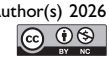
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Special Issue

Chinese Journal of Sociology

"A mother has to be strong!": Narrating "strong motherhood" in China's online autism community

Chinese Journal of Sociology
1–29
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Xiaorong Gu

Abstract

Children with autism spectrum disorder (ASD) are under-diagnosed, underprivileged, and under-supported within China's child population of 298 million. They live in a context where a comprehensive national policy tailored to their needs is yet to materialize, access to specialized services is limited, and social stigma is entrenched. As such, families become front-line support and the de facto safety net for these vulnerable children. In this study, leveraging publicly available "we-media" data comprising family stories by 88 mothers of autistic children, I conduct a two-layered narrative analysis that seeks to understand their experiences raising autistic children and their narrative strategies to construct their self-identities and their children's identities in society. The thematic analysis of mothers' experiences reveals a pattern of "expansive mothering" among mothers of children with ASD. This form of mothering encompasses multiple, overlapping roles: primary caregiver, (semi-)professional ASD therapist, education agent or facilitator, and social justice advocate for their children. Also emerging from the data is a narrative of "strong motherhood", which draws from the cultural script of the "good mother" (*liangmu*) in Confucian ideals and the class discourse of "eating bitterness" that valorize mothers' moral strength, child-centric care practices and educational labor, and maternal sacrifices. This study documents the coexisting resilience and vulnerabilities of Chinese families in caring for special needs children, especially the gendered parental care and labor by "strong mothers", and opens theoretical spaces to address the linkages between gender, care, and social justice in special needs settings.

School of Business, Arts, Social Sciences and Technology, University of Suffolk, UK

Corresponding author:
Xiaorong Gu, School of Business, Arts, Social Sciences and Technology, University of Suffolk, Waterfront Building, 19 Neptune Quay, Ipswich, IP4 1QJ, UK.
Email: x.gu@uos.ac.uk

Keywords
autism spectrum disorder, children, China, education, development, qualitative methods, sex and gender

Introduction

An invisible care crisis has been ravaging millions of families of children with autism spectrum disorder (ASD)[1] in China. China's first diagnosed ASD case was in the 1980s (Tao, 1987); since then, the country's estimated prevalence rate has been lower than the global average due to reasons such as limited awareness, lack of standardized screening, and social stigma (Pang et al., 2018; Sun et al., 2013; Wang et al., 2018). It was not until 2019 that a collaborative team of scholars from the United Kingdom and China reported a prevalence rate among the Chinese population comparable to Western countries, at 108 per 10,000 (Sun et al., 2019). With this new understanding, one can estimate that China's child population with ASD is close to 3 million, whose needs for policy and scholarly attention are urgent.

A small body of literature paints a bleak picture of the policy and social context for autistic children in China. First, with autism only officially recognized as a disability in China's Disability Law in 2006 (Gu, 2007), there is no comprehensive national policy addressing the specific needs of these children in areas such as healthcare, disability assistance, and educational access, except for the "Trial Policy for Screening and Intervention Services for Autism in Children Aged 0–6 Years" issued by the General Office of the National Health Commission in 2022 (General Office of the National Health Commission of the People's Republic of China, 2022). However, this trial policy has several major shortcomings that limit its ability to provide meaningful support to families of children with autism. First, it exclusively targets children aged 6 years and younger, leaving the needs of those older than six unaddressed. Second, in the absence of a clear national financing framework, the burden of funding screening and behavioral intervention services falls on county-level governments, which is likely to exacerbate regional inequalities.

Besides, without a national initiative comparable to the Special Educational Needs and Disability Code of Practice in the United Kingdom (Gov.uk, 2024)—which offers personalized support to each individual with disabilities aged from 0 to 25, children with ASD in China are not guaranteed equal rights to basic services such as education. They often struggle to find a place within the public education system, which primarily caters to typically developing children, or special education schools, which target children with physical disabilities such as hearing and visual impairments and mild cognitive disabilities (Clark et al., 2019; Huang and Wheeler, 2007).

Second, there is a notable scarcity of targeted services and support for autistic children, with an acute shortage of well-trained professionals and experts in diagnosis, intervention, and support (Sun et al., 2013). Similarly, there is a pressing need for special teachers. For instance, a case study involving two principals overseeing educational institutions in Beijing identified a lack of teacher expertise in ASD as a common problem in public and private institutions (Zhang and Spencer, 2015). A survey of 471 preschool teachers exposed significant

knowledge gaps in China's teacher training programs regarding ASD and special educational needs in general (Liu et al., 2016). These gaps in knowledge and services have created a unique market dominated by a small number of private providers (An, 2024; McCabe, 2013). Many of these organizations, without adequate expertise and staffing, capitalize on parents' desperate "ethics of trying" (An, 2024) by overpromising treatment effects, which often end up plunging families into deeper financial precarity and moral tragedies.

Last, social stigma associated with ASD remains deeply rooted. Traditional Chinese culture associates mental health disorders with shame (Zhou et al., 2018), compounded by knowledge deficits among the general public about ASD-related issues. This results in greater discrimination and stigma in China compared with Western societies. As Yu et al. (2020) revealed, while 14% of a comparable sample in the United States expressed endorsement of ASD-related stigma, this figure was 38% in the Chinese sample.

In this context of limited availability of specialized services and social and public support systems, families constitute the primary—and often the sole—source of support for children with ASD, with mothers often taking the lion's share not only of daily management of the child's needs but also of navigating complex emotional, social, and institutional challenges. There remains a substantial gap in empirical research capturing the lived experiences of these families, particularly from mothers' perspectives. Theoretically, while the existing studies rely on isolated feminist or disability frameworks, the field lacks integrative approaches that examine how ableism, patriarchal structures and cultural beliefs, and neoliberal state policies and discourses jointly shape maternal experiences and subjectivities. Methodologically, the existing literature often relies heavily on single-site ethnographies, revealing little about variations based on socioeconomic status (SES) or regional location.

Addressing this critical gap, this study leverages publicly available narrative data of family stories by 88 mothers of autistic children and performs a two-layered narrative analysis that seeks to understand their childrearing experiences and their narrative strategies to construct their self-identities and their children's identities in society. The thematic analysis reveals a pattern of "expansive mothering" among mothers of children with ASD, which encompasses multiple, overlapping roles: primary caregiver, (semi-)professional ASD therapist, education agent or facilitator, and sometimes also economic providers. The data also document a "strong motherhood" narrative, rooted in Confucian ideals and the ethos of "eating bitterness", which provides ASD mothers the psychological resilience to navigate institutional gatekeepers and structural challenges. However, I argue that this romanticization of maternal sacrifice individualizes the care crisis, ultimately obscuring structural inequalities, neoliberal state withdrawal, and systemic and gendered experiences of invisible suffering. While urban, middle-class mothers in the sample possess the capital and resources to strategically negotiate these pressures, for marginalized mothers, this narrative could serve as a coercive ideological tool that traps them in uncompensated labor. These findings offer a critical, grounded understanding of Chinese autism caregiving, highlighting the need for equitable support systems.

Literature review

Research in countries with welfare systems has demonstrated that living with ASD can place significant strains and challenges on families across domains, including relational

dynamics, education, social inclusion, and the subjective experience of stigma (Preece and Lištiaková, 2021; Wolf et al., 1989). For families in China, lacking public and social support poses greater barriers to care for their autistic children, as several recent studies have confirmed. It has been found that parents' knowledge and attitudes about ASD vary by SES, with more informed, higher-SES parents using more positive coping strategies (Wang et al., 2022). ASD is strongly associated with parents' employment and financial burdens, more so than other disabilities (Ou et al., 2015). It is also correlated with adverse psychosocial experiences among caregivers, including lower self-esteem, reduced life satisfaction, elevated parenting stress, affiliate stigma, and depressive symptoms (Lu et al., 2015; McCabe, 2008a; Zhou et al., 2018).

