

Lived Experiences of Parents in Raising their Children with Disabilities in Barangay Lacnog East

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ABSTRACT

This mixed-methods study examined the lived experiences of parents raising children with disabilities in Barangay Lacnog East, Tabuk City, Kalinga. It described caregiver profiles, assessed awareness of rights and privileges under Republic Act No. 9442, identified major caregiving challenges, and tested differences in awareness across demographic characteristics. Eleven primary caregivers participated. Quantitative data from a structured four-point awareness questionnaire were analyzed using frequency, percentage, weighted mean, independent-samples t-test, and one-way analysis of variance, while semi-structured interviews were analyzed thematically. Most respondents were female (81.82%), all were married, 72.73% were unemployed, and 72.73% relied on farming as the household income source. Awareness of statutory rights was

Highly Aware ($M = 3.53$), with the highest awareness for mandatory PhilHealth coverage and state family support ($M = 3.73$ each). Awareness of commercial privileges was Aware ($M = 2.93$), ranging from high awareness of medicine discounts ($M = 3.55$) to low awareness of restaurant discounts ($M = 2.36$). Four qualitative themes emerged: financial and economic strain, physical and caregiving demands, emotional and social challenges, and structural and institutional gaps. Educational attainment was the only profile variable associated with significant differences in awareness of both rights ($F = 8.00$, $p = .032$) and privileges ($F = 15.70$, $p = .009$). The findings indicate that rural caregiving is shaped by economic vulnerability, unequal access to services, social stigma, and uneven policy literacy, supporting localized information campaigns, health and rehabilitation access, parent support networks, and livelihood assistance.

Keywords: *caregivers, children with disabilities, disability rights, lived experiences, Republic Act No. 9442, rural social work*

INTRODUCTION

Raising a child requires sustained emotional, physical, and material resources, and these demands can become more complex when a child has a disability. Contemporary perspectives understand disability not only as an individual health condition but as an interaction between impairment and environmental barriers that can restrict participation. The World Health Organization (2001) and Sadiki (2023) emphasize this interactional and contextual perspective, which places family, community, service systems, and social inclusion within the experience of disability.

Parents of children with disabilities often carry long-term caregiving responsibilities while navigating healthcare, education, rehabilitation, social stigma, and household economic pressures. International and

Philippine literature has documented parental stress, uneven access to services, discrimination, and the central role of informal and family support (Arabis-Quijote et al., 2023; Kim et al., 2022; Lasco et al., 2022). In rural communities, these pressures may be intensified by distance from specialized services, unstable livelihoods, limited information channels, and fewer opportunities for respite or professional support.

Legal protections are intended to reduce these barriers. Republic Act No. 9442 expanded protections and privileges for persons with disabilities, while Republic Act No. 10754 further broadened benefits and discounts. However, the existence of legal entitlements does not ensure that families understand or can access them. Caregivers who have limited policy information or face administrative and service barriers may remain unable to claim benefits that could reduce the financial and practical burden of caregiving.

The source study identified a specific local evidence gap in Barangay Lacnog East, Tabuk City, Kalinga. Although broader research has examined disability, family stress, and inclusion, localized evidence on parents' daily experiences, policy awareness, and service barriers was limited. The study therefore described the caregivers' demographic profile, assessed their awareness of disability rights and privileges, explored the challenges they faced, and determined whether awareness differed across selected demographic characteristics. The resulting evidence was intended to support more responsive social-welfare, health, barangay, and family-support interventions.

Literature Review

Demographic Profiles and Socioeconomic Realities of Caregivers

Parental age, sex, education, civil status, employment, and income source influence how families organize caregiving and obtain assistance. Balais (2026) described the lived experiences of parents of children with special needs and noted the demanding character of day-to-day care. In many families, mothers assume the primary caregiving role, which can reduce opportunities for formal employment and contribute to persistent physical and emotional strain.

Economic instability compounds these demands. Lasco et al. (2022) reported parental stress and everyday caregiving pressures among Filipino families of children with disabilities, while the Department of Social Welfare and Development (2022) documented continuing concerns in disability access, inclusion, and social protection. In rural settings, irregular income and the cost of specialized care can create difficult trade-offs between treatment, education, transportation, and basic household needs.

Awareness of Disability Rights, State Policies, and Legal Protections

Philippine disability policy provides a formal basis for participation, protection, and access to benefits. Republic Act No. 9442 amended the Magna Carta for Disabled Persons and strengthened privileges for persons with disabilities, while Republic Act No. 10754 expanded statutory benefits and discounts. These policies include access to health-related support, educational opportunities, commercial discounts, and other protections intended to reduce the disadvantages associated with disability.

