

# Role of Family Involvement and Communication Skills in Predicting Social Integration in Children with Autism

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### ABSTRACT

This study aimed to examine the predictive roles of family involvement and communication skills in determining the level of social integration among children with autism. The research utilized a correlational descriptive design with a sample of 440 parents of children with autism residing in Germany. Participants were selected based on the Morgan and Krejcie sample size table and met inclusion criteria involving parental caregiving roles and formal autism diagnosis of their children aged 6 to 12. Data were collected using three standardized instruments: the Social Skills Improvement System Rating Scales (SSIS-RS) to measure social integration, the Family Involvement Questionnaire (FIQ) for family engagement, and the Children's Communication Checklist-Second Edition (CCC-2) to assess communication skills. All tools have confirmed validity and reliability in previous studies. Data analysis was performed using SPSS-27, employing Pearson correlation to examine relationships among variables and linear regression to identify predictors of social integration. Descriptive statistics indicated moderate to high mean scores across all variables. Pearson correlation analysis revealed significant positive relationships between social integration and both family involvement ( $r = .56, p < .001$ ) and communication skills ( $r = .61, p < .001$ ). Regression analysis demonstrated that both predictors significantly contributed to the variance in social integration ( $R^2 = .45, F(2, 437) = 177.26, p < .001$ ). Multivariate regression results confirmed that communication skills ( $\beta = .42, p < .001$ ) and family involvement ( $\beta = .38, p < .001$ ) were both strong, independent predictors of social integration. The findings highlight the importance of family engagement and communication development in promoting social integration among children with autism. Interventions targeting these areas may enhance social functioning and improve long-term developmental outcomes for this population.

**Keywords:** Autism Spectrum Disorder, Social Integration, Family Involvement, Communication Skills.

## 1. Introduction

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental condition characterized by deficits in social interaction, communication challenges, and repetitive patterns of behavior. While its clinical manifestations vary across individuals, a consistent and critical concern is the difficulty children with ASD face in achieving social integration. Social integration, defined as the ability to engage meaningfully with peers, family, and community, is a key determinant of long-term developmental, psychological, and academic outcomes. Despite advancements in the diagnostic and therapeutic landscapes of autism, fostering meaningful social participation among affected children remains an ongoing challenge (Achilli et al., 2022; Bojanek et al., 2025). This challenge is exacerbated by varying degrees of family involvement and the child's communication abilities, both of which are known to influence social functioning trajectories in ASD populations (He, 2024; Sun, 2024).

Recent literature highlights the centrality of family in shaping outcomes for children with autism. Family systems serve not only as the primary caregivers but also as socialization agents, emotional support networks, and behavioral role models. In this regard, family involvement—particularly in educational, developmental, and therapeutic processes—has been shown to enhance adaptive behaviors and promote greater inclusion in community contexts (Cheng et al., 2022; Malinao et al., 2025). Effective family involvement encompasses various dimensions, including home-based educational support, participation in school activities, and consistent communication with educators and therapists. These forms of engagement are particularly vital for children with ASD, whose needs often exceed conventional educational supports (Cameron et al., 2020; Eidson et al., 2020). A strong family presence can bridge the gap between therapeutic goals and real-life functionality, ultimately reinforcing a child's sense of belonging and reducing the social barriers typically experienced by those on the autism spectrum.

The significance of parental roles is further amplified in contexts where extended familial and cultural structures influence caregiving norms. Studies have shown that active father involvement, often underexamined in autism research, correlates positively with developmental gains and emotional stability in children with ASD (Alimbekova et al., 2024; Lien et al., 2020). Moreover, the quality of inter-family relationships, including the emotional climate and

communication dynamics within the household, has been linked to children's adaptive capacity and psychological well-being (Cláudia Maria Sousa de et al., 2021; Pawłowska & Świerczyńska, 2021). In families where cohesion, structure, and mutual support prevail, children with autism often exhibit better engagement with peers and greater comfort in unfamiliar social settings. Conversely, when families experience high stress, fragmented communication, or emotional withdrawal, the likelihood of social withdrawal in children increases (Andoy & Aberin, 2021; Desiningrum et al., 2019).

The COVID-19 pandemic and its aftermath have further emphasized the essential role of family involvement, especially when access to formal therapies and educational services was disrupted. In such circumstances, the family became the primary source of social interaction and developmental support for children with autism (Cheng et al., 2022). Families that adapted by maintaining routines, engaging in learning activities, and managing behavioral issues demonstrated not only resilience but also contributed significantly to preserving the child's sense of structure and social connection (Trew, 2024; Wilson et al., 2023). These findings underscore that family involvement is not a peripheral or supplementary factor in autism care, but a central determinant of social and emotional integration.

