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Support for families intellectually disabled child by the Centers for Rehabilitation - Education - Educational in the Silesian Agglomeration

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ABSTRACT

Introduction:

A child with intellectual disability and take care of him is a big challenge for the whole family. There is no doubt, that parents need support for themselves and their children in order to cope with numerous burdens. The article deals with the problem of supporting families of a child with intellectual disabilities according the Centers of Rehabilitation and Education in the Silesian Agglomeration. This study is an attemptation to identify the role of parents in the process of care and education of a child with intellectual disability, furthermore a family support system too.

Objectives:

The aim of the study is to describe and identify the assistance of family with the intellectually disabled child according the support of Centers of Rehabilitation and Education in the Silesian Agglomeration.

Material and methods:

In the research, the questionnaire survey was carried out among the Centers of Rehabilitation and Education in Chorzów and Bytom cities, from March to April 2014. The MS Excel application and the SPSS program were used to set up the database and statistical analysis of the collected informations. Further, the contingency tables were performed. By using the chi-square independence test (χ2 test), the relationship between variables was checked. It was assumed that the results are statistically significant at $p \leq 0.05$.

Results:

Among the surveyed parents, more than 63% admitt that they are looking for support in understanding and accepting the disability of their child. Every eighth family sought help among the Association's centers. Each supported family by the OREW Association have a certain expectations to them. The research find out, that every fourth respondent (23.9%) expect much more rehabilitation and education. On the second place is to improve the child's health. The 17.4% of respondents assessed that their expectations are fulfilled. Findings of the surveyed employees of Centers of Rehabilitation and Education shows that, more than 40% do not appreciate the cooperation with parents and guardians of disabled childs. In addition, every third respondent do not answer to this question. Every fourth employee believes that parents and attendant have insufficient knowledge about the disability of their own child.

Conclusions:

Undoubtedly, the activity of Centers of Rehabilitation and Education is invaluable. It is necessary to increase and tightening the cooperation of parents and guardians of disabled child with employees of Centers of Rehabilitation and Education like OREW Institutions. Shared work on the development of children and mutual support will certainly contribute to commensurate results. The presence and attitude of parents directly promote the progress of their disabled child.

Keywords: intellectual disability, family, support for the family

Introduction:

The birth of a child with a disability causing fundamental changes in the family system. Each person learns his new role, defines its place, makes a kind of re-evaluation. You need to find a place not only for a new family member, but for a new lifestyle. It is demolished its existing structure and how it functions stabilized. This crisis limiting family life causes changes in emotional and social functioning (Sekułowicz 2010). Care for disabled children is a challenge for the whole family. Such circumstances put parents with a difficult dilemma:

accept or reject their child and their own destiny, dramatically reworked (Sobczyńska 1995). There is no doubt that in order to cope with the many stresses parents need support for themselves and for their children. Child support should be based on rehabilitation, therapy, education, in order to strengthen and develop strengths in the child a sense of belonging and self-determination. The whirling associated with the diagnosis, rehabilitate, seeking new forms of assistance and therapy, you can not forget one thing: "for the integration of the disabled child with the family needed two levels - emotional (feeling of attachment to family, love, Bonding with its members, acceptance of the common value systems) and - Task Force (participation in the life of the household) (Sadowski 1996). The role of parents in the care and upbringing of the child with a disability has undergone a kind of evolution of the total isolation of the child from the parents, through the gradual perception of its role in rehabilitation, a total focus on the family, her needs and abilities. In this approach, the subject is help family who needs support. In Poland, the system works to help your child with a disability involving the care of children from birth (Act on the Education System of 7.09.1991r). It is run by non-governmental organizations m.in eg. Polish Association for Persons with Intellectual Disability. Children who at birth has any deviations from the standards, can use up to 7 years of age with so-called. early intervention, which is carried out according to your needs In Poland, the system works to help your child with a disability involving the care of children from birth (Act on the Education System of 7.09.1991r). It is run by non-governmental organizations m.in eg. Polish Association for Persons with Intellectual Disability. Children who at birth has any deviations from the standards, can use up to 7 years of age with so-called. early intervention, which is carried out according to your needs In Poland, the system works to help your child with a disability involving the care of children from birth (Act on the Education System of 7.09.1991r). It is run by non-governmental organizations m.in eg. Polish Association for Persons with Intellectual Disability. Children who at birth has any deviations from the standards, can use up to 7 years of age with so-called. early intervention, which is carried out according to your needs individual by a physiotherapist with special skills to work with young children, neurologopedę, psychologist and educator (Reg. 4.04.2005r of the Ministry of Education). For the child reaches school age with a decision about the need for special education organized in special education kindergartens, schools and centers (Reg. Ministry of 17.11.2010r). Graduate school or a special rehabilitation center - educational depending on the predisposition associated with the degree of intellectual disability, with the right support is able to take up employment in the open labor market and factory activity. If it can not operate a good place for it are therapy workshops (Dz.U1997, nr.123, poz.778) or community centers (Dz.U2011, 149, poz.887) where people with severe and profound intellectual disabilities can participate. Discussions are also hostels or sheltered housing (Dz.U.2009, nr175, poz.1362 as amended), (eg. Polish Association for Persons with Intellectual Disability in Bytom), where live people with intellectual disabilities, found in a difficult situation.

