

Research article

Parenting Styles and Parental Self-Efficacy in Parents of Children with Neurological Disorders

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Abstract: This study examines the influence of different parenting styles on parental self-efficacy in families with children diagnosed with neurologic disorders. Specifically, it explores the correlation between five distinct styles—authoritarian, authoritative, permissive, perfectionist, and uninvolved—and parental confidence in managing the challenges associated with raising children with disabilities. The study involved 134 parents of children with neurologic disorders and was conducted in a specialized medical rehabilitation center for children in Bucharest, Romania. Data was collected using the Parenting Style Questionnaire (PSQ) and the Brief Parental Self-Efficacy Scale (BPSES). Statistical analyses were performed using Spearman's rank-order correlation coefficient (Spearman's rho) to assess monotonic relationships, complemented by nonlinear regression modeling to evaluate predictive associations. The results showed statistically significant correlations between parenting styles and self-efficacy across genders and educational levels. Moderate negative correlations were found between self-efficacy and the authoritarian parenting style for both men ($p < 0.001$, $r = -0.581$) and women ($p < 0.001$, $r = -0.519$). A moderate positive correlation was observed between self-efficacy and the authoritative parenting style for women ($p < 0.001$, $r = 0.525$). Furthermore, self-efficacy was moderately negatively correlated with the authoritarian parenting style for parents with university education ($p < 0.001$, $r = -0.601$) and pre-university education ($p < 0.001$, $r = -0.530$). Regression analysis indicated that authoritarian parenting was a significant predictor of diminished parental self-efficacy, explaining 32.7% of the variance in parental self-efficacy outcomes. The findings suggest that understanding the impact of parenting styles on self-efficacy is crucial for designing targeted interventions to improve parental confidence, particularly for families raising children with neurologic disorders. Parental self-efficacy may be increased by intervention programs that encourage authoritative parenting techniques while lowering authoritarian inclinations. For kids with neurological diseases, this can therefore result in better coping strategies, enhanced parent-child relationships, and better developmental and psychological results.

Keywords: parenting style; parental self-efficacy; children; neurologic disorders

1. Introduction

Parenting is a complex and long-term process that involves not only guiding the child in multiple dimensions of development but also enhancing the parents' ability to perform their roles effectively [1,2].

In this context, self-efficacy, a “non-cognitive ability” [3], an essential concept in health psychology and developmental psychology, becomes a central element in understanding how parents manage to cope with the challenges associated with raising a child [4].

Built on the broader concept of self-efficacy, its application within the parenting context—known as parenting self-efficacy—emerges as a critical determinant of effective parenting behaviors [5]. Defined as “an individual’s assessment of their competence in the parenting role”, parenting self-efficacy not only shapes how parents approach their responsibilities but also plays a pivotal role in fostering their children’s development and adaptation [6].

In the context of children’s neurologic disorders, when parents navigate unique and multifaceted challenges, such as the complexity of care, financial and social pressure, emotional challenges, and lack of personal time, parental self-efficacy becomes a particularly intricate factor. These challenges can significantly shape a parent’s confidence in their abilities, ultimately influencing their approach to caregiving [7–10]. Reflecting on this connection, we found some research exploring the relationship between parental self-efficacy and parenting styles, highlighting how a parent’s belief in his competence is mirrored in the strategies they adopt to nurture and guide their children [11–16].

The concept of parenting style, first introduced by psychologist Diana Baumrind, was best conceptualized as “a context that moderates the influence of specific parenting practices on the child” [17].

Baumrind initially proposed three parenting styles—authoritarian, authoritative, and permissive [18]—to which other researchers have subsequently added other styles, taking into account parenting models and cultural environments and arriving at several styles recognized today (authoritarian, perfectionist, authoritative, permissive, helicopter, attachment, free range, uninvolved/neglectful) [19].

The authoritarian parenting style emphasizes strict rules, high expectations, and control, often at the expense of emotional connection with the child. While it can lead to compliance, this approach is linked to negative outcomes such as low self-esteem, heightened anxiety, and difficulties in building healthy relationships [18,20,21].

The perfectionist parenting style, marked by unrealistic standards and a focus on achievement, can create a high-pressure environment. Children may experience stress and self-criticism, struggling to meet their parents’ unattainable expectations, negatively impacting their emotional well-being [22,23].

The authoritative style is considered the most balanced, combining high responsiveness with high expectations. These parents provide structure while fostering a supportive and open environment. Research links this style to positive developmental outcomes, including emotional resilience, higher academic performance, and strong social skills [20,21].

The key difference between authoritarian and authoritative parenting is their approach to rules and communication. Children with authoritarian parents are expected to obey without question, often leading to lower self-esteem and anxiety. In contrast, authoritative parents set clear expectations but encourage independence and value their child’s opinions, fostering higher self-esteem, better social skills, and emotional well-being [24,25].

Permissive parenting is characterized by high emotional responsiveness but low demands. Parents focus on nurturing, but a lack of boundaries and discipline can lead to issues with self-regulation, impulsivity, and poor academic or social outcomes [20,26].

Helicopter parenting is an overprotective style of raising children. It is characterized by parents who tend to worry excessively about their children and prioritize shielding them from difficulties, sometimes to the detriment of the child’s ability to develop independence [27,28].

