DEVELOPING A COLLABORATIVE PARENT-LED HOME-BASED INTERVENTION PROGRAM TO FOSTER INDEPENDENCE IN DAILY ACTIVITIES FOR CHILDREN WITH AUTISM SPECTRUM DISORDER (ASD)

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ABSTRACT

Autism Spectrum Disorder (ASD) presents challenges in social interaction, communication, and behavior. In the Philippines, limited access to professional services highlights the need for accessible interventions. This study aimed to develop and evaluate a collaborative, parent-led, home-based intervention program designed for Filipino families to foster independence in daily activities for children with ASD. Specifically, it sought to determine children's current independence levels, parental perceptions and challenges, develop a targeted program, and assess its effects. A descriptive-developmental research design was used. The study involved 35 parents of children with ASD (aged 3-8) from a therapy center in Batangas City. Data were collected using structured questionnaires and observational checklists before and after the intervention. The developed program focused on five domains: skill acquisition, behavioral changes, parental competence, social interaction, and independence/autonomy. Pre-intervention results showed children had moderate independence (Overall M=2.80). For post-intervention, significant improvements were observed across all domains, particularly in skill acquisition (+20%) and independence/autonomy (+20%). Parents reported high competence pre-intervention (m=3.25) and expressed strong satisfaction post-intervention regarding role confidence (m=3.80), behavioral management (m=3.76), and child relationship (m=3.73). Key challenges identified by parents included managing time, accessing resources, and ensuring consistency. The developed collaborative parent-led home-based intervention program effectively enhanced independence in daily activities for children with ASD and increased parental competence and confidence within the Filipino context. This approach provides a valuable, culturally relevant resource, empowering parents to actively support their child's development, particularly where access to professional services is limited. Addressing implementation challenges and conducting further research on long-term effects are recommended.

Keywords: Parent-Led Intervention, Home-Based Program, Autism Spectrum Disorder (ASD), Independence, Daily Living Activities

I. INTRODUCTION

Autism Spectrum Disorder (ASD), a neurodevelopmental condition impacting social communication, interaction, and behavior, affects a significant number of children globally, emphasizing the need for effective early intervention (Png et al., 2024). While intensive, professionally delivered interventions can be effective, their resource-intensive nature often limits accessibility, particularly in settings with fewer resources (Beaudoin et al., 2014). Consequently, parent-led home-based interventions have gained traction as a practical and cost-effective alternative, empowering parents as key facilitators of their child's development

within familiar routines. Research indicates that collaborative, parent-implemented programs conducted at home significantly foster independence in daily living skills for children with ASD (Agran et al., 2019; Morina, 2019). These approaches leverage parental involvement and the home environment to enhance skill acquisition, adaptive behaviors, and overall quality of life, while also benefiting parents by increasing understanding and reducing stress (Wong, 2020; Broening, 2023). Such programs often train parents in evidence-based techniques targeting communication, social interaction, and self-care skills (Kim, 2023; Aili, 2023). In the Philippines, the strong family-oriented culture provides a conducive environment for parent-led interventions, with growing recognition of their value (Fuente, 2021; Quinones, 2022; Toquero, 2021). However, there remains a gap in the availability of accessible, culturally relevant programs specifically designed to enhance independence in daily activities through active parental participation. This study aimed to address this gap by developing and evaluating a collaborative, parent-led, home-based intervention program tailored for Filipino families, grounded in principles from social developmental, behavioral, and ecological theories, to foster functional independence in children with ASD.

II. LITERATURE REVIEW

Children with Autism Spectrum Disorder (ASD) often face significant challenges in developing independence in daily living activities due to core difficulties in social communication, interaction, and adaptive behaviors, alongside potential cognitive variations and sensory sensitivities (Lecavalier, 2018; Ho & Lin, 2020; Fuller, 2020). While early, intensive interventions show efficacy, access can be limited, particularly in resource-constrained settings (Beaudoin et al., 2014). Parent-led, home-based interventions have emerged as a promising alternative, leveraging the natural environment and empowering parents as primary agents of change (Agran et al., 2019).

Research highlights the crucial role of parents in fostering independence, with active parental involvement linked to better outcomes, skill generalization, and improved family dynamics (Chen, 2019; Jones, 2019). Training parents in evidence-based strategies like those derived from Applied Behavior Analysis (ABA) enables them to manage challenging behaviors effectively and support skill acquisition within daily routines (Crowell, 2019; Beaudoin et al., 2019; Conrad, 2021). Such involvement not only benefits the child but also enhances parental competence, confidence, and reduces stress (Doepki, 2019; Catalano et al., 2018).

