

Parenting style differences among parents of children with and without autism

Mst. Ambia Khatun^{1*}, Mahfuza Khanam² and Most. Aeysha Sultana²

¹*School of Education, Bangladesh Open University, Gazipur-1705, Bangladesh*

²*Department of Psychology, University of Dhaka, Dhaka-1000, Bangladesh*

Keywords: Autism, Parental gender, Parenting styles

Abstract

The present study aimed to compare parenting styles among parents of children with autism and parents of children without autism and to examine the relations among three parenting styles. A total of 140 parents (70 mothers and 70 fathers) were selected through purposive sampling. Of these, 70 parents (35 fathers and 35 mothers) had children with autism, while the remaining 70 parents (35 fathers and 35 mothers) had children without autism. Data were collected using translated versions of the Parenting Styles and Dimensions Questionnaire (PSDQ) and obtained data were analyzed through analysis of variance (ANOVA) and Pearson product-moment correlation coefficients. The three parenting styles were assessed like- authoritative, authoritarian, and permissive. The findings indicated that mean score of authoritative parenting is more than rest of the two (authoritarian and permissive) parenting styles and it further revealed that authoritative parenting uses more among the parents with autistic children. Mothers reported higher use of authoritative and authoritarian parenting than fathers, regardless of child status. In addition, parents of children without autism reported higher levels of authoritarian parenting compared to parents of children with autism. No significant differences emerged in permissive parenting with respect to parental gender or child status. Correlational analyses revealed that authoritative parenting was negatively associated with authoritarian as well as permissive styles, whereas authoritarian and permissive styles were positively associated with one another.

Introduction

Parenting a child with autism presents a unique set of challenges and stressors for parents⁽¹⁾. In Bangladesh, the prevalence of Autism Spectrum Disorder (ASD) has been estimated at approximately 3% of the total population⁽²⁾. Autism, or autistic disorder, is classified as a pervasive developmental disorder characterized by delays and deviations in social, communicative, and other developmental skills, alongside motor mannerisms, resistance to change, and idiosyncratic interests and preoccupations⁽³⁾. As a complex neuro-

*Author for Correspondence: ambiak90@gmail.com

developmental condition, autism typically endures across the lifespan and is associated with pronounced impairments in social interaction, language, and cognitive functioning. The condition arises from neurological differences that interfere with normal brain functioning, thereby affecting the ways in which individuals communicate and interact with others. Children with autism often exhibit difficulties in areas such as non-verbal communication, social engagement, and sustained play activities. Moreover, symptoms may vary widely, both between individuals and across developmental stages within the same individual.

Parenting Styles: Researchers have identified four types of parenting styles based on the dimensions of responsiveness and demandingness: authoritative, authoritarian, indulgent (also referred to as permissive), and neglectful (also referred to as uninvolved)^(4,5). Each style reflects a distinct approach to raising children and can be identified by specific characteristics.

Authoritative parenting: In authoritative parenting, parents provide not only support and warmth, but also clearly defined rules and consistent discipline. It is characterized as high in responsiveness and demandingness⁽⁴⁾.

Authoritarian parenting: It is characterized by high demandingness and low responsiveness. Parents impose strict rules and harsh punishments, expecting unquestioned obedience with little explanation, feedback, or emotional warmth⁽⁶⁾.

Indulgent parenting: It also known as permissive or lenient parenting, is characterized by high responsiveness but low demandingness. Parents are highly involved with their children yet impose few rules or controls⁽⁶⁾.

Permissive parenting: In permissive parenting, parents are lenient and impose few rules or discipline. They allow children to make their own decisions, often acting more like friends than authority figures. Permissive parents tend to indulge their children's wishes and may compensate for their own deprived childhood by offering excessive freedom and material comfort⁽⁷⁾.

Uninvolved parenting: It is characterized by few demands, low responsiveness, and minimal communication. These parents meet basic needs like food and shelter but remain emotionally detached and uninvolved in their child's life. They provide little guidance, structure, or support, and in extreme cases may neglect the child's needs. This parenting style ranks lowest across life domains, with children often showing low self-esteem, poor self-control, and reduced competence⁽⁸⁾.