More recently, two ethnographic studies (An, 2024; Lin, 2019) offer critical perspectives into ethical labor, class disparities, and cultural expectations that shape parental responses to ASD. Lin (2019) examines how state policies, market-driven therapies, and Confucian ideals jointly produce the figure of the "parent-therapist"—a morally valorized and intensively involved mother. This motherhood ideal, however, marginalizes those from disadvantaged backgrounds, reinforcing social and economic inequalities. An (2024) shows how hope, duty, and sacrifice motivate parents' relentless pursuit of treatment, often at great personal costs. Therapy-seeking thus becomes a moral project shaped by the narratives of responsible motherhood and the promise of improvement. Together, both studies highlight how autism parenting in China is a morally charged endeavor, deeply entwined with gendered expectations, neoliberal pressures, and systemic inequities.

This literature is valuable but inadequate to generate a holistic and in-depth understanding of the complexities surrounding raising children with ASD in China. While many studies adopt quantitative methods from a public health perspective to paint the broad strokes of the stresses and disadvantages faced by families of children with ASD (e.g. Lu et al., 2015; Ou et al., 2015; Wang et al., 2022; Zhou et al., 2018), they reveal a limited understanding of the lived experiences of these families as they navigate the challenges of raising autistic children on a daily basis. The few qualitative studies only gathered data in one or two locations (e.g. An, 2024; Lin, 2019; McCabe, 2008a, 2008b), without accounting for the broader geographic and socioeconomic diversity in China. Theoretically, although gender plays a crucial role in the division of labor and care arrangements within Chinese families (Short et al., 2002), which also figure prominently in childcare-related public policy and discourses (Gu, 2022b), the literature has insufficiently unpacked the gendered experiences and perspectives of ASD caregiving. To address the above-identified gaps, I conduct a qualitative study that leverages publicly accessible "we-media"[2] (or *zi meiti*) data to explore how mothers experience and navigate raising autistic children in contemporary China.

Gender, care, and motherhood in post-reform China

Below I introduce the evolution of gender norms and motherhood ideologies and practices in China since the twentieth century to set the theoretical and cultural background for the analysis to follow.

Gender norms in historical context

Throughout China's dynastic history, the de facto official ideology of Confucianism endorsed a family model that was patriarchal, patrilineal, and patrilocal, which offered "no prescriptions for women's behavior in the world beyond the household" (Judd, 1994: 166). The familial division of labor followed strictly gender segregated roles, described as "men rule outside, women rule inside" (*nan zhu wai, nv zhu nei*) (Jacka, 1997: 22). Ideally, a woman served the patrilocal household of her husband's family through giving birth to male descendants, doing housework, and taking care of children, elders, and male family members.

Following its establishment in 1949, the People's Republic of China, under the leadership of the Communist Party of China, initiated a series of campaigns to equalize gender relations and liberate women from "feudalist" yokes, in line with the Marxist ideology (Engels, 1884). The 1950 New Marriage Law, for example, stipulated for the first time that marriage formation should be formed based on mutual consent, monogamy, and equal rights for both parties (Diamant, 2000). In this era, a "progressive" family model was promoted: a nuclear family unit, comprising both spouses engaged in "socialist production" within communes and collectives, alongside their children, who were nurtured as future "socialist successors". In this scenario, however, women's dual burden in both production and reproduction was rendered invisible.

Since 1978, the government has begun to embrace the "socialist market economy", which refers to the "coexistence of the state apparatus and market mechanisms" (Fan, 1999). The unique transitional economy engenders contradictory messages about women's social roles. For one thing, the state ideology has shifted significantly from a pervasive political repertoire of class struggle to pragmatic depoliticization of ordinary life (Jacka, 1997: 40). Instead, a neoliberal discourse that emphasizes "individualism, professionalism, equal opportunities and the open market" (Pun, 2005: 11) sells a narrative of modernity and gender progress. For another, a gender discourse that embraces traditional femininity attempts to channel women back home, ushering in a new era of "separating spheres" (Ji et al., 2017; Qian and Li, 2020). Sun and Chen (2015) demonstrate how mainstream media increasingly frames women's issues around marriage and private life while downplaying gender discrimination, reflecting an alliance of patriarchal and neoliberal discourses masking structural inequalities.

Motherhood: Ideology and practice

Traditionally, being a "good mother" (*liangmu*) to male offspring to continue the family line elevated a woman's social status in the patriarchal family (Jiang, 2024). In the twenty-first century, the highly moralized ideal of "good motherhood" continues to be recognized socially, though the scope of mothering practices has broadened considerably. It now goes beyond the physical nurturing of young children to include a substantial focus on educational responsibilities, due to the high value placed on raising educationally "successful" children (Gu, 2021b). Emerging scholarship has portrayed diverse forms of "intensive mothering" (Hays, 1996) being practiced in urban China, for example, mothering as educational management

(Yang, 2018), "tiger mothering" (Lei, 2020), and "super-mothering" (Zhong and Guo, 2018). All depict mothering as an ongoing project preoccupied with meticulous plans, calculations, interventions, and management in order to foster, cultivate, and maintain children's educational competitiveness. The trend is intensified by reduced fertility rates. In urban areas, the stricter enforcement of the One-Child Policy (replaced only in 2015) drastically shrank family sizes, increasing pressure to invest in the education of the only child—son or daughter—as a measure of *good* motherhood (Fong, 2004). For rural families, mass out-migration, in the context of institutional barriers to their integration into cities like the *hukou* (household registration) system, makes intensive mothering an unattainable yet aspirational ideal. In these families, mothering—often practiced from afar—entails deep emotional labor rooted in notions of maternal sacrifice (Gu, 2022a).

Underlying these intensive mothering ideals and practices is a culture of eugenics upheld by both families and the state in its promotion of population "quality" (*suzhi*) (Greenhalgh, 2003). Here, the child that is the object of meticulous planning, care, and cultivation is imagined to be a "high-quality" and *abled* child with a "successful" future, which renders the experiences of raising special needs children invisible and marginalized in public and academic discourses.

Mothering disabled children in China

Mothering in the context of disability remains understudied in China, with only limited recent research drawing on feminist and critical disability perspectives that locate disability in social, cultural, and political structures rather than individual impairment (Oliver, 1990). Wu's (2020) ethnography highlights how disability stigma, patriarchal expectations, and limited institutional support jointly create a disabling social environment that strains mothers' marriages, curtails their career development, and attenuates their socioeconomic precarity. Despite these constraints, mothers perform extensive emotional labor to meet cultural ideals of "good motherhood". Huang et al. (2024) similarly document the life-altering impact of an autism diagnosis, which pushes mothers into intensive, often medically driven intervention regimes that require substantial financial, emotional, and temporal investment. The social–relational framing underscores how family dynamics—particularly fathers' withdrawal and grandparents' ambivalence—reinforce gendered caregiving. Liu and Cui (2024) deepen this by identifying how mothers negotiate role, emotional, and moral expectations embedded in Chinese constructions of "good motherhood". They show that mothers both internalize and resist expectations to be "super", "rational", and "selfless", developing strategies such as delegating care, seeking counseling, and reclaiming personal aspirations.

Emerging from these studies are a few common patterns. First, ASD mothering is profoundly shaped by medicalized, developmentalist, and ableist discourses that position mothers as the primary agents responsible for children's rehabilitation and development. Second, the privatization of care—due to inadequate public services—intensifies emotional and material burdens, often compelling career sacrifices and relocation on the part of mothers. Third, caregiving is deeply gendered: with fathers frequently disengaging, mothers are morally judged by their children's developmental outcomes, compounding their vulnerability.

Despite valuable insights, several research gaps in the literature remain. First, while studies draw on feminist, disability, or social–relational perspectives, the field lacks integrative frameworks that examine how ableism, patriarchal family structures, state policies, and neoliberal responsibility discourses jointly shape maternal experiences. The cultural construction of "good motherhood", particularly within Confucian family ethics and child-based worth, warrants deeper theorization. Second, the existing studies rely heavily on small, qualitative samples drawn from single sites, often in major cities, revealing little variation by SES, regional location, and so on, hence cautioning against overgeneralization. To bridge the research gaps, the current study conducts a narrative analysis of stories by 88 mothers of autistic children from diverse family circumstances to understand their mothering experiences as well as their construction of motherhood identities.