Despite the benefits, implementing home-based interventions presents challenges, including maintaining consistency, managing time constraints, accessing resources, and ensuring collaboration between parents and professionals (Fadare, 2021; Mortelmans, 2020). Studies indicate that parent-mediated interventions can effectively improve children's social communication, reduce maladaptive behaviors, and enhance adaptive skills, leading to increased independence (Papadopoulos, 2021; Mullan, 2021; Deniz, 2022). However, there is a need for culturally adapted programs that specifically address the context of diverse communities, such as Filipino families, and actively involve parents in a collaborative manner (Fuente, 2021; Quinones, 2022). This study addresses this gap by developing and evaluating a parent-led program tailored for the Filipino context to foster independence in daily activities for children with ASD.

III. RESEARCH METHOD
3.1 Data Collection

This study utilized a descriptive developmental research design (Liao, 2014). A quantitative approach with correlational elements investigated associations between variables. While not establishing causality, it offers insights into relationship strength, serving as a foundation for further research. The design explored the intervention's effectiveness in promoting independence by assessing how parental factors correlate with outcomes like skill acquisition, behavioral changes, parental competence, social interaction, and autonomy. This allows nuanced analysis of which factors most influence success, informing program optimization.

3.2 Sample Size

Primary data were from parents of children (aged 3-8) with ASD at Garces Therapy Center, Batangas. Target population was 135; Raosoft yielded 101, but 35 participated. Purposive sampling was used. Data included perceptions, challenges, and child outcomes via questionnaires and surveys. Questionnaires tracked development.

3.3 Sampling Technique

Purposive sampling was used as the sampling technique. Respondents were selected based on the specific criteria of being parents whose child (aged 3-8) was diagnosed with ASD and was currently enrolled at the Garces Therapy Center during the study period. This technique ensured that the participants possessed the relevant experience and context necessary for the study focused on developing a parent-led home intervention program

3.4 Method Data Analysis

Data collected was analyzed using weighted mean and percentage method.

IV. RESULTS AND DISCUSSION

Table 4.1Basis for Measurement of Independence

Indicators	Associated Area of Improvement
1. I see my child becoming more independent in completing daily tasks such as dressing and feeding.	**Self Help Skills**
2. The current approach has helped my child gain more autonomy in managing their personal belongings.	
3. I feel that my child has gained more independence in their decision-making skills.	
4. My child can now complete basic life skills, like brushing their teeth, with minimal assistance.	**Daily Activities**
5. The current approach has empowered my child to take more initiative in performing daily routines.	
6. I notice my child is more capable of organizing their own personal space without my help.	
7. The current approach has contributed to my child's ability to make choices and express preferences independently.	

8. My child now takes responsibility for certain tasks at home without reminders.	**Autonomy**
9. I believe that the current approach has played a significant role in fostering my child's sense of autonomy.	
10. My child has shown increased independence in both structured and unstructured daily activities.	

Table 4.1: In order to quantify the current level of independence, the section of Independence and Autonomy in the structured questionnaire was further subdivided into three sections: self-help skills, daily activities, and autonomy.

Table 4.2 Level of Independence Based on Self Help Skills

Indicator	Average Score Pre Intervention	Verbal Interpretation
1. I see my child becoming more independent in completing daily tasks such as dressing and feeding.	**2.82**	**Agree**
2. The current approach has helped my child gain more autonomy in managing their personal belongings.	**2.80**	**Agree**
3. I feel that my child has gained more independence in their decision-making skills.	**2.67**	**Agree**
Total Average	**2.76**	**Agree**

Table 4.2: presents a total average of 2.76 which falls on the "Agree" level of independence. This highlights that the children were capable of basic life skills such as dressing and feeding themselves as well as a notion of autonomy in their decision-making skills. In a study, it was found that just like learning, not everyone learns at the same pace as each other (Gal, 2013 as cited in Hakobyan, 2021) This is important to note when observing the needs of a child, it may be that the child is learning but to compare them with other children without taking into account the rate of improvement of a child will only yield unreliable data.

