

Psychological and social impacts of families of handicapped people during COVID-19 in the Arab world (A comparative study between Saudi Arabia and Egypt)

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Abstract:

The study aimed at revealing the psychological and social effects of the families of handicapped people during COVID-19 in Saudi Arabia and Egypt. The triangulation approach was used that gives a deeper understanding of the results derived from quantitative and qualitative data, and a questionnaire prepared by researchers was applied to (142) families with intellectual disabilities, autism disorder, visual impairment, physical and health disabilities, and a semi-structured interview was used with (15) of these respondents to find out the most important psychological and social impacts of the families of handicapped people. The psychometric properties of the study tools were verified. The data were analysed quantitatively and qualitatively. Quantitative results show that participants have an average level of psychosocial impacts for the families of handicapped people. Furthermore, there were no differences in the psychological and social effects in general between the Egyptian and Saudi societies, while it was found that there were differences in psychological pressure as one of the psychological effects between the two societies for Egyptian society . Quantitative statistics were supported by qualitative data. Also, the qualitative analysis revealed that there were four dimensions related to the psychological and social effects of the families of handicapped people. They are: the presence of psychological effects ranging from high to medium, the presence of moderate social effects, the presence of moderate economic effects, the finding also indicated that the ranking of psychological effects and social issues for different groups of disabilities depends on their families according to (intellectual disability, autism disorder, physical and health disabilities, visual disabilities). The study provided several recommendations. The families of handicapped people especially mothers must be supported and provided with specific training programs that suit different disability groups.

Keywords: Psychological effects, Social implications, Disability, the families of handicapped people, Disability, Covid-19.

I. Introduction:

The individual lives within a series of social systems that are different in their nature, tactics and goals. Even if all of these systems seek one supreme goal, which is that an individual is a good person and the importance of the family in terms of being one of the most important nature of this

social system. The balance of the variables and elements that help to achieve the harmony and stability that occur among all its members. However, the presence of a disability in a family member may constitute a new challenge to the role of the family itself and its different functions, due to the influence of the family members and their

different functions, due to their feelings and this being affected by all of their roles and functions. Trends are the main dominant feature of this family (Courtenay, &Perera, 2020).

Persons with disabilities suffer from marginalization in normal times, especially in Arab societies, and in the light of the outbreak of the Covid-19, it has swept the world, great fears were thrown into the hearts of this group, especially their families. In Arab countries, disability rates have been increased as a result of wars over the past several years. According to Jane Bonkan, deputy director of the Rights of Persons with Disabilities Department, at the International Organization, "Persons with disabilities are among the most marginalized and stigmatized groups in the world, even under normal circumstances, and unless governments move quickly to contain them, as part of their response to the outbreak of the virus." They will be at great risk of infection and death with the spread of the pandemic "(CEPAL, 2020).

Accordingly, IASC guidelines regarding mental health and psychosocial support recommend that the basic principles for supporting and promoting mental health during emergencies are doing no harm, promote human rights and equality, use participatory approaches, establishing depending on current resources and capacities, adopting multi-stage intervention processes and finally working with integrated support systems. COVID-19 affects interdependence and social communication between people, their trust in people and institutions, their businesses and their income, in addition to imposing an enormous amount of burden in terms of worry and anxiety (Courtenay, &Perera, 2020).

The Coronavirus caused imposing lockdown all the globe in various fields. Due to Covid-19, a complete or partial lockdown was imposed on the human being and spread a state of panic and fear until millions of individuals around the world had to stay in their homes in response to the global call to limit the spread of this epidemic, without knowing a specific time for life to return to normal and this has increased the pressure and anxiety, as many people suffer from their inability to adapt to the conditions imposed by the spread of the virus in terms of social distancing (Garnier - Crussard,

et. al., 2020). Also, the outbreak of the new COVID-19 does not depend on its threat to the physical safety of some people, but its great impact has directly exceeded the psychological aspect of all people, especially people with disabilities, as many of these people and their families have been psychologically affected as a result of Covid-19. the group that much affected on the physical level (Schiariti, 2020). This is what was emphasized by (CEPAL, 2020) that "fear, danger and threat are increased by persons with disabilities and their families, as psychosocial pressures include the injured and others alike. Therefore, it is necessary to provide psychosocial supplement and support for all groups of handicapped d people, and for their families during COVID-19 and after it. It is necessary to intervene and work on guidelines and create platforms for listening, supporting or creating psychological cells for psychiatrists that keep pace with the psychological state of people in situations of intellectual disability. It is necessary to provide the required social support so that they can overcome this difficult period with the least pressure and psychological damage and possible social .

Although many families face a great deal of pressure while carrying out the process of raising their children, many studies and clinical research in the field of people with special needs have confirmed that the percentage of these pressures increases and rises among families with many handicapped children. Families are unemployed due to the problems caused by their handicapped child, as they suffer from social isolation, psychological stress, and depression (Al-Wakeel, 2016).

In light of what the world is suffering from the outbreak of Covid-19, which "constitutes a true test of the level of stiffness and psychological immunity of individual in his confrontation with this virus to struggle for life and new survival, which was accompanied by negative side effects represented in psychological problems" The specialists gather In mental health that "the quarantine imposed on more than a billion people around the world due to the Coronavirus pandemic, is neither an easy nor an underestimated subject, as it is an exceptional and

unprecedented measure that restricts individual freedoms even in democratic countries, and this situation causes psychological problems for many people. Especially for those who fail to respond positively to this circumstance (Stankovska et al, 2020).

