

خدمات الاستشارة النفسية المقدمة لأمهات الأطفال ذوي الإعاقة الذهنية (المعرفات)

PSYCHOLOGICAL COUNSELING SERVICES PROVIDED FOR MOTHERS OF CHILDREN WITH INTELLECTUAL DISABILITIES (IDs)

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Abstract :

The current study aimed to identify the reality of psychological counseling services provided to the mothers of children with intellectual disabilities, with an assessment of what was provided of these services and to identify proposals to develop psychological counseling services provided to the mothers of children with intellectual disabilities, and the study used the qualitative approach, and relied on the interview as a basic tool to collect the study data, as the study sample consisted of (20) mothers of children with intellectual disabilities belonging to some institutes of special education, integration programs in the city of Makkah and Jeddah, Saudi Arabia, and the results of the study found the availability of psychological counseling service to some extent, whether in the government sector or private regardless of the nature of this service and its pros and cons. The study also revealed the existence of positive effects of psychological counseling on mothers, or the evaluation of the quality of service between the government and the private sector by mothers. they pointed to some negatives, and positives in both sides regarding the extent to which mothers are satisfied with psychological counselling services. There has been a similarity of satisfaction by families with psychological counselling services, or proposals for the development of psychological counselling services provided by mothers with intellectual disabilities, They included the need to increase maternal awareness, with counselling services focusing on adolescence, especially for girls, and the need for government psychological counselling centers or expanded the establishment of psychiatric hospitals, while increasing the number of psychologists, as well as facilitating access to service, and Provide psychological counseling services as soon as the mother learns of the presence of a disability in her child.

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Introduction:

The issue of rehabilitation in the field of special education has imposed itself strongly in recent years in our Arab world, due to the increasing societal awareness, and the spread of training awareness and guidance programs for this large segment of people with disabilities in the world, including Saudi Arabia, especially if we add to them their families, as they are an integral part of the process of early detection, education and rehabilitation of all kinds.

The presence of a child with an intellectual disability affects the family in general and is reflected in the performance of its normal functions, so we find that the role of the mother is highlighted in this case, through the acceptance of the disability of the child, in addition to her keenness to have special dealings with the child (Al-Nasser, 2019).

The family plays an important role in the lives of its children with disabilities, and it is not possible to provide awareness and help to the family of the child with disabilities without them realizing the background behind my accused behavior towards their children, which is a reflection of the many feelings, reactions, and pressures to which the family is exposed, when a child has a disability (Balawi, 2011). The reactions of mothers with intellectual disabilities vary, some of them are happy, optimistic, and reassured, and some of them are pessimistic; they face a lot of psychological and family pressures, and the mother begins a life of anxiety, as well as may suffer from some psychological and physical symptoms that exhausts her energies and prevents from being able to do her work (I'Omar, Lana, 2015). Mothers with intellectual disabilities may go through many negative experiences, such as: anxiety, depression, sadness, pessimism, negativity, and low self-esteem (Abu Zeid & Abdul Hamid, 2019).

Mothers of the intellectually handicapped always feel disappointed, confused, hopeless, angry, guilty, some accept the situation, some have thoughts of suicide, stress depression, many families are worried about the future, and feel that the burden was trustworthy, not on her, and that she needed support from experts (Balci, et al., 2019),

Psychological counseling for the family of a child with disabilities aims at dealing with the personality of each individual in it; in order to modify his behavior for the better; so as to achieve the compatibility of their personal interactions within the scope of their family relations in a good way. Thus, when psychological counseling stands only in an unusual child without extending to all members of his family, he is truly deficient in achieving his overall goals. (Al-Biblaoj, 2011).

Psychological counseling is a means sought by all people for the quality of life, especially mothers of people with intellectual disabilities, who need services and counseling programs that mitigate the suffering of having a disabled child in the family, and these counseling services include: mitigating the impact of trauma, the mother's confession with the problem and looking for the best solutions to it, guiding the mother to treat the child as a child of a special nature, and different needs, depending on the type of disability and its severity, directing the mother to reduce the expectations expected of her disabled child; so as not to cause him useless stress, and directing the mother to the sources of help



and the support available in the surrounding environment, from which she can benefit in caring for her disabled child (Shaheen, 2020).

Abdul Raqib Al-Beheiry, et al., (2014) pointed out that the most important psychological counseling needs of parents with intellectual disabilities are the need to deal objectively, with a sense of anxiety about the future of the child, the need to overcome the constant fear that the child with disabilities will be harmed by others, and the need for guidance on constant anxiety about the child's health problems, the need to express feelings related to the child's disability and finally the need for guidance on how to deal with the feeling of fatigue and constant exhaustion due to the care of the child with disabilities.

Regarding the reality of psychological counseling in special education in the Kingdom of Saudi Arabia whether in the public or the private sector, it is represented in private education institutes and integration programs with regular schools. And the private education institutes and programs stipulate laid out in their article (48-49) that the teacher of the behavioral training - the psychologist - is the person who applies the tools, standards, psychological means, etc. to the students and prepares the psychotherapeutic programs. It also stated that one of its tasks is to participate in the preparation of awareness programs for students, their employees, and their parents (Ministry of Education, 1437 AH).

