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Beyond the Classroom: A Case Study of Parents' Experiences in Parent-Mediated Interventions for Learners with Special Needs

Heideelyn G. Cauilan
Saint Columban College, Pagadian City, Philippines
E-mail: heideelyn.cauilan@sccpag.edu.ph ORCID ID: https://orcid.org/0009-0007-0110-7845

Rizl Fayne S. Rosagaron
Saint Columban College, Pagadian City, Philippines
E-mail: rizlfayne.sabanal@sccpag.edu.ph ORCID ID: https://orcid.org/0009-0002-9131-340X

Eleonor C. Gumalang
Saint Columban College, Pagadian City, Philippines
E-mail: eleonor.gumalang@sccpag.edu.ph ORCID ID: https://orcid.org/0009-0007-9450-681X

Kaye Maghanoy
Saint Columban College, Pagadian City, Philippines
E-mail: kaye.maghanoy@sccpag.edu.ph ORCID ID: https://orcid.org/0009-0003-0898-7890

Janus Naparan
Saint Columban College, Pagadian City, Philippines
E-mail: janusnaparan@sccpag.edu.ph ORCID ID: https://orcid.org/0000-0003-4157-0598

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Abstract

Background and Aim: Parent-mediated interventions have gained recognition as a cost-effective approach to supporting children with special needs, particularly in low-resource settings where professional services remain inaccessible. While existing literature has examined the effectiveness and barriers of these interventions, it has not fully captured how parents themselves experience their transition into this role, particularly through the lens of established transition theory. This qualitative case study addresses this gap by exploring how parents and caregivers of learners with special needs experience their transition into and sustained involvement in parent-mediated intervention, using Schlossberg's Transition Theory as a theory-informed analytic lens and extending it by examining how geographic and institutional scarcity appears to shape each of its four factors within a single resource-constrained setting.

Materials and Methods: A descriptive qualitative case study design was employed, anchored in an interpretivist and constructivist paradigm. Semi-structured, in-depth interviews were conducted with six parents and caregivers who had sustained active involvement in parent-mediated intervention for at least six months at Malangas Central SPED Center, Malangas District, Division of Zamboanga Sibugay, Philippines. Data were analyzed using Braun and Clarke's six-phase thematic analysis, applied deductively at the level of Schlossberg's four predetermined factors, Situation, Self, Support, and Strategies, with sub-themes developed inductively within each factor.

Results: Analysis within the four predetermined factors surfaced patterns of necessity-driven entry into the interventionist role, an initial period of self-doubt giving way to a personally constructed sense of capacity, a support landscape anchored heavily in SPED teachers with limited peer networks, and a reliance on self-built routines and coping outlets. Across participants, geographic and institutional scarcity appeared to condition how each of these factors was experienced, converging toward an outcome best described as sustained yet fragile parental involvement.

Conclusion: Among six already-engaged caregivers in one rural SPED setting, this study offers a theory-informed account of how geographic and institutional scarcity appears to shape parents' transition into and sustained practice of the parent-mediated interventionist role, extending Schlossberg's Transition Theory to a special education caregiving context in which it has not previously been applied. The proposed contextual pattern is offered as a case-derived interpretation warranting further examination in other settings, rather than an established or generalizable mechanism.

Keywords: Parent-mediated Intervention; Special Education Needs; Caregiver Experience; Philippine SPED

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Introduction

Parent-mediated interventions have gained increasing recognition worldwide as a cost-effective and accessible approach to supporting the developmental needs of children with special needs. Across disability types, these interventions, in which parents are trained to deliver therapeutic and instructional strategies within daily routines, have produced moderate gains in child behavior, communication, and social skills, with the strongest evidence found among children with autism spectrum disorder. Cheng et al. (2023) found moderately strong overall benefits of parent-implemented interventions for children with autism, particularly in positive behavior and social skills, while Guo and Keles (2025) reported that parent-involved interventions for children with specific learning disabilities produced immediate and sustained academic gains. Beyond child outcomes, Koly et al. (2021) and Allen et al. (2021) found that parent-mediated interventions also reduce parental stress and depressive symptoms while improving parent-child interaction and parental self-efficacy, suggesting that these interventions benefit both the child and the parent who delivers them.

Despite this promise, parents who take on the role of interventionist encounter a wide range of challenges that complicate sustained implementation. Massey et al. (2025) and Kim et al. (2021) identified insufficient parental knowledge, lack of confidence, and limited time as the most consistently reported barriers across disability populations, with over 85 percent of caregivers in one community-based study reporting at least one challenge with home practice. Jurek et al. (2023) further described the psychological burden parents carry, noting feelings of being overwhelmed and uncertain about their own capability, alongside ambivalence about whether their efforts are truly effective. These difficulties are compounded by relational strain, cultural mismatch between intervention approaches and family traditions, and socioeconomic disadvantage, particularly in low-resource settings, as documented by Frost and Ingersoll (2025) and Szlamka et al. (2022). Taken together, the literature paints parent-mediated intervention not simply as a set of techniques to be learned, but as a demanding life transition that reshapes a parent's daily routines, identity, and sense of competence.

This framing of parent-mediated intervention as a transition, rather than a discrete skill set, points toward a gap in how the experience has been studied theoretically. Several frameworks have been used to explain how caregivers adapt to the demands of raising a child with a disability. The Double ABCX Model explains family adaptation primarily as a function of cumulative stressor pile-up weighed against existing family resources, while Lazarus and Folkman's (1984) Transactional Model of Stress and Coping centers on how an individual cognitively appraises a stressor and selects a coping response. Both models are well suited to explaining stress outcomes, but neither is built specifically to capture the transition itself, the shift in identity, routine, and role that occurs as a parent moves from caregiver to interventionist. Schlossberg's Transition Theory (1981; Anderson, Goodman, & Schlossberg, 2012) was developed specifically to explain this kind of role change, organizing adaptation around four interacting factors, Situation, Self, Support, and Strategies, that together capture not only whether a person copes, but how the surrounding circumstances, personal resources, relationships, and actions interact over the course of the transition itself. This distinction makes Schlossberg's framework better suited than stress-focused models to a study concerned with the process of becoming, rather than simply surviving, the role of interventionist.

The 4S framework has been applied productively to understand transitions in nursing, maternal role adjustment, and higher education contexts. Özcan and Temiz (2025) used a closely related transition framework to show that structured support across the antenatal to postpartum period improved maternal role satisfaction and self-efficacy, while Cheng et al. (2023) applied the 4S framework to show how rural Chinese parents navigated their own psychological adjustment as their children transitioned to college. Despite this relevance to caregiving roles, Estakhri et al. (2025) did not identify a study that had directly applied Schlossberg's original 4S framework within special education or disability caregiving contexts among those reviewed, suggesting an underexplored area in understanding how parents of learners with special needs experience their own transition into the role of interventionist.