Psychological and social problems are doubled if one of the family members has a disability where pressures and needs increase. The current study was designed to understand the nature of these pressures and those needs and to identify the nature of the cross-cultural differences in them. It examined the psychological and social effects on the families of handicapped people in the COVID-19 period. It hoped to propose the best recommendations and develop appropriate treatment programs that contribute to alleviating these pressures and meet those needs that are faced by parents of people with disabilities.

Therefore, the study problem can be formulated in the following main question:

What are the psychological and social effects of the families of handicapped people during COVID-19 ?

The importance of the current study is to shed light on the psychological and social effects of the families of handicapped people during Covid-19.

Study Objectives:

The objectives of the current study are as follows:

- 1- Determine the most important psychological effects for the families of handicapped people during Covid-19.
- 2- Determine the most important social impacts on the families of handicapped people during Covid-19.
- 3- Define the difference between the psychological and social effects resulting from the COVID-19 for the families of handicapped people in Saudi Arabia and Egypt.

2. Theoretical framework and previous studies:

The presence of a handicapped child might cause many sources of stress on the shoulders of the

parents and results in the suffering of many psychological and social needs. In recent years, the study of family pressures faced by families of persons with mental or growth disabilities has become an important and vital topic in this field. The presence of a handicapped child in the family represents many of the burdens that burden the shoulders and scope of this family, and although the nature and impact of these pressures vary from one family to another, in any way they affect the family and family stability, it contributes to the feeling of the suffering of missing psychological, materialistic, and social demands by these families, which requires saturation to achieve a kind of stability and harmony in these families (Al-Wakeel, 2016).

Psychological or social stresses arise when the individual has an exciting need that requires satisfaction, so if these desires and needs are suppressed and prevented from being satisfied, then they are linked to a specific extent in the person and accompanied by his emotion. These desires continue to press him until the effects reach a high degree of stress. A social study is considered as very essential for understanding human behaviour in general. Measuring, assessing and recognizing stress is more useful in predicting adaptation and identifying psychological and psychosomatic symptoms. the psychological and social stress affects human performance and achievement in general on cognitive, emotional, psychological, and psychological aspects. Stress causes the individual to suffer from maladaptation, which sometimes appears in the form of simple symptoms of the disease and other cases in the form of severe organic disorders, according to the characteristics and psychological characteristics of the individual (Vieta, et. al., 2020).

The sources of psychological and social pressures come as a result of events and situations that the individual was exposed to in his/her daily life that changed the course of his daily life that negatively affected all aspects of his/her psychological, physiological, cognitive, emotional and behavioural life, and the sources of these pressures consist of several aspects (Sujatha, & Rajashekar, 2019). The psychological and social effects of individuals as a result of their exposure to a

situation or problem are manifested in one of the following forms (stress, depression, anxiety, alienation, social isolation) (Vieta, et. al., 2020).

The psychological and social effects of the families of handicapped people during COVID-19 consist of the following forms: (feeling anxiety, anticipation and obsessions, distraction, lack of focus, sleep disorders, the continuous sense of threat, fear of daily practices such as movement and friction, fear and anxiety of the unknown, psychosomatic symptoms such as headache and loss of appetite, social isolation, a sense of helplessness, irrational thoughts associated with the COVID-19 and its control of thinking), (CEPAL, 2020).

Schiariti (2020), (Courtenay & Perera, 2020) indicates that there are several types of psychological and social stress: (temporary stress, chronic stress, positive pressures, negative stress, physical stress, social stress).

Wang et al, 2020 conducted a study aimed at better understanding their levels of the psychological impact of anxiety, depression and stress during the first phase of the COVID-19 outbreak. The study included 1210 respondents from 194 cities in China, and the results indicated that 53.8% of the sample had a moderate or severe psychological impact. And 16.5% reported moderate to severe depressive symptoms. 28.8% reported moderate to severe anxiety symptoms, and 8.1% reported moderate to severe stress levels.

While the study of (Ahorsu et al, 2020) indicated that the emergence of COVID-19 has led to fears and anxiety among individuals around the world. The study adopted the fear scale (FCV-19S) to complement clinical efforts in preventing the spread and treatment of COVID-19 cases. The sample included 717 Iranian participants. The FCV-19S items are built upon a comprehensive review of existing metrics on concerns, expert assessments, and participants' interviews. Many psychological tests have been performed to ensure their reliability and validity characteristics.

Also (Stankovska et al, 2020) conducted a study that aimed to explore the relationship between COVID-19 virus disease and mental health conditions, such as stress, anxiety and depression. Where everyone may suffer from fear of the

consequences of infection with a new virus that may be fatal, and they may suffer from psychological stress, anxiety, loneliness and depression. Building on experience gained from past serious viral experiences, developing and implementing mental health assessment, support, treatment and services are critical and urgent goals of the health response to the COVID-19 outbreak. Where humans have an incredible ability to adapt and survive through the means of altruism and cooperation. So each of us needs to take care of ourselves and each other.

The study of (Courtenay & Perera, 2020) also indicated that COVID-19 pandemic affects all groups of society. People with intellectual disabilities are particularly vulnerable to the physical, mental and social impacts of Covid-19. Cognitive impairments can limit understanding of information to keep it from relying on caregivers to carry out duties on their behalf during the quarantine. Restrictions on usual activities are more likely to lead to mental fatigue, especially among those with autism, leading to an escalation in difficult behaviours, the risk of a situation collapse and an increase in the use of psychiatric medications. Handicapped persons are vulnerable to exploitation by others as an ordinary society no longer supports a function to protect them. In future epidemics, lessons must be learned from the effects of COVID-19 on people with intellectual disabilities. Evidence gathering through a rigorous approach should help empower people with intellectual disabilities and their caregivers to cope with future outbreaks of infectious diseases.

