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LSEN Parents' Awareness and Perspectives On Special Education Services for Children with Special Needs

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Abstract: This study investigates the awareness and perspectives of parents of Learners with Special Educational Needs (LSEN) in Baguio City on the availability and accessibility of special education services. Using a qualitative approach, a Focus Group Discussion (FGD) was conducted with nine (9) 'ausome' parents of children with special needs enrolled in inclusive primary schools. The discussion explored their experiences in seeking and availing of community-based services such as assessment, therapy and educational support. Findings revealed big gap between plan and reality within the Philippine service delivery ecosystem, where support mechanisms are defined by systemic fragmentation and inequity. The central idea of the finding was the perceived service vacuum at the barangay level, forcing families into a state of isolation and self-management. Access was heavily restricted by a bureaucratic labyrinth characterized by the imposition of high costs for essential services, the strict monetization of required documents, and perceptions of favoritism and administrative gatekeeping. Awareness was highly reactive and school-dependent, creating significant unequal information for unenrolled families. The study concludes that the system operates to push the burden onto the family unit, resulting in unsustainable hidden labor for caregivers, which is made worse by continuous public stigma. The findings highlight the critical urgency of LGU-led structural reform, necessitating the immediate mandate of decentralized, subsidized service hubs and the implementation of comprehensive anti-stigma campaigns to achieve true inclusion.

Keywords: awareness; services; perspective; LSEN, inclusive education, autism spectrum disorder

1. INTRODUCTION

It has been said that it takes a village to raise a child, yet for families raising children with special needs, that village often feels invisible. While classrooms grow more inclusive and laws promise equity, many parents remain on a quiet journey: navigating therapy appointments, searching for financial aid, and longing for clearer guidance that never quite arrives. For parents of Learners with Special Education Needs (LSEN) in Baguio City, these challenges are not abstract policy gaps, but daily realities shaping their children's future.

Research has shown that while schools are required to include parents as partners in Individualized Education Program (IEP) planning, families often lack practical information and must search alone for advocacy strategies and support (Huscroft-D'Angelo et al., 2022). For culturally and linguistically diverse families, this gap becomes even wider when educators' assumptions silence parent voices or reduce them to passive recipients rather than collaborators (Gonzales and Gabel, 2017; Rossetti et al., 2017; McLeod, 2022). These issues are not only about missing brochures; they reveal a deeper need for schools and systems to build trust and understand the lived realities of each family.

The power of early and coordinated support is well established. Early intervention services, delivered by multidisciplinary teams, can transform developmental trajectories, support family wellbeing, and even reduce long-term societal costs (Koegel et al., 2014; Pérez and Ríos, 2024). Yet, research across contexts reveals a persistent gap between policy and practice, particularly in developing countries. Families often face commuting barriers, limited-service availability, and prohibitive costs (Juneja et al., 2011; Hadiati et al., 2019). Parents may give up careers to become full-time caregivers, risking burnout in a system that sees disability care as a private responsibility rather than a shared commitment (Lim and Chia, 2017).

In the Philippine context, national policies like the Magna Carta for Persons with Disabilities (Republic Act No. 7277) and Republic Act No. 11650 on Inclusive Education affirm the state's duty to provide equitable education for all (Department of Education, 2020; Gita-Carlos, 2022). Yet implementation gaps remain striking. Espeño et al. (2024) identify ongoing issues such as curriculum inflexibility, teacher training gaps, and social stigma that limit the reach of special education services. In Baguio City, Gattud and Piduca (2020) found that without formal case management, parents often create informal networks and self-initiate health and educational interventions for their children. While these efforts show resilience, they also highlight systemic gaps that place an unfair burden on families.

The present study explores these gaps from the perspective of those living them: LSEN parents in Baguio City. Guided by qualitative inquiry, the research seeks to answer three questions: What forms of community support are currently available to children with special needs? What is the parents' level of awareness of these services? And what are their lived experiences in accessing them? A focus group discussion with nine (9) parents will provide rich, first-hand narratives to illuminate these questions.

