



## LIFE JOURNEY WITH SOMEBODY SPECIAL: THE HIGHS AND LOWS OF PARENTS OF CHILDREN WITH DISABILITY

**Arabis-Quijote, Katherine<sup>1</sup>,**

**Mahinay, Sergio Jr., D.<sup>2i</sup>,**

**Silvano, Laiza Mae R.<sup>3</sup>,**

**Anito, Kesha Nuet S.<sup>3</sup>,**

**Flauta, Ralf L.<sup>3</sup>**

<sup>1</sup>MSSW, Notre Dame of Midsayap College,  
Quezon Avenue, Poblacion 5, Midsayap,  
North Cotabato, Philippines

<sup>2</sup>JD, MPA, Notre Dame of Midsayap College,  
Quezon Avenue, Poblacion 5, Midsayap,  
North Cotabato, Philippines

<sup>3</sup>Notre Dame of Midsayap College,  
Quezon Avenue, Poblacion 5, Midsayap,  
North Cotabato, Philippines

### **Abstract:**

Central to this study is the lived experiences of parents of children with physical disability. This study was conducted at Barangay Poblacion 8, Midsayap, Cotabato. It included as participants purposively chosen parents of children with physical disability. Their ages ranged from 31 to 53 years old, and were all mothers. The physical disabilities of their children were either musculoskeletal (orthopaedic) or visual. This study made use of the phenomenological research design. Findings bared that despite the apparent conditions of their children, the participants joyfully and with gratitude accepted their children as blessings from God. They spent bonding moments with them, and at times appreciative of their learning of new things, and were busy taking good care of the total well-being of their children. They were aware of their children's limitations, but they do not consider them as different. Nevertheless, they sought acceptance, respect, and understanding from others. The participants were concerned about the health issues of their children, anxious about the mistreatment they received from others, and pondered on their possible rejection in the future. The participants stood by their children and draw strength from God. They look at the bright side of life and hope that their children finish studying. The participants as mothers were longing for help for their children's sake.

**Keywords:** person with disabilities, joyful acceptance, incomplete but not different

---

<sup>i</sup> Correspondence: email [sergsmjr@gmail.com](mailto:sergsmjr@gmail.com)

## 1. Introduction

Having a child with physical disability poses an eminent challenge to the family. Giving genuine love, support, and guidance to their loved ones through easy and tough times is truly a big help to children whose physical abilities are impaired, interfered or limited.

Family members thus bear the additional time, emotional, and financial responsibilities that may respond to the well-being of the child. Indeed, the family is a vital source of support for children with physical disabilities (Antle et al., 2007).

The loss of physical capacity results in the person having a reduced ability to perform body movements such as walking, moving their hands and arms, sitting and standing as well as controlling their muscles. Though these conditions do not stop them from performing usual tasks, these render their performance more challenging - taking longer time to complete getting dressed, difficulty in gripping things and carrying belongings. Family members are thus the primary source of needed assistance (Cuervo & Fu as cited by Berg et al., 2021). Equally then, mothers caring for children with physical disability face several challenges, including physical, psychological, financial, and social challenges, (Shattnawi et al., 2020).

As of January 2022, there were 250 children with physical abilities in Midsayap, Cotabato, and Poblacion 8 accounts for one of the highest number. However, there is very limited literature on the narratives of parents in relation to their experiences of having a child with physical disabilities. It is on this premise that the researchers explored the experiences of parents of children with physical disability.

### 1.1. Statement of the Problem

This study aimed to gain a deeper understanding of the life journey of the participants as parents of children with physical disabilities. This study was guided by the following questions:

- 1) What are the lived experiences of the participants as parents of children with physical disabilities?
- 2) How do the participants make sense of those experiences?

### 1.2. Significance of the Study

- **Parents.** The findings of this study may inculcate a deeper understanding and profound meaning of the real-life story of parents of children with physical disabilities.
- **Children with Disabilities.** The findings of this study may afford them to receive ample government supports and services that address their special needs.
- **Government and Non-government agencies.** The outcome of this study may provide bases for the undertaking of programs that specially address the needs of children with physical disabilities, as well as their parents.
- **Social Work Profession.** The information that may be yielded by this study may serve as a guide in further enhancing the profession, thus, making it more relevant and responsive to the needs of lowly sectors of society.

- **Future Researchers.** The results of this study may become the bases in pointing-out the gaps for further studies dealing with persons with disability.

### 1.3. Scope and Delimitations

This study focused on the lived experiences of parents of children with physical disability. It was conducted at Barangay Poblacion 8, Midsayap, Cotabato during the second semester of academic year 2021-2022. It included as participants five parents of children with physical disability, who were members persons with disability (PWD) organization in the said locality. This study relied mainly on the narratives related by the participants during the one-on-one and face-to-face interviews.

## 2. Theoretical Perspectives

**Family Systems Theory** is a theory of human behavior that defines the family unit as a complex social system, in which members interact to influence each other's behavior. By interconnecting into one another, the family members are viewed as one whole entity rather than as individual elements. Any change in one individual within a family is likely to influence the family system and may even lead to changes in the members (Kerr and Bowen as cited in Pfeiffer and In-Albon, 2022). This theory explains the interconnectedness of the members of the family where the child with physical disability belongs. The changes in the family and its members are influenced, at least partly, by the condition of a child with physical disabilities. These changes may be manifested in their attitude, behavior, and perception.

