Parental Advocacy in Education of Children with Special Needs: Strategies and Challenges

Johar Ali [1] & Tauqeer Abdullah [2*]

[1] Vice Chancellor, University of Peshawar, Peshawar. KPK, Pakistan. E-Mail: johar_ali55@yahoo.com (http://orcid.org/0000-0003-4743-9291)

[2*]PhD Scholar, Department of Sociology, University of Peshawar, Peshawar. KPK, Pakistan. E-Mail: tauqeer.malik2023@uop.edu.pk (https://orcid.org/0009-0006-7576-7224)

Journal of Educational Psychology and Pedagogical Sciences (JEPPS)

ISSN:2791-0393 (Print) eISSN: 2791-0407

Vol.5, No. 2, (Jul-Dec, 2025): 29-45

Submitted 09 July 2025

Accepted 11 Nov 2025

Published 31 Dec 2025

DOI: https://doi.org/10.52587/jepps.v5i2.120

https://jepps.su.edu.pk/article/52

OPEN ACCESS

ABSTRACT

Parental advocacy plays a pivotal role in ensuring educational rights of children with special needs, their inclusion as well as addressing the problems affecting their equitable learning opportunities. This study was conducted to identify the strategies parents can use to advocate for the educational rights of their children with special needs and the challenges they face along the way. The study was quantitative in approach, with a descriptive survey research design involving 300 parents of primary school children in four special education centres in District Bhakkar, Punjab, Pakistan. Data were collected using newly developed scales based on a 5-point rating scale. Data were analysed through independent-samples t-test to determine differences between male and female respondents, as well as between rural and urban respondents. The study revealed that most of the parents of children with special needs lacked awareness about the strategies and options available which they could use for advocacy. Male and urban parents were found to be more informed than female and rural parents respectively. Additionally, the study found that a significant number of parents faced multiple challenges in their struggle towards advocacy. Rural parents were more likely to face challenges than urban parents in advocating for the educational rights of their children with special needs.

Keywords: Special education, Disability, Disabled child, Gifted child, Scales.

1. Introduction

Education for children with special needs is an extremely challenging issue in Pakistan due to cultural biasedness and administrative shortcomings that normally makes inclusive education difficult (Shaukat, 2023). Parental participation and advocacy are crucial for mitigating the significant inequalities prevailing in educational system, however, they practically confront innumerable challenges in doing so (Bibi et al., 2019; Singal, 2016). The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) and some other international

obligations, in addition to constitutional rights, have not barred Pakistan from enacting uneven and sometimes ineffectual inclusive education programs.

Parents of the children with special needs in Pakistan have to work hard to fight for their children's educational rights. Lack of awareness and societal stigma related to disabilities lead to exclusion of children with special needs both in and outside the classrooms (Khan et al., 2023; Faizefu & Neba, 2024). The absence of qualified teachers along with suitable facilities hinders the proper care of disabled students within certain special education institutions across Pakistan (Hussain et al., 2020; Singal et al., 2020). Such shortcomings in the educational system grow worse due to insufficient governmental oversight and insufficient funding for special education programs so parents struggle to deal with the complex and unresponsive educational system (Shaukat, 2023). The process of acquiring proper educational placement and supporting services for children with special needs remains complicated because of multiple bureaucratic obstacles. Access to crucial support for parents is delayed by their exposure to ambiguous information along with unstable educational systems and complex bureaucratic procedures (Hameed & Manzoor, 2016; Singal et al., 2020).

Financial restrictions increase the complexity level in this situation. The shortage of resources among Pakistani families blocks their ability to support children with special needs educationally and select alternative instructional methods (Hafeez, 2020). The financial strain affects these areas because they have limited educational and medical infrastructure (Malik et al., 2022). Obtaining appropriate education creates emotional and financial burdens on families until it leads them to become isolated and helpless (Faizefu & Neba, 2024).

The discussion of these barriers shows conclusively that the participation of parents is necessary but is a highly challenging task. Such parents have shown great persistence that indicates the need to change the system and support systems. The educational outcomes improvement process of special needs children in Pakistan must begin with the assessment of the strategies which Pakistani parents could use to combat against barriers to education among their children. In Pakistan, where policies on inclusive education are still in their development stage, and where institutional support of special needs education is not yet established, the knowledge of parental advocacy is especially important. The analysis of the way, in which parents navigate, negotiate, and challenge the barriers in education can offer a great understanding of the gaps existing in the current system and emphasize the necessity of organizing the support mechanisms. Therefore, the present research was intended to unveil the strategies and parental engagement issues to offer an improved level of support that would ensure the inclusiveness and equity of the special education system. These study questions were required to meet such goals of the research.

1. What are the most effective advocacy strategies available to parents of children with special needs?
2. What are the primary challenges parents face while advocating for the educational needs of their children with special needs?
3. Do male and female parents male and female parents differ regarding the strategies and challenges in parental advocacy?
4. Do rural and urban areas' parents differ regarding the strategies and challenges in parental advocacy?

2. Literature and Theory

A fundamental aspect of parental advocacy involves acquiring a detailed understanding of legal rights as well as policies pertaining to special education. Parents can familiarize themselves with relevant national and provincial laws and regulations, ensuring that the children with special

needs have right to an inclusive and equitable education tailored to their specific needs. Effective advocacy often involves building strong and collaborative relationships with educators as well as school administrators. Hafeez (2020) emphasizes on good relationship and trust between professionals and parents. The process of open and constructive communication with teachers, school meetings, and involvement in decision-making are essential measures of effective advocacy by parents. Parents that are actively involved in cooperation with school staff, are likely to achieve higher results in the education of their children. This type of collaborative work will make sure that the educational plans are designed to address the needs of the child, both basic and specific, and that the accommodations needed to support the well-being of the latter are provided (Abdullah et al., 2024; Faizefu & Neba, 2024).