By centering the voices of parents, this study hopes to move beyond statistics to understand the daily complexities and quiet strengths that shape LSEN families' journeys. Ultimately, the insights gained can inform educators, local government units, and policymakers to design community support systems that do more than exist on paper: systems that truly meet families where they are.

2. METHODOLOGIES

This qualitative study employed a Focus Group Discussion (FGD) approach to explore parents' awareness, access, and lived experiences regarding special education services for their children with special needs (LSEN) in Baguio City. This design enabled the researchers to capture collective and diverse perspectives in an interactive setting, particularly suited to understanding shared challenges and insights in community-based educational contexts (Creswell & Poth, 2018).

The participants were nine (9) parents of LSEN enrolled in inclusive elementary schools in Baguio City. They were selected using purposive sampling, ensuring that all had direct experience with seeking, accessing, or attempting to access special education or related services for their children. The inclusion criteria must be a parent or guardian of a child formally diagnosed with autism spectrum disorder (ASD), and willing and able to participate in a recorded group discussion. Additionally, all nine (9) participating parents have children diagnosed with Autism Spectrum Disorder (ASD), who are mixed level grade schoolers, and have been navigating services for more than one year.

The researchers coordinated with local schools and SPED centers to identify and invite participants. Informed consent was secured, and all ethical procedures were followed, including ensuring confidentiality, voluntary participation, and the use of pseudonyms.

The FGD lasted approximately 26 minutes and 7 seconds, was conducted in a neutral community space, and facilitated using a mix of Filipino and Ilocano depending on participants' comfort. The discussion was audio-recorded, and detailed field notes were taken.

The recorded Focus Group Discussion (FGD) was transcribed verbatim. Following Braun and Clarke's (2006) thematic analysis framework, the researchers began the systematic analysis by familiarizing themselves with the data through repeated reading. They then generated initial code across the dataset. These codes were subsequently organized into potential themes that were aligned with the study's research questions. The research team then reviewed and refined the themes to ensure internal coherence and external distinctiveness. Finally, they defined and named the final themes for reporting and discussion in the study.

To enhance trustworthiness, the researchers applied a member checking (participants were asked to confirm the accuracy of the transcript summaries) and peer debriefing (colleagues reviewed coding decisions and theme labels). Triangulation was also applied through field notes, reflections, and comparison with relevant literature.

Ethical integrity guided every phase of the study, ensuring the protection of participants and the responsible use of qualitative data. Formal ethics approval was rigorously sought and secured from the University of the Cordilleras Research Ethics Committee (UC-REC) prior to data collection, confirming institutional oversight.

Informed consent was obtained from all nine (9) parents who participated in the Focus Group Discussion (FGD). Prior to giving consent, participants were comprehensively briefed on the study's purpose, procedures, the voluntary nature of their involvement, and their right to withdraw at any time without penalty. While no financial compensation was given, snack packages were provided as a token of appreciation for their time and contribution.

