

Teachers' and Parents' Perceptions of Children with Disabilities in South East Nigeria : Implications for Counselling and Inclusive Practices

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Abstract

Stigma, exclusion, and lack of access to good education have remained an issue to children with disabilities especially in developing regions where cultural beliefs and poor awareness play a role in the perceptions. The teacher and parent attitudes in South East Nigeria are a crucial factor that can be used to ascertain the extent to which children with disabilities will be accepted and included in their learning and social environments. The research design used was descriptive survey design where the study was carried out in South East Nigeria (Abia, Anambra, Ebonyi, Enugu, and Imo States) to determine the perceptions of teachers and parents towards children with disabilities. Proportional stratified random sampling was used to choose a sample of 500 respondents (388 teachers and 112 parents). A validated questionnaire was used to collect data using a 4-point Likert scale. The test was tested by professionals and its reliability coefficient was 0.82. The analysis of the data was done through SPSS, means, standard deviation and t-test. The study shows that most respondents were aged 40–49 years (43.2%), followed by 30–39 years (23.2%), 20–29 years (20.8%), and 50+ years (12.8%). The majority (77.6) was teachers as opposed to parents (22.4). Most were degree holders (61.2%), while others had secondary (15.4%), primary (12.4%), and NCE (11.0%) qualifications, with more males (63.4%) than females (36.6%). The attitudes were not uniform with teachers ($M = 2.12$) and parents ($M = 1.30$) not consistent on learning ability but both concurred that learning is a stressful experience ($M = 3.46; 3.38$). Attitudes and beliefs showed significant differences ($p < .05$), and there was high stigma ($M=3.36-3.46$), inclusion was supported ($M=3.08-3.42$) and there was not a significant difference in the perceptions of stigma or inclusion ($p > .05$). The researchers found that despite the increasing acceptance of the idea of inclusive education, the perceptions are still influenced by the stigmatizing and misleading stereotypes. It was suggested that more efforts should be put on counselling interventions, teacher training, and awareness programmes to enhance the inclusion and support of children with disabilities.

INTRODUCTION

Children with disabilities represent a heterogeneous population that needs to have deliberate and collaborative support mechanisms in terms of education, psychological, and social aspects. Over the past few years, there has been a growing focus of global and local scholarship on inclusive education and counselling as complementary measures towards their wholesome growth. Inclusive practices aim to involve children with disabilities in a mainstream environment and counselling focuses on emotional, behavioural and social issues that can impede their involvement and health. There are various obstacles that children with disabilities face such as stigma, lack of access to resources, and lack of sufficient instructional support. Studies indicate that these obstacles do not only influence academic performance, but also self-esteem, peer relations and self-identification. In a meta-aggregative review, Paul et al. (2022) discovered that positive teacher attitudes, peer acceptance, and flexible learning environments are appreciated by children with disabilities, which inclusivity of school cultures is important in promoting positive experiences. On the same note, research shows that inclusive education improves social belonging and emotional health but efforts to implement inclusive education continue to be hampered by a lack of training and a negative attitude toward it by society (Nurullayevna et al., 2026) .

Counselling implications are thus far reaching. Child disability counselling should not be based on the old-fashioned remedial approach but on holistic child-centred approaches. Cognitive-behavioural therapy (CBT), and person-centred counselling have been reported to enhance emotional regulation, self-confidence, and adaptive behaviours in children with learning disabilities (Rathore, 2024) . The counsellor should offer specific support taking into account the disability of the child and its developmental level, and also the socio-cultural background. This involves assisting the children in overcoming frustrations, establishing resilience and acquiring social skills to be able to fit in. In addition, counselling should be incorporated into the school systems as one of the multidisciplinary strategies. Effective intervention requires collaboration between the teachers, special educators, psychologists and parents. There is evidence that psychosocial support systems that are inclusive enhance engagement and minimise behavioural challenges in children with severe disabilities (Dada et al., 2023) . The counsellors are also vital in advising teachers on the classroom management plans, behaviour change techniques and emotional support plans that contribute to inclusive learning.

