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Identifying the Educational Needs of Parents of Children Diagnosed with Autism Spectrum Disorder in Early Childhood

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Abstract: Educational competencies for parents include the ability to acquire skills related to activities that aid in the social and emotional development of their children as well as the ability to manage problem behaviour and monitor their children's behaviour. Additionally, the aim is to enable children to acquire communication and interaction skills, self-care skills, psychomotor and cognitive skills, and to facilitate their children's social interaction. The aim of this study is to determine the educational needs of parents having a child diagnosed with autism spectrum disorder in early childhood. The semi-structured interview, which is part of the qualitative research technique, was used in the present study. Data were gathered through a semi-structured interview form. The participants of this research consisted of 20 parents having a child diagnosed with autism spectrum disorder in early childhood and living in Konya. The obtained data were analyzed using a descriptive analysis technique. The results of the study have revealed that parents having a child diagnosed with autism spectrum disorder in early childhood feel inadequate about helping their children acquire social and emotional skills, cognitive skills, language and communication skills, self-care skills, fine and gross motor skills, and dealing with the problem behaviors exhibited by their children diagnosed with autism spectrum disorder. Parents reported that they need training programs on these issues. It is suggested that parent training programs should be effectively implemented and school administrators play a supportive role in parental education by cooperating with school counseling services and teachers.

Keywords: Parent, Educational need, Autism Spectrum Disorder, Special education

Erken Çocukluk Döneminde Otizm Spektrum Bozukluğu Tanılı Çocuğu Olan Ebeveynlerin Eğitsel İhtiyaçlarının Belirlenmesi

Öz: Ebeveynler için eğitsel yeterlikler, çocuklarını sosyal ve duygusal açıdan geliştirmelerine yardımcı olacak etkinliklerle ilgili becerileri kazandırması, problem davranışlarla baş edebilmesi ve çocuklarının gelişimini izleme becerisi olarak sıralanmaktadır. Ayıca çocukların iletişim ve etkileşim becerilerini kazanmalarını sağlamak, öz bakım becerilerini, psikomotor ve bilişsel beceriler edinmelerini sağlamak ve çocuklarının başkalarıyla sosyal olarak etkileşime girmesini sağlamaktır. Araştırmanın amacı, erken çocukluk döneminde Otizm Spektrum Bozukluğu tanılı çocuğu olan ebeveynlerin eğitsel ihtiyaçlarının belirlenmesidir. Araştırmada nitel araştırma yöntemlerinden yarı yapılandırılmış görüşme yöntemi kullanılmıştır. Veriler yarı yapılandırılmış görüşme formu aracılığıyla toplanmıştır. Araştırmaya Konya ilinde ikamet eden erken çocukluk döneminde otizm tanılı çocuğu olan 20 ebeveyn katılmıştır. Elde edilen veriler betimsel analiz tekniğiyle analiz edilmiştir. Araştırma sonucunda erken çocukluk döneminde otizm tanılı çocuğu olan ebeveynler çocuklarına; sosyal ve duygusal beceriler, bilişsel beceriler, dil ve iletişim becerileri, özbakım becerileri, ince ve kaba motor beceriler edindirmeyle ilgili ve otizm tanılı çocuklarının problem davranışlarıyla baş edebilmeye yönelik kendilerini yetersiz gördükleri ortaya çıkmıştır. Ebeveynler bu konularla ilgili eğitim almaya gereksinim duyduklarını ifade etmişlerdir. Erken çocukluk döneminde otizm tanılı çocuğu olan ebeveynlere yönelik eğitimlerin etkili şekilde uygulanması ve okul yöneticilerinin; okul rehberlik servisleriyle ve öğretmenlerle iş birliği kurarak ebeveyn eğitiminde destekleyici rolde olmaları önerilmektedir.

Anahtar Sözcükler: Ebeveyn, Eğitsel ihtiyaç, Otizm Spektrum Bozukluğu, Özel eğitim

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Parents may experience different feelings of anxiety when a child is born but this anxiety appears to be increasing much more if their children are born with disabilities (special needs) (Seligman & Darling, 2007). Because parenting a child with special needs can bring along several challenges and requirements (Beresford, 1995). Beighton and Wills (2016) examined various aspects of parenting a child with special needs and highlighted that the most common words used by parents are 'joy', 'hope', and 'pride', but it also includes challenges and competencies. The competencies for parents are listed as the ability to acquire skills related to the activities that help them to develop their children socially and emotionally, to deal with problem behavior (Bolat et al., 2016; Johnston & Mash, 1989), to monitor their children's behavior (Sanders, 2003), to acquire skills related to parental behavior towards the child's education (Jones & Prinz, 2005), to enable children to acquire communication and interaction skills (Abidin, 1995), self-care skills (Booth & Booth, 1994), psychomotor and cognitive skills and to enable their children to interact with others socially (Blair et al., 2011). Bavin and Bower (2008) noted that some of the problems experienced by parents when their child has a disability ranged from acceptance of the child's disability, and acceptance of help to providing support for the children.

