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RESPITE CARE AS A FORM OF SUPPORT FOR FAMILIES OF PERSONS WITH INTELLECTUAL DISABILITIES: A REVIEW OF POLISH RESEARCH

Respite care is increasingly becoming the subject of scholarly analysis as an important element of the support system for families who provide care to persons with disabilities. The prolonged and intensive character of such caregiving exerts a multidimensional impact on the physical, psychological, and emotional condition of caregivers, while at the same time restricting their opportunities for social participation, professional activity, and personal self-realization. In this context, the need for forms of assistance that can ensure temporary relief from caregiving duties and create conditions for the restoration of personal resources among family members is becoming particularly relevant and urgent.

The aim of the article is to conduct a systematized review of Polish scientific studies devoted to respite care as a form of support for families of persons with disabilities. The paper analyzes publications by Polish authors in the fields of special pedagogy, social work, and social policy, which makes it possible to highlight the interdisciplinary character of the issue and to situate respite care within broader academic and professional debates. The methodological foundation of the study is the analysis and synthesis of scientific literature, which allows for the generalization of findings and the identification of key tendencies in the development of respite services in Poland. The results of the review demonstrate that respite care exerts a positive influence on the psychological well-being of caregivers, contributes to lowering stress levels, prevents the emergence of emotional burnout syndrome, and enhances the overall quality of family life. At the same time, the studies emphasize several problematic aspects: limited accessibility of this form of support, uneven development of services at the regional level, and insufficient awareness among caregivers regarding the possibilities of obtaining assistance.

Key words: *respite care, family support, persons with disabilities, informal caregivers, special pedagogy, social support, quality of life, emotional burnout.*

(статтю подано мовою оригіналу)

In the literature on the subject, respite care is defined as a form of temporary support for carers of persons with disabilities, consisting in the transfer of care responsibilities to other persons or institutions. Its essence is to enable actual carers to rest, regenerate their strength and take care of their own health, emotional and social needs. Respite care is also sometimes referred to as substitute care, which emphasises its function of relieving the family in their daily functioning.

As M. Szeroczyńska [13], [2, c. 151] points out, respite care is an important element of the social welfare system, responding to the needs of carers who often remain in a state of permanent overload for many years. The author emphasises that a lack of real support can lead to a deterioration in the mental and physical health of carers and, as a consequence, to a reduction in the quality of care for persons with disabilities.

The aim of respite care is not only to give carers time off, but also to prevent caregiver burnout and the social marginalisation of families of people with disabilities. Borski [1], [2, c. 150] points out that respite care has a preventive function, preventing family crises and excessive institutionalisation of people with disabilities. Thanks to temporary support, it is possible to maintain home care, which in many cases is the most desirable form of living for a person with a disability.

The results of Polish studies clearly indicate that respite care plays an important supporting role, but its potential is not fully exploited. The authors unanimously postulate the need for further development of this form of assistance, both at the systemic and local levels, and the need for further research on its effectiveness and accessibility.

In the Polish social assistance system, respite care is provided in various organisational forms, such as day care, 24-hour care and support provided at the place of residence of the person with a disability. As research shows Rutkowska, Glac, the diversity of care forms allows for partial adaptation of support to the individual needs of families, but does not eliminate problems related to the accessibility and continuity of this form of assistance. Day care allows carers to carry out their professional duties or rest during the day, while 24-hour care provides more intensive support, which is particularly important in situations of long-term care overload. In turn, assistance provided in the home environment helps to maintain the stability of a person with a disability, which is particularly important in the case of people with a high level of dependency. However, the literature on the subject emphasises that access to respite care in Poland remains uneven and strongly dependent on place of residence Borski [1], [2, c. 61]; Szeroczyńska [13], [2, c. 159]. Regional differences are mainly due to the decentralisation of the social assistance system, financial constraints of local government units and a shortage of qualified staff. As a result, some families experience difficulties in obtaining support or use it only for a limited period of time, which reduces the effectiveness of this form of assistance.