Inclusive education demands system-wide changes on a series of levels. Differentiated instruction, flexible curricula and assistive technologies are required at classroom level to meet the diverse learning needs. The instructors should also be imparted with the ability in inclusive pedagogy because deficiency in training is also a significant impediment to implementation. A study in Nigeria emphasizes that despite the policies that promote inclusive education, gaps in teacher training, facilities, and distribution of resources are barriers to the total achievement (Lawal et al., 2025; Taiwo and Oluwafemi, 2025) . At the institutional level, schools have to establish safe and accessible spaces that facilitate involvement of every learner. This incorporates the physical access, access to learning resources and school leadership. Notably, inclusive education does not have to be merely a physical location in a regular classroom but inclusive participation and engagement. Liu and Potmesil (2025) stress that successful inclusive

education requires meeting the needs of a variety of learners, which can be achieved with the help of evidence-based teaching methods and positive policies.

Inclusion and counselling also have significant implications to family and community involvement. Parents have a pivotal role to play in facilitating the learning process of children and represent their interests. Research indicates that the perceived effectiveness of school support and teacher competence by parents has a major impact on the effectiveness of inclusive practices (Yazicioğlu and Sümer-Dodur, 2023) . The counsellors are able to help in parent education programs, enhance home-school cooperation and offer advice on how families can cope. The other major implication is that there is the necessity of culturally responsive and context-specific interventions, especially in developing nations. When it comes to an environment like Nigeria, socio-economic issues, cultural attitudes towards disability, and professional capacity are a variable that influences the practice of inclusion. Counselling services should thus be localized to the realities and be available and relevant. Muhammad and Haruna (2025) mention that stigma, lack of awareness, and insufficient professional expertise are the reasons that need to be considered in inclusive counselling services.

The rationale behind the study has been informed by the fact that there have always been gaps in the discourse and practice of inclusive education in the region. Despite the focus on inclusion in policies, there is still evidence that socio-cultural beliefs and institutional vulnerability still influence the understanding of disability and its measures in educational institutions (Okezie, 2021; Molokwu et al., 2023). Research on the development of human capital and delivery of services to the population also indicates that systemic inefficiencies and inability to build adequate capacity are barriers to the successful execution of inclusive policies (Chukwurah et al., 2020; Mbuba, 2022). In the context of reform debates in education, the inclusivity is more of both a desire and a hope with little practical implementation at the grassroots (Iwuno, 2025; Iwuno and Uzor, 2025). On the same note, expanded governance and institutional research underscores the perennial structural limitations like poor policy implementation and socio-political inequalities that influence the results of service delivery (Mbuba, 2018; Mbuba, 2021). Socio-cultural interpretations of difference and disability exacerbate these systemic issues and affect the attitude within communities and schools (Chukwu & Ume, 2020; Utoh-Ezeajugh and Ume, 2025).

Moreover, the field of communication and perception evidence indicates that the lack of understanding of social issues can frequently influence behaviour and institutional reactions and support the exclusionary practices (Agofure et al., 2019; Onwuka and Ume, 2022). The perception and treatment of vulnerable groups in society are also influenced by the power of media, ethics, and the institutional narratives (Okosa, 2022a; Okosa, 2022b). Although there is an increasing support of inclusive education, there is still little empirical evidence regarding the perceptions of teachers and parents regarding children with disabilities in South East Nigeria in terms of counselling and the psychosocial support system (Obikeze et al., 2022; Ilukwe and Ume, 2026). This research is thus inspired by the necessity to fill these gaps in knowledge and practice by exploring the role of perceptions on inclusion, and how counselling strategies can be enhanced to enhance equitable educational achievement of children with disabilities.

Research Questions

1. What are the attitudes of teachers and parents toward children with disabilities in South East Nigeria?
2. What beliefs do teachers and parents hold about children with disabilities in South East Nigeria?
3. What is the level of stigma and acceptance of children with disabilities among teachers and parents in South East Nigeria?
4. What are the perceptions of teachers and parents regarding the inclusion of children with disabilities in regular schools?
5. What are the perceived counselling needs for improving acceptance and inclusion of children with disabilities in South East Nigeria?

Hypotheses

1. There is no significant difference in the attitudes of teachers and parents toward children with disabilities in South East Nigeria.
2. There is no significant difference in the beliefs of teachers and parents about children with disabilities in South East Nigeria.
3. There is no significant difference in the level of stigma and acceptance of children with disabilities among teachers and parents in South East Nigeria.
4. There is no significant difference in the perceptions of teachers and parents regarding the inclusion of children with disabilities in regular schools in South East Nigeria.
5. There is no significant difference in the perceived counselling needs for improving acceptance and inclusion of children with disabilities in South East Nigeria between teachers and parents.