**Family Resilience Theory** focuses on mobilizing or accessing capabilities to function effectively despite the significant risk (Henry and Harrist, 2022). Families have the capability to maintain and restore competent functioning despite adversities or transitions. This theory explains how parents especially mothers of children with physical disability cope with the challenges that accompany their journey as a family with a child with physical disability.

## 3. Methodology

### 3.1. Research Design

This study made use of the qualitative research design. It focused on the narratives of experiences that cannot be adequately expressed numerically (Hancock, Ockleford & Windridge, 2009), and put a value on the thinking, feelings, perceptions and points of view of the research participants (Baraceros, 2017). This method enabled the researchers to collect data at the natural site where the mothers of children with disability experience the phenomenon under study (Creswell, 2014).

Specifically, it adopted the phenomenological research design initiated by Kant and Hegel (Rockmore, 2012), articulated by Husserl (by introducing descriptive phenomenology) and further expanded by Heidegger (by moving to interpretative

phenomenology) (cited in Heotis, 2020). The researchers gave priority to interpretations as they supposed that the meanings of the experiences of the participants as mothers of children with disability are embedded in everyday contexts. According to Stan (1999), the purpose of the phenomenological approach is to illuminate the specific, to identify phenomena through how they are perceived by the participants in a situation. Finally, it attempted to understand how participants make sense of their experiences (Hancock, Ockleford & Windridge, 2009).

### **3.2. Sampling Design**

This research employed the purposive sampling design considered by Welman and Kruger (1999) as the most important kind of non-probability sampling to identify the primary participants of the study (as cited in Groenewald, 2004). By this technique, the researchers would be able to gain a relevant and deeper understanding of the phenomenon (DeCarlo, 2022).

The selection of the participants was based on the research question and the ability of the participants to inform important facets and perspectives related to the phenomenon being studied (Sargeant, 2012). The researchers intentionally selected and sought out for specific participants who possessed the relevant characteristics needed for the research. The participants were thus selected based on the criteria that (1) they have children with physical disability who are at least 7 years old, and that (2) they were able and willing to narrate and communicate their lived experiences as parents of children with physical disability to the researchers. No criteria were set for age, sex, status, occupation, and family structure and membership. This was to give all members of the population of interest the fair chance to become participants of the study, regardless of those irrelevant factors (Yale, 2022).

Five participants were purposively selected for this study. Those parents whose children might have physical disability but were not included in the list of the organization of Persons with Physical Disability (PWD) were expressly excluded from the sample. The researchers also applied the concept of data saturation wherein data collection continued until the participants introduced no new information or perspectives on the phenomenon, and that redundancy signaled them to cease recruiting more participants. The researchers had stopped collecting data after the five participants no longer sparked fresh and new insights, or revealed new properties (Charmaz, 2006 as cited in Creswell, 2014).

### **3.3. Locale and Participants of the Study**

This study was conducted at Barangay Poblacion 8, Midsayap, Cotabato. The barangay has a population of 6,729, which represented 4.07% of the total population of Midsayap (2020 census). It is one of the barangays with the highest number of children with physical disability that is recorded by the barangays in Midsayap, having a total number of 15 children with disability. There were five research participants chosen for the study and all are mothers. The participants were assigned the pseudonyms of P1, P2, P3, P4 and P5,

to keep their identities confidential. P1 was 31 years old, married-mother, and a vegetable vendor. The physical disability of her child is orthopaedic. P2 is 43 years old, married-mother, and a housewife. The physical disability of her child is visual. P3 is 46 years old, married-mother, and a housewife. The physical disability of her child is orthopaedic. P4 is 46 years old, married, and a housewife. The physical disability of her child is orthopaedic. P5 is 53 years old, married, and a housewife. The physical disability of her child is orthopaedic. The interviews were conducted in the respective houses of the participants, and some of them were interviewed near their own houses, and a few of them were interviewed inside their houses. Moreover, a few of them are basically living in crowded, unattractive, and rundown areas. Nonetheless, they were by then living in a quiet, full of inspiration, and alive setting.

### **3.4. Research Instrument**

The researchers made use of a self-constructed semi-structured interview guide to explore the lived experiences of the participants. The interview thus constructed was comprised of three major parts: Part I, which dealt the Preliminary Activities; Part II, which was allotted for profiling questions and levelling-off with participants; Part III, which was devoted for interview proper; and Part IV which was the concluding part.

Moreover, the interview proper consisted of five initial and general questions which were asked to the participants, namely: Will you describe to us what it is like to be a parent of a child with physical disability? How were you able to address the needs of your child? What difficulties and problems had you faced or encountered as parent of a child with physical disability? How do you look at your child as having a physical disability? What realization do you have as parent of a child with physical disability that you would like to bring along with you all through your life? The initial questions were followed-up by probing and more specific questions.