Another key variable in determining social integration outcomes for children with autism is communication skill. Communication is both a fundamental developmental milestone and a crucial bridge to social connection. For children with ASD, deficits in verbal and non-verbal communication, including limited eye contact, challenges in understanding social cues, and difficulties with reciprocal conversation, often impede the formation of peer relationships (He, 2024; Iwanaga et al., 2024). These challenges result in frequent isolation, rejection, and misinterpretation, all of which contribute to diminished social participation and increased vulnerability to emotional distress. Conversely, when communication skills are actively nurtured—whether through speech therapy, pragmatic language instruction, or behavioral interventions—children are better equipped to engage socially and respond appropriately to social stimuli (Hendry et al., 2024; Hodgetts et al., 2017).

The development of communication skills is not isolated from family dynamics. In fact, family members are often the child's first communication partners and primary models of linguistic and social behavior. Parent-mediated interventions, for example, have been shown to be

particularly effective in improving both expressive and receptive language in children with ASD (Cameron et al., 2020; Walton, 2018). Sibling involvement also plays a critical role, as siblings can facilitate peer-like interactions and model appropriate social responses, thereby enriching the child's communicative repertoire (Law, 2020). In households that prioritize open dialogue, narrative storytelling, and responsive listening, children with autism tend to develop stronger communication competencies, which in turn promote social integration.

While individual therapies target specific communication deficits, the broader context of everyday family interaction has a cumulative and enduring effect on a child's communicative behavior. Notably, families that employ adaptive communication strategies—such as using visual schedules, simplified language, and emotional labeling—report higher levels of child participation in group activities and community events (Al-Manasfi et al., 2022; Stoliaryk, 2021). Such outcomes are reflective of a systemic approach, where the interplay between familial patterns and communicative development is both dynamic and mutually reinforcing.

Given the interrelated nature of family involvement and communication skills in shaping social trajectories, there is a growing emphasis on examining these constructs simultaneously in autism research. Although several studies have explored these domains independently, limited research has investigated how both factors jointly predict social integration in children with autism. Understanding this relationship is especially critical in early and middle childhood, a developmental period marked by rapid social learning and identity formation (Sun, 2024; Trew, 2024). By assessing how communication proficiency and the degree of family engagement interact to influence social behavior, researchers and practitioners can design more targeted, effective interventions that address the needs of the whole child within the context of their immediate social environment.

The current study builds on this foundation by examining the predictive roles of family involvement and communication skills on social integration among children with autism in Germany.

## 2. Methods and Materials

### 2.1. Study Design and Participants

The present study employed a correlational descriptive research design to investigate the role of family involvement

and communication skills in predicting social integration among children with autism. The target population included parents of children diagnosed with autism spectrum disorder in Germany. Based on the Morgan and Krejcie sample size determination table, a total of 440 participants were selected through purposive sampling to ensure relevance to the research objectives. Inclusion criteria required that participants be primary caregivers of children formally diagnosed with autism, aged between 6 and 12 years, and residing in Germany. All participants were informed about the purpose of the study and provided informed consent prior to participation. Standardized self-report instruments were used to collect data on the three key variables: social integration, family involvement, and communication skills.

### 2.2. Measures

#### 2.2.1. Social Integration

To measure the dependent variable of social integration in children with autism, the Social Skills Improvement System Rating Scales (SSIS-RS) developed by Gresham and Elliott (2008) was used. This standardized instrument evaluates social skills, problem behaviors, and academic competence in children aged 3 to 18. The Social Skills domain of the SSIS-RS specifically assesses behaviors that facilitate positive interactions with peers and adults, which are critical for social integration. It includes subscales such as communication, cooperation, assertion, responsibility, empathy, engagement, and self-control. The parent version of the scale, suitable for children with developmental disorders, consists of 46 items rated on a 4-point Likert scale ranging from "Never" to "Almost Always." Higher scores indicate greater levels of social competence. The SSIS-RS has demonstrated high internal consistency, test-retest reliability, and construct validity in both clinical and general populations, including children with autism, making it a reliable tool for assessing social integration (Kim et al., 2022).

