

Guiding special needs according to Carl Rogers's self-theory

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Abstract: *In the field of guidance, there have been many theories, the guiding theory reflects the originality of psychological guidance and educational guidance, and the role that this science plays in the service of humanity, especially since psychological counseling and all its branches are identical to what these theories aspire to in the field of application and among Theories that have emerged in the field of guidance of the self-theory of its contemporary psychological founder Carl Rogers where the philosophy of self-theories is based on the belief in the importance of the individual especially people with special needs, whatever the problems, because he has good elements and internal powers to help him solve his problems and assess himself and report His own destiny and self-directed self-guidance to be worthy of respect, the researcher tried to shed light on this theory in guiding the people with special needs.*

Keywords: *Self-theory. . Carl Rogers... People with special needs. Guidance*

ملخص :

لقد ظهرت في مجال الإرشاد والتوجيه العديد من النظريات، فالنظرية الإرشادية تُعبر عن أصالة علم الإرشاد النفسي والتوجيه التربوي ، والدور الذي يلعبه هذا العلم في خدمة البشرية ، خاصة وأن الإرشاد النفسي وبكافة فروعها جاء مطابقا لما تطمح إليه تلك النظريات في مجال التطبيق ومن بين النظريات التي ظهرت في مجال الإرشاد والتوجيه نظرية الذات لمؤسسها السيكولوجي المعاصر كارل روجرز حيث تقوم فلسفة نظريات الذات على الإيمان بأهمية الفرد خاصة ذوي الاحتياجات الخاصة مهما كانت مشكلاته لان لديه عناصر طيبة وقوى داخلية لديه تساعده على حل مشاكله وتقدير ذاته وتقرير مصيره بنفسه وتوجيه الذات توجيهها صحيحا ليكون جديرا بالاحترام فحاول الباحث لقاء الضوء على هذه النظرية في ارشاد ذوي الاحتياجات الخاصة.

الكلمات المفتاحية: *نظرية الذات. . كارل روجرز.؛ ذوي الاحتياجات الخاصة.؛ الإرشاد.*

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1- Introduction

There is no doubt that all societies on different and different classes and their means as well (his children) some of them are normal and some of them are otherwise or what is known as the disabled who do not like to be named and the best with special needs natural life is the right of every child with special needs because every individual facilitated what was created for him and everyone has the right to enjoy his humanity and any individual who was together or not has preparations, abilities and possibilities that he can exploit the best possible exploitation if possible What has been addressed with appropriate care and services and the interest in extraordinary children has seemed to be based on the realization of the principle of equal opportunities and replaced the term disabled or unusual with children with special needs and as we said earlier that this group has preparations, abilities and possibilities, it is like the normal category needs guidance not to say normal guidance but guidance of a special kind and we will try to highlight the theory of self to Carl Rogers and how it has been illuminated in guiding people with special needs.

2- A conceptual approach to guiding people with special needs:

2.1 Definition of special needs guidance:

Ahamed Abdeslam Zahran (1998) defines it as the process of helping to care for and guide their psychological, educational, professional, social and family development and to solve their problems associated with their disabilities or superiority or trends resulting from psychological and social trends towards them and their situation in order to achieve compatibility and mental health.

Mahmoud Akl 1996 defines it as an assistance process that includes providing them with various psychosocial and educational health services with the aim of enabling them to adapt psychologically, professionally and socially to life.

2.2- Psychological counseling objectives for people with special needs:

Improving the environmental conditions in which a disabled child lives by informing parents of the acceptance of a disabled child and getting rid of the guilt complex (*Sadiq,1992*)

Development of parents' psychological preparations to treat their marital problems and maintain family cohesion in child care (LLC)

Creating an interactive atmosphere of solidarity between the brothers and sisters of a disabled child to help him and treat him with special treatment, especially in critical times, adulthood and adolescence

- Participation in the collective guidance to remove and overcome the inferiority complex
- Early detection to try to deal with it and find a solution to their disability

- Attempt to rehabilitate and defend them socially in their education and integration into society
 - The dimensions of isolation and introversion
 - Satisfying the different needs of a disabled child
 - Failure is not attributed to disability but motivation and encouragement (*Hussein, 2004,166*)
 - Dimensions of the feeling of inferiority and inferiority complex
 - Keeping pace with social norms and positive interaction
 - The disabled person's attempt to solve his own problem (Samadi,1999)
- Qandil, 1996, says a beautiful word: the disabled need help when they only need it.