### **3.5. Data Gathering Procedure**

The data relevant to this study was gathered through one-on-one and face-to-face in-depth interviews with the participants. It was initiated by sending a letter to the Municipal Social Welfare and Development Office (MSWDO) and the Punong Barangay of Poblacion 8, Midsayap, Cotabato, requesting for the population of children with physical disabilities and their parents. The interview was assisted by the PWD organization's officers. Letters were sent to the identified participants seeking for their participation to the conduct of the study. The schedule of the interview was set based on the participants' most convenient time. The interviews were recorded using media tools such as smartphones.

### **3.6. Data Analysis**

This study made use of the Interpretative Phenomenological Analysis (IPA). This method of analysis helped provide detailed examinations of the lived experience of the participants as mothers of children with physical disability, and to make sense of the way

they were trying to make sense of what their experiences were (Smith & Osborn, 2015). The researchers consciously “bracketed” existing theories and knowledge that they were familiar with, and the experiences that they knew concerning the phenomenon under investigation (Pretorius, Chauke & Brandon (2011). By this technique, the researchers relinquished biases and looked at the topic on lived experiences of the participants as parents of children with disability with a fresh eye.

In generating the themes, the researchers followed the steps suggested by Braun and Clarke (as cited by Maguire & Delahunt, 2017), which is flexible and could provide a rich and detailed account of participants’ experience, as follows:

In step 1, the researchers familiarized themselves with the data. They transcribed and read and re-read the data while simultaneously noting initial ideas, and highlighted specific participant statements that appeared pertinent to the lived experiences of the participants. The end-product in this stage are significant texts (in phrases or statements).

In step 2, the researchers generated core ideas from significant texts. It involved the systematic coding of interesting features of the data and the collation of the data according to the codes. The researchers organized the highlighted statements from stage 1 into different sections based on the codes. The end-product in this stage are core ideas as labelled by codes.

In step 3, the researchers collated or clustered the codes into potential or emerging themes and gathered data supportive of each theme. The various coded statements were used to identify potential themes after which the researchers read the transcripts again to glean further information pertinent to the themes. The end-product of this stage are potential themes.

In step 4, the researchers checked themes against the coded statements and the data as a whole, and the subsequent use of the collated or clustered data to identify different themes. The end-product of this stage are themes. Themes were identified through constant comparison approach proposed by Glazer and Strauss (1967 as cited in Ryan & Bernard, 1999) whereby texts which were similar to each other but different from another were clustered into themes.

In step 5, the researchers defined and named the themes. Continuous analysis was conducted during this phase in order to refine each theme and to generate clear definitions for each theme. The researchers re-read the transcripts to confirm that all the themes had been identified. The end-product of this stage are definitions of themes.

In stage 6, the researchers did the presentation of the results and discussion of the research. The researchers organized the final themes that were common to the participants and provided extracts of their narratives that illustrate the participants’ accounts relative to the theme. Most of the time, the researcher would combine several emerging themes into major theme. At times, emerging themes were also captivated as major themes (Caulfield, 2019). The themes and extracts were then compared with relevant literature.

### 3.7. Role of the Researchers

The researchers performed the role of both the interviewer and observer. As interviewers, the researchers conducted five in-depth one-on-one interviews with the research participants. They asked questions, listened, thought, then asked more probing questions to encourage participants share more in-depth information including their highs and lows. As observers, the researchers consciously took note of the body language, mode of dress, tone of the voice, facial expressions, and other nonverbal cues. During the interviews with the participants, the researchers digitally recorded their narratives and later transcribed them. Additionally, the researchers made field notes incorporating their insights and interpretations of the participants (Phillippi and Lauderdale, 2017)

### 3.8. Validity and Reliability

*Validity* means that the researcher checks for the accuracy of the findings by employing certain procedures (Gibbs, 2007 as cited in Creswell, 2014). The researchers adopted the multiple validity strategies recommended by Creswell (2014). Thus, to enhance trustworthiness of the finding of this study, the researchers, in concurrence with the narratives of the participants, employed **triangulation** by observing their behaviors and actuations and by having access to pertinent information about them from the official records of the PWD organization. The researchers likewise employed **member checking** by bringing their semi-polish findings back to the participants for the latter to make comments and suggestions. The researchers engaged in **repeated, although relatively short, time** with the participants at the research site during which they also had keen observations. The researchers provided **thick, rich and detailed descriptions** of the narrative of the participants, their circumstances as well the research sites there they were in.

To promote the truth-value and authenticity of the findings of the research, the researchers took the stance of Moustakas (1994) by **“bracketing”** themselves consciously (as cited in Gearing, 2004), to understand the phenomenon in terms of the perspectives of the participants and thereby focused on the “insiders” perspectives (Mouton & Marais, 1990 as cited by Groenewald, 2004). This is especially so that one of the researchers has a close relative who has physical disability. This was done by identifying and keeping in check preconceived beliefs, opinions, or notions of the researchers about the phenomenon being researched (Makunika, 2022). By this technique, the researchers relinquished biases and look at the topic with a fresh eye. Finally, the researchers presented the **negative or discrepant information** that runs counter to the themes. As the real life of mothers of children with disability is composed of different perspectives that do not always coalesce, presenting this contradictory evidence would make the accounts more realistic and more valid (Creswell, 2014).

