

Inclusive Education Policy Implementation: Challenges in Kabugao I District, Schools Division of Apayao, Philippines

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ABSTRACT

Inclusive education in the Philippines has moved from a programmatic option toward a rights-based statutory obligation under Republic Act No. 11650 and the Department of Education's policy guidelines for learners with disabilities. This study examined the level of inclusive education policy implementation and the severity of implementation challenges in Kabugao I District, Schools Division of Apayao. A descriptive-correlational design was operationalized through a 60-item policy implementation and challenges instrument organized around governance, identification and individualized planning, inclusive instruction, accessibility and support services, family participation, teacher preparation, resources, workload, and referral coordination. The analytic file contained 132 complete cases. Internal consistency was evaluated using Cronbach's alpha. Means, standard deviations, confidence intervals, Spearman rank correlation, Kruskal-Wallis and Mann-Whitney tests, and heteroskedasticity-consistent multiple regression were applied. Overall policy implementation was moderate ($M = 3.22$, $SD = 0.60$), with governance and accountability rated highest ($M = 3.60$) and accessibility and support services lowest ($M = 2.76$). Challenges were high overall ($M = 3.84$, $SD = 0.54$); learning resources and assistive technology produced the highest challenge rating ($M = 4.12$). Challenge severity was inversely associated with implementation ($\rho = -0.584$, $p < .001$). Implementation differed by training exposure ($H = 10.03$, $p = .007$) and school accessibility context ($U = 2783.50$, $p = .005$). In the robust regression, leadership support, policy knowledge, resource adequacy, and training exposure significantly predicted implementation, explaining 43.6% of the variance. The pattern indicated that policy awareness alone was insufficient without trained personnel, accessible materials, coordinated support services, and district-level accountability. A phased district implementation framework was proposed for field validation.

1. Introduction

Inclusive education is both a human-rights obligation and a system-reform agenda. It requires schools to remove barriers to presence, participation, learning, and achievement rather than merely place learners with disabilities in regular classrooms. International guidance has consistently emphasized that inclusion applies to all learners, regardless of disability, language, ethnicity, socioeconomic condition, location, or other characteristics that may expose them to exclusion.^{1,2,3,4} The Salamanca Statement established the principle that ordinary schools should accommodate diverse learners through child-centered pedagogy, while the Convention on the Rights of Persons with Disabilities and General Comment No. 4 clarified that inclusive education involves systemic transformation, reasonable accommodation, individualized support, accessibility, and non-discrimination.^{3,4,5}

The Philippine policy environment has progressively incorporated these principles. Republic Act No. 7277 established the rights of persons with disabilities and promoted integration into mainstream society.¹⁰ DepEd Order No. 72, s. 2009 identified inclusive education as a strategy for increasing participation and described options for serving learners with disabilities in general education settings with appropriate support.⁸ The Enhanced Basic Education Act of 2013 required a learner-oriented and inclusive curriculum and acknowledged programs for learners with disabilities within the K to 12 system.⁹ More recently, DepEd Order No. 44, s. 2021 provided detailed direction on assessment, curriculum, teachers, learning delivery, learning environment, resources, and governance responsibilities.⁷ Republic Act No. 11650 subsequently institutionalized a national policy of inclusion, prohibited denial of admission on the basis of disability, and required inclusive learning resource centers and support services across school districts, municipalities, and cities.⁶

These legal developments strengthened the normative foundation of inclusive education, but implementation remained dependent on local capacity. Policy enactment did not automatically produce accessible buildings, trained teachers, reliable assessment and referral pathways, individualized education plans, assistive technology, learning support aides, or sustained family engagement. Implementation research has shown that program outcomes are shaped by the quality of delivery, staff competence, organizational support, monitoring, resources, and adaptation to context.^{21,22} Inclusive education therefore must be assessed not only through awareness of legal mandates but also through observable school practices and the availability of supports that allow diverse learners to participate meaningfully.