Narrative analysis as a methodological approach

A brief history of narrative inquiry

Since the mid-twentieth century, narrative analysis has emerged as a prominent theoretical perspective within human and social sciences due to its strengths in elucidating how individuals and groups construct meaning, identity, and social realities through storytelling. Rooted in diverse intellectual traditions (Chase, 2010: 209–213), ranging from the life history method pioneered by the Chicago School of Sociology to anthropological studies of (sub)cultural groups, feminist research, and linguistically informed analyses of oral narratives, narrative analysis posits that human experience is fundamentally storied and that narratives serve as epistemological and ontological structures through which actors interpret their social worlds (Bruner, 1991; McAdams, 1993; Somers, 1994).

A central tenet is that individuals' identities are socially constituted through relationally embedded stories. Somers (1994) contends that individuals formulate their sense of self not in isolation but through networks of narratives shaped by social and historical contexts. Identity is therefore contingent, shifting, and negotiated within cultural and institutional frameworks. Narratives operate as both personal resources and structural constraints, enabling and delimiting how actors define themselves and their social positions.

Compared with the dominant positivist paradigm, the advantages of narrative inquiry are multiple. First, it generates a holistic understanding of lived realities, integrating personal life stories, cultural discourses, and relational networks that positivist methods—such as surveys or experiments—frequently overlook in their pursuit of causal linearity and statistical abstraction (Bruner, 1991). Moreover, narrative inquiry's epistemological commitment to promoting individuals' self-written and self-narrated voices and experiences can subvert dominant hegemonies through dialogic and performative interpretations that reveal power asymmetries and foster reflexivity, thus empowering marginalized voices (Riessman, 2008).

Narrative analysis methods

Narrative analysis constitutes a versatile methodological approach, or "a family of methods for interpreting texts that have in common a storied form" (Riessman, 2008: 11),

emphasizing the interpretive reconstruction of storied experiences to illuminate the complexities of human subjectivity and social processes (Bruner, 1991). Unlike conventional analytic strategies that often fragment data into discrete variables, narrative methods preserve the temporal, contextual, and performative dimensions of accounts (Riessman, 2008), treating narratives as constitutive of meaning-making rather than mere representational artifacts (Somers, 1994).

Two foundational texts have shaped discussions on methods in narrative analysis. Focusing on researchers' interpretive engagement with diverse narrative forms, Lieblich et al. (1998) propose a typology of reading strategies along two axes: holistic versus categorical and content- versus form-oriented. This matrix helps researchers select approaches suited to different data types and provides a clear framework for methodological rigor. Riessman (2008) outlines four principal approaches, each highlighting distinct dimensions of narrative data. These are thematic analysis (with a focus on narrative content in the stories), structural analysis (with a focus on plot organization and rhetorical devices), performance analysis (with a focus on storytelling as a social interaction), and visual analysis (with a focus on non-verbal materials such as photographs and artifacts in storytelling).

The current study draws primarily on thematic analysis and performance analysis. Thematic narrative analysis rests on an (often unstated) view of language as a clear conduit to meaning. Like grounded theorists, researchers inductively form thematic clusters by unpacking the narrative data. Outputs typically feature a theme-based typology of narratives, enriched by illustrative case studies or vignettes (Riessman, 2008).

Performance analysis, however, can vary by narrative genre and context. For "dialogic" data generated in interviews, focus groups, or ethnographic encounters, examining group dynamics, communicative styles, and researcher–participant interactions—following Goffman's (1959) dramaturgical lens—can illuminate how identities are enacted in real time. For written texts like autobiographical accounts (such as mothers' narratives in this study), scholars often turn to positioning analysis to understand how narrators locate themselves and others within moral, social, and cultural storylines to construct their identities and articulate their agency (Bamberg, 1997; Davies and Harré, 1990; Wortham, 2001). Bamberg (1997), for example, proposes three interconnected levels: (a) positioning characters within the story world (representational content), (b) enacting positions in the immediate interactive performance (e.g. with audiences), and (c) meta-positioning relative to broader ideological discourses. This framework highlights the narratives' dual role in reflecting experience while actively shaping emotions, agency, and sense-making through linguistic choices like perspective and enactment of prevailing cultural scripts.

Data and methods

Data

Drawing on a comprehensive dataset from we-media sources, this study employs narrative analysis to understand the childrearing experiences of mothers of children with ASD as well as the narrative strategies they adopt to construct their stories and identities. I decided to use publicly accessible we-media data from WeChat, due to the prominent

role we-media plays as a source of information for the Chinese public. A brief contextualization is in order here. WeChat, a multifunctional mobile application developed by the Chinese technology company Tencent in 2011, has become one of the most pervasive digital platforms and infrastructures in China (Plantin and de Seta, 2019). With over 1 billion active users, it functions as an all-in-one application, integrating messaging, social media, financial services, and app-based utilities in a single platform. According to the *2020 Annual Report on the Development of New Media*, among Chinese internet users, 77.3% favored WeChat as their primary source of news, while a mere 6.1% and 0.7% chose television and print media, respectively (Tang and Huang, 2020, as cited in Fang, 2022: 75–76).

WeChat maintains a suite of Application Programming Interfaces that enable third-party developers to create applications within its ecosystem. Among them are official accounts (*gongzhong hao* or "public accounts"), which users can follow, repost content from, and engage with through comments. They enable individuals, organizations, and institutions to publish content, build followings, and interact with users directly, functioning similarly to a combination of a blog, newsletter, and social media page. Due to their popularity and easy access, WeChat official accounts are widely used by autism advocacy groups to communicate with the public. For instance, during my preliminary media research prior to the start of this project, the organization Dami & Xiaomi (大米和小米, www.dmhxm.com) emerged as a key platform for observing public discourse on autism in China, which prompted me to explore it as a major data source. In addition, among the few official accounts[3] dedicated to autism within the country's digital landscape, Dami & Xiaomi stands out in terms of the volume and diversity of its published content, visibility in public discussions, and the size and level of engagement of its user following. Established in 2014 by media professional Yingshuang Jiang to raise public awareness of ASD, engage with policy discourse, and explore localized intervention strategies (China Times, 2023), it has regularly published stories written by parents/guardians and professionals nationwide to discuss pertinent issues in supporting autistic children. As of early October 2025, the Dami & Xiaomi WeChat account had made over 3300 posts, with family stories being an important content category.

Caveats regarding the data source are noted here. First, narratives posted on Dami & Xiaomi are curated and published by the account administrators. As such, the dataset reflects mediated representations of living with ASD rather than an open, user-generated forum. While this curation enhances the quality and thematic coherence of the content, it could introduce a degree of selection bias that I will reflect on later in the final section of this article. Second, except for a few "public figures" (i.e. nationally or locally known parent-advocates, actors, parents of award-winning children with ASD) in the autism community, narrators are often identified by vague or generic descriptors, such as "the mother", or, as is often the case for other family members, by a first name or a nickname. While this anonymity may limit my ability to ascertain detailed demographic or contextual information, the long-form nature of the posts allows for more nuanced accounts of narrators' experiences and subjectivities. As such, despite these limitations, the account provides a valuable and otherwise hard-to-access corpus of experiential data around autism and childrearing in China.

Data collection

Since July 2023, my research team (including a research assistant and me) has gathered family stories shared on Dami & Xiaomi to understand how families navigate a child's ASD diagnosis and develop support strategies. The criteria for selection are as follows. First, we searched for "family stories" with a narrative structure that would enable us to build a comprehensive account of the focal child's biography from birth onward. Second, the data must capture narrators' reflections on their lived experiences with ASD in China, including the challenges of caring for, educating, and supporting autistic children, as well as the accessibility of formal and informal support systems in childrearing.