The attachment parenting style, rooted in attachment theory, emphasizes cultivating and maintaining physical closeness, especially in the early years. It focuses on affection, physical touch, and responsiveness. While this approach can help children develop resilience and cope with stress, it can challenge parents by requiring intense and ongoing involvement; it may also make it difficult for some children to become independent in parent-free environments [29–31].

In contrast to permissive parenting, the free-range parenting style, created by Lenore Skenazy, emphasizes preparing children for independence within the bounds of the law by allowing children greater autonomy with minimal supervision while maintaining clear rules and expectations [32].

The uninvolved or neglectful style is marked by low responsiveness and low demands. Parents provide minimal emotional support, often due to stress or lack of awareness, leading to developmental issues like low self-esteem and increased behavioral problems [21,22].

Parental self-efficacy plays a key role in these styles. Parents with high self-efficacy are likelier to use authoritative or perfectionist approaches, fostering structure and warmth. Conversely, those with low self-efficacy may adopt authoritarian or uninvolved styles, hindering their children's development. Empowering parents with resources and support is critical for positive outcomes [23,26].

Parents' confidence in their abilities plays a crucial role in managing the challenges of raising children with neurologic disorders. The pressure induced by disability can significantly shape parental practices, often influencing the selection and implementation of parenting styles [33]. The research underscores that these styles impact the child's emotional development and social adaptability and reinforce—or hinder—the parents' confidence in their ability to manage these challenges effectively [34].

Parenting a child with a neurological disorder presents distinct challenges that extend beyond typical caregiving responsibilities. Parents of children with disabilities often face heightened stress levels due to the unpredictability of symptoms, difficulties in communication, and long-term dependency of the child and reduced quality of life due to caregiving demands and societal expectations [35]. Quality of life reflects an individual's overall well-being and satisfaction, encompassing physical, emotional, social, and psychological domains [36]. It is inherently subjective, shaped by personal values, experiences, and perceptions, and often linked to the extent to which a person feels their needs and goals are met within their unique circumstances [37–42]. These pressures exacerbate emotional and psychological strain, potentially compromising the parents' ability to adopt adaptive parenting strategies and diminishing their sense of efficacy [43]. In educational settings, systemic barriers further challenge families where choices meant to empower are frequently overshadowed by performance pressures, leaving children with disabilities vulnerable to inadequate support [44]. Financial burdens are also significant, as families must cover the costs of specialized therapies, medical treatments, and adaptive equipment, often requiring one parent to leave employment [45]. The psychological impact is profound, with studies indicating increased rates of anxiety, depression, and caregiver burnout among these parents [46–49]. Understanding these unique stressors is crucial for examining how parenting styles influence parental self-efficacy, as certain approaches may either mitigate or exacerbate these challenges.

One important topic of research is the relationship between parenting practices and parental self-efficacy. Higher parental self-efficacy is associated with more positive parenting behaviors, which promote better mental health outcomes for children, according to recent studies [50]. Similarly, other study emphasize that nurturing parenting styles and maternal self-efficacy significantly bolster children's social and emotional adjustment, particularly in culturally nuanced contexts [51].

Conversely, negative parenting styles, such as overly authoritarian or neglectful approaches, can lead to adverse outcomes for both children and parents. A recent

study explore the links between such styles and heightened adolescent depression, with self-esteem and perceived social support playing moderating roles [52], suggesting that ineffective parenting styles not only hinder child development but may also perpetuate cycles of parental self-doubt and reduced efficacy.

Despite these insights, gaps remain in the literature, particularly regarding the impact of parenting styles on parental efficacy within populations raising children with disabilities. Much of the existing research focuses on broader parenting dynamics, with limited exploration of these families' unique pressures. Addressing this gap is essential for developing tailored interventions that enhance parental self-efficacy and guide parents toward adopting more effective parenting styles [53,54].

The potential implications of these findings are profound. Strengthening parental self-efficacy through targeted interventions could empower parents to manage the complex needs of their children more effectively. Based on digital literacy, open parent-child communication, and consistent rule enforcement in managing children's digital tools, parental self-efficacy plays a vital role in fostering a healthy environment that supports the child's harmonious development [55]. By guiding parents toward nurturing and adaptive styles, these interventions could significantly improve familial outcomes, supporting child and parent well-being.

Further research is necessary to bridge existing gaps and deepen our understanding of the reciprocal influences between parenting styles and self-efficacy in families navigating disability. The development of evidence-based strategies to promote adaptive parenting could mitigate the challenges these families face and contribute to the broader discourse on parental empowerment and child development.

How parents respond to challenges and establish consistent habits plays a crucial role in shaping the quality of their interactions with their children. This not only influences how conflicts are resolved but also sets the tone for the overall emotional climate within the family, ultimately fostering stronger and more resilient parent-child relationships [56].

This study investigated the relationship between parenting styles and parental self-efficacy, focusing on how different parenting approaches influence parents' confidence in their abilities. Additionally, it identified which specific parenting styles act as significant predictors of parental self-efficacy, providing a deeper understanding of the dynamics between parenting behaviors and self-efficacy outcomes.

