

Cognitive Recovery and its Relationship to Quality of Life among Parents of Autistic Children in Jordan

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Abstract

Disabled children have more complex demands than typically developing children, both in terms of their physical and emotional health. Parents' reactions will change as a direct result of this. As a result, parents' quality of life suffers as they struggle to care for their disabled children. In order to make conclusions regarding the lifestyles of parents who are meeting the medical needs of their disabled children, this research will examine those parents' daily routines. This method combines a cross-sectional strategy with quantitative and descriptive methods. The entire sampling method was used, and it resulted in responses from the sample pool. This research found that the average value of a person's quality of life was best in the area known as social connections, followed by the domains known as psychological and environment, and lowest in the domain known as physical health. When looking at parents as a whole, the median Q1 rating is a 4, indicating an exceptional quality of life, while the median Q2 value is a 4, indicating an adequate quality of life. Both of these measurements point to a high quality of life for the parents.

Keywords: Cognitive Recovery • Life Quality • Parent • ASD

Introduction

When it comes to providing for the requirements of their disabled children and ensuring that their children get the right care, the onus of duty falls squarely on the shoulders of the parents. The responsibility of carrying this burden of responsibilities throws a substantial amount of weight on the shoulders of the parents. The number of parents who are able to provide care for their disabled children is directly related to the degree to which these goals may be accomplished in the future [1]. Evaluations and scores of families living with Autism Spectrum Disorders (ASD) are lower when compared to the evaluations and scores of families coping with other forms of impairments [2]. This is because families whose children with ASD have a worse quality of life overall. These assessments and ratings provide an indication of how well their families operate [3]. This is true for the adults in the family as well as the younger members of the family. This is because autism spectrum disorder is not a single disease but rather a spectrum sickness that affects a broad variety of people. The reason for this is because autism spectrum disorder is not a single illness.

When caring for children, one must be prepared to confront a broad array of challenges, some examples of which include difficulties with behavior and emotional control, difficulties in social situations, anxiety, and feelings of grief. These difficulties may also manifest themselves as other problems of a comparable kind. The fact that all of these incidents take place on a regular basis in the lives of children who have Autism Spectrum Disorder (ASD) is an essential component that adds to the higher levels of

stress that the children's parents face. Parents who are responsible for the parenting of children who have mental disorders need a significant amount of assistance from their extended family members in order to be able to perform the parental responsibilities that are entrusted to them.

Because of the elevated level of medical attention that is required as a result of their condition, children who have mental retardation have a greater than average need for specialized medical therapy. It is both expensive and time-consuming to provide for these children because of the elevated level of medical care that is required as a result of their condition. As a direct result of this, the load that the family must bear becomes much more difficult to manage, and as a direct result of this, the family's sense of pride in themselves is diminished as a direct result of this. Not only will the burden, together with the related poor levels of self-esteem, have an effect on the quality of life, but it will also have an effect on the capacity to provide care for children who have mental retardation. In other words, the quality of life will be negatively impacted. This is as a result of the fact that an individual's total quality of life is directly influenced by their ability to offer care for others.

The extent to which parents are able to accept and adapt to the situations of their children, the presence or absence of social support, and the qualities that are shared by both parents. And the children in question are some of the contributing factors that add to the stress that is placed on parents who have children who have impairments. The fact that their children have special needs places an additional burden on the shoulders of those parents [4]. It has been demonstrated that the characteristics of the person providing care have an effect on the level of stress that is experienced by that person as a direct consequence of providing care for another individual. This is because the level of stress that is experienced by the person providing care for another individual is directly correlated to the amount of care that is provided. The act of giving care for another person is a direct contributor to this stress, which is a direct result of that act. This includes, but is not limited to, the person's age, gender, amount of money, working status, level of education, the degree of disability, and the length of time that they have been providing care for the client. Additionally, this does not include the length of time that they have been providing care for the client. In addition, this does not take into account the amount of time during which they have been providing care for the customer.