*Reliability* indicates that the researcher’s approach is stable and consistent across different researchers and different projects (Gibbs, 2007 as cited in Creswell, 2014). The researchers adopted the qualitative reliability procedures suggested by Creswell, 2014). Thus, to attain consistency and stability of the results of the findings, the researchers

documented their analysis procedures by using the **data analysis matrix** to help ensure that the narratives of the participants are aligned with the themes generated by the researchers. The researchers carefully **checked the transcripts** of the recorded interview to make sure that they do not contain obvious mistakes made during transcription. They made sure that there were no drifts in the definition of codes during the process of coding. As this was a team-research, the individual researcher **coordinated their works** by sharing, comparing, and checking their analysis. The researchers also took note of the methods **employed in other studies** about lived experiences of parents of children physical disability.

### 3.9. Ethical Considerations

As the researchers were engaged in repeated, face-to-face and one-on-one interviews with the participants, they adhered to the guidelines and principles primarily enunciated in the Belmont Report in 2009 (Nambisan, 2017).

**Respect for Persons.** The researchers respected the rights of the participants to autonomy by affording them the right to choose whether to accept or refuse participating in the study. The researchers observed the **informed consent process** during which they provided all information in an understandable (translated in local dialect, i.e., Bisaya) manner necessary for the participants to make a decision to voluntarily participate in the study. The participants were made to understand that they may stop participating in the interview at any time they wish without our relationships being affected. The researchers had maintained **confidentiality** by not sharing the information about them with anyone outside of the research team. The information was kept in files with proper security keys which, after two months-time, would be deleted. The researchers ensured the **anonymity** of participants by assigning information about them with pseudonyms instead of their real names. No information would be attributed to them by name or other cues.

**Beneficence.** The researchers endeavored to assess the potential **risks** (emotional harm) to the anticipated **benefits** (promotion of well-being, or welfare). The participants were made to take cognizance of such risks that may result from the research process. They were not made to share with the researchers very personal and confidential information and were not made to answer questions that might make them feel uncomfortable to talk about. They were not asked to give the researchers any reason for not responding to any question. The participants were also made to understand that there would be no direct benefit to them from the research except that their participation would likely to help both of us understand more deeply the experiences of parents of children with physical disability.

**Justice.** The researchers gave fair treatment to all participants commensurate to their condition (physical and socio-economic). The participants were thus given additional protection due to their vulnerable situation, like suitable time and place of interviews, as attending parents of children with physical disability. Also, the information that might be yielded by the study would be shared to them as they might be useful to them and/or could uplift their situation.



As a gesture of courtesy, the researchers sought the guidance and assistance of the head official of the organization for PWD. The researchers also sought the approval of the program head for the interview guide. Finally, due to the pandemic crisis, the researchers observed the health and safety protocols set by Inter-Agency Task Force (2020), and conducted the interviews in no longer than the ordinary routine of conversations encountered in daily lives (Dorn, 2018).

#### 4. Results

The chapter presents, describes and analyses the themes that emerged from the narratives of the participants. To denote a lesser number of participants, the following descriptors were used: “most” for four participants; “some” for three participants; and “few” for two participants. The narratives of the participants are italicized and indicated by quotation marks.

**Reflective Acceptance.** A mother raising a child with physical disabilities faces unique experiences including despair, frustration, and joy. Upon reflection, the participants accepted their children with open hearts and provided them unconditional love and care because they can also find strength in them. As revealed by some of the participants:

*“For me, at first, when he came out, I did not seem to accept, but I also told myself that if I show my son that I can’t accept it’s not good. So, I made myself strong so that he could accept his disability as well, even though in the first place, it was not easy for me.” (P1)*

*“When he was born, we felt that we wanted to heal him even though our lives are difficult. I included him in the programs of the PWD organization so that we can avail of any assistance, I am happy that he has joined the PWD organization’s helpers. We accepted him right away because I felt sorry for him and I was happy to be with him. I love him because he is my child.” (P3)*

*“It really hurts me, but we really cannot do anything. I accepted him. I feel pity for him.” (P5)*

**Taking Good Care of the Child’s Total Well-being.** The mother of a child with a physical disability is facing difficulties balancing regular mothering with child-care. Being a mother of a child with a physical disability is demanding as their needs are encompassing and beyond the ordinary. They struggled to ensure that their children got the necessary care. As narrated by a few of the participants.

*“When they go to school, I take care of them, like bathing, feeding, dressing, and shoeing, and send them to school. When I go home, I will pick them up. I do not let them go home alone.” (P1)*

*"What I can say to the people, if they have a child with a physical disability like me is that they should love them and not think that their child is their weakness. Even if they have such a child, they should not think that they are unlucky. They should think that they are lucky because they have a child like that." (P1)*

*"Take care of his needs, for example, I will wash him, I will feed him, I will give him food, I will console him when he cries, I will assist him in falling asleep." (P3)*

**Anxious and/or Hurt of Mistreatment.** Special considerations are needed when addressing bullying in child with physical disabilities. Watching their child experience the physical and emotional pain of bullying is heart-breaking. They want their child to be treated properly. As expressed by some of the participants.

