**Navigating the Emotional Labyrinth: Parental Challenges in Raising Children with Disabilities in Tamale Metropolis, Ghana**

***Abstract:***

*Parenting is a daunting task, laced with stress, anxiety, and emotional distress, but it's significantly more challenging for those raising children with disabilities. These parents face not only the usual emotional and psychological hurdles but also the added complexities of managing the unique behavioural, medical, and developmental needs associated with conditions like Autism Spectrum Disorders (ASD), Oppositional Defiant Disorder (ODD), and Conduct Disorder (CD). This research delves into how social support impacts the emotional well-being of parents of disabled children in Tamale Metropolis, Ghana, a place where cultural norms deeply influence caregiving and the pursuit of help.*

*Using a qualitative case study approach, the study gathered data through 18 purposively sampled structured interviews with parents whose children attend schools meant for pupils with Special Educational Needs (SEN). Analysis of the data revealed recurring emotional struggles among these parents, including stress, anxiety, depression, isolation, and the burden of stigma. These challenges were largely shaped by societal attitudes and the lack of formal support systems.*

*Despite facing these tough challenges, lots of parents showed real strength, drawing on help from wider families, places of worship, and support groups. The research highlights how crucial a strong social network is, whether it's someone to lean on emotionally, offer advice, or give practical help, for how well parents cope and their overall happiness.*

*The study makes a strong case for quick, tailored support, more formal assistance programmes, and training for parents to boost their emotional resilience and improve their family's quality of life. This research contributes to the wider conversation about inclusive education and support systems in sub-Saharan Africa.*

**Keywords:** Special Educational Needs, Children with Disabilities, Inclusion, Parents, Parenting, Tamale Metropolis, Emotional Support Systems.

**Introduction:**

Parenting is a heavy and complex task which demands full commitment from parents if they are to succeed at it. Despite the difficulties, parents find delight and fulfilment in raising their children. Parenting may be tough since it involves managing continuously changing expectations and tasks (Nelson, Kushlev, & Lyubomirsky, 2014). New parents typically stress about bathing practices, nappy changes, and feeding. The arrival of children imposes significant demands on parents, compelling them to adopt a variety of responsibilities and alter their way of life.

Parents of children with disabilities encounter significantly heightened levels of stress (St. John, Cameron, & McVeigh, 2005). In addition to the immediate challenges faced by the family, the presence of a child with special needs can lead to far-reaching consequences. The challenges presented by a child's assessment can profoundly impact not only the parents but also all members of the family (Antwi, 2023).

The complexity and nature of Special Educational Needs (SEN) might vary from student to student. Parents of children with disabilities are often the only caregivers for their children, particularly throughout the formative years of their children's lives. This is true regardless of the severity or complexity of the child's condition. Among these responsibilities is fulfilling the child's and the rest of the family's psychological, social, educational, and medical requirements (Mabel Oti-Boadi, 2017).

According to Schooling (2011), parents of children with chronic health conditions often assume primary responsibility for overseeing the management of these conditions. This management generally involves the administration of medication and adherence to prescribed regimens, tailored dietary plans, complementary medical therapies and services, as well as an understanding of risk behaviors that could exacerbate the condition.

Morawska et al. (2023) further observed various responsibilities, such as overseeing their children's daily activities, adeptly handling any health emergencies that may occur, and providing educational and social experiences that promote healthy psychosocial development and enhance the value of life for children with disabilities. For children exhibiting “oppositional behavior issues”, the expectations placed upon them are significantly heightened (Tryfon, Anastasia, & Eleni, 2021).

This phenomenon arises from the fact that such constraints frequently lead to additional behaviors and heightened aggression. According to Badu (2016), Conduct Disorder (CD), Oppositional Defiant Disorder (ODD), and Attention-Deficit Hyperactivity Disorder (ADHD) represent some of the most prevalent behavioral challenges categorised as "Oppositional Behavior Problems or Disorders" in the pediatric population.

Parents of children exhibiting oppositional behavior must consequently offer more consistent support than those with children facing different disorders or none at all, due to the potential for aggression and conduct-related issues. Parents of children with Autism Spectrum Disorders (ASD) encounter stress-related challenges more often than their counterparts, owing to the increased levels of energy and effort necessitated by the unique demands of raising a child with ASD or other developmental disabilities (Opoku, Nketsia, Benefo, & Mprah, 2022).

According to Opoku et al. (2022), certain parents possess an optimistic perspective that facilitates their ability to transform and realign their lives following their child's needs. It is asserted that parents who maintain a sense of hope and optimism regarding their child's situation frequently express that raising a child with special needs has enriched their lives with empathy, hope, love, care, and a profound sense of value. Their personal development is ascribed to both their impairment and their child. The presence of a disabled child within the household stirs a complex array of emotions and sentiments among their siblings. It is often observed that siblings develop a deeper sense of affection and empathy for each other and others over time. In a comparable context, Faw & Leustek (2015) have observed that parents of children with disabilities who display hope and optimism tend to hold a more favourable view of their health and abilities. The adaptability exhibited by siblings serves as a constructive approach that enhances the resilience of families with disabled children. The circumstances in which siblings found themselves, managing the increased stress, adapting to the changes, and navigating the complexities of family dynamics, are noteworthy.

There are a multitude of practical and emotional obstacles that parents of children with disabilities encounter on a global scale. Social support is essential in assisting parents in adjusting to their new reality and overcoming these obstacles (Tryfon et al., 2021). It may originate from a variety of sources, such as family, colleagues, professionals, and community organisations. Social support can take the form of tangible support, such as financial assistance or daycare, or emotional support, such as listening, offering advice, or simply being present for the parent.

