

Psychological Well-Being Among Students with Disabilities in Inclusive Schools

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ABSTRACT:

This narrative review explores PWB among students with disabilities in inclusive schools, emphasizing educational environments to protect or undermine mental health and social functioning. Drawing on recent literature, the review first clarifies key concepts and theoretical frameworks related to PWB, inclusion & diverse disability types. It then outlines general patterns of vulnerability, including heightened risks of internalizing symptoms, low self-esteem, and social isolation, while highlighting protective factors such as supportive relationships, positive school climate, and meaningful participation. The profiles for PWB are examined across disability categories (intellectual and developmental disabilities, autism spectrum disorder, specific learning disabilities, sensory and physical impairments, and mixed disabilities), showing that school experiences and access to accommodations are critical determinants. The review further discusses school practices and interventions universal, targeted, and individualized that support well-being, along with assessment issues around measuring school-based PWB in students with disabilities. Finally, it identifies key gaps in knowledge, particularly the need for longitudinal evidence, disability-specific interventions, culturally adapted measures, and research from low- and middle-income countries, and proposes directions for future work. Overall, the review argues that inclusive schools can promote resilience, self-concept, and social connectedness when PWB is treated as a central goal of inclusive education.

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1. Introduction

Inclusive education is the approach of educating children with and without disabilities together in ordinary schools while providing the supports needed for participation, learning, and belonging (Mbatt et al; 2024). (It has become a major global priority because international declarations and disability-rights frameworks emphasize equal access to education for all children, and because inclusive schooling is increasingly seen as a pathway to social participation and equity (Dell'Anna et al; 2022). In local contexts such as India, inclusive education is especially relevant because schools often serve children with diverse learning, communication, sensory, and physical needs within the same classroom (Dell'Anna et al; 2022). In addition to this, psychological well-being matters because schooling is not only about academic achievement, but also shapes self-esteem, peer relationships, motivation, and emotional adjustment. Students with disabilities may face stigma, discrimination, poor teacher expectations, bullying, communication barriers, and limited school support, all of which can affect confidence, participation, and mental health (Wächter, T et al; 2024 ; Haule, D. B. et al; 2025). Studies in inclusive settings have reported loneliness, stress about keeping up with peers, and psychosocial difficulties when social inclusion is weak, even when academic placement is nominally inclusive. (de Verdier, K; 2016 ; Wächter, T et al; 2024). At the same time, supportive inclusive environments can improve belonging, emotional stability, and social development. Thus, the purpose of this article is to provide a clear conceptual and practical discussion that can guide teachers, school leaders, and researchers in improving inclusive practice. It will not attempt to exhaustively appraise every study or calculate pooled effect sizes, but instead will highlight major evidence patterns, current gaps, and school-level implications for supporting students with disabilities.

2. Conceptual Framework & Definition

Psychological well-being in school-age children is best understood as a multidimensional construct that includes children feeling and their functions

in school life.¹ In school settings, well-being commonly includes positive emotions, self-esteem, self-efficacy, autonomy, life satisfaction, meaningful engagement, and a sense of belonging. For students with disabilities, this matters because school experiences can either strengthen or weaken emotional adjustment, peer relationships, and confidence in learning (Mbatt et al; 2024). In addition to this, inclusive schools are those in which students with and without disabilities learn together in ordinary classrooms with appropriate supports, so that participation, access, and social membership are ensured rather than merely physical placement. The types of disabilities usually considered in this topic include intellectual disabilities, developmental disabilities such as autism, sensory disabilities such as hearing or vision impairment, physical disabilities, and specific learning disabilities. In the literature, these groups are often discussed together because all may face barriers related to communication, mobility, peer acceptance, or participation in classroom and school activities. For school-age children, key components of psychological well-being includes emotional well-being, self-esteem or self-concept, social connectedness and belonging, resilience, life satisfaction, and behavioral adjustment (Jiang, W et al ; 2025). A child with good well-being is more likely to feel safe, valued, respected, and connected to teachers and peers, and to show better engagement in academic and social activities (Murray, C; 2024). These components are especially important in inclusive education because disability-related barriers can affect not only learning but also how children see themselves and interact with others.