The previous studies were useful in preparing study tools and interpreting their results. The current study is distinguished from previous studies by:

It is considered as one of the first studies dealing with the psychological and social effects of the families of handicapped people during COVID-19 in the Arab world, as far as the researchers' knowledge.

- I tried to complete the research efforts made by previous studies, which help in the logical correlation between the dimensions and variables of the study.

- Determining "the psychological and social impacts of the families of handicapped people during COVID-19 in the Arab world".

3. Methodology

3.1. Method:

The current study used multi-approaches design (combining the quantitative and qualitative methods), as the designs are three types (exploratory, descriptive, and triangle) (Fraenkel et al., 2012). Where the triangulation design is known as convergent parallel design (Creswell, 2014), and it was used for its ability to determine whether the two methods are converging based on a single understanding of the research problem or not, as both quantitative and qualitative approaches were performed at the same time, and the triangulation design gives additional depth to the understanding of the results obtained From quantitative and qualitative data.

3.2. participants:

A group of the families of handicapped people participated in the study, the number was (142) the families of handicapped people (66 with intellectual disability, 37 with an autism spectrum disorder, 21 with visual impairment, 18 with physical and health disabilities), among them (80) participated in the study. (58%) families in Saudi Arabia, (62) families in Egypt (42%), and these families were randomly selected as the questionnaire was applied electronically, and the sample with which semi-structured interviews were conducted consisted of (15) families of persons People with disabilities (7 with intellectual disability, 4 with an autism spectrum disorder, 2 with visual impairment, 2 with physical and health disabilities).

3.3. Study tools:

1) A questionnaire

A questionnaire of the psychological and social impacts of families of handicapped people in the Arab world during the COVID-19 was prepared by the researchers

The questionnaire and the interview questionnaire were built after reviewing the previous theoretical

literature as a study (Helali et.al., 2020), and the questionnaire was designed from two parts, the first part dealt with the personal data of the respondents, and the second part was of two dimensions, which are the psychological effects (23 items) were distributed in two dimensions, respectively. Anxiety (13 items), stress (10 items), and social impacts (15 items). So the scale became in its initial form (38 statements), and the response to it would be according to five-Likert scale (always - often - sometimes - rarely - never), and after it was presented to (9) specialized referees, three statements were deleted for be similar to other statements, It was applied electronically to an exploratory sample consisting of (20) families handicapped people, and (5) expressions were excluded due to their lack of internal consistency, so the questionnaire in its final form consisted of (30) items distributed: 18 items for the psychological dimension, 12 items for the Social dimension, reliability was calculated using alpha Cronbach test and the psychological (anxiety, stress) and social effects were respectively (0.902, 0.876, and 0.816), 0.865), and the internal consistency of each statement was calculated with the total score of the dimension to which it belongs and ranged between (0.441, 0.844), and the correlation between the dimension and the total score of the questionnaire was calculated, respectively (0.773, 0.753), and the statements numbers (7, 16, 21, 30, 34) were excluded for lack of significance, so the questionnaire in its final form became 30 statements distributed as follows: (18 for dimension) Psychological: 10 statements to measure anxiety, 8 statements to measure stress, 12 statements for social dimension).

2) The semi-structured interview:

Concerning the qualitative analysis, the study used a semi-structured interview form that was presented to (9) specialized arbitrators, and the interview was applied through the Zoom program, where the members of the research team conducted the interviews on (15) families handicapped people and they are as follows: (10 families) from Saudi Arabia, 5 families from Egypt), and it was distributed as follows: (7 families with intellectual disability, 4 families with an autism spectrum disorder, 2 families with visual impairment, and 2 families with people of

growth disabilities), and they agreed to conduct interviews with them and signed a pledge agreeing to participate in the study. The interview guide has been developed to help manage it, and make full use of the interview time (Patton, 2015), and the interview guide has been developed in light of the recommended procedures (Rubin & Rubin 2012). The interview guide consists of three sections: the first of which contains preliminary questions, It included three questions aimed at getting acquainted with, setting the axes for the interview and making the participants enjoy them, to conduct the rest of the interview more efficiently, and the second included four main questions that dealt with the current research axes, and the third consisted of questions that helped encourage the participants to provide more details for the answers. Experimenting with the interview guide with three families not participating in the study to obtain feedback and estimate the time required to conduct the interviews. On average, each interview was conducted at a time of (20) minutes, and the quantitative and qualitative data were analyzed separately.

4. Data analysis:

This part of the study includes the answer to the study questions, whereby the means and standard deviations were considered to identify the responses of participants about “the effects of the new COVID-19 on the psychological and social aspect of the families of handicapped people.” The following is the answer to the following study questions:

Results related to the first question: What are the psychological effects of the new COVID-19 on families of handicapped people?

