THE TRANSFORMATIVE SOCIO-EMOTIONAL PROCESS OF MOTHERS: FROM AUTISM DIAGNOSIS TO THE RESHAPING OF PARENTAL IDENTITY – A QUALITATIVE STUDY

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Abstract

At the core of this qualitative study lie the emotional experiences and identity transformations of mothers of children with autism spectrum disorder (ASD), a subject about which little is known regarding their experiences with the diagnosis and personal identity (i.e., autism as part of the "self"). The qualitative research involved 12 mothers of children with ASD who participated in semi-structured interviews. The study aims to understand the initial feelings of shock, uncertainty, and denial, the gradual process of acceptance, and how these experiences influence the construction of a new parental role and mission. Thematic analysis revealed two main themes: (1) Emotional coping and the process of accepting the diagnosis, and (2) Reshaping parental identity and developing inner strength. The findings suggest that the experience of raising a child with ASD was linked to changes in the mothers' self-perception, including heightened self-awareness, emotional strength, and commitment to their children's development. This experience is described as a journey from pain toward personal and parental empowerment. The study highlights the need for ongoing emotional and psychosocial support for parents during the process of accepting and adjusting to autism. Future research should aim to identify ways to foster the development of a positive autistic personal identity following a diagnosis in adulthood.

Keywords: *autism spectrum conditions, autism diagnosis, emotional coping, psychological wellbeing*

1. Introduction

The experience of parenting a child with autism spectrum disorder (ASD) involves a complex and evolving emotional journey, often beginning with shock, uncertainty and feelings of guilt at the moment of receiving the diagnosis. For some mothers, the diagnosis may represent a profound turning point in their personal and family lives. Coping with autism requires not only practical adaptation to the child's needs, but also an ongoing emotional process in which mothers may experience uncertainty, distress, acceptance, empowerment, and changing understandings of parenting. In this sense, the process of acceptance is not linear, but involves continuous reflections on their role, responsibilities and feelings as parents. In this study, the focus is on how mothers of children with ASD experience and understand this emotional journey from the initial encounter with the diagnosis to the shaping of a new parental identity.

Autism spectrum disorder (ASD) is a neurodevelopmental disorder characterized by difficulties in social communication and interaction, together with restricted and repetitive patterns of behavior and interests (American Psychiatric Association, 2013). Over the past decade, the reported prevalence of ASD has continued to increase (Maenner et al., 2020), resulting in a growing need for timely, accurate, and appropriate diagnostic assessment. Nevertheless, the diagnostic process for ASD remains challenging for healthcare professionals. Although several clinical guidelines have been developed to support the assessment and diagnosis of autism (Brian et al., 2019; Filipek et al., 2000; National Collaborating Centre for Women's and Children's Health, 2011; Whitehouse et al., 2018), their recommendations are not always consistent. Zeidan et al. (2022) estimated that autism spectrum disorder (ASD) affects approximately one in every 100 children worldwide. The diagnostic assessment of ASD may also involve examining cognitive and language abilities, particularly where these may influence learning and everyday functioning (Pillay & Brownlow, 2017; Tonnsen et al., 2016).

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Furthermore, the quality of these guidelines varies, particularly in terms of their applicability to clinical practice and the methodological rigor involved in their development (Penner et al., 2018). Although the diagnosis is assigned to the child, its effects extend beyond the individual and may substantially affect family life. For parents, learning that their child has autism can be a profound and transformative experience, often bringing a range of emotional, social, financial, cultural, and treatment-related challenges to family life (Mackie et al., 2021). Given the lifelong and diverse nature of autism, the specific needs and characteristics of autistic individuals may vary considerably and can influence their level of independence in everyday life. As a result, parents and other family members may face ongoing responsibilities and challenges, particularly in managing daily routines, dietary needs, planned activities, and changes in mood or behaviour (Curley et al., 2023). Volkmar and Pauls (2003) reported that a substantial proportion of individuals with autism experience cognitive and adaptive difficulties that may affect their capacity to function independently in everyday life. Such limitations can increase the need for ongoing assistance and support from parents and other family members. The literature shows that the experience of parents is not limited to the moment of receiving the diagnosis, but includes a broader process that begins with the first concerns about the child's development, continues with the search for a professional explanation and then with the efforts to understand, accept and adapt to life with the diagnosis. A comprehensive review of 122 studies on the experiences of parents during the diagnosis of autism identified four components: the journey to assessment, the process of diagnostic assessment, the way the diagnosis is communicated and the provision of information, resources and support after the diagnosis (Makino et al., 2021).