3. Psychological Well-Being (Pwb) Of School Children With Disabilities

The well-being among children with disabilities is often described as being more vulnerable than that of their peers, mainly because disability can increase exposure to stressors such as stigma, academic frustration, communication barriers, and social exclusion. Across the literature, common difficulties include internalizing symptoms such as anxiety and low mood, reduced self-esteem, and feelings of loneliness or

not belonging at school (Heslon, K et al; 2024). At the same time, supportive school relationships, family encouragement, accessible classrooms, and positive teacher attitudes are repeatedly identified as protective factors that improve adjustment and emotional security (Sarkar, R. 2023). While on the other hand, some researchers claims that well-being is not determined by disability alone, but by the interaction between the child and the school environment (Cadieux, C et al; 2021). Students who experience acceptance from peers, encouragement from teachers, and opportunities to participate in classroom and extracurricular activities tend to show better self-concept and social functioning. In contrast, children who face repeated exclusion, bullying, or low expectations are more likely to develop poorer emotional outcomes and reduced confidence in their abilities (Nind, M et al; 2025). Additionally, age and developmental stage also matter (de Verdier, K; 2016). Younger children with disabilities often show distress through behavior, dependence, or difficulties in play and peer interaction, while adolescents are more likely to report self-consciousness, social comparison, identity concerns, and withdrawal. As children grow older, the importance of peer acceptance, autonomy, and feeling competent in academic tasks becomes stronger, which means adolescence can be a particularly sensitive period for psychological well-being (Heslon, K et al; 2024). This variation across age groups should be kept in mind when interpreting the literature and when planning school-based support. (Jiang, W et al ; 2025; Cadieux, C et al; 2021).

4. PWB By Disability Type

The patterns basically differs across disability groups, but a common link in the literature is that school-related barriers, social exclusion, and limited participation often matter more than diagnosis alone (Nind, M et al; 2025). In students with intellectual and developmental disabilities, studies commonly report weaker emotional well-being, social isolation, and reduced opportunities for peer interaction, especially when communication support and school inclusion are limited (Lin, Z; 2021; Kapoor, S et al; 2013).

Research on psychosocial-behavioral interventions also shows that many studies in this group focus on adaptive and communication skills, which reflects how strongly social participation is tied to well-being (Alpuche De Lille et al; 2025). For autism spectrum disorder, researchers had frequently highlights in past about the difficulties in social functioning, reciprocal peer relationships, and school belonging, alongside elevated anxiety and depressive symptoms in many students (Iaia, M et al; 2024). These concerns are often linked to sensory sensitivity, communication differences, and mismatch between the child's needs and classroom expectations, rather than autism itself alone. Common measures in this field include teacher and parent report behavior scales, social skills measures, and emotional symptom tools, while school experience studies often emphasize peer acceptance, teacher understanding, and classroom predictability (Iaia, M et al; 2024).

Specific learning disabilities are often associated with lower academic self-concept, frustration from repeated school failure, and emotional distress related to comparison with peers. The literature suggests that when students are persistently labeled as "slow" or "unable," self-esteem and motivation may decline, whereas early support, success experiences, and encouraging feedback can protect well-being (Lin, Z; 2021; Alpuche De Lille et al; 2025). Studies in this area commonly use self-concept and self-esteem scales, as well as measures of emotional adjustment and school anxiety (Windsor, C et al; 2023; Hanáková, A et al; 2023). Sensory impairments, such as hearing or vision loss, affect psychological well-being largely through communication barriers and reduced participation in classroom and social life. When communication is limited, students may experience withdrawal, frustration, and poor psychosocial functioning, but supportive environments, assistive communication, and teacher awareness can improve autonomy and belonging (Hanáková, A et al; 2023). Physical disabilities show a similar patterns which includes accessibility, mobility support, and participation in school activities strongly influence emotional

well-being and social inclusion, with psychosocial outcomes improving when students are able to take part meaningfully in everyday school life (Nabil, N. Z. I. N. M et al; 2026). For students with mixed or multiple disabilities, the literature usually shows a cumulative burden because emotional, communication, learning, and mobility challenges can interact and intensify one another.