According to Amo-Adjei et al. (2023), research in Ghana has revealed that parents of children with disabilities encounter substantial challenges in the form of financial constraints, discrimination, physical exhaustion, inadequate work hours, and loneliness. Nevertheless, they also derive support from their families, social organisations (such as churches), and spirituality, which includes counselling. Counselling services assist parents in managing the emotional and stress-related responsibilities of caring for their children, thereby enhancing their overall health (M Oti-Boadi, Osei-Tutu, & Mate-Kole, 2022).

Nevertheless, there is a dearth of literature that addresses the contextual and locational dynamics of the subject matter, particularly in Tamale, where cultural dynamics influence how individuals interact with and provide support to one another. The objective of this investigation is to examine the impact of social support on the emotional adjustment of parents of children living with disability in the Tamale Metropolis, thereby addressing the existing void in research in this field.

**1.2 Research Objectives**

* Examine the specific emotional challenges faced by parents of children with disabilities, including stress, anxiety, depression, and feelings of isolation.
* Investigate the coping strategies parents employ to manage their emotional challenges and assess the effectiveness of these mechanisms in promoting mental well-being.
* Propose evidence-based intervention strategies aimed at reducing the emotional challenges of parents, enhancing their resilience, and improving their overall quality of life.

**1.3 Research Questions**

* What are the most common emotional challenges experienced by parents of children with disabilities?
* What coping strategies do parents of children with disabilities commonly use to manage their emotional challenges?
* What types of interventions have been shown to reduce emotional challenges and improve mental health outcomes for parents of children with disabilities?

**2.0 Review of Related Literature**

Disability is a general word for impairments, activity limitations, and participation constraints, according to the ICF (International Classification of Functioning, 2022). It refers to the detrimental effects of a person's interactions with their contextual elements, which include their personal and environmental circumstances and their underlying health conditions. As a result, this model begins with a health condition (such as an illness, a health issue, an injury, or another condition connected to health), which, when combined with contextual circumstances, may lead to impairments, activity restrictions, and participation restrictions.

According to the ICF, impairments are issues with how the body functions or is structured, such as a significant deviation or loss. Activity is the act of carrying out a task or action by an individual. Activity limitations are issues with how well they can be carried out. Participation is being involved in a situation. Participation restrictions are issues with how well they can be involved in situations. Environmental factors make up the physical, social, and economic environment. Two perspectives on disability were mentioned by Mik-Meyer (2016), one of which was medical and the other societal.

The medical justification for disability, in his opinion, is that impairment (loss of limb, organ, function, or sense) has severe physical and psychological impacts on people, rendering them unable to ensure a respectable standard of living for themselves. This understanding of disability only considers a person to be impaired if they have physical, mental, or sensory impairments. The author criticizes the medical approach for ignoring society's handicapping effects on people with disabilities, such as the effects of an inaccessible physical environment on a wheelchair user, society's negative attitude towards people with disabilities, the impact of a society that is insensitive and hostile to minority rights, for example, in accepting sign language for the deaf, and of the significance of a white cane for disabled people.

There are justifications for the social model of disability, which is commendable: According to the social model, barriers to full participation in society for people with disabilities or impairments include those that are financial, cultural, attitudinal, physical, and social. Therefore, it promotes the removal of obstacles and views the issue of disability as one of human rights.

According to Resch et al. (2010), the social model is liberating in that it provides Persons with Disabilities (PWD) groups with identification, pride, and a shared objective of eliminating discriminatory barriers in society, while considering the unique distinctions of its members. It recognises the individuality of PWDs, as well as that of all other individuals, without stigmatising them. It affirms their human rights and dignity as valuable members of the human race, and it presents a strategy for the global eradication of all forms of discrimination, not only against PWDs but also against all humanity.

**2.1 Emotional Challenges of Parents of Children with Disabilities**

According to the Department for Children, Schools and Families (DCSF) (2010), the word "Parent" encompasses mothers, dads, guardians, and other individuals responsible for the upbringing of a child, including relatives and acquaintances. Parents caring for disabled children often experience guilt, embarrassment, denial, rage, anxiety, and other negative feelings, making acceptance challenging (Arzeen, Arzeen, Zeb, & Shah, 2023). Given that most parents invest in their children with the intention that they would care for them in old age, it has been demonstrated that parents and caregivers commonly assume that the impairment has shattered their aspirations and expectations about their child's future potential.

A research by Sousa (2015), indicates that parents of children with impairments endure considerable stress, anxiety, isolation, stigma, physical fatigue, and insufficient time to complete daily responsibilities. Research indicates that parental anxiety and family functioning significantly influence children's cognitive, behavioural, and social development, particularly in children with disabilities and within general psychology (Besten et al., 2016). Consequently, safeguarding children's well-being is unfeasible without concurrently ensuring the well-being of families and perhaps communities (Besten et al., 2016).

Fotso and Nawo (2022) posited that Social Isolation and the stigma linked to impairments provide the greatest problems for mothers in Ghana. Social prejudices in the community can lead to the mistreatment of families with impaired children. Social shame may lead husbands to quit their spouses, while affluent parents may face accusations of neglecting their child's intellectual growth in pursuit of money (Moriña & Carnerero, 2022). Mothers view their children as burdens or curses, attributing their troubles to divine will, especially in Africa, where some disabilities are believed to be the result of witchcraft or malevolent spirits (jinnis). Such negative preconceptions enable society to stigmatize, marginalize, and discriminate against handicapped children and their families.

