

Case Study

From Diagnosis to Empowerment: A Case Study of Parent-Mediated Intervention in Autism Spectrum Disorder

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ABSTRACT

Background: Autism Spectrum Disorder (ASD) is a neurodevelopmental condition characterised by persistent difficulties in social communication and restricted, repetitive patterns of behaviour, typically emerging in early childhood. While early and multidisciplinary intervention is critical for improving developmental outcomes, receiving an ASD diagnosis often places a significant emotional and psychological burden on parents. Supporting parental coping and active involvement in intervention is therefore an essential component of comprehensive ASD care. **Methods:** This qualitative single-case study examines the journey of parents whose child was diagnosed with ASD at 2.8 years of age. The study explores parent's early emotional responses to the diagnosis, the challenges they encountered, and their evolving understanding of their child's needs. Parent-mediated intervention (PMI) was implemented through a collaborative therapist–parent approach targeting adaptive skills, social interaction, communication, and sensory regulation. Child progress was documented longitudinally using standardised developmental and autism-specific measures, alongside parental narratives obtained through semi-structured interviews. **Results:** Over the course of intervention, the child demonstrated improvements in adaptive behaviour, functional communication, social engagement, and a reduction in sensory-related difficulties. Parallel to these developmental gains, parents progressed from initial distress and uncertainty towards increased resilience, confidence, and active participation in their child's intervention. Parents reported enhanced understanding of their child's strengths and needs, greater competence in managing challenges, and a sense of empowerment in their care giving role. **Conclusion:** This case study highlights the potential benefits of parent-mediated intervention in promoting both child skill development and parental empowerment. The findings underscore the clinical importance of integrating structured parent training and emotional support as part of ASD intervention, positioning parents as collaborative partners in their child's developmental journey.

Keywords: *Autism Spectrum Disorder, Parent-Mediated Intervention, Parental Empowerment, Adaptive Skills, Early Intervention*

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Autism Spectrum Disorder (ASD) is a neurodevelopmental condition characterised by persistent impairments in social communication and interaction, along with restricted and repetitive patterns of behaviour (American Psychiatric Association, 2013). ASD is typically identified in early childhood, often before the age of three years. Over the past two decades, the reported prevalence of ASD has increased substantially. Recent global estimates indicate a prevalence of approximately 1 in 36 children (Centers for Disease Control and Prevention [CDC], 2023). In India, available data suggest a prevalence of approximately 1 in 68 children (Panda, 2019). These figures underscore the growing public health significance of ASD and the need for early, evidence-based intervention strategies.

ASD has a significant impact on multiple developmental domains. Early deficits in joint attention and non-verbal communication are known to predict long-term social outcomes (Mundy & Sigman, 2006). Restricted interests and cognitive rigidity may interfere with learning, flexibility, and adaptation to changing environments (South et al., 2005). In addition, many children with ASD experience heightened anxiety and sensory sensitivities, which can further disrupt emotional regulation and everyday functioning (White et al., 2009).

The impact of ASD extends beyond the child to affect parents and the wider family system. Parents of children with ASD frequently experience elevated levels of stress, emotional distress, and psychological burden compared to parents of children with other developmental conditions (Hayes & Watson, 2013). The diagnostic process itself is often associated with feelings of shock, grief, guilt, and uncertainty, which may be compounded by stigma, limited access to services, and a lack of reliable information. Ongoing caregiving demands, behavioural challenges, and concerns regarding the child's future can further strain parental well-being and family functioning (Guralnick, 2011).

Although no intervention eliminates the core features of ASD, early and intensive intervention has been shown to improve developmental outcomes and adaptive functioning. Evidence-based approaches typically involve multidisciplinary input, including behavioural, speech and language, and occupational therapies. In recent years, increasing attention has been directed towards models that actively involve parents in the intervention process. Parent-mediated intervention (PMI) is one such approach, in which parents are trained to implement therapeutic strategies within naturalistic home and community settings, thereby promoting skill generalisation and continuity of intervention.

The active involvement of parents as co-therapists has been identified as a best practice in early autism intervention (Zwaigenbaum et al., 2015). In addition to supporting child development, PMI has been associated with reduced parental stress, enhanced coping, and improved family functioning (McConachie & Diggle, 2006). Despite a growing international evidence base, the implementation and documentation of PMI within the Indian context remain limited, particularly with respect to the lived emotional experiences of parents navigating an ASD diagnosis and intervention journey.

