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Research Article

Parental Acceptance and Understanding on the Emotion Regulation Skills of Children with Autism Spectrum Disorder

Renhel Kate A. Remollo*

National University Baliwag, Philippines

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*Corresponding author:

E-mail:

kate.remollo@gmail.com

ABSTRACT

Literature on Autism Spectrum Disorder (ASD) is continuously growing in academic research; however, there is still very limited research that explores parental acceptance and understanding and how they relate to the emotion regulation skills of children diagnosed with this condition. Hence, to bridge this gap, this research utilized a convergent parallel mixed-method design to answer the research questions of this study. A total of 102 parent-respondents were surveyed using the Parental Acceptance and Understanding on Autistic Children Scale (PAUACS) and the Emotion Regulation Skills Questionnaire (ERSQ), while five (5) parent-participants were interviewed using the researcher-developed semi-structured interview questionnaires. The quantitative findings revealed that parents demonstrated high levels of understanding, acceptance, and positive expectations; however, recognition of autism as an innate and lifelong condition remained moderate. Moreover, the children exhibited limited independent emotion regulation skills, with both adaptive and maladaptive strategies occurring only sometimes and showing a strong reliance on comfort-seeking behaviors. The correlation analysis showed that there is no significant relationship between parental acceptance and understanding and children's emotion regulation skills. In contrast to this, the qualitative findings revealed that a positive parental perspective plays a critical role in managing emotional dysregulation, with acceptance functioning as a co-regulatory mechanism that reduces reactive responses and prevents escalation. Furthermore, the findings of the study indicate that parental acceptance and understanding are essential but not sufficient as stand-alone determinants of the emotion regulation skills of children with ASD, as several factors, such as neurobiological needs, co-regulation processes, and broader support systems, can influence them. The findings of the study highlight the importance of combining informed parental perspectives with structured caregiving strategies to support improved emotional outcomes for children with ASD.

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Introduction

Emotion regulation is an integral component of every individual's day-to-day living. This skill is essential in managing various situations across diverse contexts. For instance, when experiencing intense emotions, individuals use regulation strategies to manage their feelings and responses. However, for children with autism spectrum disorder (ASD), managing emotions can be particularly challenging. Hence, this study aims to understand the role of parental acceptance and understanding in the emotional development of children with ASD.

The American Psychiatric Association (2013) defined ASD in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) as a neurodevelopmental condition that is often characterized by challenges in learning, behavior, communication, and social interaction. It was reported by the World Health Organization (2023) that an estimated 1 in every 100 children in the global population are diagnosed with ASD. In the Philippines, the Autism Society Philippines as cited by Reyes and Domingo (2025), similarly reported a prevalence rate of approximately 1.2 million Filipinos with ASD. Increasingly, there is emerging data suggesting that ASD prevalence rates may underreport the actual numbers of children who are diagnosed with this condition. For instance, according to the latest report from the Centers for Disease Control and Prevention (2025), 1 in every 31 children are currently identified with ASD, indicating an increase in awareness and improvement in diagnostic methods worldwide.

While there is a growing number of local studies investigating the experiences of parents, stigma and access to services, a major void exists in the research literature. Many existing Philippine studies investigate parental stress, coping mechanisms, or systemic barriers to services but most studies examine either the outcomes for parents or the outcomes for children separately. Internationally, there is a paucity of research investigating parental "acceptance" or "resolving" of a child's diagnosis with respect to parent-child interactions and few studies directly link parental acceptance to children's emotional regulation. A recent systematic review revealed only fourteen (14) studies investigating parental acceptance of a child's diagnosis and results primarily focused

on parental psychological well-being and relational factors, rather than directly examining the association of parental acceptance with children's emotion regulation skills (Naicker et al., 2023). Therefore, there is a need for empirically-based research, specifically in the Filipino cultural context, to investigate the relationship between parents' emotional acceptance and cognitive understanding of a child's ASD diagnosis to their child's emotion regulation abilities.

