

**PERCEPTION OF PARENTAL ATTITUDES TOWARDS EARLY INTERVENTION
SERVICES OF CHILDREN WITH INTELLECTUAL DISABILITY, COUNSELING
IMPLICATIONS: (A CASE STUDY ON SOME SELECTED SCHOOLS IN BENIN
METROPOLIS)**

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**A RESEARCH PROJECT PRESENTED TO THE DEPARTMENT OF
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EDUCATION**

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CERTIFICATION

We, the undersigned, certify that this study was carried out by PRISCILLIA PROGRESS IGBADUMHE in the Department of Educational Evaluation and counseling psychology Faculty of Education, University of Benin, Benin City.

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DEDICATION

This project work is dedicated to God Almighty, my source of strength and pillar of support, who saw me through my stay in school and to my dear parents, for their love, support and inspiration to make this mark a success.

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ABSTRACT

This research investigates the perception of parental attitudes toward early intervention services for children with intellectual disability in some selected schools in Benin metropolis Benin city. The related literatures are reviewed on the theoretical framework, the concept of intellectual disability, causes of intellectual disability, general classification of intellectual disability, characteristics of people with intellectual disability, stages of human development, the concept of early intervention services available for children with intellectual disability etc. In carrying out this research work, a structured questionnaire is developed to get people's opinion on the perception of parental attitudes towards early intervention services for children with intellectual disability. The questionnaire contains two sections i.e. section A which contains the demographic data of the respondents while section B contains twenty questions raised on the subject of the study. Forty five questionnaires were personally administered by the researchers with the help and guidance of the researchers' supervisor and the results are analyzed with the use of simple percentage and demographic table and it is also discussed in the chapter four. Based on the outcome of the findings, it was concluded that early intervention services play a positive role in the life of children with intellectual disability and it was concluded that parents have positive perception and attitude towards early intervention services. Based on the findings, the researcher put some recommendations forward, part of which includes: Early intervention services should be made available in schools where students with special needs are integrated.

CHAPTER ONE

Introduction

Background to the Study

Children with intellectual disabilities face unique challenges in their educational journey, requiring specialized support and interventions to enhance their development and overall well-being. Early intervention services play a crucial role in providing appropriate assistance to children with intellectual disabilities, and parental attitudes toward these services can significantly impact their effectiveness.

All married couples want children because they are a gift from God. The birthing process has been a part of the human development cycle for a very long time. Parents consider themselves fortunate to have a normal, healthy child but consider a scenario in which that child becomes an abuser or an object of ridicule rather than a gift. Some children are strong, while others are not. While some children have intellectual problems, others have a range of intellectual talents. Intelligence is the general mental capacity that involves reasoning; planning, solving problems, thinking abstractly, comprehending complex ideas, learning efficiently, and learning from experience (AAIDD, 2010). Intellectually disabled children are those who exhibit intellectual abilities that are below average. Such children struggle to adapt their working style to meet various circumstances in their everyday routine. The term 'general learning disability', 'intellectual developmental disability', and 'intellectual disability, refer to a similar condition. The introduction of an intellectually disabled child is considered a revile of God in our general public, driving hopelessness for themselves and their persons. Intellectually disabled children influence their parents socially, inwardly.

DSM-5(2013)defined intellectual disability “As a lifelong condition of cognitive functioning, characterized by limitations in intellectual functioning and adaptive functioning as expressed

in conceptual, social and practical adaptive skills “Children with intellectual disabilities require specialized support and accommodations to thrive in educational settings.

Intellectual disabilities also refer to significant limitations in intellectual functioning and adaptive behavior. These limitations manifest during the developmental period, adversely affecting a child's academic performance, social interactions, and overall functioning. Intellectual disabilities can result from various factors, including genetic conditions, prenatal exposure to toxins, complications during birth, or environmental factors.

Children with intellectual disabilities require specialized support and accommodations to thrive in educational settings.

The family function as the key to the achievement of socialization of all members, many parents experience stress in attempting to meet the socialization needs of a disabled child. Almost all exceptional children regardless of their disability are significant social disabilities. A child with an exceptionality can have both positive and negative impacts on parents' ability to be affectionate e.g. a family can be drawn together and experience a close sense of bonding as a result of the exceptionality. A negative impact can occur in families with members who are exceptional, some parents may fail to create an emotional connection with their impaired child out of concern that the child may pass away or die because the child is physically abnormal. Parents of children with intellectual disability becoming negative often experience a loss of their self-esteem. The parent's inability to accept disability may also greatly affect the ability of the child with an exceptionality to develop a healthy self-identity. Intellectual disability also affects the emotional health of parents, parent display physical and emotional exhaustion. Particularly at the beginning of primary school, the change from one educational level to another frequently causes emotional instability in children as well as in the family structure. A parent's full support of their child's transition to formal education, such as the

school environment, is a guarantee that the separation anxiety that many kids experience will be overcome, that comfortable relationships will be formed with teachers and other students and that the child will, of course, make the right academic progress.

Educating students with disabilities in programs and activities for typically developing children in a variety of situations has emerged as the most crucial issue in the field of special education. Early intervention services by parents provide crucial support to children with intellectual disabilities during their early years of development, typically from birth to age five. These services aim to identify and address developmental delays and challenges early on, promoting optimal growth and reducing the long-term impact of disabilities. Early intervention encompasses a range of services, including therapies, educational interventions, and family support programs.

The family is the first and the most enduring unit of society and is usually the primary source of influence behind the formation of personality and the growth of an individual (Macdonald 2011).

Parents play a vital role in the early intervention process. They are often the primary caregivers and advocates for their children, and their active involvement and support greatly influence the effectiveness of early intervention services. Parental attitudes towards early intervention can shape their engagement, participation, and utilization of services. Understanding parental perceptions and attitudes is crucial for tailoring interventions to meet the needs and preferences of both the children and their families.

Children with intellectual disabilities must be identified and served as early as possible. Clear evidence has established that parental early intervention is typically better when providing early childhood services and support and providing services to children who are at risk for developmental delay is a sound developmental and fiscal investment

Studies show that some countries are developing early intervention plans for social services for families with children with disabilities to increase the chances that these children are educationally and socially integrated. The role of the family in promoting early social and emotional attitudes and appropriate behavior is crucial for stimulating the potential of children with disabilities.

To increase educational opportunities and social-professional integration of children with disabilities in kindergartens and primary schools, there should be parent resource centers that provide counseling and assistance to parents who have children with special needs. It is also necessary to expand and support home education for children with disabilities

Statement of the Problem

Despite the increasing recognition of the importance of early intervention services, there is limited research exploring parental attitudes towards these services in the context of primary schools, specifically for children with intellectual disabilities. Primary schools serve as a critical setting for children's education and socialization, making it imperative to understand how parents perceive and engage with early intervention services within this environment.

