

## **Educational rehabilitation of children with disabilities (cochlear implants) in social work institutions**

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### **Abstract**

The field of care and educational rehabilitation is generally one of modern fields that have been received limited attention by social institutions and social workers specialists. The cochlear implants began in Iraq in 2014, which is a relatively late compared to other countries. The lack of attention was specifically obvious in the field of special education and the rehabilitation of hearing-impaired children (cochlear implants) in Iraq. The study was conducted to gain information about the educational, social and health status of social work institutions in Iraq that provide services to the category of hearing-impaired children (cochlear implants). Also, to identify the most important problems facing the families of cochlear implants children from implantation procedure to the rehabilitation program enrollment. According to the study, nearly half of the cochlear implants are females (51.6 %). Most of the sample members were (5-8) year old group with (41.2 %), and the most households with medium income were (63.2 %), and most of the study sample population who had done the implantation procedure were at (1-3) years old (67.2 %).

**Keywords:** Rehabilitation, Children with cochlear implants, Social work institutions

### **Introduction:**

The disability is one of the topics that has attracted the attention of researchers and specialists in all fields, especially within communities that considered disabled people as an unproductive persons and marginalized group that rely upon the society. However, the rapid development of medical technologies has led researchers, especially specialists in the development field to transform this group into productive energy. Disabled children especially, are in need to be supported, and guidance to get the complete benefits of the rehabilitation programs. The category of hearing-impaired children is considered cochlear implants to be one of the most disabled children who suffer and their families many problems from implantation process to the rehabilitation program admission. This group of children with disabilities urgently needs to establish serious structures for educational and rehabilitation in social work institutions in Iraq, which will overcome the difficulties they face. Hearing impairment is a term that has a wide range and is classified depending on the degree of hearing loss. Degrees of hearing loss ranging from deafness to severe loss that hinder the process of learning language and speech and real loss, which does not constitute a disability in the use of ears in understanding speech and language in general (Al-Qaryouti, 2005). Hearing impairment exists in all parts of the world, but the phenomenon of hearing impairment is more common in underdeveloped and primitive societies (Abdel Wahed, 2000). Hearing impairment is a hearing loss of 35-90 (decibels) in which a person needs hearing aids so that they can understand and communicate with the community. Some suffer from severe loss more than 90 (decibels) who need cochlear implants (Kaufman, et al., 2005) table (1).

Table (1) the classification of hearing impairment by severity of hearing disability.

<b>Level of hearing impairment</b>	<b>Level of hearing loss in decibels</b>
<b>Very simple.</b>	25-40
<b>Never mind</b>	41-55
<b>Medium</b>	56-70
<b>Severe</b>	71-90
<b>Very severe (sharp)</b>	More than (90)

Cochlear is an electronic device that is implanted inside the inner ear by a surgical operation to help people who have severe hearing loss to feel the sound. Different than working principle of hearing aids that amplify the sound the cochlear implant device works on a stimulation of the auditory nerve inside the cochlea so that the disabled person can hear the sound (Spencer & Marschark, 2006). The device consisting of two main components, first one includes the microphone, the sound carrier and a processor that selects and organizes the sounds that are received by the microphone. It delivers speech

signals and converts them electronically into electronic excitations and then transfers them to the skin through the inner ear. The internal component contains a receiver-stimulator that is placed and surgically implanted in the skull bone as well as a group of poles that are placed in the cochlea very close to the hearing nerve. The device contains an electronic chip that performs the process of transporting, receiving, and activating signals from the treated device as it is converted into signals or electrical impulses, the poles are made up of (22) or (24) channels to collect electrical impulses and then activates and sends them to the auditory nerve (Archbold, 2009).

Cochlear implants including the surgical procedure are going through three important stages (Musa, 2014), the first stage is the pre-surgery period in which medical tests, psychological evaluation of children with disabilities are performed and a behavioral rehabilitation plan is prepared for them. This is an important stage of transitioning for the disabled child from a deaf child to a normal child capable of communicate and deal with life. The last period is the period of rehabilitation and this period takes between (3-5) weeks after the surgical procedure and in which the process of children training in the first skill by collecting electrical sound models with other models that they were hearing (Musa, 2014). After the surgical procedure is the most important and critical stage in the rehabilitation program and this process requires a lot of effort and time by the user of the device, as well as the rehabilitation team that consists of the family of the child. The speech specialist, audiologist and the doctor begin the process, as first step of rehabilitation start between the speech specialist and the child with cochlear implant to enable him to get used to the sounds that surround him and deal with it (Heinberg, & Hayes, 2000). The rehabilitation process is very important for children who have cochlear implants and aims to achieve two tasks: social integration and educational rehabilitation, and here comes the role of social work institutions. The importance of social work institutions in general is helping all segments of society to achieve the best living environment for people, as the role they play in helping and providing services to society, hearing-impaired children cannot be denied. Most rehabilitation services whether in government or non-governmental institutions, are provided by a social worker specialist, who is only person able to gain the trust of the child and guide his family on how to help their children and train them to speak to ensure that their integration with society is accelerated.