Parenting style and parental interactive behaviors are strongly influenced by the challenges of raising a child with Autism Spectrum Disorder (ASD), particularly given the severe impairments in social interaction that characterize the condition⁽⁹⁻¹⁴⁾. Parenting children with ASD can be more stressful and demanding than parenting typically developing children, especially in contexts where supportive resources are limited. A

perceived lack of control in managing their child's behavior has been linked to higher stress levels among parents of children with autism⁽¹⁵⁾. Parents of children with ASD often report weaker attachment bonds and lower use of authoritative parenting compared to parents of typically developing children⁽¹³⁾.

Several factors may mediate the relationship between autism and parenting style, including the child's adaptability (i.e., ability to adjust to social changes) and parental perceptions of acceptability (e.g., viewing the child as less intelligent)⁽¹⁶⁾. Research also indicates that, compared to children without ASD, those with ASD are associated with lower levels of authoritative parenting and higher levels of permissive parenting. Furthermore, reduced authoritative parenting, alongside increased authoritarian and permissive approaches, has been modestly linked to elevated parental stress⁽¹⁷⁾.

Gender differences have also been observed. Mothers are often found to employ more permissive parenting than fathers, while parents of children with more severe forms of ASD tend to adopt an authoritarian approach⁽¹⁸⁾. Nevertheless, some findings indicate that the authoritative style remains the most frequently used and highest-rated parenting approach, possibly reflecting parents' desire to balance warmth with structure when raising children with ASD. Notably, cultural context plays a role: while authoritative parenting is consistently associated with positive child outcomes in Western societies, authoritarian parenting remains more common across many Asian cultures⁽¹⁹⁾.

A systematic review suggest that out of the reviewed studies, 12 focused on authoritative, 5 on authoritarian, 3 on permissive, and 3 on supportive parenting styles. The findings indicate that authoritative parenting is the most prevalent style. Evidence suggests that adopting an authoritative approach can promote positive outcomes for children with ASD, especially when applied with informed practice and understanding of its effectiveness⁽²⁰⁾. Another findings indicated that the democratic (authoritative) style was most common, particularly among parents aged 30-54 with high school or undergraduate education. Parents aged 55 with postgraduate education tended to combine democratic and permissive styles⁽²¹⁾.

Rationale of the study

Empirical evidence suggests that parenting styles are strongly shaped by the challenges of raising children with autism. Parents often experience heightened distress, confusion, and uncertainty, which can compromise effective parenting practices⁽²²⁾. Professional support such as- psychotherapy, cognitive behavioural therapy, parent counselling, and family therapy plays a critical role in helping parents adapt and foster healthier family dynamics. However, in Bangladesh, research on the relationship between autism and parenting styles remains limited. While international studies have identified important associations, culturally specific evidence and strategies for Bangladeshi families are lacking. The present study addresses this gap by investigating parenting styles among

parents of children with autism in Bangladesh. It compares them with parents of non-autistic children, explores differences between mothers and fathers, and analyses correlations among parenting styles. The findings are expected to enhance psychological understanding, guide culturally relevant interventions, and support family well-being.

Objectives

The specific objectives of this study are:

1. To explore parenting style of parents having autistic children.
2. To compare the parenting style of parents of children with autism and those of having normal children.
3. To know the correlation among different parenting styles.

Materials and Methods

Participants

A total of 140 parents participated in this study, selected using purposive and convenience sampling techniques. All respondents were residents of different areas of Dhaka city. The sample comprised 70 parents (35 fathers and 35 mothers) of children with autism and 70 parents (35 fathers and 35 mothers) of children without autism. The parents' ages ranged from 22 to 65 years, and their educational backgrounds varied from primary education (Class Two) to doctoral (PhD) level. Monthly family income ranged from 5,000 to 300,000 BDT. The number of children per family ranged from one to five, with the number of children diagnosed with autism ranging from zero to two. Participants were recruited from the Teachers' Training Center (TTC) and three branches of the Society for the Welfare of the Intellectually Disabled, Bangladesh (SWID Bangladesh), located in Dhaka.

Measures

The following instruments were used to collect data from the respondents-

1. Personal Information Form (PIF)
2. Parenting Styles and Dimensions Questionnaire (PSDQ)

Personal Information Form (PIF)

A personal information form was administered to collect socio-demographic details such as the parents' age, gender, educational qualification, occupation, number of children, number of special children, disability status of the child (autistic or normal), age of the child and family income.