Families with a child with intellectual disabilities need support in the form of rehabilitation operations, therapeutic care, adequate knowledge about their child's disability and the assistance of a psychologist or psychiatrist. Over the years, more and more institutions offering such assistance, and the parents are much more likely to decide to use it to help both your child and yourself. They expect help in the understanding and acceptance of her child, and then, when it's done, help in the further development of physical, mental and social. There are few studies evaluating the level of satisfaction with the support experienced by the family of a disabled person. Such analysis undertaken in this study.

3. Aim

The aim of the research work was to evaluate the status of specialist support for families with a child with intellectual disabilities in rehabilitation centers, educational and educational institutions run by the Polish Association for Persons with Intellectual Disability in Silesia.

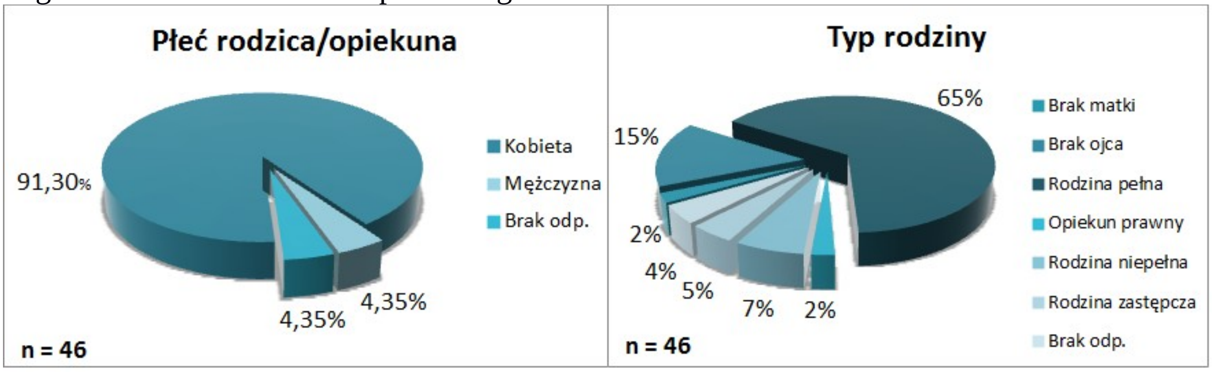
4. Materials and methods

The study was conducted in the centers rehabilitation - education - education PSONI Chorzów and Bytom. Research has acceded to 46 parents / guardians of participants attending the above-mentioned centers PSONI.

The study is descriptive, which uses proprietary questionnaire on the basis of which was followed by registration of data on the following values controlled independent variables such as sex parent / child, family type and age of the child and the period of attending a child into the facility, as well as education and training work centers staff (teachers, therapists, educators, psychologists, speech therapists and therapeutic help).