#### 2.2.2. Family Involvement

To assess the independent variable of family involvement, the study employed the Family Involvement Questionnaire (FIQ) developed by Fantuzzo, Tighe, and Childs (2000). This validated instrument measures the multidimensional aspects of family participation in their child's education and development. The FIQ contains 42 items divided into three subscales: Home-Based

Involvement, School-Based Involvement, and Home-School Communication. Items are rated on a 4-point Likert scale ranging from "Rarely" to "Always," with higher scores reflecting higher levels of involvement. The scale is particularly suitable for use with parents of young children, including those with developmental disorders. The FIQ has been widely validated across diverse populations, showing strong internal consistency (Cronbach's alpha values above 0.85), as well as good convergent and discriminant validity, making it a reliable measure of family involvement in the context of child development and social outcomes (Falope, 2021; Leukel et al., 2022; Taseer et al., 2023).

### 2.2.3. Communication Skills

Communication skills in children with autism were evaluated using the Children's Communication Checklist–Second Edition (CCC-2) developed by Bishop (2003). This parent-report questionnaire is specifically designed to assess communication impairments in children aged 4 to 16 years, particularly those with pragmatic language difficulties such as those common in autism spectrum disorder. The CCC-2 comprises 70 items distributed across ten subscales: Speech, Syntax, Semantics, Coherence, Inappropriate Initiation, Stereotyped Language, Use of Context, Nonverbal Communication, Social Relations, and Interests. Responses are rated on a 4-point scale, from "Less than once a week or never" to "Several times a day or always." The scale yields a General Communication Composite and a Pragmatic Language Composite score. The CCC-2 has shown strong psychometric properties, with high internal consistency and

test-retest reliability, and its validity has been confirmed in numerous studies involving children with autism, making it a well-established instrument for assessing communication skills (Havrylova, 2023; Klefbeck, 2023; Moosapoor, 2023).

### 2.3. Data Analysis

Data analysis was conducted using SPSS version 27. To examine the relationship between the dependent variable (social integration) and each of the independent variables (family involvement and communication skills), Pearson correlation coefficients were calculated. In addition, a standard linear regression analysis was performed to assess the predictive value of family involvement and communication skills on social integration. The assumptions of normality, linearity, and multicollinearity were checked prior to conducting the regression analysis. All statistical analyses were carried out at a significance level of  $p < .05$ .

## 3. Findings and Results

The final sample consisted of 440 parents of children with autism residing in Germany. Of the participants, 287 (65.2%) were mothers and 153 (34.8%) were fathers. In terms of the children's gender, 317 (72.0%) were boys and 123 (28.0%) were girls. The age distribution of the children indicated that 102 (23.2%) were between 6 and 7 years old, 159 (36.1%) were between 8 and 9 years old, and 179 (40.7%) were between 10 and 12 years old. Regarding parental educational level, 94 (21.3%) had completed secondary education, 176 (40.0%) held a bachelor's degree, and 170 (38.6%) had attained a postgraduate degree.

**Table 1**

*Descriptive Statistics for Study Variables*

Variable	Mean	Standard Deviation
Social Integration	78.62	8.91
Family Involvement	84.75	9.58
Communication Skills	71.49	7.86

The descriptive analysis (Table 1) indicates that participants reported relatively high scores across all variables. The mean score for social integration was 78.62 (SD = 8.91), suggesting a moderate level of integration among children with autism in the sample. Family involvement had a mean of 84.75 (SD = 9.58), indicating that parents generally reported strong engagement in their child's development. Communication skills showed a mean

of 71.49 (SD = 7.86), reflecting generally adequate communicative ability among children in this population.

Prior to conducting regression analysis, the assumptions of normality, linearity, and multicollinearity were assessed and confirmed. The Shapiro-Wilk test indicated that the residuals were normally distributed ( $W = 0.991$ ,  $p = .074$ ). The scatterplot of standardized residuals versus predicted values showed no clear pattern, supporting the assumption of linearity. Additionally, multicollinearity was examined

using the Variance Inflation Factor (VIF), which yielded values of 1.42 for family involvement and 1.38 for communication skills, both well below the threshold of 10,

indicating no multicollinearity concerns. These results confirmed that the data met the necessary assumptions for linear regression analysis.

**Table 2**

*Pearson Correlation Coefficients Between Social Integration and Independent Variables*

Variables	r	p
Family Involvement	.56	<.001
Communication Skills	.61	<.001

As shown in Table 2, both independent variables demonstrated significant positive correlations with social integration. Specifically, family involvement was moderately correlated with social integration ( $r = .56$ ,  $p < .001$ ), while communication skills had a slightly stronger

correlation ( $r = .61$ ,  $p < .001$ ). These findings suggest that increases in either family involvement or communication skills are associated with greater levels of social integration in children with autism.