There are significant barriers and challenges to parental advocacy in education of children with special needs. Such obstacles are a great set back to the parents who find it hard to access the right resources and help to their children with special needs. The process of passing special education system which appears to be a maze is one of the greatest obstacles. This system requires the parents to be adequately informed of the basic legal and social rights of their children with special needs (Muhammad et al., 2024). Moreover, inadequate funding for special education programs, lack of qualified special education teachers, and policy inconsistency are also included in the challenges faced by parents in advocating for their children with special needs. These problems are worsened by the stigma and cultural perspectives that surround impairments, because these are critical reasons for marginalization and discrimination for children with special needs as well as their families (Martinello, 2020). Some cultural perceptions of speciality also determine how community members view and support advocacy initiatives. In addition, parents face some psychological and emotional challenges while trying to meet their different responsibilities and campaigns including, stress, fatigue, and isolation (Shaukat, 2023).

This study is based on the Ecological Systems Theory (Bronfenbrenner, 1979) and Advocacy Theory (Schneider et al., 2013) in explaining the parental involvement in the education of children with special needs. The conceptualization of child development in the ecological systems theory sees child development as a result of various systems interacting with each other such as the family system, the school, the community, and the policy environment, and the role of parental advocacy within, and across, the systems in the provision of educational support. The advocacy theory is concerned with proactive involvement of parents in breaking the institutional barriers, bargaining resources and decision making processes to guarantee their children the right to an education. The parental advocacy, in the Pakistani context that is characterized by a low structure of inclusive education and a sociocultural barrier, is a very significant instrument of filling structural gaps. The framework assists the study to investigate the ways structural constraints, institutional responsiveness and socio-cultural values affect the strategies of parents and identify the issues that weaken effective advocacy of children with special needs.

3. Methodology

Design and Participants

This study was conducted through quantitative method under cross-sectional survey research design. All parents of primary school children with special needs in District Bhakkar formed the total population of the study. District Bhakkar includes four special education centres: Government Special Education Centre, Mankera (GSEC-M), Government Special Education Center, Kaloor Kot (GSEC-KK), Government Special Education Centre, Bhakkar (GSEC-B), and Government Special Education Centre, Darya Khan (GSEC-DK). The entire population was divided into rural and urban parents. In rural areas, a total of 511 students were enrolled, of which 302 were males and 209 were females. The urban population was 696, of which 388 were males and 308 were females. Across all centres and districts, the total population of the study was 1207.

students. More details about the population are provided in Table 1.

Table 1. Population Distribution

		Rural Areas' Students			Urban Areas' Students		
Sr.	Centres	Male	Female	Total	Male	Female	Total
1.	GSEC-M	67	49	116	91	81	172
2.	GSEC-KK	73	41	114	85	65	150
3.	GSEC-B	106	79	185	136	101	237
4.	GSEC-DK	56	40	96	76	61	137
Total		302	209	511	388	308	696
Grand Total		511 + 696 = 1207					

Sampling

Proportionate stratified sampling technique was used to select a representative sample of parents of male and female students from four special education centres in District Bhakkar. To ensure representation of students from each category (male/female, rural/urban), simple random sampling was applied after creating a comprehensive sampling frame for all students across the centres. Using the sample size formula of Krejcie and Morgan (1970), a final sample of 300 parents was determined. This sample included 72 parents from GSEC-M, 65 parents from GSEC-K, 105 parents from GSEC-B, and 58 parents from GSEC-DK. The gender of each parent (as respondent) was aligned with the gender of his/her child to maintain a balanced sample. Of the total sample, 126 students were selected from rural areas, while 174 students were from urban areas. A detailed breakdown of this sample distribution is given in Table 2.

Table 2. Sample Distribution

		Rural Areas' Students					Urban Areas' Students				
		Male		Female			Male		Female		
Sr.	Centres	*n*	*%*	*n*	*%*	Total	*n*	*%*	*n*	*%*	Total
1.	GSEC-M	16	22	12	23	28 (23%)	23	23	21	26	44 (25%)
2.	GSEC-KK	18	24	10	20	28 (22%)	21	22	16	21	37 (21%)
3.	GSEC-B	26	35	20	38	46 (36%)	34	35	25	33	59 (34%)
4.	GSEC-DK	14	19	10	19	24 (19%)	19	20	15	20	34 (20%)
Total		74 (59%)		52 (41%)		126 (42%)	97 (56%)		77 (44%)		174 (58%)
Grand Total		126 (42%) + 174 (58%) = 300									

4. Instrumentation

To collect data, a set of 20 scales was developed. The scales were divided into two main sections: parental advocacy strategies and challenges faced by parents in advocating for the educational rights of their children with special needs. The "Strategies" section consisted of 10 specific scales, which measured dimensions such as information and training, relationship building, personal advocacy, legislative advocacy, community engagement, legal action, resource use, documentation, empowerment and self-advocacy, and social media. Similarly, the "Challenges" section comprised 10 scales, focusing on factors such as lack of awareness and understanding, resource and infrastructure constraints, bureaucratic and institutional barriers, social stigma, financial constraints, limited professional support, the lack of comprehensive .

policies, accessibility issues, communication barriers, and emotional & psychological challenges. Each scale was developed on a 5-point Likert response format ranging from 1 (strongly disagree) to 5 (strongly agree) (see Annexure-A).

To establish content validity, a panel of eight experts was engaged to review the scales. The experts examined the scales and ensured that the contents in the scales were appropriate for accurately measuring the constructs. Experts evaluated relevance and clarity of each item using Item-Objective Congruence (IOC) method. Items rated as unclear or irrelevant were revised or removed. Internal validity was further confirmed through convergent and discriminant validity assessments by using the Fornell-Larcker criteria. Following the validation process, a pilot study was conducted with 27 parents to assess the feasibility and effectiveness of the research scales and design. Data from the pilot study were analyzed using the SPSS, and internal consistency of the scales was evaluated through Cronbach's alpha. Additionally, composite reliability calculations further supported reliability of the scales.