5. Key Determinants Influencing PWB In Inclusive Schools

PWB in inclusive schools is shaped first by individual factors such as severity and type of disability, then by associated mental health conditions, coping skills, and the child's ability to self-advocate (Sarkar, R. 2023). Studies have shown in past that students who have stronger coping strategies and can express their needs tend to adjust better, while those with more complex needs or comorbid emotional difficulties are more likely to experience stress, isolation, and reduced school participation (McMillan, J. M et al; 2013; Gautam, S et al; 2025). This means disability alone does not determine well-being, rather, the child's functional and emotional profile interacts with the school environment.

Moreover, family factors are equally important, especially parental support, realistic expectations, family stress, and socioeconomic resources. When families provide encouragement and stable support, children often show better self-esteem and resilience, but high family stress or limited resources can make it harder to sustain emotional well-being. The literature also suggests that active parent-school communication helps children feel more secure and understood in the classroom (Gautam, S et al; 2025 ; Sarkar, R. 2023).

At the school level, teacher attitudes and competence are among the strongest influences on PWB because they shape whether inclusion is genuine or only physical placement. Positive classroom practices, adaptive teaching, and a teacher's sense of efficacy are associated with more favorable attitudes toward inclusion, which in turn supports student belonging and engagement. In contrast, poor peer relations, bullying, and lack of accommodations can lead to

social withdrawal, shame, and emotional distress. Access to assistive devices, learning support, and flexible teaching methods also plays a major role in whether students feel they can participate meaningfully (Weisel, A et al; 2006; Fu, W et al; 2023).

At the community and policy level, stigma, cultural attitudes, legislative protection, and resource allocation shape whether inclusive education becomes supportive or merely symbolic. Communities that value disability inclusion and schools that receive adequate funding are more likely to provide services that protect psychological well-being, while weak policy implementation leaves children exposed to marginalization. A review of mental health and students with disabilities emphasizes that school-based mental health promotion must work alongside universal inclusion policies to reduce exclusion and isolation Fu, W et al; 2023; Shrivastava, R et al; 2023).

In this, according to studies mediators and moderators can help to assess that why some students thrive even in challenging settings (Weisel, A et al; 2006; Fu, W et al; 2023). Peer support, academic success, teacher support, and positive school climate can buffer stress and improve adjustment, while repeated academic failure or weak relationships can intensify distress. In practical terms, this means that the same disability can lead to very different well-being outcomes depending on the quality of the school environment and the supports available (McMillan, J. M et al; 2013).

6. School Practices & Interventions That Support PWB

Universal school-wide approaches such as fostering a positive school climate, implementing social-emotional learning (SEL), and running anti-bullying initiatives that explicitly include disability perspectives are central to promote PWB among students with disabilities. Guidance documents from education and health authorities emphasize whole-school strategies that teach emotional regulation, empathy, and relationship skills through the curriculum and daily routines. When these universal approaches are

implemented with fidelity and in ways that value all learners, they can reduce stigma, improve peer relationships, and create a safer environment for students with disabilities (Department for Education. 2018; National Council of Educational Research and Training. 2024).

In addition to above, targeted supports are needed for students who experience higher levels of distress or social difficulty, and these often include school-based counseling, mental-health services, small group social skills training, and peer-mediated interventions. School psychologists and counselors can provide brief counseling, coping skills training, and problem-solving support tailored to the needs of children with disabilities, while small group interventions help build social competence and resilience. Peer-mediated programs, where typically developing peers are trained to support classmates with disabilities, have been shown to improve social interaction and reduce isolation in inclusive classrooms (National Association of School Psychologists. 1995; Strnadová, I et al; 2024).