The period preceding the diagnosis is often characterized by uncertainty and concern. Parents may notice changes in their child’s development, communication, or behavior and begin seeking answers from different professionals. However, the pathway to diagnosis is not always straightforward. Studies indicate that families often experience lengthy waiting periods, difficulties accessing appropriate services, and situations in which their concerns are not adequately heard or taken seriously. A meta-synthesis of 22 qualitative studies, drawing on the experiences of 1,178 parents, describes this period through two main dimensions: confusion and the feeling of not being heard, as well as resilience and commitment to obtaining a diagnosis and securing the necessary support for their child (Boshoff et al., 2019). These findings suggest that parents are not merely passive recipients of the diagnosis; rather, they often become actively involved in seeking information, accessing appropriate services, and advocating for their child’s needs and well-being.

Receiving an autism diagnosis is described in the literature as an emotionally intense experience. Parents’ reactions vary from one individual to another and may include shock, sadness, fear, stress, denial, guilt, anger, and concerns about their child’s future. The review by Makino et al. (2021) indicates that these reactions are commonly reported in the literature concerning parents’ experiences of the diagnostic process. However, it is important to recognize that the emotional experience is not exclusively negative. In some cases, parents may also experience a sense of relief, as the diagnosis provides an explanation for the difficulties they had previously observed in their child and enables them to better understand the child’s needs. The diagnosis may also be perceived as an important step toward accessing the appropriate services and support necessary for the child and the family.

For this reason, the diagnosis should not be understood solely as an event that causes pain or a sense of loss, but rather as a complex experience in which different emotions may coexist. A qualitative study involving parents of children who had recently been diagnosed with autism identified a range of emotional responses, including both grief and relief. The authors suggest that receiving a diagnosis may lead parents to reconsider how they understand themselves and their child, creating what they describe as a form of “biographical disruption”

within the parenting experience. This perspective is particularly relevant to the present study, as its focus extends beyond the emotions experienced following the diagnosis to examine how these emotions are connected to changes in parental identity (**Rasmussen et al., 2020**).

Another important aspect of parents' experiences is the process of accepting and adapting to an autism diagnosis. Acceptance is not a single event but a gradual process through which parents develop a better understanding of the diagnosis, adjust their expectations, and learn to respond to their child's needs. A systematic review of 14 studies involving 592 participants identified several factors that may influence this process, including parental knowledge, uncertainty, cultural and religious beliefs, emotional responses such as denial, shame, and guilt, as well as positive emotions and social support. The review suggests that greater parental resolution of the diagnosis may support a better understanding of and adaptation to the child's needs (Naicker et al., 2023).

Professional information and support play an important role in helping parents adapt to an autism diagnosis. Parents need not only clear information about autism but also practical guidance on how to support their child and access appropriate services. A systematic review of qualitative research identified three central areas of parental need: emotional, informational, and relational needs. The way professionals communicate the diagnosis and interact with families can therefore influence how parents understand and cope with the diagnosis. Empathetic communication, active listening, and clear information are essential components of effective family support (Legg & Tickle, 2019).

Raising a child with autism can bring significant changes to parents' daily lives and sense of identity. Qualitative research shows that parents often experience changes in family roles, daily responsibilities, social relationships, and their perception of themselves. A meta-synthesis of 31 qualitative studies involving 585 parents(160 fathers and 425 mothers) identified themes including the pre-diagnosis period, receiving the diagnosis, adapting family life, navigating support services, parental empowerment, and moving forward. These findings suggest that parenting a child with autism involves an ongoing process of adaptation in which parents gradually reshape their parental roles and identities beyond the initial acceptance of the diagnosis (DePape & Lindsay, 2015).

