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A journey of love and resilience: Lived experiences of parents raising children with special education needs

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ABSTRACT

Despite the Philippines' commitment to inclusive education, implementation in public schools often remains insufficient, leaving parents of children with special education needs to endure persistent policy and practical gaps. This study explored the lived experiences of five parents of children diagnosed with autism in Las Piñas during the academic year 2025–2026, concentrating on how they construct meaning, demonstrate resilience, and exercise moral leadership in caregiving. Guided by Family Systems Theory and analyzed through Braun and Clarke's Reflexive Thematic Analysis, the research revealed seven interrelated themes: rhythms of care as emotional order, love that carries as ethical labor, silent pedagogy as compassion under pressure, belonging as circles of help, lives re-arranged through adaptive sacrifice, uneven paths of inequity, and moral protest as quiet advocacy. These narratives described how parents transform fatigue into reform and compassion into leadership, redesigning the parameters of policy through everyday persistence. The study culminated in the Villanueva Framework for SPED, which describes caregiving as a moral rhythm sustaining inclusion through values-driven care, reflection, empathy, and faith. Findings highlight that genuine inclusion cannot be attained only through bureaucratic design but must be anchored in the ethical intelligence of families, reminding educational systems that justice in education must first be humane.

Keywords: Caregiving, Family Systems Theory, inclusive education, reflexive thematic analysis, Villanueva Framework for SPED.

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INTRODUCTION

Education serves as a foundation for individual growth and active participation in society. For children with disabilities, equal access to education remains a continuing challenge despite legal protections and formal policies. Special Education (SPED) programs aim to address these challenges by tailoring instruction to suit the unique needs of learners who may struggle in traditional classroom settings.

Globally, an estimated 240 million children live with disabilities, yet many continue to experience exclusion from formal education or receive limited support when included in

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mainstream schools (UNICEF, 2021). International organizations, including the United Nations and UNESCO, promote inclusive education as a way to address this inequality. These efforts have influenced national education policies, including those in the Philippines.

In the Philippines, the government has enacted several reforms to support children with special education needs. Laws such as Republic Act No. 11650 and Republic Act No. 10533 direct schools to accommodate students with disabilities and make learning accessible. The Department of Education (DepEd) has opened SPED centers and developed policies to assist schools in meeting the needs of these students. However, limitations persist. Many children with disabilities remain unidentified, and access to specialized support continues to fall short (Senate of the Philippines, 2022). Teacher shortages, underfunded programs, and limited training further reduce the effectiveness of SPED services.

The COVID-19 pandemic added new complications. Before the pandemic, more than 360,000 students were enrolled in SPED programs. This number dropped significantly during the 2021–2022 school year, with only around 93,900 students participating in SPED classes (Senate of the Philippines, 2022). Remote learning presented new barriers for children who rely on face-to-face interaction and tools that are not readily available at home. Even as schools resumed in-person classes, some children with special education needs did not return.

While much attention has been given to school-level responses and teacher challenges, the experiences of parents who care for these children on a daily basis are often overlooked. Some studies report that parents experience emotional stress, financial pressure, and isolation, especially during the pandemic (Ren et al., 2020; Wong et al., 2024). Others highlight the lack of strong communication between schools and families, which reduces the effectiveness of learning support at home (Starks&Reich, 2023; Qorib et al., 2024).

In the Philippines, many parents of children with special needs report difficulty in accessing reliable information, professional guidance, or consistent support from schools. Although legal frameworks exist to protect their children's rights, enforcement remains inconsistent. Teachers often face their own difficulties, such as limited training and inadequate classroom resources, which limits their ability to respond effectively to parent concerns (Allam & Martin, 2021). Collaboration between families and schools remains weak, often due to gaps in communication and support services.

Parents of children with autism report even more specific and intense concerns. They experience emotional strain after diagnosis, with some expressing fear, guilt, and anxiety about their child's future (Papadopoulos, 2021). Behavioral challenges at home and in school environments contribute to exhaustion. Financial difficulties arise due to therapy costs, medical needs, and job adjustments. Parents sometimes reduce work hours or stop working entirely to care for their child (Tokatly-Latzer et al., 2021). In social settings, they face judgment and exclusion, which increases isolation (Currie&Szabo, 2020). In some cases, delayed diagnoses and limited professional support leave parents feeling lost.

On the ground, parents describe their lived experiences with frustration, uncertainty, and constant adaptation. Many manage these realities without formal assistance, depending on their own knowledge and limited resources. These everyday situations include juggling caregiving with employment, managing behavioral issues, and dealing with social stigma. Despite these efforts, some parents express feeling unheard and unsupported in educational decisions. These experiences are not often documented in local research.

While several studies focus on system-wide issues or institutional barriers, few explore how Filipino parents experience and respond to the demands of raising children with special education needs, especially those diagnosed with autism. This gap limits the understanding of parent perspectives and reduces opportunities to improve programs based on their actual needs.

Hence, this study focuses on the experiences of parents raising children with special education needs. Unlike many previous studies that examine systemic or institutional concerns,

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this research centers on the parents' perspectives-how they navigate daily life, what challenges they face, and how they respond to the demands of raising a child who requires additional support in school. The study also examines how parents view current SPED services and what kind of support they believe would improve their child's education. It responds to the research gap by presenting insights that reflect the realities of Filipino families, particularly in an urban public school setting. Through these insights, the research aims to inform school practices and identify ways to help families participate more fully in their children's learning journey.

Statement of the problem

The main objective of the study was to explore the lived experiences of parents raising children with special education needs, specifically, autism. It aimed to answer the following research questions:

1. What are the lived experiences of parents raising children with special education needs?
2. What themes emerged from the lived experiences of parents raising children with special education needs?
3. What insights from the lived experiences of parents raising children with special education needs can be gained based on the emerging themes?
4. What output or special education enhancement plan can be developed based on the findings of the study?

