Research Paper

Parental involvement and advocacy in special education: voices of parents of children with autism in nigeria

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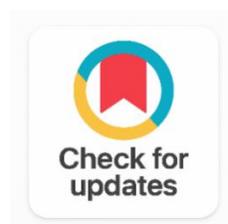
ABSTRACT

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental condition that affects communication, social interaction, and behavior. Globally, there is growing recognition of the crucial role that parental involvement and advocacy play in supporting the educational experiences and outcomes of children with autism. In Nigeria, however, systemic, cultural, and institutional barriers continue to hinder the full inclusion of parents in special education processes. This study explores the voices, lived experiences, and advocacy efforts of Nigerian parents of children with autism within the education system. Guided by a qualitative design with a descriptive survey component, the study examines the nature of parental involvement, identifies barriers and enabling factors, and analyzes how socio-cultural, economic, and institutional contexts influence their participation. Data were collected through structured questionnaires and semi-structured interviews with a purposive sample of parents across selected states in Nigeria. Findings indicate that while some parents actively engage in Individualized Education Plans (IEPs), school visits, and advocacy at policy levels, many face significant challenges such as stigma, lack of awareness, limited resources, and unsupportive school environments. Cultural misunderstandings regarding autism make it even harder to advocate for people with the condition. The study shows how parents are strong by showing how they can build informal support networks and find new ways to deal with stress. Recommendations encompass enhanced institutional support, culturally attuned awareness initiatives, and inclusive educational practices that emphasise parent-school partnership. This research highlights the critical necessity to empower parents as essential players in the education of children with autism in Nigeria, in accordance with worldwide objectives for inclusive and equitable education for all.

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Journal of Learning and Educational Policy (JLEP)

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1. INTRODUCTION

A lifelong neurodevelopmental disorder, autism spectrum disorder (ASD) is characterised by difficulties with social interaction and communication, as well as repetitive behaviours and limited interests. Even though autism has gained a lot of international attention over the last 20 years, high-income and low-to-middle-income (LMIC) nations, including Nigeria, continue to differ significantly in terms of awareness, diagnosis, and intervention. According to current estimates, 1 in 100 children worldwide are impacted, however these numbers are thought to be underreported in sub-Saharan Africa because of a lack of diagnostic resources and pervasive stigma [1].

In Nigeria, autism is often misconstrued and ascribed to spiritual or supernatural ailments, leading to inadequate community responses and institutional neglect. There aren't many formal diagnostic services, and most of them are in cities. It's hard to come up with evidence-based solutions when there isn't any national data [2]. Because of this, parents have to deal with the problems that come with autism and make sure their child gets the care and education they need. Stigma, schools that don't get enough money, teachers who aren't trained, and strict rules that don't take neurodiversity into account are some of the things that Nigerian parents who want to help their autistic children with schoolwork have to deal with.

The whole world concurs that the parents must be highly interested in the education of the children for them to thrive. Studies in the US and in Europe show that students with ASD having involved parents have higher scholarly achievement and higher social and communication skills. Family-centered practices and Individualized Education Plans (IEPs), prevalent in Western schools, generate the potential for co-operation between the teacher and the parent so that they create the learning conditions that are the best possible for each child [3].

However, the educational scene in LMICs generally has none of the infrastructure or regulations in place to promote such participation. Parental participation is often nonexistent or very minimal in most African contexts where educational institutions are still grappling with the conception of inclusive education. Parental participation is often informal or reactive but hardly ever proactive. Cultural values that emphasize the importance of respecting authority figures such as teachers and school administration also hinder the audience's voice for the child. Parental advocacy for the child in aspects such as education for autistic children in Nigeria has been a key way to bridge the disparities in the services provided for such needs. But the government still doesn't take any initiative to engage the parents or to get them involved. [4] States that most Nigerian parents do advocacy because they have to but never because they want to when their child gets kicked out of the academy or doesn't have the appropriate access. Community awareness, schooling negations, and legal battles are popular advocacy styles. Most persons are unable to perform these activities because of their network access, educational background, or because of the social class.