This study was designed to address this gap in the literature by exploring the relationship between parental acceptance and understanding of their child's ASD diagnosis and their child's emotion regulation abilities in the Philippines. Given the increasingly recognized importance of parental involvement in enhancing children's developmental outcomes and the rising prevalence of ASD diagnoses, this research is particularly relevant. Additionally, this study seeks to generate culturally-specific evidence to inform the design of parent training programs, counseling interventions, and SPED practices developed to support families with children with ASD in communities with limited access to such resources. Specifically, the results may serve as baseline data for SPED centers, support programs offered by local governments to support families of children with ASD and provide educators and therapists with practical methods to improve children's emotion regulation skills. Overall, enabling parents to become informed and emotionally resilient partners in the intervention process may positively impact the behavioral outcomes of their children and create supportive family and community environments.

Thus, this study aimed to determine the relationship between parental acceptance and understanding and the emotion regulation skills of children with ASD. Specifically, this study sought to answer the following: [1] What is the level of parental acceptance and understanding of children with ASD in terms of: understanding, innate, acceptance, and expectations? [2] What are the emotion regulation skills of children with ASD in terms of: adaptive regulatory strategies and maladaptive regulatory strategies? [3] Are there any significant relationships between parental acceptance and understanding and the emotion regulation

skills of children with ASD? [4] What are the lived experiences and perspectives of parents in relation to their acceptance and understanding of their children with ASD and how these influence the children's emotion regulation skills? [5] What program may be proposed based on the results of the study?

Hypothesis of the Study

There is no significant relationship between parental acceptance and understanding and the emotion regulation skills of children with ASD.

Materials and Methods

Research Design

A convergent parallel mixed method design was used in this study. It combined a descriptive-correlational quantitative approach with a phenomenological qualitative approach. The convergent parallel design is defined by Gallego (2024) as a mixed method approach that collects both quantitative and qualitative data simultaneously, analyzed independently, and then integrated to gain a comprehensive understanding of the research problem. The quantitative component of the data investigated the relationship between parental acceptance and understanding and the emotion regulation skills of children with ASD whereas the qualitative component explored the lived experiences of the parents regarding these variables. Data triangulation was then employed to integrate the findings collected.

Participant and Sampling

A total of 102 parents of children with ASD were included in this study. A non-probability purposive criterion sampling technique was employed, wherein participants were recruited based on pre-determined eligibility criteria. The inclusion criteria required parents to have a child with a formal ASD diagnosis from a licensed developmental pediatrician. Moreover, the child must be between 3 to 9 years old and currently enrolled in the academic year 2025–2026 in a Department of Education (DepEd)-accredited public and private school offering the Special Needs Education Program (SNED).

For the qualitative phase, five (5) parents were purposively selected from the survey respondents. An additional criterion was applied, requiring at least three years of caregiving experience following their child's ASD diagnosis and willingness to participate in a semi-structured interview. The five-parent qualitative

sample was deemed sufficient upon reaching data saturation, wherein subsequent interviews yielded no substantial new information, insights, or themes relevant to the research questions. Thus, the five participants provided adequate and information-rich data to explore parents' long-term caregiving experiences following their child's ASD diagnosis.

Research Instrument

Parental Acceptance and Understanding of Autistic Children Scale (PAUACS) was utilized to measure the independent variable, parental acceptance and understanding. The scale consists of 30 items across four subscales: Expectations, Acceptance, Innate, and Understanding (Lee et al., 2024). It demonstrated good reliability ($\alpha = 0.89$). Items indicating misconceptions were reverse-coded in accordance with the instrument guidelines.

Emotion Regulation Skills Questionnaire (ERSQ) was used to assess the dependent variable, emotion regulation skills. This is a 52-item scale measuring adaptive and maladaptive regulation strategies, with strong reliability ($\alpha = 0.87$) (Mirabile, 2014).

A nine (9) question semi-structured interview guide developed by the researcher was utilized to explore the lived experiences of the parent-participants. Three (3) special education experts validated the interview guide to ensure alignment with the objectives of the study. These questions primarily focused on parental experiences, coping strategies, and perceptions of children's emotion regulation.