Against this background, the present case study aims to explore the journey of parents from diagnosis to acceptance and empowerment, while also examining how sustained parent-therapist collaboration may support child skill development. By integrating parental narratives with longitudinal developmental outcomes, this study seeks to contribute to the

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limited Indian literature on family-centred, parent-mediated approaches in autism intervention.

METHODOLOGY

Study Design

This study adopted a qualitative single-case study design with integrated quantitative developmental assessments. The design was selected to allow an in-depth exploration of parental experiences following an ASD diagnosis, alongside a longitudinal examination of child developmental outcomes associated with parent-mediated intervention.

Participant

The participant was a male child diagnosed with Autism Spectrum Disorder and his parents. At the time of the most recent assessment, the child was 7.3 years old. The child was diagnosed with ASD at 2.8 years of age by a qualified Rehabilitation psychologist using standardised diagnostic procedures. The child is currently receiving therapeutic services at Total Solution Rehabilitation Society (TSRS), Hyderabad. The present case study was conducted in collaboration with the organization, with appropriate institutional permission and parental consent. Both parents were actively involved in the intervention process and participated in the semi-structured interviews.

Procedure

Following diagnosis, the child received multidisciplinary intervention, including behavioural, occupational, and speech and language therapy. Parents were systematically trained by the therapeutic team to implement intervention strategies at home, consistent with a parent-mediated intervention model. Training focused on activities of daily living, communication, social interaction, play skills, and behavioural regulation. The frequency and intensity of professional sessions were gradually adjusted over time, with ongoing parental follow-up to ensure continuity and generalisation of skills across settings.

To explore parental experiences, semi-structured interviews were conducted with both parents. Interviews focused on the diagnostic process, emotional responses to the diagnosis, coping strategies, sources of support, challenges encountered during intervention, and perceptions of empowerment over time. All interviews were conducted via online video calls, audio-recorded with consent, and used solely for the purposes of qualitative analysis.

Measures

Child developmental progress was monitored longitudinally over a period of four years using standardised assessment tools. Autism symptom severity was assessed using the Childhood Autism Rating Scale (CARS). Adaptive functioning was evaluated using the Vineland Social Maturity Scale (VSMS), and overall developmental functioning was assessed using the Developmental Screening Test (DST). These measures were administered at baseline and at follow-up intervals as part of routine clinical monitoring.

Ethical Considerations

Written informed consent was obtained from the parents for participation in the study and for publication of the case details. All identifying information was anonymised to ensure confidentiality. The study adhered to ethical principles for clinical case reporting and respected the rights and well-being of the participants throughout the intervention and documentation process.

CASE DESCRIPTION

Identifying Information

The child, referred to as V to maintain confidentiality, is a 7-year-old male born in May 2018. He is the first and only child of his parents, who are both working professionals from a middle-class socioeconomic background. The family resides in an urban nuclear household. The parents' marriage was non-consanguineous.

Perinatal History

The pregnancy was uneventful, with regular antenatal check-ups and no reported medical complications. Delivery occurred via emergency caesarean section due to prolonged labour and foetal distress associated with meconium aspiration syndrome. Following birth, the neonate required admission to the neonatal intensive care unit for three days due to weak birth cry and respiratory distress. He was discharged in stable condition, with no anticipated long-term medical complications.

Early Developmental History

Early developmental milestones during the first year of life were largely age-appropriate. Independent walking was achieved at 11 months of age. The child exhibited babbling and the use of a few single words within the first year. However, concerns regarding social communication and play emerged during the second year of life. Parents observed repetitive and restricted play behaviours, including a preoccupation with spinning objects such as fans, toy vehicle wheels, and lights. There was limited response to name, reduced social reciprocity, and inconsistent eye contact.

Following the COVID-19 lockdown period, a regression in expressive language was noted around two years of age. Feeding difficulties had been present since infancy and included poor sucking, marked food refusal, sensitivity to textures, prolonged feeding times, and subsequent concerns regarding weight gain. Sleep onset difficulties were also reported, although sleep continuity was generally maintained once sleep was initiated.