[5] Contends that Nigeria's policy framework frequently fails to adequately address the rights of children with disabilities, as it generally trails behind legal provisions. For instance, the 2018 Discrimination against Persons with Disabilities (Prohibition) Act is still being put into effect, especially in rural and peri-urban areas, even though it is a historic law that requires inclusive education. Parents, many of whom are already under a lot of emotional and financial stress, are directly affected by this policy void [6]. Culturally based views on disability may affect how involved parents are. In certain cultures, having a child with autism is perceived as a punishment or a curse, resulting in social ostracism for the entire family.

This kind of stigma makes it hard for parents to talk to each other and makes it harder for them to form coalitions or support groups. Religious views on disability may also put spiritual therapies ahead of medical or educational ones, which could delay diagnosis and keep kids from getting the educational opportunities they need.

The majority of Nigerian schools are without the required facilities to take in students with ASD. Most teachers do not receive particular training in the fields of special education or whole-class instruction. Consequently, the teacher may feel that they have far too much work to carry out, are unready, or actually fear the process of teaching autistic students. This ineffectuality again places additional stress upon the necessity for "teaching at home" or seeking expensive private services, again pushing students with ASD further towards the periphery of society. Teacher-parent organizations in Nigeria are thus powerless or confrontational, where elsewhere they are central to successful inclusion.

Research, for instance [7], has shown that most school administrators fail to consider the views of the parents when designing or implementing school-based interventions. This indifference makes it harder for the child to access education and makes the families unhappy. When efforts are made to advocate for something, they are often met with being overlooked, misheard or misunderstood, and red tape. From a global health perspective, the disparities in Nigerians' access to services for autism point to a larger scale of issues around inequity in health, inadequacy in policy, and distribution of the resources. Autism services are often embedded in larger programs around mental health or disabilities that have limited funding and are poorly integrated into primary educational and health systems. Again, while international donor funding has helped respond to other conditions such as HIV/AIDS or maternal mortality, autism and rights for the disabled are marginal in the global health collaborations for Nigeria [8].

To address the needs of families with autistic children, multisectoral approaches involving not only schools but also ministries of health, education, social services, and justice are required. The empowerment of parents as stakeholders in this ecosystem is essential for inclusive and sustainable educational frameworks. Globally, parent activism has played a pivotal role in transforming the discourse and policies surrounding disabilities with sufficient support, comparable grassroots endeavours could potentially arise in Nigeria [9].

2. RELATED WORK

The parents of Nigerian children with autism describe a complex interplay between shock at diagnosis, unfamiliarity, and widespread stigma as affecting their early involvement in special education planning. Studies show that confusion is typical in the initial guidelines most parents get from medical or educational professionals and that they often seek information from unofficial networks parents' unfamiliarity impedes their capacity to effectively demand services and delays early intervention [10]. Following studies on internalized stigma in Lagos and explorations of parental perceptions at diagnosis, public blame and unawareness compel the majority of families to seek private or home-based solutions rather than formal advocacy channels [11]. By creating informal support groups, demanding reasonable accommodations from schools, and engaging in public awareness campaigns, parents are overcoming obstacles to become their children's chief advocates. Parents fulfill gaps in institutional and state service shortcomings by marshaling resources, advocating for inclusive education, and building peer networks that provide both emotional and practical support, according to qualitative studies carried out in a variety of Nigerian contexts [12].

In addition, research indicates the varying ability of various parent organizations to engage in long-term advocacy. System transformation and formal involvement in special education planning are impeded, for instance, by the fact that the majority of parent groups are not officially organized, trained in rights-based advocacy, or well-connected with legislators. In order to transform single parental action into sustained systemic reform for autistic children in the Nigerian education system, contemporary empirical research and scoping reviews recommend policy backing (e.g., enforcement of Nigeria's disability laws), ongoing psychosocial support to carers, and government investment in parent-partnered community-based schemes that involve community planning and monitoring [13]. Therefore, the literature suggests

evidence-based targeted interventions in the form of improving parental involvement and advocacy competencies through interventions like providing easily accessible information during diagnosis, advocacy and rights training, supporting the creation of parent organizations, and increasing the referral linkages among social, health, and education services.

2.1. Statement of the Study

This study seeks to shed light on the experiences and voices of Nigerian parents of children with autism in the midst of difficult and interconnected problems. It traces their struggles towards educational rights through school interactions, activism, and working against society and institutional barriers. The primary research question focuses on the forms of advocacy and engagement undertaken by these parents. It also examines the barriers and facilitators that influence their work.