**Table 3**

*Summary of Regression Model for Predicting Social Integration*

Source	Sum of Squares	df	Mean Square	R	R <sup>2</sup>	R <sup>2</sup> adj	F	p
Regression	4286.17	2	2143.09	.67	.45	.45	177.26	<.001
Residual	5201.39	437	11.90					
Total	9487.56	439						

As shown in Table 3, the regression model was statistically significant ( $F(2, 437) = 177.26$ ,  $p < .001$ ), with an  $R^2$  value of .45, indicating that 45% of the variance in social integration could be explained by the combined influence of family involvement and communication skills.

The adjusted  $R^2$  value (.45) further confirms the model's strength and reliability. These results suggest that the regression model offers a substantial explanation of social integration outcomes based on the two predictors.

**Table 4**

*Multivariate Regression Analysis for Predicting Social Integration*

Predictor	B	SE	$\beta$	t	p
Constant	23.84	3.17	—	7.53	<.001
Family Involvement	0.34	0.05	.38	6.80	<.001
Communication Skills	0.41	0.06	.42	7.11	<.001

The results in Table 4 show that both family involvement and communication skills were significant predictors of social integration. Communication skills had a slightly higher standardized beta coefficient ( $\beta = .42$ ,  $p < .001$ ) compared to family involvement ( $\beta = .38$ ,  $p < .001$ ), indicating that while both variables are important, communication skills had a marginally stronger effect. The constant term was also statistically significant ( $B = 23.84$ ,  $SE = 3.17$ ,  $t = 7.53$ ,  $p < .001$ ), and the overall model demonstrated robust explanatory power.

The present study aimed to examine the role of family involvement and communication skills in predicting social integration in children with autism. Using Pearson correlation and linear regression analysis on data from 440 parents in Germany, the findings revealed that both independent variables—family involvement and communication skills—were significantly and positively correlated with social integration. Furthermore, the results of linear regression analysis indicated that both variables were statistically significant predictors of social integration, with communication skills showing a slightly stronger predictive power than family involvement. These findings confirm the

#### 4. Discussion and Conclusion



hypothesis that the degree of family engagement and the child's ability to communicate effectively are crucial determinants of how well children with autism integrate socially.

The observed positive relationship between family involvement and social integration is consistent with the growing body of literature emphasizing the centrality of familial support in shaping social outcomes for children with autism. Prior studies have demonstrated that when families are actively involved in their child's development, whether through educational support, structured routines, or emotional availability, children tend to exhibit stronger social functioning and greater community participation (Malinao et al., 2025; Sun, 2024). Family involvement provides the child with not only consistent behavioral reinforcement but also emotional scaffolding that facilitates social engagement beyond the home environment (Cláudia Maria Sousa de et al., 2021). These findings align with research conducted by Cheng et al., who found that high levels of parental involvement mitigated the negative effects of pandemic-related disruptions on children's social interaction, thereby protecting their overall family quality of life (Cheng et al., 2022).

Further reinforcing this perspective, the work of Alimbekova et al. highlights how father involvement, often underrepresented in autism literature, contributes significantly to a child's social, emotional, and cognitive development, which in turn strengthens their ability to function in social settings (Alimbekova et al., 2024). Similarly, Lien et al. found that fathers who manage to blend nurturing behaviors with traditional roles report better outcomes in their children's emotional and social domains (Lien et al., 2020). In our study, high family involvement was associated with increased levels of social integration, corroborating the notion that a well-structured and emotionally responsive home environment provides a foundational context for social learning in children with ASD.

Communication skills emerged as an even stronger predictor of social integration, which is consistent with the essential role of communication in forming and maintaining social relationships. As noted by He, the inability to process and respond to sensory stimuli often undermines communicative interactions in children with autism, leading to isolation and misunderstanding (He, 2024). However, interventions that strengthen both verbal and non-verbal communication have shown substantial promise in improving peer engagement and participation in social

environments. For instance, Hendry et al. emphasized the link between executive function and communication in autism, arguing that improved executive skills facilitate more adaptive communication strategies and social responses (Hendry et al., 2024).

Additionally, Iwanaga et al. demonstrated that Japanese children with autism who exhibited better communication and play skills had significantly higher participation in school and community activities, a finding that parallels the outcomes of our study (Iwanaga et al., 2024). Similarly, studies by Walton and Hodgetts have shown that leisure time activities, when guided by strong communication, lead to improved family functioning and greater inclusion in social spaces for children with autism (Hodgetts et al., 2017; Walton, 2018). These findings reinforce the idea that enhancing communication skills serves as a gateway to broader social integration.