5. Data Collection and Analysis Procedure

Prior to starting data collection, necessary permissions were sought from relevant departments as well as special education centres involved in the study. The researchers presented the study's aims and objectives in detail to the officials. Additionally, the researchers addressed almost every potential ethical consideration, including participants' confidentiality and their voluntary participation. After seeking required permissions, all necessary arrangements were made to meet with parents of the selected students. The centres' staff facilitated the initial contact with local parents by enabling the researchers to hold in-person meetings. For parents who were outside the local area, the researchers managed to reach them via phone and scheduled time for collecting the required data. To further ensure ethical standards, informed consent was obtained from each respondent prior to data collection.

After data collection, raw data were entered into SPSS for analysis. The measurement model was developed using AMOS version 23, which allowed for examination of the factor structure. Factor analysis was conducted to ensure that each item within the construct loaded correctly onto the intended factor. In addition, univariate analysis was conducted using independent sample t-tests to explore differences based on gender (male/female) and location (rural/urban) of the respondents. The use of an independent-samples t-test is justified, as the study compared the mean scores of male and female parents as well as rural and urban parents. Before conducting the t-tests, the assumption of homogeneity of variances for two independent groups was checked using Levene's test (see F and P values in Table 3).

6. Results

As mentioned above in methodology section, the selection of parents as sample (300) was made on the basis of enrolled students in the special education centres. Among these children, 91 (30.33%) had a mobility or movement-related speciality, followed by 73 (24.33%) with deafness, 66 (22%) with blindness, and 57 (19%) were dumb. A small portion, 13 (4.34%), had cognitive specialities. Regarding educational grade, 86 (28.67%) of children were in grade one, while 52 (17.33%) were in playgroup. Other grades were represented with decreasing frequency: 55 (18.33%) in grade two, 41 (13.67%) in grade four, 35 (11.67%) in grade three, and 31 (10.33%) in grade five.

Table 3 presents a detailed psychometric properties of scales used in a study that highlights mean, standard deviation, Cronbach's alpha (α) for internal consistency, equality of variance (Levene's test, F and p values), composite reliability (CR), and average variance extracted (AVE) for convergent validity of each scale. According to the table, information and training scale revealed (M = 1.923, SD = 1.076, α = .850, CR = .987, AVE = .943, F = .877, p = .723), building

relationships scale revealed (M = 2.056, SD = 1.135, α = .835, CR = .973, AVE = .955, F = 0.713, p = .613), personal advocacy scale averaged (M = 1.882, SD = 1.043, α = .827, CR = .992, AVE = 0.964, F = .546, p = .356), and legislative advocacy scale showed an average score (M = 2.036, SD = 1.143, α = .863, CR = .956, AVE = .922, F = .646, p = .562), indicating strong internal consistency and convergent validity among items, with no violation of normality assumption.

Table 3. Psychometric properties of strategies employed by parents.

Factors/Scales	M	SD	FL	α	CR	AVE	F	p
Factor 1: IT	1.923	1.076		.858	.987	.943	.877	.723
IT1	1.997	0.940	.836	.864				
IT2	1.867	1.037	.797	.830				
IT3	2.014	1.099	.810	.921				
IT4	1.816	1.107	.823	.793				
Factor 2: BR	2.056	1.135		.847	.973	.955	.713	.613
BR1	2.148	1.134	.785	.880				
BR2	2.194	1.049	.817	.827				
BR3	2.224	1.134	.802	.911				
BR4	1.969	1.093	.790	.753				
BR5	1.986	1.032	.824	.850				
BR6	1.817	0.943	.803	.801				
Factor 3: PA	1.882	1.043		.844	.992	.964	.546	.356
PA1	2.031	1.064	.836	.763				
PA2	1.940	1.143	.868	.841				
PA3	1.905	0.943	.883	.884				
PA4	1.653	1.043	.850	.839				
Factor 4: LAd	2.036	1.143		.868	.956	.922	.646	.562
LAd1	1.954	1.153	.794	.843				
LAd2	2.175	1.043	.808	.930				
LAd3	1.979	1.088	.791	.822				
Factor 5: CE	1.853	1.023		.800	0.978	0.949	0.656	.550
CE1	1.852	1.043	.854	.774				
CE2	1.813	1.064	.839	.833				
CE3	1.895	0.984	.860	.793				
Factor 6: LA	1.981	1.104		.891	0.966	0.929	0.654	.464
LA1	2.329	1.104	.796	.890				
LA2	1.832	1.065	.772	.931				
LA3	1.784	0.979	.773	.850				
Factor 7: RU	2.091	1.154		.829	0.979	0.935	0.834	.774

RU1	2.432	1.227	.860	.790				
RU2	1.988	1.164	.853	.840				
RU3	1.854	1.056	.888	.853				
Factor 8: Doc	1.988	1.085		.839	0.967	0.941	0.717	.553
Doc1	1.869	1.043	.784	.791				
Doc2	2.323	1.142	.808	.831				
Doc3	1.974	1.104	.810	.800				
Doc4	1.850	1.002	.791	.913				
Doc5	1.924	1.073	.780	.832				
Factor 9: ESA	2.801	1.244		.819	0.980	0.953	0.743	.641
ESA1	2.862	1.243	.863	.873				
ESA2	2.863	1.342	.855	.753				
ESA3	2.678	1.364	.880	.820				
Factor 10: SM	1.882	1.004		.807	.977	.955	.536	.339
SM1	1.932	1.075	.893	.790				
SM2	1.832	0.999	.871	.817				

Furthermore, community engagement scale yielded (M = 1.853, SD = 1.023, α =.796, CR = .978, AVE = .949, F = .656, p = .550), legal action scale scored (M = 1.981, SD = 1.104, α = .890, CR = .966, AVE = .929, F = .654, p = .464), resource utilization scale revealed (M = 2.091, SD = 1.154, α = .826, CR = .979, AVE = .935, F = .834, p = .774), documentation scale yielded (M = 1.988, SD = 1.085, α = .832, CR = .967, AVE = .941, F = .717, p = 0.553), empowerment and self-advocacy scale scored (M = 2.801, SD = 1.244, α = .813, CR = .980, AVE = .953, F = .743, p = .641), and the social media scale averaged (M = 1.882, SD = 1.004, α = .800, CR = .977, AVE = .955, F = .536, p = .339).