2. Materials and Methods

The study was conducted at the National Teaching Center for Children's Neurorehabilitation "Dr. Nicolae Robănescu," a specialized neurorehabilitation center for children, where patients with various neurological pathologies from across the country are admitted. The study included 134 parents/caregivers of young school-aged children (7–11 years old) with neurologic disorders (cerebral palsy, SMA, and autism) who were hospitalized in our center. All patients were diagnosed and initiated treatment before the age of three. The study sample was selected using convenience sampling, including all parents who consented to participate in the research. They were questioned using two assessment scales: the Brief Parental Self-Efficacy Scale (BPSES) and the Parenting Style Questionnaire (PSQ).

The inclusion criteria for our research required participants to be parents of children with neurologic disorders who agreed to participate by signing the informed consent form. To maintain the reliability of the collected data, parents with psychological conditions that could potentially impair their ability to complete the questionnaires were excluded from the study.

The Brief Parental Self-Efficacy Scale (BPSES) is a five-item questionnaire designed to assess the self-efficacy of parents and caregivers in managing the challenges of raising children and adolescents [57]. A 5-point Likert scale is used from 1 (strongly disagree) to 5 (strongly agree) for each evaluated item. The responses to the five items are added to generate a final score that ranges from 5 to 25. The parents' or caregivers'

general self-efficacy in handling parenting difficulties is reflected in the total score, which indicates higher levels of parental self-efficacy [57].

Parenting Style Questionnaire (PSQ) is a self-report tool that evaluates parenting approaches based on the theoretical framework established by Diana Baumrind. The questionnaire includes 11 items, each with five response options, corresponding to five distinct parenting styles: authoritative, permissive, authoritarian, perfectionist, and uninvolved [58]. Scoring involves calculating separate totals for each parenting style, with the highest score indicating the dominant parenting style for the respondent [58].

Data collection for the study was conducted between June 2023 and May 2024. To ensure ethical compliance and participant understanding, all parents provided informed consent before they participated in the study. The study was approved by the Ethics Committee of the National University Center for Children Neurorehabilitation "Dr. Nicolae Robanescu" (approval ID: 5520/ 28.04.2023).

Statistical analysis was performed using Excel 2019 and SPSS version 22. The study employed Spearman's rho correlation and nonlinear regression analysis to explore the relationships between parenting styles and parental self-efficacy. Spearman's rho assessed the strength and direction of associations between parenting style scores and self-efficacy levels. Nonlinear regression was used to evaluate the predictive influence of parenting styles on self-efficacy while controlling for demographic variables such as parental gender and education level. These methods provided insights into significant correlations and the unique contributions of specific parenting styles to parental confidence. The findings aim to enhance understanding of the dynamics between parenting behaviors and self-efficacy in families having children with neurologic disorders.

3. Results

The distribution of gender among the 134 parents of children with neurologic disorders showed a relatively balanced representation, with 45.5% of respondents being fathers and 54.5% being mothers. Slightly higher participation from mothers indicates a common trend in research involving child-rearing.

Most participants, 53.0% of the sample, had pre-university education, while 47.0% had university studies. This distribution highlights a relatively equal representation between the two levels of education, which allows us to comprehensively understand how the educational environment can influence parenting styles and parental self-efficacy.

As shown in Table 1, there was a wide variety of dominating parenting approaches. The authoritarian style was the most common, with 34.3% of parents taking this approach.

Table 1. Distribution of parental styles among the study respondents.

Dominant parental style	Frequency	Percent
Authoritarian	46	34.3%
Perfectionist	24	17.9%
Authoritative	26	19.4%
Permissive	18	13.4%
Uninvolved	20	14.9%
Total	134	100.0%

These results will be particularly useful in gaining a deeper understanding of the relationship between different parenting styles and parental self-efficacy and providing insight into the distribution of parenting styles in our study group.

Cronbach's alpha was calculated for the scales assessing self-efficacy and parenting styles to ensure the reliability of the measures used in this study. The results demonstrated excellent reliability for the self-efficacy scale ($\alpha = 0.87$), indicating strong internal consistency. The authoritarian ($\alpha = 0.75$), authoritative ($\alpha = 0.78$), and permissive ($\alpha = 0.76$) parenting style scales showed good reliability, while the perfectionist ($\alpha = 0.72$) and uninvolved ($\alpha = 0.71$) parenting style scales exhibited acceptable reliability. These results confirm that the items within each scale are sufficiently consistent for further analysis.

Table 2. Cronbach's Alpha for Internal Consistency Reliability

Variable	Cronbach's Alpha	Interpretation
Self-Efficacy (Q1-Q11)	0.87	Excellent reliability ($\alpha > 0.80$)
Authoritarian Parenting	0.75	Good reliability ($0.70 < \alpha < 0.80$)
Authoritative Parenting	0.78	Good reliability ($0.70 < \alpha < 0.80$)
Perfectionist Parenting	0.72	Acceptable reliability ($0.60 < \alpha < 0.70$)
Permissive Parenting	0.76	Good reliability ($0.70 < \alpha < 0.80$)
Uninvolved Parenting	0.71	Acceptable reliability ($0.60 < \alpha < 0.70$)