It has been observed that parents of children with ASD play a fundamental role in positively affecting their children's development. However, it is a well-known fact that many parents of children with ASD face difficulties in their children's educational process (Keenan et al., 2007), and therefore experience stress (Stahmer & Gist, 2001). Parents of children with ASD experience significantly higher levels of anxiety and stress than parents of developmentally typical children (Sander & Morgan, 1997) and those of children (Hastings & Johnson, 2001) with other developmental disabilities (Dunn et al., 2001; Montes & Halterman, 2007). Many parents of children diagnosed with autism report concerns about not knowing what they can do for their children's educational process or how the child will affect their own life. It is noted that the anxiety experienced by parents lies in the fact that families experience feelings of fear and worry about unknown future events (Darica et al., 2005). It is suggested that parents of children with ASD may need guidance on their child's educational development to support and train them properly in this process. In other words, the levels of competency of parents regarding the child's education and accordingly identifying the parents' educational needs are considered crucial (Karaca, 2021). Because parents are the first teachers of a child and the level of competence, especially of parents with a child with ASD is crucial. It has been suggested that children with special needs can acquire independent living skills and learn to the extent that parents fulfill their responsibilities toward their children's education (McConnell et al., 2015).

Parents are often well-equipped to understand their children. Additionally, they are also the ones who spend the most amount of time with their kids. This can make them to display particular sensitivity to their children's educational needs (Karaca, 2021). Schopler and Reichler (1971) emphasize the crucial role that parents of children diagnosed with autism play in their children's education. For this reason, it is essential that families have the opportunity to be jointly involved in the process of ongoing planning and review of educational programs for children diagnosed with autism Spectrum Disorder. This is because parents play a crucial role in teaching children with ASD (American Psychiatric Association, 2013) who have difficulties in social interaction, deficits in verbal and nonverbal communication behaviors, and exhibit repetitive behaviors to overcome challenges. A strong relationship between schools and families is key to improving student success at school (Ünlü, 2021; Demircan, 2018). Meeting the educational needs of families by ensuring that they have access to appropriate educational services will contribute to the positive development of children with ASD. Parents, as partners in the education process, can ensure that teachers have the knowledge by providing insights that would help them understand the student with ASD. Parental involvement can develop program planning and help to determine the most appropriate and effective educational goals, methods, and strategies for a student with ASD. A potential collaboration and communication between home and school meet the unique learning needs of the student. The partnership between parents and teachers concerning the education program develops through regular and frequent meetings (Cavkaytar et al., 2012; Dunlap, 2019; Sarı, 2003; Şahin & Özbey, 2007).

If the current difficulties faced by parents of children with ASD are not resolved, and the necessary

support is not provided to the parents, the quality of the educational approaches that could be provided to the child with ASD decreases significantly. However, there is limited research to understand and accurately identify the current needs of parents concerning ASD (Kenneth et al., 2009). Further research is needed to identify the difficulties and educational requirements of parents having a child with ASD concerning ASD and overcome the challenges by providing parents with appropriate educational approaches (Woodgate et al., 2008). Because these studies pave the way for developing effective programs for the parents of children with ASD. However, it is a well-known fact that there is a lack of formal and informal educational resources to guide parents on what they can do for their children's development, and how to cope with the real difficulties they face after the diagnosis/identification process of individuals with ASD in Türkiye (Karaca, 2021).

Families require additional support to effectively educate their children. There is significant evidence at the international level that the presence of a child diagnosed with ASD seriously affects the entire family system, with predominantly negative effects rather than positive effects (Baker-Ericzen et al, 2005). The number of children diagnosed with Autism Spectrum Disorder in Turkey is on the rise, leading to a gradual increase in the number of children awaiting diagnosis. Although parents bear the primary responsibility for their children's care, there is a lack of focus on identifying their needs and providing education for them (Sarı et al., 2017; Sarı & Karaca, 2016). It is widely acknowledged that early interventions are crucial in addressing the needs of children diagnosed with autism. Parents need to acquire practical skills that they can apply in their homes to enhance their children's and families' quality of life. It is widely acknowledged that early interventions are crucial in addressing the needs of children diagnosed with autism. Parents are considered important in the education of their children with ASD due to limited resources and costs. Given the significance of early intervention and the duration required to complete the diagnostic process, parents can help overcome autism-related issues by providing fundamental skills as soon as possible (Bayraklı & Sucuoğlu, 2018; Dunlap, 2019). During and after the diagnosis process, where they experience various difficulties, parents can obtain adequate support, suggestions, and information to address the educational needs of their children. Discussions on the educational competencies of parents have been initiated by various researchers (Blair et al., 2011; Karaca, 2021; Sanders., 2003).

It is observed that early intervention programs designed for parents with children with ASD in Türkiye are inadequate (Sarı & Karaca, 2016). The level of parental involvement remained limited as most of the courses/training offered to parents were inadequate (Sarı & Karaca, 2016). It is believed that this current research will contribute to determining the educational needs of parents of children with ASD in early childhood and designing more appropriate early intervention programs for the education of individuals with ASD.

It is essential to give importance to studies on the development of parents' educational competencies so that parents can be more adequately and actively involved in the educational process of their children. The first thing to do should be to remediate a parent's mistakes concerning their competencies in child education and to provide appropriate educational approaches (Yeşil et al., 2018). It is essential that the educational needs of parents have been met and that parental competency is provided to ensure that parents establish a healthy relationship with their children, prepare them for real life and guide them properly. It can be said that educational support for the educational needs of children with ASD should be met by teachers and parents as well. The results of previous studies highlight that parents have a significant lack of knowledge in terms of educational competencies in child education and that the educational needs should be regularly met through parent-training programs (Yeşil et al., 2018).