According to research, there are over two million people in Nigeria who fit the definition of a person with an intellectual disability. These people experience a variety of difficulties, from economic hardship to social exclusion. Intellectual impairment in children can arise throughout a developmental stage. Even though it is incurable, it is controllable, and early intervention programs are the appropriate course of action, it is not a disease or the end of life. The above submission leads to agreement with Buddha's quote which stated that "There is no wealth like knowledge, no poverty like ignorance". Many children with intellectual disability

are deprived or not given proper early intervention services due to their parents' exposure. Some parents developed a philosophy that it is devil manipulation and prayer will put the situation to rest and this has proved abortive.

Early intervention services clearly and consistently have significant effects on children with intellectual disabilities social adjustment and adjustment in school. Children who have supportive parents and families are likely to achieve not just in school but in all aspects of their lives. However, there are certain instances where parents' unfavorable attitudes about early intervention have a detrimental impact on the life of a person with disabilities. The quality of early childhood services has to be improved on a national, state, and local level. Through awareness campaigns and regional child-find programs, screening and early identification must be widely advertised and easily accessible in the community.

By investigating parental perceptions, we can identify potential barriers or facilitators that influence their engagement with early intervention programs and work towards improving the quality and accessibility of these services for children with intellectual disabilities.

Purposes of the Study

The general objective is to investigate the perception and attitude of parents to early intervention services for children with intellectual disabilities.

The specific objectives of this study are:

- To find out the forms of early intervention services for children with intellectual disabilities.
- To examine the perception of parents of children with intellectual disabilities.
- To examine the attitude of parents towards children with intellectual disabilities

- To find out the importance of early intervention services for children with intellectual disabilities.

Research Questions

The following research questions are formulated to guide the researcher:

- What are the forms of early intervention services for children with intellectual disabilities?
- What is the perception of parents of children with intellectual disabilities?
- To what extent does parental care affect the academic performance of children with intellectual disabilities?
- What is the attitude of parents to children with intellectual disabilities?
- What is the importance of early intervention services for children with intellectual disabilities?

Significances of the Study

This study will educate the general public on the need for early intervention services in preparing the child with intellectual disabilities for future endeavors with the right upbringing so that the child will freely interact with peers with better self-esteem.

This research will also serve as a resource base for other scholars and researchers interested in carrying out further research in this field and subsequently, if applied will go to an extent to provide new explanations to the topic.

Again, information from this study will equip parents and teachers of children with intellectual disabilities with the knowledge that will enable them to distinguish between child discipline and child abuse and also help them take proper care of children entrusted to their care.

Scope and Limitation of the Study

This research/study will not be carried out in the whole of Nigeria, it will be limited to some selected primary schools in Benin metropolitan area of Edo state and it should be noted that this research shall be focused on children with intellectual disabilities.

Definition of Operational Terms

- ✓ **Disability:** This is the functional limitation a person has that interferes with the physical and cognitive abilities
- ✓ **Family:** This is a group of persons formed of parents and children living in one house.
- ✓ **Handicap:** The condition impose on an individual with disability by the society, physical environment or the person's attitude
- ✓ **Home:** Home as used in this work means a place where a child was raised.
- ✓ **Impairment:** The defective difference in an organ of the body that results in the diminution of quality or strength
- ✓ **Intellectual disability:** a significantly below-average functioning of overall intelligence that exists alongside deficits in adaptive behavior
- ✓ **Parent:** person's father or mother.

CHAPTER TWO

LITERATURE REVIEW

INTRODUCTION

This chapter will be discussed under the following;

- Theoretical framework
- The concept of intellectual disability
- Causes of intellectual disability
- General classification of intellectual disability
- Characteristics of people with intellectual disability
- Stages of human development
- The concept of early intervention services available for children with intellectual disability
- Professionals involved in early intervention services
- Perception of parental attitude towards early intervention services of children with intellectual disability.
- Counseling implication of early intervention services

THEORETICAL FRAMEWORK

This study is hinged on the social cognitive theory also known as the cognitive theory propounded by Albert Bandura in the year 1960. The social cognitive theory, focuses on how individuals learn from observing others, particularly through the process of modeling and self-efficacy. This theory has implications for parental perception of children with intellectual disabilities towards early intervention services.

In the context of intellectual disabilities, parental perception plays a crucial role in determining the extent to which they engage their children in early intervention services.

Bandura's theory suggests that parents' perception of their child's abilities and potential impacts their motivation to seek and participate in these services.

According to Bandura, individuals develop self-efficacy beliefs based on their own observations and experiences. In the case of parents of children with intellectual disabilities, their perceptions may be influenced by several factors. Firstly, parents may observe their child's behavior, interactions, and progress compared to other children without disabilities. If they perceive their child to be significantly behind or struggling, they may develop lower self-efficacy beliefs regarding their child's potential for improvement.

Secondly, parents' self-efficacy beliefs can be shaped by observing and interacting with other parents and professionals who have dealt with similar situations. If they see other parents successfully engaging their children in early intervention services and witnessing positive outcomes, it may enhance their own self-efficacy beliefs. On the other hand, negative experiences or lack of success stories may further lower their confidence in early intervention services.

Moreover, Bandura's theory highlights the significance of feedback and reinforcement in shaping self-efficacy beliefs. Parents who receive positive feedback and reinforcement from professionals, such as therapists or educators, may be more likely to perceive their child's potential positively and actively engage in early intervention services. Conversely, negative or dismissive feedback may lower their motivation to seek help or engage in interventions.

To promote parental perception and engagement in early intervention services for children with intellectual disabilities, it is crucial to consider Bandura's theory. Professionals should provide comprehensive information about the benefits of early intervention and share success stories to enhance parents' self-efficacy beliefs. Additionally, emphasizing the importance of modeling, such as providing opportunities for parents to observe successful interventions, can boost their confidence and motivation.

The Bandura theory highlights the role of parental perception in determining their engagement in early intervention services for children with intellectual disabilities. By considering the factors that shape parental perception and utilizing Bandura's principles, professionals can support parents in recognizing their child's potential and actively participating in interventions that can enhance their child's development and well-being.

THE CONCEPT OF INTELLECTUAL DISABILITIES

Intellectual disabilities, also known as intellectual developmental disorders (IDD) or cognitive impairments refer to a range of neurodevelopmental conditions that affect an individual's intellectual functioning and adaptive behavior. These disabilities typically manifest during childhood and have a lifelong impact on an individual's cognitive abilities and overall functioning.

Intellectual disabilities are portrayed by critical impediments in intellectual functioning, which incorporate thinking, critical thinking, dynamic reasoning, learning, and judgment. People with intellectual disabilities frequently experience issues in grasping and applying new information, as well as difficulties with correspondence, interactive abilities, and day to day life activities

Hodapp and Odom have made notable contributions to the definition and understanding of intellectual disabilities. They emphasize the multidimensional nature of intellectual disabilities, highlighting the importance of considering intellectual functioning, adaptive behavior, and contextual factors. They argue that a comprehensive understanding of intellectual disabilities requires examining the interaction between these factors (Hodapp & Odom, 2012).