Previous studies have focused on the importance of community integration for the disabled people. Study by Talat, (2008). This study is one of the important studies aimed at integrating the disabled within society. The author in this study tried to explain the of view of the disabled people, and then changing the society's thoughts about them. This study also examined the disclosure of the relationship between the disabled and their families and to show their ability to develop their self-esteem. The most important findings of the study were that the process of social integration of persons with disabilities was the result of social rehabilitation, social welfare for the disabled, equality of persons with disabilities in all elements of society and work to ensure all necessary means.

A study (Ibrahim, 2018) examined the family's expectations regarding the success of cochlear implants and the relationship of the cultural level of the family with the follow-up of the child training program. The sample of the study was chosen in a deliberate manner, where the researcher selected children sample of (21) children (6) females (15) male cochlear implant users and the age of the sample ranging from (4-6) years. The author stated that there are statistically significant differences between the average score of cochlear implants during rehabilitation and application periods of 6 months, one year, one year and half, on social skills levels in favor of advanced periods. The author concluded that the audio rehabilitation programs offered to children who have cochlear implants should be intensified, which will help to develop their skills better.

Many social institutions have been established around the world, including social institutions in the Arab world and in Iraq in particular. The Social work foundation is an organization that applies the principles and values necessary to ensure that individual social work affects a wide range of people in need with the aim of developing and upgrading society by exploiting existing energies, moving them in the right direction and strengthening them (Zerrougui, & Assia, 2021).

Educational rehabilitation is provided to children after the cochlear implant's surgical operation in social institutes, organizations and schools and may be provided through special education classes. The special education is specialized educational programs and organized methods, which are provided to students with disabilities to help them enhancing their abilities to the fullest level, by bringing them to general adaptation and self-recognition. The main goal of special education is to identify learners through appropriate diagnostic and measurement tools and prepare appropriate educational programs accompanied by educational resources that help the development and rehabilitation (Ibrahim, 2011). It is clear from the above that the institutions of social work the subject of our study represents the tool selected by the parents of children as the only way to save their children from the risk of permanent silence. Through social work institutions services in both the government and private sectors, the parents directed to the government institutions represented by the Ministry of Health in order to get

cochlear implant surgical procedure for their children, and after the operation is done the parents must enroll the child in the rehabilitation program. The rehabilitation may be conducted in governmental or private institutions and these institutions provide services to children in order to enable them to approximate their peers.

### **The importance of research**

The importance of the current research is due to the fact that it contributes to the shortage of knowledge due to the lack of studies that dealt with educational rehabilitation for hearing impaired children in social work institutions in Iraq, hence the importance of the study is concentrated in the following points:

- 1- Diagnosis of the most important structural problems in the aspects of local culture (social and health problems) faced by children with hearing impairment from agriculture to rehabilitation.
- 2- Raising the level of community awareness and helping specialists identify the most important problems that prevent the promotion of educational rehabilitation opportunities for children with hearing impairment.

### **Research problem**

Research problem is corresponded to the lack of attention from the authorities towards the extent problems of children with hearing disability specifically children with cochlear implants in Iraq. The study is a guide that helps specialists and contributes to highlighting the problems facing this category of children. It is the state's actions towards this vulnerable group, primarily the disabled and children, that determine the extent to which programs, laws and policies can be made to serve this group in general and serve hearing-impaired children and cochlear implants in particular. Hearing-impaired children are suffering from marginalization where there are no governmental institutions that adopt them and most of them in a state of reciprocating between the health institutions. The success of the transplant depends on the speed with which the child enrolls in the rehabilitation program, the failure to achieve this will negatively affect children with hearing impairment which might cause them permanent silence.

### **Research objectives**

- 1- Identifying the educational, social and health realities in social work institutions that provide services to the category of hearing-impaired children and cochlear implants in Iraq.
- 2- Identify the most important problems facing the families of children who have planted cochlear implants from surgical operation to enrolling in the rehabilitation program.
- 3- Focus on the most important problems and obstacles that prevent the establishment of serious mechanisms for educational rehabilitation in social work institutions.