Table 4 presents the psychometric properties of scales related to the challenges faced by the parents of children with special needs. The awareness and understanding scale revealed (M = 2.037, SD = 1.134, α = .837, CR = .970, AVE = .930, F = .646, p = .532), resources and infrastructure scale scored (M = 1.880, SD = 1.013, α = .835, CR = .990, AVE = .959, F = .562, p = .473), bureaucratic and institutional barriers revealed (M = 2.034, SD = 1.163, α = .830, CR = .989, AVE = .960, F = .645, p = .552), social stigma yielded (M = 4.176, SD = 1.744, α = .803, CR = .985, AVE = .947, F = .663, p = .569), financial constraints scale scored (M = 4.297, SD = 1.657, α = .850, CR = .976, AVE = .944, F = .464, p = .367), and limited professional support scale revealed (M = 4.083, SD = 1.586, α = .830, CR = .978, AVE = .951, F = .711, p = .653).

Table 4. Psychometric properties of scales related to challenges faced by parents.

Factors/Scales	M	SD	FL	α	CR	AVE	F	p
Factor 1: LAU	2.036	1.134		.839	.970	.930	.646	.532
LAU1	1.844	1.087	.796	.850				
LAU2	1.932	1.024	.814	.821				
LAU3	2.243	1.132	.782	.780				
LAU4	2.132	1.203	.806	.902				
Factor 2: RI	1.880	1.013		.838	.990	.959	.645	.552
RI1	1.703	0.989	.822	.860				
RI2	1.873	1.034	.848	.750				
RI3	1.942	1.093	.864	.942				
RI4	2.002	1.102	.848	.791				
Factor 3: BIB	2.034	1.163		.830	.989	.960	.645	.552
BIB1	2.104	1.053	.764	.850				
BIB2	1.964	1.035	.787	.810				
Factor 4: SS	4.176	1.744		.803	.985	.947	.663	.569
SS1	4.343	1.553	.869	.780				
SS2	4.253	1.686	.870	.861				
SS3	3.933	1.476	.874	.770				
Factor 5: FC	4.297	1.657		.853	.976	.944	.464	.367
FC1	4.318	1.757	.866	.791				
FC2	4.276	1.637	.842	.913				
Factor 6: LPS	4.083	1.586		.835	.978	.951	.711	.653
LPS1	4.134	1.724	.809	.743				
LPS2	4.153	1.535	.826	.910				
LPS3	3.964	1.446	.786	.842				
Factor 7: LIP	4.263	1.768		.878	.969	.938	.802	.601
LIP1	4.243	1.675	.797	.905				
LIP2	4.284	1.564	.813	.843				
Factor 8: AI	1.912	1.068		.789	.982	.948	.453	.296
AI1	1.895	1.032	.877	.864				
AI2	1.968	1.094	.843	.732				
AI3	1.874	1.053	.883	.760				
Factor 9: CB	1.970	1.094		.840	.986	.934	.652	.443
CB1	1.796	1.021	.780	.775				

CB2	2.221	1.093	.806	.934				
CB3	1.895	1.064	.839	.791				
Factor 10: EPC	3.897	1.487		.839	.986	.958	.698	.487
EPC1	3.893	1.554	.765	.821				
EPC2	3.943	1.636	.793	.890				
EPC3	3.855	1.845	.812	.802				

Additionally, lack of inclusive policies scale scored (M = 4.263, SD = 1.768, α = .870, CR = .969, AVE = .938, F = .802, p = .601), the accessibility issues scale yielded (M = 1.912, SD = 1.068, α = .783, CR = .982, AVE = .948, F = .453, p = .296, communication barriers scale averaged (M = 1.970, SD = 1.094, α = .830, CR = .986, AVE = .934, F = .652, p = .443), and emotional and psychological challenges scale scored (M = 3.897, SD = 1.487, α = .836, CR = .986, AVE = .958, F = .698, p = .487). Overall, all scales demonstrated strong internal consistency and reliability, with high composite reliability and AVE values, indicating robust convergent validity.

Table 5 shows independent sample t-test statistics, drawing a comparison between male and female parents regarding strategies and challenges faced by parents in advocating the educational rights of their children with special needs. In the scales of strategies, the information and training scale indicates that female parents reported slightly higher scores (M = 2.02, SD = 1.11) as compared to male parents (M = 1.82, SD = 1.05), though this difference did not reach statistical significance (t = 1.519, p = .129) and showed a small effect size (d = -0.1856). For building relationships scale, female parents also scored higher (M = 2.15, SD = 0.99) than male parents (M = 1.95, SD = 1.03), though this difference was not significant (t = 1.601, p = .110) and showed a small effect (d = -0.1793). Personal advocacy scale's scores were very similar between groups, with male parents scoring M = 1.86 (SD = 1.06) and female parents scoring M = 1.90 (SD = 1.10). This difference was not significant (t = 0.303, p = .762) and showed a negligible effect size (d = -0.0370). In legislative advocacy, male parents reported significantly higher scores (M = 2.19, SD = 1.11) than female parents (M = 1.87, SD = 0.99), indicating greater engagement in legislative efforts (t = 2.435, p = .015) with a moderate effect size (d = 0.2982). Resource utilizations scale's scores were also close to female parents (M = 2.17, SD = 1.02) scoring slightly higher than male parents (M = 2.01, SD = 1.13), though not significantly (t = 1.191, p = .234) with a small effect size (d = -0.1366). In documentation scale, male parents (M = 2.06, SD = 1.07) scored higher than female parents (M = 1.90, SD = 1.06), although this difference was not statistically significant (t = 1.221, p = .223) with a small effect size (d = 0.1433). Empowerment and self-advocacy scale was nearly equal across genders (Male: M = 2.82, SD = 1.18; Female: M = 2.78, SD = 1.11), with no significant difference (t = 0.281, p = .748) and a negligible effect size (d = 0.0308). On the social media scale, male parents scored slightly higher (M = 1.96, SD = 1.07) than female parents (M = 1.80, SD = 1.02), but this difference was not statistically significant (t = 1.237, p = .217).