Table 4.3 Level of Independence Based on Daily Activities

Indicator	Average Score Pre Intervention	Verbal Interpretation
4. My child can now complete basic life skills, like brushing their teeth, with minimal assistance.	**2.88**	**Agree**
5. The current approach has empowered my child to take more initiative in performing daily routines.	**2.87**	**Agree**
6. I notice my child is more capable of organizing their own personal space without my help.	**2.71**	**Agree**
7. The current approach has contributed to my child's ability to make choices and express preferences independently.	**2.87**	**Agree**
Total Average	**2.83**	**Agree**

Table 4.3: presents an average score of 2.83 which signifies a "Agree" level of independence in which could be said on the children's daily task. These include organization of where they would play and where they would study or eat, self-hygiene and the ability to choose a preference. It was also found that daily activities are actually the least of interest for children's with ASD, thus it is often a challenge in teaching them such activities (Taylor &Mailick, 2014 as cited in Hakobyan, 2021). Seeing that this is the most practical application and is easily the most observable behavior that parents take note whenever they have their child undergo therapy, thus it indicates the effectiveness of the approach if it shows any progress of improvement.

Table 4.4 Level of Independence Based on Autonomy

Indicator	Average Score Pre Intervention	Verbal Interpretation
8. I see my child becoming more independent in completing daily tasks such as dressing and feeding.	**3.04**	**Agree**
9. The current approach has helped my child gain more autonomy in managing their personal belongings.	**2.57**	**Agree**
10. I feel that my child has gained more independence in their decision-making skills.	**2.85**	**Agree**
Total Average	**2.82**	**Agree**

Table 4.4: presents a score of 2.82 which signifies a "Agree" level of independence in terms of autonomy which includes the ability to choose their own clothing to wear, choose which toy they like and an independent decision making without the help of their parent or caregiver. It is important for the parent to know the needs of their child for it reflects how they approach the problem they see, for if a parent choose the right and directed by relevant professional, they will succeed in overcoming such problems (Hakobyan, 2021) Therefore the introduction of the proposed home intervention will help alleviate and avoid such problems, giving the parents the ability to help their child based on their needs leading to a much more improved independence.

Table 4.5 Level of Independence in Daily Living Activities

Indicator	Average Score Pre Intervention	Verbal Interpretation
Child's Independence and Autonomy	2.8	Agree

Table 4.5: It can be inferred from the table that the average answers fall under the score of 2.8 signifying an Agree level of independence before undergoing the home-based intervention developed by the researcher (Mulan, 2021). It is evident that the changes brought about in home, the comfort it gives in the environment plays a factor in the development of independence of a child, being that there are only two variables at play, the guardian which most of the time are the parents and the child which translates to the child relying more on self and the guardian towards improvement and limits the effect of any external variables.

Table 4.6 Targeted Focus of Intervention in Developing Independence and Autonomy

Indicator	Targeted Focus
Child's Independence and Autonomy	- Independent task routines (dressing, hygiene, packing) - Decision-making with choice boards - Personal space organization tasks - Self-monitoring task checklists - Responsibility charts for chores - Autonomy-based reward systems

Table 4.6: shows the integration from the results gathered aiming to improve and develop the child's independence and autonomy where the intervention aims to answer the gathered results by providing the following activities that revolves around self-help skills.

Table 4.7 Self Perception of Parents in their Role in fostering independence

Indicator	Pre Intervention Average Score	Verbal Interpretation
Parental Competence & Confidence	3.25	Strongly Agree

Table 4.7: It was evident that parents acknowledged felt confident and competent in their role in the improvement of their child's independence, having an average score of 3.25 which signifies "Strongly Agree", the level of parental confidence gives them a closer connection towards their children. The factors that contribute to the perspective of the parents may be that of having to personally observe the behavior of their child inside at home. It is already understood that there are institutions that focuses on the changes, the interventions that improves a child's need, but parents only seen the changes, the result itself not the process. In a study that focuses on the parental involvement towards the intervention of children's with ASD, those that directly involves the parents in the intervention were reported to have a greater quality of life as they participated, especially on how to foster their involvement with their children's daily life (Musetti, 2021) This goes to show that parents also benefitted from the study on the day to day basis, being able to know the needed help they could provide towards their children also increases their familial bond and sense of accomplishment for self.