According to The Ashol 1991, in order to be able to make the principles and objectives practical procedural steps, two important points are necessary:

- The extension process extends for a long time

The mentoring process depends not only on the mentor but also as a team

2-3- Problems with special needs:

- Problems suffered by the family: due to the disability of their child, marital disputes, neglect, quarrel between the disabled child and his brothers, the family's non-acceptance of the disabled child, the desire to get rid of him, the neglect of the family of how to deal with this child, the inferiority complex and the guilt complex

Psychological problems: introversion, isolation and aggression, excessive activity, shyness, feeling psychological loneliness, feeling inferiority, and other neurotic symptoms such as anxiety, psychological depression, low self-concept, lack of social skills that hinder social compatibility, adolescence and adulthood feel sadness and sadness when they think about marriage for neglect and ostracism.

Educational problems: lack of resources and equipment needed by children, lack of qualified and specialized teachers, lack of employment opportunities

Professional problems: lack of employment opportunities, latent, seasonal or disguised unemployment despite the state's allocation of (5 percent) of government jobs in the public sector to the disabled.

2.-4- Special needs guidance services:

History of the services of individuals with special needs: Special education services have historically gone through four basic stages: the stage of isolation and rejection: this stage was characterized by the prevalence of misconceptions about the disabled, which often led to their rejection and isolation from society, and in some extreme cases they were eliminated by killing them and considering them demons and evil spirits, or they are punishment of the gods of the family. Institutional care: The emergence of

services for persons with disabilities began in an orderly manner at the end of the last century and the beginning of the current century in some European States and the United States of America, which took the environmental pattern of providing shelter, food and basic health care, and gradually the number of such institutions and internal centers increased, and then some initiatives began to move towards the provision of educational programmes for the deaf and blind in particular, and in most cases the disabled spent their entire lives within the center away from their families and communities, It remained seen as a source of defect or problem that the family was trying to hide as much as possible. Rehabilitation and training: At the end of the Second World War and the significant increase in disability, the need for adequate rehabilitation programmes has become more urgent, while at the same time a better understanding of disability in terms of causes, treatment methods, learning methods and other related issues. At this stage, the perception of persons with disabilities has changed and societies are showing increasing interest in them in one way or another, and their services are no longer limited to medical care and training, but are aimed at educating them and preparing them for useful future occupations. As for social trends towards them, they no longer focus solely on their deficits, but also take into account the strengths and capabilities they have.

After the prevalence of compulsory education, some classes for persons with disabilities began to emerge in mainstream schools, which were not the product of community sympathy and endeavor but rather to avoid negatively affecting other pupils. At this stage, IQ tests were also commonly used to classify pupils in different groups and to place some of them in special classes. Integration: The mid-1960s saw a major shift in the area of disability services, taking advantage of the achievements of the Civil Rights And Anti-Racial Discrimination Movement in the United States of America. Parent associations and disability organizations have played a major role in drawing the attention of the Government and community groups to the serious harm to persons with disabilities in care institutions.

The principle of equal educational opportunities: The 1980s emphasized the principle of equal social and educational opportunities for all persons with disabilities and deepened the orientation of the UNESCO Declaration of 1981 as the International Year of the Disabled, which was called "Equality and Full Participation". The principle of equal educational opportunities has also become a global educational principle strongly affirmed by the UNESCO Conference in Gompitan/Thailand in 1990, and then the UNESCO Conference held in Slavica, Spain, which

resulted in principles and practices in the education of people with special needs. (El btayna: 2007, p., 35, 36)

• **Special Education Services:** There are a variety of services to be provided to people with special needs:

Social services: these services are provided by the Social Research Department, which is responsible for supervising, mentoring and following up with the disabled inside and outside the institution, and writes reports that help greatly in how they follow up scientifically.