Individualized supports such as individualized education plans (IEPs or 504-type plans), assistive technologies, and curriculum adaptations ensure that students with disabilities can participate meaningfully in learning and social activities (National Council of Educational Research and Training. 2024).

Documents on inclusive practice and mental health stress the importance of adapting tasks, using universal design for learning, and providing appropriate sensory and communication supports so that students can access instruction and demonstrate their strengths. These individualized accommodations are closely linked to psychological well-being because they reduce frustration, support autonomy, and allow students to experience success (National Council of Educational Research and Training. 2024).

Moreover, teacher and staff capacity building is repeatedly highlighted as a key mechanism for improving PWB because teachers shape classroom climate, expectations, and daily interactions. Training in inclusive pedagogy, disability awareness, classroom management, and

SEL helps teachers respond to behavioral and emotional needs in supportive rather than punitive ways. Professional development resources also recommend that teachers learn to identify early signs of distress, collaborate with support staff, and design instruction that promotes connection and respect among all students (National Association of School Psychologists. 1995).

Evidence from implementation reports and practice guides suggests that multi-tier frameworks such as Positive Behavioral Interventions and Supports (PBIS), combined with mental-health promotion, can improve social, emotional, and behavioral outcomes for students with disabilities when implemented across the whole school. For example, PBIS-based models that incorporate disability-specific strategies and SEL have been associated with reductions in problem behavior and improvements in social skills and school engagement (Strnadová, I et al; 2024).

Assessment Issues

In school populations, PWB is commonly assessed with multidimensional scales that tap positive affect, life satisfaction, engagement, relationships, and school climate, alongside mental health symptom measures (e.g., anxiety, depression scales) (Zhang, W et al; 2024). Reviews of school-based wellbeing instruments note that tools such as KIDSCREEN, Stirling Children's Wellbeing Scale, the Warwick-Edinburgh Mental Wellbeing Scale, and school-specific measures (e.g., Student Subjective Wellbeing Questionnaire, newly developed "wellbeing at school" scales) can capture important aspects of students' experience, but vary in length, focus, and psychometric robustness for screening and research purposes. Strengths include good reliability and coverage of both hedonic (feeling good) and eudaimonic (functioning well) components, while limitations include limited disability-specific validation and sometimes weak sensitivity to school context (Zhang, W et al; 2024; Waite, M et al; 2021).

A key challenge according to past studies was the tension between proxy and self-report

assessment. For some students with intellectual, developmental, or communication disabilities, teachers or parents report on behavior, mood, and social functioning because direct self-report may be difficult, but studies show that proxy ratings can underestimate internal experiences or overemphasize observable problems. Conversely, self-report instruments risk missing important contextual information (e.g., subtle exclusion, low expectations) or may be affected by social desirability and limited insight, especially in younger children. Combining self-report where feasible with carefully interpreted proxy reports and observational data is therefore recommended to triangulate psychological well-being in school setting (Zadworna, M et al; 2023; Heslon, Kn et al; 2024).

Cultural validity and disability-sensitivity of instruments are another major concern. Adaptation work on school well-being scales shows that factor structures and item meanings can shift across languages and cultures, and full measurement invariance is not always achieved, which limits direct comparison between countries or groups. For students with disabilities, language complexity, abstract wording, and response formats can become barriers which can inadvertently pathologize differences rather than assess well-being. Best practice is to use instruments that have undergone cultural adaptation and cognitive testing with diverse students, including those with disabilities, and to avoid interpreting small score differences without considering contextual factors (Saija, E et al; 2025). From a disability-sensitive perspective, assessment should pay attention to whether tools capture supports and participation, not only symptoms. Recent school well-being scales explicitly include domains like perceived school support, teacher care, and peer relationships, which are highly relevant determinants for students with disabilities (Waite, M et al; 2021).