Parental identity may undergo significant transformation as parents develop greater responsibility, knowledge, and commitment to their child's well-being. They may come to view themselves not only as caregivers but also as advocates who communicate with professionals, seek appropriate services, and make important decisions regarding their child's development. A qualitative study of parents of children with ASD in China described parental identity as complex and dynamic, shaped by ongoing challenges as well as parents' efforts to develop a more positive sense of self and advocate for their child's rights and needs (Liu & Fisher, 2023).

Overall, the literature indicates that parenting a child with autism is a complex and evolving experience that may involve uncertainty, emotional distress, adaptation, resilience, and positive personal change. Existing research has examined parents' experiences of the diagnostic process, emotional responses, acceptance, support needs, and aspects of parental identity. However, much of this literature considers parents as a broader group, while fewer studies have specifically explored mothers' emotional trajectories and how experiences surrounding diagnosis contribute to the reshaping of maternal identity. Furthermore, the relationship between emotional adjustment, parental empowerment, and the development of a new sense of self as a mother remains insufficiently explored. Therefore, a qualitative approach focusing specifically on mothers' lived experiences can provide a deeper understanding of how they interpret and navigate the transition from receiving an autism diagnosis to developing a new parental identity and sense of meaning.

2. Methodology

2.1. Aim of the study

The aim of this study was to explore and describe the emotional experiences and transformation of parental identity among mothers of children with autism spectrum disorder (ASD). Specifically, the study examined mothers' experiences from the initial confrontation with the diagnosis through the processes of acceptance and adaptation to the development of a new understanding of their parental identity.

2.2. Participants and sample

The study included 12 mothers of children diagnosed with ASD who were living in Prishtina, Kosovo. Participants ranged in age from 29 to 48 years and represented diverse educational and socioeconomic backgrounds. Participants were recruited through two private psychological clinics in Prishtina that provide psychological services to children with neurodevelopmental disorders.

Prior to recruitment, mothers were provided with information about the purpose and procedures of the study. Mothers who were interested in participating subsequently contacted the researcher. Participation was voluntary, and written informed consent was obtained from all participants prior to the interviews.

To be eligible for inclusion, participants were required to be mothers who had at least one biological child over two years of age with a diagnosis of ASD. Mothers who met the inclusion criteria and voluntarily agreed to participate were included in the study. This approach allowed the study to capture diverse perspectives on mothers' experiences of coping with and adapting to their child's diagnosis. Participant characteristics are presented in Table 1.

2.3. Interview guide

An exploratory qualitative design was employed, and data were collected through individual, face-to-face semi-structured interviews. The interviews were conducted in Albanian by the researcher and were designed to explore mothers' subjective experiences, emotional responses, coping processes, and changes in parental identity following their child's diagnosis of ASD.

The interview guide consisted of 16 questions in total, including sociodemographic questions. The guide included predetermined core questions addressing participants' experiences and perceptions, as well as follow-up questions used when necessary to clarify or explore participants' responses in greater depth. This flexible structure allowed mothers to describe their experiences in their own words while enabling the researcher to explore issues relevant to the aims of the study. The interview questions addressed several aspects of mothers' experiences, including their emotional responses to the diagnosis, the process of accepting and adapting to the diagnosis, changes in daily life and parental roles, coping strategies, experiences with professional and social support, and perceptions of their parental identity.

2.4. Data collection procedure

Data were collected between February and March 2025. All 12 interviews were conducted individually and face-to-face by the researcher. The time and location of each interview were arranged according to the participants' preferences in order to promote comfort,

privacy, and a sense of control during the interview process. Only the researcher and the participant were present during each interview.
Before each interview, participants were informed about the purpose of the study, the interview procedure, and the voluntary nature of their participation. Written informed consent was obtained prior to data collection. Participants were encouraged to share any information they considered relevant to helping the researcher understand their experiences. The interviews focused on mothers' experiences of raising a child with ASD, including their emotional responses to the diagnosis, everyday routines, challenges and stressors, coping strategies, experiences of support, and changes in their parental role and identity. With participants' consent, all interviews were audio-recorded to ensure accurate documentation of their responses. The researcher also took field notes during the interviews to document relevant observations and contextual information. Each interview lasted approximately 45–50 minutes. Following data collection, the audio recordings were transcribed verbatim by the researcher in Microsoft Word. The transcripts were subsequently organized in Microsoft Excel to facilitate data management and coding.