To avert stigmatisation and the distress associated with having a child with a handicap, some parents conceal their challenged offspring and refrain from openly seeking assistance (Hinshaw, 2005). Parenting a child with special needs or a handicap has several adverse effects, such as stress, sorrow, financial challenges, and societal shame. Research indicates that parents endure significant psychological anguish, intensified by their inability to manage their children's behaviour and an increasing sense of obligation (Gray, 1993). Moms are more likely to have these unfavourable emotional responses than fathers. This is due to the fact that women often take on the primary duty of providing care for their children.

**2.2 Formal Support System**

A structured organization or agency provides social, psychological, physical, and financial aid, considered formal social support, either gratuitously or for a fee. It is provided by professionals, including medical staff, social workers, child therapists, hospitals, and other healthcare facilities, along with intervention programs designed to support individuals with specific needs (Bartolo et al., 2023). Despite the availability of complimentary governmental social assistance for certain parents, obstacles may hinder their access to it. School curriculum must be curated to imbibe in it the teaching of pupils to be empathetic towards their colleagues with SEN in school. Teachers must also be a strong pillar in providing support to families and learners with SEN (Mahama, Issaka, & Iddrisu, 2023).

Findler (2000) identifies limitations such as accessibility challenges with distance and transportation, dissatisfaction among service providers, and insufficient awareness of available services. Formal assistance is essential since it targets specific problems that other forms of aid may not resolve. Formal support can elucidate a child's particular handicap and the distinct requirements associated with that youngster (Ghosh & Greenberg, 2012).

**2.3 Social Support and Emotional Adjustment**

Wilmshurst and Brue (2005) argue that the beneficiaries' cognitions concerning the assistance offered by others are utilised to characterise perceived social support. The receiver only deduces the altruistic actions and objectives of others. Perceived social support refers to the individual experience of interpersonal, psychological, and social assistance that enhances the well-being and health of parents with disabled children. This notion posits that social help and its comprehension are crucial to an individual's overall functioning.

This is particularly applicable to Africans and Ghanaians, who are perceived as interconnected, possessing valuable attributes, and demonstrating a significant dependence on informal organisations (Alimatu, Nyame, & Abu, 2021; Fisher, 2022). In the work of Fisher (2022), the categories of social help for parents of impaired children are delineated into three distinct groups:

1. important individuals (those regarded as major, influential, or closely connected),
2. influential figures (those perceived as impactful), and
3. family (the extended and nuclear units of individuals related by birth or affinity)

Emotional support is demonstrated via behaviours such as acknowledging individual needs and conveying compassion, caring, and solidarity. The most well-known sort of social support is psychological support from friends, family, and religious groups. According to Badu (2016), meeting personal needs and exhibiting compassion, care, and solidarity exemplify behaviours that provide essential social support, important for meeting core socio-emotional requirements.

This form of emotional support that should be offered to someone in this situation can include comfort and encouragement. Moriña and Carnerero (2022), contends that throughout challenging periods, individuals require support and closeness, as well as the capacity to articulate their thoughts and emotions. Supplementary official or informal sources of continual reassurance encompass friends, neighbours, educators, and other community members (Adigun, Aminu, Adio, & Adio, 2022). Parents with children with disabilities may seek emotional support from friends, family, professionals, or fellow parents.

Nonetheless, depending on other family members may heighten stress if they cannot fulfil the parents' demands or ambitions. Parents may also get support from social workers, psychologists, and other counsellors (Adigun et al., 2022). Clarifies that counselling services offered by group organisations, such as religious affiliations, support groups, and other associations where parents engage, can also deliver emotional assistance.

**2.4 Influence of Social Support on Emotional Adjustment in Raising Children with Disabilities**

According to Adigun et al. (2022), social support is crucial for people's physical and mental health, especially in times of stress or difficulty. They emphasised how social support might improve coping mechanisms, reduce the harmful consequences of stress, and foster psychological resilience. Social support is a buffer against the detrimental consequences of stress, according to Adigun et al. (2022). They suggested, specifically, that social support can help caregivers cope with the pressures and difficulties of taking care of a loved one who has a handicap or a chronic illness.

When it comes to coping with and dealing with a child who has special needs, social support plays a crucial role. As a result, social support is a crucial resource for stress management, self-confidence, and self-efficacy enhancement. Samuel and Burger (2020) claim that a robust network of social supports can diminish professional stress and enhance self-efficacy. Families possessing extensive social support networks are more adept at navigating obstacles than those with limited resources. Furthermore, some studies demonstrated that social assistance has been shown to improve the well-being and coping mechanisms of parents with children who have special needs (Nachinaab, Kumah, & Yirenkyi, 2019; Mabel Oti-Boadi, 2017). Social support significantly influences the caregiver's life and serves as a crucial safety net for parents of children with disabilities.

To effectively alleviate parental stress, social assistance must be impactful. According to Nachinaab et al. (2019) provided assistance must align with the desired or anticipated help. A family need is defined as a family's articulated need for the acquisition of social services or the attainment of certain objectives.

This review emphasises the essential role of social support for parents of children with disabilities, particularly regarding the emotional resilience of the parents, and subsequently presents a comprehensive array of studies on the significance of social support in this context. This comprehension is essential for formulating more precise and effective social support strategies that accurately reflect the distinct experiences and requirements of families with children who have impairments by explicitly differentiating among the various types of assistance. What is often overlooked or inadequately emphasised in the literature is the training requirements for parents of children with impairments. Training is crucial for social support, enabling parents to effectively manage and raise children with disabilities, among other differently abled children in a healthy atmosphere.

