



Parental Involvement in the Early Years of Rehabilitation for Children with Disabilities in the United Arab Emirates

Ashraf Moustafa

Assistant Professor

Special and Gifted Education Department

United Arab Emirates University (UAEU)

Introduction





Rehabilitation

Rehabilitation supports participation, independence, and overall well-being.



Early Intervention

Early intervention (0–8 years) is essential for children with disabilities. Barrier-free access begins with quality early-years education.



The Research Gap

Limited research has explored parental involvement specifically in the UAE context.



The Family Role

Family involvement is a crucial factor in successful rehabilitation, with parents playing a central role in supporting early learning and development.

Study Purpose & Strategic Aims

Exploring how parents support, engage with, and advocate for their children throughout the rehabilitation process.



1. Understand Involvement

Map parental participation in early-years education and explore how parents support rehabilitation and early learning.

2. Identify Barriers

Examine cultural, social, and systemic factors affecting involvement.

3. Inform Policy

Provide evidence to improve family-centred rehabilitation services and guide future interventions.

Defining the Scope of Early-Years Support



Early Intervention

Rehabilitation services provided in the earliest years of life.



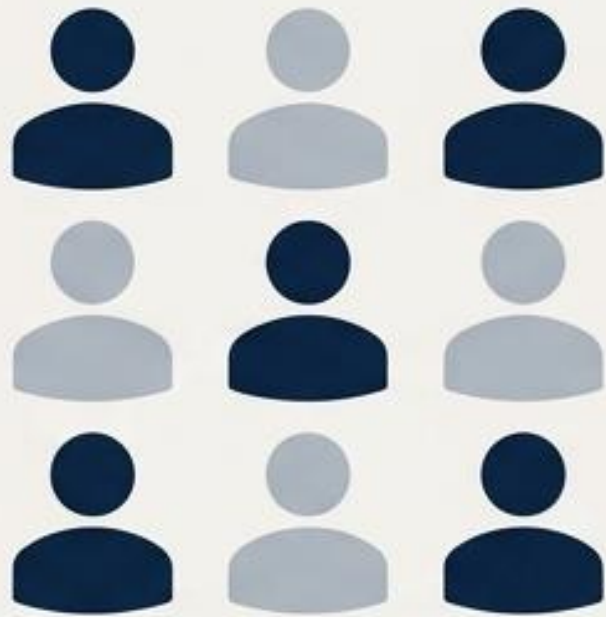
Early Childhood Education

Formal education services designed for children aged 0–8 years.

Unifying Principle: Barrier-free access begins with quality early-years education.

The UAE Context: Systemic & Cultural Dynamics

Multicultural Society



A large **expatriate** population brings **diverse cultural norms** that directly affect educational involvement.

Hierarchical Society

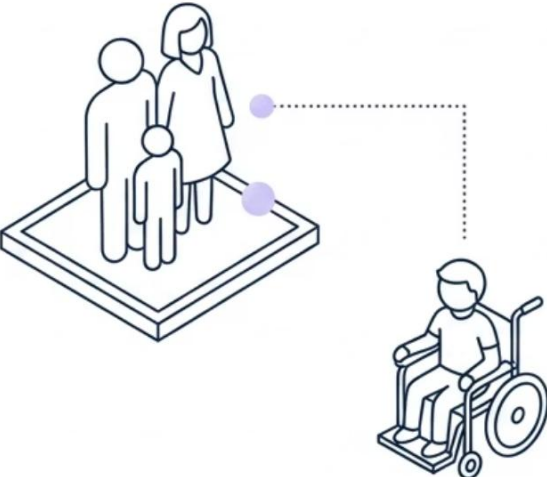


Social structures are shaped by **strong respect for authority**. Teachers and school leaders are **culturally revered**, causing parents to often **refrain** from active, challenging engagement.

The Result: While inclusion policies exist, systemic barriers make access to early intervention complex and non-straightforward.

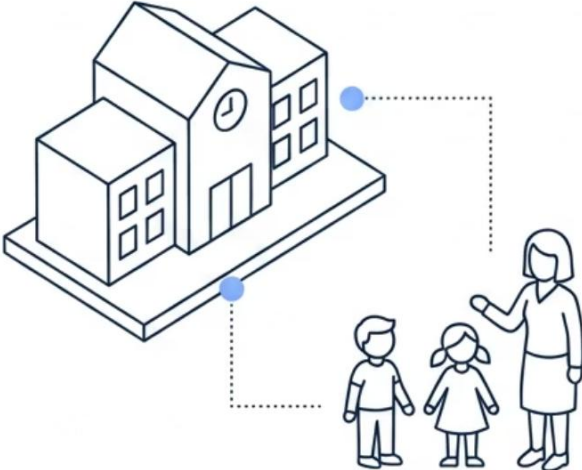
Research Gap in the UAE

Parental Experiences



Raising children with disabilities

School Services



For children with disabilities

Early years remain underexplored. Since early childhood is a critical developmental period

Previous studies in the UAE have mainly focused on two areas: parents' experiences of raising children with disabilities and the services provided by schools.