The mean and standard deviations were calculated for the responses of the study participants from the statements of the new Covid-19 on the psychological side of families of handicapped people, and Table (1) illustrates this:

Table (1) shows the mean and standard deviations of the responses of the participants from the statements "The effects of the new Covid-19 on the psychological aspect of families of handicapped people"

No	Statement	Mean	S.D	Order	level
4	I often find myself worried about the health of my handicapped children.	3.93	1	1	High
5	Life goes on scarily and sadly, which makes me anxious about the unknown future of my family	3.85	1.13	2	High
2	I am busy thinking about the future of my children, especially the handicapped	3.75	1.09	3	High
10	It worries me that my son is hardly learning the skills	3.65	1.1	4	medium
15	I blame myself and my family hard for the least of things	3.42	1.06	5	medium
9	I get anxious when I think about the future	3.35	1.1	6	medium
3	I find myself concerned about my job loss.	3.04	1.10	7	medium
11	Being with my handicapped son all the time causes me great emotional stress	3.03	1-17	8	medium

13	My handicapped children cause me severe psychological stress.	2.99	1.13	9	medium
7	I feel anxious most of the time without real reason.	2.98	1.12	10	medium
8	My son's disability worries me and affects me and my family.	2.97	1.19	11	medium
16	I feel empty and hopeless in life and that it is difficult to improve this life in the future	2.87	1.16	12	medium
14	I quit a lot of my habits because of my handicapped son while I'm sitting at home.	2.87	1.2	13	medium
12	Being at home, made me materialistically stressful to great extent	2.86	1.22	14	medium
17	I suffer from disorders or health problems due to the Covid-19	2.80	1.14	15	medium
6	Being at home constantly put the family in constant tension	2.49	1.25	16	medium
1	It is difficult for me to control my emotions towards my children in general and towards my handicapped children	2.34	1.14	17	medium
18	Corona pandemic has given me great psychological relief.(reverse statement)	2,34	116	18	medium
overall mean		3.42	1.12		Medium

It is evident from Table (1) that the mean of (the effects of the new COVID-19 on the psychological side of families of handicapped people ranged between (3.93, 2.34), where the dimension obtained an overall mean (3.42), which is of the average level. Statement 4 is on the highest average of mean, reaching (3.92), and with a standard deviation (1.00), which is of the high level. The statement states (I usually find myself worried about my health and the health of my handicapped d son), and in second place came statement No. (5) with a mean reached to (3.85), and standard deviation (1.13), which is of the high level, as the statement stated (Life goes on scarily and sadly, which makes me anxious about the unknown future of my family). And in the last

place came statement No. (18) with a mean reached (2.34) and a standard deviation (1.16), which is of the average level, as the statement stated (COVID-19 caused me great psychological comfort).

Results related to the second question: What are the social impacts of the new COVID-19 on families of handicapped people?

The means and standard deviations were calculated for the responses of the participants from the statements of the new COVID-19 on the social side of families of handicapped people, and Table (2) illustrates this:

Table (2) The means and standard deviations of the responses of the study sample individuals from the statements of "The effects of the new COVID-19 on the social aspect of families of handicapped people" arranged in descending order

No	Statement	mean	S.D	Order	level
28	The family communicates with the institution that provides services for people with special needs	3.77	1.08	1	High
30	I constantly obtain knowledge from its authors and diverse sources.	3.74	0.91	2	High
27	Being at home made me think about sharing the responsibility with the mother	3.54	1.04	3	medium
26	being isolated due Covid-19, made me believe in the rights of my handicapped son to practice social life	3.50	1.09	4	medium
25	The son's requirements in light of the high cost of living and low income worry me about his future and the future of the family.	3.35	1.1	5	medium
24	Daily life problems impose themselves in my thinking	3.23	1.09	6	medium
19	I feel insulted if someone ignores me or my handicapped son during Covid-19.	3.12	1.31	7	medium
29	I joined self-help groups and learned about the experiences of others and benefited from them.	2.95	1.22	8	medium
21	Most days I wake up lazy and don't want to talk to anyone.	2.89.	0.99	9	medium
23	I avoid socially influential and embarrassing situations, even if the meeting was virtual.	2.89.	1.07	10	medium
22	Being away from friends and family makes me feel comfortable because of my handicapped son	2.63	1.12	11	medium
20	I feel embarrassed when my handicapped son asks to talk to others.	2.36	1.24	12	medium
overall mean		2.99	0.64		medium

It is clear from Table (2) that the mean of (the effects of the new COVID-19 on the social aspect on the families of handicapped people) ranged between (3.77 and 2.36), where the dimension obtained an overall mean (2.99), which is of the average level statement No. (28) has the highest mean reached (3.77), and a standard deviation (1.08), which is of the high level. The statements No. (30) came in the second rank with mean of (3.74) and a standard deviation (0.91), which is of the high level, as the statement states (I have continuously obtained knowledge from its owners and various sources). And in the last place came statements No. (20) with mean of (2.36) and a standard deviation (1.24), which is of medium

level, where the statement stated: (I feel embarrassed when my handicapped d son asks to talk to others).

The results were found related to the effects of the new COVID-19 on the psychological and social aspect of families of handicapped people

The means and standard deviations were calculated to identify the effects of the new Covid-19 on the psychological and social aspect of families of handicapped people, and Table (3) illustrates this:

Table (3): The means and standard deviations to identify "the effects of the new COVID-19 on the psychological and social aspect of families of handicapped people" arranged in descending order

No	The effects of the COVID-19 on	No	M	Order	level
1	Psychological aspect	3.42	0.72	1	medium
2	The social aspect	3.12	0.64	2	medium
	overall mean	3.28	0.52		medium

It is clear from Table (3) that the mean of (the effects of the new Covid-19 on the psychological and social aspect of families of handicapped people) ranged between (3.43 and 3.12), where the general mean reached (3.28), which is of the average level. In the first rank came 'the effects of the new Covid-19 on the psychological side of the families of handicapped people' dimension, and it has the highest mean, which reached (3.42) and a standard deviation (0.72), and it is of the medium level, and in the second place came 'the effects of the new Covid-19 on the social aspect of families of handicapped people' dimension, its mean was (3.12) and a standard deviation was (0.64), which was of the average level.