**3.0 Methods and Materials**

The main goal of this research is to find out and examine the effects of social support on the emotional adjustment of parents of disabled children located in the Tamale Metropolis.

**Study Design**

This study is a **qualitative research,** with a **case study** used to find quality data for this study.

**3.2 Sampling Technique and Sample Size**

This study employed purposive sampling in arriving at the appropriate sample size. Purposive sampling is a non-probability selection technique that selects study participants based on their accessibility and readiness to engage.

Taking cognizance of the units of analysis, the study targeted parents of children with Special Educational Needs (SEN) of the selected schools in Tamale. These schools include: Yumba Special School, Dakpema Primary School and Betty Aruna Prestige Memorial School, which have a high rate of children with SEN.

**3.3 Study Population and Setting**

Although there are several parents of children with SEN in the selected schools for the study in Tamale, the total number of parents **sampled** for the interview was **eighteen (18)**. These participant parents were targeted because they wielded certain pieces of information pertinent to this study. The motivation for adopting this method was that a substantial portion of the respondents were into trading or working within the government sector. This sparked the utilisation of accidental sampling, as it is more conducive to the requirements of the study. Consequently, parents having a ward with Special Educational Needs (SEN) were inadvertently chosen and subsequently interviewed. In the event that, the respondent was unprepared, the next available individual was consulted and interviewed.

**3.4 Data Collection Instrument**

This study makes use of an **interview guide** as the principal data collection tool, facilitating a bilateral discourse between the interviewer and the participant to comprehend their ideas, beliefs, thoughts, and behaviours.

**3.5 Data Collection Procedure**

Comprehensive one-on-one interviews were conducted in person, utilising a structured interview guide for parents, which facilitated open dialogue and enabled extensive data acquisition. The interviews enabled us to validate and clarify some assertions made by respondents. The interviews were essential as various respondents offered distinct and pertinent information. The interviews lasted between 25 and 35 minutes, depending on the nature of the subjects addressed. However, a pre-test was conducted to ensure that the data collection instrument was valid and reliable.

**3.6 Data Analysis**

It was done with **thematic** content analysis. As a qualitative research method, it was used to find and study trends that are important in data. This method is known for being very organised and thorough, and it can be used in many different types of studies. For example, it can be used to look into the myriad of problems parents of handicapped children face.

**4.0 Results of finding**

**4.1 Demographic Information of Respondents**

In this section, the descriptive characteristics of the respondents' demographics are highlighted. It provides information regarding the ailment that their children have, as well as the gender, age, occupation, and religion of the respondents.

**Table 1. Age and Gender of Respondents**

|  |  |  |  |
| --- | --- | --- | --- |
| Age Category | Frequency (%) | Gender  | Frequency (%) |
| Below 20 | 0 (0%) | **Male** | 6 (33.3%) |
| 20 – 29 | 1 (5.6%) | **Female** | 12 (66.7%) |
| 30 – 3940 – 4950 – 59Above 60 | 3 (16.7%)8 (44.4%)3 (16.7%)3 (16.7%) |  |  |
| TOTAL | **18** **(100%)** | **TOTAL** | **18 (100%)** |

Source: ***Field Survey (2025)***

According to the study, 12 out of 18 respondents were female, whilst 6 were male, making women the majority of the sample. Since women make up the majority of carers, women will likely be the ones primarily responsible for providing care for children with impairments. This can be a reflection of conventional gender norms and expectations. To cope with their child's impairment, female parents can highlight the emotional support they get. Women may be more willing to ask for and accept emotional help, according to the findings of this survey.

Women may have greater social support networks or be more inclined to share their experiences and ask for help from others, as seen by the higher percentage of female answers. The difficulties of raising a kid with a handicap may be handled by female parents via faith, support from friends and family, and encouragement. This implies that individuals find strength in their own convictions and social ties. The gender of the parent may have an impact on their particular difficulties and experiences when raising a child with a handicap, even when it isn't stated specifically in the comments given.

Concerning the age distribution of the respondents, the majority of parents of children with disabilities in Tamale are in the 40-49 age range, with the majority being in their mid-life years. This age range is influenced by factors such as family structure and career advancement. Older parents, above 60, face challenges related to ageing and caregiving, while younger parents, aged 20-29, balance caregiving responsibilities with other life commitments like education or career development.

The age distribution of parents in Tamale provides insights into the unique context of caregiving, highlighting the influence of cultural and traditional factors, community interdependence, socioeconomic challenges, and changing generational dynamics. Overall, this data provides valuable insights into the unique caregiving context in Tamale.

**Table 2. Disability of Participants**

|  |  |  |
| --- | --- | --- |
| Disability | Frequency | Percentage (%) |
| Intellectual disability | 6 | 33.3 |
| Visual impairment | 0 | 0 |
| Hearing impairment | 0 | 0 |
| Physical disability | 1 | 5.6 |
| Autism | 6 | 33.3 |
| Cerebral palsy | 3 | 16.7 |
| Multiple handicap | 1 | 5.6 |
| Behaviour and emotional | 0 | 0 |
| Language and communication | 0 | 0 |
| Down syndrome | 1 | 5.6 |
| Total | 18 | 100 |

Source: ***Field Survey (2025)***

This study reveals that intellectual disability and autism are the most common disabilities among children, accounting for 33.3% of the sample. Cerebral palsy is also prevalent, accounting for 16.7%, affecting a child's motor skills and coordination. Physical disability, multiple handicaps, and Down Syndrome are less common, accounting for 5.6% each. These disabilities may require specialized care and support, and parents may face unique challenges in providing such support. However, none of the parents reported having children with Visual or Hearing Impairments, Behavioural and Emotional issues, or Language and Communication disorders, possibly due to the study's focus or the low prevalence of these conditions in the research area.