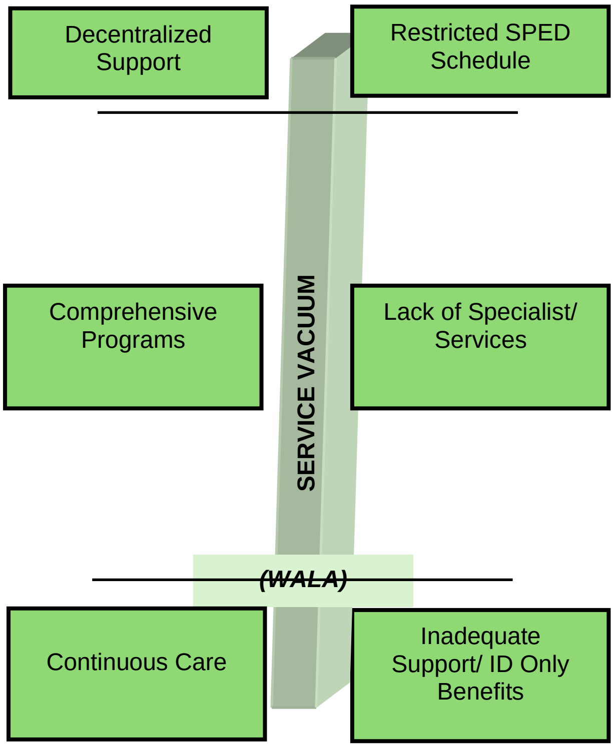
3. FINDINGS AND DISCUSSION

This chapter presents the main findings gathered from the Focus Group Discussion (FGD) with nine (9) LSEN parents in Baguio City. The descriptive results and their narrative interpretation) are integrated under subtitles named after the specific research objectives. The analysis found three core themes: The Scarcity and Fragmentation of the "Village", Navigating a Bureaucratic Labyrinth, and The Hidden Labor and Social Cost of Care

3.1 What forms of community support are currently available to children with special needs?

The forms of community support available were largely characterized by their absence, centralization, and minimal impact. This objective is directly addressed by Theme I: The Scarcity and Fragmentation of the "Village", as shown in the overview provided in Figure 1.

Figure 1. The Scarcity and Fragmentation of the "Village"



The general view among parents regarding the common "scarcity" of local support is the most important finding, establishing a clear policy-practice gap in the local context. The reality where the local community, particularly at the barangay level, is perceived to offer almost "wala""nothing" (P8) indicates a basic failure of decentralization and localized implementation. This service vacuum, as clearly stated by Parent 1, forces families to exist on their own, directly contradicting the idea that comprehensive special education requires the cooperation and collaboration of the "village." Similar to local research by Gattud and Piduca (2020), which noted that parents frequently resort to self-initiated interventions due to systemic gaps.

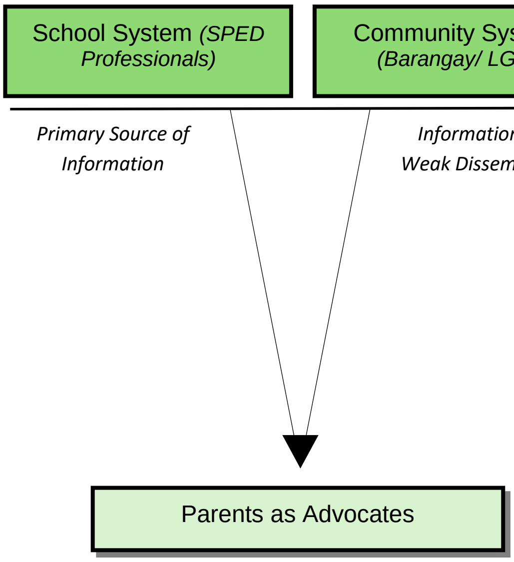
The data also reveals that existing services are weakened by centralization and incompleteness (I.B). Guzman and Banaag (2022) reported that parents experience difficulty accessing SPED and therapy services, citing long waiting times, lack of specialists, and minimal communication between schools and communities. The limited availability, such as the restricted SPED schedule (P7), and the presence of physical facilities that lack essential staff ("don't have a doctor yet," P5) indicate that resources are either misallocated or poorly integrated into a functional delivery system. SPED programs were described as infrequent, reflecting structural challenges and uneven implementation across regions (Department of Education [DepEd], 2023; Cabañero, 2023). The perception that facility development plans "remained just a drawing" (P10) highlights poor system and a failure to translate allocated budgets into accessible, tangible services.

The nature of the tangible support received is simply not enough (I.C). As noted by Cabañero (2023), while the government has established frameworks for inclusive education and disability support, these are often poorly funded and inconsistently enforced, resulting in minimal direct benefits for families. The need for the PWD ID discount (P3) as the primary benefit, while helpful, is essentially a mechanism for identification, not intervention. It provides minimal relief but offers no substitute for continuous clinical or educational support. Financial assistance is viewed as "irregular" and "tokenistic" (P7), failing to address the heavy financial cost. This focus on symbolic aid rather than effective, continuous early intervention systems suggests a system based on charity, falling far short of the necessary standards for comprehensive family support (Koegel et al., 2014).