Carter and Wehmeyer have contributed to the conceptualization of intellectual disabilities by emphasizing the importance of self-determination and person-centered approaches. They argue that individuals with intellectual disabilities should have opportunities to make choices,

set goals, and have control over their lives. Their work highlights the need for supporting autonomy and promoting the active involvement of individuals with intellectual disabilities in decision-making processes (Carter & Wehmeyer, 2016).

Intellectual disability is term involved when an individual has specific limitations in intellectual functioning and abilities like communicating, dealing with oneself, interactive and socializing abilities. These limitations will make a child learn faster than an ordinary child. Children with Intellectual disability might take more time to learn, to talk, walk, and deal with their own necessities like dressing or eating. They are probably going to experience difficulty learning in school. They will learn, yet it takes more time and there might be a few things they can't learn.

CAUSES OF INTELLECTUAL DISABILITY

Intellectual disability (ID), also known as intellectual developmental disorder, is a condition characterized by limitations in intellectual functioning and adaptive behavior.

Understanding the causes of intellectual disability is very crucial for early identification, intervention, and support. However, for easy identification of the various known causes of intellectual disability by educators, students, parents, and other professionals, the causes shall be categorized into three major aspects;

- Pre- Natal causes
- Peri-Natal causes
- Post –Natal causes

PRE-NATAL CAUSES

These are the causes that occur before conception to birth.(Kalu,2014). The term "prenatal" refers to the period before birth, specifically referring to events and conditions that occur during pregnancy. It encompasses the time from conception until delivery of the baby. Understanding the meaning of "prenatal" helps differentiate factors and influences that occur

during this critical period of fetal development. Therefore any toxins (poisonous substance) taken by the pregnant mother will cause serious problems to the unborn child . Gene plays an important consideration in the causes of Intellectual disability during prenatal period. This can be described as a period where in the one celled zygote grew into a complete human infant and this period can be classified into three passes that is;

1. The period of the zygote, the otherwise known as the (zygotic stage).
2. The period of the embryo (embryonic stages).
3. The period of the fetus known as the (fetal stage).

The prenatal stage begins from the first week of conception and ends at the 38 weeks that is 9 month of conception.

Pre-natal causes of intellectual disability can be grouped into four. These are;

- Chromosomal disorders
- Inborn Errors of metabolism
- Developmental disorders affecting brain formation.
- Environmental influences.

These causes include the following

- Maternal Infection
- Genetic factor
- Rh Factors or Blood incompatibility
- Malnutrition
- Venereal diseases
- Poisoning
- Ionization radiation
- Accident
- Teratogens

- Drug abuse
- Emotional stress
- Damage in womb infections

PERI-NATAL CAUSES

These are causes that occur during birth process. These causes include the following ;

- Damage at birth or oxygen deprivation-Anoxia (lack of oxygen)
- Accidents and illnesses resulting from damage to the brain as a result of falls.
- Infectious diseases such as cerebral malaria and meningitis, repeated fits and malnutrition
- Drug abuse and injury to the fetus inside the uterus (such as mother being abused), excessive use of force

POST-NATAL CAUSES

Postnatal causes of intellectual disabilities refer to factors or conditions that can occur after birth and contribute to the development of intellectual disabilities in individuals. These causes can vary widely and may include:

- Brain Injury: Traumatic brain injury (TBI) resulting from accidents, falls, or physical abuse can lead to intellectual disabilities if the brain is severely damaged.
- Infections: Certain infections contracted after birth, such as meningitis, encephalitis, or severe cases of pneumonia, can cause brain damage and subsequent intellectual disabilities.
- Exposure to Toxins: Exposure to harmful substances after birth, such as lead, mercury, or certain chemicals, can affect brain development and lead to intellectual disabilities.
- Malnutrition: Inadequate nutrition during infancy and early childhood can hinder brain development, potentially resulting in intellectual disabilities.

- **Metabolic Disorders:** Some metabolic disorders, such as phenylketonuria (PKU), which interferes with the body's ability to break down the amino acid phenylalanine, can lead to intellectual disabilities if left untreated.
- **Genetic Disorders:** Certain genetic disorders may manifest their effects after birth and cause intellectual disabilities. Examples include fragile X syndrome, Down syndrome, or Rett syndrome.
- **Trauma or Abuse:** Physical abuse, neglect, or severe emotional trauma experienced during childhood can have a detrimental impact on cognitive development and result in intellectual disabilities.
- **Prenatal Substance Exposure:** If a child is exposed to drugs or alcohol after birth (e.g., through breast milk or environmental exposure), it can cause brain damage and intellectual disabilities.
- **Illness or Medical Conditions:** Certain illnesses, such as severe untreated jaundice or untreated hypothyroidism, if not properly managed or treated, can lead to intellectual disabilities.
- **Lack of Stimulation:** Insufficient intellectual and sensory stimulation during early childhood, including lack of educational opportunities and social interaction, can impede cognitive development.

It's important to note that these causes can vary in severity and the resulting intellectual disabilities can range from mild to profound. Early intervention, support, and appropriate medical care can help individuals with intellectual disabilities reach their full potential.

GENERAL CLASSIFICATION OF INTELLECTUAL DISABILITY

In classifying an individual with intellectual disability, it is observed that many factors such as the degree of intellectual disability, clinical symptoms, educational objectives and causes

are often considered. This is a clear indication that children with low intelligence differ in intensity of mental deficit.

The classification is as follows:

A. Based on level of Support

This can be classified into four;

- Intermittent support
- Limited support
- Extensive support
- Pervasive support

INTERMITTENT SUPPORT

A person with intellectual disability that needs occasional support is referred to as a person needing intermittent support. This type of a person does not need the support always. The help such a person needs could be medical or social depending on his needs at a particular time.

LIMITED SUPPORT

This is for a person with intellectual disability that needs support often. This type of support should be consistent until success is achieved. It may require fewer staff and little cost. Examples of such support could be in the area of employment, training, or transition from school to adulthood.

EXTENSIVE SUPPORT

They are characterized by regular involvement. This type of support is on a daily basis. The support could be in the home or work place. It is time consuming and demanding because the person that gives the support must be available all the time.

PERVASIVE SUPPORT

This support involves constancy, high intensity, provision in all environments and life sustaining in nature. This support is more demanding on the part of the caregiver.

From the above submission, it could be deduced that a person that needs intermittent support is mildly retarded; a person that needs limited support is moderately retarded; a person that needs extensive support is severely retarded while a person that needs pervasive support is profoundly retarded.

B. BASED ON EDUCATIONAL CLASSIFICATION

Ugbo (2017) classified them into three (3), which cut across;

- ❖ Totally dependent intellectual disabled
- ❖ Trainable intellectual disabled
- ❖ Educable intellectual disabled

Totally Dependent Intellectual Disability (TDID)

This group manifest has intelligent a severe condition of ID to the extent that talking, walking, feeding oneself and other self-care skills become difficult to learn. Persons with this condition require intensive systems of support .They cannot be trained in simple daily routine and cannot survive without support. They are likened to idiots in the traditional classification.