2.5. Data analysis

The interview data were analyzed using thematic analysis based on the approach proposed by Braun and Clarke (2006). The analysis followed six phases: (1) familiarization with the data, (2) generation of initial codes, (3) development of potential themes, (4) review of themes, (5) definition and naming of themes, and (6) production of the final report.
The analysis was conducted iteratively, with the researcher repeatedly reviewing the transcripts, codes, and developing themes to ensure that the themes accurately represented participants' accounts. Particular attention was given to patterns related to mothers' emotional responses to the diagnosis, coping and acceptance processes, adaptation to parenting a child with ASD, and changes in parental identity.
The thematic analysis aimed to identify recurring patterns of meaning across participants' narratives and to develop themes that captured the complexity and diversity of mothers' experiences. The analysis focused on understanding how mothers described their emotional journey following the diagnosis and how this experience contributed to changes in their understanding of themselves and their parental role.

2.6. Ethical considerations

Participation in the study was voluntary. Before the interviews, all participants were provided with information about the purpose of the study, the nature of their participation, and the procedures involved. Participants provided written informed consent before taking part in the interviews. The consent form also stated that any personal or identifying information disclosed during the interviews would be treated as confidential and would not be used in a manner that could identify the participants.
To protect participants' privacy, numerical identifiers were used instead of names throughout the data management and reporting process (e.g., Mother 1, Mother 2). Participants were informed that their participation was voluntary and that the information they provided would be handled confidentially.

Table 1. *Socio-Demographic Characteristics of Mothers and Children With Autism Spectrum Disorder (ASD) (N=12)*

Variable	Category	n (%)
Residence	Urban	8 (66.7)
	Rural	4 (33.3)
Marital status	Married	11 (91.7)
	Divorced	1 (8.3)
Monthly household income	Low	1 (8.3)
	Medium	7 (58.3)
	High	4 (33.3)
Educational level	Secondary education	2 (16.7)
	Bachelor's degree	6 (50.0)
	Master's degree	2 (16.7)
	Doctoral degree	2 (16.7)
Mother's age, years	29	1 (8.3)
	31	2 (16.7)
	32	1 (8.3)
	34	2 (16.7)
	36	1 (8.3)
	38	2 (16.7)
	42	2 (16.7)
	48	1 (8.3)
Child's gender	Female	7 (58.3)
	Male	5 (41.7)
Child's age, years	3	3 (25.0)
	4	3 (25.0)
	5	5 (41.7)
	7	1 (8.3)

3. Results

3.1. Overview of the Thematic Findings

The thematic analysis of the semi-structured interviews with 12 mothers of children with autism spectrum disorder (ASD) revealed two main themes that describe the mothers' emotional journey from receiving the diagnosis to developing a new understanding of their parental identity. The findings illustrate a gradual process of emotional adjustment, beginning with intense emotional reactions to the diagnosis and progressing toward acceptance, a strengthened sense of parental responsibility, and the development of inner strength. The analysis generated two overarching themes: (1) Emotional Coping and the Process of Accepting the Diagnosis and (2) Reshaping Parental Identity and Developing Inner Strength. The first theme captures the mothers' initial emotional responses to the diagnosis, including shock, confusion, fear, and difficulty processing the new reality, as well as the gradual process of emotional adaptation and acceptance. The second theme reflects the transformation of the mothers' understanding of their parental role, the development of a stronger sense of responsibility and purpose, and the emotional and personal growth that emerged throughout their experiences.The themes and corresponding subthemes are presented below and are illustrated through participants' accounts to preserve the mothers' perspectives and experiences.