2.2. Purpose of the Study

The study aims to accomplish the following purposes:
1. To better understand how parents of children with autism actually navigate Nigeria's special education programme.
2. To know what advocacy mechanisms are employed by parents to keep their children included and in school.
3. To know how cultural, religious, and communal beliefs shape social perceptions of autism and how this impacts parental responsibilities.
4. In assessing the effects of government policy, teacher preparation, and school responsiveness on parental involvement.
5. To provide practical advice for enhancing advocacy models, inclusive pedagogies, and parent-school partnerships.
6. To contribute parent-centered, locally-based knowledge to the overall debate on inclusive education in sub-Saharan Africa.

2.3. Research Questions

1. How are Nigerian parents of autistic children engaged and engage with their children within the school system?
2. What are the barriers to and enablers of effective family advocacy in autism and special education in Nigeria?
3. How are parents' engagement in special education linked with institutional, sociocultural, and socioeconomic factors?
4. How do parents engage with educators, school administrators, and legislators for their children's education?
5. What are parents' coping strategies and sources of support during times of need?

3. METHODOLOGY

3.1. Research Design

In order to better understand the living experiences and perspectives of Nigerian mothers of children with autism spectrum disorder (ASD) as they contend with advocacy and negotiation of the special education system, the present study utilized a qualitative phenomenological research study. Research that tries to make sense of intricate social and emotional realities from the point of view of individuals who experience them are especially suited for phenomenology [14]. Here, it allows the researcher to reflect on how parents perceive their advocacy work, what the structural challenges they face are, and the social and emotional conditions that influence their behavior.

3.2. Research Setting

Three of Nigeria's major cities, Lagos, Ibadan, and Abuja, were employed in the study due to their vibrant parent support groups, availability of diagnostic services, and comparatively greater population of special needs schools. In addition to highlighting some regional diversity within the nation, these city sites offer a wide capture of parental experiences in public and private schools.

3.3. Population and Sample

Parents or primary carers of children diagnosed with autism and who are presently enrolled in primary or secondary schools (private or public) in Nigeria make up the target population. More specifically, only those who were presently involved in their child's schooling and who had also been involved in advocacy-related efforts (formal or informal) could participate, as parental voices were of interest. For selecting participants, a purposive sample strategy was adopted, which is optimum for selecting individuals capable of giving rich, specific, and relevant information pertaining to the study issues [15]. Snowball sampling was also used, whereby early participants nominated others in their networks, particularly among parent support groups and special education-based non-governmental organizations (NGOs). In order to present a diversity of opinions and socioeconomic status, education levels, and advocacy experience, a total of 20 participants, 15 mothers and 5 fathers, were chosen.

3.4. Data Collection Instruments

The interview guide was pre-tested with two parents who did not form part of the main study but who fulfilled the inclusion criteria. The questions were rewritten based on their input in order to enhance clarity and cultural sensitivity. The interpretation of narratives was substantiated with further information gathered from observations and field notes, such as nonverbal behavior, interview context, and emotional tone. In order to garner rich, qualitative data from parents of children with autism spectrum disorder (ASD) who are enrolled in Nigerian schools, the main instrument employed in this study was a semi-structured interview guide. A thorough synthesis of special education, family involvement, and advocacy literature, along with evidence from prior qualitative studies of autism in Africa, established the foundation on which the handbook was developed. To add depth, as well as clarity, the guide uses a variety of open-ended questions, follow-up prompts, and probes.

The researcher was able to discuss new issues within the scope of the objectives of the study because of the flexibility of the semi-structured format [16]. Two Nigerian special education professionals, one parent advocate, and one qualitative research methodologist reviewed the interview guide for content validity. Their inputs increased the ethical sensitivity, cultural relevance, and comprehensibility of the questions. Both these parents were not part of the main sample. They had participated in a pilot study to make sure the questions were suitable and flowed properly. Changes were made accordingly.