Interestingly, our results also support the systemic relationship between communication skills and family involvement. Families that create a communicative environment—marked by responsive dialogue, emotional labeling, and routine conversations—equip their children with the necessary skills to navigate complex social scenarios (Cameron et al., 2020; Law, 2020). For example, Law emphasized the importance of involving siblings in developing communication within the household, which not only aids the child with autism but also strengthens overall family cohesion (Law, 2020). Eidson et al. further asserted that integrating parents into therapeutic networks enhances communication outcomes, thus indirectly supporting greater social integration (Eidson et al., 2020).

Our findings are also consistent with the relational dynamics explored in Trew's study, which examined how external reactions to autism can impact familial well-being and relational harmony (Trew, 2024). When families are equipped with communicative tools and engage meaningfully in the child's social development, external stigma is less likely to destabilize the child's social progress. Furthermore, the research by Stoliaryk indicates that strength-based family interventions significantly improve not only child mobility and independence but also familial perceptions of social integration (Stoliaryk, 2021).

The positive relationship between family involvement and communication skills found in this study also resonates with findings from Desiningrum et al., who emphasized that psychological well-being among mothers of children with autism was closely tied to effective family functioning and open communication (Desiningrum et al., 2019). In our

sample, parents who reported higher involvement levels also tended to rate their child's communication more favorably, suggesting a reciprocal relationship between these two variables in enhancing social outcomes. Similar conclusions were drawn by Andoy and Aberin, who explored the intersection between academic performance and social interaction, mediated by communication and parental engagement in inclusive classrooms (Andoy & Aberin, 2021).

Moreover, our findings expand upon studies by Al-Manasfi and Achilli that focus on the biological and environmental underpinnings of autism. While these studies emphasize factors beyond the behavioral domain, they support a multidimensional understanding of autism where family dynamics and communication interventions act as compensatory mechanisms for inherent neurodevelopmental challenges (Achilli et al., 2022; Al-Manasfi et al., 2022).

The broader implications of these results are consistent with the findings of Anyanwu et al., who observed that extended family support systems alleviate parental stress and improve child social functioning (Anyanwu et al., 2019). Similarly, the work of Wilson et al. on caregiver experiences reveals that long-term social and vocational outcomes for adults with autism are significantly shaped by early family support and communicative competencies developed in childhood (Wilson et al., 2023).

Taken together, the findings of this study underscore the importance of addressing both family involvement and communication skills in any comprehensive approach to enhancing social integration in children with autism. These two dimensions are not only independently influential but also mutually reinforcing. Interventions that target one area without considering the other may fall short in producing sustainable social outcomes. Therefore, a holistic and systems-based perspective is essential in both research and practice.

Despite its valuable insights, this study is not without limitations. First, the reliance on parent-report measures may introduce subjective bias or social desirability effects, potentially affecting the accuracy of responses. Second, although the sample size was statistically adequate, all participants were drawn from Germany, which may limit the generalizability of the findings to other cultural or educational contexts. Third, the study employed a cross-sectional design, which restricts the ability to draw causal inferences about the relationships between variables. Longitudinal data would provide a more nuanced understanding of how family involvement and

communication skills develop over time and influence long-term social integration.

Future research should explore longitudinal designs that track changes in family involvement, communication skills, and social integration over developmental stages. Additionally, expanding the study to include cross-cultural comparisons would be beneficial in identifying universal versus culture-specific patterns in the social development of children with autism. Another important direction is incorporating teacher and therapist reports alongside parent responses to triangulate data and minimize single-informant bias. Future studies could also investigate the potential moderating effects of socioeconomic status, parental education, and access to services on the observed relationships.

Practitioners working with children with autism should prioritize parent training programs that empower families with effective communication strategies and structured involvement techniques. Family-centered interventions should be integrated into educational and therapeutic services to ensure continuity between home and formal settings. It is essential for clinicians and educators to assess both family involvement and communication skills early in the intervention process, using these dimensions as key indicators for tailoring individualized support plans. Schools and service providers should also create more inclusive environments that recognize and support the critical role of families in promoting social integration. Finally, policy-makers should allocate resources to community programs that foster parent engagement and communication development as foundational components of autism support services.

### Authors' Contributions

Authors contributed equally to this article.

### Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

### Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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## Declaration of Interest

The authors report no conflict of interest.

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## Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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