This gap is especially pressing within the Philippine setting, where special education operates under a well-established legal framework but continues to face persistent implementation challenges that are unevenly distributed across the country. The Department of Education has enacted several

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policies supporting learners with disabilities, including the Enhanced Basic Education Act of 2013 and DepEd Order No. 44, s. 2021, and each division is mandated to maintain at least one SPED center. Yet Espeño et al. (2024) and Tagyamon et al. (2025) found that significant gaps remain between policy and practice, including inconsistent implementation across regions, insufficient teacher training, and inadequate monitoring mechanisms. These gaps are not evenly felt across the country. Tagyamon et al. (2025) specifically noted that rural communities tend to be constrained by fewer resources and training facilities compared to the denser institutional support available in cities, meaning that a single rural SPED center often functions as the sole point of access for an entire district, in contrast to urban divisions where families can typically draw on multiple schools, hospitals, and private therapy providers. Parental involvement, in particular, remains constrained within this uneven landscape. Garcia et al. (2025) found that low-income Filipino parents face barriers such as limited access to learning resources and difficulty finding time, while Gaspar and Sahay (2025) argued that existing standards for parent involvement are largely designed for parents of children without disabilities, making them poorly suited to the realities faced by parents of learners with special needs. Within this landscape, parents are frequently called upon to take on a managerial and interventionist role in their child's education, as seen during the pandemic transition programs studied by Villareal et al. (2022), yet little is known about how Filipino parents in rural, resource-scarce divisions specifically experience and navigate this transition.

It is within this context that the present study is situated. Conducted among parents and caregivers of learners with special needs at Malangas Central SPED Center, Malangas District, Division of Zamboanga Sibugay, this study explored how parents describe their experiences in transitioning into and sustaining their role as parent-mediated interventionists for their children. Anchored in Schlossberg's Transition Theory, the study examined this experience through the lens of Situation, Self, Support, and Strategies, offering a framework capable of capturing not only the practical demands of the role but also the psychological adjustment, support systems, and coping strategies parents draw upon to sustain it. In doing so, this study responds to a gap identified in the literature reviewed, extending Schlossberg's framework into a special education caregiving context where it does not appear to have been previously applied, while contributing local, Philippine-based evidence to a body of research that remains dominated by studies from higher-income countries.

Objectives

This study explored the experiences of parents and caregivers of learners with special needs in implementing parent-mediated interventions at Malangas Central SPED Center, Malangas District, Division of Zamboanga Sibugay. This study answered the central question, *"How do parents describe their experiences in transitioning into and sustaining their role as parent-mediated interventionists for their children with special needs, and how does Schlossberg's Transition Theory illuminate this experience within a geographically and institutionally scarce setting?"*

Specifically, it answered the following questions: (1) How do parents describe the situation that led them to take on the role of a parent-mediated interventionist for their child? (2) How do parents describe themselves, including their personal resources, attitudes, and sense of readiness, in carrying out this role? (3) What forms of support, whether from family, school, or the community, do parents draw on as they carry out parent-mediated interventions? (4) What strategies do parents employ to cope with and sustain their role as parent-mediated interventionists? (5) In what ways, if any, does geographic and institutional scarcity appear to shape how these four factors interact within this setting?

Literature Review

Effectiveness of Parent-Mediated Interventions and Its Contested Boundaries

Parent-mediated interventions are consistently associated with moderate developmental gains, though the strength and consistency of this evidence varies considerably by disability type and outcome domain, and several studies directly complicate the optimistic reading of the field. Cheng et al. (2023) found moderately strong overall benefits for children with autism, particularly in positive behavior and social skills, and Koly et al. (2021) reported similar gains in communication, social, motor, and cognitive skills across autism, intellectual disability, ADHD, and cerebral palsy populations in South

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Asia. Guo and Keles (2025) extended this pattern to specific learning disabilities, finding sustained academic gains that generalized across contexts. Parents themselves also appear to benefit, with Koly et al. (2021) and Allen et al. (2021) reporting reductions in parental stress and depressive symptoms alongside improved self-efficacy.

Set against these findings, however, is a body of literature that directly qualifies how much confidence this evidence warrants. Conrad et al. (2021) found that evidence certainty is frequently downgraded due to risk of bias and small sample sizes, and Ranta et al. (2024) observed the inverse of what would be expected of a robust effect: studies with the largest samples produced the smallest effect sizes, suggesting that early, small-study findings may have inflated the field's overall sense of efficacy. This tension, between a literature that reports meaningful gains and a literature that questions the durability of those gains once methodological rigor increases, remains largely unresolved, and it is this contested middle ground, rather than either the optimistic or skeptical pole, that best characterizes the current state of the evidence.

Convergence and Divergence in the Barriers Parents Face

Across contexts, the literature converges on a consistent core of practical barriers: insufficient parental knowledge, lack of confidence, and limited time, identified by both Massey et al. (2025) and Kim et al. (2021) as the most commonly reported obstacles to home practice. Where the literature diverges is in how much weight is placed on psychological versus structural explanations for non-adherence. Jurek et al. (2023) frame the central barrier as internal, emphasizing parents' overwhelm and self-doubt, while Szlamka et al. (2022) and He et al. (2024) locate the barrier externally, in poverty, competing health priorities, and limited literacy, particularly in low- and middle-income settings. These are not necessarily contradictory accounts, but the literature rarely examines how psychological and structural barriers interact within the same family, leaving the relationship between them empirically underexplored.

A more concrete blind spot concerns adherence monitoring itself. Niyonsenga et al. (2024) documented non-adherence rates of 34 to 79 percent for cerebral palsy home programs specifically, yet comparable quantitative adherence data for autism and intellectual disability populations does not appear to exist in the reviewed literature, leaving clinicians and researchers without a benchmark outside the cerebral palsy context. A second, narrower gap concerns whose experience is being captured at all: Massey et al. (2025) noted that studies in this area are dominated by mothers, with father perspectives largely absent across nearly every barrier category, a gap of direct relevance to this study given the inclusion of father participants.

Coping and Support: Where the Literature Agrees and Where It Is Silent

The coping and support literature converges clearly on one point: active, problem-focused coping, rather than avoidance, is consistently associated with sustained parental engagement, a finding shared by Lundgren et al. (2025) and Chin et al. (2023). There is similar convergence on the value of collaborative, trust-based relationships with professionals, which Harniess et al. (2022) and Damen et al. (2021) both link to greater parental persistence. Where the literature is comparatively silent, however, is on the mechanics of peer support itself. Yang et al. (2022) and Postma et al. (2024) both identify peer connection as protective, yet Postma et al. (2024) is careful to note that matching and supervision of peer relationships matter considerably, a qualification that receives far less empirical attention than the broad claim that peer support helps. This leaves an open question directly relevant to the present study: whether the near-total absence of peer support reported by parents in a single-site, geographically isolated setting reflects a genuine structural gap or simply a context in which peer support has not yet been organized.