RESEARCH METHOD

A descriptive survey research design was used in the study. This design was deemed suitable since it allowed the researcher to gather and analyse data on the perception of the teachers and parents on the children with disabilities in South East Nigeria in a systematic way without influencing any of the variables. It enabled the study of the prevailing conditions in their natural state in the study area. The study area was South East Nigeria, which consists of Abia, Anambra, Ebonyi, Enugu and Imo States. The choice of this region was based on the fact that the number of school-age children in this region is very high and there are both urban and rural populations where problems of disability, inclusion and education are of great concern. The socio-cultural ideology of the area also offered an apt background to explore stigma, attitudes and inclusion practices.

The study population was teachers in the primary and secondary school, and parents of school-going children in South East Nigeria. It was assumed that the population was large and diverse, since it consists of people with various educational background, experiences, and exposure to children with disabilities. The study was conducted on a sample of 500 respondents (388 teachers and 112 parents). The sampling method was a proportionate stratified random sampling to make sure that the sample fairly represented both groups in the sampled states. The stratification of schools and communities was initially done and then random selection of respondents was done in each stratum so as to avoid bias and have equal representation.

A structured questionnaire that was used as the data collection tool was called T Teachers and Parents Perceptions of Children with Disabilities Questionnaire (TPPCDQ). The questionnaire contained the following sections A to F that included demographic information, attitudes, beliefs, stigma, and inclusion and counselling needs perceptions. It was created based on the 4-point Likert scale of Strongly Agree, Agree, Disagree and Strongly Disagree. Three Educational Psychology, Measurement and Evaluation, and Special Education experts were used to validate the instrument using both face and content validation. These professionals went through the items to check their clarity, relevance and conformity to the research objectives. They were modified and improved based on their suggestions and given the final administration.

Cronbach Alpha method was used to determine the reliability of the instrument. The instrument has been applied to a pilot group who were not in the study area and the responses were analyzed to establish internal consistency. A coefficient of reliability of 0.82 was achieved showing that the instrument was reliable and fit to collect the data. The questionnaire has been administered directly by using trained research assistants. The questionnaires were also sent to the teachers in schools and parents in the chosen communities. A fair amount of time was allowed to complete the questionnaires and all the questionnaires that were completed were retrieved to ensure high response rate. Descriptive and inferential statistics were used in analyzing the data collected. The research questions were answered using mean and standard deviation in addition to t-test of independent samples at 0.05 level of significance to test the null hypotheses. The data were computed and analyzed using the Statistical Package of Social Sciences (SPSS) to make it easy to calculate and analyse the data. Interpretation of results was done according to decision rules of acceptance and rejection of hypothesis.

RESULTS AND DISCUSSION

Result

Table 1: Demographic Characteristics of Respondents (N = 500)

Variable	Category	Frequency	Percent	Valid Percent	Cumulative Percent
Age	20–29	104	20.8	20.8	20.8
	30–39	116	23.2	23.2	44.0
	40–49	216	43.2	43.2	87.2
	50+	64	12.8	12.8	100.0
	Total	500	100.0	100.0	
Status	Teacher	388	77.6	77.6	77.6
	Parent	112	22.4	22.4	100.0
	Total	500	100.0	100.0	

Educational Qualification	Primary	62	12.4	12.4	12.4
	Secondary	77	15.4	15.4	27.8
	NCE	55	11.0	11.0	38.8
	Degree	306	61.2	61.2	100.0
	Total	500	100.0	100.0	
Gender	Male	317	63.4	63.4	63.4
	Female	183	36.6	36.6	100.0
	Total	500	100.0	100.0	

The data in Table 1 show that most respondents were aged 40–49 years (43.2%), followed by 30–39 years (23.2%), 20–29 years (20.8%), and 50 years and above (12.8%). In terms of status, teachers formed the majority (77.6%) compared to parents (22.4%). Regarding educational qualification, most respondents held a degree (61.2%), while others had secondary education (15.4%), primary education (12.4%), and NCE (11.0%). Males (63.4%) were more represented than females (36.6%).

Research Question 1: What are the attitudes of teachers and parents toward children with disabilities in South East Nigeria?