This section presents the findings of the study based on the research questions: (1) the most common emotional challenges experienced by parents of children with disabilities, (2) coping strategies commonly used by parents to manage emotional challenges, and (3) interventions that help reduce emotional challenges and improve mental health outcomes. Data was analyzed thematically based on participant responses.

**4.2 Common Emotional Challenges Experienced by Parents of Children with Disabilities**

The analysis of this study revealed several general themes establishing the emotional concerns that are typical of parents of children with disabilities. The themes contain the intricate emotional experience of parents, including the feeling of loss, grief, worry and fear for the future, isolation, and the persistent skirmish to gain societal acceptance and support. Taken together, these findings provide a better understanding of the emotional reality of such families.

The study revealed that parents of children with disabilities in the Tamale Metropolis experience various emotional challenges, including stress, anxiety, depression, social isolation, financial strain, and feelings of helplessness.

**4.2.1 Stress and Anxiety**

Many parents expressed feeling overwhelmed by the daily demands of caring for a child with a disability. Several respondents shared concerns about their child's future and the long-term burden of caregiving.

*"I am always worried about my child's future. Who will take care of him if I am no longer around? The anxiety of not knowing what will happen is very stressful." (Mother, 43 years old)*

Another parent of a child with autism explained:

*"I can’t sleep sometimes because I keep thinking about how to provide for my child and whether he will ever be independent." (Father, 50 years old)*

**4.2.2 Depression and Emotional Distress**

Some parents admitted experiencing persistent sadness and emotional distress due to their child's condition.

*"Sometimes I feel like crying because it is difficult to see my child struggle while other children his age are progressing normally." (Father, 50 years old)*

A mother from Yumba School shared:

*"There are days I just feel like giving up. The emotional weight is too much to bear." (Mother, 37 years old)*

**4.2.3 Social Isolation**

The study found that many parents felt isolated from their communities and extended families due to stigma and a lack of understanding.

*"People don’t visit us anymore because they think having a disabled child is a bad omen. Even some family members distance themselves." (Mother, 39 years old)*

Another parent lamented:

*"People think my child's condition is a punishment or a curse. They avoid us, and this makes me feel isolated."*

Another parent commented:

*"When I take my child to public places, people stare and make comments. This makes me avoid social gatherings." (Mother, 38 years old)*

**4.2.4 Financial Strain**

The financial burden of medical care, therapy, and specialized education was a major source of stress.

*"I have spent so much money on hospital visits and therapy. Sometimes I don’t even have enough money for food because all my income goes into taking care of my child’s needs." (Father, 45 years old)*

Another participant noted:

*"I had to quit my job to take care of my child because there was no one else to help. Now, we rely on my husband's income, which is not enough." (Mother, 38 years old)*

**4.2.5 Feelings of Helplessness**

Several parents expressed frustration about the lack of resources and support for children with disabilities.

*"I feel helpless because I don’t know how best to support my child. There are very few schools that accept children like mine, and the government support almost cannot be seen." (Mother, 35 years old)*

**4.3 Coping Strategies Used by Parents to Manage Emotional Challenges**

Parents employed various coping strategies to manage their emotional challenges. The most common ones included seeking social support, relying on religion, engaging in self-care activities, and joining parent support groups.

**4.3.1 Social Support**

Many parents found comfort and strength in their relationships with friends, family, and other parents in similar situations.

*"My sister has been very supportive. Whenever I feel overwhelmed, I talk to her, and she encourages me." (Mother, 42 years old)*

A mother stated:

*"My husband helps me a lot with the caregiving responsibilities, and that makes a huge difference." (Mother, 39 years old)*

**4.3.2 Religion and Faith**

A significant number of parents reported that their religious beliefs helped them cope with the emotional burden.

*"I pray a lot, and I believe God gave me this child for a reason. My faith keeps me strong and helps me face each day." (Father, 47 years old)*

A mother of a child with cerebral palsy stated:

*"My church community has been very supportive. They pray for us and sometimes help us financially." (Mother, 44 years old)*

**4.3.3 Self-Care and Personal Time**

Some parents emphasized the importance of setting aside time for themselves to manage stress.

*"I take time to relax when my child is asleep. Sometimes, I listen to music or read to clear my mind." (Mother, 38 years old)*

**4.3.4 Support Groups and Community Engagement**

Several participants highlighted the importance of being part of a community of parents with similar experiences.

*"There is a group of us parents who meet and share our challenges. Talking to people who understand what you are going through makes a big difference." (Mother, 40 years old)*

**4.4 Effective Interventions to Reduce Emotional Challenges and Improve Mental Health**

The study identified several interventions that parents believed could help reduce their emotional burden and improve their mental health. These include increased access to psychological support services, financial assistance, better inclusive education policies, and awareness campaigns.

**4.4.1 Psychological Support Services**

Many parents stressed the need for counselling and mental health services tailored to their needs.

*"If we had professional counsellors available to talk to, it would help us deal with the emotional stress." (Mother, 36 years old)*

A father of a child with multiple disabilities added:

*"There should be mental health programs specifically for parents of children with disabilities." (Father, 41 years old)*

**4.4.2 Financial Assistance Programmes**

Many parents believed that financial support from the government or NGOs could alleviate some of their burdens.