Schlossberg's Transition Theory: Applications and Untested Boundaries

Schlossberg's Transition Theory, structured around the four factors of Situation, Self, Support, and Strategies, was developed within a Western, individualist counseling psychology tradition and has been applied predominantly within that same tradition, including nursing role adaptation, maternal role transition, and higher education contexts in North America and East Asia. Özcan and Temiz (2025) applied a closely related transition framework to maternal role adjustment, finding that structured

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support significantly improved role satisfaction and self-efficacy, while Estakhri et al. (2025) found consistent improvements in quality of life and role mastery across a range of caregiving populations in a broader scoping review.

More recent work has begun to test whether the theory's structure holds outside this original context, with mixed results that carry direct implications for the present study. Söner and Yılmaz (2025), applying the 4S framework to Turkish adolescents navigating the transition from high school to university, explicitly frame their study as one of the first applications of Schlossberg's theory to a non-Western, collectivist setting. Notably, they found that the Self component did not significantly mediate outcomes once situational and support factors were accounted for, a result the authors attribute to the collectivist cultural context, in which external, relational factors appear to carry more explanatory weight than individual self-appraisal, the opposite of what Schlossberg's original, individually centered theory would predict. This finding suggests that the theory's four factors may not carry equal or independent weight once applied outside the individualist context in which the model was originally built, a possibility with direct bearing on how this study interprets the relative prominence of Self versus Support and Situation in its own findings. Despite this emerging cross-cultural testing, Estakhri et al. (2025) did not identify a study that had directly applied Schlossberg's original 4S framework within special education or disability caregiving contexts among those reviewed, indicating that the theory's applicability to a collectivist, low-resource caregiving setting such as the one examined here remains an open empirical question rather than a settled one.

Philippine SPED Policy and Parental Involvement: Where Global Evidence and Local Reality Diverge

The Philippines maintains a formal legislative framework for special education, including the Enhanced Basic Education Act of 2013 and DepEd Order No. 44, s. 2021, with each division mandated to maintain at least one SPED center. Yet Espeño et al. (2024) and Tagyamon et al. (2025) found persistent gaps between this policy framework and its implementation, including inconsistent practice across regions and insufficient teacher training, with Tagyamon et al. (2025) specifically noting that rural communities face markedly fewer resources and training facilities than urban centers. This local picture stands in some tension with the broader global literature reviewed above, which is overwhelmingly generated in higher-income, better-resourced settings; where that literature debates the relative importance of psychological barriers, structural barriers, or peer support quality, the Philippine literature suggests these debates may be secondary to a more basic constraint, whether any professional service exists within reach at all. Garcia et al. (2025) and Gaspar and Sahay (2025) further note that parental involvement standards in this context are often built around parents of typically developing children, offering limited guidance for parents of learners with special needs specifically. Taken together, this body of local literature identifies a clear structural gap but has not yet examined, through a theoretical lens capable of capturing the transition itself, how parents in these specific rural, resource-constrained conditions experience and sustain their evolving role, a gap this study addresses directly.

Conceptual Framework

Figure 1 presents a non-linear rendering of the framework guiding this study. While the transition of parents into the role of parent-mediated interventionist is anchored in the four factors identified in Schlossberg's Transition Theory, Situation, Self, Support, and Strategies, these factors do not unfold in a single forward pass from entry to resolution. The process begins with the Situation, referring to the circumstances surrounding the transition, including the timing of the child's diagnosis, the degree of control the parent has over the change, and the extent to which this role is new or familiar to them. From this starting point, the framework branches into two factors that operate as ongoing resources throughout the transition, Self and Support, which continuously inform Strategies, the coping actions and deliberate responses parents employ to manage the demands of the transition as it unfolds. This interplay culminates in an Outcome, representing the resulting state of the parent's involvement at any given point, whether sustained, strained, or diminished.

Critically, this Outcome is not an endpoint but feeds back into the Self and Support factors, shown as the dashed return paths in Figure 1. A period of visible child progress, for instance, may

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reinforce a parent's sense of self-efficacy or prompt renewed engagement from a previously uninvolved family member, just as a period of strain may erode confidence or strain existing support relationships, reshaping how the parent approaches the next cycle of Strategies. This feedback structure reflects the recursive character of transition adaptation more broadly and is consistent with the iterative pattern observed in this study's own findings, where participants described their sense of self and available support shifting in response to their children's incremental progress rather than settling into a single, fixed state after an initial adjustment period. This framework guided the present study by allowing the researcher to examine not only the individual experiences parents report within each factor, but how the ongoing interaction among situation, personal resources, support systems, and coping strategies together shapes the sustainability of their role as parent-mediated interventionists over time.

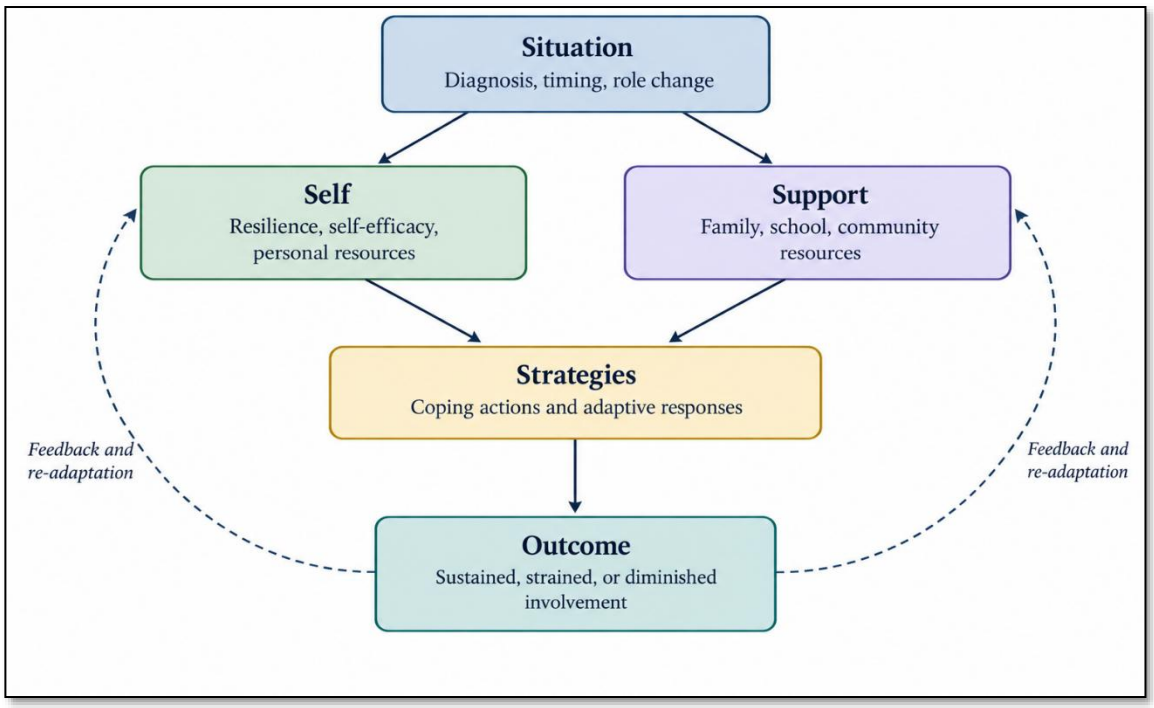


Figure 1 Interacting Process Framework of Parental Transition into the Parent-Mediated Interventionist Role

