-ended responses revealed several recurring emotional reactions to the child's diagnosis, including shock, fear, denial, pain, confusion, and depressive states. Some parents described prolonged psychological distress and hopelessness, whereas others described a process of adaptation and recovery.

The interviews also demonstrated the emotional sensitivity of the research topic itself. Although interviews were planned for 30–45 minutes, some extended to 1.5–2.5 hours. Parents sometimes became visibly emotional, including crying, while discussing their experiences.

Twelve parents reported that psychological distress, anxiety, and fatigue sometimes led them to prefer not to take their child to school every day and instead remain at home. This represents 40.0% of the total sample.

The finding should not be interpreted as evidence that psychological distress caused school non-attendance. Rather, it indicates that a substantial subgroup of parents perceived their psychological state as affecting their ability to maintain regular educational routines.

FAMILY AND SOCIOECONOMIC CONTEXT

The majority of parents reported having higher or secondary professional education. At the same time, 25 of 30 parents (83.3%) were not employed at the time of the survey.

The study data suggest that childcare, treatment, rehabilitation, and educational support responsibilities may occupy a substantial proportion of parents' time. However, because employment status and reasons for non-employment were not measured through a standardized socioeconomic instrument, the findings should be interpreted descriptively rather than causally.

The combination of high parental involvement, substantial caregiving responsibilities, and low employment participation points to the need to consider the broader social and economic context in which parental involvement occurs.

PARENTS' SUPPORT NEEDS

Parents identified several types of support. The available data indicate that psychological support and financial support were each selected by approximately 37.9% of respondents, while physical support was selected by approximately 20.7%.

Because these percentages were based on item-level responses and the source data do not provide a complete denominator and response structure for this question, they should be interpreted as reported response proportions rather than mutually exclusive categories. They should not be summed to represent a single distribution.

The findings nevertheless indicate that parents' needs extend beyond information about education. Psychological, financial, and practical forms of support are relevant to parents' capacity to remain involved in their child's educational process.

Parents identified several factors that could facilitate their involvement, it is presented in table 1.

Table 1. Factors That Could Increase Parental Involvement

Factor	n	%
More sensitive and cooperative professional attitude	17	56.7%
Recognition of the child's small successes	15	50.0%
Special meetings and programs for parents	14	46.7%
Joint informational events	11	36.7%
More accessible information	9	30.0%
Increased parental motivation	9	30.0%
More frequent meetings with other parents	7	23.3%

These responses suggest that parents need more than information. They also need to feel heard, respected, recognized, and emotionally supported. The most frequently identified factor was a more sensitive and cooperative professional attitude, selected by 17 of 30 parents (56.7%).

DISCUSSION

The findings demonstrate that parental involvement is relatively high when measured as general participation in the child's support process, but substantially more limited when measured as participation in formal educational decision-making.

The most striking quantitative comparison is between the 82.8% of respondents who reported active involvement in the broader support process and the 48.1% who reported participation in IEP development. Although the denominators differ—29 and 27 valid respondents respectively—the difference remains conceptually important. Parents appear to participate more readily in everyday support than in formal educational planning.

This distinction supports the argument that parental involvement should not be reduced to frequency of contact. Meaningful involvement requires influence over decisions that affect the child's educational trajectory. Goldman and Burke (2017) and Rispoli et al. (2019) similarly emphasize the multidimensional nature of parental involvement in autism education.

The finding that 4 of 27 respondents (14.8%) did not know what the IEP was provides an additional explanation for limited participation in educational planning. Parents cannot be expected to participate meaningfully in a process that is unfamiliar to them. Accessible information and explicit explanation of the purpose, content, and decision-making procedures of the IEP are therefore essential.

The study also identified a discrepancy between parents' perceived importance of their role and their actual participation. Twenty of 28 respondents (71.4%) considered parental participation very important, while only one respondent (3.6%) considered it unimportant. Nevertheless, six parents reported that their views were sometimes insufficiently included in decision-making.

This finding is consistent with the distinction between formal and substantive partnership. A parent can be present at a meeting but still have limited influence. As Hodge and Runswick-Cole (2008) noted, the language of partnership does not necessarily guarantee equality in practice. The quality of the interaction, therefore, may be more important than the mere existence of meetings.

The 69.0% rate of reported cooperation with the professional team is also important. However, 20.7% of respondents reported difficulties in collaboration. The qualitative data indicate that professional terminology,

inaccessible information, schedule incompatibility, and insufficient recognition of parental contributions may contribute to these difficulties.

These findings correspond with the literature emphasizing communication as a central component of family-professional partnership (Blue-Banning et al., 2004; Li & Burke, 2023). Communication should therefore be conceptualized not merely as the transfer of information but as reciprocal exchange in which professionals and parents can articulate observations, concerns, and proposals.

The emotional findings provide an additional layer of interpretation. The presence of shock, fear, denial, confusion, pain, and depressive states in parents' descriptions of diagnosis is consistent with previous research concerning family stress associated with autism (Hayes & Watson, 2013; Karst & Van Hecke, 2012). Importantly, the current findings indicate that emotional distress may continue to influence parents' participation after diagnosis.