Policy awareness, however, may be uneven. Families may know provisions that they encounter frequently, such as medicine-related discounts or health insurance, while being less familiar with commercial, transportation, or other privileges. The source study therefore treated legal awareness as a practical form of access: a right or privilege can only be effectively claimed when caregivers know that it exists and understand how to use it. This concern is particularly relevant to rural communities where information dissemination and administrative assistance may be limited.

Psychosocial, Financial, and Caregiving Challenges

Caregivers frequently experience overlapping emotional, financial, physical, and social burdens. Kim et al. (2022) found that parents of children with developmental disabilities encountered complex experiences requiring adaptation across family and service systems. Lasco et al. (2022) likewise documented stress associated

with everyday caregiving in Filipino families, while Arabis-Quijote et al. (2023) highlighted coping processes among Philippine parents raising children with disabilities.

Financial strain often arises from medicines, diagnostic procedures, therapy, transportation, and recurring healthcare costs. Physical strain develops through continuous supervision, feeding, hygiene assistance, mobility support, and behavioral management. Emotional distress can also be intensified by stigma, bullying, and community misunderstanding. Sol Cruz et al. (2021) emphasized the role of community perceptions in disability inclusion in Northern Luzon, underscoring how social attitudes can influence the well-being of both children and their families.

Access to Health, Rehabilitation, and Community Support

Access to appropriate services is a central component of family support. Chiu et al. (2023) identified barriers to rehabilitation access among children with disabilities in the Philippines, while UNICEF (2022) and the World Health Organization (2023) emphasized continuing service, rehabilitation, and inclusion concerns affecting children with disabilities. In rural communities, limited local facilities can require families to travel to urban centers for diagnosis, therapy, or specialized treatment, increasing both financial and caregiving burdens.

Community and local-government systems can mitigate these difficulties when services are accessible and coordinated. The Tabuk City Local Government Unit (2023) reported local social-welfare initiatives for persons with disabilities, while community-based support can help families navigate registration, benefits, referrals, and monitoring. The present study therefore examined not only household-level challenges but also structural and institutional gaps that shape the lived experience of caregiving.

Coping, Resilience, and Family Adaptation

Families use multiple strategies to manage chronic caregiving stress. Lazarus and Folkman (1984) conceptualized coping as the cognitive and behavioral efforts used to manage demanding situations. Within disability caregiving, problem-focused strategies may include seeking services, information, and financial assistance, while emotion-focused strategies may involve acceptance, faith, family support, and peer connection.

The source conceptual framework used an ecological perspective to explain how parental experiences emerge from interactions among family, school, health, community, and policy environments. It also emphasized that families of children with disabilities may experience both challenges and resilience across service and social systems. This ecological framing supports interventions that address not only the child or parent but also the broader community and institutional environment.

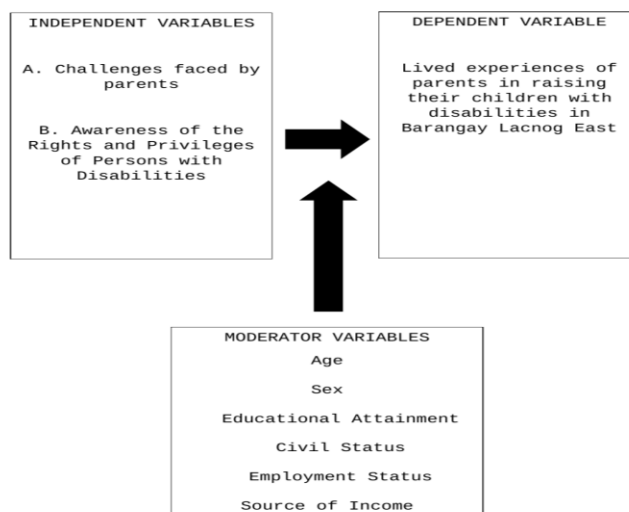


Figure 1. Paradigm of the Study

METHODS

Research Design

The study employed a mixed-methods research design integrating quantitative and qualitative approaches. The quantitative component described respondent profiles, measured awareness of rights and privileges under Republic Act No. 9442, and tested differences in awareness across profile groups. The qualitative component explored parents' lived experiences and caregiving challenges through semi-structured interviews and thematic analysis.

Research Locale

The study was conducted in Barangay Lacnog East, Tabuk City, Kalinga, a locality also identified in the source references through the PhilAtlas (2020) community profile. The locale was selected because it had identified parents raising children with disabilities who could provide quantitative and qualitative information regarding caregiver profiles, awareness of legal rights and privileges, and the challenges encountered in daily caregiving.

Participants and Sampling Technique

Eleven primary caregivers participated in the study. The source manuscript does not identify a formal probability or non-probability sampling label. Qualified respondents were identified in coordination with barangay health workers after institutional permission was secured, and the 11 participating caregivers comprised the quantitative and qualitative respondent group.