The social worker is responsible for the number of disabled persons, often not more than 30 disabled, as he provides teachers with very important information in how to deal with these disabled people from a background around them through continuous careful observation and by meeting their families either in the homes of the disabled or when calling their parents to the centers, the social statistician strives to build bridges between the house and the center to identify the abilities and preparations of the disabled and invest them properly, which enhances his confidence himself and his view of himself and achieves some social acceptance. Educational services: Educational services for the disabled vary depending on the type of disability, but they all meet the need to take into account individual differences through the use of diverse educational methods and appropriate means, and diversity in the appointment of duties according to the possibilities, abilities and diversity of experiences in order to suit their time and mental age.

When teaching the mentally disabled a minor disability, the teacher focuses on individual education to take into account individual differences between them, in addition to the use of induction, reinforcement, composition, sequence and model techniques, and in order to teach an actor, it is necessary to select a competent teacher with specifications appropriate to the state of disability in order to have a sense and sense of disability, which is why he is doing his duty to the fullest and be following everything that would support his work and benefit the disabled. Disabled persons are distributed by age and degree of disability and focus their education on reading, writing and numeracy to play their part in their social lives, and are constantly followed up by the Centre's management, supervisors, social workers and teachers.

Psychological services: Psychological diagnosis is very important for an individual to properly guide according to his or her true abilities, and the psychologist uses intelligence tests to identify the mental abilities of the disabled and personal tests to fully identify his or her inclinations, hobbies and what he is for a proper start away from randomness and experimentation.

A real understanding of a disabled child through the diagnosis process helps to guide and plan and through the provision of an educational programmer consistent with his mental abilities, and since the disabled child is more vulnerable to frustration, failure and psychological refraction as a result of the non-educational methods followed by parents with them, which instill fear, anxiety and hesitation, the psychologist therefore seeks to remove him from any situation of fear and hesitation, and help him to understand himself and accept his disability properly.

Cultural services: The Center educates them on national and national issues, carries out activities and activities in this regard, makes murals and takes them to heritage, artistic and economic sites, and educates them on how to buy and sell and the nature of dealing with others and exploiting their talents in various fields such as literature and art.

Recreational services: The center carries out various recreational activities that create a sense of return to the center, as well as a positive healthy atmosphere for the most fortunate giving, performing concerts at some national events, travel to archaeological, tourist and historical areas and recreational tours in parks, parks and zoos, The center also carries disabled people to some theaters and cinemas to watch plays and films that suit them.

Sports services: Sports programs are an important means of raising and raising the disabled, training his senses, developing his abilities and exploiting his inclinations and preparations properly, which reflects positively on his psychological and social situation, and the center provides the necessary supplies for various games where they are trained in various games as regular and annual competitions are held with other schools nearby. Sports activities, fun and fun, comfort and serenity, and boredom, are an opportunity for renewal and giving.

Medical services: Disabled persons' centres are supposed to provide a medical workshop based on the provision of medical services to the disabled and their continuous follow-up, the development of their own reports and coordination with nearby medical centers for this purpose, and the disabled may sometimes be transferred to doctors and specialists, and the nurse takes him to the competent hospitals, and if the nurse is not available, the social worker will take care of it, They may be given regular medical examinations every six months by the Diagnostic Centre, which has doctors for various disciplines:

- 1- Specialist psychiatrist and neurologist.
- 2- Specialist for the nose, ear and throat.
- 3- Ophthalmologist.
- 4- Physiotherapist. The most important task of the Disability Diagnosis Centre is to diagnose the nature of disability, to give treatment, to

determine the unit to which he is deported, and to be responsible for the full technical supervision of social welfare centers for the disabled in Iraq. Rehabilitation services: The objective of rehabilitation is to develop and exploit the possibilities and abilities of the disabled and include the following rehabilitation services: medical rehabilitation services and medical care: includes all the surgery, radiology, operations, medicines and workshops of the prosthetics, as well as physiotherapy and includes various Moto therapy devices.

Electrotherapy, such as heating and massage devices for the treatment of rheumatism and some skin diseases, bones and nerves, also includes hydrotherapy through the use of hot and cold water basins under specialist supervision, and benefits very much from children with polio, as well as ear, nose and throat medicine, psychiatry, physical and rehabilitation medicine. Academic qualification: These are educational and educational services provided by educational institutions for the purpose of their development and reducing the gap between them and the ordinary individuals, which are suitable for them according to their mental and physical abilities, and these services require selected teachers with specifications that suit the needs of individuals with special needs and special methods, methods, methods, means and equipment and adapt in the educational environment. Social and psychological care services: These services are focused on overcoming or eliminating problems and difficulties that prevent the disabled from performing properly, which sometimes cause discomfort and pain, both for the disabled themselves and for their family.