Table 4.8 Targeted Focus of Intervention in Developing Parental Competence

Indicator	Targeted Focus
Parental Competence	- Parent workshops on ASD and strategies - In-home modeling and coaching - Video feedback sessions - Progress tracking tools and goal setting - Establishing structured home routines - Parent support groups or peer mentoring

Table 4.8: will be utilized showing the content of the intervention that would be included. It would be targeting the ability of the parents to adapt, and know the right process during the implementation of the home-based intervention.

Table 4.9 Challenges faced by parents during the implementation of home-based intervention

Indicators	Average	Verbal

	Score	Interpretation
Factors Affecting Effectiveness of Home Based Intervention	**3.80**	**Strongly Agree**

Table 4.9: In the table, it was apparent that with a score of 3.80 that highly, most of the challenges faced during the intervention were attributed towards various factors, mainly were time, resources and collaboration which had an impact towards the success of the intervention program. In a study that takes into perspective of having a family dynamic that includes Children with ASD, it was a common occurrence that they experienced usually the same problem such as time management, support system inside the family, and most especially parent-school partnership (Fadare, 2021) As such, it was evident on the home-based intervention as well were the respondents had a hard time dealing with, although it had resulted to a positive result, it is still worth noting that these problems exist and is being improved upon as well by the intervention, resolving issues through proper administration and training on the how's of the intervention.

Table 4.10 Targeted Focus of Intervention in Developing Multiple Factors

Indicator	Targeted Focus
Skill Acquisition	-Task analysis and structured teaching of self-care and household routines - Daily living skills training - Visual support and step-by-step schedules - Functional communication training - Cognitive enrichment activities - Following multi-step instructions with fading prompts
Behavioral Changes	- Behavior management strategies (e.g., reinforcement, visual timers) - Emotional regulation training - Teaching alternative behaviors - Structured routines for predictability - Transition and patience-building tasks - Mindfulness or sensory regulation activities
Social Interaction	- Social stories and role-playing for peer interaction - Cooperative games and group activities - Turn-taking and sharing games - Social communication practice (greetings, conversation) - Teaching joint attention - Structured peer/family interaction planning

Table 4.10: shows the different factors that was found based on the results of the said questionnaire, here it represents three facets, skill acquisition, behavioral changes, and social interaction. Skill acquisition aims to measure task analysis, cognitive thinking, and functional communication skills. Behavioral changes aim to measure emotional Control, Routine pattern, patience building and mindfulness activities. Whereas social interaction focuses on social communication, peer to peer interaction as well as turn taking activities. These summarize the aim of the program and its contents which has the goal of improving the five facets that had been discovered from the results.

Table 4.11 Challenges faced by parents during the implementation of home-based intervention

Indicator	Program Intervention

Skill Acquisition	Task analysis and structured teaching of self-care and household routines, Daily living skills training, Visual supports and step-by-step schedules, Functional communication training, Cognitive enrichment activities, Following multi-step instructions with fading prompts
Behavioral Changes	Behavior management strategies (e.g., reinforcement, visual timers), Emotional regulation training, Teaching alternative behaviors, Structured routines for predictability, Transition and patience-building tasks, Mindfulness or sensory regulation activities
Parental Competence	Parent workshops on ASD and strategies, In-home modeling and coaching, Video feedback sessions, Progress tracking tools and goal setting, Establishing structured home routines, Parent support groups or peer mentoring
Social Interaction	Social stories and role-playing for peer interaction, Cooperative games and group activities, Turn-taking and sharing games, Social communication practice (greetings, conversation), Teaching joint attention, Structured peer/family interaction planning
Independence and Autonomy	Independent task routines (dressing, hygiene, packing), Decision-making with choice boards, Personal space organization tasks, Self-monitoring task checklists, Responsibility charts for chores, Autonomy-based reward systems

Table 4.11: The developed collaborative parent-led home-based intervention program was implemented through a structured, multi-phase process. The program commenced with an initial phase comprising parent orientation, training on intervention goals and evidence-based strategies, and baseline data collection to assess the child's pre-intervention functional levels. Subsequently, a personalized intervention plan detailing specific, measurable goals and tailored strategies was collaboratively formulated based on the baseline assessment data. This was followed by a dedicated parent coaching and skill-training period involving guided practice and feedback to ensure parental fidelity in applying intervention techniques. The core implementation phase involved parents applying the learned strategies within the home environment over several weeks, concurrent with facilitator monitoring and support. An ensuing phase focused on systematic progress monitoring, data analysis, and iterative adjustments to the intervention plan based on the child's observed responses and needs. Integral to the program was continuous monitoring and evaluation (M&E), which encompassed real-time progress tracking, assessment of implementation fidelity, evaluation of child outcomes and parental satisfaction, and data-driven decision-making to optimize the intervention and assess its sustained impact.