*"If we had financial support to cover medical expenses and therapy, life would be much easier." (Father, 49 years old)*

A mother added:

*"Sometimes, I have to borrow money just to afford basic necessities. Any form of financial aid would help." (Mother, 37 years old)*

**4.4.3 Better Inclusive Education Policies**

Some parents called for improved education opportunities for children with disabilities.

*"There are very few schools that accept children with disabilities, and those that do are too expensive. The government should make education accessible to all children." (Mother, 41 years old)*

**4.4.4 Awareness Campaigns and Advocacy**

Many parents emphasized the need for societal change through public awareness campaigns to reduce stigma and increase acceptance of children with disabilities.

*"If society understands that these children are not cursed but simply different, maybe people will be more supportive and inclusive." (Father, 44 years old)*

*"There should be awareness campaigns to educate people about disabilities. The stigma we face is too much." (Mother, 39 years old)*

The findings from the study indicate that parents of children with disabilities in the Tamale Metropolis face significant emotional challenges, including stress, depression, financial strain, and social isolation. Despite these difficulties, they employ various coping strategies, such as seeking social support, relying on religion, and participating in community support groups.

Effective interventions, including psychological counselling, financial aid, better inclusive education policies, and awareness campaigns, are necessary to enhance the mental well-being of these parents. Addressing these challenges will require a collaborative effort from the government, NGOs, and the broader community.

**5.0 Discussions of Finding**

This section provides a critical analysis of the study’s findings in relation to existing literature. The results are discussed based on the three research questions: the most common emotional challenges faced by parents of children with disabilities, the coping strategies employed, and the interventions that mitigate emotional distress and enhance mental health outcomes.

**5.1 Emotional Challenges Faced by Parents of Children with Disabilities**

The study revealed that parents of children with disabilities in Tamale experience a range of emotional challenges, including stress, anxiety, depression, social isolation, and financial strain. These findings are consistent with previous studies that have documented heightened psychological distress among parents of children with disabilities (Watson, Coons, & Hayes, 2013). The stress reported by participants is largely attributed to concerns over their children’s future, societal stigma, and limited access to specialized support services.

A significant theme that emerged was the feeling of isolation and exclusion from social circles. Many parents indicated that they felt alienated due to the lack of awareness and acceptance of disabilities within the community. This aligns with previous research by Adigun et al., (2022), which found that parents of children with disabilities often experience social isolation due to negative societal attitudes and a lack of understanding from peers.

Financial strain was another major challenge, with many parents reporting difficulties in affording medical care, special education, and therapy for their children. According to Benson (2014), financial difficulties among parents of children with disabilities are a common stressor, as these families often incur higher healthcare and educational expenses. This finding underscores the need for targeted financial assistance programs to alleviate economic burdens.

**5.2 Coping Strategies Employed by Parents**

The study found that parents adopt various coping strategies to manage their emotional distress. The most common coping mechanisms included seeking social support from family and friends, engaging in religious or spiritual practices, and relying on self-care activities. Social support was highlighted as a crucial factor in alleviating stress, consistent with the social support theory, which posits that emotional and practical assistance from others can buffer the effects of stress (Wills, 1985).

Participants frequently mentioned turning to religious beliefs and practices as a source of comfort. Religion provided them with hope, strength, and a sense of purpose. This finding is in line with previous studies that have found faith and spirituality to be significant coping resources for parents of children with disabilities (Gomez-Najarro, 2020). The reliance on religious faith reflects the cultural and religious landscape of Tamale, where spirituality plays a central role in daily life.

Another important coping strategy identified was resilience-building through self-education and advocacy. Some parents reported that educating themselves about their children’s conditions and advocating for better services empowered them and reduced feelings of helplessness. This finding is supported by research conducted by Weiss et al. (2012), which suggests that parental empowerment through knowledge acquisition significantly improves coping outcomes.

**5.3 Effective Interventions for Reducing Emotional Challenges**

The study highlighted various interventions that have been beneficial in alleviating emotional distress among parents of children with disabilities. These include professional counselling, peer support groups, and financial assistance programmes. Many parents emphasized the importance of having access to counselling services to help them process their emotions and develop effective coping mechanisms. This aligns with the findings of Singer, Clarke, Schiltz, and Lord (2025), who suggest that psychological interventions can significantly reduce stress and improve well-being among caregivers.

Peer support groups were also identified as a highly effective intervention. Parents reported that interacting with others facing similar challenges provided them with emotional validation and practical advice. Previous research by Barbareschi (2021), found that peer support groups enhance emotional well-being and resilience by fostering a sense of belonging and shared experience.

Moreover, parents highlighted the need for greater governmental and NGO involvement in providing financial and material support. The study participants indicated that financial aid programs would alleviate some of their burdens, particularly concerning medical and educational expenses. This finding is consistent with the work of Edwards, Parmenter, O’Brien, and Brown (2018), who argue that financial and policy support structures play a crucial role in improving the quality of life of families raising children with disabilities.

**6.0 Conclusions**

This study examined the emotional challenges experienced by parents of children with disabilities in the Tamale Metropolis, their coping strategies, and the interventions that can improve their mental well-being. The findings revealed that these parents face significant emotional distress, including stress, anxiety, depression, financial strain, and social isolation. Many parents struggle with occupational and financial difficulties, as well as the stigma and discrimination associated with raising a child with a disability. The challenges are exacerbated by limited access to specialized educational facilities, inadequate healthcare services, and a lack of structured government support.