Table 5. Independent sample t-test for comparison between male and female parents.

	Male Parents		Female Parents				
Scales	**M**	**SD**	**M**	**SD**	**t(203)**	**p**	**Cohen's *d***
Information and Training	1.82	1.05	2.02	1.11	1.519	.129	-0.1856
Building Relationships	1.95	1.03	2.15	0.99	1.601	.110	-0.1793
Personal Advocacy	1.86	1.06	1.90	1.10	0.303	.762	-0.0370
Legislative Advocacy	2.19	1.11	1.87	0.99	2.435	.015	0.2982
Community Engagement	1.95	1.06	1.75	0.98	1.576	.116	0.1959
Legal Action	2.00	1.10	1.96	1.09	0.296	.766	0.0365
Resource Utilization	2.01	1.13	2.17	1.02	1.191	.234	-0.1366
Documentation	2.06	1.07	1.90	1.06	1.221	.223	0.1433
Empowerment & Self-Advocacy	2.82	1.18	2.78	1.11	0.281	.748	0.0308
Social Media	1.96	1.07	1.80	1.02	1.237	.217	0.1460
Lack of Awareness and Understanding	2.11	1.39	1.95	1.09	1.007	.314	0.1402
Resources and Infrastructure	1.77	0.99	1.99	1.06	1.764	.078	-0.2112
Bureaucratic & Institutional Barrier	1.95	1.08	2.11	0.99	1.240	.215	-0.1461
Social Stigma	4.55	1.05	3.79	1.19	5.618	.000	0.4697
Financial Constraints	4.61	1.07	3.97	1.06	4.884	.000	0.3770
Limited Professional Support	4.05	1.03	4.11	0.94	0.488	.625	-0.0373
Lack of Inclusive Policies	4.43	1.05	4.09	1.13	2.565	.010	0.2103
Accessibility Issues	2.00	1.11	1.82	1.07	1.336	.182	0.1651
Communication Barriers	1.95	1.04	1.99	1.16	0.300	.764	-0.0363
Emotional & Psychological Challenges	4.08	1.07	3.70	1.15	2.815	.005	0.2457

In challenges, the lack of awareness and understanding scale yielded that male parents scored slightly higher (M = 2.11, SD = 1.39) than female parents (M = 1.95, SD = 1.09), though this was not significant (t = 1.007, p = .314) with a small effect (d = 0.1402). For resources and infrastructure scale, female parents scored higher (M = 1.99, SD = 1.06) than male parents (M = 1.77, SD = 0.99), though this difference was marginally non-significant (t = 1.764, p = .078) with a small effect size (d = -0.2112). On bureaucratic and institutional barriers scale, female parents scored slightly higher (M = 2.11, SD = 0.99) than male parents (M = 1.95, SD = 1.08), having a non-significant difference (t = 1.240, p = .215) and a small effect (d = -0.1461). Social stigma scale shows a strong gender difference, with male parents (M = 4.55, SD = 1.05) scoring significantly higher than female parents (M = 3.79, SD = 1.19), indicating a moderate to large effect (t = 5.618, p = .000, d = 0.4697). For lack of inclusive policies scale, male parents scored higher (M = 4.43, SD = 1.05) than female parents (M = 4.09, SD = 1.13), with a significant difference (t = 2.565, p = .010) and a small effect size (d = 0.2103), suggesting a stronger perception of policy limitations among male parents. On the scale of accessibility issues, male parents scored somewhat higher (M = 2.00, SD = 1.11) than female parents (M = 1.82, SD = 1.07), though the difference was not statistically significant (t = 1.336, p = .182) with a small effect size

(d = 0.1651). For communication barriers scale, scores were very close (Male: M = 1.95, SD = 1.04; Female: M = 1.99, SD = 1.16) with no significant difference (t = 0.300, p = .764) and negligible effect (d = -0.0363). Lastly, emotional and psychological challenges scale reveal that male parents scored significantly higher (M = 4.08, SD = 1.07) than female parents (M = 3.70, SD = 1.15), showing a moderate effect size (t = 2.815, p = .005, d = 0.2457), suggesting that these challenges are more pronounced for male parents.

Table 6 presents independent sample t-test statistics, with a comparison between rural and urban areas' parents regarding strategies and challenges faced by them in advocating their special children's educational rights. In the category of strategies, information and training scale revealed that urban parents reported slightly higher scores (M = 2.05, SD = 1.07) than the rural parents (M = 1.79, SD = 0.98). This difference is statistically significant (t = 2.035, p = .042) with a very small effect size (d = 0.2409), which indicates that urban parents felt better informed and trained. **Personal advocacy** scores show urban parents (M = 2.00, SD = 1.06) slightly ahead of rural parents (M = 1.76, SD = 1.01), but this difference approaches significance (t = 1.873, p = .062), with a small effect (d = 0.2250). For **legislative advocacy**, the urban areas' parents (M = 2.26, SD = 1.12) scored significantly higher than rural parents (M = 1.80, SD = 1.05) with a moderate effect size (t = 3.416, p = .000, d = 0.4041), suggesting greater awareness or engagement among urban parents. On **community engagement scale,** urban areas' parents (M = 1.99, SD = 1.08) scored higher than rural areas' parents (M = 1.71, SD = 0.99), with a small but significant effect size (t = 2.171, p = .030, d = 0.2702). For **resource utilization**, urban parents (M = 2.15, SD = 1.23) and rural parents (M = 2.03, SD = 1.14) are similarly positioned, with no significant difference (t = 0.814, p = .416) and a negligible effect (d = 0.1011). The **documentation** scale shows that urban parents (M = 2.11, SD = 1.00) scored slightly higher than rural parents (M = 1.85, SD = 1.07), with this difference reaching significance (t = 2.064, p = .039) and a small effect (d = 0.2265). **Empowerment and self-advocacy** is nearly identical for both groups (Urban: M = 2.79, SD = 1.15; Rural: M = 2.81, SD = 1.11), with no significant difference (t = 0.143, p = .886) and an almost zero effect size (d = -0.0156). On **social media** scale, urban parents (M = 2.07, SD = 1.13) scored significantly higher than rural parents (M = 1.69, SD = 0.96), showing a moderate effect size (t = 2.880, p = .004, d = 0.3624).