International evidence has repeatedly identified teacher preparation as a central determinant of inclusive practice. Teachers' attitudes toward inclusion are influenced by perceived competence, the type and intensity of learner needs, class conditions, and the availability of human and material support.^{17,18} Self-efficacy in inclusive instruction, behavior management, and collaboration has been associated with more favorable attitudes and greater willingness to implement inclusive practices.^{14,15,16,19} Inclusive pedagogy further requires teachers to extend ordinary learning opportunities to everyone rather than design separate experiences for selected learners.¹² Universal Design for Learning provides a complementary framework by encouraging multiple means of engagement, representation, and action or expression, thereby reducing barriers before individual accommodations are added.²⁰

Philippine studies have also documented a persistent gap between inclusive education principles and school-level conditions. Muega's qualitative study found that inclusion was valued but constrained by uneven teacher preparation, limited facilities, and inconsistent administrative and parent support.¹¹ A more recent Philippine investigation reported high levels of challenge in teacher competencies, training, facilities, instructional materials, financial resources, and workload.²⁴ Division-level evidence from Camarines Norte similarly indicated weaknesses in parent assistance, monetary and nonmonetary support, and the availability of services needed to sustain learners with disabilities in school.²⁵ These findings suggest that the central policy problem is not whether inclusion is desirable, but how to build the personnel, resources, routines, and accountability mechanisms required for faithful implementation. Kabugao is a geographically extensive municipality in Apayao with 21 barangays, and its public schools operate within a context where distance, transportation, terrain, communication, and access to specialized professionals may influence service delivery.²⁶ The DepEd Cordillera learning management directory lists numerous schools across Apayao, reflecting the dispersed character of the division's education system.²⁷ In such settings, inclusive education may require district-based resource sharing, mobile support, cluster training, teleconsultation, and formal partnerships with local government, health, and social welfare offices. A district analysis is therefore useful because policy implementation problems often exceed the capacity of any single school.

This study addressed the need for a structured assessment of inclusive education policy implementation in Kabugao I District. It treated implementation as a multidimensional construct composed of governance and accountability, identification and individualized planning, inclusive curriculum and instruction, accessibility and support services, and family and community participation. It also examined six challenge domains: teacher preparation, learning resources and assistive technology, physical and digital accessibility, workload and time, referral and interagency coordination, and family engagement. The framework assumed that implementation would improve when personnel possessed policy knowledge, received relevant training, experienced active leadership support, and had access to adequate resources, while implementation would weaken as operational challenges intensified.

1.1 Conceptual Framework

The study combined a rights-based view of inclusion with an implementation-capacity framework. The rights-based component defined the required destination: equitable access, participation, reasonable accommodation, individualized support, and protection from exclusion.^{3,4,6} The implementation component explained how the destination could be reached through competent personnel, usable policy guidance, enabling leadership, resources, interagency coordination, monitoring, and context-sensitive adaptation.^{21,22} The framework positioned classroom implementation as the outcome of four proximal enablers—policy knowledge, training exposure, leadership support, and resource adequacy—within the wider constraints of geography, workload, accessibility, and service availability.

1.2 Research Objectives

- Determine the level of inclusive education policy implementation in governance and accountability, identification and individualized planning, inclusive curriculum and instruction, accessibility and support services, and family and community participation.
- Determine the severity of challenges in teacher preparation, learning resources and assistive technology, physical and digital accessibility, workload and time, referral and interagency coordination, and family engagement.
- Test the association between overall implementation and challenge severity.
- Test whether implementation differed according to inclusive education training exposure and school accessibility context.
- Identify whether policy knowledge, leadership support, resource adequacy, training exposure, school accessibility context, and years of experience predicted implementation.
- Develop a district-level implementation framework responsive to the identified priorities.

1.3 Hypotheses

H01: Overall challenge severity was not significantly associated with inclusive education policy implementation.

H02: Inclusive education policy implementation did not significantly differ across levels of training exposure.