Research has been conducted to determine how the parents' needs can be met to provide appropriate educational services for children with disabilities in Türkiye. However, research conducted with parents in special education shows that it is generally related to parental stress (Cengiz et al., 2021; İlhan, 2017; Küçüker, 2001; Onyishi et al., 2023) and the level of parental acceptance (Çetin, 2018; Ercan et al., 2019; Ulaşanel, 1994). There are studies suggesting that families of children with intellectual disabilities require information on various skill areas, including the child's developmental characteristics, and support for their motor, speech, social, literacy, and mathematics skills during the pre-school and school period (Dere Çiftçi, 2015). However,

no research was found to identify the educational needs of parents of children diagnosed with autism in early childhood. In this research, six different types/areas of needs were identified to determine the competencies of parents with children with ASD regarding the education of their children with ASD and to make sense of the educational needs for this purpose. This way, this paper aims to carry out a comprehensive needs analysis.

Purpose of the Research

The purpose of the study is to determine the educational needs of parents who have a child with ASD in early childhood. In line with this primary purpose, answers to the following sub-questions were sought.

- 1. Do parents have educational needs for their children diagnosed with autism in early childhood to acquire social and emotional skills?
- 2. Do parents have educational needs for their children diagnosed with autism in early childhood to acquire cognitive skills?
- 3. Do parents have educational needs for their children diagnosed with autism in early childhood to acquire language and communication skills?
- 4. Do parents have educational needs for their children diagnosed with autism in early childhood to acquire self-care skills?
- 5. Do parents have educational needs to deal with the problem behaviors exhibited by their children diagnosed with autism in early childhood?
- 6. Do parents have educational needs for their children diagnosed with autism in early childhood to acquire psychomotor skills?

Method

This part of the research describes the research model, the research group, the data collection tool, and the data analysis process.

Research Model

"Semi-structured interview technique" included in Interview Form among the qualitative research methods was used to understand the views concerning the needs of parents having a child with ASD in early childhood to educate their children. The reason for using this technique is to provide a richer and more indepth analysis of the data collected from respondents (Karasar, 2014). The research was conducted using a qualitative rather than a quantitative method and aimed to obtain more detailed information regarding the opinions of the parents who participated in the interview. Qualitative research is one of the ways of producing knowledge developed by people to solve their mysteries and explore the depths of the social systems they have shaped through their efforts (Özdemir, 2010). Phenomenological research was conducted at this stage. It is important to ensure that the characteristics of each participant are not too dissimilar from one another, which would help the researcher to achieve meaningful results (Creswell, 2007).

Research Group

The sampling for the research was determined with the criterion sampling technique. The criterion sampling technique is defined as a type of sampling in which predetermined and essential features for the purpose are determined as criteria, and situations that meet all these criteria are selected (Merriam, 2013). In the current study, parent groups with experience in a particular area were consulted to identify parents' needs. The criterion at this research stage is the parent groups who have a child with ASD in early childhood. Within this scope, semi-structured interview forms were conducted with 20 parents having a child diagnosed with autism in early childhood in Konya province in Türkiye. Table 1 shows the demographic features of the parents who participated in the study.

Table 1. The Demographic Features of The Parents Who Participated in The Study

	Gender	Female	13
	Gender	Male	7
		Master degree	1
	Highest level of Education (Parents)	University	2
Demographic Features		High school	6
		Secondary school	5
		Primary school	6
	Age (Child with ASD)	2-4	3
		4-6	10
		6-8	7
		26-30	5
	Age (Parents)	31-35	3
		36-45	6

Data Collection Tools

The Semi-Structured Interview Form included in the qualitative research method and developed by the researchers was used in the study. In semi-structured interviews, the researcher prepares the interview questions he/she has planned to ask in advance. The researcher can affect the flow of conversation by additional questions (different-side or sub-questions) based on the course of the interview. This approach can allow the interviewee to detail and elaborate on his/her answers (Türnüklü, 2000). The interview form consists of 6 questions. Participants were asked to explain the reasons for their answers to each question. The steps taken to develop the semi-structured interview form are shown in Table 2.

Table 2. Steps Taken to Develop the Interview Form

Step 1	First, a draft form was created by reviewing the sources related to the semi-structured interview form and studies
	conducted in the literature.
Step 2	The researcher and the consultant came together to develop the interview form questions and continued
	developing the form. It was decided that the themes identified by the researchers would be included in the
	interview form.
Step 3	With regard to expert opinion on the analysis of the semi-structured interview form, the opinions of 3 teachers
_	working in the field of special education and of 4 academicians, 3 in the field of special education and 1 in the
	field of measurement and evaluation, were sought and the form was designed.
Step 4	After the corrections requested by the experts were fulfilled, the statements in the items of the interview form
-	were rearranged by taking into account the opinions of two teachers working in the field and a field expert.
Step 5	A pilot study was conducted with three parents of children with ASD. The researcher and the experts discussed
-	the data obtained from the pilot study. Following all these views, the semi-structured interview form was given
	its final shape by the researcher and the consultant.