Table 4.12 Pre and Post Intervention for Skill Acquisition

Indicators	Pre Intervention Score	Post Intervention Score
Skill Acquisition	2.97	3.56

Table 4.12: Skill acquisition had a high average mean of 2.97 during the pre- intervention phase which improved to 3.56 after the intervention. This may be attributed to the shift in the frequency as well as efficiency of the task that is done as well as the ability to engage with new activities they yet to face. Children, adolescents and adults with ASD often struggle the most in adapting with their surrounds and learning new skills (Hakobyan, 2021). A

multidisciplinary approach was recommended by the study in which tackles many of the struggles of a child with ASD, seeing that the improvement was significant enough and that the intervention encompasses most of the needs by the child, the presence of the parent as the one that leads the intervention can be concluded to be effective basing on the significant improvement that it yields.

Table 4.13 Pre and Post Intervention Behavioral Changes

Indicators	Pre Intervention Score	Post Intervention Score
Behavioral Changes	3.15	3.72

Table 4.13: Behavioral changes as stated are usually the first observable factor after an intervention is done, it had a score of 3.15 for pre-intervention which improved to 3.72. In line with the research's intention to improve the children's independence, it may be attributable to the changes observed via skills that was gained since it is closely related to the observable changes in behavior hence both factors fell under the "Agree" Category. As indicated on prior researches, the reduction of maladaptive behaviors such as tantrums and crying were significant enough from the result of Home-based intervention, going as far as it resulting in a much more positive home environment (Mullan, 2021).

Table 4.14 Pre and Post Intervention Parental Competence

Indicators	Pre Intervention Score	Post Intervention Score
Parental Competence	3.25	3.77

Table 4.14: Self-perception of parental competence obtained a pre-intervention score of 3.25 to post intervention score of 3.77. This entails that parental interaction has benefited strongly with the intervention. Based on other studies that adopted a similar approach towards intervention, it was found that families have had a much calmer home environment, and an increase in wellbeing of the parents that handled the child (Mullan, 2021)

Table 4.15 Pre and Post Intervention Social Interaction

Indicators	Pre Intervention Score	Post Intervention Score
Social Interaction	3.04	3.47

Table 4.15: Social interaction got a pre-intervention score of 3.04 and a post-intervention score of 3.47. In a study it was found that what contributes to the ability of a child to interact with his or her peer translated to their own independence. In a study assessing the social communication skills of a child, it was found that children with ASD developed much better social communication skills when undergoing parent-mediated interventions (Deniz, 2022).

Table 4.16 Pre and Post Intervention Independence and Autonomy

Indicators	Pre Intervention Score	Post Intervention Score
Independence & Autonomy	2.81	3.37