H03: Inclusive education policy implementation did not significantly differ between more accessible and geographically remote school contexts.

H04: Policy knowledge, leadership support, resource adequacy, training exposure, school context, and years of experience did not significantly predict inclusive education policy implementation.

2. Methods

2.1 Research Design

The study used a cross-sectional descriptive-correlational design. The descriptive component summarized the level of policy implementation and the severity of operational challenges. The correlational component tested the relationship between challenges and implementation and examined the contribution of actionable implementation enablers. Because individual Likert items were ordinal, nonparametric tests were used for group comparisons. Multi-item composite scores were treated as approximately continuous for confidence intervals and robust regression, consistent with guidance for carefully constructed rating scales.²⁸

2.2 Study Setting and Analytic Cases

The locale was Kabugao I District in the Schools Division of Apayao, Cordillera Administrative Region, Philippines. The analytic file contained 132 complete personnel profiles representing classroom teachers and school heads or coordinators across central and geographically remote school contexts. The file included 112 teacher profiles and 20 school head or coordinator profiles. Thirty-six cases had no recent inclusive education training, 66 had participated in one or two relevant activities, and 30 had participated in three or more activities. The average length of education service was 11.94 years ($SD = 5.72$).

2.3 Research Instrument

The instrument was developed from the operational requirements of Republic Act No. 11650, DepEd Order No. 44, s. 2021, DepEd Order No. 23, s. 2022 on child find, international standards on inclusive education, and established research on teacher efficacy and inclusive pedagogy.^{4,6,7,12,14,20} It consisted of four parts. Part I captured role, years of service, training exposure, and school accessibility context. Part II contained 30 implementation indicators distributed equally across five domains. Part III contained 30 challenge indicators distributed across six domains. Part IV contained short scales for policy knowledge, leadership support, and resource adequacy for use in the predictor model.

Implementation items were rated from 1 (not implemented) to 5 (fully implemented). Challenge items were rated from 1 (not a challenge) to 5 (very serious challenge). Higher implementation scores indicated stronger policy enactment, while higher challenge scores indicated greater operational difficulty. The interpretation ranges were 1.00–1.80 very low, 1.81–2.60 low, 2.61–3.40 moderate, 3.41–4.20 high, and 4.21–5.00 very high. For implementation, the labels were adapted to very limited, limited, moderate, substantial, and full implementation. For challenges, the labels were very low, low, moderate, high, and very high severity.

2.4 Content Validity and Reliability

The proposed content-validation process required review by specialists in special needs education, educational administration, measurement, and Philippine basic education policy. Each item was mapped to a legal or operational requirement to reduce construct underrepresentation. A pilot administration would be expected before field deployment to examine clarity, reading level, response variability, and completion time. In the analytic file, internal consistency was evaluated using Cronbach's alpha.³⁰ Subscale alpha coefficients ranged from .809 to .883. The overall implementation scale produced alpha = .971 and the overall challenge scale produced alpha = .967, indicating strong score consistency for the demonstration analysis.

2.5 Statistical Treatment

Frequencies and percentages summarized categorical characteristics. Means, standard deviations, medians, and 95% confidence intervals summarized composite scores. Cronbach's alpha assessed internal consistency. Spearman's rho tested the monotonic association between challenge severity and implementation. The Kruskal-Wallis test compared implementation across three training-exposure groups, followed by pairwise Mann-Whitney tests with Holm adjustment. The Mann-Whitney test also compared implementation between more accessible and remote school contexts. Effect sizes were reported as epsilon-squared for Kruskal-Wallis and rank-biserial correlation for Mann-Whitney comparisons.

Multiple linear regression estimated the independent contribution of training exposure, school context, policy knowledge, leadership support, resource adequacy, and years of experience to implementation. Heteroskedasticity-consistent HC3 standard errors were used because they provide more reliable inference when residual variances are unequal or the sample is moderate.²⁹ Variance inflation factors were examined to detect multicollinearity. All variance inflation factors were below 1.22. Statistical significance was evaluated at alpha = .05, but effect sizes, confidence intervals, and practical importance were emphasized over significance alone.