After testing the normality of the data, we examined the existence of correlations between parenting styles and self-efficacy using Spearman's correlation. The analysis reveals correlations between the two parameters for both mothers and fathers. For fathers, there was a moderate statistically significant negative correlation between authoritarian parenting style and parental self-efficacy ($r = -0.581$, $p < 0.001$), indicating that higher levels of authoritarian parenting were associated with lower parental self-efficacy. A very weak statistically significant positive correlation was found between authoritative parenting style and self-efficacy ($r = 0.294$, $p = 0.021$). Other parenting styles, such as permissive ($r = 0.182$, $p = 0.159$), uninvolved ($r = 0.072$, $p = 0.583$), and perfectionist ($r = 0.025$, $p = 0.850$), did not show statistically significant correlations with self-efficacy among fathers ($p > 0.05$). For mothers, a similar moderate statistically significant negative correlation was observed between authoritarian parenting and parental self-efficacy ($r = -0.519$, $p < 0.001$), again suggesting that authoritarian approaches were linked to lower self-efficacy. In contrast, authoritative parenting had a moderate statistically significant positive correlation with self-efficacy ($r = 0.525$, $p < 0.001$), which implies that mothers who employed authoritative parenting felt more confident in their parenting abilities. Additionally, a very weak statistically significant negative correlation was found between uninvolved parenting and self-efficacy ($r = -0.260$, $p = 0.027$), indicating that more uninvolved mothers had lower levels of self-efficacy. Other parenting styles, such as perfectionist ($r = 0.227$, $p = 0.054$) and permissive ($r = 0.056$, $p = 0.636$), did not yield statistically significant results for mothers ($p > 0.05$). Overall, the findings demonstrate that parenting style correlates with parental self-efficacy for both fathers and mothers, with authoritarian and authoritative styles showing the most consistent and significant effects across both genders.

We also examined the existence of correlations between parenting styles and self-efficacy according to the parent's level of education. The results reveal statistically significant differences in the relationship between parenting styles and parental self-efficacy for parents with pre-university education versus those with university studies. For parents with pre-university education, there was a moderate statistically significant negative correlation between authoritarian parenting and parental self-efficacy ($r = -0.530$, $p < 0.001$), suggesting that higher authoritarian parenting was associated with lower self-efficacy. A weak statistically significant positive correlation

was found between authoritative parenting and self-efficacy ($r = 0.398$, $p = 0.001$), indicating that authoritative parenting was linked to higher self-efficacy. Other parenting styles, such as perfectionist ($r = 0.017$, $p = 0.890$), permissive ($r = 0.112$, $p = 0.352$), and uninvolved ($r = 0.000$, $p = 1.000$), did not show significant correlations with self-efficacy for this group of parents, ($p > 0.05$). For parents with university studies, a similar moderate statistically significant negative correlation was found between authoritarian parenting and parental self-efficacy ($r = -0.601$, $p < 0.001$), suggesting that authoritarian parenting was associated with lower self-efficacy, as in the pre-university education group. However, for this group, a weak statistically significant positive correlation was observed between perfectionist parenting and self-efficacy ($r = 0.307$, $p = 0.014$), indicating that parents with higher levels of perfectionist parenting showed greater self-efficacy than the others. Authoritative parenting also had a weak statistically significant positive correlation with self-efficacy ($r = 0.428$, $p < 0.001$), further reinforcing the positive impact of authoritative parenting on self-efficacy. Additionally, a very weak statistically significant negative correlation was observed between uninvolved parenting and self-efficacy ($r = -0.282$, $p = 0.025$), suggesting that uninvolved parenting was associated with lower self-efficacy for parents with university studies. Permissive parenting ($r = 0.108$, $p = 0.401$) did not show a statistically significant correlation with self-efficacy for this group ($p > 0.05$). The results indicate that the relationship between parenting styles and parental self-efficacy differs based on the parent's education level. Authoritarian and authoritative parenting consistently correlated significantly with self-efficacy across both educational groups. Additionally, the university-educated group exhibited significant correlations with perfectionist and uninvolved parenting styles, suggesting that educational background may influence the strength and nature of these associations.

To understand how different approaches to parenting influence parents' confidence in their ability to manage and support their children's development effectively, we tested parenting styles as predictors of self-efficacy. Identifying predictive relationships helps clarify which parenting behaviors are most beneficial or detrimental to self-efficacy, providing insights for targeted interventions and promoting more adaptive parenting practices. Our analysis showed a complex negative relationship between authoritarian parenting and parental self-efficacy. The nonlinear model explains a significant proportion of the variance in parental self-efficacy, with an R-squared value of 0.327, indicating a moderate but significant impact of authoritarian parenting on self-efficacy. The ANOVA results confirm that the model is statistically significant ($F = 63.995$, $p < 0.001$), suggesting that the model fits the data well and that authoritarian parenting style is a reliable predictor of parental self-efficacy. The unstandardized coefficient for authoritarian parenting (-0.832) suggests that a one-unit increase in authoritarian parenting leads to a 0.832-point decrease in self-efficacy. The standardized beta coefficient (-0.571) also highlights a moderate negative correlation between these variables, suggesting a moderate negative association with a more intricate and nonlinear dynamic between authoritarian parenting and self-efficacy. The t-value (-8.000 , $p < 0.001$) further emphasizes the strength and significance of this negative relationship, highlighting the detrimental impact of authoritarian parenting on parental self-efficacy.

4. Discussion

Our study sought to explore the relationship between parenting styles and parental self-efficacy in families of children with neurologic disorders. Our findings provide insights into how different parenting approaches may influence parents' perceived ability to manage the specific challenges of raising children with neurologic diseases.