Theoretical Framework: Epstein's Model of Parental Involvement

Epstein's Model: Key Dimensions in Detail



Parenting: Providing basic needs and caregiving at home.



Home Support: Teaching daily living and learning skills.



Communication: Feedback and dialogue with specialists.



Decision-Making: Selecting services and programs for children.



Collaboration: Working with professionals and schools.



Volunteering: Participating in school events and activities.

Research Methodology and Study Design



Research Design: Qualitative research design utilizing one-on-one interviews and focus groups to capture in-depth, nuanced parental experiences.

Timeline: Interviews conducted January–June 2025; 30–65 minutes each, in Arabic and English.



18 parents of children aged 5–9 with varying disabilities.

13
Mother

5
Father

Snowball sampling utilized due to the sensitivity of the topic and the reliance on close-knit parent networks and self-help groups.

Thematic analysis, with findings meticulously organized according to Epstein's six involvement dimensions.

Key Findings

This section presents the primary outcomes of the study, categorized by the dimensions of Epstein's model.



Parenting: Support, Adaptation & Challenges

Daily Living Skills

Parents support children in developing developing skills independence —
— eating, walking, and daily routines.
routines.

Work-Life Balance

Raising children with disabilities has
has **not negatively impacted**
productivity, though it requires
patience and ongoing learning.

Unmet Needs

Participants expressed needs related to
related to their children's impairments
impairments and called for **community**
community services to complement
complement their parenting efforts.
efforts.

Home-Learning Support

All participants shared strategies to support children at home, home, focusing on **independent living skills**. Many engaged in **self-engaged** in **self-directed learning** to understand their children's children's needs. Support also came from siblings, partners, house house help, and therapists.

"I actively engage with him, using visual aids, hands-on activities, activities, and interactive tools to make learning both engaging engaging and effective." — Interviewee 9

Commitment

Teaching at home requires a requires a dedicated person person

Consistency

Daily activity plans enhance enhance development

Adaptation

Methods adjusted to each child's pace

Decision-Making: Choosing Schools



Almost all participants made decisions about their children's education. Key factors included:

Many wished for **better school options**, with some traveling long distances to access appropriate services.

→ Proximity to home

Their decisions are influenced by the proximity of the center or school.

→ Specialist consultation

Parents relied on specialist consultations and direct field experience when making decisions about their child's rehabilitation programs,