Trainable Intellectual Disability (TID)

This group of persons manifests moderate conditions of intellectual disabled. They are better than those in the TDID classification, as they can learn how to talk, walk and feed oneself. They can be trained on some self –care skills like toilet habits, bathing, dressing and some simple tasks that do not involve many complexities. However, they still require supervision to be constructively functional in their day to day living. This group can be likened to the imbecile in the traditional classification.

Educable Intellectual Disabled (EID)

This group of persons manifests mild condition of ID. They are better than those in the TID classification, as they can be educated to the extent of reading, writing and doing simple calculations. They can master self-care skills and can be trained in social and occupational skills. They require little or no supervision in their day-day living. This group can be likened to the moron in the traditional classification.

D. CLASSIFICATION BY DEGREE

Individual with intellectual disability are categorized into four levels. The classification is necessary to enable appropriate educational and clinical placement. In an attempt to change soften the old stigmatic labels of the intellectually disabled the following new classifications were adopted according to degree (Kalu 2014):

Mild Intellectual Disability

Children in this category have intelligence quotient (IQ) of 70. Intensity of supports is intermittent. The level of supports for the individuals with mild intellectual disability is intermittent which means that the level of supports should not be regular or constant. It is not a regular support due to the fact that the individual with mild intellectual disability can maintain social relationship including having family and able to work and contribute significantly to societal development individual with mild intellectual disability has the potential to learn within the regular classroom setting, given little or appropriate modifications.

Moderate Intellectual Disability

The intelligence quotient (IQ) here is 49. Intensity of support is limited. Limited in the sense that the individual with moderate intellectual disability has some degree of independence in self-care, ability in communication, social and academic skills. He/she has a limitation to

which series of supports can be provided. The individual with moderate intellectual disability has intensity of needs. The individual does not support in all area of system of supports.

Severe Intellectual Disability

The intelligence quotient (IQ) is 34. The individual with severe intellectual disability needs extensive or pervasive supports. The reason being that he/she requires continuous need for supports on a regular basis. The amount of supports covers a large area of supports with good amount of concentration by social/health care provides to the individuals.

Profound Intellectual Disability

An individual with profound intellectual disability has intelligence quotient (IQ) lower than 20. The individual has limitation in all area of development functioning. He/she needs pervasive supports in all area of systems of supports pervasive in the sense that disability is enormous and covers all area of human functioning. The individuals with profound intellectual disability is totally dependent for supports on other as a result of the degree of the disability.

CHARACTERISTICS OF PEOPLE WITH INTELLECTUAL DISABILITY

People with intellectual disability exhibit a range of characteristics that affect their cognitive abilities, adaptive functioning, and social interactions. These characteristics can vary widely depending on the individual's level of intellectual disability and other factors. Here are some common characteristics of people with intellectual disability, Intellectual Functioning:

- **Intellectual Limitations:** Individuals with intellectual disability typically have below-average intellectual functioning, often measured by intelligence quotient (IQ) scores below 70 (American Psychiatric Association, 2013).

- Cognitive Delays: There may be delays in acquiring and processing information, difficulties with problem-solving, and challenges in abstract thinking (American Association on Intellectual and Developmental Disabilities, 2018).

Communication:

- Language Delay: Speech and language delays are common, and individuals may have difficulties expressing themselves verbally and understanding complex language (American Association on Intellectual and Developmental Disabilities, 2018).
- Nonverbal Communication: Some individuals with intellectual disability rely on nonverbal communication methods, such as gestures, signs, or augmentative and alternative communication systems

Adaptive Behavior:

- Conceptual Skills: People with intellectual disability may have difficulties with conceptual skills, including language and literacy, self-direction, and problem-solving abilities
- Social Skills: Challenges in social skills, such as understanding social norms, interpreting social cues, and forming and maintaining relationships, are common
- Daily Living Skills: Individuals with intellectual disability may require support in activities of daily living, such as personal care, household tasks, and managing money (Schalock et al., 2010).

STAGES OF HUMAN DEVELOPMENT

Human development refers to the process of growth and change that occurs throughout the lifespan. It is typically divided into several stages, each characterized by distinct physical, cognitive, emotional, and social changes.

Berk(2017,p. 17) defined human development as the process of growing and changing throughout the lifespan, from conception to death, involving physical,cognitive,emotional and social changes and challenges

The following are the commonly recognized stages of human development:

Prenatal Stage:

Conception to Birth

This stage begins with fertilization and encompasses the development of the embryo and foetus in the womb.

Infancy

Birth to 2 years old

This stage involves rapid physical growth, motor development, and sensory exploration. Infants develop basic cognitive abilities, such as object permanence, and form attachments to caregivers.

Early Childhood (Preschool) 2 to 6 years old

During this stage, children continue to develop their motor skills, language, and social abilities. They engage in imaginative play and begin to understand concepts like numbers and letters.

Middle Childhood (School Age) 6 to 11 years old

Children in this stage experience significant cognitive development, including improvements in memory, reasoning, and problem-solving. They also develop social skills through interactions with peers and adults.

Adolescence: 12 to 18 years old

Adolescence is a period of rapid physical changes, including puberty, and significant cognitive and emotional development. Identity formation, peer relationships, and increased independence are prominent aspects of this stage.

Young Adulthood: 18 to 40 years old

This stage involves continued physical growth and the establishment of personal and professional identities. Young adults often focus on education, career development, and long-term relationships.

Middle Adulthood: 40 to 65 years old

During this stage, individuals may experience stability in their personal and professional lives. They may also face new challenges related to aging, family responsibilities, and career changes.

Late Adulthood (Senescence): 65 years old and older

This stage is characterised by age-related physical changes and potential declines in cognitive abilities. However, many older adults maintain active and fulfilling lives and contribute to society in various ways.

It's important to note that human development is not entirely linear, and individuals may progress through these stages at different rates or face unique challenges. Additionally, cultural and environmental factors can influence the experiences and outcomes of human development at each stage.

THE CONCEPT OF EARLY INTERVENTION SERVICES AVAILABLE FOR CHILDREN WITH INTELLECTUAL DISABILITY

L.Berk(2017) opined that Early intervention services for children with intellectual disability should be based on developmental approach. This means that early intervention services should be tailored to meet the specific developmental need of the child as well as promote their general wellbeing. Intellectual disabilities are characterized by limitations in intellectual functioning and adaptive behavior, which can significantly impact a child's cognitive, social, and emotional development. Early intervention aims to address these challenges at the earliest possible stage to optimize the child's potential.