Parenting Styles and Dimensions Questionnaire (PSDQ)

The Parenting Styles and Dimensions Questionnaire (PSDQ), developed by Robinson *et al.*⁽²²⁾, is a 62-item parent-report measure assessing authoritative, authoritarian, and permissive parenting styles. Items were adapted from the Parenting Practices Questionnaire⁽²²⁾ and the Child-Rearing Practices Report⁽²⁾, based on Baumrind's typology. Parents rate each item on a 5-point Likert scale (1 = Never to 5 = Always).

The PSDQ includes three dimensions:

- Authoritative (four factors: warmth/involvement- 11 items; reasoning/induction- 7 items; democratic participation- 5 items; easy-going- 4 items)
- Authoritarian (verbal hostility- 4 items; corporal punishment- 6 items; nonreasoning/punitive strategies- 6 items; directiveness- 4 items)
- Permissive (lack of follow-through- 6 items; ignoring misbehavior- 4 items; self-confidence- 5 items)

The English version shows high internal consistency (Cronbach's $\alpha = .91$ for authoritative, $.86$ for authoritarian, and $.75$ for permissive). The Bangla-translated version followed standard translation procedures and demonstrated strong test-retest reliability over a 14-day interval ($r = .92, .85,$ and $.85,$ respectively, $p < .001$). Content and face validity were confirmed by expert review.

Each item is rated for both "self" and "spouse," with response options from Never to Always. Total scores range from 62 to 310, where higher scores indicate greater endorsement of a given parenting style.

Procedure

Data were collected through personal interviews after obtaining ethical approval from the Ethical Review Committee, Department of Psychology, University of Dhaka. Participants received an information sheet and consent form, and rapport was established before administering the questionnaires. They were assured of anonymity, confidentiality, and the use of data only for research. General instructions were provided, and respondents were asked to read each item carefully and respond promptly.

Results and Discussion

The purpose of the present study was to compare the parenting styles of parents of children with autism and those of parents with typically developing children. Data were analysed using two-way analysis of variance (ANOVA), standard deviations, and Pearson's product-moment correlation coefficients. Descriptive statistics are reported in tables 1, 3, and 5. The interaction effects are presented in tables 2, 4, and 6, while the correlation results are summarised in table 7.

Table 1. Descriptive statistics for authoritative practice score across parents' gender and status of the parents (having children with autism and without autism) (N = 140)

Group	Mean	Std. Deviation	<i>n</i>
Fathers	95.12	18.54	70
Mothers	102.31	15.46	70
Parents having children with autism	99.54	15.98	70
Parents having children without autism	97.93	18.77	70

Table 2. Summary of the two- way analysis of variance (ANOVA) for authoritative practice score across parents' gender and status of the parents

Source of variance	SS	<i>df</i>	MS	<i>F</i>	<i>p</i>
Parents' gender	1801.58	1	1801.58	6.13	.015
Parents' status	95.51	1	95.51	.33	.570
Parents' gender x parents' status	59.94	1	59.94	.20	.652
Error	39709.60	136	294.15		
Total	1396887.00	140			
Corrected Total	41666.68	139			

Note. SS = Sum of Squares, *df* = degrees of freedom, MS = Mean Square

According to tables 1 and 2, mothers scored significantly higher than fathers in authoritative parenting, regardless of having children with or without autism. No significant difference was found between parents of children with autism and neither those without, nor any interaction between parent gender and child status. Overall, both groups practiced authoritative parenting, with mothers reporting higher levels.

These findings indicate that parents generally provided warmth, support, and consistent discipline. Although differing from some studies reporting lower authoritative use among parents of children with autism^(13,17), the results align with research identifying it as the most common style among such parents⁽¹⁹⁻²¹⁾. This may be due to data collection from schools and training centers offering awareness programs, often attended more by mothers, which could have enhanced authoritative practices.