### **Research concepts:**

**Educational rehabilitation:** educational training of the disabled academically according to his cognitive mental abilities as well as giving them the necessary customary skills that help them and meet their daily lives. This process takes place in centers for hearing disabilities or in special classes within the framework of regular schools or within regular classes where students learn as a result (Sayed Suleiman, et al., 2020). According to the World Health Organization (WHO), educational rehabilitation is defined as the range of services organized in the medical, educational, and social fields in order to train and requalify families and children reaching the maximum level of functional capacity (Hilal, 2009).

**Disabled child:** A child with a motor, sensory or mental disability that limits his or her ability to play his natural role in society compared to the children of his social and cultural framework in which he lives (Al-Samho, 2000). UNESCO has defined a disabled child as "a person whose abilities have been determined as a result of physical or psychological impairment and who needs special care to stimulate potential and adapt to life, requiring changes or modifications in educational and educational programs in accordance with his or her abilities and potential to have positive role in society" (UNESCO, 1973).

**Social work institutions:** are a body or institution based on achieving specific objectives that have an organizational structure that determines the relationship between workers within the institution or between the institution and their service receivers. The organization's environment constructed from a group of official workers whose roles and competences are integrated in the construction of officially or informally to achieve the objectives of the organization already defined by the community (Al-Srouji, 2013). The social institution can be defined as "an act used by people to coordinate their activities in order to obtain something they wish for or may be valuable to them" (Jones, 2001).

### **Research methodology:**

#### **First: Data collection**

This research is an analytical descriptive research aimed at finding out the causes of hearing loss and what educational rehabilitation programs are and how cochlear implants are carried out, and the social survey method was used in a sample way and reached the sample (250) families of children who planted cochlear and that our current study of analytical descriptive studies if it aims not only to describe the phenomenon but also to analyze it and study all its belongings in order to reach a set of results helps us to learn about the reality of educational qualification in the institutions of work Social Resolution is one of the survey tools and is one of the commonly used means of obtaining facts and information relating to public opinions and trends about a particular position or subject if this form is distributed to a group of society representing the sample.

**Second: Data analysis**

**1. Gender of the child**

The gender of the child is one of the important variables of the study as it clearly affects the answers of the respondents, as the study tries to find out the sex of the sample in order to conclude the nature of the distribution of the sample by the sex of the child. Table 2 shows the distribution of the sample by gender of children who have had cochlear implants.

**Table2(illustrating the gender of the children sample)**

<b>Gender</b>	<b>repetition</b>	<b>Percentage</b>
<b>male</b>	<b>121</b>	<b>48.4</b>
<b>female</b>	<b>129</b>	<b>51.6</b>
<b>Total</b>	<b>250</b>	<b>100</b>

Data from the table showing the distribution of the sample by gender of children who had cochlear implants showed that (51.6%) of the sample members were female, and that the number of males was 121(48.4%). We conclude from this that nearly half of the sample of cochlear implants are female (51.6%), i.e., the number of females has exceeded males by (8) repetitions. The Iraqi family does not differentiate between all its children, whether female or male. However, it is clear that the great attention paid by families to females and this attention hold back from the view of the community towards females. Since leaving the child without the process of cochlear implantation might cause them to be deaf and dumb category, and this will affect her future life in general if accompanied by the social stigma placed by society that hindrance of her life paths.

**2- The age of the child**

Age is one of the most important variables in social studies, as it clearly affects the answers of the respondents and the researches, as the study tries to know the age of the sample as it reflects the nature of the parents' answers to the form.

**Table3(showing age group)**

<b>Child age</b>	<b>repetition</b>	<b>Percentage</b>
<b>1-4 years old</b>	<b>60</b>	<b>24</b>
<b>5-8 years old</b>	<b>103</b>	<b>41.2</b>
<b>9-12 years old</b>	<b>87</b>	<b>34.8</b>
<b>Total</b>	<b>250</b>	<b>100</b>

Table 3 indicates that the (5-8) year-old age group recorded the highest percentage among other age groups at (41.2 %), while the (9-12) year-old age group recorded (34.8 %) and the (1-4) year-olds at (24 %).