Table 4.16: Child's independence and autonomy got a pre-intervention score of 2.81 increasing to post intervention score of 3.37. Here it was evident that in an objective view, it was what improved significantly. In a study, it was found that the introduction of an external factor in the learning of a child with ASD, improves their day to day independence (Bacete, 2019). Having a support system directly teaches them behavioral management seems to have greatly benefit through this approach, having to guide their children and a mainstay presence throughout the process helps develop the child be more independent.
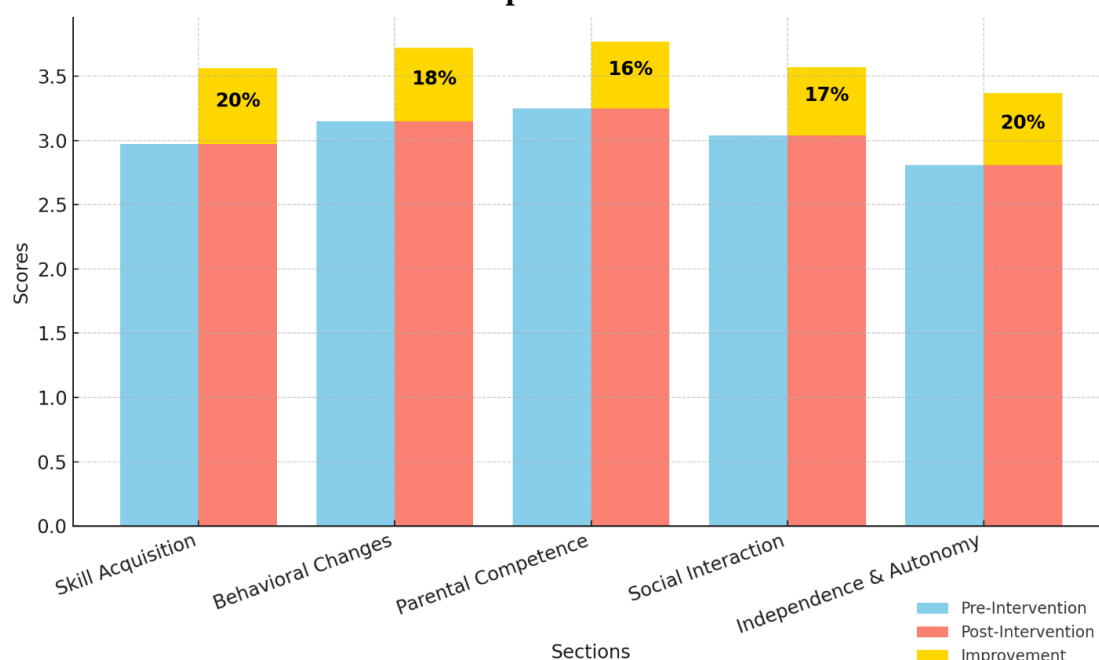
Table 4.17 Home Based Intervention Factors Pre and Post Intervention Independence Improvement

Table 4.17: The figure presents the direct comparison of each factor that was considered that makes up to quantify the targeted independence of the children. Inferring from the figure, skill acquisition with an improvement of 20% after undergoing the home based intervention. Next is the behavioral changes of the children with ASD with an improvement percentage of 18%. Parental competence improved by 16%, social interaction compliments with independence and autonomy which both improved by 17% and 20% respectively. The least improved among the different factors are parental competence but it must also be noted that it had the highest average mean for pre and post-intervention which entails that it had already significant enough to have a further improvement while the most improvement could be seen with skill acquisition and independence and autonomy. This signifies that these factors are the ones that benefitted the most with the intervention.

Table 4.18 Level of Satisfaction based on Role Confidence

Indicators	Post Intervention Average Scores	Verbal Interpretation
1. I feel more competent in supporting my child's development after participating in the intervention.	3.77	Strongly Agree
2. The intervention has helped me understand my child's needs better.	3.75	Strongly Agree
3. I feel more confident in using the strategies taught in the program with my child.	3.82	Strongly Agree
4. The program has empowered me to take an active role in my child's development.	3.87	Strongly Agree
Total Average Score	**3.80**	**Strongly Agree**

Table 4.18: shows a total average score of 3.80 which falls under the category of "Strongly Agree" which entails the different perspective on how the intervention had positive impact on the parent's role as the one leading the intervention, looking deeper into the scores, it may be inferred that the parent had more control towards any possible unwarranted situation to arise,

having able to adapt and take inspiration on what to do in situations where they could apply themselves the learned approach when correcting a behavior gives the parents a much more satisfied perception of themselves as guardians of their child. Programs that actively involve parents in interventions have demonstrated improvements in parental self-efficacy, confidence, and competence, thus enhancing overall family well-being (Catalano et al., 2018).

Table 4.19 Level of Satisfaction based on Behavioral Management

Indicators	Post Intervention Average Scores	Verbal Interpretation
5. I now feel more capable of managing my child's behavior during daily activities.	**3.65**	**Strongly Agree**
6. The intervention has increased my ability to implement effective routines at home.	**3.80**	**Strongly Agree**
7. I feel that I can better monitor my child's progress and provide appropriate feedback.	**3.86**	**Strongly Agree**
8. The program has improved my confidence in addressing my child's challenges independently.	**3.71**	**Strongly Agree**
Total Average Score	**3.76**	**Strongly Agree**

Table 4.19: shows the average score of 3.76 which falls under the category of "Strongly Agree" telling as to how adaptive a parent will be in cases of children misbehaving much more so that it gives the parents a much better gauge of what triggers such behaviors such as tantrums of their child, it also shows the learning that they have gained throughout the intervention. ABA inspired programs are highly customized to meet a child's need be it behavioral or developmental, this is a consistent behavioral management strategy that is commonly used across various settings (Beaudoin et al., 2019). The parent-led home-based intervention is deeply connected with ABA, knowing this, teaching a parent as to how to manage such behaviors only improves the approach that is being done at home where the child spends most of their time with, adding to that the parents themselves are the ones that spends the most time with their child thus increasing the efficiency of the said intervention.