Results related to the third question: Are there statistically significant differences in the level of the effects of the new COVID-19 on the psychological side (anxiety - stress) on families of handicapped people in Saudi Arabia and Egypt?

To answer this question two independent sample T-test was used to identify the differences in the level of the effects of the new COVID-19 on the psychological side with its various dimensions (anxiety - stress) on families of handicapped people in Saudi Arabia and Egypt, and Table (4) illustrates this :

Table (4) Independent Sample T-test to identify the differences in the level of the effects of the new COVID-19 on the psychological side according to the country

Source of variance	Country	No	Mean	S.D	Degrees of freedom	t	sig
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Anxiety	Saudi Arabia	80	31.84	8.47	140	0.372	not significant
	Egypt	62	32.29	5.71			
Stresses	Saudi Arabia	80	21.99	7.87	140	2.12	0.05
	Egypt	62	24.24	3.83			
Psychological aspect	Saudi Arabia	80	53–82.	15.5	140	1.24	not significant
	Egypt	62	56.51	8.6			

*: A statistical significant at the level (0.05) or less.

It is evident from the results shown in Table (4) that there are no statistically significant differences in the level of the effects of the new COVID-19 on the psychological side between families of handicapped people in Saudi Arabia and Egypt, in the total psychological and anxiety dimension as one of the dimensions of the psychological aspect, while there were statistically significant differences at the level of sig as p-value ≤ 0.05 in the level of stress that families are exposed to, where the value of (t) reached (2.12), which is a significant value at the level of significance (0.05), and it was found that the

source of the differences in the effects of the new Covid-19 on the psychological side was higher among families of handicapped people in Egypt is more than in Saudi Arabia, according to the mean of (24.24).

Results related to the fourth question: Are there statistically significant differences in the level of the effects of the new COVID-19 on the social side of families of handicapped people in Saudi Arabia and Egypt?

To answer this question, independent sample T-test was used to find out the differences in the social aspect between families of handicapped people in Saudi Arabia and Egypt, and Table (5) shows that:

Table (5) Independent Sample T-test to identify the differences in the level of the effects of the new COVID-19 on the social aspect between families of handicapped people in Saudi Arabia and Egypt

Source of variance	Country	No	Std. error	M	Degrees of freedom	T	sig
The impact of COVID-19 on the social side	Saudi Arabia	80	38.65	8.31	140	1.31	not significant
	Egypt	62	37.16	4.42			

*: A statistical significant at the level (0.05) or less.

It is evident from the results shown in Table (5) that there are no statistically significant differences at the level p-value ≤ 0.05 in the level of the effects of the new COVID-19 on the social

aspect according to the country (Saudi Arabia and Egypt) for families of handicapped people, where the t-value reached (1.31), which is not significant value at the level of significance (0.05) or less, and the differences between the mean, if any, did not reach the level of statistical significance.

2: Qualitative analysis of the interviews:

Regarding qualitative data, by analyzing the interviews of the families of handicapped people: The majority of participants stated that they have a significant impact on all aspects on them and their handicapped children during Covid-19, and the general purpose of the interview questions was to know the psychological and social effects of families of handicapped people during Covid-19, as well as identifying the most important alternatives that they propose to support their handicapped children and their families. (80%) of the participants stated that they felt the great effects of COVID-19 on them and their families especially on their handicapped children, whether psychological or social, while (20%) of the participants felt more confident in their ability and their family to overcome the crisis, but they also acknowledged of having such fear and anxiety about their future as well as their children future.

It was also evident that more than (90%) of the participants expressed their feeling of a greater desire to provide psychological, social, academic, therapeutic and material support to people with disabilities, and the participants emphasized the need for a variety of developmental and therapeutic programs provided to people with disabilities and families for training on how to interact and care for their handicapped children. The qualitative analysis of the respondents' responses to the total sample (n = 15) (7 families for people with intellectual disability, 4 families for people with an autism spectrum disorder, two families for people with visual impairment, and two families of people with growth disabilities) revealed four dimensions, which we show as follows:

The first dimension obtained from the participants' responses was the psychological effects: regarding (anxiety - stress - depression - addiction to electronic devices - psychological loneliness or isolation - lack of services provided to a handicapped child - fear for children)

It shows that about 30% (number = 5 families) of the participants expressed psychological stress with a high degree of anxiety and tension, while 50% of the participants (number = 7 families) felt moderate psychological stress, and about 20% of

the participants did not feel (number = 3 families) with any stress or depression.

Several participants indicated the existence of anxiety and tension in the family, for example, one of the responses was: "Feeling anxious about protecting the family for fear of the spread of Corona infection" (P8, P7, P2, P13, P14).

Participants also agreed to respond: "The family has anxiety, tension and anticipation during the Corona crisis" (P11, P10, P1, P5, P6, P3), and another participant stated: "There are a great fear and anxiety that occurred to the family, especially the mother, and the insistence on constantly sterilizing hands." (P4, P12, P15.), and another respondent stated: "There is very great anxiety and great psychological pressure on the family due to the Covid-19," (P9).