The use of social media data mitigates potential ethical concerns associated with conducting research involving autistic children and their families, a vulnerable population. Nonetheless, the ethical framework outlined by Townsend and Wallace (2016) for social media research was strictly followed to maintain the utmost ethical standards throughout the research process. Specifically, the following steps were taken. First, data collection was approved by the Institutional Review Board for research with human subjects at the University of Suffolk. Second, in constructing the narrative dataset, additional measures were taken to anonymize personal information related to narrators and their families. This was achieved by assigning codes to mentioned individuals—for example, "16M" refers to the mother in Family 16—to ensure confidentiality. We also deliberately refrained from collecting any visual data shared by narrators that could potentially compromise their anonymity. Further, in reporting findings, we followed an ethics of care to minimize potential harm to individuals involved by paraphrasing or summarizing findings at an aggregate level, rather than using verbatim quotes, when sensitive topics such as domestic abuse are discussed.

Up to October 2025, 111 family stories were gathered, including 88 narratives shared by mothers of children with autism from across China, which are the primary focus of this paper, and 23 narratives contributed by fathers, which are analyzed separately in another article (Xue and Gu, 2026).

Sample characteristics

As Table 1 shows, the children in the sample are aged from 5 to 39 years, with a mean age of 19 years; 41 of them are aged 18 and above. This means that the sample encompasses China's first generation of children with ASD (i.e. those born during the 1980s and 1990s), as well as a younger generation born after 2000, offering a comprehensive picture of how families navigate ASD diagnoses and caregiving across decades. The gender distribution is highly skewed: 17 of the children are female and 71 are male. Two-thirds of the families (41 out of 62 who reported this information) live in first-tier cities (Guangzhou, Shanghai, Beijing, and Shenzhen) or provincial capitals.

Among mothers, 71 identified themselves as the primary caregiver, 14 shared caregiving responsibilities with their husbands, and 1 identified the child's grandparents as the primary caregivers, illustrating the gendered nature of care provision in these families. Regarding their employment status, 40 mothers reported being "currently employed", while 47 indicated they had exited the labor market, at least temporarily. Out of the 57

mothers who shared information about their previous or current occupations, 6 identified as "peasants or migrant workers (*dagong de*)", while the rest were in professional or skilled positions. Of the 62 mothers who reported marital status, 52 described themselves as being "currently married", and 10 were divorced.

Despite diversity in family and child demographics, the sample tends to represent families from higher-SES backgrounds (i.e. urban middle class in more developed regions), which mirrors the visibility patterns of ASD families in China today, where significant barriers for families in remote areas to access medical care, intervention resources, and social support render them "invisible" (Lin, 2019).

Data analysis

I conducted a two-pronged analysis of the 88 stories shared by mothers of autistic children, combining a thematic analysis with a performance analysis. Through a thematic analysis, I aimed to understand mothers' experiences of raising children with ASD, including challenges as well as coping strategies, with a focus on the narrative content represented in the data. I first immersed myself in the data, applying open coding to let significant themes naturally emerge. With a focus on examining mothering experiences and motherhood, I then highlighted texts that reflect childrearing experiences, negotiating caregiving, economic provision, and family roles. Here, I applied the categorical reading strategy (Lieblich et al., 1998) to find cross-cutting themes and compare content in a systematic way.

Building on this, I then conducted a performance analysis to explore how narrators construct and perform self-identities vis-à-vis the broader intended audience—the general public among WeChat users. As Riessman (2008: 105) describes, instead of focusing on narrative content, performance analysis explores *who* an utterance may be directed to and for what purposes. In other words, performance analysis treats the act of storytelling itself as a *social*, *interactive*, *embodied*, and *contextual* phenomenon, foregrounding the storylines, language, and the micro-contexts of narrative production. The analysis followed several steps. I first read each family story holistically to identify overarching plotlines, turning points, and positionings. I iteratively coded and interpreted excerpts to identify patterns in how narrators introduce plots and construct identities for themselves and their children in relation to broader social and ideological forces. This approach reveals how individuals make sense of experiences while highlighting the impact of social, cultural, and institutional contexts on their narratives.

Mothering autistic children: Navigating diagnosis and care arrangements

Experiencing a child's ASD diagnosis

The diagnosis of ASD in a child is often described as a life-changing event. The message from doctors that ASD is a lifelong and incurable illness sends many mothers into emotional turmoil, which closely mirrors the five stages of grief model in psychiatry research (Kübler-Ross, 1969).

Table 1. Sample characteristics.

Variable	*N*	Mean/%
Child's age (range: 5–39)	88	18.6 (41 aged 18 and above)
Child's gender (1 = boy)	88	81%
Child's age at diagnosis (range: 1–10)	76	3.85
Family residence (1 = tier 1 city/ provincial capital)	62	66%
Child's current education level	**66**	
Primary school or earlier	32	48.5%
Junior middle school	10	15.1%
High school or secondary vocational	9	13.6%
College or university (with/without degree)	14	20.9%
Child's school type	**88**	
"Normal" school	49	55.7%
Special school	17	19.3%
Home-based one-on-one intervention	14	15.9%
Mixed	8	9.1%
Mother as the main caregiver	86	82.6% (71 out of 86)
Mother's employment status	**87**	
Currently working	40	46% (six in blue-collar jobs; many shifted to education/childcare-related professions)
Has exited the labor market at least temporarily	47	54%
Mother's occupation (1 = peasant or blue-collar worker)	57	11% (6 out of 57)
Parents' marital status	**62**	
Currently married	52	83.9%
Divorced	10	16.1%

Often, a child's atypical development such as delayed speech or disinterest in social interactions raises concerns for the main caregivers (mostly mothers), prompting medical consultations. However, access to medical diagnosis largely depends on families' geographic locations, since medical resources are concentrated in urban centers. For families in remote rural areas, this process could be arduous. Take Family 26, hailing from a small county in Northeast China; as the mother recalled, "in our hometown, nobody knew anything about autism. We were confused about what to do and made him [her son] take psychiatric medications, which distressed him even more." It was only after she took a 7-hour train ride with him and queued for 3 days in Peking University Sixth Hospital that her son was officially diagnosed with ASD, at the age of 7.

Many mothers described the day when they received the diagnosis as "the darkest day" in their lives, triggering a profound sense of doom and grief, as the quotes below show:

> I felt as if the sky had fallen for the entire year following the diagnosis … I felt like my life was over. (32M, Guangzhou, with a 19-year-old son)

> For a whole year, I was stuck in depression—feeling completely at loss at this disastrous news, thinking that my daughter's life will be a defective product for ever. (46M, unknown city, with a 10-year-old daughter)

> … I cried late at night and asked my mother, "What should I do in the future? What will happen to my child? Why did something like this happen to me?" (3M, with 12-year-old son)

As described earlier, the prevailing intensive mothering ideology in China (Lei, 2020; Yang, 2018; Zhong and Guo, 2018) revolves around the idea of raising healthy and well-educated children with "successful" futures (Gu, 2021b). In an era of low fertility, this is built on a culture of eugenics (Gu, 2021a), shaped by the state's biopolitical policies to enhance population *quality* (Greenhalgh, 2003). The descriptions of extreme emotional stress show how a child's ASD diagnosis (e.g. the "defective product" analogy described by 46M) upends mothers' imaginations of their children's (typically developing) future and, just as importantly, their ability to practice a version of normative intensive mothering they probably have rehearsed many times in their minds since pregnancy, resulting in a grave sense of loss and despair. Some at this stage also expressed anger at the perceived injustice in their circumstances, illustrated by 3M's emphatic questioning of why this had happened to her.

Furthermore, due to the deep-rooted patriarchal belief that women's physical condition is the sole determinant of newborns' health (Gu, 2021a; Holroyd, 2003), some women were blamed by their in-laws and husbands, intensifying the social stigma attached to their children and to themselves and depriving them of much-needed family support. This is particularly so among women from disadvantaged backgrounds, that is, those with rural *hukou* statuses, who are poorly educated, and with no formal employment. For example, 67M, a rural woman with two autistic sons under 8, suffered from her ex-husband's physical abuse and infidelity, as well as bullying from his extended family. It was only after she met her second husband—a supportive special education teacher—and divorced her first husband that she was able to escape the sense of shame and guilt as an ASD mother.