Table 6. Independent sample t-test for comparison between urban and rural parents.

	Urban Parents		Rural Parents				
Scales	M	SD	M	SD	t(289)	p	Cohen's *d*
Information and Training	2.05	1.07	1.79	0.98	2.035	.042	0.2409
Building Relationships	2.12	1.17	1.98	1.06	1.005	.315	0.1254
Personal Advocacy	2.00	1.06	1.76	1.01	1.873	.062	0.2250
Legislative Advocacy	2.26	1.12	1.80	1.05	3.416	.000	0.4041
Community Engagement	1.99	1.08	1.71	0.99	2.171	.030	0.2702
Legal Action	2.07	1.14	1.89	1.11	1.297	.195	0.1599
Resource Utilization	2.15	1.23	2.03	1.14	0.814	.416	0.1011
Documentation	2.11	1.00	1.85	1.07	2.064	.039	0.2265
Empowerment & Self-Advocacy	2.79	1.15	2.81	1.11	0.143	.886	-0.0156
Social Media	2.07	1.13	1.69	0.96	2.880	.004	0.3624

Lack of Awareness and Understanding	2.23	1.19	1.83	1.09	2.816	.005	0.3349
Resources and Infrastructure	2.09	1.19	1.67	1.00	3.032	.002	0.3821
Bureaucratic & Institutional Barrier	2.19	0.99	1.87	1.04	2.584	.010	0.2796
Social Stigma	4.47	1.16	3.87	1.06	4.336	.000	0.3724
Financial Constraints	4.08	1.08	4.50	1.13	3.114	.002	-0.2527
Limited Professional Support	3.99	1.03	4.17	1.11	1.383	.165	-0.1164
Lack of Inclusive Policies	4.11	1.00	4.41	1.07	2.382	.017	-0.1892
Accessibility Issues	2.31	1.07	1.51	0.99	6.244	.000	0.7384
Communication Barriers	2.41	1.03	1.53	0.98	7.072	.000	0.7641
Emotional & Psychological Challenges	3.39	1.04	4.39	1.13	7.590	.000	-0.6826

In challenges, the **lack of awareness and understanding scale** yielded that urban parents scored higher (M = 2.23, SD = 1.19) than rural parents (M = 1.83, SD = 1.09), with a moderate effect size (t = 2.816, p = .005, d = 0.3349). In **resources and infrastructure**, urban parents (M = 2.09, SD = 1.19) report higher levels than rural parents (M = 1.67, SD = 1.00), with a significant effect (t = 3.032, p = .002, d = 0.3821). **Financial constraints** reveal that rural parents score higher (M = 4.50, SD = 1.13) than urban parents (M = 4.08, SD = 1.08), with a moderate effect size (t = 3.114, p = .002, d = -0.2527), suggesting more financial difficulties in rural settings. **Limited professional support** shows that rural parents score slightly higher (M = 4.17, SD = 1.11) than urban parents (M = 3.99, SD = 1.03), but without significant difference (t = 1.383, p = .165, d = -0.1164). For **lack of inclusive policies**, rural parents score higher (M = 4.41, SD = 1.07) than urban parents (M = 4.11, SD = 1.00), with a small but significant effect size (t = 2.382, p = .017, d = -0.1892). **Accessibility issues** indicate a significant difference, with urban parents scoring higher (M = 2.31, SD = 1.07) than rural parents (M = 1.51, SD = 0.99); showing a large effect (t = 6.244, p = .000, d = 0.7384). **Communication barriers** also show a large and significant effect, with urban parents (M = 2.41, SD = 1.03) scoring higher than rural parents (M = 1.53, SD = 0.98), (t = 7.072, p = .000, d = 0.7641). Finally, **emotional and psychological challenges** reveal a strong difference with rural parents (M = 4.39, SD = 1.13) scoring higher than urban parents (M = 3.39, SD = 1.04), with a large effect size (t = 7.590, p = .000, d = -0.6826), indicating more emotional and psychological challenges for rural parents.

7. Discussion

The study found that there was a critical gap in the training of parents who offer support to children with special needs in the area of key advocacy skills that can be used to protect the right to education. Majority of parents who took part in the study revealed that they lacked the knowledge on the resources that are available besides having little practical experience on how to apply these methods in the special education setting in the most appropriate way. The lack of information caused significant issues since it turned out that parents could not implement or use the basic rights of their children in accordance with special education laws. The fact that they were not given any legal support undermined their efforts to seek assistance and networks to support their children leading to educational backslashes among the children. The major issue that parents encountered was the poor knowledge of the systems of schools and their own weaknesses to communicate effectively with teachers. These results are in line with the study of Hussain et al. (2020) who found that the three negative effects that occur to parents who lack information hinder their capacity to advocate on behalf of their children and the inability to establish effective

working relationships with staff members of special education centres. The study determined that many parents were of the view that legal advocacy supports are either unavailable or not easily accessible to the parents. The end of life health issues and financial limitations and lack of awareness make parents unable to fully use powerful legal tools that may help them in their advocacy. The study revealed a lack of access to educational information on advocacy and training material on how best to represent their children by many parents. In Pakistan, special education institutions are problematic due to the lack of trained teachers and the facilities to work with students with special needs (Singal et al., 2020). A significant proportion of parents did not feel ready to play an active role in supporting educational needs of their children as well as advocacy of user rights even though they displayed fundamental understanding of child rights. The scenario demands the speedy introduction of comprehensible materials that will direct parents on the advocacy process and empower them as advocates. Availability of vital educational records, as well as upkeep of educational evaluation frameworks, individual education plans and school leadership correspondence records, has been problematic to parents. These results are consistent with Hamid and Mansoor (2016) who have determined that documents are still a vital means of promoting change as they can be used as a guide during negotiation with advocacy centres and organisations. Most parents do not manage their documentation records well and do not even consider the significance of advocacy workshops to acquire documentation techniques. It has been established that social media is a poorly exploited avenue through which parents can champion their rights. The possibility of social media creating awareness and providing community support to people with disabilities is not as high as it can be, given that most parents find it difficult to use this media as an effective means of advocacy. The unfamiliarity with a proper social media strategy limits its ability to increase media attention to special education concerns.