From this point of view, and In view of the researcher's experience in this field, and in the light of the paramount importance of psychological counseling for mothers of children with intellectual disabilities, there was an urgent need to study the reality of counseling services provided to mothers, whether in the private education institutes or the integration programs in regular public and private schools, up to a set of recommendations in this regard, which may necessarily reflect on persons with disabilities themselves, their families, and the educational system in the field of private education in the field of private education in the field of The Kingdom of the future.

Problem statement:

The presence of a child with intellectual disability affects the family in general and is reflected in the performance of its normal functions; therefore, we find that the role of the mother is highlighted in this case, through the acceptance of the disability of the child, in addition to her keenness to have special dealings for the child (Al-Nasser, 2019). A study (Deshpandeet, et al, 2010) indicated that mothers with intellectual disabilities suffer from severe pressures and feelings of pessimism.

A study conducted by Pachatuh (2021) also confirmed that one of the most prominent pressures to which the family is exposed is the feeling of shame and depression, and in the same context the study (Shaheen, 2020) confirmed that mothers of people with intellectual disabilities need services and psychological counseling programs to alleviate the suffering of having a disabled child in the family, and these counseling services include: relief the sign of shock, directing the mother to acknowledge the problem and giving her the best solutions, and guiding the mother to treat the child as a normal child with special needs depending on the type of disability and its severity and directing the mother to lower her expectations for her disabled child; so as not to cause him fatigue pressures from them, and



also direct the mother to the sources of help and support available in the surrounding environment, which can benefit her in caring for her disabled child.

The problem of the current study is that there are many psychological problems among the mothers of children with intellectual disabilities, and the need of these mothers for psychological counseling services, with the importance of identifying those services provided to them, in order to evaluate them and work to develop them, so as to benefit them and their children with intellectual disabilities in the future.

Research questions:

The current study seeks to answer the following main question:

-What psychological counseling services are provided to the mothers of children with intellectual disabilities?

Additionally, the following sub-questions were emerged from the main question:

-What is the reality of the psychological counseling services provided to children with intellectual disabilities?

-What is the evaluation of the psychological counseling services provided to children with intellectual disabilities?

-What are the proposals for the development of psychological counseling services provided to children with intellectual disabilities?

Research objectives:

The study seeks to:

- *Identify the reality of psychological counseling services provided to the mothers of children with intellectual disabilities.*
- *Evaluation of the psychological counseling services provided to the mothers of children with intellectual disabilities.*
- *Identify proposals for the development of psychological counseling services provided to the mothers of children with intellectual disabilities.*

Significance of the study:

The importance of the study is as follows:

- *Addressing the issue of intellectual disability, which is one of the important issues globally and locally.*
- *Targeting a large, and very important segment, which is the segment of mothers, who play a key role in the process of rehabilitating their children, if they are properly trained and release them of some pressures and psychological problems.*
- *The results of the study may contribute to helping decision-makers in the Kingdom of Saudi Arabia to identify the pressures and psychological problems experienced by mothers with intellectual disabilities in the Kingdom, and to work to facilitate them as much as possible.*
- *The results of the current study may benefit specialists and counselors in dealing more professionally in the process of counseling mothers with intellectual disabilities.*

Intellectual Disability



Schalock, et al, (2010) defined intellectual disability as a disability described as a manifest deficiency in intellectual functioning, adaptive behavior, where it is evident in the skills of quality: conceptual, social, and practical. Obaid (2012) described the intellectual disability as: a fundamental lack of job performance in the RH, characterized by sub-average mental job performance, which is associated with deficiencies in two, or more areas of adaptive skills: the communication, personal care and home life, social skills, utilization of community resources, self-direction, health, safety, academic aspects of employment, leisure time, work skills, life, and independence.

The American Society for Intellectual and Developmental Disabilities, 2021, defined intellectual disability as: a clear decrease in sub-average mental performance with an IQ of (70) to (75) and lower, accompanied by two or more deficiencies of adaptive behavior skills that are represented by a set of conceptual skills: such as language, reading, writing, counting concepts such as time, numbers, and social skills, such as dealing with others, the sense of social responsibility, the ability to follow rules, the ability to solve problems. And the practical skills: such as daily living activities, self-care, personal care, health, professional skills, use of money and telephone, and this disability is shown before the age of twenty-two.

The Ministry of Education in the Kingdom of Saudi Arabia, specifically in the organizational manual to the special education (1437 AH), defined intellectual disability as follows: a marked decrease in the level of general mental performance in the growth stage, accompanied by a clear deficit in two areas, or more of behavioral skills. Self-care, social skills, home life, job skills, academic, self-relevance, work skills, health, safety, leisure time, and community use.

Through the previous definitions that were presented, the researcher defines intellectual disability as follows: Intellectual disability is a deficiency in mental performance that affects many aspects of the individual with intellectual disability, and continues with him throughout his life, and requires many rehabilitation services, including counseling services whether for the individual himself, his family or caregivers.

Characteristics of individuals with intellectual disabilities:

Dealing with people with intellectual disabilities requires that the specialist be aware, and they are full of their different characteristics, and it must be known that the characteristics of people with intellectual disabilities are generalized; as the characteristics of intellectually disabled people vary depending on the degree of disability, so we find differences in the face of intellectual disabilities among intellectually handicapped children, as well as differences in family situation, environmental, and individual differences. (Judges 2021) and (Jassem, 2017) have presented the characteristics of people with intellectual disabilities as follows:

- **Physical characteristics:** The physical motor rate of the intellectually handicapped is generally low, and the degree of decline rises with the increase in the severity of the disability, where the intellectually handicapped are observed smaller in size, and the same as their ordinary peers.