Presenting Concerns

At the time of referral, the child exhibited significant challenges in attention regulation, difficulty with transitions, and heightened sensitivity to auditory stimuli. These concerns, in conjunction with delays in communication, social interaction, and adaptive functioning, indicated the need for a structured and individualised intervention programme.

Parental Journey Following an ASD Diagnosis

Analysis of the parental narratives revealed three broad phases in their experience: (1) early concern and diagnostic uncertainty, (2) emotional distress and gradual acceptance, and (3) adaptation and empowerment through active involvement in intervention. These phases are described below using anonymised parental accounts.

Early Concerns and Recognition of Red Flags

Parents first observed developmental concerns when the child was approximately 1.5 years old. Early signs included repetitive and restricted play behaviours and changes in communication patterns. The mother recalled:

“He was obsessed with the wheels of toy vehicles and kept rotating them.”

She further noted an early loss of previously acquired speech:

“He spoke a few words at nine months but suddenly stopped.”

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In addition to communication concerns, parents observed limited social engagement and responsiveness in everyday interactions:

“When I returned from work, he never came to me or wanted to play; we just had to meet his demands.”

Despite these observations, initial concerns were often minimised by extended family members, who attributed the child’s behaviours to situational factors, including disruptions related to the COVID-19 pandemic.

Diagnostic Process and Emotional Responses

Although the mother reported an intuitive sense that something was atypical in her child’s development by 2.3 years of age, there was limited awareness and acceptance of autism within the family system. She stated:

“I didn’t know the word autism, but by 2.3 years I felt something was wrong. Even then, no one accepted it.”

The child received a formal diagnosis of ASD at 2.8 years of age. While the diagnosis confirmed parental suspicions, it was accompanied by intense emotional reactions. The mother described her response as follows:

“I broke down when the psychologist confirmed the risk of autism, though I had expected it.”

The father reported difficulty accepting the diagnosis during the initial period:

“For about a month I struggled to accept the label. We hoped things might change, but eventually we accepted it.”

These reactions reflected common parental experiences of shock, grief, and uncertainty following an ASD diagnosis.

Post-diagnostic Challenges and Coping

Following diagnosis, parents reported heightened anxiety related to their child’s developmental progress and emerging challenges. Feeding difficulties, particularly oral sensitivity and food refusal, were a significant source of stress. Parents expressed concern regarding inconsistent professional guidance related to dietary management, which contributed to feelings of uncertainty.

Periods of developmental regression or behavioural worsening, particularly during episodes of illness, further exacerbated parental distress. The mother described experiencing increased anxiety during such phases, highlighting the emotional toll of managing fluctuating developmental trajectories.

Resilience, Support, and Movement Towards Empowerment

Over time, parents began to demonstrate adaptive coping and resilience. Support from extended family members, therapists, and parent-support groups at the therapy centre played a crucial role in this process. The mother articulated a strong sense of determination and advocacy:

“I can’t correct the past. But the only thing I was determined is, hook or by crook, I am going to fix it. He’s not alone in this. He’s going to have the most powerful tool—that’s his mother in his hand.”

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The father emphasised a pragmatic and future-oriented approach:

“We decided to take it step by step and look forward.”

Through ongoing involvement in intervention and increased understanding of ASD, parents reported greater confidence in managing their child’s needs. They described a shift from passive recipients of professional advice to active collaborators in the therapeutic process.

Future Expectations

Parents expressed realistic and developmentally informed expectations for their child’s future. Their primary goals centred on fostering independence, functional communication, and self-regulation. This progression from initial distress to acceptance and empowerment underscores the dynamic nature of parental adaptation following an ASD diagnosis.

Parent-Mediated Intervention and Therapeutic Process

Parent-mediated intervention (PMI) is an evidence-based approach in which parents are systematically trained to implement therapeutic strategies with their child, particularly in the context of neurodevelopmental conditions such as ASD. By embedding intervention within naturalistic home and community environments, PMI facilitates skill generalisation, continuity of care, and increased parental competence (Conrad et al., 2021). In addition to supporting child development, PMI has the potential to enhance parental confidence, coping, and emotional well-being.

In the present case, PMI was implemented through a collaborative therapist–parent model. Parents were initially provided with structured psychoeducation to develop an understanding of ASD, its developmental implications, and the rationale for evidence-based intervention strategies. This foundational phase aimed to reduce parental anxiety, address misconceptions, and foster realistic expectations regarding progress.