3.5. Methods of Data Analysis

Thematic analysis was employed to analyze the data. Familiarization, developing preliminary codes, seeking for themes, analysing themes, defining and labelling themes, and creating the report were the six stages of this approach. To assure interpretive depth and coherence, emergent themes were compared to theoretical frameworks [17].

3.6. Procedure for Data Collection

Semi-structured, in-depth interviews were the major strategy utilised to collect data since they allowed participants to freely explain their experiences while preserving uniformity across key issues. The interviews lasted 45 to 75 minutes each and were done both in-person and by Zoom, dependent on participant preferences and feasibility. Based on the goals of the study and applicable literature, an interview guide was constructed. Initial experiences with diagnosis, connections with schools and instructors, advocacy activities, school system barriers and facilitators, emotional and social support systems, and policy awareness and expectations were among the issues that were the focus of the queries.

With participants' permission, all interviews were audio recorded, verbatim transcribed, and anonymized to preserve participant identities.

4.   RESULTS AND DISCUSSION

Research Question 1: How are Nigerian parents of autistic children engaged and engage with their children within the school system?
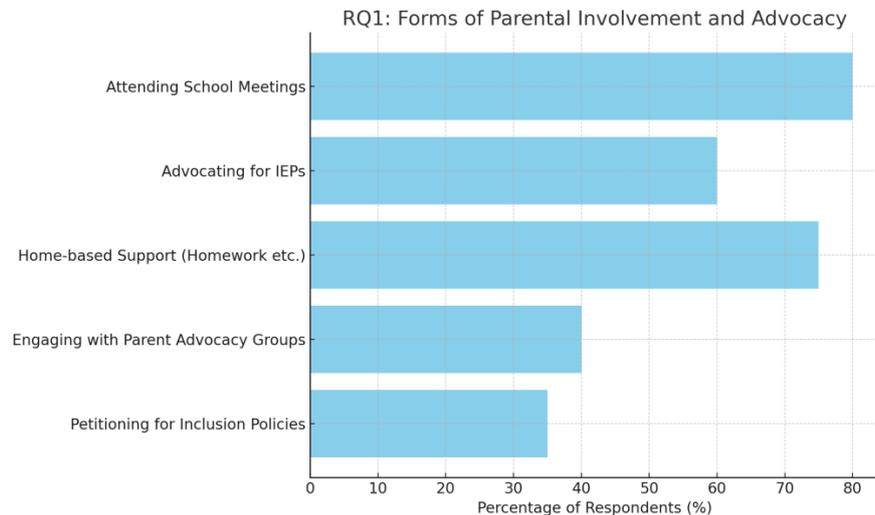

Figure 1. Forms of Parental Involvement and Advocacy

Figure 1 shows that the data shows that the most popular ways for parents to get involved are by going to school meetings (80%) and helping with homework at home (75%). More than 60% of parents say they support Individualized Education Programs (IEPs). Parents were less likely to join parent advocacy groups and sign petitions for inclusive legislation, but these actions were still important. This suggests that parents are becoming more informed and active.

Research Question 2: What are the barriers and enablers to effective parental advocacy in the context of autism and special education in Nigeria?

Parents in the study actively engaged in various forms of involvement such as attending school meetings, lobbying for tailored learning plans, and seeking out private therapy and intervention services. These findings coincide with [18], who emphasize the proactive responsibilities parents commonly assume in sub-Saharan African contexts due to poor institutional support. In Nigeria, this sort of "informal advocacy" sometimes replaces the lack of institutionalized institutional structures for parent-teacher collaboration. Globally, [19] observe that parent-school cooperation is a precondition for the best possible achievement in special education, and that lack of it frequently forces parents to act as advocate as well as carer. This is added to by in Nigeria by institutional inefficiencies in the education system, including inexperience on the part of teachers as well as inadequate funding.

Research Question 2: What are the barriers to and enablers of effective family advocacy in autism and special education in Nigeria?

