

A Study on the Current Status and Influencing Factors of Grandparental Care for Children with Autism

Liu Yijun Yang Fuzhen Meng Chunnan Zou Xintong

Qingdao Hengxing University of Science and Technology, Qingdao Shandong, 266100;

Abstract: Under the background that the rehabilitation care of children with autism is both professional, sexual and complex, the family has become the core position for children's rehabilitation and growth, and intergenerational upbringing has therefore become an important choice or even the main choice for many families of children with autism. However, when grandparents take on the important task of intergenerational rearing of children with autism, they still face many realities, which are prominently manifested in the unbalanced role positioning, easy to fall into a state of ambiguous or arranged rights and responsibilities, the physical and mental pressure of daily rearing is particularly prominent, and the lack of professional rehabilitation knowledge and intervention ability makes it difficult to match the exclusive rehabilitation needs of children with autism. Combining the real scene and actual pain points of intergenerational rearing of children with autism, this article deeply analyzes various performances and the core influencing factors behind them. The rehabilitation and growth of children with autism provide specific and practical reference ideas and practical inspiration.

Keywords: Children with autism; grandparental care; influencing factors; care pressure

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Introduction

Autism Spectrum Disorder, also known as autism spectrum disorder, is a developmental disorder characterized by impairments in social interaction, communication, and repetitive and stereotyped behaviors. Currently, research on the upbringing of children with autism largely focuses on parents, while grandparental care^[1] is often overlooked. There is relatively insufficient attention to their upbringing status, stress manifestations, and influencing factors, and there is a lack of systematic analysis. Unlike ordinary children who are raised across generations, the special needs of children with autism put heavier parenting pressure and many difficulties on grandparents. This pressure not only affects the physical and mental health of grandparents themselves, but also relates to the rehabilitation effect of children with autism and the overall quality of life of the family.

Intergenerational parenting is a special form of family education, referring to a parenting model in which grandparents or great grandparents bear the main responsibility for raising, educating, and caring for grandchildren^[2]. At present, intergenerational rearing has become the most important form of rearing in the families of children with autism in our country. The formation of this is the result of the joint action of many factors. From the perspective of parents, the current workplace competition is fierce, daily work is busy, and some parents have difficulty taking care of children with autism with enough time and energy due to reasons such as going out to work. This is an objective and realistic motivation; However, grandparents take the initiative to undertake the heavy responsibility of upbringing out of their love and willingness to take care of their grandchildren, coupled with close family ties, and the interweaving of internal and external factors has jointly contributed to the widespread formation of this upbringing.

1 The current situation of grandparents' intergenerational education for children with autism

1.1 Imbalance between care and intervention

In intergenerational parenting of children with autism, grandparents primarily focus on the aspect of daily care, such as undertaking basic tasks such as food, daily living, safety care, and daily companionship, to ensure that the basic physiological needs of children are met. However, in terms of rehabilitation interventions for core disorders in children with autism, the participation of grandparents is generally low, and most grandparents lack professional rehabilitation knowledge and skills, unable to provide targeted intervention services such as social training, language guidance, and sensory integration training for children. Moreover, the cultural literacy of most grandparents varies greatly, making it easy for them to adhere to outdated educational concepts^[3]. This has a significant impact on the behavior and mental health of children with autism. This pattern of "adequate care and lack of intervention" has a certain impact on the rehabilitation process of children with autism, making it difficult to obtain sustained and systematic professional support.

1.2 Multiple Dilemmas Highlighted

At present, parenting pressure mainly affects the economic, physical and mental health, marital quality, and social life of grandparents. Grandparents face a heavy physical burden, and children with autism often exhibit behaviors such as emotional instability, physical collisions, and constant crying. They require constant companionship and patient comfort from grandparents. Long-term high-intensity care has severely exhausted the physical strength of most elderly grandparents, and has even caused health problems for themselves. Moreover, the psychological pressure is more prominent. Grandparents not only have to bear concerns about their children's illness and anxiety about the rehabilitation effect, but also have to face self-blame due to insufficient parenting ability and cope with intergenerational conflicts in the family^[4]. Being troubled by negative emotions for a long time and having a worrying psychological state.

In addition, some grandparents also face economic and social pressures, and rehabilitation interventions for children with autism require high costs that many ordinary families cannot afford. Grandparents have to tighten their belts and even exhaust their savings. At the same time,

social prejudice and discrimination against children with autism make some grandparents afraid to take their children to public activities, fearing that they will be looked at differently by others, further exacerbating their psychological burden and social isolation^[5].