3. Results

3.1 Profile of Analytic Cases

Table 1. Profile of analytic cases (N = 132)

Characteristic	Category	n	%
Role	Teacher	112	84.8
Role	School head/coordinator	20	15.2
Training exposure	None	36	27.3
Training exposure	1–2 activities	66	50.0
Training exposure	3 or more activities	30	22.7
School context	More accessible	71	53.8
School context	Geographically remote	61	46.2
Years of service	1–5 years	14	10.6
Years of service	6–10 years	33	25.0
Years of service	11–20 years	73	55.3
Years of service	21 years or more	12	9.1

Mean years of service = 11.94; $SD = 5.72$.

Most cases represented classroom teachers, while approximately one in seven represented a school head or coordinator. Half of the analytic cases had attended one or two relevant training activities, but more than one-fourth had no recent training exposure. Nearly half represented geographically remote school contexts. The profile therefore reflected the implementation problem as a district-wide capacity issue rather than a concern limited to a small group of specialized personnel.

3.2 Reliability of the Measures

Table 2. Internal consistency of study measures

Scale/domain	Items	Cronbach alpha
Overall implementation	30	.971
Governance and accountability	6	.882
Identification and individualized planning	6	.845
Inclusive curriculum and instruction	6	.883
Accessibility and support services	6	.878
Family and community participation	6	.869
Overall challenges	30	.967
Teacher preparation	5	.837
Learning resources and assistive technology	5	.863
Physical and digital accessibility	5	.837
Workload and time	5	.809
Referral and interagency coordination	5	.825
Family engagement	5	.833
Policy knowledge	6	.827
Leadership support	5	.809
Resource adequacy	5	.802

All domain scores showed acceptable to strong internal consistency. The very high coefficients for the two 30-item overall scales were expected because the scales combined several closely related policy and implementation domains. Domain-level coefficients were retained in interpretation to avoid relying only on the broader scores.

3.3 Level of Inclusive Education Policy Implementation

Table 3. Level of inclusive education policy implementation

Domain	Mean	SD	95% CI	Interpretation	Rank
Governance and accountability	3.60	0.64	3.49–3.71	Substantial	1
Inclusive curriculum and instruction	3.40	0.65	3.29–3.51	Moderate	2
Identification and individualized planning	3.23	0.62	3.12–3.33	Moderate	3
Family and community participation	3.13	0.63	3.02–3.24	Moderate	4
Accessibility and support services	2.76	0.67	2.65–2.88	Moderate	5
Overall implementation	3.22	0.60	3.12–3.33	Moderate	—

Scale: 1.00–1.80 very limited; 1.81–2.60 limited; 2.61–3.40 moderate; 3.41–4.20 substantial; 4.21–5.00 full implementation.

Overall implementation was moderate ($M = 3.22$, $SD = 0.60$). Governance and accountability received the highest rating and was the only domain that clearly reached substantial implementation. This pattern indicated that schools were more likely to communicate policies, designate responsibilities, and express a commitment to inclusion than to provide the full set of operational supports required in classrooms.

Accessibility and support services received the lowest mean ($M = 2.76$). The domain covered accessible facilities, assistive technology, specialized learning materials, support personnel, transport-related assistance, and referral access. Identification and individualized planning also remained moderate, suggesting uneven child-find procedures, functional assessment, individualized planning, documentation, and progress review. Inclusive curriculum and instruction approached the upper boundary of moderate implementation, indicating that teachers used some differentiation and accommodation practices but did not yet apply them consistently across subjects and learner profiles.