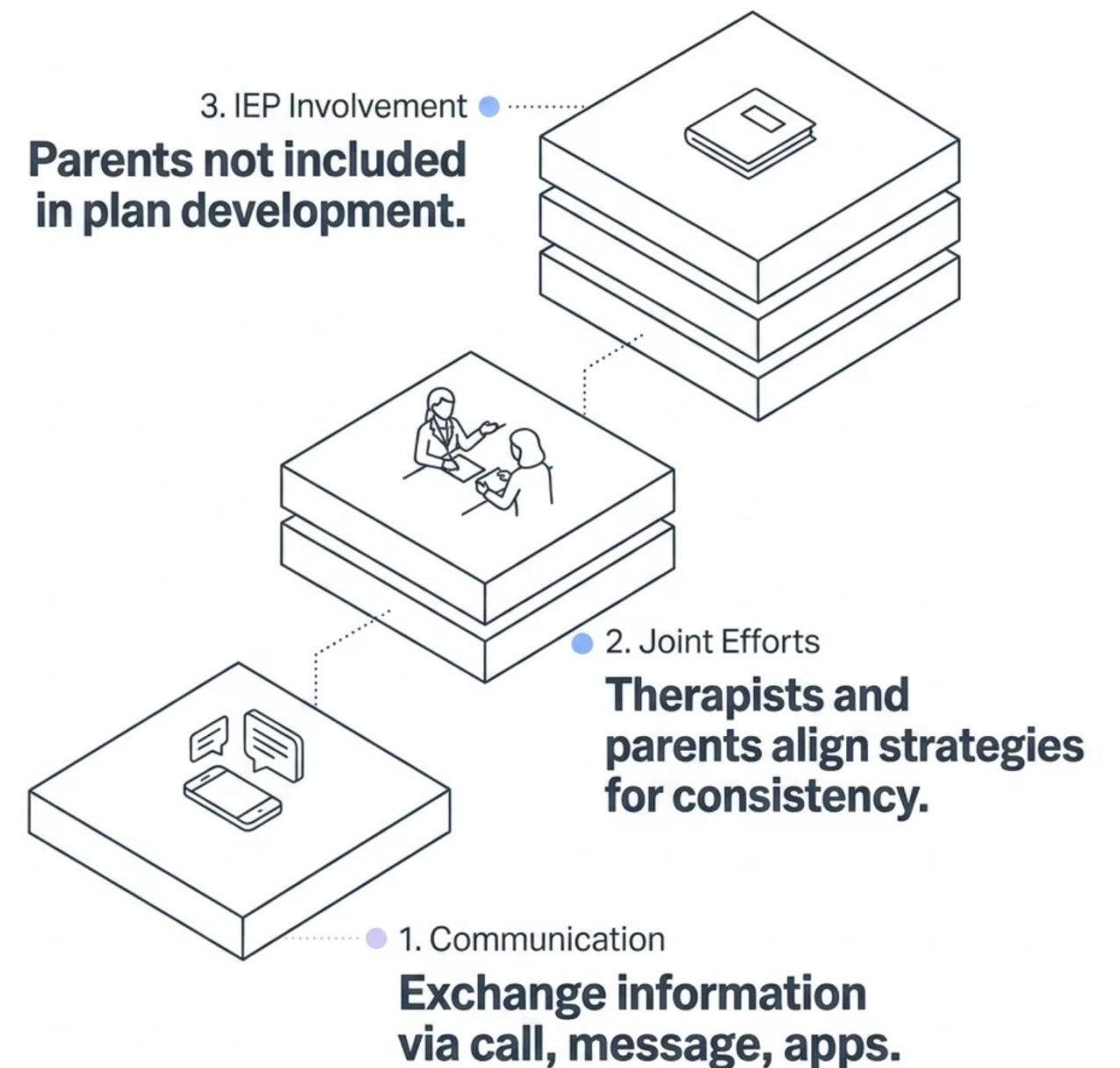
→ Limited Options & Long-Distance Travel

many families to travel long distances to access appropriate rehabilitation

Collaboration & Communication

Participants described interactions with specialists as "**very good**," "**positive**," and "**excellent**." Communication occurs via apps, WhatsApp, and meetings. However, many were **not consulted** in developing their child's Individualized Education Plan (IEP).

"When we work as a team, it creates consistency between home and school." — school." — Interviewee 3



Volunteering & Key Discussion Insights



Volunteering Opportunities: Only 2 participants were invited to volunteer; most were open to future opportunities if asked.



Patience as Policy: Policymakers could train parents in patience, a critical virtue for supporting children with disabilities.



Collaboration Gap: UAE cultural hierarchy may limit true collaboration; communication is often mistaken for partnership.



Parent Commitment: Parents' enthusiasm and self-directed learning represent an untapped resource for structured support programs.

Key Recommendations for Improvement



Conduct national consultations to design culturally appropriate solutions.



Develop training programs to support parents in patience, consistency, and structured routines.



Expand access to services, facilities, and specialists across the UAE.



Create structured volunteering opportunities in schools and rehabilitation centers.



Improve collaboration between parents and professionals.



References

- Ackah-Jnr, F. R., et al. (2022). Early Childhood Education Policy and Practice in Ghana. *Multidisciplinary Journal of Educational Research*, 12(3).
- Adewusia, O. E., et al. (2024). A Comparative Review of Early Childhood Education Policies in Nigeria and the UK. *Education, Sustainability & Society*, 7(1).
- Adugna, M. B., et al. (2025). Disability stigma and the pursuit of inclusion among children with physical disabilities in northwest Ethiopia. *Disability and Rehabilitation*, 47(3).
- Adugna, M., et al. (2024). Children with disabilities in Eastern Africa face significant barriers to access education: a scoping review. *International Journal of Inclusive Education*, 28(10).
- Alrahma, A. M., et al. (2024). Qualitative study investigating the health needs of school-aged children and adolescents in Dubai. *BMJ Open*, 14(9).

Contact Ashraf.m@uaeu.ac.ae for further discussion.

Thank You & Questions

Thank you for your attention. Please feel free to ask any questions.
Ashraf.m@uaeu.ac.ae, United Arab Emirate University, Collage of Education.