2 Analysis of Factors Influencing Intergenerational Care

2.1 Grandparents' Own Factors

Grandparents' own age, health status, educational level, cognitive level, and psychological resilience^[6]. It is the core factor that affects the quality of intergenerational education. Most grandparents are older and have limited physical and energy resources, making it difficult for them to cope with the high-intensity care needs of children with autism. Their own health problems also further limit their parenting abilities. Grandparents with lower educational attainment often lack specialized knowledge, making it difficult to recognize early symptoms of children and understand and master scientific rehabilitation methods. They rely more on traditional parenting experience and have outdated parenting styles. Grandparents' psychological resilience directly affects their attitude towards parenting pressure. Grandparents with strong psychological tolerance can adjust their mentality in difficult situations, actively seek solutions, and actively adapt to the special needs of children with autism. Grandparents with weaker psychological resilience are easily troubled by negative emotions, leading to anxiety, self-blame, and abandonment, making it difficult for them to take on long-term parenting responsibilities.

2.2 Family-level factors

The intergenerational interaction pattern within the family has a significant impact on the quality of grandparent-led care. Intergenerational conflict ^[7] frequent occurrences: Young parents tend to favor scientific rehabilitation intervention concepts, focusing on cultivating children's independence and social skills, while grandparents often adhere to traditional childcare concepts, exhibiting behaviors such as overindulgence and overprotection. Disagreements between the two sides regarding parenting methods and rehabilitation interventions can easily lead to family conflicts, disrupting the consistency of parenting strategies and thus affecting the child's rehabilitation outcomes. Insufficient parental involvement further exacerbates the dilemma of grandparent-led care. Some young parents, due to reasons such as working away from home or busy work schedules, completely transfer parenting responsibilities to grandparents, lacking companionship and rehabilitation participation for their children. This not only alienates the parent-child relationship but also deprives children of professional rehabilitation guidance led by their parents. Family economic conditions directly limit access to intervention resources, forcing reliance on free care from grandparents, resulting in children not receiving systematic professional intervention.

2.3 Social Factors

The completeness of the social support system^[8] and the availability of rehabilitation resources are important external factors affecting intergenerational care. Currently, the distribution of professional rehabilitation resources for children with autism in my country is uneven. Most rehabilitation institutions are concentrated in urban areas, while resources are scarce in rural areas. Furthermore, some institutions have problems such as high fees and inconsistent rehabilitation effects, making it difficult for grandparents to access convenient professional rehabilitation services and knowledge training. The social support system is incomplete. The government and communities lack specific support policies for grandparents of children with autism, and there is a lack of systematic skills training, psychological counseling, and other services. The assistance provided by public welfare organizations is limited and cannot cover a wide range of intergenerational care families. In addition, social awareness of autism is low, and prejudice and discrimination still exist, which not only affects the social integration of children with autism but also brings additional psychological pressure to grandparents, hindering the implementation of intergenerational care.

3 Conclusion

Grandparents of children with autism face many realities in intergenerational rearing, and its formation is closely related to the grandparents themselves, family and society. Most grandparents are old and have limited physical strength and energy. They are difficult to cope with the meticulous care needs of children with autism, and generally lack relevant professional knowledge. They are at a loss in the face of children's special behaviors, and are prone to anxiety. Some parents completely shift the responsibility of parenting, lack their own participation, poor intergenerational communication, and fail to form a synergy; Social special support is not perfect, rehabilitation resources are scarce, assistance channels are limited, and tolerance needs to be improved, which has been further intensified.

To improve this situation, the three parties need to work together. Grandparents need to take the initiative to adjust their mentality, learn autism parenting majors, participate in relevant training, and improve their care and psychological adjustment capabilities. Parents should actively fulfill their parenting responsibilities, actively participate in the care and rehabilitation of children, strengthen communication and cooperation with grandparents, reasonably divide responsibilities, and give emotional and energy support. Society needs to improve the support system, increase the supply of rehabilitation resources and professional guidance, broaden the channels of assistance, improve social tolerance, effectively reduce the burden on grandparents, optimize parenting, and escort the recovery and growth of children with autism.

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Authors: Liu Yijun, Qingdao Hengxing University of Science and Technology

Yang Fuzhen, Qingdao Hengxing University of Science and Technology

Meng Chunnan, Qingdao Hengxing University of Science and Technology

Zou Xintong, Qingdao Hengxing University of Science and Technology

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