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Research Methodology

For the purpose of this investigation, a descriptive quantitative approach was chosen as the method of investigation, and it included the simultaneous distribution of questionnaires (cross sectional). The location of this research is a Jordanian special school, which is acting as both the participant and the site. Participants in this study are parents who are currently raising children of any age who have been diagnosed with a handicap of some type. The sample for this study included 122 people, all of them were parents who had children with disabilities who were of school age. All of the participants in the sample were parents. For the purpose of this research, the technique of data gathering known as full sampling was used. How to collect data with the use of a research instrument, especially a questionnaire on how one feels about their own quality of life and how they would rate it.

Result and Discussion

According to the data shown in Table 1, the quality of life for parents has an average value of four. The questions included in questionnaire number one are used to get the median value. If this score is high, it suggests that individuals in general have a good quality of life to begin with. According to Table 1, the quality of life question no. 2 has a median score of a 4, which suggests that an individual is content with their life. The respondents reported feeling satisfied with the way their personal health was now going.

The domain of psychological well-being comes in second place as the field with the highest score for quality of life with a score of 64.80, which is followed by the field of social contacts as the field with the highest score for quality of life as the field with the highest score for quality of life (63.07). And the environment (62.98), with the domain of physical health having a score that is the farthest below all of the others than any of the others combined than any of the others combined than any of the others combined than any of the others combined (54.24). A total of 122 persons responded to the questionnaire that was sent to them as part of this inquiry and were counted as participants in this investigation (Table 2).

When it comes to the particular aspect of quality of life known as social relationships, this particular subcategory often earns the highest total score possible on average. After that, we will go on to discussing the environmental and psychological facets of the issue that we have been looking at thus far. In addition, the category of physical health was assigned the total score that corresponded to the very lowest possible level that could be reached [5]. The fact that parents who have children with disabilities have the greatest number of social connections is evidence that these parents do not experience any difficulties or obstacles in their relationships with other people as a direct consequence of the fact that they are in this situation. This is because the fact that these parents have children with disabilities has the greatest number of social connections.

The next two areas of inquiry that are going to be carried out are going to be research into the psychological and environmental domains, respectively [6]. This is going to be done as part of the research that is going to be carried out. This indicates that parents are able to think positively in

dealing with existing problems, obtain sufficient support from family and relatives, and have a strong sense of acceptance of their child's disability. Additionally, this indicates that parents are able to obtain sufficient support from family and relatives. In addition, this suggests that parents are able to get enough assistance from their families and other relatives. In addition, this seems to imply that parents are able to get sufficient aid from their family and other relatives in their extended networks. In addition to this, it seems to suggest that parents are able to get enough assistance from their family as well as other relatives who are part of their extended networks. In addition to this, it would appear that there is evidence that families are able to get appropriate assistance from both their own families and the families of their relatives, including both immediate and extended family members. This would seem to indicate that families are able to receive appropriate assistance from both their own families and the families of their relatives.

The "good" group had the highest scores in the quality of life domain overall, as well as the top scores in the physical and psychological health subdomains [7]. This indicates that the "good" group is in the best overall health. They were in the finest possible shape all around, which contributed to this result. This would imply that the "good" group is in far better health than the other group, in terms of both their physical and emotional well-being [8]. The "very good" category, which was given the highest rating available, was awarded the fewest points possible altogether. In the meanwhile, it is believed that the realms of social interactions and the environment have a degree of complexity that is somewhere in the middle of the two extremes. This might be because both of these spheres are interconnected. When parents of children with disabilities have positive results in their own physical and mental health, it indicates that the parents do not face substantial problems related to their own physical and mental health. The case when the parents have positive results in their own physical and mental health [9]. Even though intermediate scores in the area of social and environmental interactions indicate that there is a possibility of altering the value of one's quality of life either toward a better or vice versa, depending on the score, the scores do indicate that there is a possibility of altering the value of one's quality of life either toward a better or vice versa, but the scores do not indicate whether or not this change will occur. However, the scores do indicate that there is a possibility of altering the value of one's