Despite these challenges, parents employ various coping mechanisms such as seeking social support from family and friends, relying on religious beliefs, and engaging in self-care activities. Some also participate in parent support groups, which provide a sense of community and emotional relief. However, these coping strategies are often not enough to fully address their emotional struggles.

The study also highlighted key interventions that can alleviate the burden on parents, including increased psychological support services, financial assistance, improved inclusive education policies, and community awareness campaigns. The findings emphasize the need for a holistic approach that involves multiple stakeholders, including government agencies, non-governmental organizations (NGOs), educational institutions, and religious groups, to provide sustainable support systems for parents and their children with disabilities.

**7. Recommendations**

Based on the findings, the following recommendations are proposed:

**1. Strengthening Psychological Support Services**

The government and health institutions should establish accessible counselling services for parents of children with disabilities. This could include free or subsidized therapy sessions with trained professionals. Support groups facilitated by trained counsellors should be introduced in community centres to provide parents with a safe space to share their experiences and receive guidance.

**2. Financial and Occupational Support**

The government should introduce financial aid programs for families with children with disabilities to help cover medical bills, therapy costs, and educational expenses. Employers should implement flexible work policies for parents of children with disabilities, allowing them to balance caregiving and employment responsibilities without job insecurity.

**3. Enhancing Special Education and Healthcare Services**

The Ministry of Education should increase the number of specialized schools and inclusive education programs that cater to children with disabilities. More healthcare facilities should be equipped with professionals trained in special needs care, ensuring that parents can access quality medical services for their children.

**4. Raising Awareness and Reducing Stigma**

Community-based organisations, religious institutions, and the media should engage in awareness campaigns to educate society on disabilities and combat stigma. Schools should incorporate disability awareness programs into their curriculum to promote inclusivity from an early age.

**5. Strengthening Community and NGO Involvement**

NGOs and religious institutions should expand their outreach programs to provide financial, emotional, and educational support to parents of children with disabilities. More partnerships should be formed between NGOs and government bodies to ensure sustainable intervention programs.

**Disclaimer (Artificial intelligence)**

Option 1:

Author(s) hereby declare that NO generative AI technologies such as Large Language Models (ChatGPT, COPILOT, etc.) and text-to-image generators have been used during the writing or editing of this manuscript.

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Details of the AI usage are given below:

1.

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3.

**References**

Adigun, A. A., Aminu, A. P., Adio, W. S., & Adio, A. A. (2022). Impact of social support on the psychosocial adjustment of children living with a disability (CLWD) as perceived by parents in the Lagos Metropolis. *IIUM Journal of Educational Studies*, *10*(2), 106–123.

Adjabeng , A. Y., & Tette , E. M. A. (2023). Challenges Faced by Children with Special Needs in Accra and the Support Systems Available to Them and Their Families. International Neuropsychiatric Disease Journal, 20(3), 64–75. <https://doi.org/10.9734/indj/2023/v20i3401>

Alimatu, I. C., Nyame, I., & Abu, F. I. (2021). Influence of Parental Expectations and Involvement on the Learning Outcomes of Children with Special Educational Needs in Tamale. *Universal Journal of Educational Research 9*(8), 1544–1551. https://doi.org/10.13189/ujer.2021.090806

Amo-Adjei, J., Essuman, R., Nurzhynska, A., Deliege, A., Sharma, G., Iddrisu, I., & Nikoi, C. (2023). Experiences of parents and stakeholders in caring for and supporting children with special needs in Ghana. *Plos One*, *18*(3), e0281502.

Antwi, T. (2023). The Unplanned Journey: Challenges of Parents of Children Living with Disabilities in Ghana. *Psychology*, *14*(4), 635–655.

Arzeen, N., Arzeen, S., Zeb, R., & Shah, M. (2023). The Role of Gender, Age and Education in the Emotional Responses of Parents of Children with Developmental Challenges. *Pakistan Journal of Humanities and Social Sciences*, *11*(4), 4465–4473.

Baboudóttir, F. N. (2018). *Disabled People’s Organisations and their Members in The Gambia*.

Badu, E. (2016). Experiences of parents of children with intellectual disabilities in the Ashanti Region of Ghana. *Journal of Social Inclusion*, *7*(1), 20–30.

Barbareschi, G., Carew, M. T., Johnson, E. A., Kopi, N., & Holloway, C. (2021). “When they see a wheelchair, they’ve not even seen me”: Factors shaping the experience of disability stigma and discrimination in Kenya. *International Journal of Environmental Research and Public Health*, *18*(8), 4272.

Bartolo, P. A., Borg, M., Callus, A.-M., De Gaetano, A., Mangiafico, M., Mazzacano D’Amato, E., … Vincent, J. (2023). Aspirations and accommodations for students with disability to equitably access higher education: a systematic scoping review. *Frontiers in Education*, *8*, 1218120. Frontiers Media SA.

Benson, P. R. (2014). Coping and psychological adjustment among mothers of children with ASD: An accelerated longitudinal study. *Journal of Autism and Developmental Disorders*, *44*, 1793–1807.

Edwards, M., Parmenter, T., O’Brien, P., & Brown, R. (2018). Family quality of life and the building of social connections: Practical suggestions for practice and policy. *International Journal of Child, Youth and Family Studies*, *9*(4), 88–106.

Faw, M. H., & Leustek, J. (2015). Sharing the load: an exploratory analysis of the challenges experienced by parent caregivers of children with disabilities. *Southern Communication Journal*, *80*(5), 404–415.