Early intervention applied to children of school age between 0 to 5 or young children known as pre-scholars who were discovered to have or to be at risk of intellectual disability, hearing impairment, visual impairment, sensory disorders, speech and language disorder, physical and health impairment, cerebral palsy, autism or any other special needs which may affect their development. Therefore, early intervention is the provision of services for such children and their families so as to reduce the effect of such disability. Here is an overview of early intervention services for children with intellectual disabilities:

- **Early Identification and Assessment:** Early intervention begins with the identification and assessment of intellectual disabilities in young children. Developmental screenings and assessments are conducted to evaluate the child's cognitive abilities, language skills, adaptive behaviors, and social-emotional functioning. This process helps determine the extent of the disability and guides the development of individualized intervention plans.
- **Individualized Education Plan (IEP):** An individualized education plan (IEP) is a key component of early intervention services for children with intellectual disabilities. The IEP outlines specific goals, objectives, and strategies tailored to the child's unique needs. It incorporates specialized instruction, accommodations, and modifications to support the child's learning and development. IEPs outline educational goals, accommodations, and services tailored to the child's specific needs, promoting their learning and development (Hallahan et al., 2019).
- **Speech and Language Therapy:** Communication difficulties are often associated with intellectual disabilities. Speech and language therapy is a crucial component of early intervention for children with intellectual disabilities. It aims to improve communication skills, including expressive language, receptive language, articulation, and pragmatic skills. Therapy may involve individual or group sessions, augmentative

and alternative communication (AAC) systems, and strategies to enhance social communication. Therapists work on improving speech production, language comprehension, expressive communication, and social communication skills (Totsika et al., 2017).

- **Occupational and Physical Therapy:** Early intervention may also include occupational therapy and physical therapy to address fine and gross motor challenges that children with intellectual disabilities may face. Occupational therapy focuses on enhancing fine motor skills, sensory integration, and activities of daily living, while physical therapy targets gross motor skills, balance, coordination, and mobility.
- **Behavioral Interventions:** Behavioral interventions are commonly utilized in early intervention services for children with intellectual disabilities. These interventions aim to address challenging behaviors, teach appropriate social skills, and promote positive behaviors. Applied Behavior Analysis (ABA) is a well-known approach that utilizes systematic techniques to shape behavior, increase functional skills, and reduce problem behaviors.
- **Parent and Family Involvement:** Early intervention recognizes the importance of involving parents and families as essential partners in the intervention process. Parents are provided with training, resources, and support to understand their child's needs, implement intervention strategies at home, and advocate for their child's rights and services. Parent support groups and counseling may also be available to address the emotional and practical needs of families.
- **Applied Behavior Analysis (ABA):** ABA is a behaviorally based approach that focuses on shaping behavior, teaching functional skills, and reducing challenging behaviors. It utilizes systematic techniques and principles to promote positive behavior change.

- Notable scholar: Ole Ivar Lovaas is a pioneer in the field of ABA and has conducted groundbreaking research on the effectiveness of early intensive behavioral interventions for children with autism.
- **Assistive Technology:** Assistive technology involves the use of devices, equipment, and software to support children with disabilities in communication, mobility, learning, and daily living. It aims to enhance their functional abilities and promote independence.
- Notable scholar: David L. R. Dailey has extensively researched and published on assistive technology and its applications for individuals with disabilities, including children.

PROFESSIONALS INVOLVED IN THE EARLY INTERVENTION SERVICES FOR CHILDREN WITH INTELLECTUAL DISABILITY.

A professional is an individual who possesses the education, training, experience and expertise required to engage in occupational therapy practice (American occupational therapy association, 2014)

Early intervention services for children with intellectual disabilities typically involve a multidisciplinary team approach. The following professionals are commonly involved in providing comprehensive support and services:

1. **Early Intervention Specialist/Coordinator:** An early intervention specialist or coordinator plays a central role in coordinating and overseeing the early intervention services for children with intellectual disabilities. They collaborate with families, professionals, and service providers to develop and implement individualized plans, ensure effective service delivery, and monitor progress.
2. **Special Education Teacher:** Special education teachers have expertise in designing and implementing instructional strategies tailored to the unique learning needs of

children with intellectual disabilities. They work closely with the child, families, and other professionals to develop individualized education plans (IEPs), deliver specialized instruction, and monitor the child's progress.

- 3. Speech and Language Therapist:** Speech and language therapists focus on improving communication skills, including speech production, language comprehension, and social communication. They assess and diagnose communication difficulties, develop intervention plans, and provide therapy sessions to enhance the child's communication abilities.
- 4. Occupational Therapist:** Occupational therapists help children with intellectual disabilities develop and improve their fine motor skills, sensory processing, and activities of daily living. They provide interventions and strategies to enhance the child's independence, self-care skills, and participation in school and home routines.
- 5. Psychologist/Psychiatrist:** Psychologists and psychiatrists play a crucial role in assessing and addressing the emotional and behavioural aspects associated with intellectual disabilities. They conduct psychological assessments, provide counselling or therapy services, and offer support to children and families dealing with emotional challenges.

Additional professionals who may be involved in early intervention services for children with intellectual disabilities include:

- **Physical Therapist:** Physical therapists focus on improving gross motor skills, mobility, and coordination. They provide interventions and exercises to enhance the child's physical abilities and functional mobility.
- **Developmental Paediatrician:** Developmental paediatricians specialize in diagnosing and managing developmental delays and disabilities, including intellectual disabilities.

They provide medical evaluations, monitor growth and development, and offer guidance on appropriate interventions.

- **Social Worker:** Social workers provide support and resources to families, addressing psychosocial factors and connecting them to community services. They may offer counselling, assistance with accessing support networks, and help navigate social services.

The involvement of these professionals ensures a comprehensive and holistic approach to early intervention, addressing various aspects of a child's development and well-being. Collaboration among these professionals, alongside the active involvement of families, is essential for the success of early intervention services for children with intellectual disabilities.

PERCEPTION OF PARENTAL ATTITUDE TOWARDS EARLY INTERVENTION SERVICES OF CHILDREN WITH INTELLECTUAL DISABILITIES

The perception of parental attitudes towards early intervention services for children with intellectual disabilities can vary depending on individual experiences, cultural beliefs, and personal beliefs about disability. Studies by Donkor, (2010) indicated that, the parental perceptions and expectations for the future of their children with disability strongly influence the resources they are willing to invest in treatment, training and education of these children. Perhaps this makes it common to see children with disability abandoned in African communities and orphanages, denying them basic human rights such as education, probably due to negative perceptions as perpetuated in literature (Larsson, 2016).

Early intervention can therefore help parents improve their attitude about themselves and their children. Provide useful information and necessary skills for the care and teaching of their special children . Furthermore, it also helps to create time for leisure activities and employment for parents of such children.

Early intervention is a system of services that help babies and toddlers learn the basic and brand new skills that typically develop during the first three years of life, especially when these children are discovered to have developed to have developmental set –backs or disabilities (Ugbo 2017).