We conclude from this that most of the sample members were age groups (5-8 years) and (41.2%) at the average of (6.51) and standard deviation (3,323), which represents the category of children enrolled in the rehabilitation program, parents are increasingly interested in children, especially these ages, who represent (children enrolling school), as we find here that the effort of parents doubles when children reach this age as mentioned earlier, as we note an increase in the training of children by parents and by the rehabilitation staff. So that the parents can improve the child's hearing and pronunciation so that he/she can join his peers in school, we note that the children are subjected to a test before entering school in order to choose the class in which the child will be set, a normal class or a special education class. The child who meets the test criteria is placed in a normal class, or else will be set in a special education class. We noted that the child before entering school and at the age of (5) years enrolls in educational rehabilitation to teach children the educational curriculum for the first grade of primary school so that he does not find difficulty during the test. Also, when the children move to the second, third, fourth and fifth grades we noted that the child is getting educational rehabilitation during the

summer vacation period to be qualified on the curriculum so that he can continue his education in school at the required level.

### 3 The financial status of the family

The financial status of the family is one of the most important social variables that represent the living situation of the family. The effects this reality may have impact on children, we noted that the families with medium income were more acceptable and interested in children from cochlear implants to joining the child's rehabilitation program.

**Table 4 explains the financial status of the family**

financial level	repetition	Percentage
Low income	19	7,6
Medium income	185	63,2
Average income	22	8,8
High income	51	20,4
<b>Total</b>	<b>250</b>	<b>100%</b>

The results of the field survey in table (4) indicate that the highest percentage of the economic situation (medium income) was (185) and (63.2 %) of the sample of the respondents, The economic situation (high income) was in (51) and (20.4 %) of the study sample, while the economic situation (average income) came in third place with (22) repeats and (8.8 %), finally the economic situation (low income) by (7.6%) of the study sample.

We conclude from this that the most families with a sufficient income of (185) families and of (63.2%) showed through interviews conducted by the researcher during the process of answering the form questions with the families of children with cochlear implants. Most of sample members parents were either self-employees or governmental employees and the parents explained to the researcher that cochlear implantation and the rehabilitation process expenses are a big burden for the family. In order to help them, the state must grant them salaries to reduce their burden. For children who are cochlear implants and include the person responsible for the rehabilitation of the child with the salary of a full-time appointee, the child needs a full-time person with assistance in the rehabilitation process.\*

### 4 Early detection

**Table (5) showing early detection**

Early detection	repetition	Percentage
Yes	193	77.2
No	57	22.8
<b>Total</b>	<b>250</b>	<b>100%</b>

The results of the field survey in table (5), which shows early detection of hearing impairment, indicate that most of the answers to paragraph (yes) by (193) by (77.2%), while those who answered "no" were (57) by (22.8%).

We conclude from this that most of the sample members answered "yes" by (193) by (77.2%) i.e. early detection has a major role in determining the hearing impairment of the child and also has a role in saving the child, as explained to us by the parents during field interviews and the doctors also explained to us a role in saving the child from permanent silence, as through him doctors can save what has been left in his auditory system, who suffers from auditory loss that reaches above (90) decibel by performing a cochlear implant.

### 5 Causes of hearing loss

**Table 6 shows the diagnosed cause of your child's hearing loss**

Cause of hearing loss	repetition	Ratio
Genetic causes	183	73,2
Health reasons	57	22.8

\*(The Ministry of Health issued a statement to the Ministry of Labor with book No. 1185 on 3 May 2021, i.e., the coverage of these children in the social welfare salary of 1 full-time staff.

<b>Social reasons</b>	10	4
<b>Total</b>	<b>250</b>	<b>100%</b>

The results of the field survey in table 6, which shows the causes of hearing loss, showed that those who answered (health reasons) numbered (181) and (72.4%), while those who answered genetic causes numbered (59) and (23.6 %), while those who answered social reasons numbered (10) by(4 p%).

We conclude from this that most of the members of the sample answered health reasons by (181) and by (72.4%) i.e., the health causes are the most affected on children's infection with certain diseases such as (viral fever) and harmful viruses that cause cell damage. The low health measures suffered by Iraq contributed significantly to the increase in the incidence of these diseases and the failure to treat these diseases in a timely manner. Also, due to damage and neglect of the child's mother, for example (the child suffers from fever but his/ her mother doesn't care considered that normal issue for and that may lead to a child's risk of hearing loss and cell damage), which has resulted in internal ear injury leading to hearing loss in the child.

## 6. Attending school

**Table (7) shows that children attend school**

<b>Answers</b>	<b>repetition</b>	<b>Percentage</b>
<b>Yes</b>	<b>97</b>	<b>38.8</b>
<b>No</b>	<b>153</b>	<b>61.2</b>
<b>Total</b>	<b>250</b>	<b>100%</b>

Table (7) shows the results of the field survey according to the enrolment of children and shows that most of the sample members answered "no" by (153) and by (61.2%), while those who answered "yes" numbered (97) and by (38.8%).

