

Research Article

Cite this article: Algethami, R. (2025). The Association of Parental Stress and Social Support as Predictors Among Children with Intellectual Disabilities in Saudi Arabian Special Education. *Educational Process: International Journal*, 18, e2025462. <https://doi.org/10.22521/edupij.2025.18.462>

Received July 7, 2025

Accepted August 28, 2025

Keywords: Parental stress, social support, intellectual disabilities, special education, Saudi Arabia

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The Association of Parental Stress and Social Support as Predictors Among Children with Intellectual Disabilities in Saudi Arabian Special Education

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Abstract

Background/purpose. Having a child with an intellectual disability creates significant challenges for parents, including psychological and social burdens. These challenges directly impact the home-school partnership and the child's educational experience. This study investigates the parental stress experienced by caregivers of children with intellectual disabilities (IDs) in Taif, Saudi Arabia, and identifies the best predictors of social support to mitigate this stress. A key aim was to generate findings that could inform school-based support programs and educational policy.

Materials/methods. This study used a descriptive approach to collect data from 213 parents of children with IDs who completed online questionnaires measuring parental stress (Parental Stress Scale) and social support (Multidimensional Scale of Perceived Social Support).

Results. The key findings showed that parents encounter many feelings of stress when dealing with children. Also, parents of children with intellectual disabilities encounter an apparent lack of social support from their friends and family. Predictors of social support (family, friends, others) strongly correlate with parental stress; however, the social support of friends and other important people significantly predicted parental stress.

Conclusion. Parents of children with IDs experience high stress and insufficient social support. Therefore, beyond individual parent recommendations, there is a compelling need for systemic, education-focused interventions. It is recommended that schools and community organizations develop programs to facilitate parent support groups, provide resource navigation, and train educational staff on their role as key sources of support. By strengthening the ecosystem of support around the parent, educational outcomes for children with IDs can be improved.

1. Introduction

Psychological influences of disability have increasingly impacted parents and their children with disabilities in many communities. To put it another way, parents of children with intellectual disabilities (IDs) confront many psychological problems due to the stress of disability responsibilities, with the absence of social support roles within their communities (Dukmak & Alkhatib, 2021). The investigations of the association between parental stress caused by having children with IDs and the perceived social support such as family, friends, and others predictors are still necessary to be conducted to support such children. For educators and school administrators, understanding these dynamics is critical. Parental well-being is intrinsically linked to a child's educational outcomes; a stressed, unsupported parent is less able to engage effectively in their child's learning and collaborate with school personnel. However, past studies found a communal influence between the perceived social support of parents of children with disabilities on the one hand and their parents' stress on the other hand; especially, social support from family, friends, and others to parents can be the main factor in reducing their stress (Dukmak & Aburezeq, 2012).

Research examining stress among parents of children with disabilities reveals significant gender differences in psychological impacts. Mothers consistently report higher levels of depression and anxiety (Gray, 2003; Hastings et al., 2005; Lisak et al., 2018; Oelofsen & Richardson, 2006) compared to fathers (Vilaseca et al., 2014), with the demands of daily caregiving contributing substantially to maternal stress (Meyer, 2002). However, some studies found no significant gender differences in stress levels (Hadadian, 1994; Hastings, 2003). While older parents generally experience greater stress due to interaction difficulties (Cuzzocrea et al., 2013), this pattern does not consistently appear among mothers (Amireh, 2019; Al-Qaisy, 2012). Family composition also influences stress, as parents with multiple children with disabilities report higher stress levels both in China (Liu & Hong, 2021) and Ireland (Truesdale & McConkey, 2001). The relationship between parental education and stress remains contested, with some studies showing positive associations (Dabrowska & Pisula, 2010; Lisak et al., 2018) while others report no clear relationship (Ricci & Hodapp, 2003; Shin & Nhan, 2009).

While prior studies in Saudi Arabia (e.g., Al-Towairqi et al., 2015; Sulaimani et al., 2023) examined parental stress broadly, none investigated the differential impact of social support predictors (family, friends, others) on stress among parents of children with intellectual disabilities (IDs) in Taif. This study uniquely addresses this gap by analyzing which type of support most effectively mitigates stress in this cultural context.

