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## Parents' needs of children with intellectual disability

**Aqeel Abdul Amir Noman**

Academic Nurse, Babylon Health Directorate-Iraq

Email: [aqeelbs77@gmail.com](mailto:aqeelbs77@gmail.com)

**Amean A. Yasir**

Prof. Dr, Community Health Nursing/ College of Nursing University of Babylon, Iraq

Email: [Dr.Amean@UoBabylon.edu.iq](mailto:Dr.Amean@UoBabylon.edu.iq)

**Abstract**--Background: Parents have a fundamental and important impact on the child's growth and development in various developmental, emotional, and mental aspects, and this effect increases if the child has a disability, as the period of his dependence on his parents is prolonged, and thus problems arise that require special needs. The study aimed to assess the parents' needs of children with intellectual disability and determine the associated socio-demographic variables. Methods: A descriptive cross-sectional study conducted by purposive sample of 123 parents of intellectual disability was selected through the use a non-probability sampling approach. The reliability of the questionnaire was achieved through a pilot study and then presented to experts to prove its validity. The total number of items included in the questionnaire was 15-items for cognitive needs, 12-items for material, 13-items for social needs and 8-items for emotional needs. The data was collected by using the interview method and analyzed by the application of descriptive and inferential statistical data analysis approach. Results: The results of the study indicated that (82.9%) of the parents exhibited a cognitive needs in a high degree, (65%) exhibited a material needs in a high degree, (75.6%) exhibited a social needs in a high degree and (52.8%) exhibited a moderate needs in a high degree. There were differences in parents emotional needs with regards children age, cognitive, material, social and emotional needs with regards degree of intellectual disability ( $p < 0.05$ ). Conclusions: The most urgent needs of parents of children with intellectual disabilities, it can be noted that the material most urgent needs, followed by the cognitive needs, then the social needs and the emotional needs. Educating parents of intellectually disabled children about the material rights of their children, which are provided by government agencies, and expanding

the opening of charitable and productive projects to serving children with intellectual disabilities and their families.

**Keywords**--parents', needs, intellectual disability.

## **Introduction**

Intellectual disability (ID), also known as general learning disability [1], and formerly mental retardation (MR) is a generalized neuro-developmental disorder characterized by significantly impaired intellectual and adaptive functioning [2]. It is defined by an IQ under 70, in addition to deficits in two or more adaptive behaviors that affect every day, general living [3]. Intellectual disability is subdivided into syndromic intellectual disability, in which intellectual deficits associated with other medical and behavioral signs and symptoms are present, and non-syndromic intellectual disability, in which intellectual deficits appear without other abnormalities. Down syndrome and fragile X syndrome are examples of syndromic intellectual disabilities [4]. Intellectual disability affects about 2 to 3% of the general population. Seventy-five to ninety percent of the affected people have mild intellectual disability. Non-syndromic, or idiopathic cases account for 30 to 50% of these cases. About a quarter of cases are caused by a genetic disorder [5], and about 5% of cases are inherited from a person's parents. Cases of unknown cause affect about 95 million people as of 2013 [6].

Intellectual disability (ID) becomes apparent during childhood and involves deficits in mental abilities, social skills, and core activities of daily living (ADLs) when compared to same-aged peers [7]. There often are no physical signs of mild forms of ID, although there may be characteristic physical traits when it is associated with a genetic disorder e.g., Down syndrome [8]. Parents have a fundamental and important impact on the child's growth and development in various developmental aspects. Emotional and mental, and this effect increases if the student has a disability, as the period of his dependence on his parents is prolonged, and therefore special needs arise from his disability [9]. Given the importance of the role that parents play in the success of raising and rehabilitating a child with a disability, it is found research that talks about the importance of activating that role, and the need to overcome obstacles that prevent parents from playing their important role with institutions specialized in building their children's personalities through partnership in their upbringing and education [10]. It is clear that parents of children with intellectual disabilities; need to have sufficient information about their child's disability, how to deal with it within the family, and what to expect in the future, as well as the need to know what aids and services the community can provide [11]. In order for parents to play their role in caring for and educating their children, it is necessary to know the nature of those needs, and to identify the aspects of support and assistance that they are asking for, whether in terms of cognitive, material, emotional or social. Therefore, thus study aimed to assess intellectual disability children parents needs and determine the associated demographic variables in Babylon Province/ Iraq.