Research Instrument

The data-gathering instrument consisted of a structured questionnaire and semi-structured interview questions. Part I gathered demographic information on age, sex, educational attainment, civil status, employment status, and source of income. Part II measured awareness of rights and privileges of persons with disabilities using a four-point Likert scale from 1 (Not Aware) to 4 (Highly Aware). Part III elicited the challenges experienced by parents raising children with disabilities.

The instrument underwent content validation by three validators: a Social Welfare Officer III, the department head of the City Special Concerns and Coordinating Office, and the Barangay Captain of Barangay Lacnog East. Their comments and recommendations were incorporated before administration. The source manuscript reports content validation but does not provide a reliability coefficient; therefore, no reliability statistic was added to the journal article.

Data Gathering Procedure

The researchers first obtained approval from the research adviser and permission from the Barangay Captain of Barangay Lacnog East. They then coordinated with barangay health workers to identify qualified respondents. The study purpose was explained to participants, informed consent was secured, and questionnaires and interviews were administered. Information gathered was treated as confidential and used for academic purposes.

Data Analysis

Frequency counts and percentages summarized respondent profiles. Weighted means described levels of awareness of rights and privileges. An independent-samples t-test was used for sex, while one-way analysis of variance was used for age, educational attainment, civil status, employment status, and source of income where applicable. The significance level used in interpreting the reported p-values was .05. Qualitative responses were transcribed, coded, categorized, and analyzed thematically to identify recurring caregiving challenges.

Ethical Consideration

Participation followed prior permission from the research adviser and barangay authorities. Respondents received an explanation of the study and provided informed consent before questionnaire administration and interviews. The source documents state that responses were treated confidentially and used solely for academic purposes. The article reports results in aggregate form and uses brief de-identified excerpts from participant narratives.

RESULTS AND DISCUSSION

Profile of the Caregivers

The 11 caregivers were predominantly female, with nine women (81.82%) and two men (18.18%). All respondents were married. Ages ranged from 31 to 50 years, placing the participants within prime working adulthood while simultaneously carrying sustained caregiving responsibilities. Eight respondents (72.73%) were unemployed, and eight (72.73%) reported farming as the primary household source of income.

Table 1. *Selected Demographic Characteristics of the Respondents*

Characteristic	Category	Frequency	Percentage
Sex	Female	9	81.82%
Sex	Male	2	18.18%
Civil status	Married	11	100.00%
Employment	Unemployed	8	72.73%
Employment	Employed	3	27.27%
Income source	Farming	8	72.73%
Income source	Salary/Wage	3	27.27%

Educational attainment was heterogeneous, ranging from no formal schooling to college graduation. The source manuscript interprets slightly over half of respondents as having college-level exposure when college undergraduate and college graduate categories are considered together. This educational variation became important in the inferential results because educational attainment was the only demographic variable associated with statistically significant differences in awareness of both rights and privileges.

Awareness of Rights under Republic Act No. 9442

Parents demonstrated a Highly Aware overall level of awareness of statutory rights, with a categorical mean of 3.53. The highest-rated items were mandatory PhilHealth coverage and state family support, both with means of 3.73. Awareness of quality education, including free public education and SPED programs, was the lowest-rated right at 3.27, although it remained within the Highly Aware range.

Table 2. *Awareness of Disability Rights*

Indicator	Mean	Interpretation
Mandatory PhilHealth coverage	3.73	Highly Aware
State family support	3.73	Highly Aware
Right to health	3.45	Highly Aware
Right to non-discrimination	3.45	Highly Aware
Right to quality education/SPED	3.27	Highly Aware
Categorical mean	3.53	Highly Aware

The pattern suggests that caregivers were most familiar with rights connected to immediate health and family-support needs. The comparatively lower awareness of education-related rights may reflect differences in how frequently families encounter or receive information about SPED services. This finding is consistent with the

broader concern that legal protections may be unevenly translated into practical knowledge at the community level.

Awareness of Privileges

Awareness of commercial and economic privileges was lower than awareness of statutory rights. The categorical mean was 2.93, interpreted as Aware. Medicine discounts received the highest mean (3.55, Highly Aware), while restaurant discounts received the lowest mean (2.36, Less Aware). Transport-fare discounts, funeral or burial benefits, and basic-necessities discounts were all within the Aware range.