Twelve parents reported that anxiety, fatigue, and psychological distress sometimes affected their decision to take the child to school every day. This does not establish a causal relationship between parental psychological state and school attendance, but it demonstrates that educational participation occurs within a broader family system.

The high proportion of parents who were not employed—25 of 30 (83.3%)—should likewise be interpreted carefully. The study does not establish that autism-related caregiving caused unemployment. However, parents' accounts suggest that childcare, treatment, rehabilitation, and educational responsibilities can substantially influence their time and availability. This issue deserves attention because parental involvement should not be designed on the assumption that parents have unlimited time and emotional resources.

The support needs identified by parents reinforce this point. Psychological and financial support were each reported by approximately 37.9% of respondents, while physical support was reported by approximately 20.7%. Although the exact denominator for this item requires further verification, the pattern indicates that families may need multidimensional support.

The factors identified as potentially increasing parental involvement provide practical implications. The most frequently selected factor was a more sensitive and cooperative professional attitude (56.7%), followed by recognition of children's small successes (50.0%) and special meetings or programs for parents (46.7%).

These findings suggest that parents' involvement is influenced by the relational climate created by professionals. Parents are more likely to participate when they feel that their contribution is valued and that professionals recognize their knowledge of the child.

The findings therefore support a shift from a transmission model of parent-professional communication toward a partnership model. In the transmission model, professionals primarily provide information and parents receive it. In a partnership model, information moves in both directions: professionals contribute specialized knowledge, while parents contribute contextual and experiential knowledge.

Such a model is consistent with the partnership principles proposed by Blue-Banning et al. (2004) and with more recent research emphasizing collaborative relationships between families and professionals (Hayward et al., 2025).

The findings also suggest that parental psychological support should not be considered an optional addition to educational support. If parental stress and emotional exhaustion affect the parent's ability to participate, then supporting the parent may indirectly strengthen the child's educational continuity.

A systemic model can therefore be proposed in which the child, family, and professional team are considered interconnected components. Within such a model, support for the child and support for the family are not separate

processes. Rather, they should be coordinated according to the principle that strengthening parental resources can facilitate sustained participation in the child's development and education.

CONCLUSIONS

The study demonstrates that parents of primary schoolchildren with autism generally recognize their role as important and report substantial involvement in their children's educational and support processes. However, the findings reveal a significant difference between general involvement and participation in formal educational decision-making.

The main conclusions are as follows:

1. Parental involvement is multidimensional. Participation in everyday educational support does not necessarily imply participation in formal educational planning.

2. There is a discrepancy between perceived importance and substantive participation. While 20 of 28 respondents (71.4%) considered parental participation very important, only 13 of 27 respondents (48.1%) reported participation in IEP development.

3. Parent-professional collaboration is generally present but not consistently experienced as partnership. Twenty of 29 respondents (69.0%) reported cooperation with the support team, while 6 of 29 (20.7%) reported difficulties.

4. Communication remains an important barrier. Professional terminology, insufficiently accessible information, limited recognition of parental expertise, and insufficient inclusion in decision-making may reduce meaningful involvement.

5. Parents' psychological state is relevant to educational participation. Twelve parents reported that anxiety, fatigue, and psychological distress sometimes affected their ability to maintain regular school attendance routines.

6. Parents require multidimensional support. The findings indicate needs for psychological, financial, and practical support in addition to educational information.

7. Relational factors can facilitate involvement. A sensitive and cooperative professional attitude, recognition of children's achievements, parent-oriented programs, and accessible information were among the factors most frequently identified by parents as facilitating participation.

The findings support an integrated child-family-professional model of pedagogical and psychological support. Within such a model, the parent should be recognized as an equal participant in educational planning rather than simply as a recipient of professional recommendations.

Schools and support teams should therefore develop mechanisms that ensure understandable communication, regular dialogue, meaningful participation in IEP development, and opportunities for parents to express concerns and contribute to decisions. Parent meetings should move beyond information delivery and create space for reciprocal communication and problem-solving.

Psychological support for parents should also be incorporated into the broader support system. Given the emotional burden identified in the present study, a multidisciplinary approach involving psychologists may strengthen both parental well-being and family participation in educational processes.

LIMITATIONS

The study has several limitations. First, the sample was purposive and relatively small, consisting of 30 parents; therefore, the findings cannot be generalized to all families of children with autism. Second, the study relied substantially on self-reported information, which may be affected by recall and social desirability. Third,

different questionnaire items had different numbers of valid responses, and therefore percentages were calculated using item-specific denominators where these could be reconstructed. Fourth, the study did not employ inferential statistical analysis, and causal relationships between parental psychological state, socioeconomic circumstances, and educational participation cannot be established. Fifth, the qualitative analysis was based on thematic examination of interview material, but a formal named qualitative coding framework was not specified in the available research documentation.

Future research should include larger and more diverse samples, clearly defined quantitative measures of parental involvement and psychological well-being, systematic qualitative coding procedures, and comparative analysis of parent, teacher, and professional perspectives.

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