3.2 What is the parents' level of awareness of these services?

Parental awareness is shaped not by organized public information, but by unreliable, word-of-mouth communication. This objective is primarily answered by the subtheme on Fragmented Knowledge and the Plea for Awareness within Theme III, as illustrated in Figure 2.

Figure 2. Fragmented Knowledge and the Plea for Awareness



The data shows that gaining information for parents is overwhelmingly concentrated in one sector: the school. Parents trust the school system and Special Education (SPED) personnel "..to really process it for you" (P8) and handle the coordination of support services (P6). While this reliance confirms the vital role and advocacy effectiveness of the SPED school system, it simultaneously reveals a major system flaw: a severe lack of information in the community.

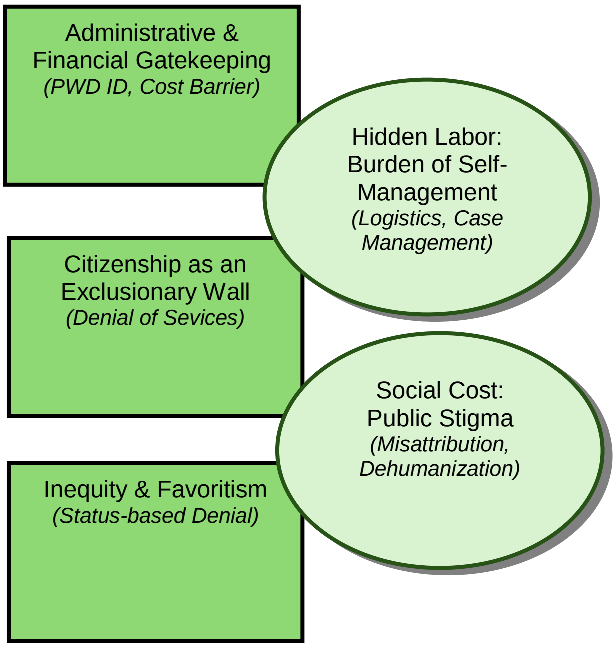
This reliance on the school system as the intermediary creates a substantial risk of unequal access. This institutional mediation creates a crucial mechanism of exclusion, resulting in 'unequal information' that is systemically denied to unenrolled families. Parents whose children are not yet enrolled, who are homeschooled, or who are seeking community and therapeutic services are likely excluded from information, forcing them into the role of being an unsupported advocate, a common finding in studies examining service navigation (Huscroft-D'Angelo et al., 2022). The awareness gap is so pronounced that Parent 5 (P5) explicitly links the lack of community awareness to stigma and the misunderstanding of their child's behavior, stating that without it, parents end up "yelling at the child." This creates unequal information access, especially excluding unenrolled families.

The overwhelming, unified call for widespread public awareness is a direct consequence of this system disconnect. The parents' plea for awareness seminars (P7) and for "more outlets for information dissemination, example through the barangay local persons for PWDs" (P9) is a clear indication that the community system is failing to fulfill its responsibility. It necessitates a shift from a passive, 'ask-and-you-shall-receive' model to an active, community-wide outreach approach led by local government and public health agencies.

3.3 What are their lived experiences in accessing them?

Parents' lived experiences were defined by systemic friction and significant personal cost. This objective is answered by Theme II: Navigating a Bureaucratic Labyrinth and the social/emotional costs found in Theme III: The Hidden Labor and Social Cost of Care, as presented in Figure 3.

Figure 3. Lived Experiences in Accessing Services



The data presents strong evidence of consistent resistance, where the government system functions more as an Administrative Maze than a supportive structure. The difficulty in obtaining the PWD ID (P1) and the strict, costly documentation requirements ("They want the latest [assessment]," P1) transform necessary administrative steps into significant major cost barriers (II.A). These procedural difficulties, such as requiring costly, recent assessments, function as explicit financial gatekeepers. These hurdles, coupled with the excessive expense of specialized services, with a specialist costing up to "P7,000 per hour" (P10), ensure that the system actively filters out those with fewer economic resources. The verbal claim that government aid "doesn’t even cover half" (P3) of the monthly expenses validates that the state’s current financial aid system is critically insufficient, consistent with findings that high costs remain a major obstacle in developing nations (Hadiati et al., 2019).