Data Gathering Procedure

An ethical clearance from the National University Baliwag Research Ethics Committee was obtained prior to the collection of the data. The researcher then sought permission from DepEd SDO Malolos and participating SPED schools in the City of Malolos. Upon approval, eligible parents were identified through school coordination and provided informed consent before participation. The study upheld participants' right to confidentiality and ensured that participation was entirely voluntary. During the quantitative stage, respondents answered survey questionnaires that examined parental acceptance, understanding, and children's emotion regulation skills. Meanwhile, the qualitative stage involved semi-structured interviews with five participants to gain deeper insight into their lived experiences. With consent secured beforehand, the conversations were

audio-recorded, transcribed verbatim, and later reviewed through member checking to confirm the accuracy and authenticity of the gathered information.

Data Analysis

The quantitative data were examined using IBM SPSS Statistics through both descriptive and inferential analyses. To summarize the variables, the mean and standard deviation were computed, whereas the relationship between the variables, parental acceptance and understanding and children's emotion regulation skills, was determined using the Pearson Product-Moment Correlation Coefficient. A standardized Likert-scale interpretation was applied to parental variables, whereas a frequency-based scale was used in assessing emotion regulation skills.

A thematic analysis following the framework designed by Braun and Clarke (2006) was used to analyze the qualitative data. The procedure involved familiarizing the responses, assigning codes, constructing and reviewing themes, defining thematic categories, and presenting the final narrative report. The ATLAS.ti software was employed to further support the organization and coding of qualitative responses. The findings from both datasets were subsequently integrated through triangulation to provide a more comprehensive interpretation and improve the validity of the study.

Ethical Considerations

The ethical protocols established by the National University Baliwag Research Ethics Committee and the guidelines set by the Philippine Health Research Ethics Board (PHREB) were

adhered by the researcher. Informed consent was secured from all participants prior to the collection of the data. Respondents were explicitly informed that their involvement was entirely voluntary and that they had the right to discontinue participation at any stage without consequences. Furthermore, participant information was anonymized using coded identifiers to safeguard their privacy. All collected data were stored securely and managed in accordance with the provisions of the Data Privacy Act of 2012. Moreover, the results of the study were presented only in summarized or aggregate form to maintain the confidentiality and anonymity of the participants.

Results and Discussion

Parental Acceptance and Understanding

The quantitative findings revealed that parents of children with ASD generally demonstrated high levels of parental acceptance and understanding across the four measured dimensions. Understanding obtained the highest overall weighted mean ($M = 6.37$, $SD = 0.89$), interpreted as Agree, followed by acceptance ($M = 6.20$, $SD = 1.19$), interpreted as Strongly Agree, and expectations ($M = 6.06$, $SD = 1.17$), interpreted as Agree. In contrast, the innate dimension obtained the lowest overall weighted mean ($M = 4.10$, $SD = 1.76$), interpreted as Neutral. Overall, the findings indicate that parents generally exhibit strong understanding, emotional acceptance, and positive expectations toward their children, while showing comparatively lower certainty regarding the innate and permanent nature of autism-related characteristics.

Table 1. Levels of Parental Acceptance and Understanding Across Dimensions

PAUACS Dimensions	Mean	SD	Verbal Interpretation
Understanding	6.37	.89	Agree
Innate	4.10	1.76	Neutral
Acceptance	6.20	1.19	Strongly Agree
Expectations	6.06	1.17	Agree

These findings suggest that parents highly value continuous learning about autism, flexible parenting approaches, and recognition of their child's individual needs and experiences. The high scores in acceptance and expectations further indicate that parents maintain positive regard, emotional support, and optimistic beliefs regarding their children's autonomy and developmental potential. However, the lower rating in the innate dimension suggests that

some parents may still experience uncertainty regarding the lifelong and neurobiological nature of autism, particularly in relation to sensory traits and behavioral characteristics.