Fisher, O. (2022). *Parental involvement in mapping career transitioning for youth with autism*. University of Johannesburg.

Fotso, A. S., & Nawo, L. (2022). Child Disability and Deprivation: A Conceptual, theoretical and empirical review of the sub-Saharan African literature. *The Routledge Handbook of African Demography*, 461–477.

Ghosh, S., & Greenberg, J. S. (2012). Gender difference in caregiving experience and the importance of social participation and marital satisfaction among aging mothers and fathers of adults with schizophrenia. *Social Work in Mental Health*, *10*(2), 146–168.

Gomez-Najarro, J. (2020). An empty seat at the table: Examining general and special education teacher collaboration in response to intervention. *Teacher Education and Special Education*, *43*(2), 109–126.

Gray, D. E. (1993). Perceptions of stigma: The parents of autistic children. *Sociology of Health & Illness*, *15*(1), 102–120.

Hinshaw, S. P. (2005). The stigmatization of mental illness in children and parents: developmental issues, family concerns, and research needs. *Journal of Child Psychology & Psychiatry*, *46*(7).

Mahama, A., Issaka, C. A., & Iddrisu, A. M. (2023). A Review of Ghana’s Teacher Education Curricula and the Special Child: The Missing Links. *African Journal of Humanities and Contemporary Education Research*, *11*(1), 19–32. https://publications.afropolitanjournals.com/index.php/ajhcer/article/view/461

Morawska, M., Dwilewicz-Trojaczek, J., Stompór, T., Ligocki, P., Stopiński, M., Sutkowski, M., Grząśko, N., Kordecka, A., Kordecki, M., Jurczyszyn, A., et al. (2023). *A Stepwise Screening Protocol for Multiple Myeloma*. *Journal of Clinical Medicine*, 12(4), 1345. <https://doi.org/10.3390/jcm12041345>

Mik-Meyer, N. (2016). Othering, ableism and disability: A discursive analysis of co-workers’ construction of colleagues with visible impairments. *Human Relations*, *69*(6), 1341–1363.

Moriña, A., & Carnerero, F. (2022). Conceptions of disability in education: A systematic review. *International Journal of Disability, Development and Education*, *69*(3), 1032–1046.

Nachinaab, J. O., Kumah, E. N. M., & Yirenkyi, A. (2019). Parents’ socio-economic status as determinants of young adults’ educational attainment in Ayeduase, Kumasi. *International Journal of Innovative Research and Advanced Studies*, *6*(2).

Nelson, S. K., Kushlev, K., & Lyubomirsky, S. (2014). The pains and pleasures of parenting: When, why, and how is parenthood associated with more or less well-being? *Psychological Bulletin*, *140*(3), 846.

Opoku, M. P., Nketsia, W., Benefo, E. B., & Mprah, W. K. (2022). Understanding the parental experiences of raising deaf children in Ghana. *Journal of Family Studies*, *28*(4), 1235–1254.

Oti-Boadi, M, Osei-Tutu, A., & Mate-Kole, C. C. (2022). Challenges and support needs of parents of children with developmental disabilities (DD) in Accra, Ghana. *Research in Developmental Disabilities*, *128*, 104274.

Oti-Boadi, Mabel. (2017). Exploring the lived experiences of mothers of children with intellectual disability in Ghana. *Sage Open*, *7*(4), 2158244017745578.

Resch, J. A., Mireles, G., Benz, M. R., Grenwelge, C., Peterson, R., & Zhang, D. (2010). Giving parents a voice: A qualitative study of the challenges experienced by parents of children with disabilities. *Rehabilitation Psychology*, *55*(2), 139.

Samuel, R., & Burger, K. (2020). Negative life events, self-efficacy, and social support: Risk and protective factors for school dropout intentions and dropout. *Journal of Educational Psychology*, *112*(5), 973.

Schooling, C. S. (2011). *Latino parents’ motivations for involvement in their children’s schooling*.

Singer, H., Clarke, E. B., Schiltz, H. K., & Lord, C. (2025). Caregivers and Coping: Well-Being, Depression, and Coping Strategies Among Caregivers of Young Adults With Developmental Disability. *American Journal on Intellectual and Developmental Disabilities*, *130*(1), 41–62.

Sousa, A. C. (2015). “Crying doesn’t work”: Emotion and parental involvement of working-class mothers raising children with developmental disabilities. *Disability Studies Quarterly*, *35*(1).

St John, W., Cameron, C., & McVeigh, C. (2005). Meeting the challenge of new fatherhood during the early weeks. *Journal of Obstetric, Gynecologic, & Neonatal Nursing*, *34*(2), 180–189.

Tryfon, M., Anastasia, A., & Eleni, R. (2021). Parental perspectives on inclusive education for children with intellectual disabilities in Greece. *International Journal of Developmental Disabilities*, *67*(6), 397–405.

Watson, S. L., Coons, K. D., & Hayes, S. A. (2013). Autism spectrum disorder and fetal alcohol spectrum disorder. Part I: A comparison of parenting stress. *Journal of Intellectual and Developmental Disability*, *38*(2), 95–104.

Weiss, J. A., Cappadocia, M. C., MacMullin, J. A., Viecili, M., & Lunsky, Y. (2012). The impact of child problem behaviors of children with ASD on parent mental health: The mediating role of acceptance and empowerment. *Autism*, *16*(3), 261–274.

Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, *98*(2), 310–357.

Wilmshurst, L., & Brue, A. W. (2005). *A parent’s guide to special education: Insider advice on how to navigate the system and help your child succeed*. AMACOM/American Management Association.