*"He was really bullied at his school, so I went to their school because it is painful for me to see our child being bullied. That is why he has not been bullied since then." (P2)*

*"He would easily forget, he would have difficulty in walking, his hand would not move." (P2)*

*"The problems we have encountered are poverty; when he will get sick with fever, cough, and colds; and there is no way to buy medicine. We do not have to money to buy medicine and food. If they go to school, they will have problems buying their things." (P3)*

*"When he was injured, I decided that we would take them so that we could take care of them here and watch over them properly. And to be safe, they are with me because if they are there, they are not really safe." (P5)*

**Gratitude to God.** Mothers rely on the Lord for the strength to face life's challenges. Their child motivates them to work and live as a mother having a child with disability. Mothers' only wish is for their physically disabled child to receive appropriate treatment with others. As shared by a few of the participants.

*"At first, I seemed to regret it, but now I think he is a blessing to me because I have a child with a disability, and I am still grateful to the Lord because I have a child like him." (P1)*

*"They will accept it because that was God's gift to us." (P2)*

*"I am just glad the Lord gave him. We are happy that he is born. We did not even think about his luck, we just accepted him." (P3)*

**Giving Time, Love, and Attention.** Every child needs love, affection, and attention in order to grow, develop self-esteem, and have a positive sense of identity. As

a mother, positive attention entails responding to children with warmth and interest. It gives children a sense of security and worth. As advised by most of the participants:

*"My only advice is, if you have children with physical disabilities, do not treat them differently so they do not make it a weakness. They are more inspired to move on with life, and think they are not different and not poor but are lucky." (P1)*

*"My only advice is that if they have children like my child, they need to take good care of them. For example, there are people who underestimate their ability, they should not get angry right away and they need to understand before they get angry." (P3)*

*"My advice is for them to give time to and love their child not far from them. Some parents do not have time for their children and do not pay attention, so sometimes they feel bad. So, I really pay attention to what my children have, and one day they will also repay your efforts." (P4)*

**Transformational Commitment.** With the conditions of their children, all the more that the participants had realized they are obligated to make amend and find ways to meet the need of their children. As recounted by some of the participants.

*"My realization is that maybe we were given such a child like him, because we were not serious before when we just got married, so, this child is given to us so that we can be serious in life." (P1)*

*"I realized that I was busy taking care of her and living for her. I want to find a job and make a lot of money so that if I have something I want to buy for her I can buy it. I want income." (P3)*

*"I wonder how hard life is that I have gone through a lot or just been struggling? I have so many children now, that problem does not bother me. I just laugh. And take a deep inhale and exhale." (P4)*

**Feeling Grateful and Fortunate/Lucky.** All children need encouragement and support. Parents must enforce positive reinforcement to their children because it helps to ensure that their children grow with a strong sense of self-worth and determination despite their disabilities. As declared by all the participants.

*"I do not look at him as disabled ah, I just look at him normally." (P1)*

*"Uhhh... at first, I seemed to regret it, but now I think he is a blessing to me because I have a child with a disability and I am still grateful to the Lord because I have a child like him." (P1)*

*"Every time he has an achievement and when he learns something new with his hand, we parents appreciate that so that he feels comfortable and say: 'even though I am like this, they will still appreciate me!'" (P1)*

*"The best part for me was that I had a child like him when I gave birth to him. Others say he was lucky with me." (P1)*

*"Ah... I am telling him that he is going to finish school, and that is also his wish that he wants to graduate so that he can help us when the time comes." (P1)*

*"I am proud of him because I have a good son and even though he is not as smart as everyone else, he knows something about their school. And he was the inspiration for us, who were his parents. We also wanted him to be able to graduate from school in such circumstances." (P1)*

*"For me, it is okay that I have a child like him. I just accept it. My only support is to provide what he needs" (P3)*

*"When my kids are happy." (P5)*

Nonetheless, some participants had also questioned their fate. As bared by most of the participants:

*"Absolutely nothing. Because that is what God gave us! But sometimes I wonder, "Why him?" (P1)*

*"It is okay but sometimes, I do not understand their attitude. Even though in that situation, he will also help me." (P2)*

*"It really hurts me, but we really cannot do anything, I accepted him." (P4)*

*"Yes, I regret and feel guilty because that they did not care for the child well, for the reason of his accident" (P5)*

**Needing Help.** As a mother of a child with physical disability, it cannot be denied that they are in need for help and support from the government. Participants as mothers are having a hard time raising their children. The longing for help can be felt from the revelations of most of the participants:

*"I can only say that, because I am getting older and then the time will come when I will not be able to earn an income, I just really wish there were people who could afford it if*

*they had your donation or your help. May they feel sorry for the person who has a disability.” (P3)*

*“When I look at him, when he grew up with disability, I said that when he has a crush maybe he will not be appreciated. But for me, he is a handsome boy.” (P3)*

*“For me, as long as you or anyone can help us.” (P5)*

## 4. Discussion

### 4.1 Major Themes

**Reflective Acceptance.** A mother's absolute joyous acceptance of her child's condition is admirable. As an emotion, it means acceptance of others and acceptance by others (Laycraft (2019). Acceptance involves openness to the environment, to others, and to him/herself. Moreover, accepting parents are capable of demonstrating their reactions verbally or physically (Aydın & Yamaç, 2014)).