- **Mental characteristics:** An intellectually disabled child cannot reach the level of educational development that an ordinary child reaches, and a child with an intellectually disabled person is less likely to develop than an average child.
- **Social characteristics:** People with intellectual disabilities suffer from deficiencies in establishing social relations with others, and difficulty in being able to communicate with them.
- **Academic characteristics:** There is a correlation between the level of intellectual disability and low academic achievement, as it is one of the most obvious characteristics in people with intellectual disabilities, and they have difficulty in learning simple basic skills.
- **Linguistic characteristics:** The delay in the language and its lack of development is one of the main manifestations associated with intellectual disability, and it is through the delay in the pronunciation of speech, the use of sentences, and the problems of verbal expression. Similarly, Al-Nasser (2010) stated that persons with intellectual disabilities have several characteristics, which are as follows:
- **Slow learning:** The most obvious characteristic of people with intellectual disabilities is the slowness in the ability to learn compared to normal ones and this indicates to a decrease in the acquisition of information, and this does not mean the inability to learn, but must prepare their own programs that suit them, and suit their mental abilities.
- **Speech and language problems:** The level of language performance of people with intellectual disabilities is much lower compared to that of their ordinary peers, and that their linguistic dictionary is limited, and their use of vocabulary is simple.
- **Deficiencies in the organization and processing of information:** they lack the ability to organize information which requires teachers in special education to organize the display of the required information appropriately for them.
- **Attention:** People with intellectual disabilities in general suffer from a weakness in attention, and this varies in the intensity in the form of one person to another, and the intellectual disability may be caused by poor attention, or caused by poor cognition, so the differences between individuals must be considered.

Needs of people with intellectual disabilities:

- **The need for security:** An intellectually handicapped child needs to feel emotionally secure, and to be loved and desired by others.
- **The need to belong:** Like any ordinary child, an intellectually disabled child needs to belong to a group, or to a family that takes care of him, and meets his needs, which pushes him to improve his behavior, and he needs to belong to a group of friends, and he needs to develop belonging to religion and the homeland.
- **The need for security:** An intellectually handicapped child needs to feel emotionally secure, and to be loved and desired by others.
- **Accept others:** Children with intellectual disabilities are in greater need of social acceptance than their ordinary peers because they are deprived of this type of interaction.



- **The need for recognition:** All of the above needs mentioned are closely related to behavior, so if a child is deprived of being able to do so, to be unsuccessful, or otherwise, he or she behaves in an up-normal manner of aggression or sabotage.

Problems encountered by people with intellectual disabilities:

The problems of people with intellectual disabilities are many, including the following:

- **Psychological problems:** People with intellectual disabilities suffer from high psychological loneliness, anxiety of all kinds, and are characterized by a high level of impulsivity, excessive activity, aggression, emotional insensitivity, tendency to isolation, withdrawal in social situations, hesitation, and slow response, as described by a low level of motivation, weak self-confidence, low self-esteem, instability, easy for others to lead, and effect on them (Jadal-Rub and Abdul Hamid, 2014). They also suffer from delays in psychological processes, as a result of their inability to keep up with their colleagues in the academic attainment, or their inability to achieve an appropriate level of education, commensurate with their mental abilities, as well as the negative effects resulting from experiencing negative emotional experiences, and high psychological pressures (Suleiman, 2007).
- **Behavioral problems:** Al-Qamish (2015) has stated that people with intellectual disabilities exhibit various forms of behavioral problems within the family, including:
 - **Aggression in its various forms:** It means any act performed by the child; and is intended to inflict harm or pain on others, or by means of physical harm: such as beating, pushing, pulling hair, and biting, or by verbal abuse: such as cursing, intimidation, or may appear by destruction of property.
 - **Stereotypical behavior:** It means any repetitive responses issued by a child with a disability at a high rate without having any clear reason examples of which are: shaking the body, shaking the head, wrapping the hair, shook the legs, hit the feet with the ground, or giggling for no apparent reason.
 - **Excessive movement:** It means that the child carries out continuous purposeless and disorganized physical activity which appears in the form of a lot of movement inside the house, and is shown by poor attention to the child, and not noticing what is going on around him.
 - **Self-harm:** This means various motor responses that end in harm or physical twisting of the person from whom they are emitting, and mostly the harm from this type of emitting is shown immediately, for example, hitting the head violently, slapping the face, pulling the hair, and biting parts of the body, scratching, pressing hard on the eye, pinching, burning, and hitting the body violently.
 - **Social withdrawal:** It is meant that the individual keeps a physical and emotional distance between himself and others with a lack of social responses, a tendency to stay calm not to provoke noise, problems and is usually described as shy and does not participate in social activities and does not initiate to them and has no friends.
 - **Social problems:** People with intellectual disabilities suffer from negative characteristics and features that have a decisive impact on the development of their personality, and their social behavior; and so their low level of mental abilities, and the Inadequate adaptive behavior put them in a weak position relating to his peers of the ordinary, and develop on them a sense of deafness and loneliness, and what redouble from that is the low social expectation of them, as others most often treat them as they are different, and do not expect much from them (al-Qamish, 2015). The mental weakness puts people with



intellectual disability in social, and different emotive problems, It has been shown that the deficit in adaptive behavior is one of the important characteristics of intellectual disability, and this is not due to mental weakness only.; but also to the attitudes of others towards people with intellectual disabilities, the ways in which they treat them, and their expectations of them, these trends and expectations lead to low self-concept in people with intellectual disabilities, their low self-concept is linked to the murder experiences they face, they also show unacceptable social behavioral patterns, and they have difficulty building social relationships with others, and forming friendships (Obaid, 2013).