Table 4.20 Level of Satisfaction based on Child Relationship

Indicators	Post Intervention Average Scores	Verbal Interpretation
5. I now feel more capable of managing my child's behavior during daily activities.	**3.65**	**Strongly Agree**
6. The intervention has increased my ability to implement effective routines at home.	**3.80**	**Strongly Agree**
7. I feel that I can better monitor my child's progress and provide appropriate feedback.	**3.86**	**Strongly Agree**
8. The program has improved my confidence in addressing my child's challenges independently.	**3.71**	**Strongly Agree**
Total Average Score	**3.76**	**Strongly Agree**

Table 4.20: shows the average score of 3.76 which falls under the category of "Strongly Agree" telling as to how adaptive a parent will be in cases of children misbehaving much more so that it gives the parents a much better gauge of what triggers such behaviors such as

tantrums of their child, it also shows the learning that they have gained throughout the intervention. ABA inspired programs are highly customized to meet a child's need be it behavioral or developmental, this is a consistent behavioral management strategy that is commonly used across various settings (Beaudoin et al., 2019).

Table 4.21 Level of Satisfaction based on Child Relationship

Indicators	Post Intervention Average Scores	Verbal Interpretation
9. I feel more knowledgeable about ASD and how to support my child's growth.	3.73	Strongly Agree
10. I now have more tools and strategies to foster my child's independence and autonomy.	3.74	Strongly Agree
Total Average Score	**3.73**	**Strongly Agree**

Table 4.21: shows the result of total average scores of 3.73 which falls under the category of "Strongly Agree" which shows that the impact does not only affect the technical sides of things but also affects how the parent is much more understandable of their child's needs. It enhances their need of adjustments as well as the closeness of their relationship through such adjustment. In a study it was found that children with ASD had a rapid learning increase when there was a natural, rather than an arbitrary relationship between a response and the reward for using that response (Schreibman, 2015). Hence it is natural that a child's learning directly correlates with their relationship with their parent, encouraging a home-based intervention which does not only help the parent understand more about their child but also let them bond with them much more, knowing what to do and what to say only helps a parent care for their child.

V. CONCLUSION AND RECOMMENDATION

The findings indicate that while children with ASD initially demonstrated moderate independence in daily tasks, the developed collaborative parent-led home-based intervention program successfully addressed the need for enhanced autonomy. The intervention effectively boosted parental confidence and competence, empowering parents with knowledge and strategies to guide their child's development. Although implementation challenges related to time, resources, and consistency were noted, the structured, personalized, and supportive nature of the program proved effective in enhancing children's independence, parental skills, and overall daily functioning. High levels of parental satisfaction further underscore the program's success in empowering parents, fostering competence, strengthening family bonds, and ultimately improving the quality of life for children with ASD. Continued parental involvement and tailored support remain crucial for maximizing outcomes.

VI. RESEARCH LIMITATION AND DIRECTION FOR FUTURE STUDIES

This study's scope was confined to 35 Filipino families with children aged 3-8 years enrolled at a single therapy center in Batangas City, over a period from October 2024 to March 2025. Data collection relied primarily on parent-reported outcomes via questionnaires and checklists, which may introduce subjective bias. The variables examined included the child's independence level, parental perceptions and challenges, the intervention program itself, its perceived effects, and parental satisfaction. Consequently, the generalizability of these findings may be limited. Future research should aim to validate these findings across diverse

populations and settings. Investigating the long-term effects and sustainability of the intervention gains is recommended. Incorporating direct child assessments and objective observational data would strengthen the evidence base by supplementing parental reports. Further studies could also explore the impact of variations in program components, intensity, or duration, as well as examining the intervention's effects on the broader family system and sibling relationships. Addressing implementation barriers related to resource availability and consistency through enhanced support structures warrants investigation. Continued focus on promoting collaboration between parents, educators, and therapists, alongside advocacy for accessible, funded parent-led programs, remains essential.

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