Methodology

1. Research Design

This study employed a descriptive qualitative case study design to explore the experiences of parents and caregivers of learners with special needs in implementing parent-mediated interventions at Malangas Central SPED Center, Malangas District, Division of Zamboanga Sibugay. A descriptive case study was deemed appropriate because the primary aim of this study was not to test a hypothesis or establish causal relationships, but to provide an in-depth, detailed account of a real-life phenomenon, in this case, the lived transition of parents into the role of parent-mediated interventionist, within its natural context.

As a single-site case, Malangas Central SPED Center was not selected because it is atypical, but because it reflects conditions that the broader literature on Philippine SPED provision describes as common among rural divisions: a single center serving as the sole point of access for an entire district, limited specialist staffing, and geographic distance from professional therapy services. In this sense, the case is illustrative of a wider pattern of rural resource scarcity rather than a unique or extreme instance, though the specific configuration of support available at this particular center, including the presence of a co-researcher already embedded within it as a teacher, is necessarily unique to this site and is addressed directly in the Reflexivity section below.

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This study was anchored in an interpretivist and constructivist paradigm, which holds that reality is socially constructed and that knowledge is best understood through the subjective meanings individuals assign to their own experiences. Rather than seeking a single, objective truth about parental involvement in intervention, this paradigm allowed the researchers to explore the varied and personally constructed meanings parents attached to their situation, sense of self, support systems, and coping strategies as they navigated this transition. This approach aligns closely with the study's theoretical framework, Schlossberg's Transition Theory, which similarly emphasizes that a transition is defined not by the event itself but by the individual's own perception and appraisal of it.

Data were gathered through semi-structured, in-depth interviews with six parents and caregivers. Consistent with Braun and Clarke's (2006, 2019) description of reflexive thematic analysis, sample size in this design is guided less by a fixed saturation threshold and more by information power, the depth and relevance of information each participant can provide relative to the study's specific aim. Given the narrow focus of this study on parents already engaged in parent-mediated intervention at a single site, and the richness of the accounts obtained across six in-depth interviews, the research team judged the resulting dataset sufficient to address the study's central and specific research questions, though this judgment is acknowledged as a limitation rather than a claim of exhaustive saturation.

2. Research Participants

This study involved six parents and caregivers of learners with special needs enrolled at Malangas Central SPED Center, Malangas District, Division of Zamboanga Sibugay. Participants were selected through purposive sampling, following the criteria established for this study, which required each participant to be a parent or primary caregiver actively engaged in parent-mediated intervention for at least six months, with children representing varied disability types to capture a range of intervention experiences. Table 1 presents the demographic profile of the participants.

Table 1 Demographic Profile of Participants

Participant	Relationship to Child	Age	Child's Age	Child's Disability	Duration of Parent-Mediated Involvement
Parent 1	Mother	34	6	Autism Spectrum Disorder	1 year and 6 months
Parent 2	Mother	41	9	Intellectual Disability	2 years
Parent 3	Father	38	5	Developmental Delay	8 months
Parent 4	Mother	45	11	Learning Disability	3 years
Parent 5	Mother	29	4	Autism Spectrum Disorder	7 months
Parent 6	Father	36	8	Intellectual Disability	1 year and 2 months

The participants comprised four mothers and two fathers, ranging in age from 29 to 45 years old. Their children's ages ranged from 4 to 11 years old, and their disability profiles varied across autism spectrum disorder, intellectual disability, developmental delay, and learning disability. Duration of parent-mediated involvement ranged from 7 months to 3 years.

Because the six-month minimum involvement criterion was a condition of inclusion, this study by design captures only parents who had already sustained their role as interventionist to that point. Parents who discontinued parent-mediated intervention, or who were unable to sustain involvement long enough to meet this threshold, are not represented in this sample. Consequently, the findings, including the patterns of self-doubt, coping, and eventual adaptation described in the Results, should be read as characteristic of parents who had already achieved a degree of sustained involvement at the time of the interview, not as a full account of how parents who discontinue the role experience the same transition.

3. **Research Instrument**

This study used a semi-structured interview guide as its primary research instrument, developed by the researchers based on the study's central and specific research questions and organized according to the four factors of Schlossberg's Transition Theory: Situation, Self, Support, and Strategies. The guide opened with introductory questions to establish rapport and gather background information about the participant and their child, followed by core questions addressing each theoretical factor, and closed with an open-ended question inviting further reflections. Prior to data collection, the instrument underwent content validation by a panel composed of a SPED specialist, a research methodologist, and

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a psychologist familiar with caregiver dynamics, and was revised accordingly before use. Interviews were conducted in Filipino, English, or the local dialect based on participant preference.

4. Data Gathering Procedure

Before data collection, the researchers secured written permission from the Schools Division Superintendent of the Division of Zamboanga Sibugay and the School Head of Malangas Central SPED Center. Eligible participants were identified through coordination with SPED teachers at the center against the study's sampling criteria. To reduce the potential influence of an existing teacher-parent relationship on participants' responses, the co-researcher employed as a teacher at the center did not personally conduct interviews with parents of children she directly taught; interviews were instead conducted by the other members of the research team, with the teacher-researcher contributing to participant identification, site coordination, and later stages of analysis.

Each interview was scheduled at a time and place convenient for the participant, either at the SPED center or another mutually agreed setting, and lasted approximately thirty to forty-five minutes. Interviews were audio-recorded with the participant's consent, and the interviewing researcher took supplementary field notes during each session to capture non-verbal cues and contextual observations. Interviews conducted in Filipino or the local dialect were personally translated into English by the researcher who conducted them, working directly from the audio recording rather than from an intermediate transcript, so that tone and phrasing could be checked against the original recording during translation. Each translated transcript was then reviewed by a second member of the research team against the original recording to check translation accuracy, with discrepancies discussed and resolved jointly before the transcript was finalized. All recordings were transcribed verbatim within twenty-four hours of the interview. Finalized transcripts, in the participant's original language alongside the English translation, were returned to participants for member checking, in which each participant reviewed their own transcript to confirm accuracy and had the opportunity to clarify, expand, or revise any statement; all six participants completed this review, and their feedback consisted primarily of minor clarifications of specific phrases rather than substantive changes to content. All data collected were kept confidential and securely stored throughout the process.