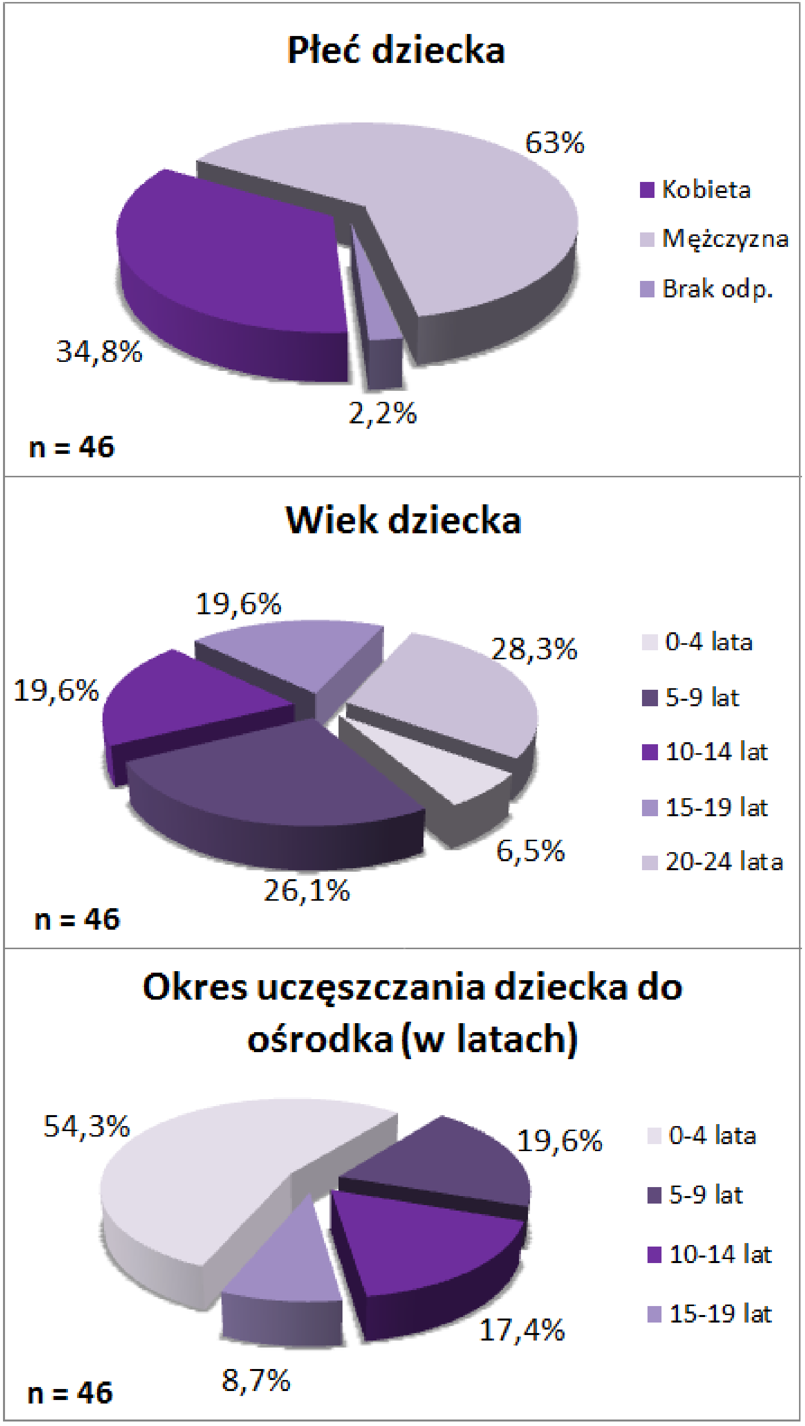
Figure 1 shows the characteristics of the selected parameters of the examined families.

Dig. 1. Characteristics of the parents / guardians



Among parents surveyed dominated by women, which is 91.3%, men account for 4.3% of the respondents. It did not respond 4.4% of respondents. The results clearly show that mothers devote more time to their disabled children than fathers. 7 out of 10 surveyed parents / guardians operates in the full family. 2.2% of families have a status of "incomplete" for lack of a mother statistically higher the percentage of families that are missing father (15.2%). Unfortunately, very often fathers can not cope with their child's disability and go. In single-parent families combining function and economic care is particularly difficult (Balcerzak Paradowska 2008). Among the respondents were 2 and 1 foster guardian (eg. Granny or sister).