Some of the participants, 20% (number = 3 families), suffered from psychological stress with a high degree of depression, while 80% of the participants (number = 12 families) did not suffer from any psychological stress and did not suffer from depression. One participant's response was: "Praise be to God, the stresses are high, but we never suffered from depression" (P4, P10, P2, P3, P14, P15, P11, P9).

In contrast to one of the participants: "The mother suffered from severe depression at the beginning of the Corona crisis" (P13, P14, P7), and another stated: "We have not suffered from depression before, during Covid-19, and God willing, after Corona" (P5, P6, P8, P10).

The table also showed that 80% (number = 12 families) suffered from psychological stress to a high degree in terms of addiction to electronic devices during the pandemic, while 20% (number = 2 families) did not suffer in terms of addiction to electronic devices.

A participant mentioned: "Most of our time is spent in watching television and my children are on electronic devices" (P7, P1, P3, P14, P15, P7), while others mentioned: "One of my sons is addicted to electronic games" (P10, P11, P12, P13), and some participants said: "A handicapped child spends more time on electronic devices during this period" (P6, P4, P5). while the families of persons with visual impairment denied this

claim, saying, "My son did not suffer from addiction to devices because he was interested in listening to TV and the Quran" (P9, P8). As for the families that suffered from psychological stress to a high degree in terms of psychological loneliness or isolation, 40% of the participants (number = 6 families), 60% of the participants (number = 9 families) did not suffer in terms of psychological loneliness or isolation.

Some participants stated: "Of course we feel of loneliness and isolation for the family during the Corona crisis" (P14, P15), and another participant mentioned: "In a kind of loneliness and psychological isolation we notice it on the handicapped d son before Corona and its severity increased during Corona" (P7, P10, P11, P12), but some participants stated that "there is no social isolation due to Corona and the same things before the pandemic are the same" (P1, P2, P3, P4, P6, P9, P8, P5, P13).

Also, some families suffered from psychological pressures to a high degree in terms of the lack of services provided to the handicapped d child, which is 55% of the participants (number = 8 families), while 45% of the participants (number = 7 families) did not psychologically suffer from the lack of services provided to the handicapped child.

For example, one of the responses was: "There is no services or education provided for children who are similar to my son in my residential area. I must travel to another city to receive services" (P2, P1, P13, P12, P11)). Also, two families said: "we need centres in our area. We need to travel to receive services and diagnose children with a disability (P4, P10).

In contrast to one of the participants, who said: "The centre communicates with the family during the crisis by following up the handicapped child and by sending their family courses online" (P14, P15), and some mentioned that they do not suffer from any crisis because of that matter, P6).

Also, 50% of the participants (number = 8 families) felt a high degree of psychological stress in terms of fear for their children, while 50% of the participants (number = 7 families) did not psychologically suffer from fear for their children. Some participants mentioned: "the mother

experiences a great fear during the crisis for the children as well as before the crisis" (P4, P1, P2, P3, P14, P15, P7, P13). While some mentioned: "There is no reason for great fear during the pandemic for children in general and handicapped d children in particular" (P9, P8, P5, P10, P11, P12, P7). All participants provided important responses and statements about the psychological effects on families of handicapped people during the Covid-19, and it is clear that there are clear psychological effects on the Egyptian and Saudi people, although some Egyptian families have declared the severe material stress they suffer from, especially with those who have some handicapped d people while these stress does not appear in Saudi families.

The second dimension that obtained from the participants' responses is social implications: The table shows that 80% of the participants (number = 12 families) suffered socially due to severe weakness in social communication during the Covid-19, while 20% of the participants (number = 3 families) were in social contact with relatives during the pandemic and were not affected at all.

One participant stated: "Certainly in social contact with family and relatives" (P3, P7, P9). Unlike some: "We got used to, and my handicapped son, in particular, to stay at home and not go to other places during the crisis" (P2, P1, P4, P5), other participants said: "We do not go to any places for fear of our children during the crisis" (P14, P15). One participant stated: "We only take care of our children at home for fear of mingling and going out during the pandemic and I think that this will continue for a while" (P4, P6, P8, P10), and another participant mentioned: "Losing opportunities for family visits and losing going out to practice usual life activities made my son isolated from others" (P12, P13).

All participants have reported and provided important responses and statements about the social impacts on families of handicapped people during the Covid-19, and it is clear that there are social effects that may extend to some people. Its effect is clear on the Egyptian and Saudi people, although some Egyptian families have authorized social visits, even if that causes some risks, the children want to go out and cannot sit at home for long periods, as well as the whole families.

The third dimension that obtained from the responses of the participants was the economic implications:

The table shows that 40% of the participants (number = 6 families) suffered financially during the Covid-19, and 60% of the participants (number = 9 families) were not affected financially by the pandemic.

Some participants mentioned that “I do not have work or any monthly income to meet the requirements of my handicapped son” (P6, P7, P15), and one of the participants mentioned that he sat at home because he worked in the private sector, and his wife went to work because she works in the government sector. (P4). A lady stated: “my husband lost the job because of the handicapped d son, the distance in transportation between the workplace and the child's centre and care, and the material impact of the issue” (P5, P13). While many of the participants stated that they did not suffer from any economic effects as a result of the pandemic, some participants mentioned, and perhaps the economic conditions were the most prevalent for Egyptian families, as mentioned (P11, P12, P13, P15).