5. Data Analysis

The data gathered from the interviews were analyzed using Braun and Clarke's (2006) six-phase approach to thematic analysis. Consistent with the study's use of a predetermined theoretical framework, this analysis was theory-informed and proceeded deductively at the level of the four major themes, Situation, Self, Support, and Strategies, which were established before coding based on Schlossberg's Transition Theory, while sub-themes within each of these four factors were developed inductively from the data itself rather than specified in advance.

The researchers began by familiarizing themselves with the data through repeated reading of the verbatim transcripts alongside the corresponding field notes. Initial codes were then generated within each of the four predetermined theoretical categories, after which these codes were organized and collated into candidate sub-themes specific to that category. Candidate sub-themes were reviewed against the coded extracts and the entire dataset to ensure internal coherence and distinctiveness, refined, merged, or discarded as necessary, and then clearly defined and named. Analysis proceeded independently at first, with each researcher coding a subset of transcripts, followed by joint discussion to reconcile differences in coding and interpretation before finalizing the sub-theme structure. Finally, the analysis was written up by weaving the thematic findings together with supporting participant quotes and relevant literature.

6. **Ethical Considerations**

This study adhered to the ethical standards for research involving human participants, with the proposal approved by the appropriate research ethics review body and formal permission secured from the Schools Division Superintendent of the Division of Zamboanga Sibugay and the School Head of Malangas Central SPED Center. All participants received a clear explanation of the study's purpose and procedures and signed an informed consent form indicating their voluntary participation, with the right to withdraw at any point without consequence. Confidentiality was protected through the use of pseudonyms and secure storage of all data, accessible only to the researcher. Given the sensitive nature

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of discussing a child's disability, the researcher remained attentive to participants' emotional well-being throughout the interviews, and a token of appreciation was given afterward as a gesture of gratitude rather than as compensation.

7. Reflexivity

The research team's relationship to the study site was not uniform. One co-researcher is currently employed as a teacher at Malangas Central SPED Center, bringing firsthand familiarity with the center's operations, its learners, and the families it serves, while the remaining co-researchers had no prior professional relationship with the site or its participants. This mixed insider-outsider composition carried both advantages and risks. The teacher-researcher's existing relationships with families facilitated participant identification and trust-building in a community where outside researchers might otherwise struggle to gain access, and her familiarity with the center's day-to-day operation informed the research team's interpretation of participants' accounts of institutional support. At the same time, this same familiarity carried a risk of participants' responses being shaped by social desirability or a wish not to be perceived unfavorably by a teacher connected to their child's education. To manage this risk, the teacher-researcher did not personally interview any parent whose child she directly taught, and interview responses were considered by the full research team, including its members with no institutional tie to the center, during coding and theme development, to guard against interpretations being shaped solely by an insider perspective. The research team acknowledges that even with this safeguard, the teacher-researcher's institutional position may have influenced which parents agreed to participate, and this possibility is addressed further in the Limitations section.

8. **Ethical Consideration**

This study adhered to the ethical standards for research involving human participants and was reviewed and approved by the Research Office of Saint Columban College prior to data collection. Formal permission was also secured from the Schools Division Superintendent of the Division of Zamboanga Sibugay and the School Head of Malangas Central SPED Center. All participants received a clear explanation of the study's purpose and procedures and signed an informed consent form indicating their voluntary participation, with the right to withdraw at any point without consequence. Confidentiality was protected through the use of pseudonyms and secure storage of all data, accessible only to the research team. Because Malangas is a small, geographically defined community and several participant characteristics, including a child's disability type, age, and duration of involvement, are reported in combination, the research team considered the risk that a reader familiar with the community could potentially identify individual participants through deductive disclosure; demographic details were reported only at the level of aggregation necessary to establish sample diversity, and no participant is identified by any information beyond the pseudonym assigned. Given the sensitive nature of discussing a child's disability, the researchers remained attentive to participants' emotional well-being throughout the interviews, and a token of appreciation was given afterward as a gesture of gratitude rather than as compensation.

Results

The four major themes presented below, Situation, Self, Support, and Strategies, were established deductively before analysis, based on the four factors of Schlossberg's Transition Theory. Within each of these four predetermined themes, however, the specific sub-themes reported here were developed inductively from the data itself, rather than specified in advance, and reflect patterns that emerged directly from participants' own accounts.

The Situation Leading Parents into the Interventionist Role

The circumstances that led parents into the role of parent-mediated interventionist were shaped primarily by necessity, whether due to geographic distance from professional services, financial constraints, or the simple absence of anyone else to take on the role.

A Diagnosis That Redefined Daily Life. For most participants, the diagnosis itself marked an abrupt turning point that immediately reshaped their daily responsibilities, often communicated to them directly by a doctor or SPED teacher as a mandate rather than a choice.

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"The doctor said, 'You have to be the one to do it at home.' So that's when it began. I had no choice, really" (Parent 1).

"I didn't know I could do this. But I just... I started. I didn't think too much. I just did what the teacher said" (Parent 5).

"The teachers there are very patient with her. They told us that we need to do the interventions at home too. They said, 'Father, mother, you are the first teachers of your child'" (Parent 6).

These accounts reflect how the transition into the interventionist role was rarely framed as a suggestion, but as an expectation communicated by professionals at the moment of diagnosis. This mirrors Villareal et al. (2022), who found that parents of learners with disabilities were frequently required to take on a managerial role in their child's education with little preparation for the shift.

Taking on the Role Out of Necessity. Beyond the diagnosis itself, several parents described taking on the interventionist role because, as they themselves perceived it, there was no alternative available to them, whether due to distance, cost, or the absence of a co-parent at home.

"I am her mother. If I don't help her, who will?" (Parent 2).

"Here in our municipality, there are no therapists. We would have to travel to the city, which is expensive... I took on the role because I had to. There was no one else" (Parent 3).

"My son... he needs me more. That's what I realized. I am his mother. If I don't help him, who will?" (Parent 4).

This pattern echoes the financial and geographic barriers to service access identified by Massey et al. (2025) and Szlamka et al. (2022), and reinforces that in low-resource settings, parent-mediated intervention can, at least from parents' own vantage point, function less as an empowerment strategy and more as a default necessity.

Altogether, these two sub-themes cannot be fully understood apart from the specific conditions of Malangas Central SPED Center as the only SPED center serving the district. Participants consistently described an absence of nearby therapy clinics or developmental specialists, though this study did not independently verify service availability across the wider municipality, and these accounts are presented here as participants' own perceptions of their options rather than as an established inventory of local services. From the participants' vantage point, however, the choice between professional and parent-delivered intervention did not feel available to them, which helps explain why they described the transition not as a gradual decision but as an immediate mandate delivered at the point of diagnosis.