Main Theme	Subthemes
Theme 1. Emotional Coping and the Process of Accepting the Diagnosis	**1.1** Initial Shock, Uncertainty, and Denial
	1.2 Emotional Adaptation and Gradual Acceptance
Theme 2. Reshaping Parental Identity and Developing Inner Strength	**2.1** A Sense of Parental Responsibility and Purpose
	2.2 Reconstructing the Parental Role
	2.3 Emotional Strengthening and Personal Empowerment

Theme 1. Emotional Coping and the Process of Accepting the Diagnosis

Subtheme 1.1. Initial Shock, Uncertainty and Denial

The diagnosis of autism was described by mothers as a profound emotional disruption, fear, guilt, uncertainty, and difficulty accepting the reality of the diagnosis. Participants portrayed the moment of diagnosis as an unexpected interruption of previously held expectations for their child's future. For some mothers, the initial response involved disbelief and denial, characterized by shock, accompanied by a strong need to seek alternative explanations or confirmation from other professionals. These accounts illustrate the emotional disorientation experienced during the early stage of the diagnostic process. One mother described the experience as an abrupt interruption of her life and expressed difficulty accepting the diagnosis:
"*My life stopped when they told me that my son has autism. I couldn't believe it, I couldn't accept it"* (M1).
Similarly, another participant described the diagnosis as a profound disruption of her expectations for the future:
"*I was shocked… it felt like everything I had planned for life was wiped out in that moment*" (M11).
Feelings of guilt also emerged in mothers' accounts, particularly in relation to attempts to identify a personal cause for their child's condition:
"*I felt guilty, like I had done something wrong during the pregnancy"* (M3).
For some participants, disbelief persisted for several weeks and was expressed through repeated attempts to obtain another professional opinion:
"*For weeks I denied it, going to other doctors hoping someone would tell me it was wrong*" (M4).
Together, these accounts indicate that the initial encounter with the diagnosis was experienced not simply as the receipt of clinical information, but as an emotionally disruptive event that challenged mothers' expectations and temporarily made it difficult to process and accept the new reality.

Subtheme 1.2. Emotional Adaptation and Gradual Acceptance

As mothers gained greater understanding of autism and became more familiar with their children's needs, the initial feelings of fear, uncertainty, and denial gradually shifted toward acceptance and emotional adaptation. Participants described professional guidance, therapeutic support, increased knowledge, and everyday experiences with their children as important

factors in this process. Acceptance was not portrayed as an immediate event, but rather as a gradual process through which mothers developed greater calmness, understanding, and confidence in responding to their children's needs.

One participant described how professional support contributed to the transition from emotional distress toward acceptance:

"*At first it seemed impossible, but with therapy and the help of a psychologist we accepted it and calmed down*" (M5).

Another mother emphasized the relationship between understanding her child and experiencing greater emotional stability:

"*The more I understood the boy, the stronger and calmer I felt" (M7).*

The process of acceptance was also associated with a shift from fear and uncertainty toward hope and a renewed emotional perspective:

"*I have moved from fear and uncertainty to acceptance and hope. I have realized that love is the greatest strength*" (M4).

For another participant, acceptance involved a fundamental change in how she conceptualized autism:

"*Now I no longer see it as a disease, but as a different way of being. This has helped me a lot"* (M10).

These narratives suggest that emotional adaptation involved more than simply acknowledging the diagnosis. For participants, it reflected a gradual transformation in how they understood autism, their children, and their own emotional responses, allowing them to move from an initial state of uncertainty toward greater acceptance, hope, and confidence in their parental capacity.

Theme 2. Reshaping Parental Identity and Developing Inner Strength

Subtheme 2.1. A Sense of Parental Responsibility and Purpose

Following the acceptance of the diagnosis, mothers described an increased sense of responsibility and commitment to their child's development and well-being. Parental responsibility was not experienced solely as an obligation, but also as a sense of purpose and mission that gave meaning to their parental role. In their narratives, mothers described themselves as their child's primary source of support, voice, and advocate, emphasizing the need for patience, perseverance, and continued commitment.