The psychologist seeks to achieve psychological stability for the disabled by studying the situation in all its physical and mental aspects and cases of emotional and social malpractice, by restoring self-confidence, social interaction and moving away from abnormal behaviors. The most important psychological services for the disabled are psychological counseling services, which include individual and group counseling, play or art counseling, behavioral modification services, counseling and guidance as well as psychotherapy, and the social worker also shares with the psychologist their expertise and technical methods in how to overcome the difficulties experienced by the disabled, and the social worker aims to help disabled individuals to adapt to the community in which they live and develop their sense of belonging and effectiveness. Vocational rehabilitation services: by transforming the disabled from a state of dependency on others to self-reliance and the resulting sense of satisfaction as well as the better treatment and vision reflected by others, and helping him to develop his or her ability, mental and physical abilities and get a suitable job for him, The disabled individual is directed to test the

profession that is commensurate with his or her abilities and desires, and the rehabilitation services include evaluation, guidance, vocational guidance, professional preparation, employment and follow-up, while the stages of the vocational rehabilitation process are vocational evaluation, vocational guidance and guidance, vocational training, employment. Institutions and rehabilitation centers include hospitals, private education schools and vocational rehabilitation centers. (*el dhqhir: 2005, p. 42,43*) The services provided to the talented are: the establishment of their own educational programs: private schools and classrooms, i.e. the comprehensive school enrichment program, acceleration programmers and its forms: early admission in the first grade is essential, class jumping, early admission to junior or secondary schools, acceleration and jumping of materials with partial acceleration and enrichment programs. (*Al-Dahiri: p. 51,52*)

3. Carl Rogers' Self-Theory:

The idea of self-emerged as a new concept in psychology by William James in 1890, which he called practical ego, and with the development of the concept of self in contemporary psychology, divided oneself into two practical concepts, such as the movement of activity and self as a subject that means trends and tendencies, and this theory belongs to the human current, which represents the third force in the field of psychology and came in response to behavioral and analytical and you see that man is able to change his behavior. In itself, and so are those with special needs here, Johnpol Sartre says that man is not what he has achieved, but what he has not achieved and longs to achieve.

3.1- Definition of self-theory (guidance around the client): Is a method of guidance developed by Carl Rogers and aims to help the client to express his thoughts, feelings, emotions, self-foresight, problems and experiences in a psychological atmosphere characterized by warmth, attention, empathy, unconditional tolerance and honesty on the part of the guide and then to rebuild the client's self-structure better, which is a non-guiding method of indirect guidance.

3.2- Basic concepts of self-theory:

- **Self:** Rogers considers the self the main nucleus underlying his method of guidance, so we cannot achieve a clear understanding of personality or behavior in general without referring to the individual's idea of himself, which includes the responses of the individual towards himself as a whole from various aspects of his mental, physical and emotional personality, namely the attitudes, perceptions, feelings and divisions of the individual himself (who I am).

The concept of self is an organized knowledge formation of emotional perceptions, perceptions and assessments of the individual, the concept of self is made up of the individual's self-coordinated ideas defined by the different elements of his inner and external being,

Experience: The individual goes through many experiences in his life and experience is something or a situation that the individual lives in a certain time and place and the individual lives with it and interacts with it affects and affects them and turns the individual experiences into symbols that he realizes in the light of the concept of self and in social standards, experiences that correspond to the concept of self and social standards lead to psychological comfort and compatibility and psychological compatibility and experiences that are incompatible with oneself and with the concept of self Self And it conflicts with social norms that the individual recognizes as a threat and gives them a negative value that creates tension and thus poor psychological compatibility

Individual: The individual has a fundamental motivation to assert and achieve himself and interact with his reality to achieve himself and the individual has a basic learning need to always positively appreciate himself Behavior: Is an activity geared towards a goal on the part of the individual to achieve and satisfy his needs in the virtual field as he realizes it if an agreement between behavior and the concept of self is psychological compatibility and if the opposite is poor compatibility and the best way to change behavior is change in the concept of self

- **Virtual domain:** The individual is in the virtual middle of any field of feeling, which is the ever-changing area of experience, a personal world that includes the emotional perceptions of the individual in his environment and is linked to the virtual field itself (perceived)

- **Defense mechanics:** which strengthen the self and give a positive concept.