METHODOLOGY

The study employed a phenomenological qualitative research design to explore the lived experiences of parents raising a child with autism. The phenomenological approach focuses on understanding how individuals experience and interpret a particular phenomenon, which in this case was the parenting of a child with autism. The purpose was to uncover how these parents describe their daily life, the difficulties they encounter, the strategies they use to manage their responsibilities, and their views on the support provided in special education programs. In this design, the researcher collects detailed accounts directly from participants to capture the essence of their lived experiences (Lim, 2024). Rather than measuring variables, the study centers on meaning-making, aiming to reveal the thoughts, feelings, and reflections of parents. Data were gathered through in-depth, open-ended interviews that encouraged parents to speak freely. This process allowed the study to document not only their challenges but also how they navigate their caregiving journey and interact with their child's school environment.

The study involved parents of children diagnosed with autism who were currently enrolled in a public SPED program in Las Piñas. These parents have direct experience with caregiving and interaction with special education services, making them suitable participants for the research. The study employed purposive sampling to deliberately select participants who could provide rich and relevant insights into the phenomenon under investigation. Specifically, five parents or guardians of children diagnosed with autism and enrolled in a public elementary school in Las Piñas were chosen as the respondents of the study. They were deliberately chosen because they had direct caregiving responsibilities and firsthand interaction with special education services, which made them suitable sources of rich and relevant insights. The inclusion criteria required that participants (1) were parents or legal guardians actively caring for a child formally diagnosed with autism, (2) had a child enrolled in the school's special education program during the current academic year, and (3) resided within Las Piñas

to ensure contextual relevance. Exclusion criteria ruled out individuals without direct caregiving responsibilities and those whose children were not enrolled in the identified SPED program. Purposive sampling was deemed appropriate because it ensured that only participants with the specific characteristics necessary to illuminate the research questions were included, thereby capturing authentic and meaningful accounts of parenting children with special education needs (Creswell & Plano Clark, 2018; Patton, 2015).

The final sample size of five parent participants was based on the concept of data saturation, which in qualitative research refers to the point when the information provided by participants begins to repeat and no new themes or insights emerge (Braun & Clarke, 2021). Past research suggests that saturation is usually reached within a range of 10 to 30 participants (Braun & Clarke, 2021). Selecting 5 parents allowed the researcher to collect a variety of perspectives while also considering the practical limits of time and access. The sample size was therefore determined on the principle of data saturation, in which no new themes or insights emerged beyond repeated accounts (Creswell & Plano Clark, 2018; Patton, 2015; Braun & Clarke, 2021).

The study used a researcher-developed interview guide to gather data from parents raising a child with autism. The interview guide, presented in Appendix B, was designed to help the researcher explore the lived experiences, challenges, coping strategies, and views of parents on SPED services in their child's school. The questions were open-ended to allow participants to respond in their own words, and each research objective was supported with three focused questions to gather meaningful answers. To confirm the usefulness of the interview guide, the researcher conducted a validation process before starting the actual interviews. This process involved consultation with experts to assess whether the guide was appropriate for the target participants, who were parents of children enrolled in public SPED programs. The validation was done through content evaluation, with input from a records management specialist and a research expert, who examined the questions and determined whether they were aligned with the purpose of the study.

During the review, each question was evaluated using two criteria, namely representativeness and clarity. Representativeness refers to how well a question reflects the specific area of inquiry, while clarity refers to how easy it is for respondents to understand the question without confusion. The experts used a four-point scale to rate each item, following the Content Validation Index (CVI). A rating of 4, corresponding to the statistical limits of 3.51 – 4.00, was interpreted as Representative for representativeness and Clear for clarity. A rating of 3, corresponding to 2.51 – 3.50, was interpreted as Needs minor revisions to be representative and Needs minor revisions to be clear. A rating of 2, corresponding to 1.51 – 2.50, was interpreted as Needs major revisions to be representative and Needs major revisions to be clear. A rating of 1, corresponding to 1.00 – 1.50, was interpreted as Not representative and Not clear. The feedback gathered through this process helped refine the interview guide to ensure that the final instrument is clear, relevant, and able to collect meaningful data from parents. Suggestions from the experts were considered to make improvements before the instrument was finalized. Additional details of the validation process, including the validation form used, are provided in Appendix C.

Data were collected through one-on-one interviews that followed a semi-structured format using the validated guide presented in Appendix B. Each interview lasted between 30 to 45 minutes. The setting of the interviews was either in-person or online, based on what was convenient and comfortable for the participant. The interviews were audio recorded with permission to help ensure accuracy in capturing responses.

The data gathering procedure began when the researcher secured permission from the school administration and obtained informed consent from the parent participants. Five parents or guardians of children diagnosed with autism and enrolled in the public SPED program in

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Las Piñas were then purposively selected based on the inclusion criteria. In-depth, open-ended interviews were carried out in a conversational manner, allowing participants to freely share their caregiving experiences, challenges, coping strategies, and perspectives on school support. The recorded interviews were transcribed verbatim to ensure accuracy and preserve the authenticity of participants' narratives. The transcripts were then systematically coded and examined using thematic analysis to identify recurring patterns and develop themes that captured the essence of the parents' lived experiences.

After all interviews had been conducted, the researcher began the analysis using thematic analysis. This study employed thematic analysis to examine the qualitative data gathered from parents of children with autism, following Braun and Clarke's (2021) framework. The process involved reading each transcript multiple times to identify significant statements and emerging patterns, with meaning drawn from the language used by the participants to describe their lived experiences. The researcher systematically coded the interview transcripts to identify recurring patterns of meaning. Initial codes were generated from participants' narratives and assigned to recurring ideas, and these codes were then organized into categories and later grouped into broader themes that captured the essence of their lived experiences and reflected the core topics of the study, namely lived experiences, challenges, coping strategies, and perceptions of SPED support. Thematic analysis was appropriate because it allowed the study to move beyond surface descriptions and uncover deeper insights into parents' emotional journeys, caregiving challenges, coping strategies, and perspectives on special education support. This process ensured that the findings reflected both individual accounts and shared experiences, providing a comprehensive understanding of the phenomenon under investigation.

The next step involved comparing the findings with existing literature and the theoretical lens. The study used Family Systems Theory, which guided the interpretation of the emotional, relational, and support-based patterns found in the data. In addition, the findings were compared with previous research that has examined similar experiences of parents of children with special education needs. This comparison helped identify what was consistent with current knowledge and what appeared unique to the local context.