**Taking Good Care of the Child’s Total Well-being.** A parent has an inclusive responsibility to the overall well-being of child with physical disability. A caring family aids in the development of the child's total well-being. Such well-being covers material, physical, mental and psychosocial conditions. An adequate standard of living, the highest attainable standard of health, education, and a caring family environment are necessary for the full and harmonious development of the child (Doek, 2014).

**Anxious and/or Hurt of Mistreatment.** The mother of a disabled child is facing challenges as they are experiencing financial problems, and is worried about their child's health condition. Children with disabilities are being bullied and mistreated by others, Their mothers are also in pain, and seeking acceptance and fair treatment of their children by others. Children with disabilities are one of the most marginalized and excluded groups in society. Facing daily discrimination in the form of negative attitudes, and a lack of adequate policies and legislation, they are effectively barred from realizing their rights to healthcare, education, and even survival. They are often denied access to leisure activities, information, and support that are vital for a child’s seamless integration into society and their and development into adulthood (UNICEF, 2018).

**Gratitude to God.** Mothers of children with physical disability are persevering to ensure their well-being and meet their needs. They draw strength from a supreme being and put their faith in Him for all their undertakings. Children are gifts from God, disabled or not. God's strength is made perfect in one’s weakness (Berryman, 2009).

**Giving Time, Love and Attention.** Giving a child their full attention by spending quality time with them is the best way to show love to them. They need to be happy and healthy, as well as to grow and develop properly. When a family spends quality time, children are less likely to have behavioral issues at home or at school and are less likely to participate in risky behaviors such as drug and alcohol usage. Showing love and care to children keep them mentally and emotionally strong (Roudabush, 2019).

**Transformational Commitment.** In spite of their past experiences and present conditions, the participants as mothers realized the need to dedicate themselves and extend support to their children. Rightly so because children with physical disabilities receive most of their support from families. Parents have even reported that their child's disability has given them an increased sense of purpose (Neely-barnes and Dia, n.d.).

**Feeling Grateful and Fortunate/Lucky.** Children with disabilities have explored ways of learning new things that boost their self-esteem and make their parents appreciative of them. A mother who perseveres in life because her child is the source of her pride and inspiration to live. They feel grateful and fortunate of having a child with physical disability. The joy that the child brings to the family is extraordinary. Raising a child is an honor and a privilege not everyone gets to experience. Disability just adds to the uniqueness of each child. (Stumbo, 2017).

**Needing Help.** Raising a child with an intellectual disability can be a daunting and exhausting task. There are many appointments to keep, and funding the needed support services can easily overwhelm families. The role of a parent with a disabled child is very difficult, especially in providing financial and other support for the child. It is a big responsibility for them to provide for the needs of a child hoping to acquire, give, or provide what is necessary to accomplish a task or satisfy a need.

Herman (1991) found that parents rated the cash subsidy as helpful, as improving their overall family life and ability to care for their child with a disability, and that they were able to get more respite care and professional services due to the subsidy. Similarly, Meyers and Marcenko (1989) found that cash subsidies reduced family financial stress and led to fewer families anticipating out-of-home placement.

## 5. Conclusion

The lived experiences of participants as mothers were not easy to handle. Life with a child with physical disability is a journey that experiences a mixture of highs (joys) and encounters lows (challenges). Each mother has her unique story about her highs and lows. Though, they felt blessed, fortunate, and happy, they also express worries, pity, and concern about the future of their children. Nonetheless, they could devise adaptive coping strategies such as resilience, flexibility, and optimism on their situation and remained to have positive outlooks on their lives with their children.

### 5.1. Implications

The findings of this study partly substantiate the Family Systems Theory. The condition of the child as having a physical disability had been influencing the family system and led to changes in family members, especially the mother taking care of him (Kerr and Bowen as cited in Pfeiffer and In-Albon, 2022). The changes in the family and its members were related to the condition of a child with physical disabilities. These changes were manifested on the attitude, behavior, and perception of the mothers towards the child and others: anxiety, pity, worry, acceptance, joy, concern, perseverance, and hope.

The findings of this study also confirm the Family Resilience Theory. The mother was able to mobilize capabilities to function effectively despite the difficult condition of the child (Henry and Harrist, 2022). Indeed, families have the capability to maintain and restore competent functioning despite adversities. The mothers of children with physical disability cope with the challenges that accompany their winding journey as a family.

## 5.2. Limitations and Recommendations

One of the main limitations of this study is that the researchers had spent limited engagement with the participants, the research sites and the people in the field (Creswell, 2014). Due to the pandemic condition, the researchers had made limited face-to-face interviews that lasted only about 20 minutes to 30 minutes. Another limitation was that the participants were entirely composed of mothers who have children with physical disabilities aged 8 to 17 years old.

Meanwhile, it is suggested that the Department of Social Welfare and Development (DSWD) should strengthen their programs to Children with Disability by providing more support and assistance to their parents. The Community Development Workers can support the parents in generating empowering parent-child interactions that would help the children realize their full potential.

