

BAR-ILAN UNIVERSITY

**The Relation between Parenting Styles and Optimal
Internet Use of Children with and without Learning
Disabilities and Attention-Deficit Hyperactivity Disorder**

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Abstract

To the extent of our knowledge, the current study is the first to examine which of the three permissive, authoritarian, and authoritative parenting styles is most common and its association to optimal Internet use by young children with and without specific learning disorder (SLD) and/or attention deficit hyperactivity disorder (ADHD). The study comprised of 300 participants; 150 children and their parents, aged between 9 and 12 ($M= 10.64$). The participants were divided into two research groups: 71 children with SLD/ADHD and their parents, and 79 children with typical development (TD) and their parents. To ensure optimal data, each child was matched with their parent.

According to the results of the study, a comparison between the two study's groups in each parenting style revealed that the SLD/ADHD group scored higher in the authoritarian style compared to the TD group. Also, though both parents and children scored higher in the authoritative style, when questioned on their parenting style, children perceive their parents as more permissive while parents perceive themselves as more authoritative.

Furthermore, the authoritative parenting style was found to be the optimal one of the three, associated with less cyberbullying and problematic Internet use (PIU), thus resulting in a more proper use of the Internet. An examination of the frequency, use and exposure of children at a young age to cyberbullying and PIU, indicated that an authoritative parenting style had a positive effect on the quality of the relationship between parents and children, resulting in lower exposure to cyberbullying and PIU. This relation was found to be significantly higher among the SLD/ADHD group, and emphasize the importance of adopting an authoritative parenting style among parents of children at an early age, especially children with SLD/ADHD.