Table 1. Parents Rated Financial Constraints on Barriers and Enablers

Barrier/Enabler	N	Mean Score	Standard Deviation
Lack of Awareness about Autism	50	66.42	8.12
Cultural Stigma	50	59.51	8.88
Financial Constraints	50	73.90	6.87

Supportive School Staff	50	57.24	12.95
Access to Training	50	50.96	9.25
Negative Teacher Attitudes	50	55.99	7.92
Government Support Programs	50	40.55	11.01

As shown in Table 1, the findings showed that the data reveals Parents evaluated financial restrictions as the most significant barrier to advocacy (M = 73.90), followed by lack of awareness (M = 66.42) and cultural stigma (M = 59.51). On the enabling side, while helpful school staff (M = 57.24) and access to training (M = 50.96) are fairly influential, the low mean score for government assistance programs (M = 40.55) shows underutilization or ineffectiveness of current institutions. These results underline the need for systemic educational and policy reforms.

Effective parental lobbying was found to be gravely compromised by cultural stigma, bureaucratic rigidity, economic deprivation, and inadequate information. These challenges are prevalent among the majority of low- and middle-income countries (LMICs) and do not occur singularly in Nigeria. In African nations, for example, families are greatly discouraged from seeking educational support due to the shame or stigma related to disability [20]. This is clear from the data, especially with so many parents citing fear of social rejection or stigmatization as a reason for not being included in formal advocacy channels. Peer mentoring between peers, access to advocacy seminars, and some encouragement from experienced teachers seemed to be some facilitators. The same conclusions are reached by [21], who assert that the availability of networks of emotional support and information resources has a significant impact on parental empowerment.

Research Question 3: How do parents' involvement in special education relate to institutional, sociocultural, and socioeconomic factors?

Table 2. Socio-Cultural, Economic, and Institutional Factors Influence Parental Involvement

Factor	N	Mean Score	Standard Deviation
Socio-cultural Beliefs	50	57.75	9.24
Economic Hardship	50	75.21	10.39
Institutional Support	50	49.41	15.08

As evident from Table 2, the results indicated that economic hardship is a significant dissuader of parental participation, and the economic hardship mean score (75.21) is highly the highest. Socio-cultural beliefs (M = 57.75) also reveal moderate impact, with the suggestion that stigmas and beliefs continue to play a role in influencing participation levels. The lowest level of institutional support (M = 49.41, SD = 15.08) indicates that the parents may not have access to stable government or schools on a regular basis. The findings categorically confirmed that parental involvement differentiated with respect to socioeconomic status and that the parents with higher incomes were likely to advocate more at the higher level. This is consistent with the research findings of [22], who argue that socioeconomic variations significantly restrict Nigerians' access to quality special education services. While lower-income parents are dependent on strained public services, higher-income parents can afford private consultation, diagnosis, and even international consultations. Cultural beliefs relating to autism as a sign of witchcraft or divine punishment are still present, especially in rural areas. Cultural beliefs harbor a culture of shame and secrecy, discouraging people from going for services and causing underreporting. This is compounded by institutional factors, such as a lack of preparation of special education teachers and inadequate autism-related curriculum [23].

Research Question 4: How do parents engage with educators, school administrators, and lawmakers to support their kids' education?

Table 3. Stakeholder Interactions in Supporting Their Children's Education

Stakeholder Interaction	N	Mean Score	Standard Deviation
Interaction with Educators	50	63.88	10.43
Interaction with School Administrators	50	59.19	11.51
Interaction with Policymakers	50	40.38	15.90

As shown in Table 3, the result showed that parents received the highest level of interaction with teachers (M = 63.88), showing high levels of communication with teachers. Interaction with administrators was also very big (M = 59.19), showing their involvement in pedagogical planning and support. Interactions with policymakers were very small (M = 40.38), showing to zero influence or involvement in policy-making in education. This difference highlights the need for participatory planning systems that place priority on family involvement in special education reform. Evidence indicated high levels of involvement with teachers and, to a lesser extent, with school officials. But involvement with politicians was greatly restricted. This is in contrast to a general criticism of top-down planning in Nigeria's education system, in which parents are systematically excluded from policy debate [24]. Parents' greater engagement with teachers reflects a dependence on classroom-level communication in lieu of institutional lobbying, as in line with results of [25], who recommend established forums that enable direct communication between policy makers and parents. The deficit this research identifies necessitates the institutionalization of parent councils and representation in school governing frameworks.