Intervention Goals and Focus Areas

Intervention goals were individualised and developmentally informed, targeting both child skill development and parental empowerment. For the child, key objectives included improving functional communication, increasing responsiveness to name, developing sentence-level language, and enhancing the ability to follow multi-step instructions. Social goals focused on promoting joint attention, turn-taking, shared play, and reciprocity. Adaptive functioning goals included increasing independence in activities of daily living, improving attention and task completion, and supporting generalization of learned skills across settings. Behavioural goals emphasized the reduction of repetitive behaviours and the development of coping and self-regulation skills.

Parent Empowerment and Psychoeducation

Parental guidance sessions focused on empowering parents to actively support their child’s development within daily routines. Psychoeducation was provided regarding ASD symptomatology, behavioural principles, sensory processing differences, and the role of consistency and structure in intervention. Parents raised concerns related to oral sensitivity, feeding difficulties, and dietary interventions, including the use of a gluten-free, casein-free diet. With guidance from the occupational therapist, parents were supported in understanding the underlying sensory and behavioural factors contributing to feeding challenges and were advised to seek nutritional consultation where appropriate.

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Psychoeducation was an ongoing component of intervention and was revisited as new challenges emerged. Emphasis was placed on building parental confidence, enhancing coping strategies, and promoting problem-solving skills to manage day-to-day difficulties effectively.

Home-Based Intervention Strategies

Parents were trained to implement structured home-based activities to reinforce therapeutic goals. Oral motor exercises and gradual exposure to varied food textures were used to address feeding difficulties. Visual supports, including picture-based routines and visual schedules, were incorporated to facilitate independence in toileting, bathing, and dressing. Fine motor and pre-writing skills were supported through activities such as putty play, sandpaper tracing, scribbling, and guided tracing exercises.



Visual Schedules

Social play opportunities were intentionally created within the home environment through activities such as ball passing, turn-taking games, and family-based group play to enhance reciprocity and engagement. Sensory regulation strategies, including swimming, massage, brushing protocols, and calming music, were integrated to support emotional and behavioural regulation.

Frequency, Duration, and Therapeutic Techniques

A multidisciplinary team provided ongoing training and support to the parents. Professional therapy sessions were conducted between two and five times per week, with each session

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lasting approximately 45 minutes. Initially, parent training sessions were held weekly and were gradually transitioned to monthly review sessions, supplemented by regular telephonic follow-ups to ensure continuity of care.

Therapeutic techniques utilised within the PMI framework included modelling of target skills, positive reinforcement to encourage participation and skill acquisition, structured play to support social and communication development, and the use of visual supports to facilitate understanding and routine adherence. Behaviour management strategies, such as antecedent modification, redirection, and consistency in routines, were emphasised. Sensory integration techniques, including brushing protocols, gym ball activities, massage, water play, and Tomatis-based listening support, were also incorporated as part of the intervention plan.

Parents remained actively involved throughout the intervention process, attending therapy sessions, implementing strategies at home, and seeking clarification as needed. Their consistent engagement and responsiveness were central to the continuity and effectiveness of the parent-mediated approach.

RESULTS

The results are presented descriptively, in keeping with the single-case study design, and aim to illustrate developmental trends over time rather than establish causal relationships.