Dig. 2. Characteristics of children



Another independent variable was analyzed gender of children, on the basis of the states that are growing group of boys - 63% of the total.

Among the 46 children / pupils youngest is not even one year old, the oldest and completed 24 years. Most children are aged 2024 years and 5-9, while the average age of the ward facility is the day of the survey 14 years.-

Figure 3 presents the analyzed period intellectually disabled child attending the school. Based on the results, it is concluded that more than half (54.3%) children use the help of the PSONI no longer than 4 years, with 14 of the 25 children stay started in 2014. One in five children attends from 5 to 9 years, more than 17% of 10 to 14 years. The longest is the mentee who uses the help center for 19 years. The average period for the test group is just over 6 years.

Another group of workers were subjected to testing centers, teachers and physiotherapists. The group representing 19.5% of all are specialists, and support staff to a post therapist among respondents was 7, ie 17.1% of the total. 9.8% was the group that did not disclose their profession.

Among the most employed has higher education (70.7%). First degree studies completed 7.3% of respondents, and preparation for post-graduate work was declared by 2.4% of employees. Every seventh respondent completed education at the secondary school level, and two did not provide their education.

Given the seniority of participants in the study, it says that more than half (56.1%) work in the centers for 6 years and longer. The average period of employment of 41 respondents is just over 6 years, and the largest group consists of people with experience of 6-10 years. The longest seniority is 16 years of age (2.4%), while the shortest is less than a year and affects 17.1% of employees. These results clearly show the high qualifications of staff working in these units.

5. Statistical analysis

In statistical analysis test of independence chi-square ($\chi 2$ test) examined the relationship between variables H0: there is no relationship and H1: there is a relationship. Significant levels of statistical significance is presented using the approximation: $p \leq 0.05$.

6. Results

When the family learns that in a few months in their house will be a child, the reactions are different, but most often is felt joy and happiness Other feelings arise when it turns out that the child was born sick or ill as a result of illness or accident. This fact is confirmed by studies.80% of the surveyed parents and caregivers admitted that at the time of receipt of the information about their child's disability felt negative emotions. Using adopted in developing methods of statistical analysis showed that there is no correlation between the perception of the parents / guardians of negative sensations after receiving information about the disability of their child, and sex respondent parent (test of independence adopted value of 0.875), gender of the child with a disability ($p = 0.735$), age child with a disability ($p = 0.177$) and the period of the child to attend Orewa (p = 0.663). The situation is different in the case of the relationship between the type of family in which the child lives with intellectual disabilities, and the emergence of negative feelings at the time of receipt of information by a parent that their child has a disability. On the basis of a test with 95%, we can definitely say that there is a significant correlation (p = 0.010). Family full of the most negatively received this information (61%). Foster and guardians said they received information about the child's disability in a neutral manner.

The dominant feeling was fear among parents (44%), sorrow (33%), anger (19%), sadness (17%). No wonder, after all, love for the child because of his disability does not turn into a sudden hatred, on the contrary, love is even greater, but it is accompanied by concern about how the family can handle, how will the child when he formally becomes a grown man and what It will be with him when parents have already run out. Kind of felt emotions is not determined by any parameter tested.

Almost half of parents and guardians admits that after the first moment of fear, also accompanied by positive feelings prevailed among them: love (70%) and challenge (26%). With the test of independence chikwadrat states that the emergence of positive feelings and their kind is not dependent on sex parent (p = 0.700), gender of the child (p = 0.559), age of the child (p = 0.505), the time of the child's stay in the institution (p = 0.304), and the family type (p = 0.841).-

When a child is born sick, and his disability will accompany him to the end of life, the family thought arises, why it happened to us, as well as the search for the guilty. It's a natural reflex, because the parents asked whom they blame for the condition of your child ?. The greatest blame for the child's disability parents attributed the doctors-specialists (60%) and do not blame anyone (17%). Among the remaining respondents were indications yet: partner, family, yourself, other people. No significant correlations were also obtained between the above mentioned variables and blaming themselves and others by a parent for his child's disability.