Financial challenges represent the most significant difficulties for parents of children with IDs (Anderson et al., 2018; Genereaux et al., 2015; Parish et al., 2015; Stabile & Allin, 2012), as they typically earn 30% less than parents of typically developing children, exacerbating stress (Grant et al., 2017; Robinson et al., 2016) and sadness (Kim, 2017). Low-income parents experience heightened stress (Lisak et al., 2018), necessitating adequate income for wellbeing and reduced depression (Olsson & Hwang, 2008). Conversely, Amireh (2019) found income unaffected stress, while Gur et al. (2020) reported no direct stress-financial resources relationship.

2. Literature Review

Numerous studies have investigated how stress levels affect parental social support for children with disabilities. Childcare assistance, as a form of parental support, consistently predicts various stress outcomes (Guralnick et al., 2008). Research demonstrates that mothers of children with developmental or intellectual disabilities experience reduced stress when receiving social support (Crnic et al., 2017; Heifetz et al., 2019; Hong & Liu, 2021). Mancil et al. (2009) found that adequate informal support, particularly from extended families, significantly enhanced well-being among Arab mothers of children with disabilities, a finding corroborated by research on South Asian Muslim immigrant families (Jegatheesan et al., 2010). Japanese mothers of children with disabilities showed

connections between psychological stress (Porter & Loveland, 2019) and well-being (Norlin & Broberg, 2013) with social support availability, while partner support reduced stress even for mothers of typically developing children (Hall & Graff, 2011; Sarimski et al., 2013).

Research has demonstrated a significant association between childhood disabilities and family psychological health in Taif (Bukhari et al., 2020; Sulaimani et al., 2023; Al-Towairqi et al., 2015; Sayed et al., 2022), negatively impacting these families' emotional well-being.

Al-Towairqi et al. (2015) examined psychological depression among mothers of children with autism compared to mothers of neurotypical children. The study included 60 autistic children and their mothers recruited from the Mental Health Clinic at Children's Hospital and a private Autism Centre in Taif, Saudi Arabia. These mother-child dyads comprised the case group, while the control group was matched by child age and sex, and maternal age. Using a standardized depression inventory, results revealed significantly higher depression levels in mothers of autistic children. Based on these findings, Al-Towairqi et al. (2015) recommended implementing psychological interventions, community group support, and enhanced social support systems to alleviate maternal depression in this population.

Sulaimani et al. (2023) conducted a purposeful study comparing quality of life among family caregivers according to sociodemographic and child characteristics. Ninety-five families completed structured self-questionnaires while their children attended various Saudi rehabilitation centres. The researchers found disability severity, caregiver education level, and parent-child relationship quality significantly correlated with emotional and psychological difficulties (Sulaimani et al., 2023). These findings highlight the need for supportive community interventions to enhance parental emotional well-being.

Families of children with disabilities experienced reduced quality of life during COVID-19. Sayed et al. (2022) assessed 76 parents in Taif, Saudi Arabia, using a semi-structured questionnaire, finding that most parents of autistic children reported stress, isolation, and restrictions during quarantine. However, positive community attitudes and parental education were crucial for overcoming psychological challenges (Bukhari et al., 2020). For example, Bukhari et al. (2020) examined community support attitudes toward Down syndrome through an online questionnaire with 1,954 participants in Taif. Their results indicated greater awareness and more positive attitudes among those with higher education levels.

Global research interest has grown significantly regarding individual health and psychological safety, with particular emphasis on family wellbeing (Said Mohammed et al., 2021). Families face substantial challenges when raising children with disabilities, especially those with severe impairments, as increasing disability severity often exacerbates parental stress and anxiety. Said Mohammed et al. (2021) examined stress levels, mental health, and coping strategies among Egyptian parents of children with Down syndrome using descriptive methods, interviews, and standardized scales with 50 parent participants. Their findings indicated 50% of parents experienced high stress levels, 35% reported moderate stress, over 50% demonstrated poor coping strategies, and 70% showed compromised mental health. These results highlight the critical need for psychological support systems for families of children with disabilities.

A comprehensive literature review reveals no prior studies examining the relationship between parental stress and social support predictors (family, friends, others) for parents of children with intellectual disabilities (IDs) in Saudi Arabia. This gap is particularly salient for the education sector, as schools are often a primary point of contact and a potential hub for coordinating support services for families. Furthermore, research remains limited even in Western contexts regarding how these specific support factors influence stress outcomes in this population (Dukmak & Alkhatib, 2021). This significant gap in the literature warrants urgent investigation. Identifying the most effective type of

support can guide schools in Taif and similar regions on where to focus their efforts when developing family engagement programs and support networks.