Autism Symptom Severity

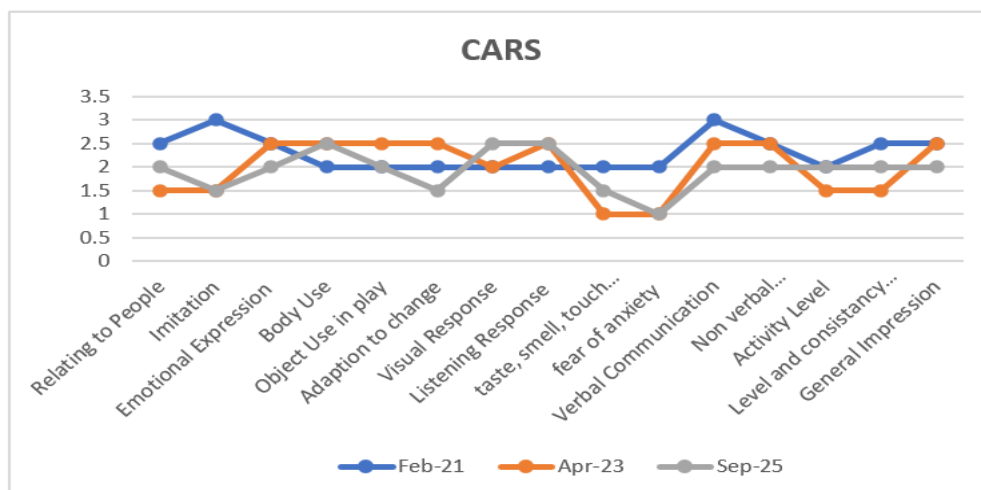
Autism symptom severity was assessed longitudinally using the Childhood Autism Rating Scale (CARS). As shown in Table 1 and Figure 1, the child demonstrated a progressive reduction in CARS scores across assessment points. In February 2021, the CARS score was 36.5, corresponding to the range of severe autism. By April 2023, the score had reduced to 30.5, indicating a shift to the mild-to-moderate range. At the most recent assessment in September 2025, the score further reduced to 29, remaining within the mild-to-moderate range. This downward trend suggests a gradual reduction in the severity of autism-related symptoms over the course of intervention.

Table 1 Baseline and Follow-Up Assessments on CARS

Year/Month	Feb - 2021	Apr - 2023	Sep-2025
Childhood Autism Rating Scale (CARS)	36.5	30.5	29
Interpretation	Severe Autism	Mild to Moderate Autism	Mild to Moderate Autism

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Figure 1 Profile on CARS over a five-year period



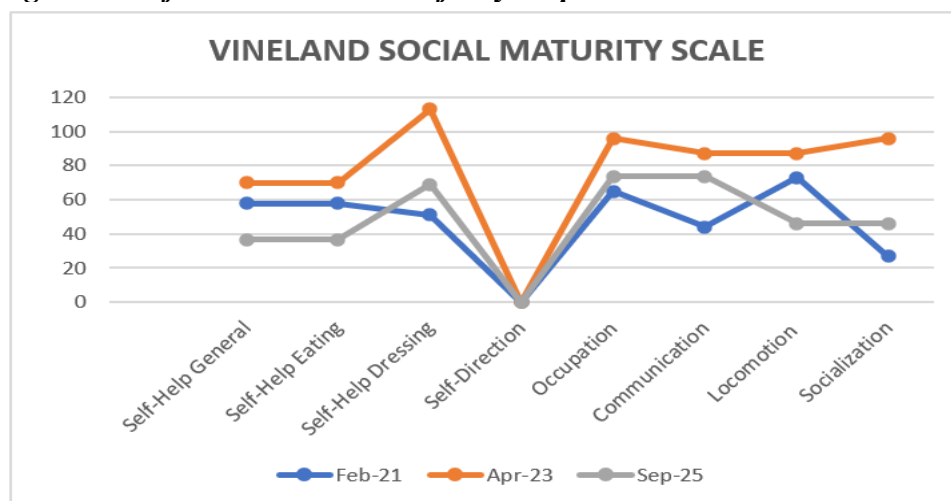
Adaptive Functioning

Adaptive functioning was assessed using the Vineland Social Maturity Scale (VSMS), as presented in Table 2. At baseline in February 2021, the child’s Social Quotient (SQ) was 58, indicating a mild level of social maturity. By April 2023, the SQ increased to 72, reflecting improvement in adaptive and social functioning. However, at the September 2025 reassessment, the SQ decreased to 67.8, remaining within the mild range. This reduction was attributed to limitations in age-appropriate independence, such as navigating the neighbourhood independently, managing small money transactions, and serving food independently, which were restricted by parental supervision. In the socialization domain, the child continued to engage primarily in parallel play, demonstrated the ability to participate in simple turn-taking games, but experienced difficulty with rule-based group games and structured physical activities.