Data Analysis

In the research, the transcripts obtained through audio recordings of the semi-structured interview were converted to text as raw data without making any changes. The texts were created by taking notes of the data obtained. Subsequently, the texts considered to be essential were highlighted. A descriptive analysis technique was used to analyze the data. This technique was used because the descriptive analysis enabled the data to be organized according to the themes revealed by the research questions or presented by considering the questions or dimensions used in the interview.

According to Yıldırım and Şimşek (2013), descriptive analysis is carried out in four stages. Accordingly, a framework was created based on the dimensions and research questions in the interview before we conducted a descriptive analysis for this research. Then, the data collected were processed. In the last stage, the data were defined as findings and interpreted based on the findings. The answers given by each of the twenty respondents who participated in the interview were examined one by one (separately) without making any changes. The consultant analyzed 20 audio recordings taken by the parents. Following the analysis conducted, an 'interview code' was created for each interview form regarding the answers given by the participants. Some answers collected by the participants through interview forms were excluded as they were

not considered necessary within the scope of the study. Interview codes were created separately for twenty parents by the researcher, and all the obtained data were defined. The data concerning the qualitative study collected through the semi-structured interview forms are presented in detail in the findings section.

Validity and Reliability

Validity and Reliability refer to the organization of the study's conceptual framework regardless of the type of research. Merriam (2009) outlines the process of collecting, analyzing, and interpreting data, and presenting findings. The credibility of research is closely linked to the presentation of the research under original evidence, making original inferences, and ensuring generalizability (White et al., 2003). However, especially in qualitative research, the concepts of consistency, confirmability, credibility, and transferability are used instead of internal reliability, external reliability, internal validity, and external validity, respectively (Lincoln & Guba, 1985). The study considered external validity, internal validity, and reliability. To determine whether the research findings are generalizable in understanding the external validity, the obtained results have been discussed together with similar findings found in the literature. The study's sample selection was explained objectively to enable the generalization of the research. It is also obvious that the study findings are consistent with the research questions. Descriptive explanations required to compare the research findings with other studies are included. It has a structure that can be comparable to other studies in similar environments. Direct quotations from the data obtained as a result of semi-structured interviews were used to establish the external validity of the research. To ensure the reliability of the research, a field expert was asked to evaluate the findings and interpretations obtained as a result of the research. The findings and interpretations were carefully examined and determined to exhibit a high level of agreement.

Results

The opinions of 20 parents were taken through the semi-structured interview form developed by the researcher in relation to the qualitative findings of the research. The findings from the interviews conducted with parents of children with ASD in early childhood are presented below.

Table 3. Educational Needs of Parents with Children With ASI	Table 3	. Educational	Needs o	of Parents	with	Children	With A	ASD
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Areas Parents need with regard to receiving education	N	%	Parents
The need for taking part in education (training) to equip		90%	P1, P2, P3, P4, P5, P6, P7, P9, P10, P11, P12,
children with social and emotional skills	18	90%	P13, P14, P15, P16, P17, P18, P19
The need for taking part in education to equip children	20 100%		P1, P2, P3, P4, P5, P6, P7, P8, P9, P10, P11,
with cognitive skills			P12, P13, P14, P15, P16, P17, P18, P19, P20
The need for taking part in education to equip children	20 100%		P1, P2, P3, P4, P5, P6, P7, P8, P9, P10, P11,
with language and communication skills			P12, P13, P14, P15, P16, P17, P18, P19, P20
The need for taking part in education to equip children	15	75%	P2, P3, P4, P5, P6, P7, P8, P9, P11, P13, P14,
with self-care skills	15 /5%		P16, P17, P19, P20
The need for taking part in education to cope with the	17	85%	P1, P2, P4, P5, P6, P7, P8, P9, P10, P11, P12,
problem behaviour of the child	17 03%		P13, P14, P15, P17, P18, P19
The need for taking part in education to equip children	17	85%	P3, P4, P5, P6, P7, P8, P9, P10, P11, P12, P14,
with psychomotor skills	17 00%		P15, P16, P17, P18, P19, P20

When Table 3 is examined, it is found that parents of children with ASD in early childhood have information needs related to equipping their children with social and emotional skills (18:90%), equipping them with cognitive skills (20: 100%), equipping them with language and communication skills (20: 100%), equipping with self-care skills (15:75%), coping with the problem behavior of the child (17:85%), and equipping them with fine and gross motor skills (17:85%).

The Need for Taking Part in Education (Training) To Equip Children with Social and Emotional Skills

A great majority of the parents (18:90%) who participated in the study stated that they would need to receive training (education) to equip their children with ASD in early childhood with social and emotional skills. They stated they needed training in teaching their children social and emotional skills because they could not enable them to play with their friends or their children had difficulties expressing their emotions. In the parent interviews, parents emphasized that they, along with their spouses, tried to teach social and

emotional skills to their children with ASD and included various activities but felt inadequate about this matter. Therefore, parents are not sufficiently aware of what techniques they should use to teach social and emotional skills. Parents emphasize that they need extensive training to teach social and emotional skills to their children with ASD. The quotations taken from the opinions of the parents are presented below.