Perhaps this makes it common to see children with disability abandoned in African communities and orphanages, denying them basic human rights such as education, probably due to negative perceptions as perpetuated in literature Help children with disabilities grow up to become productive, independent individuals (Larsson, 2016). It is crucial to take note that parenting styles can vary widely, and not all parents will view things in the same way. Therefore parental perceptions could be positive or negative. However, some common perceptions and attitudes of parents towards early intervention services for children with intellectual disabilities include:

Positive perceptions:

1. Recognition of the Importance of Early Intervention: Parents with positive attitude are aware of the crucial part early intervention plays in fostering their child's development. They understand that early detection and intervention can result in better results and provide their child the best chances for development and success.

2. Belief in the Potential for Progress: Parents that seek early intervention services positively believe in their child's capacity for improvement. They believe that their child can overcome obstacles and realize their full potential with the correct support and interventions.

3. Empowerment and Active Involvement: These parents view themselves as active participants in their child's intervention. They actively engage with professionals, seek information, and advocate for their child's needs. They feel empowered to make decisions and take an active role in their child's developmental journey.

4. Appreciation for Professional Support: Parents who have a good opinion of early intervention services like the advice and assistance given by specialists in these programs. They value the skills, information, and resources that experts can provide to assist their kid in overcoming developmental obstacles and achieving significant milestones.

5. Improved Parent-Child Bond: Positive parents may view early intervention as a chance for strengthening their relationship with their child. They value the expert advice and methods offered by professionals who can help parents and children communicate, engage, and understand one another better.

Negative perceptions

1. Stigma and Judgment: Due to social discrimination and misinformation about intellectual disability, some parents could have negative views. As a result of using early intervention services, they can worry that their kid will be identified and judged by others.

2. Resistance and Denial: In some cases, parents may at first oppose or deny the necessity for early intervention on their child's behalf. Due to many factors, including fear, denial, or a wish to shield their child from being perceived to be different, they may have trouble accepting the diagnosis or be hesitant to seek the intervention services

3. Emotional Impact: There are a variety of feelings that parents of children with intellectual disabilities could feel, such as loss, sadness, frustration, or anxiety. Because of the emotional strain and challenges brought on by their child's disability, parents may have negative ideas of early intervention services and be reluctant to use them.

THE PERCEPTION OF PARENTAL ATTITUDES TOWARDS EARLY INTERVENTION SERVICES FOR CHILDREN WITH INTELLECTUAL DISABILITIES CAN HAVE IMPORTANT COUNSELING IMPLICATIONS.

The perception of parental attitudes towards early intervention services for children with intellectual disabilities holds significant importance in counseling. Parents' perceptions shape their engagement, decision-making, and emotional well-being as they navigate the early intervention journey. By understanding and addressing these perceptions, counselors can provide effective support, empower parents, and promote positive outcomes for both the child and the family. Counselors can be helpful through the following.

- 1. Addressing Stigma and Negative Beliefs:** One crucial counseling implication is addressing the stigma and negative beliefs surrounding intellectual disabilities. Parents may hold misconceptions or fear judgment from society. Counselors create a safe and non-judgmental space for parents to express their concerns, allowing them to challenge these beliefs. Through open discussions and accurate information, counselors can dispel myths, promote understanding, and foster a more positive perception of early intervention services.
- 2. Exploring Emotional Reactions:** Parents of children with intellectual disabilities may experience a range of emotions, including grief, guilt, or anxiety. These emotions can significantly impact their perception of early intervention. Counseling provides an opportunity for parents to explore and process their emotional reactions in a supportive environment. By acknowledging and validating these emotions, counselors help parents develop coping strategies, improve emotional well-being, and navigate the complexities of early intervention.
- 3. Enhancing Parental Self-Efficacy:** Empowering parents and enhancing their sense of self-efficacy is a vital counseling implication. Counselors assist parents in

identifying their strengths, fostering resilience, and gaining confidence in order to promote their child's growth. Parents can acquire effective communication skills, and resources through therapy. Because of this empowerment, parents may actively participate in the early intervention process and have a big impact on their child's development.

- 4. Providing Education and Resources:** Counseling offers an opportunity to provide parents with accurate information, education, and resources related to early intervention services. By addressing misconceptions and providing psych education, counselors enable parents to make informed decisions and actively participate in their child's intervention. This access to knowledge empowers parents to navigate the system effectively, understand intervention strategies, and advocate for their child's needs.
- 5. Collaborative Goal Setting:** Collaborative goal setting between parents and professionals is a counseling implication that fosters a positive perception of early intervention. By exploring the child's unique needs and strengths, counselors assist parents in setting realistic and meaningful goals. This collaborative process promotes shared decision-making, enhances the parent's role in their child's intervention, and fosters a sense of ownership. Parents become active partners in the intervention, leading to improved engagement and outcomes.
- 6. Building a Supportive Network:** By introducing parents to other families and support groups, counseling can aid in the development of a parental support system. This network fosters a sense of belonging, lessens loneliness, and offers chances for exchanging knowledge, assets, and emotional support. Parents who receive counseling gain the ability to communicate effectively, helping them to build strong bonds with the specialists engaged in the early intervention process. A friendly and

empowering atmosphere for parents and their children is fostered by the collaborative team approach.

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CHAPTER THREE

RESEARCH METHODOLOGY

This chapter is concerned with the method used to collect and analyze data for the study. The chapter will be discussed under the following subheading:

- Research Design
- Population of the Study
- Sample and Sampling Techniques
- Research Instrument
- Validity of Instrument
- Procedure for Data Collection
- Method of Data Analysis

Research Design

This study adopted the use of survey research design which employed a descriptive survey approach. Research questions will be formulated in form of questionnaire to guide the researcher to investigate the perception of parental attitude towards early intervention services for children with intellectual disability.

Population of the Study

The population of this study is made up of the teachers and parents of pupils with intellectual disability in Benin Metropolitan Area in Edo State. The Benin metropolitan area consists of the following local government area

- Oredo local government area
- Ikpoba-Okha local government
- Egor local government area

Sample and Sampling Techniques

The researcher made use of simple random sampling technique in selecting the forty-five (45) respondents that were used in the study which are the teachers and parents of pupils with intellectual disability in some selected special school in Benin Metropolitan Area

Research Instrument

The researcher employed the use of questionnaire for the respondents. The questionnaires were prepared by the researcher to sample the opinion of the respondents.

The questionnaires were sub divided into two (2) sections; section 'A' and section 'B'. Section 'A' contains personal data of the respondent i.e. gender, age, while section 'B' contains the respondents' opinion about "the perception and attitude of parents to early intervention services for children with intellectual disability" In the section 'B', the researchers itemized twenty (20) questions for the respondents to either pick 'Strongly Agree', 'Agree', 'Strongly Disagree' or 'Disagree'.

Validity of Instrument

To validate the instrument, the questionnaire was designed by the researcher under the consent and approval of the supervisor and the reliability of the instrument will be determined by using a test-retest method.

Procedure for Data Collection

The researcher had prepared a total number of forty-five (45) questionnaires to the field and administered the questionnaire herself.