Objectives of counseling programs with the intellectually disabled children:

According to Al-Quraiti (2000), the objectives of the counseling programs provided to the intellectually disabled vary due to the different degree of disability, although there are general objectives of psychological counseling for the intellectually disabled that share with all disabilities, which are:

- a) Develop the self-confidence of the disabled person.
- b) Develop the ability of the intellectually disabled to express emotionally.
- c) Develop the ability of the intellectually disabled to adjust and control his emotions.
- d) Develop standards of acceptable behavior and adhere to it.
- e) Develop the ability to seek help when needed.
- f) Develop and improve of positive attitudes towards oneself and towards the surrounding society.
- g) Develop and improve of positive trends erasing life and work.
- h) Encouraging the intellectually disabled to face their problems and find solutions to them.

Psychological pressures on mothers of children with intellectual disabilities

The concept of psychological stress:

The definitions of psychological stress differed according to the scientists who make these definitions depending on their theoretical orientations, among these definitions, examples of which are as follows: Shaham (2015) defined psychological stress as manifesting itself in a total interacting framework, includes the psychological, physical, social, professional and economic aspects of an involuntary response to any defensive demands, or is the involuntary method in which the body responds by physical and mental preparations, and the researcher sees through the previous presentation of the definitions that there are components of stress, namely stimuli, response to stimulus, interaction between stimulus, and response, and through these components we can define the hypotension that is a reaction that occurs within the individual between stimuli, and physiological, psychological and behavioral reactions to these stimuli.

Diversity of reactions of families with disabled member/s:

Families of children with disabilities suffer from stress, adverse reactions when knowing of the birth of a disabled child, and pressures regarding the care of children with disabilities. These responses were mentioned by Al-Atrouni (2019) and (Jabali, 2012) as follows:

- i) Irritability, exaggerated emotion towards simple problems.
- j) Unwanted reactions.
- k) Social withdrawals.



l) Problems in marital relations, and the family conflicts.

m) Trauma: It is the first reaction caused by the presence of a disabled child in the family, where family members suffer from confusion, and that they are in trouble.

n) The denial, the doubting: Trauma is often followed by a denial of this traumatic reality, a disbelief in it, or doubts about its authenticity, especially if information about disability was known before birth.

o) Grief, sorrow: It is a reaction that occurs immediately after diagnosis, and their grief continues to lose their dream of having a normal child.

p) Guilt: as the family replaces the feeling of sadness and anger with a deep sense of guilt, considering that the harm done to the child is a punishment from God for their sins, and begins with the projection and blame on the other's shelf, or if one of them suffers from a disability, or from his relatives.

In addition to the above, many problems arise as a result of the presence of a disabled child in the family, including:

q) The mother's feeling that everything she gives to the disabled person is useless.

r) Feeling embarrassed by the son at social events.

s) Feeling afraid, and worrying about the future for the disabled child.

t) Feeling that the disabled child is causing a problem for the family.

u) Social isolation due to the presence of the disabled child.

v) The height of the physical expenses necessary for the disabled child.

Complications of having an intellectually disabled child in the family:

Ayesh (2018) and Hanafi (2007) mentioned some of these effects as follows:

- **Psychological effects:** it consists of the inability to overwhelm their situation, emotions, lack of confidence, self-efficacy, and disappointment, which is associated with the health state of the child.
- **Social effects:** it consists of the threat posed by the child's disability to the family, and the disruption in relations between individuals from within and outside the family, such as: marital relations, poor compatibility of siblings, and the tendency of the family to isolate from other families.
- **Economic Effects:** The child's disability entails additional financial burdens because he needs more requirements than other ordinary children in the family, where he needs time, more care, rehabilitation programs, and training in special education centers, and this may be beyond the capacity of the families, which has negative effects on the family.

The basic needs of the mothers of children with intellectual disabilities:

Children with disabilities need many forms of support to help them cope with the pressures, the requirements of dealing with their children, and face the stress of disability, and the pressure that results from disability, they need information, support, and clarification from others, and receive psychological counseling services, training, and financial support and so on, and it has been defined (Al-Issa, 2016) as follows:

- **Material needs:** it includes the need to provide many things, such as: transportation, appropriate educational games, medical treatment, entertainment, and the allocation of certain features for children and their families, and the need for families to provide medical attention should be understood, and the support services for her child.



- **Community needs:** Community support, refers to the mother's need for work represented in centers, associations that provide services to the disabled child, and the experts that are easy to turn to them when needed, and provide guidance programs for the mother on how to deal with the child, and take advantage of them.

- **Cognitive needs:** It is the mother's need for information about her child's disability, his needs, and how he can be helped in daily life, and believes the nature of the need for information on the type of disability, its tension, and the interpretation of the child's condition to siblings and friends, because the presence of the disability makes the child different from his peers.

The guiding needs of families with intellectual disabled children:

Arabiyat (2011) stated that that the guiding needs of these families are as the following:

- **The need for information:** the access to information is an urgent need for parents and this need is centered on information about the future of the disabled child, how to help him by what it fits with his disability, how to explain the child's disability to his other siblings, and how to live with this condition.