Of the parents surveyed, over 63% said they had sought help in understanding and accepting the disability of their child. Often the family is left alone with his problem, they turn to relatives and friends, forgetting how at this point it is important to support. Parents who thought that the doctors-specialists are to blame for their child's disability, was among them sought help and support (49% of respondents), a similar proportion of parents surveyed in this issue is trying to fend for yourself. Every eighth family sought help in the establishment of the Association. There are also families that benefit from the aid of his own family and other parents of children with disabilities. The doctors-specialists in 7 out of 10 cases are also indicated, as those who headed a family with a child rehabilitation center, educational and educational.

In carrying out the chi-square test was hypothesized H1 - there is a relationship between the child's age (p = 0.023) and the time of his attendance facility Orewa (p = 0.013) and by a parent seeking help to accept the child's disability. The younger the child, the greater the percentage of parents who seek help. Research shows that, the younger the child and the shorter his stay in the facility Orewa, the parents are more active way in the exploration, understanding and acceptance of their disabled child. It has to do with the greater availability of information, specialists and centers to support both children with disabilities and families. Almost half of parents seeking support raising a child with intellectual disabilities under the age of 10 years, and when it comes time to attend a child into the facility, the largest percentage are children with less than 2 years experience. In other cases, no significant correlation between the variables in this area. 67% of parents surveyed (including 96% of women) said they had received support helped them to accept and come to terms with the state of your child, and help doctors and accessibility to the resort, it had a positive impact on the orientation of the activity of the parents / guardians for the development and rehabilitation of the disabled child .

Among parents whose children attend rehabilitation centers, educational and upbringing in Chorzów and Bytom, 93.5% believe that the facility strongly favors the development of their disabled child, 4.3% of respondents answered that rather promotes the development of the child and 2.2 % of respondents did not answer. There was no significant relationship between assessment and variables such as sex parent, the child's sex.

The family that uses the help of Orewa has certain expectations towards them, from the research we learn that every fourth respondent (23.9%) expect more rehabilitation and science, the second place was the improvement of child health, 17.4% the respondents believe that their expectations have been met. For parents and caregivers, it is important that their child has been rehabilitated to date and despite his disability could learn the basic steps needed in your home and life. Some parents also pointed to good care and maintenance of the state of health of the child. Asking whether disabled children eager to attend institutions in Chorzów and Bytom, parents unanimously agreed that their children will be happy (80.4%) and rather willingly (19.6%) participate in the activities offered by the said Orewa. In contrast, the satisfaction of children in the most affected by parents' contact with peers (63%)

patients and professional rehabilitation (19%). The rest of the respondents do not share their opinion. Using the chi-square test of independence, at the significance level α = 0.05, p = 0.020, have shown that there is a relationship between the child's age and the factor that affects its satisfaction with the participation in the classes outlets Orewa.

Parents, and most often the mother give up her professional life to be able to devote themselves to caring for their children. Depending on the state of child care lasts 24 / hours a day, 7 days a week, so often an hour, in which the child attends classes at the facility, the only moment when they can relax mentally and physically. All the parents agreed that if their child attending classes in Orewa, they themselves feel comfortable and believe that the child is under proper care therapists, teachers and educators. It was also found that there is no relationship between this view and the gender of the respondents, age and sex of the child, the family and the type of experience attending the child to the resort.

Working with the disabled child over his weaknesses, is not limited to the walls of institutions Orewa. Each specialist recommends that parents / guardians at home would also try to work with her child in accordance with his instructions. A survey has shown that recommendations in this regard is used 90% of the respondents. 45.7% of parents declare work every day, 19.6% as time allows, 10.9% only when the child wants, only 8.7% of respondents work several times a week 10%, and 2.2% according to recommendations or believes that just what the child receives at the resort. Parents surveyed also believe that the permanent contacts with specialists allowed them to acceptance of their child's disability and influence the thinking of its future - so 52.2% and 34.8% rather yes. Importantly 910 parents participating in the survey, he sees the effects of the work of specialists from Orewa with their children. Moreover, based on chi-square test, with 95% confidence, it is concluded that there is a statistical relationship between the respondent's gender, gender of the child and family type (each time a test of significance was p = 0.000), and the answer.-