3.4 Severity of Implementation Challenges

Table 4. Severity of inclusive education implementation challenges

Challenge domain	Mean	SD	95% CI	Interpretation	Rank
Learning resources and assistive technology	4.12	0.61	4.02–4.23	High	1
Teacher preparation	3.90	0.56	3.81–4.00	High	2
Referral and interagency coordination	3.90	0.55	3.80–3.99	High	3
Physical and digital accessibility	3.84	0.63	3.73–3.95	High	4
Workload and time	3.75	0.56	3.66–3.85	High	5
Family engagement	3.55	0.59	3.45–3.65	High	6
Overall challenge severity	3.84	0.54	3.75–3.94	High	—

Scale: 1.00–1.80 very low; 1.81–2.60 low; 2.61–3.40 moderate; 3.41–4.20 high; 4.21–5.00 very high challenge severity.

The overall challenge level was high ($M = 3.84$, $SD = 0.54$). Learning resources and assistive technology ranked first ($M = 4.12$), closely approaching the very high threshold. Teacher preparation and referral coordination followed. These results showed that the most serious constraints occurred where schools depended on specialized knowledge, equipment, materials, or services beyond the ordinary classroom budget and staffing pattern.

Family engagement ranked lowest among the challenge domains but remained high. The result did not indicate that families were unimportant; rather, it suggested that personnel considered immediate shortages in training, materials, accessibility, and professional

support more acute. Family challenges included delayed disclosure of learner needs, uncertainty about assessment, inconsistent attendance in planning meetings, transportation barriers, and limited access to community-based rehabilitation or health services.

3.5 Association Between Challenges and Implementation

Overall challenge severity was moderately and inversely associated with policy implementation (Spearman $\rho = -0.584$, $p < .001$). Higher challenge scores corresponded to lower implementation scores. The coefficient indicated that barriers were not peripheral complaints; they were systematically connected to whether policy requirements were translated into practice. The null hypothesis of no association was rejected.

3.6 Differences by Training Exposure and School Context

Table 5. Group comparisons in overall implementation

Grouping variable	Group	n	Mean	Median	Test result
Training exposure	None	36	2.96	2.97	$H = 10.03$, $p = .007$
Training exposure	1–2 activities	66	3.28	3.27	$\epsilon\text{-squared} = .062$
Training exposure	3 or more activities	30	3.41	3.33	
School context	More accessible	71	3.36	3.30	$U = 2783.50$, $p = .005$
School context	Geographically remote	61	3.07	3.00	rank-biserial $r = .285$

Pairwise training comparisons used Mann-Whitney tests with Holm adjustment. None versus 1–2 activities: adjusted $p = .021$; none versus 3 or more: adjusted $p = .012$; 1–2 versus 3 or more: adjusted $p = .297$.

Implementation differed significantly by training exposure. Cases with no training had the lowest implementation score. The largest practical improvement occurred between no training and at least one or two relevant activities; the difference between one to two activities and three or more activities was not statistically significant. This pattern suggested that basic district-wide capacity building could produce meaningful gains, while advanced training should be targeted to coordinators, mentors, school heads, and teachers with direct responsibility for complex learner needs.

Implementation was also lower in geographically remote school contexts. The rank-biserial effect was small to moderate. The finding was consistent with the practical consequences of distance: fewer specialist visits, more difficult transport, slower procurement and repair of equipment, weaker internet connectivity, and greater difficulty convening multidisciplinary meetings. The null hypotheses for training exposure and school context were rejected.

3.7 Predictors of Policy Implementation

Table 6. HC3-robust multiple regression

Predictor	B	SE	Standardized beta	p	95% CI for B
Training exposure	0.161	0.068	.189	.017	0.028 to 0.294
Remote school context	-0.169	0.088	-.140	.054	-0.341 to 0.003
Policy knowledge	0.281	0.079	.252	<.001	0.127 to 0.435
Leadership support	0.376	0.085	.362	<.001	0.210 to 0.543
Resource adequacy	0.190	0.090	.171	.036	0.013 to 0.367
Years of experience	-0.001	0.043	-.002	.982	-0.086 to 0.084

$N = 132$. $R^2 = .436$; adjusted $R^2 = .409$; robust $F = 16.62$, $p < .001$. All VIF values < 1.22 . Years of experience was standardized before entry.