- **Self-strengthening and strengthening**

3-3 - The objectives of the guidance focused on the client:

- Trying to get the client to a state of awareness, understanding and foresight with his problems and conflicts and tensions and the reasons for his concern this leads to psychological comfort

- Helping the individual to change his own concept, which corresponds to reality

- Help the customer grow to overcome his problems through tolerance, trust and exchange

- The individual's self-realization because he has an innate tendency to do so

- Creating self-contained change leads to compatibility

3.4- The basic principles on which the theory is based:

Strong faith in the ability of man to think, foresight and understand to solve his own problems, man is not weak or negative about the attitudes of life
The freedom of man to express his thoughts and feelings and freedom to make his decision in matters of himself

This theory emphasizes the existence and freedom of man.

This theory emphasizes confidence in what the client tells.

- The belief that a person lives within another person who drives his behavior and motivation.

Man has the ability to change himself and the field in which he lives to satisfy his needs and achieve himself.

3.5- Characteristics of self-theory:

- Full appreciation and consideration of the customer through the reference framework of the guide without the customer being subjected to any criticism or condemnation of acceptance

- To place full responsibility on the client, i.e. to solve his own problems.

- Determine the relationship for a specified period of time, i.e. each interview has a specific time and a specified number of interviews.

- Focus on the individual himself and not on the particular problem.

- Focus on a principle here and now, i.e. focus on live reality, i.e. don't care about the past and the unconscious.

- Diagnosis in this way we do not use a lot of psychological and mental tests.

- Focus on the emotional content of problems where the focused guidance around the person focuses on the current situation and on the emotional elements of the indicative process rather than on the emotional elements of the cognitive process.

3-6 Steps of guidance about the person and its stages:

The process of changing the personality of the client in the guidance is carried out through seven stages of guidance and the client is dealt with at any stage as an integrated whole and is accepted and sympathized with at the same level.

Stage 1:

And in it the client has a tendency to talk about external things that do not show him a clear desire to talk about himself as he does not realize the truth of his feelings and does not possess them and does not realize or know any of the problems at this stage

Stage 2:

The individual describes his feelings sometimes but as topics in the past i.e. shows some feelings but external and past as he talks about non-personal topics and the client does not take any responsibility at this stage towards problems

Stage 3:

The personal feelings and meanings of things that do not exist are often described and judged to be unacceptable or bad, i.e. to regulate these contradictory experiences, according to Carl Rogers.

Stage 4:

When the client realizes that the guide accepts him, then the description of feelings increases strongly and the description of personal meanings is repeated, as he realizes that the problems are more present in him than they are outside of him.

Stage 5:

The client describes the feelings he has denied freely as subjects in his own right and begins to realize the contradictions in his experiences and judgments and shows a kind of sense of self-responsibility towards his condition

Stage 6:

The client accepts the feelings that he has denied before and rests as a result and becomes able to see experiences through a realistic sense of them, and thus he lives in them instead of only feeling them and the contradiction becomes harmony and occurs sighs and muscle relaxation as a result of rest and at this stage the client lives part of his problem.

Stage 7:

The client continues with the same driving force and lives in Batmana and practices his experiences fluently and is able to look at the experiences in their true meanings so the special distinction for this stage is openness and leads to its emotional growth and change in internal and external communication

3.7 Cons of theory:

1. Dealing with specific categories of users related to the disorder of the concept of self and who has the ability to take personal responsibility.
2. Neglects the diagnosis process despite the consensus of most methods of guidance on the importance of it.
3. Man takes into account the science and truth, as the beneficiary is the only source of information, and what is important for Rogers is how the beneficiary sees the problem not as it is.
4. It leaves the beneficiary free, which may lead the beneficiary to dive into swirls and mazes and not reach a specific solution.
5. It does not suit the expectations of a number of beneficiaries of the guide in terms of providing information, advice or confrontation.