While parents demonstrate strong emotional acceptance and support toward their children, their cognitive understanding of ASD as an inherent and lifetime neurological condition may still be developing. This highlights a

possible tension between emotional acceptance and the recognition of autism as an innate condition, wherein parents fully embrace their child's identity while remaining uncertain about the permanence of certain autistic traits and sensory-related behaviors. The findings therefore suggest that acceptance of the child does not always equate to a full understanding of autism as a lifelong neurodevelopmental condition. Overall, the results highlight the importance of continuous psychoeducation and professional guidance in strengthening both emotional acceptance and cognitive understanding of autism.

These findings are consistent with previous studies indicating that parental understanding of autism develops through continuous learning and exposure to autism-related knowledge (Lee et al., 2024). Previous research also suggests that parents may experience difficulty fully adjusting to autism as a lifelong condition, particularly in understanding the permanence

of autistic traits and sensory-related behaviors (Pellicano et al., 2022).

Emotion Regulation Skills

The quantitative findings showed that children with ASD exhibited both adaptive and maladaptive emotion regulation strategies at moderate levels. Adaptive regulatory strategies obtained an overall mean of 1.71 (SD = 1.19), interpreted as Sometimes, while maladaptive regulatory strategies obtained a slightly higher overall mean of 1.91 (SD = 1.21), also interpreted as Sometimes. Among the adaptive strategies, Comfort Seeking obtained the highest mean (M = 2.95, SD = 1.11), interpreted as Often, whereas Verbal/Other-Oriented Distraction obtained the lowest mean (M = 0.97, SD = 1.03), interpreted as Rarely. For maladaptive strategies, Venting registered the highest mean (M = 2.84, SD = 1.20), interpreted as Sometimes, while Suppression recorded the lowest mean (M = 0.94, SD = 1.05), interpreted as Rarely.

Table 2. Frequency of Adaptive and Maladaptive Emotion Regulation Strategies

ERSQ Dimensions	Mean	SD	Verbal Interpretation
Adaptive Regulatory Strategies	1.71	1.19	Sometimes
Maladaptive Regulatory Strategies	1.91	1.21	Sometimes

These results indicate that children with ASD use a combination of adaptive and maladaptive emotional responses depending on the situation. The high score in Comfort Seeking suggests that children frequently rely on parents or caregivers for reassurance and emotional support during distressing situations. In contrast, the low score in Verbal/Other-Oriented Distraction implies that strategies involving verbal expression and independent redirection of emotions are less frequently utilized. The elevated mean for Venting further indicates that emotional distress is commonly expressed through observable behaviors such as crying or yelling, while the low rating for Suppression suggests that children rarely attempt to conceal or inhibit emotional reactions. Overall, the findings imply that emotional regulation among children with autism remains more dependent on external support and co-regulation than on independent self-management.

These findings are consistent with previous literature. Baker and Perry (2022) explained that children with ASD often experience difficulties in independently managing emotions and therefore require guided support in developing self-regulation skills, consistent with the low use of verbal and distraction-based strategies. Furthermore, another study reported that emotional dysregulation in ASD is frequently expressed through direct behavioral reactions associated with heightened emotional arousal (Guazzo & Nappo, 2025), supporting the elevated level of venting found in this study.

Relationship Between Parental Acceptance and Understanding and the Emotion Regulation Skills of Children with Autism Spectrum Disorder

Table 3. Correlation Between PAUACS Dimensions and Adaptive and Maladaptive Emotion Regulation

PAUACS Variables	Adaptive (r, p)	Interpretation	Maladaptive (r, p)	Interpretation
Understanding	.130, .194	Not Significant	-.163, .102	Not Significant
Innate	.015, .885	Not Significant	.004, .967	Not Significant
Acceptance	.173, .083	Not Significant	-.052, .603	Not Significant
Expectations	.030, .763	Not Significant	-.027, .785	Not Significant

The correlation analysis showed that parental acceptance and understanding were not significantly related to children's adaptive emotion regulation skills across all examined variables. Understanding showed no significant relationship with adaptive emotion regulation ($r = .130$, $p = .194$), while innate ($r = .015$, $p = .885$), acceptance ($r = .173$, $p = .083$), and expectations ($r = .030$, $p = .763$) also did not reach statistical significance.