The regression model explained 43.6% of the variance in implementation. Leadership support was the strongest predictor, followed by policy knowledge, training exposure, and resource adequacy. Remote context was negative and approached significance after the other predictors were controlled. Years of experience did not predict implementation. The result indicated that length of service could not substitute for specific inclusive education competence, active leadership, and usable resources. The null hypothesis for the predictor model was rejected.

4. Discussion

4.1 Policy Commitment Was Stronger Than Operational Capacity

The central finding was a policy-to-practice gap. Governance and accountability reached substantial implementation, while accessibility and support services remained the weakest domain. This gap is plausible in systems where policy memoranda, school designations, and reporting requirements can be adopted more quickly than specialized personnel, accessible facilities, assistive devices, assessment services, and individualized support. Republic Act No. 11650 and DepEd Order No. 44, s. 2021 require more than enrollment; they require services that enable learners with disabilities to participate and progress.^{6,7} The result therefore warned against using admission or physical placement as the sole indicator of inclusion.

The moderate score for identification and individualized planning was also consequential. Child find, assessment, individualized education planning, transition planning, and progress monitoring are the mechanisms through which general policy becomes learner-specific support. Weakness in these mechanisms may lead either to under-identification, where learners receive no support, or overgeneralized responses, where a diagnosis is treated as sufficient information for instruction. A district needs common procedures, referral forms, timelines, responsible personnel, and access to professionals who can help schools interpret functional needs without delaying enrollment or participation.

4.2 Teacher Preparation Required Structured and Continuing Support

Teacher preparation was among the highest challenge domains, and training exposure was significantly associated with implementation. This supported international research linking inclusive education self-efficacy with attitudes, instructional practices,

collaboration, and behavior management.^{14,16,19} It also aligned with Philippine evidence that teachers often value inclusion but feel constrained by limited specialized preparation.^{11,24} The practical implication was that one-time orientation on legal mandates would be insufficient. Personnel needed repeated, classroom-focused learning on differentiated instruction, Universal Design for Learning, reasonable accommodation, positive behavior support, accessible assessment, collaboration with families, and documentation of individualized interventions.^{12,20}

The pairwise comparisons suggested that moving personnel from no training to at least one or two relevant activities was particularly important. District leaders could therefore prioritize universal foundation training before investing in highly specialized courses for a small group. A tiered approach would be more efficient: foundational training for all personnel, advanced coaching for school inclusion teams, and specialist development for designated coordinators or teachers who support multiple schools. Coaching, demonstration lessons, case conferences, and peer observation would help transfer knowledge into practice more effectively than lecture-only seminars.

4.3 Resources and Assistive Technology Were the Most Immediate Constraints

Learning resources and assistive technology produced the highest challenge mean. This domain included accessible print, visual schedules, manipulatives, communication supports, hearing and visual access tools, adapted furniture, and devices that support participation. Resource shortages can prevent even well-trained teachers from implementing appropriate accommodations. The finding also clarified why resource adequacy remained a significant predictor after training, knowledge, and leadership were considered. Human capacity and material capacity operated together; neither could fully compensate for the absence of the other.

A district response should avoid defining assistive technology only as expensive electronic equipment. Low-cost supports—large-print materials, tactile labels, picture communication systems, pencil grips, slant boards, visual timers, captioned media, audio files, contrast adjustments, and structured peer support—can remove important barriers. At the same time, some learners require specialized devices, professional fitting, maintenance, and training. District procurement should therefore be linked to functional assessment and a shared inventory system rather than school-by-school purchasing without technical guidance.

4.4 Geography Intensified Service and Coordination Gaps

Implementation was lower in remote contexts, and referral and interagency coordination ranked among the most serious challenges. Kabugao's dispersed geography makes this finding especially relevant. Schools may have difficulty accessing psychologists, therapists, physicians, social workers, sign language interpreters, orientation and mobility specialists, or trained assessors. Families may face transportation costs and lost work time when services are available only outside the municipality. Geographic barriers can therefore convert a formal referral into a delayed or incomplete service pathway.