Parents cannot promote the rights of children with disabilities because there are many obstacles that prevent them to receive relevant educational assistance. The primary barrier is the lack of awareness of different advocacy techniques and instruments in parents. This is a state of confusion to parents of children with disabilities as they do not know their fundamental rights and education choices. These results are consistent with prior research by Hussain et al. (2020) who find that these shortcomings happen primarily due to the lack of resources in educational institutions and insufficient infrastructure that has few facilities and specialized machinery to meet the demands of students. Mohammed et al. (2024) note that there are institutional and bureaucratic barriers that some parents have to overcome due to the challenges of being in a multiple commitment mode, where it is hard to maneuver through the bureaucratic hurdles involved in the process. The parents of the special child are discriminated against socially and this puts the parents in a situation where the school staff, as well as other parents, is not very respectful towards the needs of parents.

Learning institutions in most cases lack experienced support personnel, and they fail to offer sufficient support to lone parents in their advocacy efforts. Abdullah and Ali (2024) state that poor school policies do not allow children with special needs to attend regular classes in the educational process, which suppresses their social and academic growth. Their children are segregated due to current accessibility and classroom adaptation problems and lack of transportation to make their parents effective advocates of inclusion. The use of special education terms and policies poses a problem with communication that isolates parents who do not understand such issues when dealing with school professionals (Dockrell & Howell, 2015). Findings of MAPS indicate that emotional and psychological challenges impose a great burden to parents in child advocacy because child advocacy usually results in parents having excessive exhaustion, frustration and helplessness.

8. Conclusion

In conclusion, this research identifies insufficient parental readiness when it comes to advocacy strategies for securing educational rights of children with special needs. Most parents have limited understanding of advocacy skills and related practical applications that prevents them from maximizing available educational support services and protections for their children. The absence of proper special educational knowledge affects the core aspects of advocacy including education system navigation together with teacher and healthcare professional relationship building and service acquisition through legal accommodations. Parents encountered significant obstacles in their special children's advocacy work because they lacked documentation management skills and underutilized social media platforms for their activism. Both budgetary limitations and institutional barriers combined with societal prejudice and deficient rules of inclusion proved as additional obstacles faced by parents in their advocacy for their children with special needs. Parents faced feelings of being alone and unprepared due to insufficient job training together with certain communication barriers.

Overall, the findings recommend that the educational authorities should reinforce the policy of inclusive education by developing the structure of parental support and advocacy programs in the families of children with special needs. Schools are supposed to offer frequent trainings and counseling to parents to make them aware of their rights, services offered and good advocacy skills. Moreover, parents, teachers, and special education professionals should increase their cooperation with the help of formal communication tools. To minimize barriers and provide children with special needs with equitable education opportunities, it is necessary to allocate sufficient resources, train teachers to work with children with special needs, and create community-based support networks.

DECLARATION STATEMENTS

This paper is extracted from the first author's PhD thesis

Conflict of Interest

None to declare

Ethical Permissions

Ethical approval was obtained from relevant review board at University of Peshawar. Informed consent was secured from all participants prior to data collection.

Funding

None to declare

Author Contribution

TA conceptualized the study and collected the data. JA supervised the project. Both authors conducted the data analysis and wrote and approved the final version of this manuscript.

9. References

Abdullah, T., Ali, J. (2024). Teachers as reflective mirrors: unveiling the role of teachers in shaping students' self-concepts through positive feedback and support. *Journal of Educational Psychology and Pedagogical Sciences*, *4*(2), 13-28.

Abdullah, T., Ali, J., & Alam, A. (2024). Academic stress and its impact on students' emotional well-being and performance at universities. *Journal of Educational Psychology and Pedagogical Sciences*, *4*(1), 13-30.

.

Bibi, A., Khalid, M. A., & Hussain, A. (2019). Perceived organizational support and organizational commitment among special education teachers in Pakistan. *International Journal of Educational Management*, *33*(5), 848-859

Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design.* Harvard University Press.

Dockrell, J. E., & Howell, P. (2015). Identifying the challenges and opportunities to meet the needs of children with speech, language and communication difficulties. *British Journal of Special Education*, *42*(4), 411-428.

Faizefu, A. R., & Neba, B. E. (2024). A historical perspective on social exclusion and physical disabilities. *International Journal of Cognitive Neuroscience and Psychology*, *2*(1), 12-18.

Hafeez, A. (2020). Special education in Pakistan: A critical analysis. *A Journal of National School of Public Policy*, *41*, 161-182.

Hameed, A., & Manzoor, A. (2016). Defeating inequalities in school access: A case of children with disabilities in Pakistan. *Journal of Research in Special Educational Needs*, *16*, 345-350.

Hu, L. T., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural equation modeling: a multidisciplinary journal*, *6*(1), 1-55.

Hussain, S., Munir, A., & Ibrar, M. (2020). Children with disability: Problems and challenges in Pakistan. *The Journal of Humanities & Social Sciences*, *28*(1), 87-99.

Khan, M. I., Ullah, R., Abdullah, T., Khan, S., & Ullah, L. (2023). A paradigm shift in future job security among students in Pakistan: insights from Lower Dir Khyber Pakhtunkhwa, Pakistan. *Qlantic Journal of Social Sciences, 4*(4), 230-238.

Krejcie, R. V., & Morgan, D. W. (1970). Determining sample size for research activities. *Educational and Psychological Measurement, 30*(3), 607–610.

Malik, R., Raza, F., Rose, P., & Singal, N. (2022). Are children with disabilities in school and learning? Evidence from a household survey in rural Punjab, Pakistan. *Compare: A Journal of Comparative and International Education*, *52*(2), 211-231.