"I am not competent. I'm trying to teach him but I cannot enable him to play with his friends. My wife is mostly involved in this matter. My kid cannot appropriately express his feelings (emotions). We understand him but we do not think others do understand. They must follow carefully and wait to understand him. Therefore, we cannot teach social skills. We need to take part in parental training." (Parent, 3).

"I can only achieve some of them. I try to enable him to communicate with his friends outside. I try to teach him the skill to act together with society. However, I do not feel competent on this matter. It is challenging for me to be much more competent. My husband and I are trying to show great effort. I don't know how to handle it" (Parent, 17).

A few parents (2:10%) who participated in the study stated that they felt competent to teach social and emotional skills to their children with ASD and therefore did not want to take part in any kind of training program. Parents can teach social and emotional skills. Children with ASD appropriately express their feelings to themselves. It has been noted that children with ASD could perform many activities related to social skills. Parents who did not agree to take part in the training program for improving the social and emotional skills of children with ASD emphasized that their children could perform these skills appropriately. The quotations taken from the opinions of the parents are presented below.

"My son has autism but he fulfills social and emotional skills. He can express his feelings to me in an appropriate way. If you organize such training, I probably won't participate. However, he has difficulty with language and communication skills. Nevertheless, I believe this situation does not affect his social and emotional skills" (parent, 8).

"My child performs many tasks among social skills. We collaborated with teachers effectively on this issue in the past and made great strides" (parent, 20).

The Need for Taking Part in Training to Teach Cognitive Skills

All parents (20: %100) who participated in the study reported that they would need to take part in training to teach cognitive skills to their children with ASD in early childhood. They have difficulties teaching cognitive skills to their children with ASD. They have difficulty in making eye contact with especially their children with ASD. Children with ASD can sometimes express their needs in appropriate ways. However, they avoid making eye contact when expressing their needs verbally. It is emphasized that children with ASD have a lack of attention skills. As long as they focus their attention, they can benefit from the training. However, it is noted that children with ASD have difficulty displaying the image of the named object as they exhibit significant delays in their cognitive skills. Activities have been conducted to improve attention (concentration) skills. But, it is observed that these activities could not provide sufficient benefits. Therefore, parents noted that they have an educational need to teach various cognitive skills, especially maintaining communication by maintaining eye contact. The quotations taken from the opinions of the parents are presented below.

"We try to maintain eye contact, but we can do it for a certain period. We then try to increase the duration a bit depending on the information we gathered from the training. Sometimes when I say something, he tells us when he needs to go to the toilet, for example. However, he avoids eye contact while talking to me. I need to take part in training to help him improve his cognitive skills (parent, 20).

"I suppose it has something to do with instant mindfulness. Everything is fine when I ensure that he builds his attention. When he loses attention, he does not react to anything. Eye contact is a must, but I do not expect him to make eye contact, supposing that it is also nice if the child could focus attention without eye contact. I need to take part in training to learn to show the named object" (parent, 6).

The Need for Taking Part in Training to Teach Language and Communication Skills

All parents (20: %100) who participated in the study reported that they would need to take part in training to teach language and communication skills to their children with ASD in early childhood. It has been observed that children with ASD have difficulty with speech and language (speaking) even when they get older. Parents stated that the training provided by the institutions was inadequate on this matter. It is observed that children have difficulty communicating if training is not designed properly and recurrently. It is

understood that there are some children with ASD who have significant delays in expressive language skills despite having sound repetition. It is understood that although children with ASD have verbal stereotypical behavioral patterns, they experience delays in expressive language skills. Parents emphasize that they have difficulty understanding the speech of some children with ASD. Therefore, parents emphasize the inadequacies faced in teaching communication skills. It is observed that parents expect their children with ASD to acquire communication skills, but children do not respond in the same way. Parents provide support for the development of their communication skills when their children with ASD are at home. However, it has been reported that children remain unresponsive to this training in some cases. Parents, therefore, emphasized that they have significant educational needs to teach communication skills to their children. The quotations taken from the opinions of the parents are presented below.

"I absolutely need such training. Because my child cannot speak and he is getting older. We feel so helpless. Training here is quite limited because teachers provide support (training) on certain days of the week. He has many deficits. So, I am not sure if he will be able to speak in a short time through these pieces of training. He has poor receptive language skills. I sometimes tell him to bring the carpet sweeper, but he shows no interest" (parent, 1).

"He is displaying verbal stereotypical behaviors nowadays. He cannot express himself clearly when he wants to say something. We do not understand him. He makes babbling sounds. He engages in limited imitation. He can engage if he enjoys it or if it appeals to him. My spouse takes care of it. We have poor communication skills. We've been trying to teach communication through imitation from his birth, but it only goes so far" (parent, 14).

The need for taking part in training to teach self-care skills

The majority of the parents (15:75%) who participated in the study stated that they would need to take part in training to teach self-care skills to their children with ASD in early childhood. Parents reported that their children with ASD have great difficulties with skills especially related to picky eating, putting their shoes on, and brushing their teeth. It is emphasized that schools do not provide adequate education, especially on self-care skills, and that for this reason, parents try to provide support on this matter. It is observed that parents are constantly struggling to teach self-care skills to their children with ASD. However, parents report that these attempts are not really adequate. Therefore, parents need to take part in training on how to teach a range of self-care skills to their children with ASD. The quotations taken from the opinions of the parents are presented below.