A little less enthusiasm can be seen in the opinion of professionals working in rehabilitation centers, educational and upbringing at PSONI in Chorzów and Bytom. Of the employees surveyed more than 40% not well evaluated cooperation with parents and carers their charges, alas, every third respondent did not reply to this question. Every fourth employee believes that parents and guardians still do not have sufficient knowledge about their child's disability. Continuous work with the disabled child is a necessity, because the specialists communicate to parents and guardians tasks to do at home. 51.2% of respondents believe that such recommendations are made by the parent (yes and rather yes), but until every third specialist and teacher assesses.

Using the chi-square test of independence, with 95% confidence concludes that the response group of parents / carers and groups of employees Orewa vary significantly. Over 90% of parents would work with the child at home, while 30% of specialists from institutions Orewa believes the contrary. Both groups of respondents express different opinions.

As parents and guardians, and so for teachers, therapists and rehabilitation is important it is how they feel about their charges during classes at the resort. 80% of employees surveyed answered affirmatively to the question "How do you / you as facility employees feel children staying there?". The remaining part did not reply at all. Employees believe that children feel good 43.9%, 14.5% safe, are satisfied 12.2%, other 9.8%, they feel accepted 2.4%. Employees Orewa in Bytom and Chorzow in 8 of 10 cases believe that parents and guardians of children attending their offices are satisfied with the level offered care, education and rehabilitation, and according to 70% of professionals, parents / guardians see the effects of the work of staff employed in the centers and the progress of their disabled children.

. 80% of the employees surveyed admitted that many parents show a willingness to take contact with staff facilities, and by using test of independence chi-square showed a significant correlation between the education of the person completing the questionnaire, and the positive assessment of the parent in terms of readiness to undertake contacts with the institution ($p = 0.003$). It turns out that the higher the education the more favorable assessment. In addition, 8 out of 10 respondents believe that parents through contacts with experts Orewa, level of knowledge about their child's disability, improved.

7. Discussion

The aim of this study was to evaluatethe level of specialist support for families with a child with intellectual disabilities in rehabilitation centers, educational and educational institutions run by the Polish Association for Persons with Intellectual Disability in Silesia. During the study evaluation were subjected to independent variables such as gender parent / child, family type and age of the child and the period of attending a child into the facility, as well as education and work experience centers staff (teachers, physical therapists, educators, psychologists, speech therapists and support therapeutic).

The inspiration for the testing was the author of many years of collaboration working with rehabilitation centers, educational upbringing Polish Association for Persons with Intellectual Disability and their own experience arising from the fact of being a parent of a disabled child.

The literature presents analyzes of modeling and shaping of family ties while raising a child with intellectual disabilities under consideration from the point of view of the families received social support (Minczakiewicz 2002). The study shows that 75% of families receiving social support, but only every fifth family was with this form of aid satisfied. At the same time parents you declared that this form of help is appreciated and expected. Carried family support and social support appear to have a significant impact on the attitude of parents towards the child's level of functioning and relationships in the family, the degree of durability of feelings between parents and children and between siblings. Families without support more easily succumb to difficulties, closes and limit contacts with the social environment. Lonely struggle with the care and upbringing of a child with intellectual disability makes it difficult to overcome the crisis in the family. The previous considerations that the parents of a disabled child is often experiencing negative emotions, and their survival are changing over time and depend on many factors. Along with the age and development of the child's negative experiences parents can strengthen or weaken (Zablocki 2012). The author of the work established that the relevant variables for the acceptance of information about the child's disability will be for his parents age and sex, but after testing found no statistically significant relationship. In the literature we find works illustrating the feelings of children Lonely struggle with the care and upbringing of a child with intellectual disability makes it difficult to overcome the crisis in the family. The previous considerations that the parents of a disabled child is often experiencing negative emotions, and their survival are changing over time and depend on many factors. 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In the literature we find works illustrating the feelings of children that the relevant variables for the acceptance of information about the child's disability will be for his parents age and sex, but after testing found no statistically significant relationship. In the literature we find works illustrating the feelings of children with intellectual disabilities on a parent-child relationship clearly showing a greater component of positive feelings from mothers than from fathers (Minczakiewicz 2001). It merely confirms the current centuries stereotype role of women / mothers and men as heads of families (Pisula 2007). With this scheme shows that "working father" less involved in the direct care of a child or healthy or disabled. The fact that only raises the problem of disability in connection with the warm relationship father / child. often staying away from home, may have difficulty in working for their own problems / emotional anxieties associated with the emergence of a handicapped child which directly affects the emotional relationships with other family members (Buczyński 2001). The widespread social belief that the father loves the child that meets his expectations is a source of joy and pride of its causes, in many cases fathers forget about the most important fact, that it is primarily his child (Pospiszyl 1976). The appearance of the child who does not meet expectations, and also requires special care often poses a threat to paternal dreams (Meyer 1982). Many fathers of children with disabilities is not up to the task, they do not accept such parenting and believe that it zacznym restricts their freedom and the ability to self-realization (Bakiera 2010).