Research Question 5: What coping strategies and support networks do parents utilize in the face of challenges?
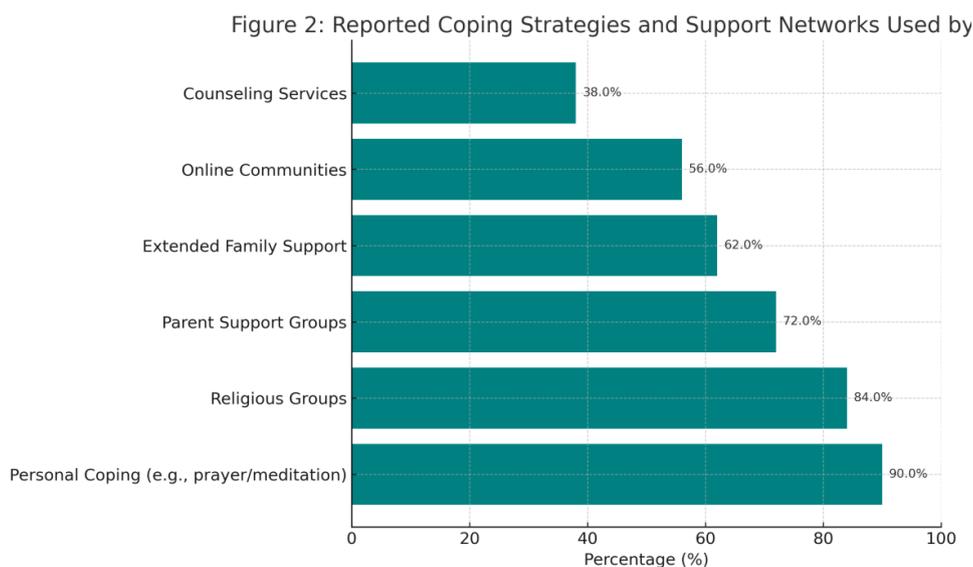
Figure 2. Reported Coping Strategies and Support Networks

As can be seen from Figure 2, the research indicated that parents made use of most frequently personal coping strategies such as prayer or meditation at a rate of 90%. Religious group congregation came in second at 84%. Parent support groups and extended family provided considerable responsibilities at 62% and 72%, respectively. Counselling had been utilized least, though at a level of 38%, presumably under social shame or lack of access. The results are a signpost to the cultural overtones supporting community and religious-based care in Nigeria, reinforced by the relatively low utilization of professional mental health care in the country. The findings were that peer and religious support group use and solitary coping activities like prayer and meditation were utilized significantly.

This is supported by research works of [26], which pointed out that in the event of health and educational issues, Nigerian families turn to religiosity-based support systems as a source of comfort and

resilience. Particularly when state assistance is lacking, these support systems provide a sense of belonging, practical advice, and emotional support. Specifically, the lack of culturally adapted alternatives and financial constraints can both contribute to low take-up rates of professional counseling services. Cross-country studies, such as that of, have suggested that the parents of autistic children who employ effective coping measures have reduced levels of stress and better advocacy outcomes. Therefore, in Nigerian society, integrating psychological support with current religious and cultural paradigms can maximally facilitate the effectiveness of coping. The results showed that economic hardship significantly impeded parental participation, as can be seen in Table 2, with the mean score of economic hardship being 75.21. Sociocultural attitudes also contribute moderately (M = 57.75), which suggests that attitudes and stigmas remain to affect levels of participation.

With the lowest institutional support rating (M = 49.41, SD = 15.08), parents might not always receive reliable institutions of higher education or even the government. The findings categorically established that the socioeconomic class had some effect on parental advocacy, and the wealthier parents were likely to advocate at higher levels. This is evidenced by research by [22], which asserts that socioeconomic inequality severely limits Nigerians' access to high-quality special education services. Richer parents are able to afford private therapy, diagnostics, and even out-of-country consultations, but poorer parents must do the best they can with overworked public facilities. Perhaps most notably in rural areas, there continues to be a belief culture that connects autism with witchcraft or spiritual punishment. These cultural beliefs create a culture of secrecy and shame, and so individuals are less likely to obtain assistance and contribute to underreporting. Institutional issues are a lack of autism-specific curriculum and poor training for special education teachers that exacerbate this issue [23].