Table 2: Group Statistics on Attitudes of Teachers and Parents Toward Children with Disabilities in South East Nigeria

Status		N	Mean	Std. Deviation	Std. Error Mean
Children with disabilities can learn effectively in regular schools	Teacher	388	2.12	1.298	.066
	Parent	112	1.30	.879	.083
Teaching children with disabilities is too stressful	Teacher	388	3.46	.712	.036
	Parent	112	3.38	.774	.073
Children with disabilities should be given equal educational opportunities	Teacher	388	2.87	1.086	.055
	Parent	112	2.79	1.100	.104
I feel comfortable interacting with children with disabilities	Teacher	388	2.91	.965	.049
	Parent	112	2.98	.880	.083

Children with disabilities slow down classroom learning	Teacher	388	2.28	1.211	.061
	Parent	112	1.54	.985	.093

The data in Table 2 show that both teachers and parents expressed generally mixed attitudes toward children with disabilities. Teachers (M = 2.12) and parents (M = 1.30) differed on belief that such children can learn in regular schools. Both groups agreed that teaching them is stressful (Teacher M = 3.46; Parent M = 3.38). Perceptions on equal educational opportunities and classroom interaction were moderate. Attitudes indicate partial acceptance with notable differences between groups.

Research Question 2: What beliefs do teachers and parents hold about children with disabilities in South East Nigeria?

Table 3: Group Statistics on Attitudes of Teachers and Parents Toward Children with Disabilities in South East Nigeria

Status		N	Mean	Std. Deviation	Std. Error Mean
Disability is a result of supernatural or spiritual causes	Teacher	388	3.13	.973	.049
	Parent	112	3.04	.990	.094
Children with disabilities can become successful in life	Teacher	388	1.94	1.223	.062
	Parent	112	1.21	.716	.068
Disability is a punishment or curse	Teacher	388	3.15	.902	.046
	Parent	112	3.14	.889	.084
Children with disabilities are less intelligent than others	Teacher	388	3.29	1.029	.052
	Parent	112	3.33	.962	.091
With proper support, children with disabilities can achieve their full potential	Teacher	388	3.01	.840	.043
	Parent	112	2.96	.848	.080

The data in Table 3 show that both teachers and parents expressed generally mixed attitudes toward children with disabilities. Teachers (M = 2.12) and parents (M = 1.30) differed on belief that such children can learn in regular schools. Both groups agreed that teaching them is stressful (Teacher M = 3.46; Parent M = 3.38). Perceptions on equal educational opportunities and classroom interaction were moderate. Overall, attitudes indicate partial acceptance with notable differences between groups.

Research Question 3: What is the level of stigma of children with disabilities among teachers and parents in South East Nigeria?

Table 4: Group Statistics on Level of Stigma Toward Children with Disabilities Among Teachers and Parents in South East Nigeria

Status		N	Mean	Std. Deviation	Std. Error Mean
Families feel ashamed of having a child with disability	Teacher	388	3.36	.871	.044
	Parent	112	3.38	.830	.078
Children with disabilities are often excluded from social activities	Teacher	388	3.38	.874	.044
	Parent	112	3.38	.830	.078
I am willing to accept a child with disability in my home/classroom	Teacher	388	3.44	.844	.043
	Parent	112	3.45	.815	.077
Society discriminates against children with disabilities	Teacher	388	3.45	1.004	.051
	Parent	112	3.46	.985	.093
I would encourage others to support children with disabilities	Teacher	388	1.97	1.234	.063
	Parent	112	1.22	.732	.069

The data in Table 4 show a generally high level of perceived stigma toward children with disabilities among both teachers and parents. Both groups agreed that families feel ashamed (Teacher M = 3.36; Parent M = 3.38), and that exclusion and discrimination are common. However, willingness to accept children was relatively high. Teachers and parents also differed in willingness to encourage support, indicating mixed attitudes despite prevailing stigma.

Research Question 4: What are the perceptions of teachers and parents regarding the inclusion of children with disabilities in regular schools?

Table 5: Group Statistics on Perceptions of Teachers and Parents Regarding Inclusion of Children with Disabilities in Regular Schools in South East Nigeria

Status		N	Mean	Std. Deviation	Std. Error Mean
Children with disabilities should be included in regular schools	Teacher	388	3.10	.915	.046
	Parent	112	3.08	.892	.084
Teachers need special training to handle children with disabilities	Teacher	388	3.42	.761	.039
	Parent	112	3.44	.708	.067

Counselling services are necessary for parents of children with disabilities	Teacher	388	3.18	.807	.041
	Parent	112	3.22	.744	.070
Counsellors can help reduce stigma toward children with disabilities	Teacher	388	3.04	.845	.043
	Parent	112	3.12	.791	.075
Inclusive education benefits both disabled and non-disabled children	Teacher	388	2.28	1.211	.061
	Parent	112	1.54	.985	.093

The data in Table 5 show that both teachers and parents generally support inclusion of children with disabilities in regular schools (Teacher M = 3.10; Parent M = 3.08). There is strong agreement that teachers need special training and that counselling services are necessary. Respondents also acknowledged the role of counsellors in reducing stigma. However, views on the benefits of inclusive education showed some variation between both groups.