"Femininity "and" masculinity "are often associated with a number of differentiating features. "Masculinity" is usually associated with orientation instrumental - focusing on work or troubleshooting, or the factor - care for each other as a unit of femininity while associated with the orientation of the expression (group) - focusing on relationships with others (Głażewska, 2005) . Such an approach to the role of man and woman is reflected in a number of publications. (Cudak H. 2003 Karwowska M. 2005 E. Głażewska 2005, plantain J. 2004). The study confirms the stereotypical role of a woman and a man and a subsequent relationship with their disabled child. This is due to the fact that the changing attitude of a parent to a child, as well as their approach to fulfill the roles and responsibilities to him.

Parents and caregivers faced with the fact of disability your child expect help and research shows receive it more often and increasingly rely on for both children (rehabilitation, learning, therapy classes with a speech therapist,) and parents (psychological support, education of knowledge about the needs of intellectually disabled child). Positively evaluate the work of specialists, their approach to children and seeing real results, and also to a greater extent will have contact with the facility specialists.An interesting observation from the study are differences in the perception by employees working parent with a child according to the instructions received from the facility, and what parents declare. Many experts advocates that parents take an active part in the rehabilitation of the child, then it brings the desired results, because in this way realizes the need for child safety (Kornaś 2010).Well organized and timely assistance can minimize or even remove the effects of negative mental states accompanying the parents of disabled children. (Zablocki 2012).

Without a doubt, business centers, educational rehabilitation and education is invaluable. Disabled children primarily provide acceptance, a sense of security and contact with peers, parents and provide valuable support in the acceptance of their child's disability. The satisfaction of working with children feel the employees themselves. Teachers, therapists and other professionals are pleased with the results and new skills. A positive impact on the lives and development of their children also recognize parents who do not hide that moment when they received information about their child's disability was extremely difficult for them. Many of them then blamed doctors and specialists, and later sought help from them in finding the whole situation. Received support in the vast number of cases has contributed to the acceptance and understanding of the state of your child as well as parents has aroused to action in the area of development and rehabilitation of their children. Research on the family of a disabled child that the basis for successful rehabilitation of the child is the right atmosphere and the prevailing psychological climate in the family. Child's disability is an important issue for the whole family, because the whole family should take care of, and give her instruction rehabilitation. According to the staff Orewa you can still meet parents with a demanding attitude and those who believe that in working with the disabled child can only use those hours when the child is in an institution,

The most important finding of the research is the need to increase and strengthen cooperation of parents and carers of children with disabilities from institutions Orewa employees. Working together on the development of children and mutual support will translate into commensurate results. The presence and attitude of a parent often can directly move to the progress conceived by his disabled child.

8. Conclusions

1. Activity centers, educational rehabilitation and education provides children with disabilities: acceptance, a sense of security and contact with peers, parents and provide valuable support in the acceptance of their child's disability.
2. The satisfaction of working with children feel the same employees (teachers, physiotherapists and other professionals)
3. Positive impact on quality of life and development of their children notice the parents, who do not hide that moment when they received information about their child's disability was extremely difficult for them.
4. Received support in the vast number of cases has contributed to the acceptance and understanding of the state of your child as well as parents has aroused to action in the area of development and rehabilitation of their children.
5. The most important finding of the research is the need to increase and strengthen cooperation of parents and carers of children with disabilities from institutions Orewa employees.