Subtheme 2.2. Reconstructing the Parental Role

Following acceptance of the diagnosis, participants described a significant transformation in the way they understood and enacted their parental role. The experience of raising a child with ASD encouraged them to assume multiple roles, becoming more actively involved in therapeutic and educational processes, more informed about their child's needs, and more engaged in advocating for their child's rights. In this context, their parental identity extended beyond the traditional caregiving role to encompass new dimensions, including those of educator, therapeutic partner, advocate, and protector of the child.

One mother described this experience particularly clearly:

"*I am a mother, doctor, therapist, and advocate for my daughter. I am the voice she does not have."* (M3)

Another participant associated her parental role with supporting her child in reaching their full potential:

"*My role as a parent is to help her achieve her maximum potential.*" (M8)

Commitment to the child was also described as an intertwining of responsibility and unconditional love:
"*My whole life revolves around him—it is responsibility, but also a love without limits."* (M7)
Another mother described the expansion of her parental role in metaphorical terms:
"*I have learned to be a teacher, a speech therapist, and a psychologist. Now I feel like a professional in his life."* (M9)
These narratives indicate that parenting in the context of autism was accompanied by a **reconstruction of the parental role**, through which mothers developed new competencies and responsibilities and came to perceive themselves as active participants in their children's development, care, and advocacy.

Subtheme 2.3. Emotional Strengthening and Personal Empowerment

Beyond changes in the parental role, the experience of raising a child with ASD was described as a process of developing inner strength and personal empowerment. Participants reported that continuously confronting the challenges associated with autism helped them develop greater patience, emotional resilience, and confidence in their ability to cope with difficulties. For some mothers, this experience also prompted a reassessment of their priorities and contributed to a renewed understanding of love, hope, and the meaning of life.
One participant stated:
"*This experience has made me stronger than ever. I have learned that patience has no limits*" (M2).
Another participant described her emotional transformation from initial despair toward a sense of inner strength:
"*At first, I thought my life was over, but now I know that I am stronger than stone*" (M12).
Love for their children was also described as an important source of strength and perseverance:
"*I have realized that my love for him is the strength that keeps me going every day*" (M4).
Similarly, another participant associated this strength with the ability to persevere in the face of difficulties:
"*I have learned not to give up. Every day is a small battle that teaches me something new*" (M11).
Overall, these narratives suggest that confronting autism was experienced not only as a source of challenges, but also as a transformative experience through which mothers developed **resilience, greater self-awareness, and a stronger sense of their personal capacity to cope with adversity**.

4. Discussion

The findings of the present qualitative study illustrate that receiving an autism spectrum disorder (ASD) diagnosis represents a profound emotional and transformative experience for mothers. Thematic analysis identified two overarching themes: (1) Emotional Coping and the Process of Accepting the Diagnosis and (2) Reshaping Parental Identity and Developing Inner Strength. Together, these themes describe a gradual journey from initial shock, uncertainty, fear, guilt, and denial toward acceptance, increased parental responsibility, identity reconstruction, and personal empowerment.

The first theme demonstrates that the diagnosis was initially experienced as an emotionally disruptive event that challenged mothers' expectations regarding their child's future. Feelings of shock, uncertainty, guilt, and denial were prominent in participants' narratives. These findings are consistent with previous qualitative research showing that parents often experience significant emotional, informational, and relational needs when

navigating the diagnostic process. A systematic review of qualitative evidence found that parents require emotional support, adequate information, and supportive relationships with professionals throughout the diagnostic journey (Legg & Tickle, 2019). Similarly, a qualitative metasynthesis of 22 studies highlighted confusion, difficulties in being heard, and considerable resilience and commitment among parents seeking an autism diagnosis for their children (Boshoff et al., 2019).