Table 2 Baseline and Follow-Up Assessments on VSMS

Year/Month	Feb-2021	Apr- 2023	Sep-2025
Vineland Social Maturity Scale (VSMS)	58	72	67.8
Interpretation	Mild Level	Borderline level	Mild Level

Figure 2 Profile on VSMS over a five year period



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Overall Developmental Progress

Overall developmental functioning was evaluated using the Developmental Screening Test (DST), with results summarised in Table 3. The child's Developmental Quotient (DQ) increased steadily over time, from 60 in February 2021 to 67.3 in April 2023, and further to 74.7 in October 2025. These findings indicate consistent developmental gains across cognitive, comprehension, problem-solving, and early academic domains. At the time of the most recent assessment, the child was attending a regular school setting in the mornings while continuing to receive therapeutic support.

Table 3 Baseline and Follow-Up Assessments on DST

YEAR/MONTH	Feb-2021	Apr- 2023	Oct - 2025
Developmental Screening Test (DST)	60	67.3	74.7
Interpretation	Mild Level	Mild Level	Borderline Level

Parental Outcomes

In parallel with child developmental gains, parents reported qualitative improvements in emotional well-being, confidence, and perceived competence. Through active involvement in PMI, parents described enhanced understanding of their child's needs, improved ability to manage behavioural challenges, and increased confidence in implementing strategies independently. Parents reported feeling more empowered and less overwhelmed over time, reflecting positive changes in parental coping and engagement.

DISCUSSION

The present case study explored the journey of parents from the point of an Autism Spectrum Disorder diagnosis to empowerment through sustained involvement in parent-mediated intervention, while also documenting longitudinal developmental changes in the child. The findings highlight the interrelated nature of child developmental progress and parental emotional adaptation, underscoring the importance of family-centred approaches in autism intervention.

Consistent with existing literature, parents initially experienced emotional distress, uncertainty, and difficulty accepting the diagnosis (Hayes & Watson, 2013). Delays in diagnostic clarity, limited awareness of autism within the family system, and disruptions related to the COVID-19 pandemic further compounded parental stress during the early stages. These findings align with previous research indicating that the diagnostic period is a critical phase associated with heightened vulnerability for parental mental health (Guralnick, 2011).

As intervention progressed, parents demonstrated increased coping, resilience, and engagement. Active participation in PMI enabled parents to shift from a position of uncertainty to one of informed involvement and collaboration. This transformation is consistent with evidence suggesting that parent-mediated approaches not only support child skill acquisition but also reduce parental stress and enhance perceived competence (McConachie & Diggle, 2006; Conrad et al., 2021). In the present case, structured psychoeducation and ongoing therapeutic guidance appeared to play a key role in fostering parental confidence and emotional regulation.

From a child-focused perspective, the observed reductions in autism symptom severity and improvements in developmental and adaptive functioning are in line with previous findings

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supporting the benefits of early, consistent, and multidisciplinary intervention. Although causal inferences cannot be drawn from a single-case design, the steady developmental gains observed over time suggest that sustained parent–therapist collaboration may facilitate generalization of skills across home and educational settings.

Importantly, the findings highlight that parental empowerment is not a static outcome but a dynamic process that evolves alongside the child’s developmental trajectory. Periods of regression, illness, or increased behavioural demands were associated with renewed parental anxiety, emphasizing the need for ongoing emotional support and realistic expectation-setting. Mental health professionals working with families of children with ASD must therefore attend not only to skill acquisition but also to parental emotional well-being and coping throughout the intervention process.

Clinical Implications

This case study has several implications for clinical practice. First, it emphasizes the value of integrating parent-mediated intervention as a core component of ASD management, particularly in resource-limited settings where access to intensive professional services may be constrained. Second, it highlights the importance of providing structured psychoeducation and emotional support to parents following diagnosis, as these elements appear central to fostering resilience and sustained engagement. Finally, the findings support a collaborative model in which parents are viewed as partners in intervention rather than passive recipients of services.

Limitations

The findings of this case study should be interpreted in light of certain limitations. As a single-case report, the results are not generalizable and are intended to provide descriptive insights rather than establish efficacy. Future research involving larger samples and mixed-method designs is needed to further examine the relationship between parent-mediated intervention, parental empowerment, and child outcomes.

CONCLUSION

This case study illustrates the evolving journey of parents of a child with Autism Spectrum Disorder from initial diagnostic distress to gradual empowerment through sustained engagement in parent-mediated intervention. The findings emphasize that parental empowerment is a dynamic and ongoing process that develops alongside the child’s growth and changing needs. Active parental involvement, supported by structured psycho-education and collaborative therapeutic guidance, was associated with improved parental confidence, coping, and perceived competence.