- ✓ Day 1 The researcher visited the school to familiarize and inform the staffs of the school the full details of the research work he is working on and requested permission to proceed,
- ✓ Day 2 The researcher visited the school and stamped two copies of the questionnaire from the principal office ,then proceed to administering them to the teachers and parents

Method of Data Analysis

The data collected were summarized and analyzed in a tabular form and the demography of the respondents was expressed using simple percentages (%) while the responses (opinion) from the respondents on subject matter were represented using tables. All research questions are answered at 0.05 alpha levels.

CHAPTER FOUR

DATA ANALYSIS AND DISCUSSION OF FINDINGS

DATA ANALYSIS

The objective of this chapter is to carefully analyze the data from response to the questionnaire fill in by the respondents from the school. The answer given by this group of respondents as touching the parental perception and attitude of children living with intellectual disability towards early intervention services in Oredo Local Government Area of Edo state are here below tabulated in percentage.

4.1. DEMOGRAPHIC ANALYSIS

Table 4.1.1: sex

	Respondents	Percentage (%)
Male	21	47
Female	24	53
Total	45	100

The above table shows that 47% of the respondents are male while 53% are female

Table 4.1.2: Age Range

	Respondents	Percentage (%)
21 – 30	22	49
31 - 40	8	18
41- 50	11	24
50+	4	9
Total	45	100

The above table shows that 49% of the respondents fall between the age of 21 – 30, 18% fall between 31 – 40, 24% fall between the age of 41-50 and above, while 9% fall between the age of 50 and above.

Table 4.1.3: Educational Qualification

	Respondents	Percentage (%)
NCE	8	18
B. Ed	16	36
M. Ed	1	2
PHD	-	-
Others	20	44
Total	45	100

The above table shows that 18% of the respondents are NCE holder, 36% are B.Ed. holders, and 2% is M.Ed. holder, while others are 24%

Table 4.1.4: Religion

	Respondents	Percentage (%)
Christianity	34	76
islam	11	24
Traditional	-	-
Total	45	100

The above table shows that 76% of the respondents are Christian while 24% are Muslim.

Item 1: Speech and language therapy is a form of early intervention services for children with intellectual disabilities.

	Respondents	Percentage (%)
Strongly Agreed	30	67
Agreed	12	27
Strongly Disagreed	1	2
Disagreed	2	4
Total	45	100

Item 2: Good family training is a form of early intervention services for children with intellectual disability.

	Respondents	Percentage (%)
Strongly Agreed	19	42
Agreed	24	53
Strongly Disagreed	2	4
Disagreed	2	4
Total	45	100

Item 3: The primary goal of early intervention services for children with intellectual disabilities is to enhance development and minimize potential developmental delays.

	Respondents	Percentage (%)
Strongly Agreed	21	47

Agreed	19	42
Strongly Disagreed	4	9
Disagreed	1	2
Total	45	100

Item 4: The cost of early intervention services is expensive.

	Respondents	Percentage (%)
Strongly Agreed	10	22
Agreed	23	51
Strongly Disagreed	7	16
Disagreed	5	11
Total	45	100

Item 5: The perception of parents of children with intellectual disabilities could be positive.

	Respondents	Percentage (%)
Strongly Agreed	13	29
Agreed	23	51
Strongly Disagreed	5	11
Disagreed	4	9
Total	45	100

Item 6: The perception of parents of children with intellectual disabilities could be negative.

	Respondents	Percentage (%)
Strongly Agreed	11	24
Agreed	21	47
Strongly Disagreed	9	20
Disagreed	4	9
Total	45	100

Item 7: Positive parental perceptions of children with intellectual disabilities can help them achieve their goals.

	Respondents	Percentage (%)
Strongly Agreed	23	51
Agreed	16	36
Strongly Disagreed	4	9
Disagreed	2	4
Total	45	100

Item 8: Some parents can feel nonchalant about early intervention services for their children due to lack of information, awareness of financial resources.

	Respondents	Percentage (%)
Strongly Agreed	28	62
Agreed	16	36
Strongly Disagreed	1	2

Disagreed	0	0
Total	45	100

Item 9: Frequent communication with your child about their school experiences can help their performance.

	Respondents	Percentage (%)
Strongly Agreed	17	38
Agreed	25	56
Strongly Disagreed	2	4
Disagreed	1	2
Total	45	100

Item 10: Knowing the academic progress of your child with intellectual disability can help their performance.

	Respondents	Percentage (%)
Strongly Agreed	22	49
Agreed	20	44
Strongly Disagreed	3	7
Disagreed	0	0
Total	45	100

Item 11: Parents providing emotional support to their children with intellectual disabilities regarding their academic challenges can help the children academic progress.

	Respondents	Percentage (%)
Strongly Agreed	16	36
Agreed	20	44
Strongly Disagreed	8	18
Disagreed	1	2
Total	45	100

Item 12: The financial support of parent of children with intellectual disability can help their academic performance.

	Respondents	Percentage (%)
Strongly Agreed	26	58
Agreed	15	33
Strongly Disagreed	3	7
Disagreed	1	2
Total	45	100

Item 13: Parents may hold misconceptions or fear judgment from the society.

	Respondents	Percentage (%)
Strongly Agreed	16	36

Agreed	22	49
Strongly Disagreed	6	13
Disagreed	1	2
Total	45	100

Item 14: Parents of children with intellectual disability may experience a range of emotion such as guilt, grief.

	Respondents	Percentage (%)
Strongly Agreed	15	33
Agreed	22	49
Strongly Disagreed	8	18
Disagreed	0	0
Total	45	100

Item 15: Parents may be reluctant to use early intervention services.

	Respondents	Percentage (%)
Strongly Agreed	17	38
Agreed	14	31
Strongly Disagreed	12	27
Disagreed	2	4
Total	45	100

Item 16: Positive parents may view early intervention services as a chance to strengthen their relationship with their child.

	Respondents	Percentage (%)
Strongly Agreed	18	40
Agreed	23	51
Strongly Disagreed	3	7
Disagreed	1	2
Total	45	100

Item 17: Early intervention services increase the chances of these children to be integrated educationally.

	Respondents	Percentage (%)
Strongly Agreed	21	47
Agreed	15	33
Strongly Disagreed	6	13
Disagreed	3	7
Total	45	100

Item 18: Undesirable behaviour in a child with intellectual disability can be changed with the use of early intervention services.

	Respondents	Percentage (%)
Strongly Agreed	28	62
Agreed	14	31
Strongly Disagreed	6	13
Disagreed	2	4
Total	45	100

Item 19: Early intervention services can have negative effects on the lives and education of children with intellectual disability.

	Respondents	Percentage (%)
Strongly Agreed	9	20
Agreed	11	24
Strongly Disagreed	16	36
Disagreed	9	20
Total	45	100

Item 20: Early intervention services have significant effects on social adjustment of children with intellectual disability.