## Methods

The descriptive cross-sectional research design technique entails questioning individuals of the study population with the sole purpose of describing the examined phenomena in terms of its type and degree of existence. The study is carried out in Hilla City/Babylon Province at four centers for rehabilitation. These centers include Al Raja Institute for Mental Disabilities, Learn the Pronunciation of Imam Al-Sadiq Hospital, Psychological Counseling for Imam Al-Sadiq Hospital and Babel Rehabilitation Center for the Disabled. Study instrument: The questionnaire is one of the means to help collect data that contribute to achieving the results expected by the study, so the researcher designed this questionnaire, which aims to clarify the study objectives and significance by obtaining answers to the study's questions. This questionnaire consists of two parts which includes the following:

- First one is the socio-demographic information which include child age, gender, degree of disability; and parents education, occupation and economic.
- Second one deals with parents needs adopted and developed by Hawsawi [12] who investigated the needs of parents of intellectually disabled students and composed of 48-items divided into four sections include:
  - Cognitive needs: Which composed of 15-items measured and scored on 3-point (3×Need so much, 2× Sometime need and × Not need).
  - Material needs: Which composed of 12-items measured and scored on 3-point (3×Need so much, 2×Sometime need and × Not need).
  - Social needs: Which composed of 13-items measured and scored on 3-point (3×Need so much, 2×Sometime need and × Not need).
  - Emotional needs: Which composed of 8-items measured and scored on 3-point (3×Need so much, 2×Sometime need and × Not need).

Each component of the study questionnaire was given a level of validity based on its linguistic suitability, connection with the dimension of study variables to which it was assigned, and fit for the study population. Parents provided data to assess the questionnaire's reliability, and the test was given to eight caregivers from the research group who were not included in the initial sample. Cronbach's alpha was discovered to be 0.89. In order to statistically analyze the data collected from the study sample to arrive at the results, the researcher used the SPSS ver-20. A One-way analysis of variance and independent sample *t test* were used to examine variations in variables based on socio-demographic characteristics. For continuous variables, descriptive data is reported as mean standard deviation, and for categorical variables, it is shown as number (percent). Statistical significance was defined as a *p* 0.05.

## Results

In terms of frequencies and percentage, out of 123 parents of intellectual disability children aged 10-12 years old were recorded the highest percentage among children 51 (41.5%) and the lowest percentage were aged >12 years 22 (17.9%). In regards with gender, the female children were composed 75 (61%) and the remaining were male children. Degree of intellectual disability, most of

children were moderate intellectual disability 69 (56.1%) and the small ration were sever disability 26 (21.1%).

Table 1  
Socio-Demographic Characteristics of Children (SDVs)

SDVs	Class	n	%
Age/years	<10 years old	50	40.7
	10-12 years old	51	41.5
	>12 years old	22	17.9
Gender	Male	48	39.0
	Female	75	61.0
Degree of disability	Mild	28	22.8
	Moderate	69	56.1
	Sever	26	21.1

In terms of parents education, most of fathers 49 (39.8%) were college graduated, while, most of mothers 46 (37.4%) were read and write educated. Occupation associated findings, governmental and non-governmental profession were associated fathers 48 (39%) for each them, while, the unemployment profession were associated mothers 60 (48.8%). Finally, the moderate socio-economic status were constituted the highest ratio 50 (40.7%) among parents of intellectual disability children.