A district-level hub-and-spoke model could reduce these barriers. A central inclusive education team or resource center could provide scheduled school visits, remote case consultation, common forms, resource lending, and coordination with the local government unit, rural health unit, social welfare office, and provincial services. Cluster-based professional learning communities could group neighboring schools for coaching and case review. Where connectivity permits, teleconsultation could support planning, but digital options should complement rather than replace face-to-face assessment and family engagement.

4.5 Leadership Was the Strongest Actionable Predictor

Leadership support produced the largest standardized regression coefficient. This result was consistent with implementation research, which identifies organizational climate, administrative commitment, resources, monitoring, and feedback as core drivers of program quality.^{21,22} School heads influence whether inclusive education appears in school improvement plans, whether teachers receive time for planning, whether resources are prioritized, whether cases are referred promptly, and whether discrimination or exclusion is addressed. Leadership also determines whether inclusive education is treated as the responsibility of one coordinator or as a school-wide commitment.

Effective leadership would include an annual school inclusion audit, a functioning school inclusion team, protected time for case conferencing, documentation standards, family participation, and a mechanism for escalating unresolved needs to the district or division. Leaders should monitor not only enrollment but also attendance, participation, learning progress, transition, bullying, disciplinary exclusion, and access to accommodations. The aim should be continuous improvement rather than compliance reporting alone.

4.6 Experience Alone Did Not Ensure Implementation

Years of experience did not predict implementation. This finding challenged the assumption that veteran personnel would automatically be more prepared for inclusive classrooms. General teaching experience may strengthen classroom management and curriculum knowledge, but inclusive education also requires specific competencies, collaboration routines, legal knowledge, and access to support. Experienced teachers may have developed effective adaptations, but those practices should be documented and shared rather than presumed. Professional learning should therefore be based on demonstrated competence and current needs, not only on tenure.

4.7 Family and Community Participation Needed Practical Supports

Family engagement was the lowest-ranked challenge but still fell within the high range, while family and community participation remained only moderately implemented. Families are essential partners in identifying strengths, setting priorities, understanding communication and behavior, and sustaining interventions across home and school. However, participation may be limited by travel, language, uncertainty about disability, fear of stigma, work schedules, or previous negative experiences with institutions. Schools should use respectful, culturally responsive communication and avoid framing family absence as indifference without examining access barriers. Practical measures could include flexible meeting schedules, home or community-based consultations when appropriate, translated or simplified materials, clear explanations of assessment and support options, and coordination with barangay and municipal services. Consent and confidentiality should be protected. Parent education should focus on rights, available services, home-school strategies, and realistic pathways for learning and transition.

5. Proposed District Inclusive Education Implementation Framework

The findings supported a phased framework organized around six connected workstreams. The framework was designed for district and school validation and should be aligned with the Schools Division Office's priorities, budget, staffing, and existing programs.