	Respondents	Percentage (%)
Strongly Agreed	9	20
Agreed	19	42
Strongly Disagreed	16	36
Disagreed	1	2
Total	45	100

DISCUSSIONS OF THE FINDINGS

This study shows that children with, or at risk for, intellectual disabilities must be identified and served as early as possible, with the use of early intervention services. Undesirable behavior in a child with intellectual disability can be changed or minimized, an early intervention services will help in identifying children with intellectual disability early and appropriate steps would be taken to effectively manage their condition, a child with intellectual disability can be helped to develop self-help skills independently if early intervention services is exposed to their parents and there are positive effect of early intervention services on the lives and education of children with intellectual disability.

Furthermore, it was concluded in this study that early intervention provides useful information and necessary skills for the children with intellectual disability, early intervention enhances child's development, there are few or little negative effects of early intervention services on the lives and education of children with intellectual disability, parent should seek help from professionals involved in early intervention services for children

with intellectual disability and the professionals involved in early intervention services reinforces the parents of children with intellectual disability.

More also, professionals involved in early intervention services engage in sacrificial attempt when discharging their tasks, professionals involved in early intervention services have offices, the problem with early intervention services has to do with the fact that government alone cannot adequately fund it and this makes it difficult for some parents to afford, attitude of the parents of children with intellectual disability is one of the barrier to effective early intervention services and children with intellectual disability are kept away from school because of parents ignorance about the potentials of the children , this could stand as a hindrance in the implementation of early intervention services.

Lastly, it was concluded in this study that individuals who consider intellectual disability as a permanent condition hardly see any worthwhile result from providing early intervention services for them, for positive outcome of early intervention services to be recorded, collaboration with parents is required, early intervention services clearly and consistently has significant effects on children with intellectual disabilities social adjustment, early intervention services enhance the overall well-being and development of children who have or are “at risk” of intellectual disabilities and early intervention plans for social services for families with children with disabilities in order to increase the chances that these children are educationally and socially integrated.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

Summary

This research was carried out to investigate perception of parental attitude towards early intervention services of children with intellectual disabilities in primary schools in Benin metropolitan area. The related literatures were reviewed on the concept of intellectual disability, causes of intellectual disability, services available for people with intellectual disability, concept of early intervention, early intervention services, importance of early intervention services etc.

In carrying out this research work, a structured questionnaire was developed to get people's opinion on the perception of parental attitude towards early intervention services of children with intellectual disabilities in primary schools. The questionnaire contained two sections i.e. section contains the demographic data of the respondents while section B contains twenty questions raised on the subject of the study. Fourth five questionnaires were personally administered by the researchers with the help and guidance of the researchers' supervisor and

the results were analyzed with the use of simple percentage and table and it was also discussed in the chapter four.

Conclusion

Based on the outcome of the findings, it was concluded that early intervention services play a positive role in the life of children with intellectual disability and it was concluded that parents has positive perception and attitude towards early intervention services. Since home is the primary institute of a child and it plays a vital role in child upbringing. Attitude of parents towards disable child is created and measured by the responses and reactions of parents. Responses and reactions are depended on the emotions, feelings and importance of parents.

As a result of this study, it can concluded that that individuals who consider intellectual disability as a permanent condition hardly see any worthwhile result from providing early intervention services for them, for positive outcome of early intervention services to be recorded, collaboration with parents is required, early intervention services clearly and consistently has significant effects on children with intellectual disabilities social adjustment, early childhood services enhance the overall well-being and development of children who have or are “at risk” for intellectual disabilities and early intervention plans for social services for families with children with disabilities in order to increase the chances that these children are educationally and socially integrated.

Recommendations

As discussed in this study, the following recommendations are thereby put forward: -

- Parents should endeavor to develop good relationship with their children regardless of their disabilities.
- Parents of children with intellectual disabilities should be oriented and enlightened on early intervention services

- Parents of children with intellectual disabilities should be encouraged to accept the disability of their children and be ready to take responsibility.
- Early intervention services should be made available in schools where students with special needs are integrated
- Students with intellectual disabilities should be given educational career guidance.
- Schools should devise the ways of helping children especially those with intellectual disabilities.
- The ministry of education and civil society organization (CSO) working in schools where students with special needs are integrated, should institute academic support for children with special needs.

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APPENDIX

UNIVERSITY OF BENIN

FACULTY OF EDUCATION

QUESTIONNAIRE

Dear Respondents,

The following are the research questionnaire designed on knowledge about early intervention services for children with intellectual disability in Benin Metropolitan Area.

The following schools have been selected at random for the purpose of this questionnaire and research.

1. THE SCHOOL FOR THE DEVELOPMENTALLY CHALLENGED IVBIORE UNIT
2. CHARLOVE GROUP OF SPECIAL SCHOOLS, OPPOSITE CENTAL HOSPITAL, SAPELE ROAD, BENIN CITY, EDO STATE

With all sense of humility, I therefore seek your cooperation in attempting the following questions to the best of your knowledge; information gathered will be kept confidentially as they are for research purpose.

Thanks for the mutual intelligibility.

INSTRUCTION:

Please read each question carefully, and indicate the appropriate responses.

SECTION A (PERSONAL DATA)

Sex: Male () Female ()

Age: 21-30() 31-40() 41-50() 50 and above ()

Educational Qualification: NCE () B.ED () M.ED () PH.D ()
Others ()

RELIGION: Christianity () Islamic () Traditional ()

SECTION B

Key

Strongly Agreed (S A) Agreed (A) Strongly Disagreed (S D)
Disagreed (D)

S/N	ITEMS	S A	A	S D	D
1	Speech and language therapy is a form of early intervention service for children with intellectual disability				
2	Good family training is a form of early intervention services for children with intellectual disability				

3	The primary goal of early intervention services for children with intellectual disabilities is to enhance development and minimize potential developmental delays				
4	The cost of early intervention services are expensive				
5	The perception of parents of children with intellectual disabilities could be positive				
6	The perception of parents of children with intellectual disabilities could be negative				
7	Positive parental perceptions of children with intellectual disabilities can help them achieve their goals				
8	Some parents can feel nonchalant about early intervention services for their children due to lack of information, awareness or financial resources				
9	Frequent communicate with your child about their school experiences can help their performance				
10	Knowing the academic progress of your child with intellectual disability can help their performance				
11	Parents providing emotional support to their children with intellectual disabilities regarding their academic challenges can help the children academic progress				
12	The financial support of parent of children with intellectual disability can help their academic performance				
13	Parents may hold misconceptions or fear judgment from society				

14	Parents of children with intellectual disability may experience a range of emotion such as guilt, grief				
15	parents may be reluctant to use early intervention services				
16	Positive parents may view early intervention services as a chance to strengthening their relationship with their child				
17	Early intervention services increase the chances of these children to be integrated educationally				
18	Undesirable behavior in a child with intellectual disability can be changed with the use of early intervention services				
19	Early intervention services can have negative effects on the lives and education of children with intellectual disability				
20	Early intervention services has significant effects on social adjustment of children with intellectual disability				