According to a study author concluded that, for best practice recommendations we can suggest following ways to address the situation which are as follows (VanderWeele, T. J et al; 2020):-

1. Selecting multidimensional scales that cover affective, cognitive, and relational aspects of school well-being.
2. Checking for age, cultural, and disability appropriateness.
3. Combining self-report and proxy data when necessary
4. Embedding wellbeing assessment within broader, strengths-based school monitoring rather than one-off deficit-focused screening.
7. **Gaps In Knowledge & Directions For Future Research**

Across the literature on PWB among students with disabilities in inclusive schools is one of the clearest gaps is the limited longitudinal understanding of how well-being develops over time as children move through different grades and transitions. Studies have showed that following students with disabilities across several school years and showed that social inclusion and emotional school WB can change considerably, with some students initially benefiting from inclusive placement but later experiencing declines in emotional well-being as peer dynamics and academic demands become more complex (Lo, H. A et al; 2025; de Verdier, K. 2016). This limits our ability to understand which inclusive practices have sustained benefits and which may need adjustment across developmental stages.

Another major gap concerns is intervention effectiveness and understudied disability groups. For this, reviews and conceptual papers note increasing concern about the mental health of students with special educational needs, but emphasize that many school-based programs are either universal (for all students) or targeted at general risk, with few rigorously evaluated interventions tailored specifically to students with disabilities in inclusive classrooms (Spurlock, K. R et al; 2025; Heslon, K et al; 2024).

There is also a significant gap in culturally adapted measures and perspectives from low- and middle-income countries (LMICs). Work comparing PWB between students with and without disabilities, and between different school placements, has largely been conducted in high-

income countries, with relatively fewer studies from LMICs despite rapid expansion of inclusive education policies there (Heslon, K et al; 2024). Moreover, existing well-being and school climate measures are often developed in Western contexts and then applied elsewhere with limited cultural adaptation, raising concerns about whether they capture locally meaningful aspects of inclusion, stigma, family expectations, and school experiences for students with disabilities (Shrivastava, R et al; 2023). Directions of future research should be as follows:-

1. More prospective longitudinal studies following students with different disabilities in inclusive schools across key transitions (e.g., entry to primary, move to secondary) would clarify trajectories of psychological well-being and identify protective school practices and risk factors over time.
2. Rigorous intervention studies which includes cluster randomized trials or well-designed quasi-experiments could test multi-component school programs that combine universal climate/SEL approaches with targeted and individualized supports for students with disabilities in mainstream classrooms.
3. Mixed-methods research in LMICs, using culturally adapted well-being scales plus qualitative work with students, families, and teachers, would help to develop contextually relevant models of psychological well-being and inclusion.
4. Comparative studies of different placements (inclusive vs special schools) focus on emotional and social outcomes, not only academic achievement, can deepen understanding of how placement and quality of inclusion influence psychological well-being for diverse disability groups.

8. Conclusion

PWB among students with disabilities in inclusive schools is shaped by a complex interplay of individual, family, school and community factors. The evidence reviewed in this article shows that inclusion promotes well-being only when it goes beyond physical placement to genuine participation, support, and belonging. Students

with disabilities are consistently found to be at higher risk for internalizing symptoms, low self-esteem and social isolation, yet these vulnerabilities are markedly reduced in environments characterized by positive school climate, supportive teacher attitudes, meaningful accommodations, and peer acceptance. Universal practices such as social-emotional learning and anti-bullying programs, combined with targeted counseling and individualized educational supports, emerge as key components of a multi-tiered approach to protecting psychological well-being in inclusive settings. At the same time, significant gaps remain, particularly in longitudinal evidence, disability-specific interventions, culturally adapted measures, and research from low- and middle-income countries, underscoring the need for more rigorous and context-sensitive studies. Overall, this narrative review highlights that inclusive schools can be powerful settings for fostering resilience, self-concept, and social connectedness among students with disabilities, provided that policy, practice, and assessment are explicitly oriented toward their PWB as a central educational outcome rather than a secondary concern.

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The authors declare no conflict of interest.

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Author Contributions

.....contributed to the conceptualization, framework development, and text composition.
.....contributed to the theoretical development, oversight, and critical editing of the work.

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This article does not include human participants, human data, animal subjects or clinical materials. Therefore, ethics clearance was not necessary.

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