A similar pattern was observed for maladaptive emotion regulation skills. Understanding ($r = -.163$, $p = .102$), innate ($r = .004$, $p = .967$), acceptance ($r = -.052$, $p = .603$), and expectations ($r = -.027$, $p = .785$) all showed no significant relationships with maladaptive emotion regulation. Overall, none of the correlations reached the 0.05 level of significance, indicating that parental acceptance and understanding were not statistically associated with either adaptive or maladaptive emotion regulation patterns among children with ASD.

These results imply that emotion regulation in children may not be directly shaped by parental acceptance or understanding within the context of this study. This suggests that other influences may play a more substantial role in how children manage their emotions.

Qualitative Findings on Parental Acceptance and Understanding and Emotion Regulation Skills of Children with Autism Spectrum Disorder

Emotion dysregulation in children with autism spectrum disorder was described by the parent-participants as primarily associated with sensory and developmental experiences. More specifically, the parents reported that sensory triggers such as overstimulation, noise sensitivity, abrupt environmental changes, frustration, and difficulty processing sensory input frequently led to crying, meltdowns, aggression, repetitive demands, and rigid behaviors that occurred suddenly and intensely. For this reason, significant emotional drain and extreme stress among caregivers were reported due to these behavioral manifestations. As a

result, some participants reported experiencing anxiety and depressive symptoms, which were linked to prolonged caregiving demands.

The qualitative findings further revealed that prior to their child's ASD diagnosis, parents had limited understanding of autism. Some participants characterized their knowledge as "zero," initially attributing developmental delays to "late bloomer" misconceptions. This stage was marked by denial, confusion, and self-blame. Following their child's diagnosis, the participants described a shift toward increased awareness and active engagement in seeking information and interventions about their child's condition. This reflects a transition from uncertainty to structured understanding. Complementing this finding, acceptance was reported to enhance caregivers' ability to interpret behaviors and respond more effectively during meltdowns.

As the parents' acceptance and understanding of their child's condition increased, they became more equipped to manage their children during moments of emotional dysregulation. Hence, instead of showing reactive panic during these situations, they began to employ more structured behavioral management approaches. These included physical comfort, planned ignoring for repetitive or non-productive behaviors, and reward-based systems to support behavioral regulation and routine consistency. Additionally, the parents emphasized the importance of external support systems, which included family members, therapists, teachers, and developmental pediatricians, as these key individuals contributed to providing consistent guidance and reinforcing interventions across home and other settings. To summarize, the qualitative findings suggest that parental acceptance and understanding contribute to how parents appropriately respond to their child's behavioral challenges. However, it is also important to note that there are numerous factors that may also contribute to the child's emotion regulation skills, such as sensory and developmental factors, structured strategies, and external support systems.

Integrated Findings

Upon integrating the quantitative and qualitative findings of the study, it was found that emotion regulation in children with ASD is influenced by multiple interacting factors. This further explains the absence of a statistically significant relationship between parental acceptance and understanding and emotion regulation skills.

According to the quantitative results, parental acceptance and understanding do not have any significant relationship with children's emotion regulation skills. This finding implies that parental acceptance and understanding alone do not directly determine a child's emotion regulation skills, as the child's regulation is also influenced by other factors. In support of this, the qualitative findings provide more context on what these factors are. Particularly, the participants mentioned that emotional dysregulation is primarily associated with the child's sensory processing and developmental characteristics. Thus, the absence of a statistical relationship may reflect the influence of factors beyond parental variables, particularly the child's sensory and developmental needs, which may affect how regulation occurs. This helps clarify why parental variables alone were insufficient in accounting for emotion regulation outcomes in the quantitative phase. Furthermore, the findings emphasize that emotion regulation is supported by a broader ecological system involving other key individuals such as family members, teachers, and therapists. These interconnected supports contribute to consistency in behavioral and emotion management across different settings. This highlights that emotion regulation is influenced by multiple systems beyond the immediate parent-child relationship.