"He has no trouble eating. He's not a picky eater, but he doesn't know how to eat. We are trying to help him with this issue. As he doesn't eat too much at school, he cannot get any support. When it comes to dressing, he has also difficulty with it. When I tell him to put his shoes on, he cannot do it. He can seldom do it only when his teacher helps him. But, it is not enough. I can teach him about cleaning and washing hands and face. He doesn't have the habit of brushing his teeth. We need to take part in the training" (parent, 14).

"We always try to teach him something at home. He seems to understand, but we cannot support him as his school does. I feel competent to teach self-care skills for now, but I'm not sure if I can teach self-care skills to my child after 3 years. I taught this skill when he was 5. But I can't say that I can teach it at the age of 9 because I don't know if I can teach different self-care skills" (parent, 9).

A few of the parents (5:25%) who participated in the study stated that they had no difficulty teaching self-care skills to their children. Parents perceive themselves as successful in teaching self-care skills to their children with ASD. For example, they emphasized that they could easily teach their children various self-care skills such as eating, toileting, dressing, and putting shoes on. The quotations taken from the opinions of the parents are presented below.

"Both my husband and I believe that we are successful in teaching self-care skills. As my child doesn't have any mental health problems, he can perform all skills such as self-feeding, toileting, and dressing/undressing" (parent, 12).

"My child has already learned skills in different areas such as putting on/taking off his shoes by himself. We haven't felt exhausted while teaching our child self-care skills. Over time, he has learned skills appropriate for his age on his own" (parent, 10).

The need for taking part in training to teach how to cope with problem behaviors

A great majority of the parents (17: 85%) who participated in the study stated that they need to take part in training to teach their children with ASD in early childhood how to cope with problem behaviors. Parents have reported that their children with ASD frequently have an attack of nerves and experience tantrums.

According to parents' views, children with ASD may hurt animals while caring for them. They exhibit stereotypical behaviors. Parents try to direct the attention of their children with ASD to help them cope with problem behaviors. However, they do not know what methods they can use to eliminate problem behaviors.

"He often has an attack of nerves or experiences tantrums. He sometimes exhibits repetitive hand movements. I don't know why he does this action. He doesn't do it when I direct him to other activities. For example, when he uses a bicycle, he rides it with one hand and waves his other hand. When I tell him to ride his bike using both hands, he does what I say. However, I really want to learn another technique or method if there is one related to this issue" (parent, 4).

"Our child does not hurt himself but he has behavioral problems. He exhibits specific behavioral problems. He may hurt animals when caring for them. He sometimes exhibits stereotypical behaviors, but I don't know how to overcome this challenging behavior. Stereotypical behavioral disorders pose a problem, especially in socializing and communicating. They make it especially hard to interact with his peers. I suppose behavioral problems are a great trouble" (parent, 12).

A small number (3:15%) of the parents who participated in the study stated that their children with ASD partly exhibit problem behaviors, but they know how to cope with such a situation. Parents noted that children with ASD often exhibit problem behaviors when their wishes are not met (when they don't get what they want). Parents stated that they need to be decisive in such a situation and that they could overcome problem behaviors in that way. Parents wait for them to calm down fully when their children exhibit challenging behaviors. The quotations taken from the opinions of the parents are presented below.

"I demonstrate patience however long he cries. I ignore him so that he can cope with his problem behavior. He can exhibit negative behaviors as much as he can. However, I believe if I do not ignore him now, I cannot succeed in the years ahead. Let him cry now. Otherwise, we will cry for the rest of our lives if he doesn't cry. We want him to cry now, but laugh for the rest of his life. That's how I cope with challenging behaviors" (parent, 3).

"He can occasionally exhibit problem behaviors. For example, he shows negative behaviors when he doesn't get what he wants. He wants to get into the car. When we are walking on the pavement, he asks me to get into the car. If I don't allow him, he throws himself on the floor. I keep cool and just wait in such a situation, but I do not fulfill his wishes. I sit next to him and say, "Son, that's not our car, so we can't ride in it." Then, I wait for him to calm down and overcome the challenging problem" (parent, 16).

The need for taking part in training to teach psychomotor skills

A great majority of the parents (17:85%) who participated in the study stated that they need to take part in training to teach fine and gross motor skills to their children with ASD in early childhood how to cope with problem behaviors. They have difficulties with balance and walking as well as difficulties with holding a pencil which is a fine and gross motor skill. Parents find it difficult to teach especially psychomotor skills. Parents want to help children with ASD improve their fine and gross motor skills. Children have difficulty with pre-writing activities. Institutions (Organizations) provide support for children with ASD in terms of movement and balance skills, but parents do not perceive themselves as competent in teaching these skills. The quotations taken from the opinions of the parents are presented below.

"He has difficulty walking naturally. In fact, he cannot hold the pencil. I show him how to hold a pencil, but he can't hold it. For example, when I ask him to bring water, he fills it and brings it to me. However, he has difficulty manipulating small objects precisely. For example, his way of gripping a pencil is incorrect. Normally, he has no physiological disorder, but he hasn't been able to learn how to hold it yet. We have more trouble with fine motor skills" (parent, 5).