Table 2  
Distribution of Parents of Intellectual Disability Children Information

Variables	Classification	n	%
Fathers Education	Illiterate	16	13.0
	Read & Write	13	10.6
	Elementary school	22	17.9
	Middle school	9	7.3
	Secondary school	14	11.4
	Collage and above	49	39.8
Mothers Education	Illiterate	18	14.6
	Read & Write	46	37.4
	Elementary school	21	17.1
	Middle school	4	3.3
	Secondary school	16	13.0
Fathers Occupation	Collage and above	18	14.6
	Government profession	48	39.0
	Non-government profession	48	39.0
Mothers Occupation	unemployment	27	22.0
	Government profession	40	32.5
	Non-government profession	23	18.7
Economic Status	unemployment	60	48.8
	Sufficient	40	32.5
	Moderate	50	40.7
	Insufficient	33	26.8

The statistically distribution of parents needs profile. Findings described by low level mean scores revealed that the material needs scored a large degree ( $M=1.33$ ), followed by the cognitive needs ( $M=1.44$ ), then the social needs ( $M=1.53$ ) and the emotional needs ( $M=1.79$ ) respectively.

Table 3  
Overall Cognitive Needs among Intellectual Disability Parents Needs

Needs	Class	n	%	M ( $\pm$ SD)
Cognitive needs	Needs in High Degree	102	82.9	20.06 $\pm$ 5.17
	Needs in Moderate Degree	18	14.6	
	Not needs	3	2.4	
	Total	123	100.0	
Material needs	Needs in High Degree	80	65.0	17.38 $\pm$ 4.16
	Needs in Moderate Degree	42	34.1	
	Not needs	1	0.8	
	Total	123	100.0	
Social needs	Needs in High Degree	93	75.6	19.98 $\pm$ 5.60
	Needs in Moderate Degree	23	18.7	
	Not needs	7	5.7	
	Total	123	100.0	
Emotional needs	Needs in High Degree	56	45.5	14.30 $\pm$ 2.74
	Needs in Moderate Degree	65	52.8	
	Not needs	2	1.6	
	Total	123	100.0	

Table 4  
Differences in Needs with regard Intellectual Disability Children Age Groups

Child's Age	Source variance	of	Sum of Squares	d.f	Mean Square	F	$p \leq 0.05$
Cognitive Needs	Between Groups		.453	2	.227	1.936	.149
	Within Groups		14.051	120	.117		
	Total		14.504	122			
Material Needs	Between Groups		.313	2	.156	1.301	.276
	Within Groups		14.417	120	.120		
	Total		14.729	122			
Social Needs	Between Groups		.457	2	.228	1.233	.295
	Within Groups		22.229	120	.185		
	Total		22.686	122			
Emotional Needs	Between Groups		1.783	2	.891	8.497	.000

Within Groups	12.590	120	.105
Total	14.373	122	

Findings demonstrated there were no significant differences in parents cognitive, material and social needs with regards child's age ( $p > 0.05$ ); and significant differences in parents emotional needs with regards child's age ( $p < 0.05$ ).

Table 5  
Differences in Needs with regard Intellectual Disability Children Gender

Variables	Gender	Mean	SD	t-value	d.f	$p \leq 0.05$
Cognitive Needs	Male	1.269 4	.27331	1.771	121	.079
	Female	1.381 3	.37896			
Material Needs	Male	1.512 2	.39798	1.636	121	.104
	Female	1.407 8	.30682			
Social Needs	Male	1.615 4	.50852	1.619	121	.108
	Female	1.487 2	.36855			
Emotional Needs	Male	1.731 8	.32513	1.450	121	.150
	Female	1.823 3	.35181			

Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards child's gender ( $p > 0.05$ ).

Table 6  
Differences in Needs with regard Degree of Intellectual Disability

Degree of Disability	Source of variance	Sum of Squares	d.f	Mean Square	F	$p \leq 0.05$
Cognitive Needs	Between Groups	1.642	2	.821	7.660	.001
	Within Groups	12.862	120	.107		
	Total	14.504	122			
Material Needs	Between Groups	3.947	2	1.973	21.960	.000
	Within Groups	10.783	120	.090		
	Total	14.729	122			
Social Needs	Between Groups	.108	2	.054	4.287	.051
	Within Groups	22.578	120	.188		
	Total	22.686	122			
Emotional Needs	Between	1.697	2	.849	8.034	.001

Groups			
Within Groups	12.676	120	.106
Total	14.373	122	

Findings demonstrated there were significant differences in parents cognitive, material, social and emotional needs with regards child's degree of disability ( $p < 0.05$ ).