However, the present findings indicate that mothers' experiences were not limited to distress. Over time, participants described a gradual movement toward emotional adaptation and acceptance. Increased understanding of autism, professional support, therapeutic involvement, and everyday experiences with their children appeared to contribute to this transition. This finding is consistent with the qualitative study of Manono and Clasquin-Johnson (2023), which similarly found that mothers initially experienced their children's autism diagnoses with feelings of anxiety, guilt, uncertainty, and emotional distress, while greater understanding of autism over time was associated with increased resilience and empowerment. The similarity between these findings is particularly noteworthy, given that both studies explored the experiences of 12 mothers. In the present study, mothers likewise described a gradual movement from fear and uncertainty toward acceptance, emotional calmness, and greater confidence in their ability to respond to their children's needs.

The second theme highlights an important transformation in mothers' parental identities. Following acceptance of the diagnosis, participants described increased responsibility and a stronger sense of purpose, while also assuming multiple roles as caregivers, educators, therapeutic partners, advocates, and protectors. Their narratives suggest that parental identity is dynamic rather than static, and that the experience of raising a child with ASD can reshape the meaning of motherhood. This finding corresponds with a qualitative metasynthesis of parents' experiences, which identified parental empowerment and "moving forward" as important dimensions of adaptation to raising a child with ASD (DePape & Lindsay, 2015). Parents may consequently develop greater knowledge and agency as they learn to navigate health, educational, and therapeutic systems and advocate for their children.

Importantly, participants also described the experience as a source of personal transformation and inner strength. Mothers reported developing greater patience, emotional resilience, self-awareness, and confidence in their ability to cope with adversity. Thus, the experience of autism was not perceived exclusively as a source of burden, but also as a catalyst for personal and parental growth. This interpretation is supported by qualitative evidence showing that parents can experience empowerment through increased knowledge, active involvement, and participation in interventions for their children. A recent qualitative evidence synthesis found that parent-mediated interventions may contribute to parental empowerment when parents receive appropriate support and are actively involved in their child's care (Jurek et al., 2023).

4.1 Practical implications and recommendations

The findings highlight the need for a **family-centered and parent-inclusive approach** following an ASD diagnosis. Healthcare and educational institutions should provide parents with timely emotional and psychosocial support in addition to diagnostic information. Support should include psychoeducation about autism, opportunities to process emotional reactions, guidance regarding available services, and continued communication with professionals.

Multidisciplinary services should also recognize parents as **active partners in intervention and decision-making.** Structured parent-support and psychoeducational programs may help mothers develop coping skills, confidence, advocacy skills, and greater understanding of their children's needs. This recommendation is consistent with evidence

emphasizing the importance of supportive professional relationships, accessible information, and parental involvement throughout the diagnostic and intervention process (Legg & Tickle, 2019; Jurek et al., 2023).

Furthermore, public education and awareness initiatives are needed to reduce stigma and social isolation surrounding autism. Supporting parents to become informed advocates may benefit not only individual families but also contribute to broader acceptance and understanding of autism within the community. Previous qualitative research has shown that parents may become increasingly proactive in advocacy and efforts to challenge stigma following their child's diagnosis.

Future research should further explore the experiences of fathers and other family members, as well as the influence of professional, social, and institutional support on parental well-being. Longitudinal qualitative studies could provide additional insight into how emotional adjustment, parental identity, resilience, and empowerment develop over time.

5. Conclusion

Overall, the findings demonstrate that the experience of raising a child with ASD can represent a profound process of **emotional adaptation, identity reconstruction, and personal transformation**. Mothers initially described shock, uncertainty, fear, guilt, and denial, but gradually moved toward acceptance, increased understanding, and active engagement in their children's development. Their parental identities expanded beyond traditional caregiving to encompass responsibility, advocacy, protection, and active participation in therapeutic and educational processes.

The experience of raising a child with ASD was described as a potential catalyst for personal and parental transformation. Mothers described becoming more aware, emotionally resilient, purposeful, and confident in their capacity to support their children. Their narratives can be understood as a journey **from pain toward acceptance, from uncertainty toward understanding, and from vulnerability toward empowerment**.

Consequently, supporting parents should be considered an integral component of autism-related services. Providing sustained emotional, informational, psychosocial, and multidisciplinary support may strengthen parental well-being and agency while enabling families to navigate the challenges of autism with greater confidence, resilience, and hope.

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