First, the study found that authoritarian parenting was negatively correlated with parental self-efficacy. This negative relationship was consistent across both fathers and mothers, suggesting that authoritarian parenting, characterized by high demands and low responsiveness, may undermine parents' confidence in handling parenting challenges. The significant negative correlation with self-efficacy suggests that parents who adopt an authoritarian approach may feel less capable of managing the complexities of raising a neuro-disabled child. This finding aligns with previous research indicating that overly strict or controlling parenting may lead to feelings of inadequacy or frustration among parents [59]. In contrast, authoritative parenting, which combines high expectations with warmth and support, was positively correlated with self-efficacy for both fathers and mothers. These findings are consistent with existing literature that suggests authoritative parenting promotes positive parenting outcomes by fostering a supportive and nurturing environment that enhances parents' confidence in their abilities [60].

The study also explored how parental gender influences the relationship between parenting style and self-efficacy. The data showed that both mothers and fathers exhibited similar self-efficacy scores, with both genders showing significant associations with authoritarian and authoritative parenting styles. However, mothers exhibited a stronger correlation with the authoritative style, while fathers demonstrated a stronger correlation with authoritarian parenting. This finding suggests that mothers may derive more confidence from a balanced approach to parenting, while the more controlling and directive aspects of parenting may more impact fathers. These findings reflect gendered parenting roles, where mothers often take on more nurturing roles, making them more likely to benefit from a parenting style that values warmth and responsiveness.

In terms of education level, both parents with pre-university education and those with university degrees showed significant correlations between parenting styles and self-efficacy. However, the strength and direction of these correlations varied. For parents with lower levels of education, authoritarian parenting was moderately negative correlated with self-efficacy, while authoritative parenting was moderately positive correlated. Interestingly, the correlations were more substantial for parents with university-level education, particularly with the authoritative and perfectionist parenting styles. This result suggests that parents with higher education may have a wider range of strategies at their disposal and may feel more empowered or competent in facing the challenges of raising a child with neuro disabilities. The positive correlation between perfectionist parenting and self-efficacy in this group might indicate that parents with higher educational level are more likely to impose high standards on themselves, which can sometimes enhance their feelings of efficacy but may also lead to stress if those standards are unrealistic.

One of the most significant findings from the nonlinear regression analysis was that authoritarian parenting significantly predicted lower levels of parental self-efficacy. The regression model, which explained about 32.7% of the variance in self-efficacy, demonstrated that authoritarian parenting style was a strong negative predictor of parental confidence. The remaining 67.3% of the variation is contributed by other factors, which means that self-efficacy is influenced by various other elements that are not captured by the model, such as parental mental health, socioeconomic status, social support, parental stress, child characteristics, and education levels. This result is particularly important for interventions aiming to support families of children with neurologic disorders. Given the negative impact of authoritarian parenting on self-efficacy, it may be beneficial for healthcare providers and family support programs to focus on helping parents adopt more authoritative or balanced parenting styles, emphasizing warmth and structure.

Limitations and Future Research Directions

The study has several limitations that should be acknowledged. Firstly, it relies on self-report measures, which may introduce bias, as parents might overestimate or underestimate their self-efficacy levels or parenting styles. This subjective reporting can influence the accuracy of the findings. Secondly, the sample was selected using a convenience sampling method, based on the availability of parents to participate. Although this approach facilitated data collection, it may have led to a selection bias, as participants may differ significantly from those who chose not to participate. Moreover, subjects from a single neurorehabilitation center participated in the study, limiting the generalizability of the findings to other populations. Although the center receives patients from across the country, the results may not fully represent parents from diverse geographical regions, socio-economic backgrounds, or cultural contexts.

To address the limitations of the current study, future research should include larger and more diverse samples, encompassing parents from various backgrounds, to understand better the role of contextual and cultural factors in shaping the relationship between parenting styles and self-efficacy.

Future research could involve intercultural comparisons to understand how parenting styles and self-efficacy are perceived and applied in different cultural contexts. Identifying cultural differences in parenting practices and self-efficacy could help create more globally relevant interventions.

Future studies could include parents from different socioeconomic statuses, education levels, and geographic regions to improve the generalizability of the findings.

5. Conclusions

The findings of our study underscore the importance of parenting styles in shaping parental self-efficacy in families of children with neurologic disorders. Understanding the effectiveness of different parenting styles in children with neurological disorders has practical applications in designing evidence-based interventions, improving parental self-efficacy, and optimizing caregiving strategies to better support the child's developmental and rehabilitation needs. The negative impact of authoritarian parenting on self-efficacy suggests that interventions should aim to support parents in adopting more balanced and supportive parenting styles to improve the well-being of both parents and children, contributing to a more positive outcome in neurorehabilitation and overall family dynamics. By fostering a nurturing and responsive environment, interventions can enhance parental confidence, reduce stress, and optimize the long-term developmental outcomes for children with neurologic disorders. Future research should continue to explore these relationships across different cultural and demographic contexts, as well as investigate additional factors that may influence parenting efficacy in families of children with neurological disabilities.