## 5.3. Insights

First researcher. I have been able to discern and understand their real-life experiences that having a child with a physical disability is unique. As parents, they know that having a disabled child with enthusiasm even becomes an inspiration not just for their child but also for other children.

Second researcher. I realized that lows, which means problems and challenges, are really and literally occurring. But having a child with physical disabilities is even more difficult and challenging.

Third researcher. I admired their highs. Despite the challenges they were encountering, the mothers become even more courageous, and resilient. They showed unconditional love and care for their children.

## Conflict of Interest Statement

The authors declare no conflicts of interest.

## About the Authors

**Katherine Arabis-Quijote** is the program head of the Bachelor of Science in Social Work of Notre Dame of Midsayap College, Philippines.

**Sergio D. Mahinay, Jr.** is a faculty of the College of Arts and Sciences of Notre Dame of Midsayap College, Philippines. <https://orcid.org/0000-0002-7125-250X>

**Ralf L. Flauta** is a student-researcher and is currently enrolled in the program Bachelor of Science in Social Work at Notre Dame of Midsayap College, Philippines.

**Kesha Nuet S. Anito** is a student-researcher and is currently enrolled in the program Bachelor of Science in Social Work at Notre Dame of Midsayap College, Philippines.

**Laiza Mae R. Silvano** is a student-researcher and is currently enrolled in the program Bachelor of Science in Social Work at Notre Dame of Midsayap College, Philippines.

## References

- Antle, B. J., Mills, W., Steele, C., Kalnins, I., and Rossen B. (2007). An exploratory study of parents' approaches to health promotion in families of adolescents with physical disabilities. <https://files.eric.ed.gov/fulltext/EJ847482.pdf>
- Aydın, A. & Yamaç, A. (2014). The relations between the acceptance and childrearing attitudes of parents of children with mental disabilities. *Eurasian Journal of Educational Research*.
- Baraceros, E. L. (2017). Practical research. Rex Book Store, Inc. Philippines: Manila
- Berg, L., Kalmijn, M., Leopold, T. (2021). Explaining cross-national differences in leaving home. *Wiley Online Library*.  
<https://onlinelibrary.wiley.com/doi/full/10.1002/psp.2476>
- Berryman, R. C. (2009). Children Are Gifts from God, Disabled or Not! <https://www.amazon.com/Children-Are-Gifts-God-Disabled/dp/1607916355>
- Caulfield, J. (2019). How to Do Thematic Analysis | A Step-by-Step Guide & Examples. SCRIBBR. <https://www.scribbr.com/methodology/thematic-analysis/>
- Creswell, J. W. (2014). Research design: Qualitative, quantitative, and mixed methods approaches. *SAGE Publications, Inc.*  
<http://www.drbramedkarcollege.ac.in/sites/default/files/E%20Book%20Research%20Design%20Cressweell%202014.pdf>
- DeCarlo, M. (2022). Sampling in qualitative research. *PRESSBOOKS*.  
<https://pressbooks.pub/scientificinquiryinsocialwork/chapter/10-2-sampling-in-qualitative-research/>
- Doek, J. E. (2014). Child Well-Being: Children's Rights Perspective. In: Ben-Arieh, A., Casas, F., Frønes, I., Korbin, J. (eds) Handbook of Child Well-Being. Springer, Dordrecht. [https://doi.org/10.1007/978-90-481-9063-8\\_9](https://doi.org/10.1007/978-90-481-9063-8_9)
- Dorn, L. D. (2008). Adolescent participation in research. Science Direct. [https://www.sciencedirect.com/topics/medicineanddentistry/belmontreport?fbclid=IwAR0jk5xec40YJqnA93yeA5tCwdQzxZMREt8\\_axHnqNaeorB7YW2\\_DyGsGUw](https://www.sciencedirect.com/topics/medicineanddentistry/belmontreport?fbclid=IwAR0jk5xec40YJqnA93yeA5tCwdQzxZMREt8_axHnqNaeorB7YW2_DyGsGUw)
- Phillippi, J. and Lauderdale, J. (2017). A guide to field notes for qualitative research: context and conversation. [https://www.researchgate.net/publication/315944152\\_A\\_Guide\\_to\\_Field\\_Notes\\_for\\_Qualitative\\_Research\\_Context\\_and\\_Conversation](https://www.researchgate.net/publication/315944152_A_Guide_to_Field_Notes_for_Qualitative_Research_Context_and_Conversation)