The ethical standards that guided this study were based on respect for the dignity, rights, privacy, and well-being of participants, specifically parents of children with autism enrolled in a public SPED program in District 1, Pulanglupa Uno, Las Piñas. Participants received a clear explanation of the study's purpose, objectives, and procedures before providing written informed consent. The researcher described the nature of the interviews, the types of questions asked, the estimated time required, the interview process, the expected duration, and how the information would be used. Participation was voluntary, and each participant was requested to sign a consent form. This form explained that they had the right to withdraw from the study at any point without the need to provide a reason and without facing any consequences. Participants were also permitted to decline, skip questions, pause, or opt out of the study at any time without pressure or adverse consequences. The document further emphasized that participation would not influence their relationship with the school or any public institution.

Confidentiality and privacy were kept through the use of pseudonyms, elimination of identifying information, and secure storage of interview recordings, transcripts, and research notes, with access limited to the researcher. Given the sensitive nature of caregiving experiences, interviews were conducted respectfully while minimizing the risk of emotional discomfort. The researcher also guaranteed transparency throughout the study, addressed participants' concerns appropriately, and presented the findings accurately and responsibly.

RESULTS AND DISCUSSION

This chapter presents the findings from the interview data gathered from five parents and caregivers raising children with special education needs. The study used a phenomenological qualitative research design and purposive sampling to select five parents or guardians of children formally diagnosed with autism and enrolled in a public special education program in Las Piñas. Data were collected through a researcher-developed, semi-structured interview guide validated by experts, and the transcripts were analyzed through thematic analysis following the framework of Braun and Clarke (2021). The discussion is grounded in the data gathered, and the results are interpreted in direct relation to the four research problems of the study. Since the design is qualitative, no statistical tests, p values, or hypothesis decisions apply. The findings consist of participant narratives, themes, and insights.

Lived experiences of parents (Research Problem No. 1)

Participant 1 is a 32-year-old woman who works as a part-time office assistant while caring for her younger brother with autism. Her mornings begin very early to prepare routines before work, and her evenings are spent ensuring a calm environment at home. She relies heavily on her parents for emotional and practical support. She views caregiving as both a duty and a source of personal growth, and patience and compassion have become central values in her life. She draws strength from love for her child and from family solidarity. Her caregiving revolves around routines, beginning early to prepare her brother's environment and ending with calming rituals before bedtime. She explained that her day usually starts very early because she needs to prepare everything before her brother wakes up. Throughout the day she guides him with routines because he becomes comfortable when things are predictable, which shows that predictability is central to her caregiving. Schooling added new responsibilities, requiring coordination with teachers and emotional preparation, and she reflected that caregiving is shared between family and school.

Participant 2 is a 40-year-old father employed as a logistics supervisor. He balances a demanding work schedule with caregiving for his son, often sharing duties with his spouse to manage exhaustion. Public meltdowns are the most emotionally taxing moments for him, especially when he faces judgment from others. Despite these challenges, he finds strength in small victories, in solidarity with other parents, and in prayer, which helps him endure the emotional demands of parenting while maintaining resilience. He stressed structure and consistency, noting that caregiving requires constant attention. He shared that their day follows a routine of consistent activities, including therapy exercises and school preparation. Public meltdowns are the hardest for him, and when people stare or judge, he feels hurt and protective at the same time. Even so, he draws strength from small victories and realizes that progress is sometimes just a calm day or a small improvement.

Participant 3 is a 35-year-old mother who left her teaching career to focus full-time on caregiving for her child with autism. Her daily life revolves around structured routines, therapy sessions, and school coordination. Financial challenges from therapy costs weigh heavily on her, but she finds resilience through breathing exercises with her child and through her strong religious faith. She views caregiving as an act of love and sacrifice, with presence valued more than productivity, and she sees her child as her greatest source of strength. She shared that leaving her job was difficult, but she learned that presence matters more than productivity. Her daily life revolves around routines, meals, and therapy sessions, and she said predictability is very important because small changes can cause distress. Meltdowns are overwhelming because they affect the whole family. She copes through breathing exercises, inhaling and exhaling together with her child, and she said that faith helps her regain strength.

Participant 4 is a 38-year-old mother working from home as a freelance writer. She juggles household responsibilities with constant caregiving, often using music and calming activities to help her child regulate emotions. Emotional exhaustion is a recurring challenge, but she has grown more patient and enduring over time. Peer support from other parents provides reassurance, and faith helps her accept situations beyond her control. She sees caregiving as a transformative experience that reshaped her personality and outlook on life. She perceived caregiving as a continuous responsibility that required constant alertness throughout the day. Music and calming activities played an important role in maintaining emotional balance, particularly before bedtime. She also experienced emotional exhaustion in managing caregiving alongside household responsibilities, which at times became overwhelming. Despite these challenges, she recognized caregiving as a transformative experience that contributed to her growth, particularly through greater patience and understanding.

Participant 5 is a 42-year-old mother employed as a nurse. She carefully structures her day around her child's needs while managing professional duties. She described her daily caregiving routine as highly organized, with activities planned from morning until evening to sustain stability and prevent stress for her child. Schooling made her caregiving more organized but also more demanding, since it required coordination with teachers and monitoring of progress. Social judgment and fatigue are difficult for her, and she identified social situations and concerns about being judged as significant sources of stress that contributed to feelings of being overwhelmed. She sustains herself through family support, therapy centers, and her faith, which served as an important source of strength and grounding. Parenting is a humbling experience that taught her patience, humility, and self-care. She views her child as a blessing, which helps her remain hopeful and resilient.