Table 7  
Differences in Needs with regard Fathers Education

Fathers Education	Source of variance	Sum of Squares	d.f	Mean Square	F	$p \leq 0.05$
Cognitive Needs	Between Groups	.811	5	.162	1.386	.234
	Within Groups	13.693	117	.117		
	Total	14.504	122			
Material Needs	Between Groups	.597	5	.119	.988	.428
	Within Groups	14.132	117	.121		
	Total	14.729	122			
Social Needs	Between Groups	1.299	5	.260	1.421	.222
	Within Groups	21.387	117	.183		
	Total	22.686	122			
Emotional Needs	Between Groups	.793	5	.159	1.367	.242
	Within Groups	13.580	117	.116		
	Total	14.373	122			

Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards fathers education ( $p > 0.05$ ).

Table 8  
Differences in Needs with regard Mothers Education

Mothers Education	Source of variance	Sum of Squares	d.f	Mean Square	F	$p \leq 0.05$
Cognitive Needs	Between Groups	.609	5	.122	1.026	.406
	Within Groups	13.895	117	.119		
	Total	14.504	122			
Material Needs	Between Groups	1.572	5	.314	.796	.710
	Within Groups	13.157	117	.112		
	Total	14.729	122			
Social Needs	Between Groups	.623	5	.125	.660	.654
	Within Groups	22.064	117	.189		

	Total	22.686	122			
Emotional Needs	Between Groups	2.225	5	.445	1.285	.081
	Within Groups	12.148	117	.104		
	Total	14.373	122			

Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards mothers education level ( $p>0.05$ ).

Table 9  
Differences in Needs with regard Fathers Occupation

Fathers Occupation	Source of variance	Sum of Squares	d.f	Mean Square	F	$p \leq 0.05$
Cognitive Needs	Between Groups	.064	3	.021	.177	.912
	Within Groups	14.440	119	.121		
	Total	14.504	122			
Material Needs	Between Groups	.682	3	.227	1.926	.129
	Within Groups	14.047	119	.118		
	Total	14.729	122			
Social Needs	Between Groups	1.114	3	.371	2.049	.111
	Within Groups	21.572	119	.181		
	Total	22.686	122			
Emotional Needs	Between Groups	.465	3	.155	1.327	.269
	Within Groups	13.908	119	.117		
	Total	14.373	122			

Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards fathers occupation ( $p>0.05$ ).

Table 10  
Differences in Needs with regard Mothers Occupation

Mothers Occupation	Source of variance	Sum of Squares	d.f	Mean Square	F	$p \leq 0.05$
Cognitive Needs	Between Groups	.458	2	.229	1.957	.146
	Within Groups	14.046	120	.117		
	Total	14.504	122			
Material Needs	Between Groups	.579	2	.289	2.453	.090
	Within Groups	14.151	120	.118		
	Total	14.729	122			
Social Needs	Between	.476	2	.238	1.285	.280

		Groups				
		Within Groups	22.211	120	.185	
		Total	22.686	122		
Emotional Needs	Between Groups	.023	2	.011	.095	.909
	Within Groups	14.350	120	.120		
	Total	14.373	122			

Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards mothers occupation ( $p > 0.05$ ).

Table 11  
Significant Differences in Needs with regard Economic Status

Economic Status	Source of variance	Sum of Squares	d.f	Mean Square	F	$p \leq 0.05$
Cognitive Needs	Between Groups	1.646	2	.823	.681	.101
	Within Groups	12.858	120	.107		
	Total	14.504	122			
Material Needs	Between Groups	.148	2	.074	.611	.545
	Within Groups	14.581	120	.122		
	Total	14.729	122			
Social Needs	Between Groups	.251	2	.125	.671	.513
	Within Groups	22.435	120	.187		
	Total	22.686	122			
Emotional Needs	Between Groups	.600	2	.300	2.612	.078
	Within Groups	13.773	120	.115		
	Total	14.373	122			

Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards economic status ( $p > 0.05$ ).