"We may sometimes have great difficulties with psychomotor skills. We need to take part in long-term training courses concerning this problem. We have had a lot of challenges. My husband is making a great effort to deal with this problem. We especially want to improve his fine motor skills. If you ask me whether we are sufficient, I don't feel sufficient in developing his fine motor skills, especially in teaching him to gain writing skills. I would like to say that this training is endless. So, I want to participate in training courses" (parent, 8).

A small number (3:15%) of parents who participated in the study stated that they do not need any training to teach psychomotor skills to their children with ASD. Parents can teach their child with ASD various skills such as object control, walking on the balance beam, doing physical activities with a ball, or touching an object with their feet. It is observed that different materials have been taken to develop psychomotor skills at home and the demonstration method is used in the current activities. The quotations taken from the opinions of the parents are presented below.

"My husband and I do not have difficulty in teaching skills such as object control, walking on a balance beam, picking up a ball and throwing it forward or touching an object with his feet. In other words, we, as parents, can teach him grasping skills. I can provide support/training concerning motor skills. I don't think I need to take part in training on this subject" (parent, 13).

"Yes, we have bought a trampoline, a Pilates ball, and a slide. He goes back and forth with the Pilates ball. I know how to use these objects. I know what activities I can use with hand muscles related to grasping skills. For example, I rock the baby and ask him to do the same thing to develop his hand muscles. I enable him to play with Pilates ball" (parent, 1).

Discussion

The research highlighted that parents tried to teach social and emotional skills to their children with ASD and engaged in various activities in this direction, but felt inadequate in this regard. Parents carry out activities to improve the attention skills of their children with ASD. It can be seen, however, that these activities do not bring about sufficient benefits. In this regard, parents indicated that they needed educational needs to teach various cognitive skills, especially maintaining eye contact and communication. Parents want their children with ASD to acquire communication skills. However, it is observed that children do not respond in the same way. Parents support the development of their children's communication skills as long as children with ASD are at home. However, it was noted that in some cases the children did not respond to this type of training. It is emphasized that schools do not provide adequate education, especially in self-care skills, and therefore parents try to provide education. It can be seen that parents are constantly working to teach their children with ASD self-care skills. Parents consider these studies insufficient. Parents try to direct their children's attention to cope with the challenging behaviors of their children with ASD. However, they are unsure about the kinds of techniques that can be used to eliminate problem behaviors, and they desire an explanation of the scientific findings on this issue. Parents have a desire to improve the fine motor skills of children diagnosed with ASD. They experience difficulties associated with preparation activities for writing. Support is provided by institutions about the movement and balance skills of children diagnosed with ASD. However, parents do not feel they are doing enough to teach these skills.

The findings of studies conducted on the needs of parents to help parents to teach their children with ASD may vary depending on the country, study sample, and methodological differences. Previous studies have focused on delays in language development, impairments or limitations in social and emotional reactions, lack of self-care skills, and problem behaviors of children with ASD (Mukaddes et al., 2004). This study aimed to determine parents' needs with regard to teaching cognitive and psychomotor skills besides the skills mentioned above to enable parents to provide educational support for their children with ASD in early childhood. When the interviews conducted with the parents in the study were analyzed, it was observed that parents have educational needs to teach their children with ASD social and emotional skills, cognitive skills, language and communication skills, self-care skills, fine and gross motor skills, and to help them cope with problem behaviors. It is observed that similar findings were obtained in previous studies. In a study conducted for parents of children with autism, it was found that 90% of parents of children diagnosed with autism have significant educational needs. It was found that five topics such as strategies for enhancing the child's communication, strategies for facilitating the child's interaction with other children, sensory integration and development, general information on behavioral management, and Identifying and/or developing socialization opportunities were prioritized for parents' educational needs (Preece et al., 2017). In the present study, unlike the others, parents also have educational needs to teach their children with ASD cognitive, psychomotor, and self-care skills. The area of need identified as 'behavior management in the study conducted by Preece et al. (2017) emerged in the present study as managing the problem behaviors. In fact, the analysis of the findings concerning the study conducted by Gökçe (2017) reveals that parents reported noticing problem behaviors in their children with ASD and experienced various difficulties coping with them. Overall, these studies address the educational needs of parents of children with ASD regarding their children's education. The needs of parents regarding children diagnosed with ASD were explored in the study by Gaad and Thabet (2016). The results of the study suggest that parents have educational needs and they need more parental training.

DuBay et al. (2018) investigated the needs of parents of children diagnosed with ASD concerning the service providers. The study emphasized that parents wanted to get involved in training sessions (therapies) with their children, value open communication with service providers, and learn how to work with their children at home. Parents stated that they were open to class or one-to-one education observations and practices and they needed various models of educational support including group workshops for families. Parents need to work together with well-informed experts (Yu, 2013). One of the findings of this research is that parents do not know what to do after their child has been diagnosed with ASD. According to previous studies on this topic, parents claim that they experience distress and anxiety while waiting for a diagnostic assessment for autism spectrum disorder (ASD) and immediately after the diagnostic process (Keenan et al., 2007; Stahmer & Gist, 2001; Onyishi et al., 2023). It is a well-known fact that parents have information needs concerning ASD and the diagnostic process (Yeşil et al., 2018).