Given increasing global research attention on caregiver stress, this study examined stress levels among parents of children with intellectual disabilities (IDs) and available social support types in Taif, Saudi Arabia - a notably understudied population (Dukmak & Alkhatib, 2021). To our knowledge, no prior research has investigated this relationship specifically in Taif. The study aimed to identify key social support predictors (family, friends, and other support) of parental stress for families raising children with IDs in the Saudi context. This addresses a critical gap in both regional and international literature on disability-related family stress.

Research questions

Q1: What are the average parental stress and social support predictors (family, friends, and others) of parents of children with IDs?

Q2: What is the best predictor of social support to parental stress of children with IDs?

3. Methodology

3.1. Research Sample

Four hundred forty-seven parents participated in this survey research study in Taif, Saudi Arabia. The initial target ($N=447$) was based on power analysis for detecting small effects (Cohen's $f^2 = 0.10$, $\alpha = 0.05$, power = 0.95). Parents completed an online survey during the initial semester of academic year 2024/2025 to capture early-year stress dynamics. The current study used simple random sampling to ensure equality and independence when choosing the sample. Parents were mainly women (130), and nearly 86% were married. The parents with the total representation were those aged 56–65 years (25.8%), those working (85.9%), completing college education (57.3%), and those receiving below the minimum wage (85.9%).

3.2. Procedure

This study was conducted online over two months. The researcher received approval for this study from Ethics Committee for Scientific Research at the Deanship of Scientific Research at Taif University. The Department of Public Relations and University Media at Taif University has contacted the General Administration of Education in Taif Governorate to distribute the questionnaire link to all parents of students with IDs. The General Administration of Education in Taif Governorate sent messages with the survey link to parents of students with IDs until reaching the sample size. All parents completed the voluntary consent section in the online questionnaire and were assured confidentiality. The author expected to gain 447 responses from parents, but only 217 parents responded to the questionnaire, of which four questionnaires were excluded because they did not follow the questionnaire instructions. Consequently, the total number of questionnaires used for analysis was 213.

3.3. Measurements

The author administered the following two reliable scales with minor adaptations: The Parental Stress Scale (PSS) by Berry & Jones (1995) and the Multidimensional Scale of Perceived Social Support (MSPSS) by Zimet et al. (1988).

Parental Stress Scale. The PSS is an eighteen-item statement adapted to assess the parents' feelings about their role in parenting. It also explores positive aspects, such as personal development and emotional benefits, and negative thoughts, such as stress feelings and demands on resources (Berry & Jones, 1995). The PSS is used to assess parental stress for fathers and mothers of children with/without disabilities. It covers different measures of anxiety, emotion, and role satisfaction. The

response options are: "strongly disagree", "disagree", "undecided", "agree", and "strongly agree", and are recorded as 1, 2, 3, 4, and 5, respectively. Therefore, the range of parental stress scores is from 18 to 90, with lower scores showing lower levels of PSS. The scale has demonstrated good internal consistency of the PSS (Cronbach alpha values ranging from 0.83 to 0.86) and reliability (intraclass correlation = 0.81) (Berry & Jones, 1995). This study used the back translation to translate the PSS from English to Arabic. Specialists in English and Arabic linguistics examined the scale accuracy after translation and linguistic formulation. Furthermore, the reliability of the data collected with the Saudi version of the PSS was good (Cronbach α = 0.86), consistent with previous studies ranging from 0.74 to 0.94.

Multidimensional Scale of Perceived Social Support. The MSPSS is a 12-item questionnaire and a short instrument created to assess the perception of support from three sources: family, friends, and others (Zimet et al., 1988). The MSPSS is also used to measure support for fathers and mothers of children with and without disabilities. It covers various support from family, friends, and significant others. The response options are "very strongly disagree", "strongly disagree", "disagree", "neutral", "agree", "strongly agree", and "very strongly agree" and recorded as 1, 2, 3, 4, 5, 6, and 7, respectively. Therefore, support scores range from 18 to 90, with lower scores indicating lower levels of parental stress. The scale has demonstrated excellent internal consistency (Cronbach α = 0.92) and reliability (intraclass correlation = 0.83) (Zimet et al., 1988). The present study used back translation to translate the MSPSS from English to Arabic. Specialists in English and Arabic linguistics examined the scale accuracy after translation and linguistic formulation. Furthermore, the reliability of the data collected with the Saudi version of the MSPSS was good (Cronbach α = 0.87), consistent with previous studies ranging from 0.74 to 0.94.