## Discussion

Parents have a fundamental and important impact on the child's growth and development in various developmental, emotional, and mental aspects, and this effect increases if the child has a disability, as the period of his dependence on his parents is prolonged, and thus problems arise that require special needs. The study aimed to assess the parents' needs of children with intellectual disability and determine the associated socio-demographic variables. The most urgent needs of parents of children with intellectual disabilities, according to the results of this study, it can be noted that in figure (1), and described by low level mean scores revealed that the material needs scored a large degree ( $M=1.33$ ), followed by the cognitive needs ( $M=1.44$ ), then the social needs ( $M=1.53$ ) and the emotional needs ( $M=1.79$ ) respectively. The results of this study were in agreement with the

study conducted by Guralnick, whose results indicated that material needs came first, followed in order by cognitive needs, then the need for social and social support [13]. Gerstein et al., also stressed the need for families of mentally disabled people for financial assistance and payment of expenses [14].

### **Cognitive Needs among Parents of Intellectual Disability**

Findings demonstrated that the (82.9%) of parents of intellectual disability children exhibited cognitive needs in a high degree as described by low mean scores 20.06 ( $\pm 5.17$ ). The researcher attributes this result to the existence of a clear deficiency in the provision of educational and guidance programs for parents, as we know that the non-adaptive behavioral problems that appear on the mentally disabled are a major concern for the family, and these problems constitute negative attitudes towards the mentally disabled by others in society, and at the same time, these disabled people develop learning and communication problems, and thus need to be addressed and controlled. The result of this study agrees with the study conducted by Sahay et al., whose results indicated that parents need cognitive needs to raise and educate their intellectually disabled children [15]. The results of this study also agreed with the study conducted by Kaiser and Roberts on three groups of parents of children with intellectual disabilities, autism and normal, whose results confirmed the need for parents of children with intellectual disabilities (Down syndrome) for information [16]. Also, it was supported by the study conducted by Kilincaslan et al., whose results indicated the families' need for family counseling and appropriate medical services, and to obtain information regarding the nature of their children's disabilities, and how to deal with them [17]. As well as what was indicated by the study conducted by Gohel et al. on the parents of intellectual disabilities [18]. Or its results emphasized the need of parents for information about how to deal with the child's behavior, and their need to know the future of their intellectually disabled child. . The results of this study are also in agreement with the study by Bailey et al. [19].

### **Material Needs among Parents of Intellectual Disability**

Findings demonstrated that the (65%) of parents of intellectual disability children exhibited material needs in a high degree as described by low mean scores 17.38 ( $\pm 4.16$ ). This is due to the high costs of caring for this category, which consumes the bulk of the income of these families, which means that it has a negative impact on meeting all the needs of the rest of the family. Although there are no organizations that pay an amount of money to each mentally disabled person every month, so we find that they have a high degree of financial needs. The urgent need for financial support can be explained by the characteristics of the study sample, as one third of the sample (32.5%) of the total number of parents do not have a monthly income, and (40.7%) of the parents have an average monthly income and they are the largest group of the study sample, and this the level of income may not meet the basic requirements of living due to the high prices. The results of this study are also consistent with the study conducted by Sanli and Barut, whose results indicated that low-income families suffer from health problems and psychological pressures more than families with medium and high incomes [20]. This was indicated by Ebrahim et al., the importance of

the dimension of the material needs of the family of the mentally handicapped child [21]. It is also supported by the results of the study carried out by Baldwin, whose results indicated the need for parents of intellectually disabled to have a stable monthly income [22].

### **Social Needs among Parents of Intellectual Disability**

Findings demonstrated that the (75.6%) of parents of intellectual disability children exhibited social needs in a high degree as described by low mean scores 19.98 ( $\pm 5.60$ ). The researcher attributes this to the lack of programs available in the community that provide an opportunity for social interaction with the mentally disabled with their ordinary peers, and the feeling of parents that their children clearly lack social skills, which motivates them to search for them. Such programs are to increase the social adaptation programs for their children, and the participation of the intellectually disabled and their families in these forums plays a role in changing the society's attitudes towards them. The importance of the social needs of parents of mentally handicapped students stems from the need to create awareness programs in the community that define the category of intellectual disability, and meet their various social, psychological and educational needs through radio and television programs and the enactment of laws. It preserves their rights, and establishes associations that defend their rights. Preparing specialized professional cadres that provide services to them and their families, and encourage their integration into society. The results of this study are consistent with the study conducted by Wilkin, which indicated that mothers need family and social support. Taking care of the mentally handicapped child [23]. As well as Ahmadi et al., which confirmed that support of any kind or source meets the needs of mothers of children with intellectual disabilities, and that family support meets the needs of mothers of children with intellectual disabilities more than institutional support [24].