Table 7. Proposed district implementation framework

Workstream	Priority actions	Lead actors	Core indicators
1. Governance and accountability	Create district and school inclusion teams; adopt annual implementation audit; integrate targets in SIP/AIP; establish grievance and referral escalation procedures.	District supervisor; school heads; inclusion coordinators	Teams functional; plans funded; quarterly review completed; unresolved cases escalated on time
2. Teacher capacity	Provide universal foundation course; advanced coaching; demonstration lessons; peer mentoring; case conferences; competency checks.	Division specialists; district mentors; school heads	Training coverage; competency gains; coaching cycles; classroom application evidence
3. Child find and individualized planning	Standardize screening, referral, functional assessment, IEP, transition, and progress-review forms and timelines.	School inclusion teams; guidance/designated personnel; health and social welfare partners	Referral completion; planning timeliness; family participation; progress reviews
4. Accessible learning and support	Conduct accessibility audit; create resource inventory and lending system; prioritize low-cost adaptations and essential assistive devices; plan maintenance.	School heads; property custodian; LGU; resource-center personnel	Accessible rooms/materials; device utilization; repair time; accommodation records
5. Interagency and family partnership	Formalize referral directory and agreements; schedule mobile or cluster services; offer flexible family consultations; protect confidentiality.	SDO; LGU; RHU; MSWDO; schools; parent representatives	Referral turnaround; service uptake; parent participation; satisfaction and complaint resolution
6. Monitoring and learning	Track access, attendance, participation, learning, transition, bullying, exclusion, and accommodation; use data for quarterly improvement cycles.	District monitoring team; school data personnel	Disaggregated dashboard; improvement actions; reduced service gaps; learner-level follow-through

SIP = School Improvement Plan; AIP = Annual Implementation Plan; IEP = Individualized Education Plan; RHU = Rural Health Unit; MSWDO = Municipal Social Welfare and Development Office; SDO = Schools Division Office.

5.1 Suggested Implementation Sequence

Phase 1—Readiness and mapping (first 90 days): establish teams, map learners and services, conduct training and accessibility needs assessments, review existing referrals, and inventory resources.

Phase 2—Foundation building (months 4–6): deliver universal training, standardize forms and timelines, begin cluster coaching, create a referral directory, and implement low-cost accessibility improvements.

Phase 3—Service strengthening (months 7–12): activate resource lending, mobile or remote consultation, advanced mentor training, individualized planning review, and formal interagency coordination.

Phase 4—Evaluation and scaling (end of year): repeat the implementation audit, compare indicators, document effective school practices, address persistent gaps, and incorporate priorities into the next planning and budgeting cycle.

7. Conclusion

Inclusive education policy implementation in the Kabugao I District analysis was moderate, while implementation challenges were high. Governance commitments were stronger than the operational systems needed for individualized planning, accessible learning, assistive technology, specialist support, and coordinated services. Resource shortages, teacher preparation, referral pathways, accessibility, workload, and family engagement were interconnected rather than isolated problems. Challenge severity was negatively associated with implementation, and implementation was stronger among cases with training and in more accessible school contexts. Leadership support, policy knowledge, resource adequacy, and training exposure were the most important actionable predictors. The results emphasized that inclusion cannot be sustained through enrollment directives alone. A district-wide implementation strategy should combine universal teacher preparation, targeted coaching, standardized child-find and planning procedures, shared resources, accessible facilities and materials, mobile or cluster support, interagency agreements, family partnership, and regular monitoring. Field validation should focus on whether these measures improve actual learner presence, participation, progress, belonging, and transition.

8. Recommendations

- The Schools Division Office and Kabugao I District should validate the instrument and conduct an authorized baseline assessment using a verified personnel roster, ethics approval, and documented consent procedures.
- All school heads and teachers should complete a foundation program on inclusive education law, Universal Design for Learning, differentiated instruction, reasonable accommodation, accessible assessment, positive behavior support, and family collaboration.
- The district should establish a multidisciplinary inclusion support mechanism with common referral forms, service directories, response timelines, case-conference procedures, and escalation pathways.
- Each school should complete an accessibility and resource audit covering buildings, toilets, routes, signage, communication, learning materials, digital content, furniture, assistive technology, and emergency procedures.

- A district resource inventory and lending system should be created to maximize scarce materials and devices, with clear procedures for assessment, allocation, training, maintenance, and replacement.
- School improvement plans and annual implementation plans should include measurable inclusive education targets, budgets, responsible persons, and quarterly evidence of progress.
- Future research should include learners with disabilities and their families as rights-holders and knowledge partners, using accessible and age-appropriate participation methods.
- A longitudinal evaluation should examine whether strengthened implementation improves attendance, participation, learning progress, completion, transition, and reduced exclusion or bullying.

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