It is known that after the diagnosis process, parents who have a child with ASD want to learn educational strategies to support their children and improve their competencies related to educational skills (Connolly & Gersch, 2013; Gaad & Thabet, 2016). This is because families expressed strong desires to teach behavioral strategies and various educational skills to their children with ASD when they were younger and vocalized their need for further support and tools to help their children (Blake et al., 2017). Therefore, it is highlighted that providing post-diagnostic support can help parents of a child with ASD to understand the facts about autism spectrum disorders (Ahmadi et al., 2011; Bayraklı & Sucuoğlu, 2018; Çetin, 2018; Dunlap, 2019; Hall & Graff, 2010; Ulaşanel, 1994).

The results of the present study revealed that parents who have a child with ASD in early childhood have an educational need to teach self-care skills to their children. Previous studies have emphasized that teaching self-care and personal hygiene skills to children with developmental disabilities by their parents or carers is essential (Anderson et al., 2007; Mattson et al., 2016). The parental need to teach self-care skills coincides with previous research findings. Skills such as bathing, dressing, tooth brushing, and toileting emerged as typical teaching targets (Matson et al., 2012). The study results reveal that parents want to learn how to cope with the problem behaviors of their children diagnosed with autism. As suggested by previous studies, parents show a high need for guidance and information about the reasons for the challenging and unusual behavior of their autistic child, and they want to be taught what to do when their child is acting unusually (Ahmadi et al., 2011). This result supports the previous studies (Bailey et al., 1999; Bailey & Simeonsson, 1988) showing that the need for information is a priority for families of children with special needs.

It is thought that understanding basic facts on behavior like the form and function of behavior helped parents with the analysis of the behavior of the child, examining the root cause of the manifested behavior, and therefore better managing the outcomes (Gaad & Thabet, 2016). In one study on this topic, intervention materials were prepared to support parents' use of behavioral strategies, and one-to-one training was conducted with each family to implement individualized strategies for the behavior behaviors exhibited by children with ASD. The results show the importance of one-to-one instructional (educational) approaches offered to parents to eliminate the problem behaviors of children with ASD (Blake et al., 2017). More research findings show that parent training is effective for managing various problem behaviors, such as restricted and repetitive behaviors in young children with ASD (Grahame et al., 2015; Stuttard et al., 2014). Group-delivered intervention (Riding the Rapids) which was specifically developed for parents of a child diagnosed with

ASD was evaluated. Research findings suggest this technique is a promising intervention for parents of a child with ASD (Stuttard et al., 2014). Based on the interviews conducted with parents of a child with ASD, we can suggest that they have difficulties teaching language and communication skills to their children and improving their social skills and, therefore, have an educational need to improve these skills. In their study, Fox et al. (2017) highlighted that families need educational support to teach language skills and communication skills, particularly to their children with ASD. Previous research findings have revealed that parent training programs have been carried out considering the difficulties faced by children with ASD in language and communication skills (Aktaş, 2015; McDuffie et al., 2013; Mukaddes et al., 2004). Parents need

to participate in training programs to teach social skills to children diagnosed with autism along with language and communication skills (Wang, 2008).

Considering all the research findings, more comprehensive training programs that enable them to provide the necessary education to their children with ASD are needed for parents. According to Gökçe (2017), parents reported that they needed parent-training programs regarding the education of their children diagnosed with autism, that they participated in available programs, and that they had positive attitudes towards these programs. They also emphasized parent-training programs that last more prolonged periods with a more comprehensive approach should be designed. This fact indicates that the importance of parental involvement is not yet fully understood in the Turkish context.

Conclusion

- 1. Parents have an educational need to teach social and emotional skills to their children diagnosed with autism in early childhood.
- 2. Parents have an educational need to teach cognitive skills to their children diagnosed with autism in early childhood.
- Parents have an educational need to teach language and communication skills to their children diagnosed with autism in early childhood.
- 4. Parents have an educational need to teach self-care skills to their children diagnosed with autism in early childhood.
- 5. Parents have an educational need to help their children diagnosed with autism in early childhood to cope with problem behaviors.
- 6. Parents have an educational need to teach psychomotor skills to their children diagnosed with autism in early childhood.

Recommendations

- 1. Educational needs of parents related to teaching language and communication, social, cognitive, self-care, and psychomotor skills, and especially preventing problem behaviors exhibited by children with ASD should be met, and children with ASD should be supported to develop a healthy personality.
- 2. Parent training programs should be designed to increase parents' educational competencies (parenting skills) concerning their children with ASD in early childhood.
- 3. Educators, teachers, and experts working in the field of special education should be informed about family training programs through the Ministry of National Education, Ministry of Family, Labor and Social Services, and Universities.
- 4. Teacher competencies should be enhanced by including more course content related to family training programs in Special Education Teaching undergraduate programs. In this way, training programs for parents of children with ASD should be disseminated.

Limitations

The present study explored the educational needs of parents who have a child with ASD in early childhood through parents' views. One of the limitations of the research is that only the interview method was preferred in the present study. Parents' educational competencies and needs can be determined by using different data collection tools and target groups with more participants in future studies.

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