Table 3. Descriptive statistics for authoritarian practice score across parents' gender and status of the parents (having children with autism and without autism) (N = 140)

Group	Mean	Std. Deviation	N
Fathers	31.43	10.74	70
Mothers	36.37	11.42	70
Parents having children with autism	31.53	10.37	70
Parents having children without autism	36.27	11.79	70

Table 4. Summary of the two-way analysis of variance (ANOVA) for authoritarian practice score across parents' gender and status of the parents

Source of variance	SS	df	MS	F	p
Parents' gender	855.11	1	855.11	7.33	.008
Parents' status	787.31	1	787.31	6.74	.010
Parents' gender x parents' status	285.71	1	285.71	2.45	.120
Error	15876.46	136	116.74		
Total	178694.00	140			
Corrected Total	17804.60	139			

Note. SS = Sum of Squares, *df* = degrees of freedom, *MS* = Mean Square

There was a significant difference in authoritarian parenting between mothers and fathers (Table 4), with mothers scoring higher than fathers (Table 3), regardless of child autism status. Parents of children with autism reported lower authoritarian scores than those of children without autism. No significant interaction was found between parent gender and child status. Overall, mothers were more authoritarian than fathers, while parents of children with autism were less authoritarian contradicting earlier findings⁽¹⁷⁾ that linked autism with higher authoritarian parenting.

Table 5. Descriptive statistics for permissive practice score across parents' gender and status of the parents (having children with autism and without autism) (N = 140)

Group	Mean	Std. Deviation	N
Fathers	17	4.91	70
Mothers	18.13	5.32	70
Parents having children with autism	17.44	4.83	70
Parents having children without autism	17.69	5.46	70

Table 6. Summary of the two-way analysis of variance (ANOVA) for permissive practice score across parents' gender and status of the parents

Source of variance	SS	df	MS	F	p
Parents' gender	44.58	1	44.58	1.69	.197
Parents' status	2.06	1	2.06	.08	.781
Parents' gender x parents' status	4.46	1	4.46	.17	.683
Error	3613.31	136	26.57		
Total	46855.00	140			
Corrected Total	3664.42	139			

Note. SS = Sum of Squares, *df* = degrees of freedom, MS = Mean Square

No significant differences were found in permissive parenting scores between fathers and mothers, or between parents of children with autism and those without autism (Table 5). Table 6 also showed no significant interaction effect between parent gender and child status. Thus, permissive parenting did not vary significantly by either gender or child status. These findings contrast with previous research^(17,18), which reported that parents of autistic children more frequently used permissive parenting strategies, often alongside higher authoritarian and lower authoritative practices. Prior studies also indicated that both authoritarian and permissive parenting styles are associated with increased parental stress⁽¹⁷⁾.

Table 7. Pearson product-moment correlation coefficients among authoritative, authoritarian and permissive parenting (N = 140)

Variables	1	2	3
Authoritative Parenting	1		
Authoritarian Parenting	-.254**	1	
Permissive Parenting	-.156	.668**	1

** . Correlation is significant at the 0.01 level (2-tailed).

Table 7 shows that the authoritative parenting style is negatively correlated with both authoritarian and permissive styles, while authoritarian and permissive styles are positively correlated. This indicates that parents who adopt an authoritative approach are less likely to use authoritarian or permissive methods, whereas some parents may employ both authoritarian and permissive behaviors. These findings align with previous research⁽¹⁷⁾, which reported lower levels of authoritative and higher levels of permissive parenting, along with a modest but significant link between reduced authoritative and increased authoritarian or permissive parenting and higher parental stress.

Conclusion

The study revealed that authoritative parenting was the most common style among both parents of children with and without autism, with mothers scoring higher than fathers. Authoritarian and permissive styles were negatively correlated with authoritative parenting. Despite limitations such as an urban-only sample, reliance on self-reports, and a modest sample size, the findings have practical implications. Parenting programs should encourage authoritative practices, engage fathers, and provide culturally adapted counselling and training. Supporting mothers through vocational and financial initiatives can further enhance family well-being. Overall, the study highlights the prevalence of authoritative parenting in Bangladesh and emphasizes the need for culturally sensitive, family-focused interventions to promote positive parent and child outcomes.

References

1. Clauser P, Ding Y, Chen EC, Cho SJ, Wang C, and Hwang J 2021. Parenting styles, parenting stress, and behavioral outcomes in children with autism. *School Psychology International*, **42**(1):33–56. <https://doi.org/10.1177/0143034320971675>.
2. Ministry of Social Welfare of Bangladesh 2016, 27 July. *Disabilities Screening Bulletin*.
3. Volkmar FR, Klin A, Schultz RT and State MW 2009. Pervasive developmental disorder. In: Sadock BG, MD and Sadock VA, MD editors. *Kaplan and Sadock's Comprehensive Text Book of Psychiatry*. 9th Ed. Philadelphia: Lippincott Williams and Wilkins; 2:3540-3559.
4. Baumrind D 1991. The influence of parenting style on adolescent competence and substance use. *J. Early Adolesc.* **11**:56–95. doi:10.1177/02724316911111004.