3.4. Data Analysis

This study used descriptive and inferential analyses. The SPSS (v23) was applied to analyze descriptive statistics, including percentage, average, frequency, and standard deviation. The first research question used the mean and standard deviation analyses to reveal the average parental stress and social support predictors (family, friends, and others) of parents of children with IDs. The author conducted a simple linear regression analysis to examine the best predictor of social support to parental stress of children with IDs for the second research question.

4. Results

Table 1. Characteristics of parents of children with IDs

Variables	N	Percentage
Overall	213	(100)
Gender	83	(39%)
Men	130	(61%)
Women		
Marital status	184	(86.4%)
Married	29	(13.6%)
No married or divorced		
Age	36	(29.6%)
26–35	45	(21.1%)
36–45	50	(23.5%)

46–55	55	(25.8%)
56–65		
Education	11	(5.2%)
Junior high school	80	(37.6%)
Senior high school		
College	122	(57.3%)
Job Status		
Working	183	(85.9%)
Not working	30	(14.1%)
Income		
Below the minimum wage		
Above or equal to the minimum wage		
Children's ages		
6-12		
12-15	183	(85.9%)
15-18	30	(14.1%)
Severity of ID		
Mild		
Moderate	140	65.7%
Sever	53	24.9%
	20	9.4%
	112	52.6%
	91	42,7%
	10	4.7%

Table 1 shows the frequency and percentage of parents of children with IDs. Parents were mainly women (130), and nearly 86% were married. The parents with the total representation were those aged 56–65 years (25.8%), those working (85.9%), completing college education (57.3%), and those receiving below the minimum wage (85,9%). Contrarily, parents under 65, those with a high school education, not working, and those receiving above or equal to the minimum wage were the least represented participants in this study. Children's ages ranged from 6–18 years ($M = 12.4$, $SD = 3.1$); most children had mild-to-moderate IDs.

Table 2. Descriptive Statistics of parental stress and social support predictors

	Mean	Std. Deviation	N
Parental stress	1.3396	.65001	213
Family social support	1.5998	1.00844	213
Friends' social support	1.9112	1.27995	213
Others' support	2.9538	1.77910	213

For the first question, Table 2 reveals the mean and the standard deviation of parental stress and social support perceived by parents of children with IDs in Taif. First, the mean of parental stress of

children with IDs scored ($M=1.33$, $SD=.650$), indicating that parents experience a high level of stress when dealing with children in Taif. Furthermore, the average social support provided to parents of children with IDs was family ($M=1.59$, $SD=1.00$), friends ($M=1.91$, $SD=1.00$), and others ($M=2.95$, $SD=1.00$). This result indicates that parents of children with IDs lack social support from their friends and family except for others; parents receive neutral support from others. This result suggests that the lack of social support may be linked to the parent's feelings of stress.

Table 3. The overall regression of parental stress and social support predictors

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	9.745	3	3.248	8.505	.000 ^b
	Residual	79.827	209	.382		
	Total	89.572	212			

a. Dependent Variable: Parental stress

b. Predictors: (Constant), family, friends, others

Table 4. Correlations between parental stress and social support predictors

		Parental stress	Family support	Friends' support	Others' support
Pearson Correlation	Parental stress	1.000	-.185-	-.255-	.193
	Family support	-.185-	1.000	.629	-.045-
	Friends' support	-.255-	.629	1.000	.061
	Others	.193	-.045-	.061	1.000
Sig. (1-tailed)	Parental stress	.	.003	.000	.002
	Family support	.003	.	.000	.258
	Friends' support	.000	.000	.	.186
	Others' support	.002	.258	.186	.
N	Parental stress	213	213	213	213
	Family support	213	213	213	213
	Friends' support	213	213	213	213
	Others' support	213	213	213	213

For the second question, tables 3 and 4 reveal perceived social support predictors and their correlation with the parents' stress by using simple linear regression. The analysis revealed that family and friends' support has a strong, negative correlation with parental stress; however, others' support had a positive correlation with parental stress (with high levels of others associated with lower levels of parental stress. The overall regression was statistically significant ($R^2 = .109$, $F(3, 209) = 8.505$, $p < .000$). However, this result indicates that friends' support and others' support extremely predicted parental stress. Friends' support scored a higher beta coefficient ($\beta = -.261$, $p < .002$) than others' support ($\beta = .208$, $p < .002$).