The fourth dimension: the differences between different groups of families of handicapped people in the psychological and social impacts:

By analyzing qualitative interviews between families of handicapped people, there were differences between these families in terms of the psychological and social effects of different disability groups on their children, and they were as follows:

The presence of high psychological effects ranked as follows: (families of persons with mental disabilities, followed by families of physical and health disabilities, followed by families of autism spectrum disorder, and at the end of the list are families of people with visual impairment); and that in both countries Saudi Arabia and Egypt.

The families of persons with intellectual disabilities from both countries spoke about their great suffering and talked about their suffering in their interaction with their children with intellectual disabilities of different levels and groups and how they are trained or taught in the

case of students with intellectual disability (p1, p2, p3, p4, p11, p12, p13). Some of them also talked about the lack of support provided to this group when compared to normal people, and they talked about different forms of support, whether financial, training, treatment or care, and how they see their children inside the home (p12, p13), and two families of persons with an intellectual disability indicated the persistence of a sense of threat and the consequent fear of daily practices such as interaction and friction, and the vast majority attributed them to temporary stress, not permanent stress, and they will disappear with the disappearance of the cause (Covid-19). (p1, p2, p3, p11, p12).

The families of people with physical and health disabilities also spoke about the stress they are experienced due to the pandemic, such as the lack of adequate treatment, the inability to go to physiotherapy centres that are very necessary for their children and the lack of support provided to their children with health and physical disabilities. (p10, p15).

While the families of people with autism spectrum disorder mentioned their suffering, but it is simple and not to great extent. While they did not deny its existence (p14, p5, p6, p7).

The families of persons with visual impairment indicated that there was psychological stress on their children due to the inability to go outside, but it was not great, because they were used to being at home. (p9, p8).

5. Discussion

The purpose of the current study is to investigate the psychological and social impacts of families of handicapped people due to Covid-19, using a multi-modal research design. The results of the study showed the presence of psychological effects (anxiety and stress) to a moderate degree for the families of handicapped people from the viewpoint of the participants, where the mean of the statements ranged between (2.34 - 3.93). As the pandemic has led to psychological effects on the families of handicapped people and that more attention is given to normal people than with disabilities, either in Saudi Arabia or Egypt.

This result can be considered as the fact that the psychological effects were moderate, represented in the feeling of grief and fear among the families of handicapped people, whether in Egypt or Saudi Arabia, which led to the emergence of some behavioural problems of their children. The study of (Sepulveda-Loyola et.al, 2020) confirmed that the most important psychological problems that appeared on the sample as a result of the spread of the COVID-19 were anxiety, depression, sleep disorders and physical inactivity. On the other hand, this result differed from the study of (Wang et al, 2020), which aimed to know the effects of the spread of Corona in China, as the study revealed that most of the participants were psychologically stable and did not have bad psychological symptoms.

The results of the study also showed that all categories of families of handicapped people during the COVID-19 need an average of various social support to support their children with disabilities, as there are moderate social effects, as the means, the statements ranged between (3.77 - 2.36), due to the existence of a good relationship between families and their children, who showed their ability to compensate their children during the quarantine period. The reason may also be due to the families being discharged from jobs, social, and other duties, and they are practising some compensatory social activities with their children at home. This result is consistent with the suggestions of the study sample (Bhat et al, 2020), in which the participants showed that occupying oneself and the family in physical and religious activities and social work is one of the most important things that contribute to mitigating the effects of the new COVID-19 on children and families during the home quarantine.

However, the results of the -T-test showed that there are no differences between families of handicapped people in Egypt and Saudi Arabia in all social and psychological effects (anxiety), while there were differences in stress as one of the psychological effects between families of handicapped people in Egypt and Saudi Arabia in favour of Egyptian families, and this can be explained that there are no differences in anxiety and psychological effects in general, due to the

similarity of social and psychological conditions as well as the similarity of the precautionary measures taken by both countries, while the differences appeared only in the stress, including psychological and material stress, and this may compensate for the expense that families were subjected to in Egypt and the economic conditions experienced by members of the Egyptian community, especially families of handicapped people.

Evidence of psychological and social effects is noticed (not too less extent)on the families of handicapped people that they have been exposed to regarding poor care for their handicapped children due to their lack of experience due to the lack of educational, training, and instructional experiences, which has a psychological impact on children and their families. One participant expressed great concern regarding caring for his handicapped d son without receiving a previous or current training program, saying, "I feel less confident in caring for my autistic son because I have not attended a course on how to deal with him before. Therefore, it will be difficult to teach or introduce something because I am I have never learned it before '(P8). Two of the participants also expressed their concerns about this topic by saying, "we need to know more about caring for our sons, and it will only be achieved by training and developing our skills and our families, and we are also at this stage. we will attend more training programs or get more information about them as possible (P1) , P7). another participant said, I feel that the pressure of work besides caring for my children made me look for programs provided by the state in an organized manner or related institutions, and I found them not sufficient and not varied (P9), while one participant summarized his educational experience that most He is annoyed by the pressures that have befallen him and his family due to caring for his handicapped son (P4). We conclude from the above that all participants from the families of handicapped people provided important responses and insights about the psychological and social impact of the pandemic on handicapped people and their families) .Wang et al., 2020; Zhang et al., 2020

The participants indicated that they felt the need to put forward alternatives that must be available in

the support provided to their handicapped children due to the nature of these individuals, which they described as having great privacy in dealing with them, which affects their families psychologically, socially and economically. For example, one participant suggested that it is necessary to understand how to deal with them, and therefore it is necessary to facilitate the task of parents deal with their families and train them through the responsible authorities and that the support is equal to normal children and with the same attention and necessary support for them. another participant suggested 'I need training programs to develop the skills, my family, because this will give us more opportunities and reduce a lot of stress in educating, caring and development of our children during this period, and I will not find it difficult to deal with him if the appropriate training programs are available (P7). Contrary to this opinion, some participants have different views. One said, "The stress is high due to financial and economic stresses, especially with handicapped children and ways of dealing with them, and that it would be good to provide the necessary training" (P10). Some participants were more frank in describing this main concern, saying, "The lack of training programs for families of handicapped people led to high psychological stresses on them" (P6, P3, P4, P11, P12).