Taken together, the five narratives revealed that caregiving for children with autism involved structured routines, emotional and social challenges, reliance on support systems, and personal transformation. Participants 1, 2, 3, and 5 emphasized consistency and predictability in managing their children's daily activities. This is consistent with Chaidi and Drigas (2020), who highlighted the value of structured environments and individualized strategies in supporting children with special educational needs. The participants' experiences of emotional exhaustion, public judgment, financial demands, and the need to balance caregiving with employment or household responsibilities reflect the challenges identified by Tokatly-Latzer et al. (2021), Currie and Szabo (2020), and Shattnawi et al. (2020), who reported emotional, social, and practical burdens among parents of children with autism. Despite these difficulties, the participants showed resilience through family support, peer connections, school coordination, coping strategies, and faith. This aligns with Fu et al. (2023), who emphasized that social support and effective coping mechanisms help parents manage caregiving demands, and with Kim and Dababnah (2019), who found that family, community, and religious support contributed to parental resilience. The participants also described caregiving as an experience that developed patience, compassion, acceptance, humility, and a stronger sense of purpose, which supports Young et al. (2020), who noted that parents may experience personal growth and increased emotional strength through adapting to caregiving challenges. Their growing sense of advocacy and commitment to their children corresponds with Kurowska et al. (2021), who found that parents may become advocates for improved educational and social opportunities for their children. Overall, caregiving was demanding and emotionally taxing, yet it also became a transformative experience in which love, family support, faith, and resilience enabled parents to adapt, grow, and advocate for their children.

Themes emerging from the lived experiences (Research Problem No. 2)

The thematic analysis yielded five themes: structured daily care, school adjustment, emotional challenges, support systems, and faith, love, and meaning-making.

Structured daily care

Structured daily care was a strong theme across all participants. Daily caregiving revolved around routines and predictability to maintain calmness and security. Participant 1 said, “Throughout the day, I guide him with routines because he becomes comfortable when things are predictable.” Participant 2 said, “Our day follows a routine… consistent activities throughout the day.” Participant 3 said, “Predictability is very important because small changes can cause distress.” Participant 4 said, “We use music and calming activities to maintain emotional balance,” and Participant 5 said, “My day is highly structured… routine prevents stress for my child.” Parents described days that began early to prepare meals, clothes, and calming environments and ended with rituals that help their children settle down. This structure was not only for the child’s benefit but also gave parents a sense of control and stability in a demanding caregiving role, since predictability reduces stress and helps both parent and child maintain emotional balance. This echoes Cercado et al. (2025), who noted that guiding healthy habits and structured routines are essential in managing the developmental needs of children with special education needs. The emphasis on routine shows that caregiving is not only about physical tasks but also about creating a secure environment.

School adjustment and shared responsibility

Schooling introduced new responsibilities, requiring coordination with teachers and therapists and the sharing of caregiving with institutions. Participant 1 said, “Caregiving is shared between family and school.” Participant 2 said, “Caregiving expanded beyond the home… communicate regularly with teachers and therapists.” Participant 3 said, “School became part of our caregiving system.” Participant 4 said, “Communication with teachers became part of my routine,” and Participant 5 said, “My routine became more organized around schedules and educational needs.” Schools were appreciated for teaching communication and social skills, but parents expressed concerns about gaps in teacher training and limited therapy services. This theme highlights the tension between gratitude for institutional support and frustration with systemic limitations. It aligns with Jigyel et al. (2019) and Berkant et al. (2019), who found that parental involvement in educational planning enhances children’s academic outcomes and emotional well-being, and it underscores the need for stronger school-home collaboration.

Emotional challenges and exhaustion

Parents faced meltdowns, public judgment, fatigue, and uncertainty, which led to emotional exhaustion but also resilience. Participant 1 said, “The most difficult moments are when he becomes overwhelmed by noise or strong emotions.” Participant 2 said, “Public meltdowns are the hardest for me… when people stare or judge.” Participant 3 said, “Meltdowns are very overwhelming because they affect the whole family.” Participant 4 said, “Emotional exhaustion is one of the biggest challenges,” and Participant 5 said, “Social situations can be overwhelming because I worry about judgment from others.” These challenges were compounded by the unpredictability of the child’s reactions to noise, transitions, or social situations. Parents nonetheless developed coping strategies such as

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breathing exercises, short breaks, prayer, and calming activities like music, which underscores the resilience they build in the face of constant emotional demands. This resonates with Balais et al. (2026), who found that parents of children with special needs often face emotional stress, social stigma, and physical exhaustion but demonstrate resilience through practical problem-solving and spiritual coping.

Support systems and community

Reliance on family, peers, and community support helped parents cope and sustain caregiving. Participant 1 said, "When I face challenges, I usually turn to my family, especially my parents." Participant 2 said, "The best support I receive is from other parents who truly understand." Participant 3 said, "I appreciate the care and concern extended by teachers and other parents." Participant 4 said, "Connecting with other parents of children with autism has been very helpful," and Participant 5 said, "Finding therapy centers and services recommended by specialists has been a big help." Family support, especially from spouses and relatives, was crucial, and peer support from other parents was particularly valued because it provided understanding and solidarity that others could not easily offer. Schools and therapy centers also played a role, although parents noted limitations in accessibility and consistency. The theme emphasizes the importance of community and shared caregiving in reducing isolation and strengthening resilience, and it is consistent with Pely (2025), who emphasized that social support and outside resources are vital adaptation processes for parents of children with disabilities.

Faith, love, and meaning-making

Caregiving was consistently framed as purposeful, motivated by love, strengthened by faith, and sustained by small victories. Participant 1 said, "My love for my child keeps me going." Participant 2 said, "Even the tiniest achievements feel like big victories." Participant 3 said, "Caregiving is an act of love that requires sacrifice." Participant 4 said, "I realized that love is shown through endurance and consistency. Faith also helped me accept situations beyond my control," and Participant 5 said, "My faith keeps me grounded. I believe my child is a blessing." Parents found meaning in small victories, whether a calm day or a minor improvement, and viewed their children as blessings. Faith emerged as a powerful source of strength that helped parents endure challenges and reframe difficulties as opportunities for growth. This mirrors Balais et al. (2026), who highlighted that acceptance of a child's condition is a gradual but transformative process that fosters empathy, patience, and hope.