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References

1. Kretchmar-Hendricks, M. Parenting Available online: <https://www.britannica.com/topic/parenting> (accessed on 1 March 2025).
2. Apostol, O.A.; Morcov, M.V.; Sporea, C.; Morcov, M.; Morcov, C.G.; Cioca, I.E. Findings Regarding the Relationship between Parenting Styles and Sociodemographic Parameters in Families Having Children with Cerebral Palsy. *Balneo PRM Res. J.* 2023, 14, 1–17, doi:10.12680/balneo.2023.619.
3. Gheorghiu, D.; Stărică, C.E. The Evolution of the Concept of Self-Efficacy and the Factors with Which It Relates. *Anu. Univ. Petre Andrei din Iasi - Fasc. Asistenta Soc. Sociol. Psihol.* 2020, 25, 50–70, doi:10.18662/upasw/25/35.
4. Carey, M.P. Teaching Tip Sheet: Self-Efficacy Available online: <https://www.apa.org/pi/aids/resources/education/self-efficacy> (accessed on 5 November 2024).
5. Zheng, Y.; Mancino, J.; Burke, L.E.; Glanz, K. Current Theoretical Bases for Nutrition Intervention and Their Uses. In *Nutrition in the Prevention and Treatment of Disease*; Elsevier, 2017; pp. 185–201.
6. Bloomfield, L.; Kendall, S. Parenting Self-Efficacy, Parenting Stress and Child Behaviour before and after a Parenting Programme. *Prim. Health Care Res. Dev.* 2012, 13, 364–372, doi:10.1017/S1463423612000060.
7. Beresford, B.; Rabiee, P.; Sloper, P. Outcomes for Parents with Disabled Children. *Res. Find. from Soc. policy Res. unit* 2007, 03, 1–4.
8. Morcov, M. V.; Pădure, L.; Morcov, C.G.; Mirea, A.; Ghiță, M.; Onose, G. Comparative Analysis of the Quality of Life in Families with Children or Adolescents Having Congenital versus Acquired Neuropathology. *Children* 2022, 9, 714, doi:10.3390/children9050714.
9. Green, S.E.; Darling, R.B.; Wilbers, L. Struggles and Joys: A Review of Research on the Social Experience of Parenting Disabled Children. *Sociol. Look. Disabil. What did we know when did we know it* 2016, 261–285.
10. Whiting, M.; Nash, A.S.; Kendall, S.; Roberts, S.A. Enhancing Resilience and Self-Efficacy in the Parents of Children with Disabilities and Complex Health Needs. *Prim. Health Care Res. Dev.* 2019, 20, e33, doi:10.1017/S1463423619000112.
11. Kong, C.; Yasmin, F. Impact of Parenting Style on Early Childhood Learning: Mediating Role of Parental Self-Efficacy. *Front. Psychol.* 2022, 13, 1–11, doi:10.3389/fpsyg.2022.928629.
12. Harpaz, G.; Grinshtain, Y.; Yaffe, Y. Parental Self-Efficacy Predicted by Parents' Subjective Well-Being and Their Parenting Styles with Possible Role of Help-Seeking Orientation from Teachers. *J. Psychol.* 2021, 155, 571–587, doi:10.1080/00223980.2021.1926896.
13. Coleman, P.K.; Karraker, K.H. Self-Efficacy and Parenting Quality: Findings and Future Applications. *Dev. Rev.* 1998, 18, 47–85, doi:10.1006/drev.1997.0448.
14. Yousaf, S. Parenting Style and Self-Efficacy among Adolescents. *Res. Humanit. Soc. Sci.* 2015, 5, 25–29.
15. Tozandehjani, H.; Tavakolizadeh, J.; Lagzian, Z. The Effect of Parenting Styles on Self-Efficacy and Mental Health of Students. *QHMS* 2011, 17, 56–64.
16. Cioca, I.E.; Trutescu, C.; Diaconescu, L.; Popa-Velea, O. Attachment and Coping Style at Parents of Children with Soma-toform Complaints. In *Proceedings of the Psychotherapy and Psychosomatics*; KARGER ALLSCHWILERSTRASSE 10, CH-4009 BASEL, SWITZERLAND, 2015; Vol. 84, pp. 16–17.
17. Darling, N.; Steinberg, L. Parenting Style as Context: An Integrative Model. *Psychol. Bull.* 1993, 113, 487–496, doi:10.1037/0033-2909.113.3.487.
18. Azria-Evans, M. Parenting Styles. *Encycl. Hum. Ecol.* Vol. 1,2 2003, 1–2, 555–558, doi:10.4324/9780203798553-12.
19. Christiano, D. Which Parenting Type Is Right for You? Available online: <https://www.healthline.com/health/parenting/types-of-parenting> (accessed on 5 November 2024).
20. Kuppens, S.; Ceulemans, E. Parenting Styles: A Closer Look at a Well-Known Concept. *J. Child Fam. Stud.* 2019, 28, 168–181, doi:10.1007/s10826-018-1242-x.
21. Singh, S. Parenting Style in Relation to Children's Mental Health and Self-Esteem: A Review of Literature. *Indian J. Heal. Wellbeing* 2017, 8.
22. Konopka, A.; Rek-Owodziń, K.; Pełka-Wysiecka, J.; Samochowiec, J. Parenting Style in Family and the Risk of Psychopathology. *Postepy Hig. Med. Dosw.* 2018, 72, 924–931, doi:10.5604/01.3001.0012.7026.
23. Richards, B. Associations Between Parenting Styles & Parental Self-Efficacy, Western Kentucky University, 2023.
24. Tiwari, A.P. Authoritative Parenting: The Best Style in Children's Learning. *Am. J. Educ. Technol.* 2022, 1, 18–21, doi:10.54536/ajet.v1i3.687.