Table 3. *Awareness of Disability Privileges*

Privilege	Mean	Interpretation
20% discount on medicines	3.55	Highly Aware
20% restaurant discount	2.36	Less Aware
20% transport-fare discount	2.73	Aware
20% funeral/burial services discount	3.09	Aware
5% basic necessities discount	2.91	Aware
Categorical mean	2.93	Aware

These results show a practical divide between benefits linked directly to recurring medical needs and those used less frequently in the rural household context. Medicine discounts are closely connected to routine caregiving expenses, whereas restaurant-related benefits may be less salient to farming households. The pattern supports targeted information campaigns that explain the full range of legally available privileges rather than assuming that possession of a PWD identification card automatically produces complete policy awareness.

Challenges Experienced by Parents

Thematic analysis yielded four major and interconnected challenge domains: financial and economic strain, physical and caregiving demands, emotional and social challenges, and structural and institutional gaps. Financial strain arose from medicines, hospital expenses, diagnostics, and other recurring health costs, often in households dependent on uncertain agricultural income. This aligns with Lasco et al. (2022), who described economic and stress burdens in Filipino disability caregiving.

Physical and caregiving demands involved daily assistance with feeding, bathing, teaching, behavioral needs, developmental delays, and repeated hospital care. The burden of continuous supervision restricted employment and personal time. Emotional and social challenges included sadness, worry, stigma, ridicule, and bullying directed toward children with disabilities. These experiences reflect the importance of community attitudes noted by Sol Cruz et al. (2021) and the broader psychosocial burden identified in disability-caregiving research.

Structural and institutional gaps further intensified family strain. Respondents described limited access to specialized diagnostic equipment and services and expressed a need for stronger local information about programs and entitlements. The desire for more accessible diagnostic and rehabilitation services is consistent with Chiu et al. (2023), while the continuing need for inclusive services is also reflected in UNICEF's (2022) situation analysis of children with disabilities in the Philippines.

Differences in Awareness across Demographic Profiles

Educational attainment was the only demographic characteristic associated with significant differences in awareness of both rights and privileges. For rights, the reported ANOVA result was $F = 8.00$, $p = .032$; for privileges, $F = 15.70$, $p = .009$. Both p-values were below .05. Age, sex, employment status, and source of income did not show statistically significant differences in either awareness measure.

Table 4. *Differences in Awareness by Demographic Profile*

Profile Variable	Rights: Test / p	Privileges: Test / p	Interpretation
Age	F = 8.95 / .104	F = 3.27 / .256	Not significant
Sex	t = 0.00989 / .923	t = 0.00323 / .956	Not significant
Educational attainment	F = 8.00 / .032	F = 15.70 / .009	Significant
Employment status	F = 0.0390 / .838	F = 0.0167 / .900	Not significant
Source of income	F = 0.0167 / .900	F = 0.0390 / .848	Not significant

The result indicates that educational background was particularly important to functional policy literacy in this small caregiver sample. Parents with greater educational exposure may have stronger access to written information, administrative processes, and institutional communication. Because the sample consisted of only 11 caregivers, however, the reported inferential findings should be interpreted within the limited local scope of the study and should not be generalized beyond the participants without further research.

CONCLUSION

Parents raising children with disabilities in Barangay Lacnog East experienced caregiving within a context of economic vulnerability, intensive daily care, social stigma, and limited access to specialized services. The caregiver group was predominantly female, married, unemployed, and dependent on farming income, illustrating how disability care can intersect with restricted employment opportunities and unstable household resources.

Parents were highly aware of core statutory rights but only generally aware of commercial and economic privileges. Knowledge was strongest for benefits directly tied to health and family support, while awareness was weaker for some merchant-level discounts. Educational attainment was the only profile characteristic associated with significant differences in awareness of both rights and privileges, suggesting that policy literacy is partly shaped by access to education and information.

The study contributes localized evidence showing that caregiver well-being cannot be addressed through legislation alone. Effective disability support in rural communities requires accessible information, responsive health and rehabilitation services, livelihood and financial support, anti-stigma initiatives, and organized parent networks that connect families to local institutions and statutory benefits.

Recommendation

The Department of Social Welfare and Development and the City Social Welfare and Development Office should strengthen livelihood and financial-support options for unemployed caregivers, including home-based livelihood assistance that can be combined with intensive caregiving responsibilities. Localized information drives should use simple language and, where appropriate, local-language materials to explain PWD rights, identification requirements, transport and basic-needs discounts, and other benefits.

Health authorities should improve access to specialized diagnostics, therapy, rehabilitation, screening, and developmental monitoring within or near Tabuk City and strengthen home-based or mobile services for families with mobility and transportation constraints. Barangay leaders should support parent networks, anti-stigma and anti-bullying activities, and a more active local PWD help desk for families who need assistance with registration and benefit claims.

Future research should include larger caregiver samples, additional barangays, and longitudinal or comparative designs to examine how awareness and caregiving challenges differ across communities. Further studies may also assess the effectiveness of community information campaigns, livelihood programs, parent-support groups, and local rehabilitation services.

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