These themes show that caregiving for children with special education needs is both demanding and transformative. Structured routines provide stability, school adjustments expand responsibilities, emotional challenges test resilience, support systems sustain coping, and faith and love give meaning to the experience. The findings support resilience theory (Masten, 1994), which suggests that families adapt to adversity through protective factors such as social support, emotional regulation, and meaning-making. Participants relied on structured routines to maintain stability and reduce stress, consistent with Chaidi and Drigas (2020) and Greenway and Eaton-Thomas (2020), who emphasized the value of structured and flexible routines. The school-home coordination they described is supported by Jigyel et al. (2019), Berkant et al. (2019), and Moyer and Goldberg (2019). Their emotional and social challenges and coping strategies align with Shattnawi et al. (2020), Currie and Szabo (2020), and Fu et al. (2023), and the support of family members, peers, schools, and therapy providers is consistent

with Fu et al. (2023), Kim and Dababnah (2019), and Pely (2025). Finally, the meaning found through love and faith corresponds with Young et al. (2020) and Kurowska et al. (2021), who found that caregiving may foster personal growth, emotional strength, and advocacy.

Insights from the emerging themes (Research Problem No. 3)

Five insights were derived from the themes, each with an implication. Routine as stability showed that structure reduces stress, which implies the importance of consistent interventions. Role transformation showed that parenting becomes collaborative, which implies the need to strengthen home-school partnerships. Emotional resilience showed that coping skills develop experientially, which implies a need for parent support programs. Support systems showed that external help improves well-being, which implies the need to expand institutional support. Compassionate growth showed that parenting fosters personal transformation, which implies the value of promoting strengths-based perspectives.

First, caregiving was fundamentally adaptive, as parents continuously adjusted routines, expectations, and emotional responses according to their child's developmental, behavioral, and sensory needs. Flexibility became an essential parenting competency, and the use of structured yet flexible routines helped parents maintain stability while responding to changing needs, consistent with Chaidi and Drigas (2020) and Greenway and Eaton-Thomas (2020). Second, parenting extended beyond the home, as schools became co-support systems that required coordination with teachers, therapists, and other school personnel. This highlights the importance of inclusive educational practices, strong home-school partnerships, and parental involvement, as supported by Jigyel et al. (2019), Berkant et al. (2019), and Moyer and Goldberg (2019). Third, emotional resilience developed gradually through lived experience rather than formal preparation. Parents learned to manage stress, exhaustion, social judgment, and challenging behaviors through prayer, breathing exercises, calming activities, and seeking support, which suggests the importance of psychosocial support programs and is consistent with Shattnawi et al. (2020), Currie and Szabo (2020), and Fu et al. (2023). Fourth, support networks significantly influenced parental well-being. Encouragement from spouses, relatives, peers, schools, and therapy providers reduced feelings of isolation and caregiver burden and promoted sustained engagement, supporting Fu et al. (2023), Kim and Dababnah (2019), and Pely (2025) regarding the protective role of social and community support. Finally, parents constructed meaning from caregiving through love, acceptance, faith, and recognition of their children's small achievements. This transformed challenges into sources of motivation, hope, patience, and appreciation of family relationships, consistent with Young et al. (2020) and Kurowska et al. (2021). Overall, parenting a child with special education needs is not only a process of managing challenges but also a continuous journey of adaptation, resilience, connection, and meaning-making.

The Villanueva Framework for SPED (Research Problem No. 4)

The Villanueva Framework for SPED focuses on the realities and needs of parents of children with special needs. It proposes that small and often repeated acts of care, such as cooking, keeping calm, and quiet prayer, create a moral pedagogy of belonging. Informed by Bronfenbrenner's ecological systems theory (1979), Mezirow's transformative learning theory (1997), family systems theory, and Braun and Clarke's reflexive thematic analysis (2021, 2024), the framework interprets inclusion not as a policy but as a moral rhythm of endurance, reflection, and faith. It was developed from the patterns, themes, and insights that emerged from the participants' narratives, which showed recurring experiences related to caregiving routines, school involvement, emotional challenges, support systems, faith, and advocacy.

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These patterns were organized into themes and interpreted in relation to the related literature and to resilience theory and the other theoretical foundations named above. The framework was therefore not derived from a single existing model but constructed through the synthesis of lived experiences, thematic findings, literature, and theory. It comprises nine interconnected components: Values, Inclusion, Lifeworld, Leadership, Advocacy, Network, Understanding, Empathy, and Virtue of Faith and Advocacy (Figure 2). It represents the researcher's interpretation of how parents, families, schools, and communities can work together to provide responsive, inclusive, and compassionate support. It is a living guide that humanizes special education, places compassion at the heart of reform, and invites educators and policymakers to learn from the emotional intelligence already present in families, where love serves as a structure and every small act of patience teaches justice.

Values-inspired care (V)

This component rests on the insight that inclusion is a pattern of care rather than a policy. Parents' rituals of predictability and calmness were small, hidden acts that teach children how to belong, and bath, breakfast, and bedtime routines acted as an unspoken grammar of emotional literacy. Order here was safety rather than control. Participants described how routines helped them manage their feelings. One said, "I need to wake up early to prepare his things" (Co-Participant 1, 1.3). Another said, "We do the same things: wake up, toilet, brush our teeth, same breakfast" (Co-Participant 2, 2.2). A third said that having a child with a routine takes great patience (Co-Participant 3, 3.1), and a fourth said, "I have learned that my patience could grow" (Co-Participant 4, 4.12). Through repetition, parent and child became emotionally predictable to each other, and the home became a quiet school of belonging. This reflects Bronfenbrenner's ecological systems theory, in which the most immediate emotional learning occurs in the microsystem. It also reflects Mezirow's transformative learning theory, in which reflection and adaptation reshape worldview, and Braun and Clarke's reflexive thematic analysis, in which meaning lies in reflection on the event. The researcher noted that co-participants were already practicing at home the self-regulation, predictability, and care that schools aim to build, and asked why this emotional intelligence is not taught in schools. When teachers treat structure as empathy rather than rigidity, classrooms can resemble these homes. The V therefore stands for values that ground inclusion through lived love.