Finally, the majority of participants (P9, P10, P1, P2, P4, P5, P6) stated that they would feel more confident in caring for their children if the appropriate support was provided, which would reflect on them psychologically and on their children, and be more able to care for their children, and they added some suggestions to activate psychological support for them, which is summarized in the development of training programs that help them to take care of their children, multiplying them, publishing and expanding the scope of programs for all categories of the handicapped, including new educational alternatives, presenting them through effective media and strategies, developing parents' skills in supporting their children, and announcing summer camps and interactive meetings during vacations and crises. This is in line with the study of (Helali et al, 2020), which indicated the importance of providing media programs for the development of mental health, followed by recreational skills and

skills development for families of handicapped people of all groups.

The responses of the participants also revealed the importance of psychological and social support, which focuses on supporting the mental health of their children and increasing their interaction with the environment around them. The visual impairment, which they say leads to an increase in their self-confidence, which is reflected in other personal aspects. Social programs, including entertainment programs, are in second place (P8, P9, P1) and this is in agreement with what was indicated by the study (Prem et al., 2020), which indicated the impact of preventing meetings on individuals with disabilities and those around them as a result of COVID-19. The participants agreed that programs that focus on mental health are very important, as psychological aspects during COVID-19 are followed by entertainment programs, followed by skill development.

Generally speaking, the most prominent responses of the participants came in the presence of high anxiety in them and among their children and in psychological stress, especially in the Egyptian environment, and I found great stress on them, especially economic stresses.

Therefore, it was proposed to conduct another study with a greater focus on the psychological effects of handicapped people that includes all categories of families of handicapped people in all Arab countries and on a larger sample, and it was also proposed to conduct further studies to verify the impact of the COVID-19 and its continuation on the families of people in Arab countries in general.

The results also indicate that all families of handicapped people during the COVID-19 are in dire need of psychological and social support through programs and media alternatives to support their children with disabilities, and this is consistent with what was indicated by the study of (Earn et al., 2012), which indicated the need for various support for all people in general and handicapped people in particular during this crises, and this is consistent with what was indicated by UNESCO (UNESCO Bangkok, 2020). According to the degree of psychological vulnerability of families of people with (mental

disability, autism spectrum disorder, physical and health, visual impairment), respectively, and this result can be interpreted that the needs of the visually impaired are less compared to the mentally handicapped, autistic, physical and health due to their high mental abilities, and the provision of special features that facilitate interaction and social media follow-up, this study is consistent with the study of (Shaheen & Shabelle, 2019). Many participants stated, "There are high economic impacts as a result of the needs of handicapped children" (P1, P2, P4, P5, P7, P8, P9).

6. Conclusion:

The present study aimed to identify the psychological (anxiety - stress) and the social effects of families of handicapped people during the Covid-19, using a multi-method research design. Quantitative data also showed that the participants have an average level of psychological and social effects for families of handicapped people, while there were no differences in the psychological and social effects in general between the Egyptian and Saudi societies, while there were differences in psychological stress as one of the psychological effects between families of handicapped people in the two societies in favour of Egyptian society, and the qualitative data supported the quantitative statistics and added the presence of higher psychological effects in favour of families of persons with (intellectual disability, autism spectrum disorder, physical and health, and visual) respectively.

In the qualitative analysis, four elements appeared related to the psychological and social effects of families of handicapped people, namely: the presence of psychological effects ranging from high to medium, the presence of moderate social effects, the presence of moderate economic effects. The ranking of psychological effects on the families of handicapped people, respectively (intellectual disability, spectrum disorder Autism, physical, health, visual).

In summary, the qualitative data supported the quantitative findings. These results indicate that the majority of families of handicapped people,

despite the different ages and disabilities of their children and the degree of disability they have, they are affected psychologically and socially to a moderate degree, and they agreed on the necessity of the availability of supporting programs that focus on training and educating them which focus on supporting the mental health of their children, followed by entertaining and social programs.

There is a recommendation linked to the results of this study, which is the support should be provided to the families of handicapped people, especially their mothers, and to provide specific training programs that suit different disability categories. Several limitations must also be noted regarding the current study:

First: The number of people who were interviewed and willing to contribute to this study was limited to 15 families (10 from Saudi Arabia and 5 from Egypt), including seven families with intellectual disabilities, four families with an autism spectrum disorder, and two families with physical and health disabilities, and two families with visual impairments.

Second: The researchers tried to conduct a study on all Arab countries, but this was not possible, with the researchers' attempts to conduct the study on the largest number of families in the different Arab countries.

Third: A proposal to conduct extensive research that deals with the impact of families of all disability groups and their various degrees, and on the various Arab countries.

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