Martinello, E. (2020). Applying the ecological systems theory to better understand and prevent child sexual abuse. *Sexuality & Culture*, *24*(1), 326-344.

Muhammad, Y., Waqar, Y., & Anis, F. (2024). Navigating Complexity: Overcoming Challenges in Qualitative Research for Special Education in Pakistan. *Voyage Journal of Educational Studies*, *4*(2), 400-414.

Schneider, R. L., Lester, L., & Ochieng, J. (2013). Advocacy. In *Encyclopedia of social work*.

Shaukat, S. (2023). Challenges for education of children with disabilities in Pakistan. *Intervention in School and Clinic*, *59*(1), 75-80.

Singal, N. (2016). Education of children with disabilities in India and Pakistan: Critical analysis of developments in the last 15 years. *Prospects*, *46*, 171-183.

Singal, N., Sabates, R., Aslam, M., & Saeed, S. (2020). School enrolment and learning outcomes for children with disabilities: findings from a household survey in Pakistan. *International Journal of Inclusive Education*, *24*(13), 1410-1430.

Annexure-A (Scales)

Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
SA	**A**	**U**	**D**	**SD**
5	4	3	2	1

Structured Interview for Strategies for Parental Advocacy

		SD	D	U	A	SA
Factor 1: Information and Training (IT)						
IT1	I am aware of my child's educational rights.					
IT2	I feel confident to advocate for child's educational rights.					
IT3	I attended workshops to understand my child's legal rights.					
IT4	I access resources to stay informed about child's rights.					
Factor 2: Building Relationships (BR)						
BR1	I have good working relationship with my child's teachers.					
BR2	Good working relationship with school administration.					
BR3	My child's school professionals are supportive.					
BR4	I actively participate in parent-teacher meetings.					
BR5	I actively participate in events related to child's education.					
BR6	I am part of a parent support network for special children.					
Factor 3: Personal Advocacy (PA)						
PA1	I am involved in child's Individualized Education Plan (IEP).					
PA2	IEP adequately addresses my child's educational needs.					
PA3	I communicate with school professionals to ensure the IEP.					
PA4	Work with healthcare professionals for medical treatments.					
Factor 4: Legislative Advocacy (LAd)						
LAd1	Engaged in advocacy policies affecting special children.					
LAd2	I participate in public hearings to provide testimony on issues.					
LAd3	Join advocacy campaigns to push for legislative changes.					
Factor 5: Community Engagement (CE)						
CE1	Join campaigns to raise awareness about challenges.					
CE2	I promote inclusive activities and programs for disabled.					
CE3	I participate in events that support inclusion and accessibility.					
Factor 6: Legal Action (LA)						
LA1	Aware of legal advocacy organizations for disability rights.					
LA2	Partnered with legal advocacy organizations for child's rights.					
LA3	Take necessary legal action to advocate for child's rights.					
Factor 7: Resource Utilization (RU)						
RU1	I am aware of support services for special children.					
RU2	I have accessed support services to help my special child.					
RU3	I use assistive technology and tools to aid child's education.					
Factor 8: Documentation (Doc)						
Doc1	I maintain records of meetings related to child's education.					
Doc2	I keep records of my child's healthcare appointments.					
Doc3	I collect and use data to monitor my child's progress.					
Doc4	I collect and use data to identify any gaps in services.					
Doc5	Documentation to communicate with healthcare providers.					
Factor 9: Empowerment and Self-Advocacy (ESA)						
ESA1	I teach child how to advocate for his/her education rights.					
ESA2	I teach my child to express his/her needs to professionals.					

ESA3	I use positive reinforcement to build child's confidence.					
Factor 10: Social Media (SM)						
SM1	I use social media to raise awareness about disability rights.					
SM2	I Join online advocacy campaigns for disability rights.					

Structured Interview for Challenges

Factor 1: Lack of Awareness and Understanding (LAU)						
LAU1	Aware of child's rights about education and support services.					
LAU2	I have knowledge about services available for my child.					
LAU3	Child's teachers are trained to understand needs of children.					
LAU4	Administration has understanding of challenges of children.					
Factor 2: Resources and Infrastructure (RI)						
RI1	Sufficient schools programs to cater the needs of children.					
RI2	Challenging to locate facilities that can support child's needs.					
RI3	Access to necessary assistive technology & resources.					
RI4	Government provide adequate support and resources.					
Factor 3: Bureaucratic and Institutional Barriers (BIB)						
BIB1	Procedure for obtaining special education services is clear.					
BIB2	Not face problems in implementation of education policies.					
Factor 4: Social Stigma (SS)						
SS1	Social stigma towards specialities discourages me.					
SS2	Negative attitudes of society is challenging to advocacy.					
SS3	Not supported by community when advocating child's needs.					
Factor 5: Financial Constraints (FC)						
FC1	Insufficient financial assistance to support a special child.					
FC2	Costly special education services are burden on family.					
Factor 6: Limited Professional Support (LPS)						
LPS1	Shortage of trained special education professionals.					
LPS2	Difficulties in finding qualified professionals.					
LPS3	Quality of support is inadequate to meet child's needs.					
Factor 7: Lack of Inclusive Policies (LIP)						
LIP1	Gaps in policies that fail to address needs of special children.					
LIP2	Existing policies are comprehensive to cover diverse needs.					
Factor 8: Accessibility Issues (AI)						
AI1	Schools are physically accessible for special children.					
AI2	Public spaces are equipped to accommodate special children.					
AI3	Sufficient transportation facilities for child to attend school.					
Factor 9: Communication Barriers (CB)						
CB1	Access to advocacy materials in language I can understand.					
CB2	I can easily understand legal documents of special child.					
CB3	Information about resources for children is disseminated.					
Factor 10: Emotional & Psychological Challenges (EPC)						
EPC1	Advocating for my child's needs causes me stress.					
EPC2	Feel burned from constant effort to secure child's support.					
EPC3	Feel unsupported emotionally while dealing with challenges.					