### **Emotional Needs among Intellectual Disability Parents Needs**

Findings demonstrated that the (52.8%) of parents of intellectual disability children exhibited emotional needs in a moderate degree as described by moderate mean scores 14.30 ( $\pm 2.74$ ). The results of this study are also in agreement with the studies include study of Llewellyn et al. (2003), Gousmett (2006) and Soresi et al., (2007), the results indicated that parents of mentally handicapped children need collective emotional support from other parents, and support from a relative of the mentally handicapped child's family. Exchanging available information about the program, services provided, future plans, and the importance of educational courses to increase family awareness of their son's disability and improve the quality of life for him [25,26,27]. The analysis of variance (ANOVA) showed that there were no significant differences in parents cognitive ( $p=0.194$ ), material ( $p=0.276$ ) and social ( $p=295$ ) needs with regards child's age; and significant differences in parents emotional needs with regards child's age ( $p=0.000$ ). The differences were in favor of the >12-year-old group, which recorded the highest mean scores of emotional needs (less emotional needs), and in contrast to the >10 year-old group, which recorded the lowest average emotional needs (more emotional needs). That is, the higher the age of the mentally disabled child, the lower the emotional needs of the parents, and the

less the child's age, the greater the needs. Thus, the age of the mentally disabled child can be an effective factor only in the needs of the families of mentally disabled children. This result agreed with Caples and Sweeney, which indicated that there were statistically significant differences in the needs according to the chronological age variable of the child on the emotional needs of the family of the disabled [28]. Also, agreed with Douglas et al., who confirmed that there are differences between the cognitive and emotional needs of parents of young disabled children compared to the needs of parents of disabled adult children, in favor of parents of young disabled children, as they are more in need. The reason for the no differences in cognitive, physical and social needs due to the ages of the mentally disabled can be attributed to the limited experience of parents in dealing with their children in general, whether they are young or old [29].

In current study findings deals with children gender analyzed by independent t-test and demonstrated that there were no significant differences in parents cognitive ( $p=0.079$ ), material ( $p=0.104$ ), social ( $p=0.108$ ) and emotional ( $p=0.150$ ) needs with regards child's gender. The absence of a significant difference in the needs of the parents of intellectual disabilities children according to the gender variable is evidence that the child, whether a boys or a girls, are needs that do not differ according to their gender, meaning that they have the same needs whether the handicapped is a boys or a girls. Findings demonstrated there were significant differences in parents cognitive needs (The differences were in favor of parents of intellectually disabled children to a sever degree at  $p=0.001$ ) as being more cognitive needs. According to material needs (The differences were in favor of parents of intellectually disabled children to a sever degree at  $p=0.000$ ) as being more material needs. According to social needs (The differences were in favor of parents of intellectually disabled children to a mild degree at  $p=0.051$ ) as being more social needs. According to emotional needs (The differences were in favor of parents of intellectually disabled children to a mild degree at  $p=0.001$ ) as being more emotional needs. The researcher attributed this result to the number of parents with moderate intellectual disabilities who reached (69), and they constituted (56.1%) of the total sample of the study, which led to differences in the cognitive, material and social needs in their favor. of parents with mild intellectual disabilities. The reason may also be the parents' limited experience in meeting the needs of their intellectually disabled children. These results agree with Boström et al., whose results indicated that the needs of parents of intellectually disabled children are slightly lower, compared to parents of severely disabled children [30].

Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards parents (fathers and mothers) education ( $p>0.05$ ). The results of this study agree with the study conducted by Duvdevany and Abboud, whose results indicated that there is no significant relationship between each of the mother's educational level and her psychological and material needs [31]. The results of this study also agreed with the study of Kilic et al., whose results confirmed that there are no statistically significant differences between families of low and high cultural level in cognitive needs and societal needs [32]. Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards mothers occupation ( $p>0.05$ ). This agreed with Mar, who confirmed that there is no

statistically significant relationship between the professional level of the parents and the needs of the families, meaning that the higher or lower the professional level of the parents, the more this leads to a similarity in their psychological, social, and recreational needs [33]. Findings demonstrated there were no significant differences in parents cognitive, material, social and emotional needs with regards economic status ( $p>0.05$ ). this findings come in agreement with findings conducted by El-Ganzory et al., emphasized that, first of all, the needs of mentally handicapped children do not differ according to their different economic levels, as they are the same needs [34]. As no matter how much the income increases or less, it does not change due to psychological problems that cannot be treated [35].

## Conclusions

The most urgent needs of parents of children with intellectual disabilities, according to the results of this study, and described by low level mean scores revealed that the material needs scored a large degree, followed by the cognitive needs, then the social needs and the emotional needs respectively. Expanding the opening of charitable and productive projects; Serving children with intellectual disabilities and their families.

## References

1. Scior, K., & Werner, S. (2015). Changing attitudes to learning disability. *Posjećeno*, 20(2019), 2016-08.
2. Ansberry, C. (2010). Erasing a Hurtful Label from the Books: Decades-long quest by disabilities advocates finally persuades state, federal governments to end official use of retarded. *Wall Street Journal*.(New York). Sect. US (col. 1).
3. Boat, T. F., & Wu, J. T. (2015). Mental disorders and disabilities among low-income children.
4. Barros, I. I., Leão, V., Santis, J. O., Rosa, R. C., Brotto, D. B., Storti, C. B., ... & Silva, W. A. (2021). Non-Syndromic Intellectual Disability and Its Pathways: A Long Noncoding RNA Perspective. *Non-coding RNA*, 7(1), 22.
5. Daily, D. K., Ardinger, H. H., & Holmes, G. E. (2000). Identification and evaluation of mental retardation. *American family physician*, 61(4), 1059-1067.
6. Vos, T., Barber, R. M., Bell, B., Bertozzi-Villa, A., Biryukov, S., Bolliger, I., ... & Dicker, D. (2015). Global Burden of Disease Study 2013 collaborators. Global, regional, and national incidence, prevalence, and years lived with disability for 301 acute and chronic diseases and injuries in 188 countries, 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. *Lancet*, 386(9995), 743-800.
7. Kaneshiro, N. K. (2016). Intellectual Disability. MedlinePlus, US National Library of Medicine.
8. American Psychiatric Association (APA) (2015). Diagnostic and Statistical Manual of Mental Disorders. 1994. *Washington DC*.
9. Wood, D., Crapnell, T., Lau, L., Bennett, A., Lotstein, D., Ferris, M., & Kuo, A. (2018). Emerging adulthood as a critical stage in the life course. *Handbook of life course health development*, 123-143.