Inclusion through rhythmic structure (I)

This component represents transformative love and resilient faith as endurance for meaning. Love in care is an ethical stance, and when fatigue sets in and routine is disrupted, love becomes a decision, so that fatigue becomes fortitude and pain becomes patience. Participants voiced this directly. Respondent 1 said, "I am fond of taking care of my brother. Serving brings me joy" (1.6). Co-Participant 2 said, "it is fine to take small steps and appreciate small wins" (2.19). Co-Participant 3 said, "He gives me strength" (3.16), Co-Participant 4 said, "I have changed because of him" (4.13), and Co-Participant 5 said, "They are God's gift to me" (5.8). Love here is a moral vocation, and faith worked like scaffolding that kept parents standing through long nights. These patterns illustrate Mezirow's view that transformation involves reconstruction of meaning through assessment and ordeal. In family systems terms, love functions as a thermostat that controls tension and restores order. Chaidi and Drigas (2020) found that when families emotionally attune to each other, resilience develops in children with

special needs. The researcher cautioned that such stories risk glamorizing perseverance and that institutions can also love through adversity, since compassion exposes an ethics vacuum where supports are absent. When systems lag, love intervenes, and while policies may give access, love makes one feel one belongs.

Lifeworld reflection (L)

This component treats compassion under pressure as an art of staying steady in the storm. Parents cared not only in quiet times but in the loudest public crises, where gentleness under strain became a form of teaching. Participants described these moments. One said his brother was "scared of loud things" (Co-Participant 1, 1.7). Another recalled, "Public meltdown in the grocery everyone stares but I stay calm" (Co-Participant 2, 2.21). Others said, "The worst part is when he has a meltdown" (Co-Participant 3, 3.4), "It's tiring when the tantrums happen" (Co-Participant 4, 4.14), and "He gets stimulated even by things that are not so much" (Co-Participant 5, 5.1). Calmness was interpreted as emotional mastery rather than passivity. Through family systems theory, a parent's calm functioned as emotional co-regulation, and through Bronfenbrenner's microsystem, children learned empathy by imitation rather than instruction. Through Mezirow, each episode of patience marked a shift in how difficulty is understood, and through Braun and Clarke (2021, 2024) the narratives were read as multilayered performances of moral reasoning. Chaidi and Drigas (2020) support that structured calmness decreases anxiety and improves adaptive behavior in children with autism. The researcher concluded that managing one's emotions is pedagogical as well as therapeutic, and that when institutions share the parents' attitude, inclusion becomes an ethic rather than a policy ideal.

Leadership through nurturance (L)

This component concerns linkages of shared support and belonging. Inclusion was seen as a shared moral project built from the home to the school to the community, and as a relationship rather than a program. Participants located belonging in small things. One said, "He teaches my child to say 'sorry'" (Co-Participant 1, 1.15). Another said, "the best support is other parents" (Co-Participant 2, 2.25). A mother noted, "The teachers tell the other kids about my child" (Co-Participant 3, 3.9). A fourth said, "Support from other parents keeps me going" (Co-Participant 4, 4.16), and a father said, "It takes a village to raise a child" (Co-Participant 5, 5.9). Cooperative family-school linkages correspond to the mesosystem in Bronfenbrenner's theory, and parent-teacher relationships involve critical reflection as described by Mezirow. Following Braun and Clarke (2021), collaboration itself was treated as data. Majoko and Dudu (2020) found that inter-stakeholder collaboration enhances adaptive outcomes for learners and caregivers. The researcher observed that the real strength of inclusion policies lies in how people live them, and concluded that inclusion happens where people meet before systems do.

Advocacy through adaptive sacrifice (A)

This component addresses the silent courage of parents who give up their own comfort for their child. Sacrifice was interpreted as a re-ordering of life around what matters and as recalibration rather than loss. Participants described it. One said, "I can do everything for him" (Co-Participant 1, 1.18). Another said, "Even fifteen minutes to breathe helps me start again" (2.35). A mother admitted, "I left my job so I could take care of my child," and noted that balancing work and home is hard. A father said that he loves nothing better than to sleep or go

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out alone. Through family systems theory, these acts redistribute emotional energy, and through Bronfenbrenner, personal decisions influence community, school, family, and society. Through Mezirow, renunciation can bring a perspective shift in which hardship is reinterpreted as ethical growth. Majoko and Dudu (2020) and Chaidi and Drigas (2020) indicate that such adaptation arises from moral necessity and teaches children emotion regulation through modeled patience. The researcher asked why parental weariness is so readily renamed devotion, and concluded that rest is moral maintenance, so that a parent who says "I rest to recharge" exercises the softest form of advocacy. Actual inclusion cannot depend on invisible labor and must depend on visible justice.

Networked compassion and shared resilience (N)

Here inclusion thrives only when compassion is cooperative, with families, teachers, and communities sharing the moral labor. The participants' voices again served as evidence: "Just having other parents there keeps me going" (Co-Participant 4, 4.16), "The teachers inform the other children about my child" (Co-Participant 3, 3.9), and "It takes a village to raise a child" (Co-Participant 5, 5.9). Bronfenbrenner's mesosystem describes these bonds, family systems theory describes them as shared regulation, and Mezirow describes the interdependence as a perspective shift through reflection with others. Conversation was treated as data following Braun and Clarke (2021, 2024). According to Majoko and Dudu (2020) and Papadopoulos (2021), collaboration and empathy promote adaptive learning and emotional literacy. The researcher read parental cooperation as moral protest rather than passive endurance, recognized his own place within that web as researcher, teacher, and witness, and concluded that solidarity is the motor of inclusion rather than an accessory to it.

Understanding as systemic equity (U)

This component builds on adaptive sacrifice and moral renewal as scaffolding that reconstructs the mundane through love. Parents gave up dreams, rest, or financial security and in doing so changed what it means to live ethically alongside another. Testimonies included "I can do everything for him" (1.18), "Even if it's just fifteen minutes to breathe, I take it" (Co-Participant 2, 2.35), "I had to resign from work because of my child" (Co-Participant 3, 3.2), "It's difficult to split my time" (Co-Participant 4, 4.6), and "I took a break, sleeping and going out by myself" (Co-Participant 5, 5.7). These choices were interpreted as emotional redistributions that stabilize the household and, through Bronfenbrenner, radiate to school, workplace, and community. Through Mezirow, they were perspective transformation, and through Braun and Clarke (2021, 2024), the stories were active texts. Majoko and Dudu (2020) hold that caregivers change out of moral necessity, and Chaidi and Drigas (2020) affirm that adaptive behaviors have calming effects that help stabilize the child. The framework also questioned why care architectures depend on the moral pliability of parents, and read the parents' statement "I rest to recover strength" as a sign that self-care belongs within caring. The study's author remarked that inclusion should not depend on invisible labor but on visible justice.