Over time, however, many mothers reached a state of acceptance, framing this shift in mindset as an embrace of their motherly responsibilities. Story after story, these women recounted their journey toward accepting their children's ASD as their inevitable "fate" and emphasizing the need to stay strong for their children's sake, as 53M (with an 8-year-old son) described:

> A mother has to be strong (*weimu ze gang*)! Because you can't rely on anyone else, only by taking action myself can my child be helped. No matter what, I cannot fall; if I fall, my child's hope is gone.

Stepping into the role as the main, and sometimes only, caregiver for their autistic children, many mothers reevaluated their priorities to focus on childcare, actively seeking out

information about ASD treatments and interventions, traveling long distances to big cities to learn intervention techniques, and finding resources and connecting with support networks. This process, as will be shown, involves these women's renegotiation of their gender identities and roles in the context of their children's special needs.

Re-gendering care and career trajectories

The diagnosis of ASD in a child often prompts significant changes in family finances and household division of labor. In the context of the state's paternalistic approach to disability governance (Ma, 2020), families are fully responsible for providing care and support for their children. This creates enormous financial, caregiving, and emotional burdens for families. As a result, the reconfigurations of caregiving and work arrangements within families often depend on parents' socioeconomic resources, the availability of support from the extended family and wider social networks, and prevailing gender norms. Emerging from the sample are three distinct patterns: the "mother-carer–father-worker" arrangement, the "dual-income-co-carer" arrangement, and "mother-as-dual-worker/carer arrangement", as detailed later.

The mother-carer–father-worker arrangement. The most prevalent arrangement prescribes gender role specialization. Typically, fathers prioritize full-time employment to sustain household income, while mothers assume the role of primary caregivers, managing daily care, therapy, and educational coordination. Of the 87 mothers who reported their employment status, 47 described having exited the labor market to focus on caring for their children, consistent with a recent survey in China that finds that only 52.9% of mothers of children with ASD, compared with 88.6% of fathers, are engaged in paid employment outside the home (Wang et al., 2020).

This gendered division of labor is both culturally and structurally reinforced. On the one hand, traditional expectations of maternal caregiving align with a neoliberal welfare regime that delegates responsibility for disability care to families. When children's long-term or special needs are perceived as a serious threat to their future well-being, mothers are often compelled to take on full-time caregiving responsibilities as an act of necessary sacrifice to support their children. Meanwhile, due to limited and uneven public support[4], families face enormous financial pressure to pay for the child's therapies and other interventions, in addition to living costs, which reinforces the perceived necessity for fathers to act as economic providers. According to one media report (*The Paper*, 2022), the average annual cost of ASD intervention programs exceeds 60,000 *yuan*, amounting to two-thirds of the average annual salary in medium and large enterprises, not including housing, transportation, and other living expenses. As such, in one story after another, mothers described their transition from professional careers into full-time caregiving as an almost inevitable response. For example, in Family 60, where both spouses worked in state agencies, after the son's diagnosis, a family meeting involving the couple and the husband's parents led to a decision that the husband would continue working to support the family, while the wife would resign from her management position to care for the child.

For some, transitioning to full-time caregiving is also framed as a strategy of developing preparedness and competence in specialized care. Before a child's diagnosis, most families incorporated grandparents, and less often hired domestic help, in a "parenting coalition" (Goh, 2011) to balance childcare and a dual-earning arrangement. However, autism shatters this coalition. In several posts, mothers described their (former) parents-in-law as uninvolved in childcare due to their lack of acceptance of autism, a response likely influenced by the cultural stigma surrounding disabilities (Wu, 2020). A few others expressed dissatisfaction with delegating caregiving to grandparents or nannies, due to the latter group's perceived inadequacies or misalignments with their children's needs. By taking on full-time caregiving themselves, mothers sought to regain control over the quality, consistency, and responsiveness of care for their children:

> [I decided to] resign from work. Up until then, my child was cared for by his grandmother and a teenage nanny. I knew that the likelihood of them starting to learn intervention knowledge from scratch was very slim, and I also didn't want to leave my son's fate in the hands of others. (39M, Guangzhou, with a 22-year-old son)

Often, these mother-carers also assumed the role of "parent-therapist" (Lin, 2019), in line with the intensive mothering ideology which underscores maternal expertise, devotion, and self-sacrifice (Hays, 1996). They learned from books, online resources, parent-led workshops and training, and peer-support networks. 5M, for example, prided herself as transitioning into a "fully equipped autism super mom" through active learning:

> I first purchased popular science books on autism like *Floortime*, and gradually read fifty to sixty books on autism, neurology, psychology, pedagogy, sociology, and more. Later, I even obtained Montessori and kindergarten teacher qualifications and studied courses for special education teachers in speech. Within a year, I transitioned from a finance professional who knew nothing about parenting into a fully equipped autism super mom. (5M, Shenzhen, with a 7-year-old son)

In this gender-specialized arrangement, fathers often occupy a peripheral role in day-to-day caregiving, shaped by a host of factors. The economic imperative for fathers to act as providers, exacerbated by the financial burden of funding professional services and the loss of their wives' income, justifies their withdrawal from direct caregiving. Moreover, a lack of work–life balance policies at workplaces in China predisposes these men to long and irregular working hours that often drain their time and energy for childcare and family life in general.

Further, due to the unequal distribution of medical and educational resources, as well as *hukou*-based restrictions on access to public support, some families had to split households across locations to balance children's access to specialized interventions and schooling with fathers' employment opportunities. For those from rural and remote areas, the absence of professional services and facilities in local communities necessitates long-term travel to major cities—such as Beijing or Guangzhou—to obtain specialized training, interventions, and even a formal diagnosis. Consequently, young children (often under the age of 10, a period widely regarded as critical for intervention) and their

primary caregivers—typically mothers, with or without grandparents—must relocate for extended periods. In other cases, families originally residing in major cities (as non-*hukou* residents) may return to their hometowns to reduce expenses and maintain basic living standards, leaving fathers alone in cities for work.

It is fair to say that fathers' absence in caregiving in families with autistic children is driven by a complex web of normative and pragmatic factors at the individual, familial, and societal levels in contemporary China, which has been analyzed in a separate article (Xue and Gu, 2026). Suffice it to say that in this context, fathers' role in care, even in intact families, tends to be secondary and framed as "help", which is often performed after work, during weekends, or in rare family reunions.

The dual-income-co-carer arrangement. Less often, both parents engage in caregiving and paid work. Among families with this arrangement, a notable pattern is that mothers (21 out of 87 who reported employment status) were engaged in, or had transitioned into, professions closely aligned with their caregiving responsibilities, such as social work, special education, and service provision for ASD children. Here the mothers, through incorporating and building on their experiences of supporting their children in their work, remained their children's main caregivers, while fathers provided assistance when needed on a daily basis. Often, this process began by mothers participating in workshops and ASD support networks, which then opened new career opportunities in a potentially huge market with serious service gaps. Through further (formal and informal) training, these women would apply different theories and practices in the care of their own children. If a notable positive effect was found, their "success" stories would spread across the community, leading to employment opportunities in the booming ASD intervention industry.

Such was the case for 30M, whose son was diagnosed with Level-2 ASD (see note 4 for details) at the age of 3, a classification indicating the need for "very substantial support". Trained as a nurse, she then began a long journey of professional reinvention. When the child was in an early-years intervention center, she shadowed all his classes to learn intervention techniques, taking notes and rehearsing intervention strategies at home with her son. When her son attended primary school, she became an autism rehabilitation therapist at a rehabilitation center nearby. Later, as the center closed down, she obtained a teaching qualification through online education and became a teacher at a special education school, taking her son under her wing. Upon reflection, she described her life as a journey "destined to be dedicated to working in the field of autism".