25. Baumrind, D. Authoritarian vs. Authoritative Parental Control. *Adolescence* 1968, 3, 255.
26. Woo, V.-W.; Yeo, K.J. Parenting Styles and Procrastination Behaviors. *Int. J. Eng. Adv. Technol.* 2019, 8, 1007–1013, doi:10.35940/ijeat.F1112.0986S319.
27. Bayless, K. What Is Helicopter Parenting, And How Does It Impact Kids? Available online: <https://www.parents.com/parenting/better-parenting/what-is-helicopter-parenting/> (accessed on 15 September 2024).
28. Shaki, O.; Gupta, G.K.; Yadav, P.; Faisal, F.A. Helicopter Parenting, from Good Intentions to Poor Outcomes. What Parents Needs to Know? *J. Fam. Med. Prim. Care* 2022, 11, 4753–4757, doi:10.4103/jfmprc.jfmprc_2474_21.
29. Taylor, M. Here Are 7 Common Parenting Styles: Which One Is Right for You? Available online: <https://www.whattoexpect.com/family/parenting-styles/#attachment>.
30. Cioca, I.E.; Morcov, M.V.; Sporea, C.; Apostol, O.A.; Pellegrini, A.; Bordea, E.-N. Exploring the Links Between Coping Strategies, Emotional Intelligence, and Age in Adolescents with Neuromotor Disabilities. *Children* 2024, 11, 1466, doi:10.3390/children11121466.
31. Popa-Velea, O.; Trutescu, C.; Cioca, I.; Diaconescu, L. Attachment Style and Perceived Social Support as Predictors of Somatoform Disorders in Adolescents. *J. Psychosom. Res.* 2015, 78, 619, doi:10.1016/j.jpsychores.2015.03.153.
32. Lascala, M. Eight Common Parenting Styles and Their Differences, Explained Available online: <https://www.goodhousekeeping.com/life/parenting/a26987389/types-of-parenting-styles/#free-range-parenting> (accessed on 15 December 2024).
33. Munteanu (Trușescu), C.I. Analiza Parametrilor Psiho-Socio-Educationali in Familiile Copiilor Cu ADHD, Universitatea de Medicina si Farmacie “Carol Davila,” 2018.
34. Whiting, M.; Nash, A.S.; Kendall, S.; Roberts, S.A. Enhancing Resilience and Self-Efficacy in the Parents of Children with Disabilities and Complex Health Needs. *Prim. Health Care Res. Dev.* 2019, 20, e33, doi:10.1017/S1463423619000112.
35. Singer, G.H.S. Meta-Analysis of Comparative Studies of Depression in Mothers of Children with and without Developmental Disabilities. *Am. J. Ment. Retard.* 2006, 111, 155–169, doi:10.1352/0895-8017(2006)111[155:MOCSOD]2.0.CO;2.
36. Tănase, I.; Stoica, S.-I.; Prada, G.-I. Role of Psychological Intervention on the Quality of Life of the Patient with Spinal Cord Injury Undergoing Magnetic Resonance Imaging Examination. *Balneo PRM Res. J.* 2024, 15, 735–735, doi:10.12680/balneo.2024.735.
37. Sporea, C.; Florescu, M.S.; Orzan, O.A.; Cristescu, I. Improving the Perspectives on Quality of Life for Adolescents with Cerebral Palsy by Medical Textile. *Ind. Textila* 2020, 71, 81–90, doi:10.35530/IT.071.01.1779.
38. Savari, K.; Naseri, M.; Savari, Y. Evaluating the Role of Perceived Stress, Social Support, and Resilience in Predicting the Quality of Life among the Parents of Disabled Children. *Int. J. Disabil. Dev. Educ.* 2023, 70, 644–658, doi:10.1080/1034912X.2021.1901862.
39. Morcov, M. V.; Padure, L.; Morcov, C.G.; Onose, G. Further Detailed Objectification within Comparative Analysis of Quality of Life - Based on Some Sociodemographic Characteristics/Parameters and Related Statistical Analysis - between Mothers of Children with Congenital versus Acquired Neuropathology. *Balneo PRM Res. J.* 2022, 13, 517, doi:10.12680/balneo.2022.517.
40. Padure, L.; Morcov, V.; Preduca, L. The Life Quality and Coping Mechanisms of Families with Children Diagnosed with Cerebral Palsy (Cp). 9TH Int. Congr. Cereb. PALSY Ment. Phys. Act. ARE Imp. 2013, 25-28 WE-Conference Proceedings Citation Index.
41. Sporea, C.; Morcov, M.V.; Morcov, M.; Mirea, A. Effectiveness of Passive Movement Training in Patients with Cerebral Palsy: A Comparative Analysis of Robot-Assisted Therapy and Electrical Stimulation in Hand Rehabilitation. *Balneo PRM Res. J.* 2023, 14, 623, doi:10.12680/balneo.2023.623.
42. Badina, M.; Sporea, C.; Bejan, G.C.; Mirea, A.; Ion, D.A. Impact of Nusinersen on Neurofilament, Creatinine Levels, and Motor Function in Pediatric Spinal Muscular Atrophy Rehabilitation: A Biomarker Analysis. *Balneo PRM Res. J.* 2024, 15, 681–681, doi:10.12680/balneo.2024.681.
43. Staunton, E.; Kehoe, C.; Sharkey, L. Families under Pressure: Stress and Quality of Life in Parents of Children with an Intellectual Disability. *Ir. J. Psychol. Med.* 2023, 40, 192–199, doi:10.1017/ipm.2020.4.
44. Howe, K.R.; Welner, K.G. School Choice and the Pressure to Perform: Déjà Vu for Children with Disabilities? *Remedial Spec. Educ.* 2002, 23, 212–221, doi:10.1177/07419325020230040401.
45. Kuhlthau, K.; Hill, K.S.; Yucel, R.; Perrin, J.M. Financial Burden for Families of Children with Special Health Care Needs. *Matern. Child Health J.* 2005, 9, 207–218, doi:10.1007/s10995-005-4870-x.
46. Chang, H.-Y.; Chiou, C.-J.; Chen, N.-S. Impact of Mental Health and Caregiver Burden on Family Caregivers' Physical Health. *Arch. Gerontol. Geriatr.* 2010, 50, 267–271, doi:10.1016/j.archger.2009.04.006.
47. Sun, J.; Wang, L.; Wang, W.; Wang, J.; Wang, Y.; Gao, Y.; Yuan, L. The Influential Factors of Anxiety among Caregivers of Children with CL/P: A Path Analysis Based on Diathesis-Stress Theoretical Model. *BMC Public Health* 2024, 24, 3172, doi:10.1186/s12889-024-20603-9.
48. Lewandowska, A.; Lewandowski, T.; Bartosiewicz, A.; Papp, K.; Zrubcová, D.; Šupínová, M.; Strykowska-Góra, A.; Laszkowska, B.; Joniec, G.; Apay, S.E. Prevalence of Anxiety and Depression among Parents of Children with Cancer – A Preliminary Study. *Children* 2024, 11, 1227, doi:10.3390/children11101227.