Parents' Sense of Self While Carrying Out the Interventionist Role

Parents' descriptions of themselves during this transition revealed a recurring pattern of initial self-doubt gradually giving way to a redefined sense of personal capacity, often anchored in love, faith, or resilience developed through adversity.

Confronting Self-Doubt and Inadequacy. Nearly all participants described an initial period of feeling unqualified or unprepared for the role, often compounded by guilt when their efforts did not immediately produce results.

"I'm not a professional. I don't have a degree in this. Sometimes I would do the exercise wrong, and my daughter would get frustrated. She would cry, and I would feel so guilty" (Parent 2).

"Did I do something wrong during my pregnancy? Did I not give him enough attention? I felt guilty" (Parent 4).

"Sometimes I follow the instructions, but my son doesn't respond. He just ignores me. And I feel like I'm failing" (Parent 5).

These accounts align with Jurek et al. (2023), who found that parents frequently feel overwhelmed and uncertain about their own capability during parent-mediated intervention, often compounded by self-blame that has little basis in the actual cause of their child's condition.

Finding Strength Through Love, Faith, and Resilience. Despite this uncertainty, parents consistently identified specific internal resources, whether emotional, spiritual, or dispositional, that carried them through the role.

"My personal resource? I think it's my love for him. That's it. That's the only thing that keeps me going" (Parent 1).

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"My personal resources? I'm physically strong. I can carry my son when he's tired... I also have a good memory. The teacher shows me activities, and I remember them" (Parent 3).
"I see a problem, and I fix it. That's how I approach this... I didn't waste time on guilt or self-pity" (Parent 6).

This variation in personal resources, ranging from emotional attachment to physical stamina to practical problem-solving, extends the findings of Koly et al. (2021) by illustrating that the Self factor is not a single trait but a personally constructed combination of whatever internal resource is most available to the individual parent.

The contrast between these two sub-themes reflects a defining feature of the Self factor within this particular site: because Malangas Central SPED Center functioned, in participants' own accounts, as their only accessible source of professional guidance, parents described having no ready comparison point by which to judge their own performance beyond what the center's teachers told them. This absence of an external benchmark appears, based on participants' own framing, to intensify both the early self-doubt participants described and the eventual redefinition of competence around whatever internal resource, love, memory, or practicality, each parent already possessed before taking on the role.

Support Systems Parents Draw Upon

Participants described a support landscape that was inconsistent and often incomplete, with reliable support from SPED teachers contrasted against limited understanding from extended family and what participants described as a near-total absence of peer or community networks.

The School as a Consistent Anchor. Across the transcripts, the SPED center and its teachers emerged as the most consistently reliable source of support, often extending beyond formal instructional duties.

"One teacher even visits our house sometimes to check on us. That means a lot to me" (Parent 5).
"The SPED center teachers are very supportive. They give us materials. They give us feedback. They even call to check on us" (Parent 6).
"The teachers at the center are very kind. They call me when they have new materials. They even gave me a book about intellectual disability, and I read it" (Parent 2).

This finding is consistent with Beltran et al. (2025), who noted that teachers play a crucial role in promoting parental involvement through explicit invitations to engage, though the depth of individual attention described here also reflects the manageable caseload of a single rural SPED center.

Partial Understanding and the Absence of Peer Networks. While family members often provided practical assistance, several parents described this support as limited by a lack of genuine understanding of their child's condition, compounded by what they experienced as an almost complete absence of peer connection.

"My mother helps me sometimes... but she doesn't really understand his condition. She thinks he's just 'makulit' or stubborn. She says, 'Just spank him, he'll behave'" (Parent 1).
"I don't have a support group. I don't know other parents with children with learning disabilities. I wish I did" (Parent 4).
"My old friends... they don't have children with special needs. They don't understand why I can't go out with them anymore. They think I'm too serious now" (Parent 3).

This pattern reflects Gaspar and Sahay's (2025) observation that support structures in special education are often designed around professional expertise rather than parent-to-parent connection. The consistent absence of peer networks described by these participants stands in contrast to findings by Yang et al. (2022), who identified peer support as a significant buffer against isolation.

Taken together, these sub-themes point to a support structure at Malangas Central SPED Center that participants experienced as deep in one dimension but narrow in another. Based on participants' own descriptions, the rural, dispersed nature of the municipality meant that parents facing similar circumstances rarely encountered one another organically, and with no parent support group currently operating through the center, the professional relationship with teachers appears, from participants' accounts, to have absorbed a support function that in better-resourced or more urban settings might otherwise be distributed across both professional and peer channels.

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Strategies Parents Employ to Sustain Their Involvement

To sustain their involvement, parents relied on a combination of structured routines, adaptive teaching techniques, and personal coping outlets, ranging from rest and prayer to, in one case, a strategy the participant himself acknowledged as imperfect.

Structured Daily Routines. Every participant described establishing a consistent daily schedule for intervention activities, often built around existing work or household routines rather than replacing them.

"Every day, after breakfast, we do the exercises for one hour. I make it fun. I use songs and games" (Parent 2).

"When I come home from work, I rest for 30 minutes, then I start the activity with my daughter. We do it for one hour" (Parent 6).

"I use a lot of visual aids... I use the 'First... Then...' approach... I also use a timer. He knows that when the timer rings, the activity is done" (Parent 5).

These findings align with Frost and Ingersoll (2025), who found that integrating intervention strategies into daily routines rather than relying on dedicated practice sessions is more feasible for working families.

Adaptive, Child-Centered Techniques. Parents also described tailoring their teaching methods to their child's specific responses and interests, adjusting materials to sustain engagement.

"He likes cars, so I use cars to teach colors and counting" (Parent 3).

"I use flashcards, I use colors, I use images. I make it as visual and interactive as possible... he likes using the tablet, so I let him use it for educational purposes" (Parent 4).

"My daughter loves music, so I incorporate that into the activities... when she does something correctly, I give her a star on her chart" (Parent 2).

This child-centered adaptation reflects Guo and Keles (2025), who found that parent-involved interventions tailored to the child's interests and responses produced more sustained academic and developmental gains.

Personal Coping Outlets. To sustain their own wellbeing, parents described a range of coping outlets, from rest and prayer to journaling, physical activity, and, in one case, a strategy the participant himself viewed with some ambivalence.

"I write in a diary... It's like therapy for me" (Parent 5).

"I have a notebook where I track his progress. When he does something new, even a small thing, I write it down. That helps me see that we're moving forward, even if it's slow" (Parent 1).

"Sometimes I drink a little beer at night. Just one. It helps me relax. I know it's not the best strategy, but it helps me cope" (Parent 3).

These findings align with Lundgren et al. (2025) and Oakley et al. (2022), who found that active, routine-based coping and deliberate self-care were associated with sustained parental engagement. Parent 3's disclosure, however, adds a nuance largely absent from the existing literature, underscoring that not all coping strategies parents rely on are protective, even as they serve an immediate stabilizing function.