We conclude that most of the members of the sample are not enrolled in school by, and it became clear from interviews conducted by the researcher that they have a great difficulty in accepting the child in public schools despite the child's right to education, but the principals do not receive children and the parents remain confused about the way their children are educated, the parents explained that they often go to high-paying private schools.\*

## 7- Type of schools where the child attended

**Table (8) Shows the type of schools that the child attended**

<b>Answers</b>	<b>repetition</b>	<b>Percentage</b>
<b>Government</b>	<b>40</b>	<b>41.2</b>
<b>Private</b>	<b>57</b>	<b>58.8</b>
<b>Total</b>	<b>97(*)</b>	<b>100%</b>

The results of the field survey in table 8 showed that most of the sample members answered "private schools" by 57 and by (58.8%), More than half of the respondents said that their children attended private schools, and that the parents of the children who had planted the cochlear were not able to enroll them schools without suffering, and the private schoolsunlikepublic schools may be far from family residence.

## 8-Difficulty in the process of accepting children to public schools

Parents seek to take the initiative to enroll their children in public schools when they reach the age specified by the Ministry of Education law to enter schools, but parents may be surprised by the difficulty of accepting their children in schools, although the Iraqi constitution and the laws in force in the country emphasize the right of all to education.

**Table (9) shows the difficulties faced by parents in enrolling children to public schools**

<b>The answers</b>	<b>repetition</b>	<b>Percentage</b>
<b>Yes</b>	<b>22</b>	<b>55</b>
<b>No</b>	<b>18</b>	<b>45</b>

\* The cost of one year could be up to 2 million Iraqi dinars.

\*Only those who answered "yes" in a table (7).

<b>Total</b>	<b>40</b>	<b>100%</b>
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The results of the field survey, as shown by table (9), showed that most of the sample members answered "yes" by (22)repetition and by (55 %), while those who answered "no" were (18) and (45 %) of the total sample. We conclude from this that half of the sample members answered (yes) that the family faces difficulties in the process of registering the child in public schools, and the parents explained to the researcher that public schools do not enroll children only specific number of them under the excuse of not being responsible for the school in the event of the loss of the device i.e. (cochlear device). Other schools their answer was the absence of special classes in their school.

**9Type of class**

Classes vary in schools, including the regular class, which includes all students, but for the special education class, it includes children with special needs and children may need this class in a certain period, for example only when they start school.

**Table (10) shows the type of class in which the child is located**

<b>Answers</b>	<b>repetition</b>	<b>Percentage</b>
<b>Special education class</b>	<b>34</b>	<b>35</b>
<b>Regular class</b>	<b>63</b>	<b>65</b>
<b>Total</b>	<b>97</b>	<b>100%</b>

The results of the field survey in table (10) show that most of the members of the sample answered with (regular class) by (63) and by (65%), while those who answered (special education class) as (34) and by (35%). We conclude from this that most of the members of the sample answered that the type of class enrolled in the child is a regular class by (63) and by (65%). It is clear that most children are enrolled in regular classes and this is good indicator i.e., that children are integrated with their peers in schools and they do not need a special class but must be integrated into society with some consideration to require it.

**Research results:**

1. According to the research, nearly half of the cochlear implants are female (51.6 %).
2. The results of the research showed that most of the sample members were (5-8) years old, with (41.2 %).
3. The results of the research showed that most households with medium income (63.2 %).
4. Most of the sample members 77.2 %, said that early detection played a major role in determining hearing impairment.
5. Most of the sample members agreed that health reasons caused the disability by (72.4 %).
6. The results of the research showed that most of the sample members were not in school by (61.2 %).
7. More than half of the respondents said their children attended private schools, with (58.8 %) of respondents attending community schools.
8. Half of the respondents said they had difficulties in the process of enrolling their child to school.
9. The results of the research showed that most of the sample members answered the type of class the child was enrolled in is a regular class and by (65 %).

**Research recommendations:**

1. Urging the authorities to expand and open the departments and establish university specialties related to the numbers of teachers in the field of education for people with disabilities.
2. Increasing the number of governmental centers for the rehabilitation of children who have planted cochlear implants in all of Iraq.
3. The availability of an encouraging and supportive environment that enables the development of research, studies, documents, and the exchange of information on the subject of education of people with disabilities.
4. Work to activate the role of social worker in institutes for the rehabilitation of children who have planted cochlear implants.

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