49. Palamaro Munsell, E.; Kilmer, R.P.; Cook, J.R.; Reeve, C.L. The Effects of Caregiver Social Connections on Caregiver, Child, and Family Well - being. *Am. J. Orthopsychiatry* 2012, 82, 137 – 145, doi:10.1111/j.1939-0025.2011.01129.x.
50. Dzeidee Schaff, A.R.; Zulkefly, N.S.; Ismail, S.I.F.; Mohd Nazan, A.I.N. Linking Parental Self-Efficacy, Parenting Behaviour and Mental Health of Malaysian Early Adolescents. *Curr. Psychol.* 2024, 43, 20754–20768, doi:10.1007/s12144-024-05878-w.
51. Agbaria, Q.; Mahamid, F. The Association between Parenting Styles, Maternal Self-Efficacy, and Social and Emotional Adjustment among Arab Preschool Children. *Psicol. Reflexão e Crítica* 2023, 36, 10, doi:10.1186/s41155-023-00252-4.
52. Kang, B.; Li, Y.; Zhao, X.; Cui, X.; Qin, X.; Fang, S.; Chen, J.; Liu, X. Negative Parenting Style and Depression in Adolescents: A Moderated Mediation of Self-Esteem and Perceived Social Support. *J. Affect. Disord.* 2024, 345, 149–156, doi:10.1016/j.jad.2023.10.132.
53. Hohlfeld, A.S.J.; Harty, M.; Engel, M.E. Parents of Children with Disabilities: A Systematic Review of Parenting Interventions and Self-Efficacy. *African J. Disabil.* 2018, 7, doi:10.4102/ajod.v7i0.437.
54. Patil, S.; Vaishnav, R. Literature Review on Parenting Styles and Development of Children with Special Needs. *Int. J. Indian Psychol.* 2021, 9, 1294–1303, doi:10.25215/0903.122.
55. Kuldass, S.; Sargioti, A.; Norman, J.O.; Staksrud, E. A Transactional Framework of Parenting for Children's Internet Use: A Narrative Review of Parental Self-Efficacy, Mediation, and Awareness of Online Risks. *Int. J. Commun.* 2023, 17, 20.
56. Frosch, C.A.; Schoppe-Sullivan, S.J.; O'Banion, D.D. Parenting and Child Development: A Relational Health Perspective. *Am. J. Lifestyle Med.* 2021, 15, 45–59, doi:10.1177/1559827619849028.
57. Woolgar, M. Brief Parental Self Efficacy Scale (BPSES) Available online: <https://www.corc.uk.net/outcome-experience-measures/brief-parental-self-efficacy-scale-bpses/> (accessed on 29 November 2024).
58. Pawel, J.; Dillon, P. Chestionar Privind Stilurile Parentale Available online: <https://atuconsulting.ro/wp-content/uploads/Chestionar-stiluri-parentale.pdf> (accessed on 5 January 2025).
59. Burke, M.U. Familial Influence on Self-Efficacy: Exploring the Relationship between Perceived Parenting Style, Current Social Support, and Self-Efficacy Beliefs in a Sample of Nontraditional College Students, Capella University, 2006.
60. Mattanah, J.F. Authoritative Parenting and the Encouragement of Children's Autonomy. In *The family context of parenting in children's adaptation to elementary school*; Routledge, 2005; pp. 137–156 ISBN 9781410612885.