On rare occasions, a more equitable arrangement is found. In these families, parents may alternate roles—for example, one accompanying the child to therapy while the other works—or jointly participate in facility- or home-based interventions, as a negotiated response to the dual pressures of intensive care and economic sustainability. In Family 69, the mother was an associate professor at a university and the father an IT specialist in a major company. A typical day began with 69M preparing breakfast for the family, after which her husband took their 8-year-old son to attend an intervention class in a nearby center. During this time, she worked from her home office—preparing lessons,

marking papers, and writing reports—or, on one day each week, teaching at the university. After lunch at home, the father left for his office for half a day, a perk only available to him as a senior specialist. In the afternoon, a private special education teacher would come over and give the child lessons at home, while 69M continued her work. In the evening, she would take the child for a walk, bathe him, and put him to sleep. The mother was acutely aware of her class privilege, which allowed her to partially outsource care, education, and domestic tasks to service workers to balance work and care. In a way, the monthly bill preserved her "dignity" as a working mother:

> Every month, including payments to the intervention center, hiring special education teachers, part-time cleaners and cooks, plus other household expenses, we spend around 30,000 *yuan* on average … Money is the last thing that gives me a sense of dignity.

It is worth noting that for the majority of China's workforce, who work long and inflexible hours, the flexibility that allowed 69M and her husband to integrate their employment with active caregiving—afforded by her academic position and her husband's privileged half-day office time—remains largely unattainable.

The mother-as-dual-worker/carer arrangement. As described, 10 out 62 of the mothers reported having divorced. According to their accounts, their children's ASD diagnosis frequently precipitated blame, conflict, and emotional distress within the couple—in some cases compounded by the involvement of extended family members—and resulted in marital dissolution, with child custody often granted to the mother. The ex-husbands were portrayed as self-interested individuals who were either unable or unwilling to accept their children's ASD or who became discouraged at their children's limited developmental progress despite ongoing interventions and subsequently chose to disengage. In some cases, they were encouraged by their own parents to walk out and form new families, reflecting patriarchal and eugenic norms that prioritize producing healthy offspring to continue the family lineage (Gu, 2021a). Consequently, these mothers had to turn to their own parents or other kin for help to manage childcare responsibilities, while earning a living.

The capacity to balance these dual roles is strongly mediated by SES and the availability of support networks. The few mothers with higher SES and wider support networks were able to maintain both financial stability and personalized support for their children. Take 36M, for example. Originally a university lecturer in Sichuan, she was selected for an overseas study program in Germany in 1986, one year after the birth of her son. Upon returning in 1988, she was devastated to find that her son couldn't recognize her anymore, together with other developmental delays. She brought him to a major hospital, where he was formally diagnosed with ASD—a moment that struck her as though "the sky had fallen and the earth had crumbled beneath". Her marriage also ended. Frustrated by the lack of specialized services, she established an intervention center for children with ASD in Beijing in 1993 with financial support from her parents. The center became a hub within the autism community, enabling her son to receive professional care while securing economic stability.

In contrast, mothers with lower SES are gravely challenged in balancing care and employment. Such is the case of 49M, who hailed from a small town. Her son was diagnosed with severe ASD at the age of 2, prompting her to actively pursue early interventions despite the father's refusal. After an acrimonious divorce, her ex-husband quickly remarried and had two more children, while she gained full custody of their son and relocated to the provincial capital for rehabilitation. However, due to their non-*hukou* status, her son was not eligible for state subsidies, and she eventually had to suspend intervention when it became unaffordable. Returning to her hometown, she initially enrolled her son in the village school, where teachers had little knowledge and understanding of autism, treating the boy as a "problem child" and resorting to physical punishment, which exacerbated his condition. She then transferred him to a special education school in the county. Besides being the main caregiver to her son, she worked as a care worker in a private hospital. She described herself as being haunted by an eternal fear: "What will happen to him when I'm no longer here?"

Often, juggling the dual roles of worker and caregiver exhausts these women. Long-term economic insecurity, combined with limited societal support—especially from schools—to accommodate their children's special needs, keeps them in a constant state of "firefighting" as they search for places willing to accept their children. Together, these pressures create persistent marginalization and stress for these single mothers.

Narrating "strong motherhood": Cultural scripts and disability justice

In this section, drawing on performance analysis, I unpack an emerging narrative of "strong motherhood" in the texts, which is jointly shaped by traditional Chinese cultural scripts such as "good mothers" (*liangmu*) and "eating bitterness" (*chiku*) that idealize maternal resilience, self-sacrifice, and moral strength and the mothers' mounting frustration with their experience of ongoing social and institutional discrimination and exclusion. These tropes not only reinforce traditional ideals of motherhood but also offer strategic resources for these women to position themselves as agentic actors vis-a-vis institutional and social forces and advocate for social justice on behalf of their children in communicating with the intended audience among China's WeChat users.

From "good mothers" to "strong mothers"

The traditional Chinese cultural script of "good mothers" is rooted in Confucianism, which valorizes women's moral fortitude, caring, and maternal perseverance. For example, in Liu Xiang's *Biographies of Exemplary Women*, a classic maternal education text, the ideal of "good mothers" is exemplified by widows who, against all odds, raised and educated their sons to become virtuous, upright, and respectable men (Jiang, 2024). Among them, the story of Mencius's mother, who moved frequently to secure an optimal educational environment for her son, has been passed down through the ages as a model of maternal excellence (Jiang, 2024). These cultural archetypes form a moral repertoire

from which contemporary mothers draw as they construct narratives of mothering under adversity.

Moreover, the concept of "eating bitterness" is often deployed by lower-class people to describe their endurance of harsh living and/or working conditions to achieve social mobility for themselves or their family members (Gu, 2022a). It often functions both as a cultural legitimation of suffering and as a rhetorical strategy to frame relational labor (e.g. that of mothers) as morally superior. In our data, mothers indeed talk profusely about the *bitterness* they have eaten to raise their autistic children, which includes managing the constant and unpredictable special needs, scraping a living to save for the child's intervention costs, and forgoing personal interests and enjoyments. By incorporating the concept of "eating bitterness" into their stories about raising disabled children, these mothers invoke the cultural script of "good mothers" to emphasize their physical and emotional labor, sacrifice, and devotion to improve their children's well-being. In this way, they reaffirm their essentialized motherhood identity and motherly commitments (Sun and Chen, 2015).

However, it is important to note that these mothers also articulate a form of gender progressivism by reframing ASD mothering as a social justice project through emphasizing their emotional and moral strength to fight for their children's better social and educational experiences. In many of the personal stories in the data, the mother did not merely care for her child at home; she also confronted and negotiated with public institutions, challenging exclusionary practices, and reclaiming moral authority. For example, 36M, mentioned before, among China's first generation of autism mothers, founded one of the earliest autism intervention centers in Beijing to change public discourses that cast autistic children and their families as subjects to be "pitied". After describing a difficult time when she struggled to come to terms with her son's condition, she said:

> I then understood that I didn't even have the right to die; I had to take care of him. Because he was not at fault, nor was I. What needs to change is society … In 1993, I founded my own intervention center. I wanted to let the whole of society know about the needs of families with autistic children, rather than pitying the hearts of all parents under heaven [*kelian tianxia fumu xin*]. (36M, with a 39-year-old son)

Seen here, this mother's strength is not only moral but political—a stance that blurs the line between private care and public activism. By not only accepting her son's lifelong condition but also establishing an intervention center serving children like him, she sought to increase public awareness of this developmental disorder and highlight the specific needs of this community. In doing so, her narrative challenges the passive and submissive stereotypes traditionally associated with femininity (Judd, 1994) and constructs a model of womanhood/motherhood that is assertive, strategic, and socially engaged.

Positioning "strong motherhood": Individual resilience versus structural injustice

Narrative positioning refers to how storytellers locate themselves and others within moral and social relationships, which sheds light on the social, cultural, and interpersonal

contexts shaping individuals' subjectivities and meaning-making processes (Bamberg, 1997). In the data, the mothers articulate a delicate position as "vulnerable agents" (Bühler-Niederberger, 2025). They often position themselves and their children as vulnerable individuals navigating a system of powerful institutional gatekeepers—the patriarchal family, schools, and bureaucracies—that marginalize or exclude children with disabilities. They therefore advocate for better social and public support to accommodate their children's special needs.