The experience of Inequity and Favoritism (II.C) and the explicit barrier based on nationality (II.B) introduce a devastating erosion of trust. The explicit examples of denial of services based on nationality and the perception of 'favoritism or nepotism' (P10) are particularly powerful indicators of trust erosion. The perception that services are influenced by "nepotism" or personal status (P10) or that the ID designed to grant access leads to denial ("...don't entertain me," P5) fundamentally undermines the principles of universal access. These examples effectively underscore the argument that rigid and ill-defined policies can create institutionalized bias, despite the ethical imperative to provide support to all children within the community.

The consequence of this systemic strain is the Hidden Labor and Social Cost of Care (Theme III). The necessity for parents to be the sole, unpaid case manager ("That's all on us; everything is handled individually," P4) and to manage complex logistics, including inter-regional referrals to Manila (P5), represents a transfer of organizational burden.

This Exhaustive Caregiving Duty directly contributes to the high rate of parental burnout observed globally (Lim & Chia, 2017). The continuous exposure to Public Stigma (III.B) is the highest non-financial cost. The experiences of children being mistakenly labeled as "spoiled" (P4) or dehumanized ("shush him like a dog," P7) reveal a deep-seated social and cultural obstacle. This highlights that the ultimate barrier to inclusion is not just logistical or financial but is rooted in the lack of community awareness and the prevalence of prejudicial attitudes. The parents' lived experiences collectively serve as a powerful call to action, demanding a shift from a purely deficit-based approach to a Societal Responsibility Model (Social Model of Inclusion), where responsibility for access and acceptance is shared by the entire society.

4. CONCLUSIONS

The local service delivery for Learners with Special Educational Needs (LSEN) in Baguio City suffers from a critical policy-practice dissonance and systemic fragmentation, which ultimately leads to the burden of support being neoliberally displaced onto the family unit. Despite national mandates like Republic Act No. 11650 (The Inclusive Education Act), local implementation by Local Government Units (LGUs) and mandated agencies lacks the necessary coherence, transforming the system into a source of systemic friction rather than a safety net. This failure imposes an unsustainable financial, administrative, and socio-cultural burden on caregivers, fundamentally undermining the state's obligation. This is confirmed by the observed pervasive scarcity and tokenism in community support, the reactive and inequitable nature of awareness that is overly reliant on the school system, and the experience of accessing services through a bureaucratic labyrinth. Administrative hurdles, such as the requirement for costly, recent assessments, function as financial gatekeepers, simultaneously exposing families to social inequity and outright denial, confirming that the main challenge to inclusion lies in deep-seated implementation flaws, financial injustice, and unresolved social stigma.

5. RECOMMENDATIONS

For future research on special education service access, the researchers recommend three main directions to broaden and deepen the findings. Firstly, to test the generalizability of the themes, a large-scale quantitative survey with a probability sample of LSEN parents across multiple cities/provinces in the Cordillera Administrative Region (CAR) is necessary. This would allow for the statistical correlation of variables like household income and distance from service centers with perceived service fragmentation. Secondly, to move beyond the singular parental perspective, methodological triangulation is advised, incorporating the viewpoints of key institutional stakeholders (e.g., LGU social workers, barangay officials, and SPED teachers). This suggestion should be treated as an immediate priority to enhance the evidence base for LGU policy reform. This comparison would allow researchers to juxtapose parental experiences of a "service vacuum" with the officially reported service delivery capacity. Finally, given the high financial burden identified in the current study, a dedicated cost-effectiveness study is recommended to establish a reliable benchmark of specialist therapy costs versus current public subsidy levels, providing the necessary data to inform more equitable financial policy. This cost-effectiveness study is an immediate priority to establish a necessary evidence base.

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