Moreover, the qualitative data also highlights how parental acceptance and understanding shape caregivers' responses during episodes of dysregulation. Higher levels of acceptance were associated with greater emotional composure and more supportive caregiving practices. However, these effects appear to be indirect, as they are reflected more in caregiver responsiveness during emotional episodes than in children's independent emotion regulation capacities.

Overall, the integrated findings suggest that parental acceptance and understanding are better conceptualized as facilitating factors for co-regulation rather than as variables that have a direct relationship with children's emotion

regulation skills. Accordingly, the non-significant quantitative result may reflect the combined influence of sensory, developmental, and environmental factors involved in emotional regulation across contexts. Rather than indicating that parental acceptance is unimportant, the findings suggest that its influence may be expressed through co-regulatory support and caregiver responsiveness rather than directly determining the child's emotion regulation skills.

Proposed Program

The development of Project CARE (Caregiver Adaptive Response and Empowerment) arose from the need to address the considerable knowledge deficit of parents and the actual application of neuro-affirmative supports. The data collected through this study have identified a substantial discrepancy between the expressed wishes of the parents to assist their children and the fact that many parents have experienced "zero knowledge," leading to extreme stress and a reliance on reactive rather than proactive parenting.

The primary motivation for this program is the observation of a bidirectional stress loop within the family unit. Parental anxiety and emotional drain are not isolated experiences; they directly influence the child's ability to regulate. A cycle of venting and aggression occurs when the child's dysregulation intensifies due to the parent's state of reactive panic. Hence, Project CARE aims to break this cycle by empowering and prioritizing the parent's psychological flexibility. In this way, this ensures that the caregiver will remain a stable anchor during the child's moments of dysregulation.

The study's findings also revealed that children in the sample "rarely" utilize independent adaptive skills, such as self-directed speech or information seeking. The results further indicate that current parental interventions often focus on co-regulation. As a result, most of the children have yet to build independence in regulating their own emotions but rather are dependent on external comfort provided by their parents. To address this, Project CARE is designed to transition parents from being the sole regulator to becoming a scaffold. Although the researcher recognizes that co-regulation is necessary and developmentally supportive, it is also important to note that exclusive reliance on external comfort may limit opportunities for children to gradually develop internal adaptive regulation skills. This program ensures that the

children are gradually equipped with the linguistic and sensory tools needed to navigate the world autonomously.

Another gap that the program aims to address is the misconception of the parents that autistic traits are phases to be outgrown. During the first weeks of implementation, the program will highlight the importance of understanding the neurobiological blueprint of their child with ASD. This aims to shift the parental perspective from normalization to environmental support. This posits that when parents accept the permanence of their child's condition, they stop fighting the behavior and start modifying the environment. This involves reframing autism as an inherent and lifelong neurodevelopmental condition rather than a temporary developmental delay, thereby encouraging parents to move from normalization-based expectations toward environmental adaptation and support. This shift is not merely a

clinical adjustment but a prerequisite for long-term family resilience and a strength-based visualization of the child's future.

Program Objectives

1. To deepen cognitive understanding of autism as a lifelong neurobiological blueprint rather than a "phase" to be outgrown.
2. To transition from co-regulation to scaffolding, equipping parents with tools to help children move from seeking external comfort to using internal adaptive strategies.
3. To mitigate parental stress and anxiety by replacing reactive panic with structured, evidence-based behavioral responses.
4. To foster identity and sense of community among individuals with autism, encouraging parents to visualize thriving adulthood and the value of peer-group socialization.