Their narratives are often structured as a moral struggle, with the mother cast as a lone advocate battling for her child's right to education, healthcare, or social inclusion. For many, this involved reconfiguring work and caregiving to prioritize the child's needs, getting self-educated about ASD through formal and informal learning, participating in parent support networks, and understanding relevant policies (or policy gaps), as was elaborated on above.

More often, negotiating autistic children's educational opportunities is a major "battleground". For the majority of families in the sample, public schools are the preferred, and often are perceived as the only viable, option, as special education schools primarily cater to children with physical disabilities (McCabe, 2013). Many mothers also regarded attending public schools as a symbol of their children's integration in mainstream society. However, the intense competition driven by high-stakes standardized tests such as the college entrance exam (*gaokao*) creates a highly stressful environment for typically developing children, not to mention those with autism. In this context, if a child's test scores are considered unsatisfactory, a likely scenario for many children with autism, a school may be reluctant to admit or retain them, as doing so could adversely affect its overall performance rating (Gu and Yeung, 2020). Further, lacking training and experience in supporting special needs children, teachers often interpret the behavioral issues displayed by autistic children, such as moving around in class or "disobeying" instructions, as deliberate misconduct, resorting to punitive measures to discipline these children, which often exacerbates their conditions. Without a national policy to mandate inclusive practices by schools, discrimination and bullying are common experiences, adding additional hurdles for families to secure a positive educational experience for their children.

As such, children with ASD frequently encounter school rejections, a recurring theme across family stories. Even if they are allowed to stay, schools may implement arrangements such as exam exemptions to ensure their performance does not impact the school's overall ranking. According to a survey among families of 2000 autistic children aged 5–15 in China in 2024, parents reported that 20% of the children were "currently not attending school"; among those who were attending school, "80% have received complaints from the school to varying degrees" (Dami and Xiaomi, 2024).

In the face of these steep barriers, many mothers narrated their stories of striving for (*zhengqu*) children's educational opportunities. For some, this involved acting as "study mothers" (*peidu mama*), sitting with their children in class to assist with activities and monitor their behavior, serving as mediators to resolve conflicts between their children and their peers, or as interpreters to help their children communicate with classmates and teachers who have limited understanding of ASD, thereby fostering positive relationships within the school.

A few others described more confrontational encounters with school authorities to "fight" for their children's educational rights and opportunities. One mother (56M), for example, labeled herself a "domineering woman" (*hanfu*) in fighting against rejection, discrimination, and bullying in her daughter's schooling experience.

Likewise, 19M described her process of "toughening up":

> Having a child with autism was not something I could have chosen. But instead of sympathy, I faced discrimination. Later, I realized that there's no helping it, I can only fight for his rights … I needed to toughen up. The principal called and said that the school did not have special education teachers or resources, suggesting we transfer to a special school instead. My stance was firm: we cannot. This school is in our school district; my child has the right to compulsory education.

As such, by "toughening up" and citing national legislation (e.g. the National Compulsory Education Law) and local education admission policies to resist discrimination and bullying in school and demanding fair treatment for their autistic children, these "domineering women" challenge ideals of traditional femininity, which are often associated with women's submissiveness and compliance with patriarchal power structures (Judd, 1994). Moreover, by unveiling how the "disabling" social environment (Oliver, 1990)—that is, institutional exclusion and discrimination, and social ostracization—limited their children's full participation in education and social life in general as members of society and their own struggles against it, these mothers present a heroic narrative of *individual resilience versus structural injustice* in front of the general public in China.

Discussions and conclusion

How China's 3 million children with autism are cared for and supported is a critical yet understudied topic, with profound implications for the country's long-term future. Drawing on a rich narrative dataset and based on a narrative analysis, this study explored two interrelated questions: (1) How do mothers experience their children's ASD diagnosis and negotiate care and educational support for their children in a context with limited public support? (2) How do mothers narrate their experiences, construct their personal identities and those of their children, and articulate their alternative views on supporting their children?

The findings reveal a pattern of "expansive mothering" among mothers of children with ASD in China. This form of mothering encompasses multiple, overlapping roles: primary caregiver, (semi-)professional ASD therapist, education agent or facilitator, and sometimes economic provider. Mothers demonstrate relentless dedication and intense emotional investment in these roles, often prioritizing their child's needs above their own and making substantial personal sacrifices. Their lives become profoundly child-centric, with significant time, energy, and resources devoted to securing care, educational opportunities, and social acceptance for their children.

Also emerging from the data in this study is a narrative of "strong motherhood", which draws from the cultural script of "good mothers" in Confucian ideals and the class

discourse of *eating bitterness* that valorizes women's moral strength, child-centric care practices and educational labor, and maternal sacrifices (Jiang, 2024). Further, the "strong motherhood" narrative entails a social justice element wherein these mothers construct themselves and their children as vulnerable individuals navigating an unaccommodating system that disadvantages their children with special needs. They described initial feelings of despair and hopelessness at their children's diagnosis, strategies to smooth out their children's educational journeys, initiatives to increase the visibility of ASD as a social issue, and efforts to challenge unfair treatments of their children by institutions and the society in general, thereby articulating a narrative trajectory that highlights their lone struggles as "strong mothers" versus a powerful system that dispenses injustice to children with disabilities and their families.

This study makes several contributions to the existing literature. First, methodologically, it transcends the geographic limitations of traditional single-site ethnographies by analyzing a large we-media dataset. While the sample reflects the urban, middle-class skew inherent to autism diagnosis in China—due to the uneven distribution of medical and intervention resources—this approach successfully captures two generations of ASD families across the country. Consequently, its trans-regional and cross-generational scope yields a demonstrably richer array of care experiences than localized studies. Second, this study contributes to a growing scholarship (e.g. Huang et al., 2024; Liu and Cui, 2024; Wu, 2020) on disability mothering in China by illuminating two dimensions of mothers' narratives of raising children with ASD in China, that is, expansive mothering, in which mothers take on multiple roles to meet their children's special needs, and the "strong motherhood" narrative, through which mothers portray themselves as vulnerable individuals confronting powerful institutional gatekeepers that marginalize or exclude them. What emerges is a rich and complex portrait of ASD mothers as "vulnerable agents" (Bühler-Niederberger, 2025) operating within a neoliberal paternalistic policy context (Ma, 2020). This case enriches theoretical discussions of intensive mothering globally (Hays, 1996) and within China (Lei, 2020; Yang, 2018; Zhong and Guo, 2018). Moreover, the narrative analysis approach has extended our understanding of how maternal identities and responsibilities are constructed and negotiated under the intersecting pressures of disability, gender norms, and institutional structures.

While the "strong motherhood" narrative forwarded by these mothers offers a powerful framework for articulating ASD mothering in contemporary China, one that underscores maternal resilience and moral fortitude, I caution against its celebratory individualist tone. By centering individual mothers' "success stories" in supporting their children's development, this narrative could inadvertently render structural inequalities invisible under the state's neoliberal social policies for governing vulnerable populations (Gu, 2022b; Ma, 2020). It is important to acknowledge that the sample in this study is skewed toward mothers of higher SES who live in major cities and are engaged in professional occupations, which translates into greater access to resources and private services that enable them to meet their children's special needs in terms of care and educational support. Moreover, their sense of entitlement, underpinned by what Bourdieu and Passeron (1990) conceptualize as cultural capital, predisposes them to confronting and negotiating with authorities and addressing societal obstacles so as to

advocate for their children. Such conditions are far less obtainable for the large segment of autism mothers living in rural communities, whose experiences, voices, and subjectivities are not sufficiently represented in this study. As Lin (2019) has observed, such an individualist framing of mothers' devotion to children's interventions, often regarded as a measure of their motherly "love", could stigmatize those who do not have a basic standard of economic security and are constantly under stress. Moreover, this narrative of "strong motherhood" could obscure gendered violence and inequalities in these families. As discussed earlier, pervasive gender-discriminatory discourses about women's role in reproduction and care frequently make mothers primarily responsible for their children's ASD and, consequently, for their "rehabilitation", a role that entails significant stress, emotional pain, and personal suffering.