- **The need for support:** The sources of support are varied, and so some are official, such as parents resorting to one of the specialists to help them get rid of one of the causes of stress associated with the disability of the child, and the support may be meetings between families that deal with the needs of support, and contribute to reducing the impact of problems by exchanging experiences between these families in how to deal with the problems.

- **Social needs:** Parents may be exposed to social isolation due to the presence of the intellectually disabled child, and fearing of looks of pity, and grief for the child which may be seen from some of the members surrounding the family, and this thing needs the help of the parents to get out of isolation, and the essays of their reintegration with the external environment, by providing the full support of the local community.

- **Financial needs:** The disabled child adds financial expenses to his family as a result of the tools he needs: medicine, continuous visits to the doctor, or the need to follow him to one of the special education centers, and since some families suffer from their low economic level. This sometimes forces them to seek financial assistance from the competent authorities, and this is where the importance of officials and professionals who contribute to reducing the severity of the problems on the shoulders of the family.

- **Services related to the family function:** Parents may need to be aware of the problem associated with the family function, understand it, solve problems, identify roles, in addition to providing internal support to the family, and find entertaining activities for it.

- **Psychological Counseling:** Counseling is one of the types of assistance that the family seeks to get, and what is more, knowing the sources of this service may not be available to the family without the presence of someone to help them, and show them places and ways to get them, so guidance directed to the families of children with disabilities is an integral part of the special upbringing, and these families aspire to have a tangible role in the upbringing, and education of their children (Khatib, Hadidi, 2005).



LITERATURE REVIEW

Previous studies

There are a number of previous studies conducted on psychological counseling services provided to mothers of children with intellectual disabilities, and the following are some of these studies:

Al-Juhani (2021) conducted a study entitled "Counseling Services" and its relationship to pessimism among the mothers of intellectually disabled people in the Medina region, where it aimed to identify the relationship between the level of counseling services, the level of pessimism among mothers with intellectual disabilities in Medina, as well as to reveal the level of counseling services, and the level of pessimism among mothers with intellectual disabilities, and to reveal the differences in the level of pessimism according to the scientific changer, and also to identify the impact of the economic level on the level of counseling services, the study sample consisted of (130) mothers of children with intellectual disabilities, and the researcher used the measure of counseling services, and the measure of pessimism in mothers with intellectual disabilities, and the results of the study concluded that the level of counseling services for mothers of people with intellectual disabilities showed by a high degree, and the social aspect ranked first, followed by the education aspect, and finally the psychological aspect, and the therapeutic aspect repeatedly, as revealed that the level of pessimism for mothers of disabled people came to a very low degree, and the results resulted in a statistically significant negative correlation between the total score, the sub-axes of the extension services scale, and the overall score of the pessimistic scale, and the study also revealed the existence of statistically significant differences in the level of pessimism among mothers of disabled people with intellectual disabilities in intellectual disability centers, according to the variable (scientific qualification), in favor of the secondary category and below, also revealed that the counseling services are not affected by the economic level among the mothers of the mentally disabled in the centers of intellectual disability, and the study also showed that the degrees of pessimism in mothers with intellectual disabilities can be predicted from the level of counseling services.

Hassoun (2021) conducted a study entitled "Social Shyness in Mothers with Special Needs", which aimed to measure social shyness in mothers with special needs and to identify the meaning of differences in social shyness of mothers with special needs, according to the two variables: type of child disability, gender, and the study sample consisted of (250) mother of the mothers of children with disabilities in Baghdad, and was adopted on the Al-Saeed scale (2012) consisting of (36) paragraphs, reflecting the response to it on the degree of the mother's feeling of social shame from her disabled child, and the sincerity of the scale has been verified, and its stability, and the results showed that mothers with special needs in Baghdad feel socially ashamed for having children with special needs, and that a mother of a mentally handicapped and the physically handicapped feel social shame more than mothers of the visually and hearing impaired while no statistically significant differences have been shown according to the gender heterogeneity in the social shyness of mothers with special needs.



Imam (2020) also conducted a study entitled: "A Proposed Causal Model of the Relationship between Social Support, Parental Pressures, and Life Satisfaction in Mothers of Children with Disabilities in the Sultanate of Oman"; which aimed to build a proposed causal model for the relationship between social support, parental pressures, and life satisfaction among mothers of children with disabilities in the Sultanate of Oman. The sample included (210) mothers of children with mental disabilities whose children received care, education and rehabilitation services in care and rehabilitation centers in Muscat, and the application of the parental stress scale has been implemented, and the multidimensional scale of perceived social support, and the life satisfaction scale on the study sample, the results of the study showed a direct impact of some dimensions of parental pressures, social support in life satisfaction, as well as parental pressures in life satisfaction, as well as parental pressures in social support, and the results also highlighted an intermediate effect of counting family support from social support to the relationship between parental pressures and life satisfaction among mothers of children with disabilities in the Sultanate of Oman.