The factors that might influence an individual's capacity to carry out a job assignment is the individual's physical health [10]. This capacity can be influenced in a number of various ways depending on how the individual's physical health shows itself in their daily life. The findings of the study led the researchers to the conclusion that the quality of a parent's physical health may be affected by a number of factors, such as complaints of degenerative illnesses, the inability to sleep as a result of the condition of children who frequently wake up during the night, biological circumstances, and age-related considerations. The researchers came to this conclusion after considering the findings of the study. The results of the study led the researchers to arrive at this conclusion, which was a direct outcome of those findings. These findings were arrived at by the researchers after taking into account the findings from the inquiry. The following are some of the things that were included in those results:

According to the World Health Organization's Quality of Life report, the aspects of a person's physical health that contribute to one's quality of life are the person's daily activities, dependence on medications and other forms of medical assistance, energy and fatigue, mobility, pain and discomfort, sleep and rest times, and one's capacity for work. Other factors that contribute to one's quality of life include one's capacity for family and social relationships. The ability to maintain healthy connections with one's family and friends, as well as the capacity to engage in meaningful employment, are two more aspects that contribute to an individual's quality of life [11,12]. One further aspect that determines a person's quality of life is the degree to which they are able to make a monetary contribution to their family. The capacity of an individual to maintain their own financial well-being via engaging in meaningful job is an additional component that contributes to the determination of the overall quality of a person's life [13]. According to the findings of other studies, fathers of children with

Table 1. Test on Quality of Life of Parents with Children with ASD

	Median	SD	Minimum-Maximum
Quality of Life Q1	4	0.806	01-Jan
Quality of Life Q2	4	0.795	05-May

Table 2. Average Value and Standard Deviation of Quality of Life of Parents with Children with Disabilities Based on Quality of Life Domain.

Quality of Life Domains	Median	SD
Physical Health	54.24	9.02
Psychological	63.07	11.898
Social Relations	64.8	12.885
Environment	62.98	10.706

special needs have a lower quality of life in terms of their health and report experiencing higher levels of stress than parents of children who do not have special needs. This is in comparison to the findings of studies that were conducted on parents of children who did not have special needs. This is in contrast to the findings of studies that were carried out on the parents of children who did not have any special requirements or need for medical care. In contrast, the experience of parents whose children do not have any particular needs is not affected in any way by this fact. When compared to parents of children who do not have special needs, parents of children who do have special needs face a unique set of problems. When compared to parents of children who do not have special needs, parents of children who do have special needs face a unique set of challenges.

Parents who are responsible for children who have autism endure a major burden, which eventually leads in a decline in the parents' own quality of life [14]. Autism is a developmental disorder that affects the brain's ability to communicate [15]. Parents who have children with intellectual impairments are confronted with a tremendous problem since their children with intellectual disabilities are incredibly reliant on them and have a continuing necessity for protection and care. This is due to the fact that their children have a continuous need for guidance and protection. Because their children have intellectual impairments, the family has been presented with this obstacle, which came about as a direct result of the fact that their children have such problems. These youngsters have a fundamental need, not just for their own protection, but also for support and aid from adults [16]. A person's physical health, their social life, their financial status, their moods, and the ties they have with their family members may all be significantly impacted by the responsibility of providing care for another person. The feeling of exhaustion is one of the physical ramifications that comes along with being responsible for meeting the requirements of underprivileged children's needs [17]. This is only one of many distinct bodily repercussions that may be noticed as a result of the situation. It's possible that having to take care of disabled children will have a range of diverse consequences on your body, including this feeling, which is one of those repercussions. Having to look for handicapped children may also have a variety of additional negative effects on a person's physical health.

Conclusion

The findings of research conducted on the quality of life of parents who have children with special needs allow for the following conclusion to be drawn: the quality of life domain with the highest scores is the domain of social relations, followed by the psychological domain, and then the environmental domain. The domain with the lowest scores is the domain of environmental quality of life. On the other hand, the realm of physical health is the one that is the least significant. The degrees of satisfaction that the respondents had about both their personal health and the quality of life in general were indicators of positive values.

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