Empathy networks (E)

This component describes the web of morality that forms when love alone is insufficient. Policy promises equality, while parents practice it, creating temporary networks

of understanding to compensate for absent structures. Participants made the tensions visible. A mother said that the teacher does not have training (Co-Participant 2, 2.32). Another admitted waiting years for free therapy (3.24), and a third mentioned that private therapy is too expensive (3.25). A father said everything gets affected, and another co-participant said, "We need more public schools for SPED." These statements combined weariness with faith and were testimonies of conscience rather than complaints. In Bronfenbrenner's terms, the family microsystem conflicts with the bureaucratic ecosystem. Family systems theory explains how parents share feelings so that families stabilize, and Mezirow views frustration as reflective inquiry in which anger becomes awareness and advocacy. Majoko and Dudu (2020), Papadopoulos (2021), and Chaidi and Drigas (2020) are cited as describing prolonged inequity producing moral fatigue. The researcher recognized the good intent of Republic Act 11650, which ensures access for everyone, but noted that families' experiences say otherwise. Love can heal individuals, but justice repairs communities, and inclusion matures only when private sympathy becomes public responsibility.

Virtue of faith and advocacy (VA)

This component presents faith, hope, and the grammar of endurance as a living pedagogy that turns exhaustion into meaning. Participants used belief-based narratives to work through exhausting moments. One parent said, "When I'm tired during the day, I breathe and drink water and then pray" (Co-Participant 3, 3.11). Another said, "This child is a gift from God" (Co-Participant 5, 5.18). Co-Participant 4 said, "Faith calms and makes patient and puts the suffering in perspective" (4.13), and Co-Participant 5 also said, "Even if they may be tired, the challenges of my life are not burdens but gifts of thankfulness" (5.19). Another said, "I can stay calm but alert while working or worshipping because of faith." Through family systems theory, faith mediates and reduces collective stress and strengthens solidarity. Through Mezirow, faith turns disorienting dilemmas into moral awakening, and through Braun and Clarke (2021, 2024), faith is read as embodied knowledge. Papadopoulos (2021) and Majoko and Dudu (2020) link the resilience of parents of children with disabilities to spirituality, and Chaidi and Drigas (2020) hold that faith creates peace amid intense feelings of care. The researcher read faith as both salvation and indictment, since it sustained families where systems failed them, and concluded that faith critiques as well as comforts, and that systems should acknowledge and respond to this moral labor.

Synthesis

The findings from the five participants address all four research problems. Research Problem No. 1 showed that caregiving was shaped by structured routines, emotional and social strain, reliance on support systems, and personal transformation. Research Problem No. 2 yielded five themes: structured daily care, school adjustment, emotional challenges, support systems, and faith, love, and meaning-making. Research Problem No. 3 produced five insights on routine as stability, role transformation, emotional resilience, support systems, and compassionate growth, each with a practical implication for interventions, home-school partnerships, parent support programs, institutional support, and strengths-based perspectives. Research Problem No. 4 resulted in the Villanueva Framework for SPED, which organizes these experiences into nine components. Across all four problems, the results align with resilience theory (Masten, 1994) and with the literature cited, and they contribute a locally grounded, parent-centered account of caregiving in a public SPED program in Las Piñas, together with a framework that treats compassion as the basis of inclusive reform. Because five

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participants were purposively selected, the findings are interpretive and context-specific. The next chapter builds on them by presenting the summary, conclusions, and recommendations.

CONCLUSION

This chapter brings together the findings, conclusions, and recommendations of the study across SOP 1 to SOP 4. It draws on the lived experiences of parents of children with special education needs (SEN), the themes and insights that emerged from their narratives, and the proposed Villanueva Framework for Special Education. The results are presented in the order in which they were obtained, and the analysis and interpretation of the data form the basis of the conclusions. The recommendations are framed to improve the application and usability of the framework in school and community settings. The study explored the daily caregiving realities, emotional journeys, challenges, and insights of parents raising children with SEN. Using thematic analysis within an Interpretative Phenomenological Analysis (IPA) framework, it examined interview data from five co-participants to understand both shared meanings and individual interpretations of caregiving.

The findings on the first research problem show that the lived experiences of parents are marked by structured caregiving routines, emotional challenges, social pressures, and sources of resilience. All participants underscored the centrality of routines in managing their children's needs. Participant 1 described starting her day early to prepare her brother's environment, and Participant 2 noted that the day follows a routine with consistent activities throughout. Predictability was seen as necessary for minimizing distress and sustaining stability. Parents also reported steady emotional exhaustion, particularly during public tantrums and overwhelming caregiving demands. Participant 2 explained that public meltdowns are the hardest, because when people stare or judge, she feels hurt and protective at the same time, while Participant 4 described caregiving as continuous and emotionally draining. Related to this, several participants emphasized the stigma and judgment they faced in public and social settings. Participant 5 worried about the judgment of others, which contributed to feelings of isolation and pointed to the need for understanding communities. Caregiving was likewise described as a shared responsibility between family and school, as Participant 1 reflected, and family communication and coordination with teachers were pivotal in sustaining caregiving practices. Faith and personal coping mechanisms were central sources of resilience. Participant 3 shared that she and her child inhale and exhale together and that faith helps her regain strength, and Participant 5 said faith grounded her perspective and led her to view her child as a blessing despite the challenges. Parents further described caregiving as transformative, reshaping their values and outlook. Participant 4 noted that caregiving made her more patient and understanding, and Participant 1 viewed it as both a duty and a source of personal growth. Finally, Participant 3 highlighted the financial burden of therapy costs, which added an economic dimension that compounded the emotional and social challenges.