5. CONCLUSION

The study examined the modes, issues, and dynamics that influence parental advocacy and involvement in special education among autistic children in Nigeria. The results allude to the fact that although parents are involved in their children's education both formally and informally, they encounter a number of challenges that halt them from playing their optimal possible advocacy roles. These challenges, among others, include financial restraints, ignorance, cultural myths, and institutional insensitivity. Despite all of these obstacles, most parents have found innovative strategies of advocating on behalf of their children, through peer networks, religious belief, and community resources. More intensive socioeconomic and institutional pressures, however, seem to affect the efficacy of such efforts. For example, it was discovered that more educated and affluent parents were more effective in struggling on behalf of their children because the system's ongoing disparities reproduced themselves. Parent-teacher relations were satisfactory, but relations with administrators and legislators were minimal. This reflects a disconnect between policy-level change and grass-root activism that must be resolved for inclusive education initiatives to be most successful. Ally educators and community organizations are certainly vital, but systemic changes must occur as well in order to maximize their efforts. Finally, the study emphasizes how crucial it is to provide Nigerian parents with the abilities, information, and institutional assistance required to be great advocates. Making the classroom a completely inclusive environment for Nigerian students with autism involves surmounting the obstacles that have been described, particularly institutional inertia, cultural stigmatization, and poor awareness.

It is not only desirable but also necessary to involve parents' perspectives in designing and implementing educational policy.

This study explored the models, challenges, and determinants of parents' advocacy and involvement in special education for Nigerian autistic children. The study finds that although parents are involved in children's education, formally and informally, they are faced with many challenges in fulfilling their potential as advocates. Some of them include financial hardship, lack of information, cultural confusion, and institutional non-responsiveness. Despite these obstacles, parents have developed innovative solutions to aid their children through peer networks, community services, and spirituality. Larger socioeconomic and institutional forces often influence the impact of these interventions, however.

It was found, for example, that more highly educated and wealthier parents were more effective at doing advocacy for their children, reflecting deep-seated biases within the system. Parent-teacher relations were generally good, but little communication existed with administrators and lawmakers. This then points to a disconnection between influence at the policy level and mobilization at the grassroots that needs to be bridged if inclusive education initiatives are to reach their full potential. As critical as community organizations and compassionate teachers are, change within institutions is also required to maximize their effects.

Finally, the study acknowledges that it is essential to provide Nigerian parents with the abilities, information, and institutional backing required to become proper advocates. Becoming an entirely inclusive school community for Nigerian children with autism entails surmounting the problems that have been listed, including institutional lassitude, cultural stigma, and ignorance. Not only is it desirable but also essential that parents' opinions be included in planning and education policymaking.

Acknowledgments

Funding Information

Author Contributions Statement

Name of Author	C	M	So	Va	Fo	I	R	D	O	E	Vi	Su	P	Fu
Patricia Kwalzoom Longpoe	✓	✓	✓	✓	✓	✓		✓	✓	✓			✓	✓
Rufus Olanrewaju Adebisi		✓			✓	✓		✓	✓	✓	✓	✓	✓	✓

C : **C**onceptualization
M : **M**ethodology
So : **So**ftware
Va : **Va**lidation
Fo : **Fo**rmal analysis

I : **I**nvestigation
R : **R**esources
D : **D**ata Curation
O : Writing - **O**riginal Draft
E : Writing - Review & **E**diting

Vi : **Vi**sualization
Su : **Su**pervision
P : **P**roject administration
Fu : **Fu**nding acquisition

Conflict of Interest Statement

Authors state no conflict of interest.

Informed Consent

All references used for the write up of this paper have been adequately acknowledged under references.

Ethical Approval

This study adhered to ethical research principles rigorously. Ethical approval was obtained from the University Research Ethics Committee, and informed consent was obtained from all participants. Participants were informed of their right to withdraw at any time without penalty, and confidentiality and data protection were guaranteed. Pseudonyms were employed, and all electronic documents were stored on password-protected devices. They were especially sensitive in how they managed emotionally charged issues, taking particular care when dealing with stigma or systemic breakdowns and referrals as needed for psychological counseling.

Data Availability

The data that support the findings of this study are available on request from the corresponding author, [Adebisi, R. O.]. The data, which contain information that could compromise the privacy of research participants, are not publicly available due to certain restrictions.

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