Literature:

1. Bakiera, L., Stelter, z. Parenting from the perspective of the child's parents able-bodied and disabled intellectually. Annals of Family Sociology. Sociological and Interdisciplinary Studies. 2010, Vol. 20, s.131-151.
2. Balcerzak-Paradowska, B. (2008). The importance of the family for the quality of life of disabled persons, [In] Frąckiewicz L. (ed.), Against the social exclusion of people with disabilities, Warsaw: IPiSS, pp. 47-60.
3. Grandmother, J. (2004). Disabled man in various stages of life. Warsaw 2004: Wyd.Żak, s.24-28.
4. Buczyński, F. (2001). The functioning of the fathers in danger the life of their child, [in] Kornas Biela-D. (Ed.), Faces of fatherhood, Lublin 2001, p. 390-405; B. Sidor father in the family with a child with intellectual disability [in] Kornas-Biela, D. (ed), calculated fatherhood, Lublin 2001, s.381-389.
5. Oddity H. (2003). The functioning of children from divorced marriages. Torun 2003 Ed. Adam Marshal,

pp. 175-180.

6. Głażewska E. (2005). Gender and anthropology. The cultural concept of equality in terms of Margaret Mead, Torun 2005: The Center for European Education, s.137-145.
7. Karnas, D. (2010). Experiments parents of children mentally disabled in the early intervention, [in] Klinik A. (ed.) Features therapeutic procedures in an open environment social Krakow pulse, pp. 178-192.
8. Karwowska M. (2005). Parents distressed education intellectually disabled child. [In] Janiszewska-Nieścioruk Z. (ed.).*sphere withof life of people with intellectual disabilities*. Kraków 2005: Impuls, pp. 51-61.
9. Meyer, D., Vadasy P., Fewell, R. Schnell, G. Involving Fathers of Handicapped Infants: Translating into Research Program Goals "Journal of the Division of Early Child-hood" 1982 T.5, No. 1, p .64-72.
10. Minczakiewicz E. (2002). Social support of the family as a factor shaping and forming relationships in the family raising a child with profound intellectual disability, in Głodkowska J. (ed.), "Annals of Special Education", Warsaw 2002, Volume 12, s.58-70.
11. Minczakiewicz, E. (2001). Family social assistance was an attempt to respond to the needs of a disabled child and his closest, [in] a disabled man in the family and the local environment, (ed.) Maciarz A. Janiszewska - Nieścioruk Z., H. Ochonczenko, Scientific Society Lubuskie, Zielona Gora 2001 , p. 135.
12. Pisula, E. (2007). Parents and siblings of children with developmental disorders. Warsaw 2007, s.50-55.
13. Pospiszyl, K. (1976). The love of the Father, CRZZ Publishing Institute, Warsaw 1976, s.62.
14. Sekułowicz, M. (2010). Problems functioning of mothers and fathers of children with disabilities, [In] Z. Palak, Bujnowska A. (ed.), Educational and rehabilitation contexts development of people with disabilities in different periods of their lives, Lublin: Ed. UMTS, s.109-115.
15. Sadowski, S. (1996). Needs and opportunities for assistance to the family of the mentally handicapped child. Annals of Special Education, 7,67-84.
16. Sobczyńska, D. (1995). Motherhood: values and dilemmas[In] MIKULSKA., Pakszys E. (ed.) Arts and sex. Women Studies in psychology, philosophy and history, Poznan: Ed. AMU.
17. Zablocki, KJ (2012). Quarterly scientific No. 9, p.39.
18. The Law on Education System of 7.09.1991r.
19. Reg. Ministry of Education of 4.04.2005r.
20. Reg. Ministry of 17.11.2010r.
21. Dz.U1997, nr.123, poz.778.
22. Dz.U2011, 149, poz.887.
23. Dz.U.2009, nr175, poz.1362 as amended,