Hypothesis 1: There is no significant difference in the attitudes of teachers and parents toward children with disabilities in South East Nigeria.

Table 6: Independent Samples t-test on Differences in Attitudes of Teachers and Parents Toward Children with Disabilities in South East Nigeria

		Levene's Test for Equality of Variances		t-test for Equality of Means						
				F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference
										Lower
Attitudes Toward Children with Disabilities	Equal variances assumed	23.414	.000	4.682	498	.000	.32553	.06953	.18893	.46214
	Equal variances not assumed			5.427	232.286	.000	.32553	.05998	.20736	.44371

	assumed									
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The data in Table 6 show a significant difference in attitudes of teachers and parents toward children with disabilities. The result revealed a significant t-value ($t = 4.682$, $df = 498$, $p = .000$), indicating that the null hypothesis is rejected. Therefore, there is a significant difference in attitudes between teachers and parents in South East Nigeria, with a mean difference of 0.32553.

Hypothesis 2: There is no significant difference in the beliefs of teachers and parents about children with disabilities in South East Nigeria.

Table 7: Independent Samples t-test on Differences in Beliefs of Teachers and Parents About Children with Disabilities in South East Nigeria

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Beliefs About Children with Disabilities	Equal variances assumed	2.741	.098	2.198	498	.028	.16690	.07593	.01772	.31608
	Equal variances not assumed			2.366	202.189	.019	.16690	.07055	.02778	.30602

The data in Table 7 show a significant difference in the beliefs of teachers and parents about children with disabilities. The t-test result indicates a significant difference ($t = 2.198$, $df = 498$, $p = .028$), leading to rejection of the null hypothesis. This means that teachers and parents differ significantly in their beliefs about children with disabilities in South East Nigeria, with a mean difference of 0.16690.

Hypothesis 3: There is no significant difference in the level of stigma of children with disabilities among teachers and parents in South East Nigeria.

Table 8: Independent Samples t-test on Differences in Level of Stigma Toward Children with Disabilities Among Teachers and Parents in South East Nigeria

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Stigma	Equal variances assumed	1.847	.175	1.812	498	.071	.14411	.07955	-.01218	.30040
	Equal variances not assumed			1.964	204.735	.051	.14411	.07338	-.00057	.28879

The data in Table 8 show that there is no significant difference in the level of stigma toward children with disabilities between teachers and parents. The t-test result revealed $t(498) = 1.812, p = .071$, which is greater than 0.05. Therefore, the null hypothesis is accepted. This implies that both groups exhibit similar levels of stigma toward children with disabilities in South East Nigeria, with a small mean difference of 0.14411.

Hypothesis 4: There is no significant difference in the perceptions of teachers and parents regarding the inclusion of children with disabilities in regular schools in South East Nigeria.

Table 9: Independent Samples t-test on Differences in Perceptions of Teachers and Parents Regarding Inclusion of Children with Disabilities in Regular Schools in South East Nigeria

		Levene's Test for Equality of Variances		t-test for Equality of Means						
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		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Inclusion and Counselling Needs	Equal variances assumed	.974	.324	1.864	498	.063	.12274	.06586	-.00665	.25212
	Equal variances not assumed			1.974	196.760	.050	.12274	.06219	.00009	.24538

The data in Table 9 indicate that there is no significant difference in the perceptions of teachers and parents regarding inclusion of children with disabilities in regular schools. The t-test result shows $t(498) = 1.864$, $p = .063$, which is greater than 0.05. Therefore, the null hypothesis is accepted. This implies that both teachers and parents share similar perceptions regarding inclusion and counselling needs for children with disabilities in South East Nigeria, with a small mean difference of 0.12274.