3.8 Pros of theory:

1. It is suitable for dealing with a large number of problems or strikes related to the disorder of the individual's self-concept.

2. Respect the human being and his will and look at him positively and he is motivated by an internal motive to preserve himself and develop it in contrast to Freud's negative theory.
3. Fit the democratic style of life.
4. Her treatment is rapid when compared to analytical school, so she shortens time and effort.
5. Easy and can learn its mechanics easily / suitable for dealing with humans and its therapeutic mechanics have been adopted by many therapists and mentors of human orientation and others.
6. The approach represents the middle between analytical and behavioral theory.
7. It works to provide a safe psychological climate that helps the beneficiary to reveal his own self-potential.
8. Emphasizes the need to know the intellectual and life orientations of the human being before working with him, and considers this the essence of the first stage of treatment besides building the therapeutic relationship.

3.9. The most important principles and objectives emphasized by this theory in guiding people with special needs:

We can identify the most important principles and objectives emphasized by this theory in guiding people with special needs as follows:

1. People with special needs live in a changing world through their experiences, which they consider to be the centre and centre of itself.
2. People with special needs depend on the outside world on their experiences, perceptions, abilities and sensitivities.
3. The interaction and responses of people with special needs to those around them in a way that is appropriate to themselves and the size of their disability
4. Most behavioural methods adopted by people with special needs are consistent with his own concept and ability to accept and overcome disability.
5. Psychological adjustment is made when people with special needs are able to absorb all their living and mental experiences and give them a meaning that fits their needs and is consistent with their own concept.
6. Bad compatibility and psychological stress are caused when people with special needs fail to absorb and organize their sensory and mental experiences, especially the inferiority complex towards themselves, staying at scratch and self-contempt without trying to adapt and interact with society.
7. Experiences that are incompatible with components with special needs are considered to be threatened by self-entity, as those with special needs

when faced with such experiences become more cohesive and organized to maintain their entity.

8 Disability-compatible experiences are examined and then absorbed by people with special needs and self-contained and therefore increase the ability of people with special needs to understand and accept others as independent individuals who are also as prepared as they are.

9. Increased conscious absorption of the experiences of people with special needs helps him correct some misconceptions that have been misinterpreted about his condition to lead to the formation of a wrong approach or behavior.

3.10- The most important procedural steps that the guide and psychologist can use in this theory:

One of the most important procedural steps that the guide and psychologist can use in this theory is as follows:

A. Consider a child with special needs as a deterrent and not as a problem per se, so that the guide can understand the trends of people with special needs and their impact on his disability by leaving him the space and the freedom for him to express his problem in order to be free from the internal nasal tension he imagines about his disability.

B To identify the type of problem that hinders people with special needs and causes him distress, anxiety and stress as well as to identify the strengths and weaknesses of people with special needs through guiding sessions and meeting with parents and others around him, where this step aims to help people with special needs to exploit his strengths in achieving his goals and interaction in society.

C. To inform a child with special needs aspects of disability while creating a great motive that eliminates the barrier of the complex of deficiency and perception that is in line with his perception and understanding negatively through the questions asked by the guide, which can remove the tension he has and give a positive concept to himself

The guide should show the customer the progress he has made in a positive way and assure the client that this represents an initial step in overcoming the anphylactic disorders.

And - to make it clear to the guide for people with special needs that accepting disability is the solution that staying in the vortex of the complex of deficiency and emotional disorders and anxiety and depression will achieve nothing but must create within it a strong motivation driven towards compensation and interaction through follow-up and special programs followed by the team and the family of the disabled to create a kind of adaptation and thus self-realization and happiness.

Conclusion:

We say that people with special needs really need guidance but I repeat and say not just slogans said or broad programs mentioned in form and do not apply content because it is a between idealism and realism and add not a lot of staff but as much as they provide effectiveness and real communication and a pure desire to help this group, I say what is missed but must be followed and ingenuity to integrate them and an example is said to be written with gold water "" prevention is better than treatment "" we must establish preventive programs purposeful Such as the choice of marriage and other sensitive and purposeful topics. The fact that when we accept and understand ourselves, we can accept and achieve what is not in mind, so do people with special needs when they accept their disability and develop their alternative energy, they will blow it up and integrate into society, and that is what the theory of self says.

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