5. Discussion

This study examined relationships between perceived social support and parental stress among caregivers of children with intellectual disabilities (IDs) in Taif. Results indicated elevated stress levels among participants, consistent with Truesdale and McConkey's (2001) findings regarding mental health challenges in parents of children with disabilities. Furthermore, Hong and Liu's (2021) research on Chinese families similarly demonstrated that parenting stress escalates when raising multiple children with disabilities. These findings have direct implications for educational practice. Schools supporting students with IDs must recognize that they are also supporting families under significant duress.

In addition, the current study revealed that the parents of children with IDs experienced a need for social support, especially from their friends and family in Taif. This issue can bring a lot of challenges and mental health problems. This finding aligns with a study highlighting the quality of social support in relation to parental stress, particularly family support.

The study revealed significant negative correlations between parental stress and both family and friend support, while other support showed a positive association. These findings align with previous research demonstrating that inadequate social support exacerbates stress (Crnic et al., 2017; Jegatheesan et al., 2010; Hong & Liu, 2021; Porter & Loveland, 2019; Norlin & Broberg, 2013). However, some studies report contradictory findings where increased support correlated with higher stress (Dukmak & Aburezeq, 2012; Mancil et al., 2009). These discrepancies may reflect variations in support quality, cultural perceptions of disability, or parental coping mechanisms across different communities.

The present study indicates that parents encountered a variety of stress-related emotions while managing their children with IDs. Therefore, a first recommendation is that schools and educational districts should take a proactive role in facilitating support. Educational institutions can host parent support groups, provide workshops on stress management and self-care, and create formal partnerships with local mental health services to offer guidance and therapeutic services directly within the school community. However, the current study also reveals that parents of children with IDs often experience a deficiency in social support from their friends and family. Thus, parents should engage with fellow parents of children with IDs, seek guidance from a parenting mentor, and explore online courses or research on parenting strategies.

6. Conclusion

The present study investigated the stress experienced by parents of children with IDs related to the available social support factors. In Taif, parents of children with IDs experience high stress and receive low social support from their family and friends. These results underscore a vital opportunity for the education system to intervene. Therefore, schools and educational policymakers should actively develop programs to expand parental support networks. This can include creating official school-led parent mentorship programs, utilizing communication platforms to share resources and experiences, and formally integrating parent support into the school's mission. Such initiatives will not only reduce parental stress but also foster stronger home-school collaboration, ultimately creating a more supportive and effective educational environment for the child with IDs.

7. Limitations

The study utilized an online survey distributed through the Taif General Administration of Education. This method, while practical, may have introduced selection bias by primarily reaching parents who are more engaged with the school system, have internet access, and are comfortable with digital tools. Consequently, the experiences of more isolated or technologically disconnected parents are likely underrepresented. Furthermore, the sample was drawn exclusively from the Taif

region. The unique socio-cultural and economic fabric of Taif may not fully represent the diversity of experiences across all regions of Saudi Arabia. Therefore, generalizing the findings to the entire Saudi population should be done with caution.

8. Suggestions

The suggestions of the current study mainly focused on the limitations and future studies related to this study. First, the current study investigated the views of parents of children with IDs in Taif, Saudi Arabia. It can be unrealistic to generalize such results over the whole country. Therefore, potential researchers should conduct similar studies in different regions of Saudi Arabia. Second, the current study generally sought to investigate the parents' stress of children with IDs about the social support predictors provided to them. However, it did not examine the parents' characteristics in this relationship. Therefore, future studies may integrate some parents' information, including age, education, and other information, based on the main variables of this study. Third, it is crucial to build clinical programs to reduce the severity of pressures on parents, especially mothers. Moreover, while therapeutic interventions (e.g., art therapy) were beyond this study's scope, it is recommended that future research explore their efficacy in Arab contexts, where cultural attitudes toward non-traditional support may differ. Finally, it is helpful to increase attention to parents of children with IDs by providing the necessary psychological and social support programs for them.

Declarations

Author Contributions. This study was designed and written by Algethami, Rasheed. His roles included conceptualization, investigation, methodology, validation, resources, writing, review & editing, data curation, formal analysis, and writing the original draft.

Conflicts of Interest. The author declares no conflict of interest.

Funding. The author declares no financial interests or compensation related to this research.

Ethical Approval. This research has received an ethical approval from the Ethics Committee for Scientific Research, affiliated with the Deanship of Scientific Research at Taif University, Kingdom of Saudi Arabia. (Approved No. 563211-187-342653-442351).

Data Availability Statement. The datasets generated and analyzed during the current study are available from the author on reasonable request.

Acknowledgments. The author would like to thank the parents of children with intellectual disabilities in Taif for responding to the study questionnaire.

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