Across all three sub-themes, the Strategies parents developed appear shaped by the same resource scarcity that defined their entry into the role. With no accessible respite care, therapy alternatives, or parent support programs operating in the municipality, according to participants' own accounts, parents at Malangas Central SPED Center have effectively had to construct their own low-cost intervention systems and their own coping outlets from whatever materials, routines, and personal habits were already within reach, a pattern that underscores just how self-reliant parent-mediated intervention becomes when participants perceive little surrounding institutional infrastructure.

Outcomes of Parents' Transition into the Interventionist Role

Across participants, the interplay of situation, self, support, and strategies most often culminated in continued, if imperfect, parental involvement sustained through visible, incremental progress in their children.

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"That small thing, it made all the hard work worth it" (Parent 3).
"My son looked at me today. He said 'ma' once. Those small things, they keep me going" (Parent 5).
"I think my personal resource is my resilience. I've been through many challenges in life. This is just another one" (Parent 2).
"She may have a disability, but she can still learn. She can still grow. I believe that" (Parent 6).

This pattern was not, however, uniform across every participant. Parent 5, whose involvement at seven months was the most recent among the group, described an outcome considerably less settled than her peers: "Every day is a surprise. Some days are good. Some days are terrible. But I just... I keep going." Where longer-tenured participants tended to describe their outcome in terms of an accumulated sense of progress, Parent 5's account suggests that for parents earlier in the transition, the outcome may be better characterized as ongoing volatility rather than incremental gain, a distinction that duration of involvement alone cannot fully explain but that this study's small, cross-sectional sample cannot resolve.

Rather than resolving into a single state of full adaptation, the outcome for these parents is best characterized as an ongoing, ever-adjusting equilibrium, one in which strain and fulfillment coexist, and where sustained involvement appears to be maintained less by certainty than by incremental, visible signs that the effort is not in vain, a condition made all the more precarious, based on participants' own accounts, by the limited surrounding support available within this specific rural SPED context.

Discussion

The findings of this study, organized around the four factors of Schlossberg's Transition Theory, both interventions, while offering a modest empirical contribution to an open theoretical question about how well Schlossberg's framework travels beyond the individualist context in which it was developed.

On Situation, participants' accounts of entering the interventionist role out of necessity rather than choice align closely with Massey et al. (2025) and Szlamka et al. (2022), who identified geographic distance and financial constraint as central barriers to service access in low-resource settings. What this study adds is a more direct illustration of how that structural constraint translates into the transition itself: rather than a gradual process of adjustment, participants in this study described the onset of their role as an immediate mandate delivered at the point of diagnosis. This mirrors Villareal et al. (2022), but extends it by suggesting that in a single-access-point rural setting such as Malangas, the transition's timing is compressed by the absence of alternatives rather than paced by the parent's own readiness, a pattern the broader Situation literature has not typically emphasized.

On Self, the pattern of early self-doubt giving way to a personally constructed sense of capacity is broadly consistent with Jurek et al. (2023) and Koly et al. (2021). However, this study's findings sit in an interesting tension with Söner and Yılmaz (2025), who found that the Self component did not significantly mediate outcomes for adolescents navigating a collectivist, non-Western transition, with situational and support factors instead carrying more explanatory weight. The present findings do not straightforwardly confirm or refute this pattern. Participants here did describe Self as personally salient, offering vivid accounts of love, faith, and resilience as internal resources, yet these same accounts were consistently framed as responses to the absence of external benchmarks or professional feedback beyond what the SPED center provided, suggesting that Self may not operate independently of Situation and Support so much as be shaped by their scarcity. This reading is broadly consistent with Söner and Yılmaz's (2025) caution that in collectivist, relationally dense contexts, Self may function less as an independent transition factor than as one filtered through situational and relational conditions, though this study's design, six interviews in one setting, cannot adjudicate this question with the same statistical precision as their mediation analysis.

On Support, the reliance on SPED teachers as the primary and often sole source of consistent support, alongside a near-absence of peer networks, extends Beltran et al. (2025) and stands in contrast to Yang et al. (2022) and Postma et al. (2024), who identified peer connection as an important protective factor in other settings. Rather than suggesting peer support is unimportant, the near-total absence described by participants here more likely reflects, as discussed in the Review of Related Literature, a setting in which peer support has not yet been organized rather than one in which it has been tried and

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found unhelpful, a distinction the existing literature's emphasis on peer support's benefits does not typically address.

On Strategies, participants' construction of low-cost, self-built routines and coping outlets aligns with Frost and Ingersoll's (2025) finding that integrating intervention into daily routines is more feasible than dedicated practice sessions. The disclosure by one participant of an ambivalent coping strategy and moderate alcohol use also adds a dimension largely absent from the reviewed literature, which has tended to document protective coping strategies more thoroughly than ambivalent or potentially risky ones, consistent with the general pattern noted in the Review of Related Literature that coping research in this area remains more developed on its protective side than its ambivalent or maladaptive side.

Altogether, these four factors did not operate as a simple linear sequence but appeared, consistent with the non-linear conceptual framework presented in Figure 1, to feed back into one another, with participants' evolving sense of Self and Support shifting in response to incremental changes in their children's progress, a dynamic that is elaborated further in the Knowledge Contribution section below. The overall pattern observed here, sustained but fragile parental involvement shaped by a resource-scarce environment, both supports and extends the existing literature's account of parent-mediated intervention as personally demanding, while adding the geographically and institutionally specific texture of a single rural Philippine SPED center that the largely higher-income literature reviewed above has not yet captured.

Conclusion

Based on the findings, it is concluded that the six parents and caregivers of learners with special needs interviewed at Malangas Central SPED Center navigated an interacting, non-linear process shaped by the four factors of Schlossberg's Transition Theory: Situation, Self, Support, and Strategies. These parents entered the interventionist role largely out of necessity, as they themselves described it, driven by geographic distance from professional services, financial constraints, and the absence of anyone else able to take on the role. In carrying out this role, most confronted an initial period of self-doubt and inadequacy, which gradually gave way to a personally constructed sense of capacity anchored in love, faith, resilience, or practical resourcefulness, though this progression was not uniform, and one participant's account suggests this settling may take longer, or look different, depending on how recently a parent entered the role. The support available to them was uneven, with SPED teachers serving as a consistently reliable anchor while extended family often provided only partial understanding and peer or community networks were, in participants' own accounts, largely absent. To sustain their involvement, parents relied on structured daily routines, child-centered adaptive techniques, and personal coping outlets, some protective and others carrying their own risks. Across participants, this involvement was sustained less by certainty and more by the incremental, visible progress of their children.

As a theory-informed qualitative case study of six already-engaged caregivers within a single rural SPED setting, these findings should be understood as an in-depth account of this particular group of parents at this particular site, not as a representative or generalizable picture of parent-mediated intervention more broadly. The study offers a case-derived interpretation, elaborated in the Knowledge Contribution above, of how geographic and institutional scarcity may shape the four factors of Schlossberg's framework, a pattern that warrants further examination in other resource-constrained settings before it can be treated as a transferable finding rather than an observation specific to this case.