Shaaban (2020) conducted a study entitled: "A counseling program for mothers of children with moderate mental disabilities to abuse them and its impact on the adaptive behavior of their children; aimed at identifying the effectiveness of a proposed counseling program for mothers of children with moderate mental disabilities to abuse them in the acquirer of their children adaptive behavior, and the sample of the study included (15) mothers form the experimental group of children enrolled in an intellectual education school in Egypt, and the researcher used in addition to the mentorship program prepared by her preliminary data form, the measure of child abused by mothers, adaptive behavior Scale - translated by Farouk Sadiq -. The results revealed statistically significant differences between the average scores of the experimental group before and after the intervention using the methods of the counseling program; to reduce the severity of maternal abuse of their children, which was represented in four types of abuse, namely: physical abuse, emotional abuse, parental neglect, sexual abuse, etc. The results of the study showed that there were statistically significant differences between the average scores of children with moderate mental disabilities who were treated on the scale of uncontrolled behavior before and after intervening with their mothers using the counseling program, which indicates the effectiveness of the intervention using the counseling program practiced with mothers in reducing the severity of abuse by mothers, which reflected positively on children by modifying their non-cauterizing behaviors .

Balci, et al, (2019) also conducted a study entitled: "Identifying the burdens and difficulties facing the families of intellectually disabled children, which aimed to identify the difficulties faced by the families of children with intellectual disabilities, and family burdens, and the study sample consisted of (160) mothers of the mothers, and the results of the study concluded that (48.8%) do not have anyone involved in child care, the research also stated that 38.8% of mothers with intellectual disabilities were disappointed, 48.1% were confused, 31.3% were shocked, and 52.5% were desperate 16.9% felt angry, and 14.4% felt guilty, and the study also showed that mothers of the intellectually handicapped (13.1%)



blamed others, and that (61.9%) accepted the situation, and that it was a plague from God, and that N. (12.5 %) have thoughts of suicide, and 28.1% suffer from depression, and the study found that most mothers were worried about the future, felt that the burden was heavy on them, and that they needed support from experts.

Al-Sharif (2019) conducted a study entitled: "The reality of group counseling for mothers of children with disabilities in social development centers in the city of Makkah, which aimed to identify the reality of group counseling provided by social development centers to mothers of students with disabilities in the city of Makkah, and also aimed to know the problems, and difficulties faced by mothers of students with disabilities, during the access to group counseling services, and it aimed to reveal the differences between the opinions of mothers of people with disabilities in their access to group counseling, according to the social status of the mother, the educational level of the mother, and the sex of the child with disabilities, the study sample consisted of (50) mothers of children with disabilities, and the mixed approach was adopted, the study used two methods to collect data: the resolution, the results of the study found that there are no statistically significant differences in the average opinions of mothers of children with disabilities towards group counseling as a whole, provided to them, according to their level of education, there are no statistically significant differences in the average opinions of mothers of children with disabilities towards group counseling as a whole provided to them, according to the gender variable of a child with a disability, there are no statistically significant differences in the average opinions of mothers of children with disabilities towards group counseling as a whole provided to them according to their social status.

Jess, Tosika, and Hastings (2018) also conducted a study entitled "Maternal Stress and Positive Functions in Mothers of Children with Intellectual Disabilities", which aimed to identify the positive function in mothers with intellectual disabilities, and to explore the supposed compensatory and protective functions of positive mothers, within the framework of the cross section, and the longitudinal frame for one year, which examined the relationship between the behavior of intellectually disabled children and the problems of mental health of the mother, and the sample consisted of (135) mothers of children with severe intellectual disability, who are between (3) years and (18) years, and the multiple linear regression models were examined in the possible function of the mother's positivity, and the results concluded that on the cross-sectional level, maternal positivity was found to be important to predict maternal stress, mitigate the effect of the problems of the child's behavior on fatherhood and motherhood and maternal stressors, and on the longitudinal side, maternal positivity did not have a direct impact on fatherhood pressures, plus that exploration is necessary to understand the longitudinal function of maternal positivity of the mother.

Tripathi (2015) conducted a study entitled: "The pattern of parenting, used by parents who undergo psychological stress with their children; the study aimed to identify the pattern of fatherhood, motherhood used by parents who were undergoing a different level of fatigue, stress when dealing with children with autism spectrum disorder. The study sample consisted of (320) parents of the parents of



children with autism spectrum disorder from two major cities in northern India for the study, and most of the respondents were mothers, and the study used the size of the parental stress model, and the results showed that the majority of the parents of people with autism disorder suffer from anxiety, stress, and psychological stress, especially when the child reaches adolescence, which is worrisome, and counseling services need to be provided to these parents, as the results resulted in that the fathers and mothers used many methods to cope with the psychological pressures caused by the child's disorder, some mothers used a lenient parenting style, and most fathers uses authoritarian parenting when dealing with their adolescent children, compared to pre-adolescence.

Rillotta, et al., (2010) conducted a study entitled: The quality of life of the family of the people with mental disabilities, which aimed to identify the quality of life of some families of persons with mental disabilities, and the study used the scale (fa-quality of life survey, 2006) to measure the quality of life of the family of a mentally disabled individual at home in South Australia and from the areas of the quality of life scale, family health, financial well-being, family relationships, and emotional and actual support from others to the family, the results of the study concluded that households considered the areas of the measure of quality of life to be important, and that health, and financial well-being are more important than actual support, the results of the study also indicated that there is general satisfaction in families in the areas of the scale, they have satisfaction with social relationships, and there is a need to distinguish between actual support, and emotional support from others; because the results gave a higher appreciation of emotional support than actual support.