- Gearing, R. E. (2004). Bracketing in research: A typology: *ResearchGate*. [https://www.researchgate.net/publication/51369212\\_Bracketing\\_in\\_Research\\_A\\_Typology](https://www.researchgate.net/publication/51369212_Bracketing_in_Research_A_Typology)
- Groenewald, T. (2004). A phenomenological research design illustrated. *International Journal of Qualitative Methods*. <https://journals.sagepub.com/doi/pdf/10.1177/160940690400300104>
- Hancock, B., Ockleford, E., & Windridge, K. (2009). An introduction to qualitative research, National Institute for Health Research. [https://www.rds-yh.nihr.ac.uk/wp-content/uploads/2013/05/5\\_Introduction-to-qualitative-research-2009.pdf](https://www.rds-yh.nihr.ac.uk/wp-content/uploads/2013/05/5_Introduction-to-qualitative-research-2009.pdf)
- Henry, C. S. & Harrist, A. W. (2022). Family resilience theory. [https://link.springer.com/chapter/10.1007/978-3-030-92002-9\\_4](https://link.springer.com/chapter/10.1007/978-3-030-92002-9_4)
- Heotis, E. (2020). Phenomenological research methods: Extensions of Husserl and Heidegger. *International Journal of School and Cognitive Psychology*. [https://www.researchgate.net/publication/344192530\\_Phenomenological\\_Research\\_Methods\\_Extensions\\_of\\_Husserl\\_and\\_Heidegger](https://www.researchgate.net/publication/344192530_Phenomenological_Research_Methods_Extensions_of_Husserl_and_Heidegger)
- Groenewald, T. (2004). A phenomenological research design illustrated. University of South Africa. <https://journals.sagepub.com/doi/full/10.1177/160940690400300104>
- Laycraft, K. (2019). Acceptance: The key to a meaningful life. [https://www.academia.edu/40099384/Acceptance\\_The\\_Key\\_to\\_a\\_Meaningful\\_Life](https://www.academia.edu/40099384/Acceptance_The_Key_to_a_Meaningful_Life)
- Maguire, M. & Delahunt, B. (2017). Doing a thematic analysis: A practical, step-by-Step: guide for learning and teaching scholars. Dundalk Institute of Technology. <https://ojs.aishe.org/index.php/aishe-j/article/view/335>
- Makunika, N. (2022). Phenomenology approach in qualitative research. *Dibrugarh University Department of Sociology*. [https://www.academia.edu/42918525/Phenomenology\\_Approach\\_in\\_Qualitative\\_Research](https://www.academia.edu/42918525/Phenomenology_Approach_in_Qualitative_Research)
- Nambisan, Padma. (2017). An Introduction to ethical, safety and intellectual property rights: Issues in biotechnology. *ScienceDirect*. <https://www.sciencedirect.com/topics/medicine-and-dentistry/belmont-report>
- Pfeiffer, S. and In-Albon, T. (2022). Comprehensive clinical psychology (2nd ed.). <https://www.sciencedirect.com/topics/medicine-and-dentistry/family-systems-theory>
- Pretorius, G., Chauke, A. P. & Morgan, B. (2011). The lived experiences of mothers whose children were sexually abused by their intimate male partners. *Indo-Pacific Journal of Phenomenology*. <https://www.ajol.info/index.php/ijpp/article/view/73370>
- Roudabush, C. (2019). Why spending quality time with your children is important. <https://extension.sdstate.edu/why-spending-quality-time-your-children-important>
- Ryan, G., & Bernard, H. (1999). Techniques to identify themes in qualitative data. University of Florida

- Sargeant, J. (2012). Qualitative research part II: Participants, analysis, and quality assurance. *Journal of Graduate Medical Education*.
- Shattnawi, K. K., Bani, W. M., Al-Natour, A., Al-Hammouri, M. M., Al-Azzam, M., and Joseph, R. A. (2020). Parenting a child with autism spectrum disorder: Perspective of Jordanian Mothers. *SAGE journals*. <https://doi.org/10.1177/1043659620970634>
- Smith, J. A. and Osborn, M. (2014). Interpretative phenomenological analysis as a useful methodology for research on the lived experience of pain. <https://doi.org/10.1177/2049463714541642>
- Stumbo, E. (2017). World down syndrome day 2017. <https://www.ellenstumbo.com/epsiode21/>
- UNICEF, (2022). Children with disabilities" Every child has the right to live in an inclusive world. <https://www.unicef.org/disabilities>
- Yale University. (2022). protocol design - inclusion and exclusion criteria. human subject protection. <https://assessment-module.yale.edu/human-subjects-protection/protocol-design-inclusion-and-exclusion-criteria#:~:text=Inclusion%20and%20exclusion%20criteria%20may,%2C%20psychosocial%2C%20or%20emotional%20conditions>

Creative Commons licensing terms

Authors will retain the copyright of their published articles agreeing that a Creative Commons Attribution 4.0 International License (CC BY 4.0) terms will be applied to their work. Under the terms of this license, no permission is required from the author(s) or publisher for members of the community to copy, distribute, transmit or adapt the article content, providing a proper, prominent and unambiguous attribution to the authors in a manner that makes clear that the materials are being reused under permission of a Creative Commons License. Views, opinions and conclusions expressed in this research article are views, opinions and conclusions of the author(s). Open Access Publishing Group and European Journal of Special Education Research shall not be responsible or answerable for any loss, damage or liability caused in relation to/arising out of conflict of interests, copyright violations and inappropriate or inaccurate use of any kind content related or integrated on the research work. All the published works are meeting the Open Access Publishing requirements and can be freely accessed, shared, modified, distributed and used in educational, commercial and non-commercial purposes under a [Creative Commons Attribution 4.0 International License \(CC BY 4.0\)](https://creativecommons.org/licenses/by/4.0/).