From a child development perspective, the observed improvements in autism symptom severity, developmental functioning, and adaptive skills highlight the potential benefits of early, consistent, and family-centred intervention. While the single-case design precludes causal conclusions, the longitudinal trends underscore the value of integrating parents as key agents of change within the intervention process.

Importantly, this case underscores the need for mental health professionals to address not only child-focused therapeutic goals but also the emotional well-being and resilience of parents. Interventions that recognise parents as partners and support their psychological adjustment may contribute to more sustainable outcomes for children with ASD. Future

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research should continue to explore parent-mediated approaches using larger samples and mixed methodologies to strengthen the evidence base.

REFERENCES

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). American Psychiatric Publishing.
- Centers for Disease Control and Prevention. (2023). *Data & statistics on autism spectrum disorder*. U.S. Department of Health & Human Services. <https://www.cdc.gov/ncbddd/autism/data.html>
- Cheng, W. M., Cheung, C. S. S., Lau, W. K. W., & Chan, C. H. Y. (2022). Effects of parent-implemented interventions on outcomes of children with autism: A meta-analysis. *Journal of Autism and Developmental Disorders*. <https://doi.org/10.1007/s10803-022-05688-8>
- Conrad, C. E., Rimestad, M. L., Rohde, J. F., Petersen, B. H., Korfitsen, C. B., Tarp, S., Cantio, C., Lauritsen, M. B., & Händel, M. N. (2021). Parent-mediated interventions for children and adolescents with autism spectrum disorders: A systematic review and meta-analysis. *Frontiers in Psychiatry*, 12, 773604. <https://doi.org/10.3389/fpsy.2021.773604>
- Guralnick, M. J. (2011). Why early intervention works: A systems perspective. *Infants & Young Children*, 24(1), 6–28. <https://doi.org/10.1097/IYC.0b013e3182002cfe>
- Hayes, S. A., & Watson, S. L. (2013). The impact of parenting stress: A meta-analysis of studies comparing the experience of parenting stress in parents of children with and without autism spectrum disorder. *Journal of Autism and Developmental Disorders*, 43(3), 629–642. <https://doi.org/10.1007/s10803-012-1604-y>
- Jones, C. R., Happé, F., Golden, H., Marsden, A. J., Tregay, J., Simonoff, E., & Charman, T. (2009). Reading and arithmetic in adolescents with autism spectrum disorders: Peaks and dips in attainment. *Neuropsychology*, 23(6), 718–728. <https://doi.org/10.1037/a0016360>
- McConachie, H., & Diggle, T. (2006). Parent implemented early intervention for young children with autism spectrum disorder: A systematic review. *Journal of Evaluation in Clinical Practice*, 13(1), 120–129. <https://doi.org/10.1111/j.1365-2753.2006.00674.x>
- Mundy, P., & Sigman, M. (2006). Joint attention, social competence, and developmental psychopathology. In D. Cicchetti & D. J. Cohen (Eds.), *Developmental psychopathology: Vol. 1. Theory and method* (2nd ed., pp. 293–332). Wiley.
- Panda, P. K. (2019). Autism spectrum disorder: An Indian perspective. *Indian Journal of Pediatrics*, 86(11), 965–966. <https://doi.org/10.1007/s12098-019-03028-y>
- South, M., Ozonoff, S., & McMahon, W. M. (2005). Repetitive behavior profiles in Asperger syndrome and high-functioning autism. *Journal of Autism and Developmental Disorders*, 35(2), 145–158. <https://doi.org/10.1007/s10803-004-1992-8>
- White, S. W., Oswald, D., Ollendick, T., & Scahill, L. (2009). Anxiety in children and adolescents with autism spectrum disorders. *Clinical Psychology Review*, 29(3), 216–229. <https://doi.org/10.1016/j.cpr.2009.01.003>
- Zwaigenbaum, L., Bauman, M. L., Choueiri, R., Kasari, C., Carter, A., Granpeesheh, D, Natowicz, M. R. (2015). Early intervention for children with autism spectrum disorder under 3 years of age: Recommendations for practice and research. *Pediatrics*, 136(Supplement 1), S60–S81. <https://doi.org/10.1542/peds.2014-3667E>

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Conflict of Interest

The author(s) declared no conflict of interest.

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