10. Sandlund, M., Dock, K., Häger, C. K., & Waterworth, E. L. (2012). Motion interactive video games in home training for children with cerebral palsy: parents' perceptions. *Disability and rehabilitation*, 34(11), 925-933.
11. Ludlow, A., Skelly, C., & Rohleder, P. (2012). Challenges faced by parents of children diagnosed with autism spectrum disorder. *Journal of health psychology*, 17(5), 702-711.
12. Hawsawi, A. (2012). The needs of parents of intellectually disabled students and their relationship to some variables, a prospective study.
13. Guralnick, M. J. (2017). Early intervention for children with intellectual disabilities: An update. *Journal of Applied Research in Intellectual Disabilities*, 30(2), 211-229.
14. Gerstein, E. D., Crnic, K., Blacher, J., & Baker, B. (2009). Resilience and the course of daily parenting stress in families of young children with intellectual disabilities. *Journal of intellectual disability research*, 53(12), 981-997.
15. Sahay, A., Prakash, J., Khaique, A., Kumar, P., Meenakshi, S. P., Ravichandran, K., ... & Singh, N. S. (2013). Parents of intellectually disabled children: a study of their needs and expectations. *International Journal of Humanities and Social Science Invention*, 2(7), 1-8.
16. Kaiser, A. P., & Roberts, M. Y. (2013). Parent-implemented enhanced milieu teaching with preschool children who have intellectual disabilities.
17. Kilincaslan, A., Kocas, S., Bozkurt, S., Kaya, I., Derin, S., & Aydin, R. (2019). Daily living skills in children with autism spectrum disorder and intellectual disability: A comparative study from Turkey. *Research in Developmental Disabilities*, 85, 187-196.
18. Gohel, M., Mukherjee, S., & Choudhary, S. K. (2011). Psychosocial impact on the parents of mentally retarded children in Anand District. *Healthline*, 2(2), 62.
19. Bailey Jr, D. B., Skinner, D., Correa, V., Arcia, E., Reyes-Blanes, M. E., Rodriguez, P., ... & Skinner, M. (1999). Needs and supports reported by Latino families of young children with developmental disabilities. *American Journal on Mental Retardation*, 104(5), 437-451.
20. Sanli, E., & Barut, Y. (2016). The determination of the needs of the families with a mentally handicapped child according to their mood.
21. Ebrahim, O. S., Al-Attar, G. S., Gabra, R. H., & Osman, D. M. (2020). Stigma and burden of mental illness and their correlates among family caregivers of mentally ill patients. *Journal of the Egyptian Public Health Association*, 95(1), 1-9.
22. Baldwin, J. L. (2006). *Designing Disability Services in South Asia: Understanding the Role that Disability Organizations Play in Transforming a Rights-based Approach to Disability* (Doctoral dissertation, University of Pittsburgh).
23. Wilkin, D. (2016). *Caring for the mentally handicapped child*. Routledge.
24. Ahmadi, K., Khodadadi, G. H., Anisi, J., & Abdolmohammadi, E. (2011). Problems of families with disabled children. *Journal of Military Medicine*, 13(1), 49-52.
25. Llewellyn, G., McConnell, D., Cant, R., & Westbrook, M. (2003). Support network of mothers with an intellectual disability: An exploratory study. *Journal of Intellectual and Developmental Disability*, 24(1), 7-26.
26. Gousmett, S. (2006). Families of children with developmental disabilities: Family environment, social support and sibling well-being.

27. Soresi, S., Nota, L., & Ferrari, L. (2007). Considerations on supports that can increase the quality of life of parents of children with disabilities. *Journal of Policy and Practice in Intellectual Disabilities, 4*(4), 248-251.
28. Caples, M., & Sweeney, J. (2011). Quality of life: a survey of parents of children/adults with an intellectual disability who are availing of respite care. *British Journal of Learning Disabilities, 39*(1), 64-72.
29. Douglas, T., Redley, B., & Ottmann, G. (2017). The need to know: The information needs of parents of infants with an intellectual disability—A qualitative study. *Journal of advanced nursing, 73*(11), 2600-2608.
30. Boström, P. K., Broberg, M., & Hwang, P. (2010). Parents' descriptions and experiences of young children recently diagnosed with intellectual disability. *Child: care, health and development, 36*(1), 93-100.
31. Duvdevany, I., & Abboud, S. (2003). Stress, social support and well-being of Arab mothers of children with intellectual disability who are served by welfare services in northern Israel. *Journal of Intellectual Disability Research, 47*(4-5), 264-272.
32. Kilic, D., Gencdogan, B., Bag, B., & Arican, D. (2013). Psychosocial problems and marital adjustments of families caring for a child with intellectual disability. *Sexuality and Disability, 31*(3), 287-296.
33. Mar, C. L. (1996). *Parents of children with mental retardation living in Taiwan: An analysis of service needs and perceived stress*. University of Northern Colorado.
34. El-Ganzory, G. S., El Matty, G. M. A., & AbdelRahman, M. (2013). Effect of counseling on patterns of care, stress and life burden on parents of mentally retarded children. *Life Science Journal, 10*(3), 1850-1857.
35. Menolascino, F. J., & Stark, J. A. (Eds.). (2012). *Handbook of mental illness in the mentally retarded*. Springer Science & Business Media.