5. Maccoby E and Martin J 1983. "Socialization in the context of the family: parent child interaction". In *Handbook of Child Psychology Socialization, Personality, and Social Development*, Vol. 4, Eds. Hetherington E.M. and P.H. Mussen (New York, NY: Wiley), pp. 1–101.
6. Santrock JW 2007. *A topical approach to life-span development*, third Ed. New York: McGraw-Hill.
7. Rosenthal, Maryann. 'Knowing Yourself and Your Children'. www.drma.com. Archived from the original on 24 August 2014. Retrieved 7 December 2014.
8. Power TG. Parenting dimensions and styles: a brief history and recommendations for future research. *Child Obes.* 2013; **9** (Suppl 1):S14–S21. doi:10.1089/chi.2013.0034.
9. Hoppes K and Harris SL 1990. Perceptions of child attachment and maternal gratification in mothers of children with autism and down syndrome. *Journal of Clinical Child Psychology*, **19**:365–370.
10. Kasari C and Sigman M 1997. Linking parental perceptions to interactions in young children with autism. *Journal of Autism and Developmental Disorders*, **27**:39–57.
11. Nouri M 2009. Comparison of mental health and marital satisfaction of parents of autistic children and parents of normal children in Isfahan city. *Shahid Chamran Univ.* pp. 1-90.
12. Riahi F and Izadi-Mazidi S 2012. Comparison between the mental health of mothers of children with autism and control group. *Iranian Journal of Psychiatry and Behavioral Sciences*, **6**:91-95.
13. Rutgers AH, van IJzendoorn MH, Bakersman-Karnenburg MJ, Swinkels SHN, van Daalen E and Dietz C 2007. Autism, attachment and parenting: a comparison of children with Autism Spectrum Disorder, Mental Retardation, Language Disorder and non-clinical children. *Journal of Abnormal Child Psychology*, **35**:859–870. doi:10.1007/s10802-007-9139-y.
14. Sigman M, Mundy P, Sherman T and Ungerer J 1986. Social interactions of autistic, mentally retarded, and normal children with their caregivers. *Journal of Child Psychology and Psychiatry*, **27**:647–656.
15. Horowitz A 2004. The mediating effects of perceptions and coping strategies between personal resources and emotional well-being: A study of mothers of children with autism. *Dissertation Abstracts International Section B: The Sciences and Engineering*, **64**:6009.
16. Noh S, Dumas JE, Wolf C and Fisman SN 1989. Delineating sources of stress in parents of exceptional children. *Family Relations*, **38**:456–461.
17. Likhitweerawong N, Boonchooduang N and Louthrenoo O 2020. "Parenting styles, parental stress, and quality of life among caregivers of Thai children with autism". *International Journal of Disability, Development and Education*, **69**(6):2094–2107. <https://doi.org/10.1080/1034912x.2020.1837354>.
18. Tripathi N 2016. "Parenting style and parents' level of stress having children with autistic spectrum disorder (CWASD): A study based on Northern India", *Neuropsychiatry*, **5**(1):42-49. <https://doi.org/10.4172/neuropsychiatry.1000107>.
19. Rahman PA and Jermadi SH 2021. Parental stress and parenting styles in managing autistic children with behaviour problems. *Malaysian Journal of Medicine and Health Sciences*, **17**(3):84-91.
20. Vali shiri, Ali S.Hosseini, Zahra nobakht, masoud nosratabadi, Mohsen vahedi, Ebrahim Pishyareh 2025. Investigating the Parenting Style of Parents of Children with Autism

- Spectrum Disorder: A Systematic Review Article. *Neuropsychiatry (London) Journal*, **15**(1):1-17. DOI:10.37532/1758-2008.2025.15[1].757s.
21. Belaweni BM and Junias MS 2025. 'Description of parenting style of parents with autistic children and their accompaniment treatment', *Journal of Health and Behavioral Science*, **7**(2):637-647. DOI:10.35508/jhbs.v7i2.20745.
 22. Robinson CC, Mandelco B, Olsen SF and Hart CH 1995. Authoritative, authoritarian, and permissive parenting practices: Development of a new measure. *Psychological Reports*, **77**:819-830.

(Manuscript Received on 20 May, 2025; Accepted on 19 January, 2026)