The findings also indicate that solidarity and sacrifice are the two faces of these families' daily realities. On the one hand, through gendered division of labor at home to reorganize care, family economy, and livelihoods, many families strive to create a supportive network tailored to the child's care and educational needs, though patriarchal values and practices continue to overburden women as providers of care. On the other hand, the journey of raising a child with ASD demands considerable sacrifices from all members of the family in terms of financial stability, career development, and emotional support. Mothers, in particular, often find themselves making significant life choices to accommodate their child's needs—whether to leave their careers to become full-time caregivers, switch to professions related to ASD to better support their children, or relocate all over the country for specialized training. Without adequate public support systems, the sacrifices made by mothers are overshadowed by the overwhelming structural obstacles they face.

From a policy perspective, despite the commendable efforts of "strong mothers" to nurture and "fight" for their children's development and social integration, the absence of a unified national welfare system presents significant obstacles for these families to support and plan for their children's educational development and future lives. This exacerbates the challenges these families already endure daily, including financial strain, emotional distress, social stigma, and a pervasive sense of uncertainty. To improve the welfare of children with ASD and their families, it is essential for the Chinese government and society to address these fundamental structural issues. This includes providing subsidized care and services accessible to all and with additional targeted support for low-income families, developing an inclusive public education system with dedicated pathways for special needs, and fostering community support to relieve mothers' caring burdens and supporting their mental health.

Future work should be directed toward overcoming several limitations of this study. First, the data are mediated in nature. Although the use of mothers' written autobiographical narratives provides rich, contextualized insights into mothers' experiences and perspectives, this source inevitably reflects participants' retrospective meaning-making, mediated by the platform's (i.e. Dami & Xiaomi's) editorial process, rather than unfiltered accounts of daily life. Narratives may be shaped by memory, social desirability, or the publication context itself. Future research incorporating additional forms of naturalistic or real-time data—such as diaries, digital communication records, or

participant observation—would help capture experiences that are difficult to articulate in written posts alone. Second, as acknowledged earlier, the study relies heavily on a single source of data. In future work, our project team will expand the dataset by incorporating family stories from multiple sources to reduce potential biases associated with a single source. Third, though the narrative accounts are invaluable for understanding subjective experience, in drawing primarily on self-reported or researcher-inferred information, the measures of key variables such as family SES, parents' occupational status, geographic locations, and family life history remain crude. Future studies using mixed methods—including surveys or standardized assessments—could complement narrative findings and offer a more comprehensive and accurate picture of families' circumstances among the autism community in China.

Acknowledgments

Earlier versions of this paper were presented at a 2024 symposium organized by the Gender and Care Hub at the University of Oxford, the 2025 British Sociological Association conference, and a seminar in September 2025 hosted by the Centre for Chinese Family Studies at the Chinese University of Hong Kong. I am grateful to the colleagues who engaged with the paper at these events, especially Rachel Murphy, Yuying Tong, Susanne Choi, Wensong Shen, and Yuchen Yang, for their insightful comments. I also thank Kefan Xue for her thoughtful written feedback that helped strengthen the manuscript and being an incredible partner in this research project. My gratitude also goes to the guest editors of this special issue— Jing Song, Feinian Chen and Yue Qian—and anoymous reviewers who have provided constructive comments and suggestions to improve this work. Finally, I am grateful to the we-media platform Dami & Xiaomi (大米与小米) for curating the stories of families of children with autism spectrum disorder on which this study draws.

ORCID iD

Xiaorong Gu https://orcid.org/0000-0002-5479-9669

Ethical considerations

This research was carried out in accordance with the ethical guidelines and regulations set forth and approved by the Institutional Ethics Review Board at the University of Suffolk.

Funding

The author received no financial support for the research, authorship, and/or publication of this article.

Declaration of conflicting interests

The author declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Notes

1. The terms—"children with ASD/autism" and "autistic children"—are often used interchangeably in academic and clinical contexts. "Children with ASD/autism" uses person-first language, which emphasizes the individual before the diagnosis. In contrast, "autistic children" uses identity-first language, reflecting how some individuals and advocacy groups prefer to acknowledge autism as an integral part of their identity. Usage may vary depending on context, audience, or the preferences of individuals and communities involved, with no consensus among different groups. In this study, I use these terms interchangeably to refer to this group of children.
2. We-media refers to the phenomenon in which ordinary individuals or small groups create, share, and disseminate content through digital platforms.
3. Other popular accounts include *ALSO LIFE* and *Snail Worldview* (Woniu shijieguan). While systematic data regarding subscriber information for these accounts are not available, based on observable data from a subscriber's view, as of October 7, 2025, Dami & Xiaomi has published 3313 posts, which are further categorized into 11 types, including "the diverse experiences of families with autism" (*zibizheng jiating baitai*), "expert interviews" (*daka fangtan*), "first-person accounts by individuals with ASD" (*ASDer zishu*), "cutting-edge science communication" (*qianyan keji*), and so on; many posts have attracted large readerships, with some garnering up to tens of thousands of view counts. In contrast, *ALSO*, another popular account, has published 1167 posts which are not further categorized into distinct types. *Snail Worldview*, with a total of 392 posts, demonstrates significantly lower average viewership by comparison. As our project is ongoing, we plan to include *ALSO LIFE* and *Snail Worldview* as additional data sources in the next step of our research.
4. At present, public assistance for children with ASD in China remains fragmented and largely restricted to local jurisdictions. Eligibility requires parents to apply for a "disability certificate" (*canjizheng*) for the child in their place of *hukou* registration. This certificate specifies the child's level of disability based on expert assessment, categorized into four levels, in line with the *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.) by the American Psychiatric Association, as follows: Level 1 (extremely severe), completely unable to care for oneself, requiring long-term supervision, with no capacity for social interaction; Level 2 (severe), basically unable to care for oneself, requiring continuous supervision, with extremely limited social skills; Level 3 (moderate), partially able to care for oneself, requiring some supervision, with basic social skills; and Level 4 (mild), basically able to care for oneself, but requiring assistance in complex environments. A local-*hukou* child with ASD at a formally certified disability level may be eligible for two types of public assistance, though the amount of assistance varies by region. First, the "subsistence subsidy for disadvantaged persons with disabilities" (*kunnan canjiren shenghuo butie*) targets children from low-income families, providing approximately 100 *yuan* per month in Hunan Province and 209 *yuan* per month in Guangzhou, the capital of Guangdong Province, in 2025. Second, the "care allowance for persons with severe disabilities" (*zhongdu canjiren huli butie*), available to children certified at Level 1 or Level 2, provided approximately 100 *yuan* per month in Hunan Province and 280 *yuan* per month in Guangzhou in 2025. For those *hukou* residents in major cities with better medical resources and services, they are entitled to a subsidy for (private) rehabilitation/intervention services at designated institutions/settings. For example, in Shenzhen in 2025 children aged 0–18 with

Level 1 or Level 2 disabilities are eligible to receive up to 50,000 *yuan* per year, and those aged 7–18 with Level 3 or Level 4 disabilities can receive up to 40,000 *yuan* per person per year. However, in first-tier cities such as Shenzhen, the market cost for specialized training far exceeds the subsidies, albeit with variations by service type: one-on-one sessions (30–60 min) may range from several hundred to over a thousand *yuan* per session; group sessions typically cost between approximately 100 and several hundred *yuan* per session; and half-day or full-day classes are generally charged on a monthly basis, with fees ranging from several thousand to over 10,000 *yuan* per month. As a result, even those "privileged" families with local *hukou* in major cities still need to pay substantial extra fees for their children's therapies and interventions.

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