Building on these experiences, the findings on the second research problem show that parents consistently described caregiving as structured and routine-based, with predictability stabilizing both child and caregiver. The transition to schooling introduced shared responsibilities that required coordination with teachers and therapists. Parents valued this coordination but also found it demanding because of gaps in training and limited services. Emotional challenges such as meltdowns, public judgment, and fatigue recurred across narratives, yet parents showed resilience through calming activities, prayer, and short breaks. Reliance on support systems, including family, peers, schools, and therapy centers, was crucial in sustaining caregiving and reducing isolation. Caregiving was also consistently framed as

purposeful and transformative, motivated by love, sustained by faith, and given meaning through small victories and the belief that their children are blessings. Together, these themes portray caregiving as both demanding and transformative, and they align with resilience theory, which emphasizes adaptation through protective factors such as structured routines, social support, emotional regulation, and meaning-making.

The insights drawn from these themes, which address the third research problem, reveal caregiving as a fundamentally adaptive process. Routines and predictability provide stability, reduce stress, and create a secure environment for both child and caregiver, which highlights the importance of consistent interventions that reinforce structure across home and school. Parenting also emerged as a collaborative role that extends beyond the household into schools and therapy centers, underscoring the need for strong home-school partnerships and inclusive educational practices. Emotional resilience developed experientially rather than through formal preparation, as parents learned coping strategies through repeated exposure to meltdowns, fatigue, and public judgment, which points to the necessity of psychosocial support programs tailored to their lived realities. Support systems, including family, peers, and institutional services, significantly influenced parental well-being by reducing isolation and sustaining engagement in caregiving. Moreover, parents drew strength from love, faith, and small victories, and this meaning-making allowed them to reframe challenges as opportunities for growth, affirming that parenting children with SEN fosters compassionate transformation and resilience.

From these findings, it is concluded that the lived experiences of parents and guardians raising children with SEN are characterized by structured caregiving routines, emotional challenges, reliance on family and peer support, and meaning-making through love and faith. Routines provide stability and predictability, while meltdowns, public judgment, and fatigue test resilience. Parents sustain their caregiving roles through solidarity, coping strategies, and spiritual strength, reframing caregiving as purposeful and transformative. It is further concluded that parents and guardians encounter multifaceted challenges, including emotional exhaustion, financial strain, social stigma, and the constant demands of caregiving. Public meltdowns and societal judgment intensify emotional burdens, while therapy costs and limited institutional resources add financial stress, and these challenges highlight the need for systemic interventions that address both the psychosocial and economic dimensions of caregiving to ensure parental well-being and sustainability. Taken together, caregiving for children with SEN emerges as both adaptive and transformative. Parents and guardians construct stability through routines, extend caregiving into collaborative partnerships with schools, and develop resilience through lived experience, while support networks sustain well-being and faith and love provide meaning and motivation. These insights affirm the importance of consistency, collaboration, psychosocial support, and strengths-based approaches in supporting families holistically.

Consistent with these conclusions, the study produced the Villanueva Framework for SPED, an enhancement plan that positions caregiving as values-driven and transformative. It emphasizes structured routines, collaborative home-school partnerships, psychosocial support, and strengths-based perspectives. By integrating love, faith, and advocacy into instructional practices, the framework promotes humane and inclusive education and ensures that families and schools work together to sustain meaningful learning for children with SEN.

In light of these conclusions, the following recommendations are offered as tentative and preliminary thoughts rather than firm prescriptions, and everyone is invited to engage in ongoing conversations about the inclusion, care, and responsiveness of the system. Parents are encouraged to apply the principles of the framework by strengthening Values, Understanding, Empathy, and Virtues of Faith and Advocacy in their daily caregiving. They may continue establishing structured and responsive routines while recognizing their children's individual needs and abilities, and they may strengthen their Network by collaborating actively with

teachers, SPED professionals, family members, and community support groups. Their participation in educational planning, monitoring, and advocacy may further promote Inclusion and support their children's holistic development. General education teachers are encouraged to integrate the principles of Inclusion, Understanding, and Empathy into classroom practice by providing predictable routines, differentiated instruction, and appropriate accommodations while maintaining open communication with parents. Professional development on inclusive pedagogy, empathy, and understanding of learners with SEN should be strengthened so that teachers can respond more effectively to diverse learning needs. SPED teachers are encouraged to strengthen Leadership, Advocacy, Understanding, and Empathy in their professional practice, establish consistent communication with families, provide regular feedback on learners' progress, and guide parents in understanding and responding to their children's needs. Values-driven and individualized approaches should be promoted, with professional development focusing on resilience-building, family systems, parent collaboration, and culturally responsive SPED practices.

At the institutional and policy levels, schools are encouraged to use the Villanueva Framework for SPED as a guide in developing programs that promote Inclusion, Network, Leadership, and Advocacy. Structured home-school partnership programs may be established to give parents meaningful opportunities to participate in educational planning and decision-making, and schools may strengthen access to counseling, therapy services, parent education, and peer-support groups to address caregiver stress and reduce isolation. A school culture grounded in Values, Understanding, and Empathy may further create a more responsive and family-centered SPED environment. Policymakers are likewise encouraged to consider the framework's principles in strengthening inclusive education policies and programs. Resource allocation may prioritize SPED facilities, teacher training, family support services, and accessible intervention programs, and policies should recognize parents as active partners and advocates in their children's education while promoting Inclusion, Advocacy, Leadership, Network, and Values as essential elements of sustainable support for families of children with SEN. Finally, future researchers are encouraged to examine and validate the framework across different populations, geographical settings, disability groups, and educational contexts. Studies may investigate the applicability of its nine components, namely Values, Inclusion, Lifeworld, Leadership, Advocacy, Network, Understanding, Empathy, and Virtues of Faith and Advocacy, and determine how these elements interact in strengthening family resilience, inclusive education, and parent-school partnerships. Comparative and longitudinal studies may also deepen understanding of how cultural, familial, and institutional factors influence the experiences of parents raising children with SEN.

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