METHODOLOGY

Introduction

The researcher in this study used the conscious approach by using a semi-structured interview, and (Croswell, 2017) pointed out the importance of the conscious approach that includes depth, and persistence in introducing the social situations, and stated (Al-Haddad, 2019) that the descriptive approach is realistic; because it studies the phenomenon, as it actually is and uses various appropriate methods of quantitative and qualitative to express the phenomenon and explain it; in order to understand and to analyze the researched phenomenon, and so the quantitative expression gives us a numerical description in which it clarifies the amount of the phenomenon, its size, and the face of its connection to the other phenomenon, or the qualitative expression, which describes to us the phenomenon and explains its characteristics.

Population of the study:

Al-Ashwah (2014) stated that the study population is: the elements related to the problem of the study as a whole, to which the researcher seeks to generalize the results of the study, so the researcher seeks the participation of all members of society, but the difficulty lies in the fact that the number of members of the community may be large, so that the researcher cannot involve them all. Therefore, the researcher resorts to the sample (Al-Ashwah, 2014), and the population of the sample of the current study may consist of mothers of children with intellectual disabilities in the two regions: Mecca and Jeddah,



Sample of the study:

The researcher conducted a survey sample for a corresponding question consisting of (2) mothers, and the study sample consisted of (20) mothers of children with intellectual disabilities in my region: Mecca and Jeddah in Saudi Arabia, they were selected in a deliberate way, and some criteria were determined to select the participants in the study sample represented in being the mother of a child with intellectual disabilities, and the age of the child up to the age of (16) years, and the mother has received the psychological counseling service, or if she does not receive the service she expresses her opinion on it. The anonymity of the participants was taken into account, and each participant was given a nominal code to hide their original identity when analyzing, and listing their answers to interview questions, taking into account the ethics of scientific research.

Research Instrument:

The main study tool was the interview, where the researcher built an interview on the topic of psychological counseling for mothers of children with intellectual disabilities, and the structured interview was used to collect data, which is a tool directed at mothers of children with intellectual disabilities.

In its final form, the tool consisted of two parts, the first part: includes demographic data, including: the age of the mother, her educational qualification, the sex of the child and the severity of the disability, the age of the child, the city, the school, and the second part, and includes (17) questions distributed over (3) sub-dimensions, namely:

- The first dimension: the reality of psychological counseling services provided to mothers of children with intellectual disabilities.
- The second dimension: evaluation of psychological counseling services provided to mothers of children with intellectual disabilities.
- The third dimension: proposals for the development of psychological counseling services.

FINDINGS AND DISCUSSION

Introduction

In this chapter, the researcher deals in detail with the findings of the study, through qualitative analysis of the data, where the most prominent results of the study were limited to three main dimensions, as follows:

- **The first dimension:** the reality of psychological counseling services provided to mothers of children with intellectual disabilities.
- **The second dimension:** evaluation of psychological counseling services provided to mothers of children with intellectual disabilities.



- **The third dimension:** Presentation of some proposals; to develop psychological counseling services provided to mothers of children with intellectual disabilities; to achieve this, the researcher conducted (20) interviews with some mothers of children with intellectual disabilities, in the regions of Makkah and Jeddah, and the dimensions can be summarized in illustration No. (1).

THE FINDINGS:

FIRST: The reality of psychological counseling services provided to mothers of children with intellectual disabilities.

Through the responses of the participants, a number of categories were reached, which fall under the reality of psychological counseling services provided to mothers of people with intellectual disabilities, the most prominent of these categories: motives for resorting to psychological counseling service, the availability of the psychological counseling service, and the reasons for not receiving the service.

SECOND: Evaluation of psychological counseling services provided to mothers of children with intellectual disabilities.

Through the responses of the participants, a number of categories were reached that fall under the evaluation of psychological counseling services provided to mothers of children with intellectual disabilities, the most prominent of which were: the impact of counseling services on families, the quality of service between the government and the private, and the extent of maternal satisfaction with the counseling service.

THIRD: Proposals for the development of psychological counseling services provided to mothers of children with intellectual disabilities.

Development is a natural health phenomenon in the lives of individuals and institutions, and has great importance in increasing the efficiency and effectiveness of job performance, especially in this age, which requires comprehensive modernization in all fields, and by the way this is reflected in the field of psychological counseling.

CONCLUSION

Initially, with regard to the reality of psychological counseling services provided to mothers of children with intellectual disabilities, the motives for resorting to psychological counseling were to take advantage of the subject of entering school, out of anxiety, fear, feeling depressed, psychological discomfort, and out of the elimination of some bad behaviors such as stubbornness, and psychological discomfort, and out of learning, knowledge, and how to deal with the child, and it is also noted that and sometimes the most effective way to resort to psychological counseling services is referral on the other hand, and sometimes the counselor or psychologist may play another role, which is apply tests and psychometrics until the institution makes the decision whether to keep the child in a program or stages.



As for the availability of the psychological counseling service, it was available to some extent both in the public sector and in the private sector, regardless of the nature of this service, its pros and cons.

As for the reasons for not receiving psychological counseling services, it is a matter of scientific honesty, and within the framework of monitoring the reality as it is, the interviews included many mothers who did not receive psychological counseling services, and the reasons for this were mostly due to the unwillingness of some mothers to receive psychological counseling services, and the reason behind this may be that the child's problem is simple, and facilitates the possibility of dealing with sometimes, some parents may refuse psychological counseling convinced that it is useless, or that it is related to mental illness, and madness only, others may need counseling, but the school or center has not provided him with proper service, and there are many mothers who may resort to psychiatric medications, when the psychiatrist immediately writes them down for the child, and the need for psychological counseling sessions is weakened.