Table 4. Project CARE: Caregiver Adaptive Response and Empowerment on Enhancing Emotion Regulation Skills among Children with Autism

Program Objectives	Activities	Persons Involved	Time Frame	Proposed Budget / Resources	Expected Outcomes	Evaluation Method
1. To deepen cognitive understanding of autism as a lifelong neurobiological blueprint	Workshops: - Clinical lecture on neurobiological permanence. - Identifying sensory hardware vs. behavioral phases. Resilience Circles: - Processing diagnostic denial and the "Zero Knowledge" gap.	Parent-participants, Developmental Pediatrician, SPED Teacher	Weeks 1 – 3	Budget: ₱14,500 Honorarium: DevPed (₱10,500) Printing of Manuals (₱2,000) Meals/ Snacks: (₱2,000)	Parents demonstrate a comprehensive understanding of the innate nature of autism and sensory traits.	Pre-program Competence Assessment (Baseline).
2. To transition from co-regulation to scaffolding using internal adaptive strategies	Workshops: Training on the Adaptive Regulatory Strategies - Modeling self-directed speech and visual supports. Resilience Circles: - Peer coaching on transitioning from "Comfort Seeking"	Parent-participants, Occupational Therapist, Behavior Analyst	Weeks 4 – 6	Budget: ₱16,500 CARE Kits: Visual timers, PECS, sensory tools (₱7,000) Honorarium: OT/ Behavior Analyst (₱7,500) Meals/ Snacks: (₱2,000)	Children show an increased use of independent adaptive tools; parents successfully implement scaffolding techniques.	Reflective Sharing (Formative) : Qualitative data collection through Focus Group Discussions (FGD) during Resilience Circles to

Program Objectives	Activities	Persons Involved	Time Frame	Proposed Budget / Resources	Expected Outcomes	Evaluation Method
	to child-led autonomy.					track skill adoption.
3. To mitigate parental stress and anxiety by replacing reactive panic with structured responses	Integrated Session Activities: - "Pause the Panic" physiological reset drills. - Post-incident reflection protocols. - Group troubleshooting of high-stress behavioral crises.	Parent-participants, Guidance Counselor, Peer Facilitators	Weeks 1 - 8 (Ongoing)	Budget: ₱20,000 Honorarium: Guidance Counselor (15,000) Reflection Journals (₱5,000)	Parents report a reduction in emotional drain and clinical anxiety through informed, structured action.	Reflective Sharing (Formative) : Ongoing monitoring of stress levels and "Panic" management through circle discussions.
4. To foster autistic identity and community for a thriving adulthood	Workshops: - Strength-based future mapping. - Introduction to neurodiversity-affirming peer groups. Resilience Circles: - Collaborative planning for school and family advocacy.	Parent-participants, Autistic Self-Advocate, Social Workers	Weeks 7 - 8	Budget: ₱8,000 Guest Speaker Honorarium (₱4,000) Advocacy Materials (₱1,000) Certificates (₱1,000) Meals/ Snacks (₱2,000)	Parents articulate a positive future trajectory and identify external support networks for social identity.	Post-program Competence Assessment & Program Exit Interview (Summative)

Conclusion

The study concludes that parents of children with Autism Spectrum Disorder generally report strong levels of understanding, acceptance, and expectations toward their children, although a proportion are still adjusting their recognition of autism as a lifelong neurodevelopmental condition, reflecting an ongoing process of cognitive reorganization alongside emotional acceptance. Children's emotion regulation is largely manifested through frequent comfort-seeking, with only limited independent regulatory capacity and intermittent maladaptive behaviors, indicating a predominant reliance on external co-regulatory assistance. The absence of significant relationships between parental acceptance or understanding and children's emotion regulation suggests that parental acceptance and understanding alone do not directly determine children's emotion regulation within the context of this study. Qualitative evidence further indicates that

emotion regulation is shaped by progressive changes in parental coping responses, reciprocal stress interactions between parent and child, and the influence of multiple interconnected support systems. In conclusion, while parental acceptance and understanding may contribute to supportive co-regulation, children's emotion regulation appears to be influenced by multiple interacting factors beyond parental characteristics alone.

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