Discussion

In the results, there was a similar but varying perception of children with disabilities by the teachers and parents, with both positive and negative perceptions being proved. With regard to attitudes, teachers and parents were partially accepting about inclusive education, but disagreed on the issue of whether children with disabilities can learn well in regular schools. Conversely, both groups concurred that teaching such children is a stressful experience, which makes sense given challenges reported in recent research where teachers have been reported to be less willing to include such children due to their workload and lack of support (Gunnthorstottir and Johannesson, 2014). In terms of beliefs, the two respondents were found to be influenced by culture misconceptions because the disability was attributed to supernatural forces, and lack of intelligence. This observation was in line with a related study by Biset and Fenta (2026) who indicated that disability perceptions in low-resource settings are still influenced by cultural beliefs. There was however a difference on the future potential of success where teachers and parents differed as compared to that of UNESCO (2023) which placed value on better optimism in inclusive environment in the world.

Regarding stigma, high levels of perceived stigma were reported by both groups of perceived stigma, such as shame and discrimination. Banks et al. (2017) reported similar chronic stigma in African communities regardless of inclusion policies, in a related study. Nevertheless, the readiness to accept children implies the gradual change in the attitudes.. Both

groups advocated inclusive schooling and training of teachers to be included. This result coincided with Sebti and Elder (2024), who highlighted the importance of the professional development as a determinant of the inclusion success. Counselling needs were also highly recognised and this is in line with Waqar et al. (2024), who emphasised counselling as the key to lessening exclusion and fostering equity. Inferential statistics indicated that there were significant differences in attitudes ($p < .05$) and beliefs ($p < .05$), compared to stigma ($p > .05$) and inclusion perceptions ($p > .05$), meaning that there were common challenges with varying influences of the worldview. Results indicate that although there is an increase in the acceptance of inclusion, ingrained beliefs still need specific counselling and educational treatment.

Counselling and Inclusive Practices implications

The research implication of both counselling and inclusive practices in the light of this research is that it can be used to advance the educational and psychosocial health of children with disability in South East Nigeria. The results indicate ambivalent attitudes, the stigmatization, and the heterogeneity of beliefs between teachers and parents that demonstrates the necessity of systematic counselling intervention. School and community counsellors need to be vigorous in dealing with negative beliefs like the belief that the disability is due to spiritual causes or the belief that children with disabilities are not as smart. These misconceptions lead to the exclusion and low expectations and as such need to be addressed with specific psychoeducation programmes. Ajuwon (2008) argues that poor preparation of teachers and lack of awareness about inclusive education are still key obstacles towards successful inclusion in Nigeria, which justifies the importance of awareness and capacity building facilitated by counselling.

In addition, school counsellors are advised to offer continuous guidance to teachers by training them on inclusive classroom management, emotional support skills and behaviour modification skills. This is in line with what Boyle et al, (2020) opined, that inclusive education implementation can only be successful when positive teacher attitudes are in place. Parents should also be provided with counselling services that assist them to deal with the emotional stress, guilt or stigma related to raising a child with disability. The findings of Bawuah et al (2025) reveal that in Nigeria, parental perceptions are usually influenced by cultural beliefs and lack of support systems that can be reformed by the counselling process through advocacy and education. The collaboration between counsellors, special educators and regular teachers should be reinforced to make inclusive practices in schools strong. Mediators such as counsellors may help in building empathy, preventing discrimination and facilitating peer acceptance among the students. They are also supposed to support peer support programmes that will lead to social integration of children with disabilities. Also, sensitisation efforts should be held in schools and communities to overcome stigma and support positive views on disability since stigma is one of the biggest impediments to inclusion (WHO, 2021).

Another implication of the study is that teacher training institutions ought to include counselling psychology and inclusive education courses in the curriculum. This will prepare the future teachers with the knowledge and skills to be able to serve diverse learners. In addition, the stakeholders in government and education must enhance the services provided by school counselling by equipping them with sufficient resources and staffing and policy support to guarantee sustainability in the practices of inclusion.

CONCLUSION

The research found that the perceptions of teachers and parents towards children with disabilities in South East Nigeria are more or less neutral considering that they have both positive and negative perceptions. Although it is evident that there is some degree of acceptance towards inclusion of children with disabilities in the normal schools there are still negative attitudes and misperceptions especially in the aspects of their learning capabilities and their social value. The results indicated that teachers and parents recognized the significance of inclusive education, special training of teachers, and family counselling services that revealed an increasing awareness of the support needs of children with disabilities. The research, however, also found out that there is still stigma, discrimination and cultural misunderstanding that still affect the perception and treatment of children with disabilities. There were major differences in the attitude and beliefs of teachers and parents indicating that the experiences and the role of both groups of people influence their perception in different ways. Conversely, both groups were found to be equally stigmatized and had common perceptions towards inclusion and counselling requirements.

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