The study also found that with regard to the evaluation of psychological counseling services provided to mothers of children with intellectual disabilities including the impact of psychological counseling services on families, the degree and type of these benefits varied, including: self-confidence, child acceptance, psychological satisfaction, clarity of vision, and the following: self-confidence, child acceptance, psychological satisfaction, clarity of vision, and the Psychological stability, getting rid of anxiety, psychological stress, nervousness, in addition to having a vast difference, clarity of vision, training on things that were difficult, unknown to mothers, and get rid of barriers with the child, and good understanding; so that some of them became helping to spread understanding as for the assessment of the quality of service between the government sector and the private sector by mothers, it was clear that the personal experiences of mothers with psychological counseling in government and private agencies relied primarily on their personal experiences, and they pointed out on some negatives and positives on both sides, and that the private sector is a little bit over the government sector, the researcher also noted that there is a negative mental image printed in the minds of many mothers about government services, and in what was concluded from the pros and cons, the pros and cons of the psychological counseling service in government institutions were the absorption of the child, and the accuracy of the diagnosis, the disciplined appointments, and the negatives were represented by the lack of tools, weak control, attention to cases, speed in writing the medicines, psychological sedatives, and about the positives of the psychological counseling service in private institutions, they were represented in high quality, availability of tools, spatial care, attention to the situation, about the negatives, some did not mention a negative except for one negative, which is the same as what I told mothers while talking about service in the governmental sector, related to the expediency, writing medicines, sedatives instead of guidance.

With regard to the extent of mothers' satisfaction with psychological counseling services, there were similarities that exceeded the satisfaction of families with the psychological counseling services provided to them. Proposals for the development of psychological counseling services provided by



mothers with intellectual disabilities included the need to increase mothers' awareness of the importance of psychological counseling with counseling services focusing on adolescence, especially for girls as well as focusing counseling services on some important and thorny topics, such as: sex education, Integration into schools, the need for government centers for psychological counseling or the expansion of the establishment of psychiatric hospitals with an increase in the number of psychologists in general education schools, schools and institutes of special education, as well as facilitating the procedures for obtaining the service, and one of the things that many mothers stressed is the provision of psychological counseling services as soon as the mother learns of the existence of a disability in her child, so that she can accept the child from the very beginning, and learning how to deal with it.

خدمات الاستشارة النفسية المقدمة لأمهات الأطفال ذوي الإعاقة الذهنية (المعرفات)

أستاذ مشارك في التربية الخاصة ، جامعة أم القرى ، مكة المكرمة ، المملكة العربية السعودية

الباحثين	
أستاذ مشارك في التربية الخاصة ، جامعة أم القرى ، مكة المكرمة ، المملكة العربية السعودية	روان صالح عبدالله النفيسي
أستاذ مشارك في التربية الخاصة ، جامعة أم القرى ، مكة المكرمة ، المملكة العربية السعودية	ماهر تيسير شرادجة
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Keyword	
<i>psychological counseling, intellectual disability, mothers of children with disabilities.</i>	

المخلص:

هدفت الدراسة الحالية إلى التعرف على واقع خدمات الإرشاد النفسي المقدمة لأمهات الأطفال ذوي الإعاقة الذهنية ، مع تقييم ما تم تقديمه من هذه الخدمات وتحديد المقترحات لتطوير خدمات الإرشاد النفسي المقدمة لأمهات الأطفال ذوي الإعاقة الذهنية. واستخدمت الدراسة المنهج النوعي ، واعتمدت على المقابلة كأداة أساسية لجمع بيانات الدراسة ، حيث تكونت عينة الدراسة من (20) أمهات لأطفال ذوي إعاقة ذهنية ينتمون إلى بعض معاهد التربية الخاصة والتكامل. برامج في مدينة مكة المكرمة وجدة بالمملكة العربية السعودية ، ووجدت نتائج الدراسة توافر خدمة الإرشاد النفسي إلى حد ما سواء في القطاع الحكومي أو الخاص بغض النظر عن طبيعة هذه الخدمة وإيجابياتها وسلبياتها. كما كشفت الدراسة عن وجود آثار إيجابية للإرشاد النفسي على الأمهات ، أو تقييم جودة الخدمة بين الحكومة والقطاع الخاص من قبل الأمهات. وأشاروا إلى بعض السلبيات والإيجابيات لدى الجانبين فيما يتعلق بمدى رضا الأمهات عن خدمات الإرشاد النفسي. - كان هناك تشابه في رضا الأسر عن خدمات الإرشاد النفسي ، أو مقترحات لتطوير خدمات الإرشاد النفسي التي تقدمها الأمهات ذوات الإعاقة الذهنية ، وشملت الحاجة إلى زيادة وعي الأمهات ، مع التركيز على خدمات الإرشاد في سن المراهقة ، وخاصة للفتيات ، والحاجة إلى مراكز الإرشاد النفسي الحكومية أو التوسع في إنشاء مستشفيات الأمراض النفسية ، مع زيادة عدد الأخصائيين النفسيين ، وكذلك تسهيل الوصول إلى الخدمة ، وتقديم خدمات الإرشاد النفسي بمجرد أن تعلم الأم بوجود إعاقة في طفل.



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