With that scope in mind, this study's findings carry a modest but concrete implication for how parent-mediated intervention is typically designed and discussed in the broader literature. Much of that literature, including several studies reviewed above, implicitly assumes some baseline of surrounding community resources, whether a functioning peer network, accessible respite care, or nearby professional backup, against which a parent's home-based efforts are meant to operate as a complement. The experience of the parents in this study suggests that this assumption does not hold in every setting, and that in a context such as Malangas, parent-mediated intervention is not operating alongside a broader support system so much as substituting for one. Rather than treating parent-mediated intervention design as a single model to be adapted for local delivery, this suggests a need for

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intervention and support models that are built explicitly around conditions of scarcity from the outset, rather than assuming a baseline that a specific setting may not actually provide, a distinction the Recommendation section below addresses through stakeholder-specific steps.

Limitations

This study has several limitations. As a single-site case study of six purposively sampled parents at one rural SPED center, findings are not representative of other regions or resource contexts, and the six-month involvement criterion means the study captures only parents who had already sustained their role, excluding those who discontinued or struggled to begin. Participants' children represented heterogeneous disability types, so findings cannot speak to patterns within any single diagnosis. All data were self-reported in a single interview with no independent observation, records review, or input from other family members, leaving participants' accounts, including their perceptions of service availability, unverified and potentially shaped by social desirability. Interviews in Filipino or the local dialect were translated by the interviewing researcher rather than an independent translator, and one co-researcher's employment at the center introduces a mixed insider-outsider positionality that the safeguards described in the Reflexivity section could not fully eliminate. Finally, the cross-sectional design captured each parent at a single point in time, limiting insight into how the transition changes over the course of involvement, a constraint directly relevant to the more recently engaged participant's markedly less settled account in the Outcomes section.

Knowledge Contribution

Figure 2 presents a provisional, case-derived interpretive model, offered for further testing rather than as an empirically validated mechanism, given the small single-site sample this study draws from. The pattern observed across participants suggests that geographic and institutional scarcity does not simply sit alongside Schlossberg's four factors but appears to shape how each was experienced: it compressed Situation into an immediate, necessity-driven mandate rather than a gradual decision, left Self without external benchmarks for self-evaluation, channeled nearly all Support through a single institutional anchor in the apparent absence of peer networks, and pushed Strategies toward self-built, low-cost routines constructed from whatever was already within reach. These patterns converge on an outcome of sustained yet fragile involvement, maintained through incremental child progress rather than institutional backing. Figure 2 also proposes a feedback loop in which this fragile outcome leaves parents re-exposed to the same scarcity that shaped their entry into the role, offered here as a hypothesis the data suggest rather than a mechanism this study's design could directly test over time.

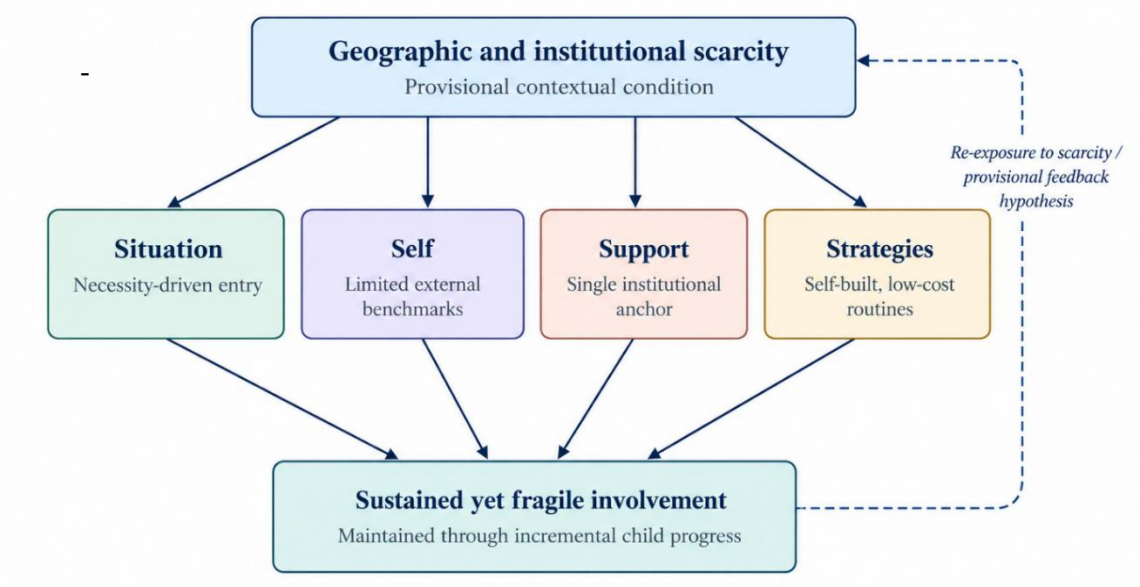


Figure 2. Provisional Case-Derived Interpretive Model

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Recommendation

Based on the findings and conclusions of this study, the following recommendations are proposed:

1. Establish a Parent Support Network at the SPED Center Level. SPED centers, particularly those in geographically isolated municipalities, should formally organize parent-to-parent support groups, whether through regular in-person gatherings or accessible digital platforms, to address the near-total absence of peer connection identified among participants in this study.
2. Develop Structured Orientation Programs for Newly Diagnosed Families. Given that parents described the transition into the interventionist role as an abrupt, unprepared mandate delivered at the point of diagnosis, SPED centers should design a structured orientation process that gradually introduces new parents to their role, easing the initial period of self-doubt and inadequacy this study identified.
3. Extend Family Education Efforts Beyond the Immediate Household. Since extended family members were found to provide practical help without fully understanding the child's condition, SPED centers should offer basic disability-awareness sessions open to grandparents, relatives, and other household members involved in caregiving, not only the primary parent.
4. Advocate for Local Government Investment in Accessible Therapy Services. Given that the necessity-driven nature of parent-mediated intervention in this study stemmed largely from the absence of nearby professional services, local government units and the Department of Education should prioritize the establishment of satellite therapy or teleconsultation services within geographically isolated districts such as Malangas.
5. Recognize and Formalize the Role of SPED Teachers as Primary Support Anchors. Considering that SPED teachers emerged as the single most consistent source of support for participating parents, the Department of Education should consider providing additional training, workload allowances, or incentives to SPED teachers who take on this expanded, informal support role beyond their standard instructional duties.
6. Conduct Further Research Across Multiple SPED Centers. Future studies should replicate this inquiry across multiple SPED centers, including both rural and urban settings, to determine whether the pattern of institutional scarcity identified in this single-site case study holds more broadly, and to further test the transferability of the interacting process framework developed here.

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