Compared to Polish solutions, the situation of respite care in Ukraine remains significantly underdeveloped and highly fragmented. Historically, the Ukrainian system of support for persons with disabilities and their families has been predominantly institutional in nature, focusing largely on long-term placement in specialized facilities rather than supporting care within the family environment. Consequently, the needs of informal caregivers – those who

provide the majority of daily assistance – have received limited recognition in social policy and service planning Kolupaieva [16], [108, c. 35]. In Ukraine, respite care is not yet established as a systematically regulated component of social policy. Assistance for families is often ad hoc, provided sporadically by non-governmental organizations, local community initiatives, or charitable programs. Such fragmentation creates substantial inequalities in access to support, particularly for families residing outside major urban centers, and restricts the continuity and effectiveness of available services. Ukrainian scholars emphasize that the absence of formalized respite care mechanisms contributes to considerable physical, emotional, and social burden on families. Mothers and female caregivers, who constitute the primary caregiving workforce, frequently experience chronic stress, fatigue, and a diminished quality of life, which can have long-term adverse effects on both caregivers and persons with disabilities Kolupaieva [16], [108, c. 38]; Kolupaieva, Taranchenko [8], [12(3), c. 30]. Moreover, the ongoing humanitarian crisis and military conflict have further exacerbated these challenges by limiting access to institutional support and social services, thus intensifying the vulnerability of families.

By contrast, in Poland, respite care has gradually been institutionalized and increasingly recognized as a vital component of comprehensive family support. Although the Polish system faces challenges – such as regional disparities in service availability and shortages of qualified personnel – it offers a more structured framework that acknowledges informal caregivers as legitimate beneficiaries of social assistance. Polish respite care services include day-care centers, temporary residential care, and in-home support, providing both practical relief and psychological support to caregivers Szeroczyńska [13], [2, c. 151]; Glac [3], [c. 187]. A comparative analysis highlights that while the Polish system is not without limitations, it represents a progressive step toward formally recognizing and supporting informal caregivers. The Polish experience provides valuable guidance for Ukraine in developing systematic, accessible, and family-centered respite care programs. Implementing similar approaches could significantly reduce caregiver burden, enhance family well-being, and improve the quality of life for persons with disabilities. In the context of post-crisis reconstruction, integrating lessons from the Polish model into Ukrainian social policy could contribute to a more resilient, inclusive, and effective family support system.

Respite care in Polish scientific research

An analysis of Polish research on respite care indicates that it is considered by carers to be one of the most essential yet still underdeveloped forms of support. Empirical studies have primarily focused on the experiences of actual carers and the effects of respite care on the daily functioning of families of persons with disabilities. These studies highlight both the practical benefits of respite care and the psychosocial impact it has on carers, showing that access to structured support can significantly influence family well-being, the quality of care provided, and the sustainability of caregiving over time.

In M. Borski's [2], [2, c. 160] research, carers emphasized that having the opportunity to use respite care services contributes not only to reducing stress levels but also to improving overall well-being and restoring depleted mental and emotional resources. The author notes that even short-term respite services – such as a few hours of daily support or occasional day programs – can have a substantial effect on carers' health, mood, and ability to maintain social relationships. This is particularly relevant for families caring for individuals with a high degree of dependence, where the continuous physical and emotional demands can quickly lead to caregiver burnout.

Moreover, respite care in Poland has been shown to have broader benefits beyond individual carers. It supports family stability, reduces the risk of institutionalization for persons with disabilities, and allows carers to maintain employment or pursue personal and social activities. Researchers such as Szeroczyńska [13], [c. 158] further highlight that access to organized and legally supported respite care helps recognize informal carers as legitimate stakeholders in the social support system, validating their role and addressing their needs as an integral part of public policy.

In turn, M. Szeroczyńska [13], [2, c. 154] analyses respite care in the context of legal and organisational solutions, pointing to its growing role in social policy. The author notes that despite the formal introduction of support programmes, carers still encounter barriers related to limited availability of services, lack of information and an insufficient number of qualified carers. From a pedagogical perspective, the research by I. Glac [3], [c. 201] is also significant, as it presents respite care as a form of support that promotes the mental health of the entire family. The author emphasises that respite care has a positive impact not only on carers, but also on family relationships and the well-being of the person with a disability, enabling a more balanced functioning of the family system.

The family of a person with a disability as a support entity

The family of a person with a disability is the basic and most important environment for their functioning, and at the same time is the main entity providing daily care and support. Pedagogical and psychological literature emphasises that caring for a person with a disability, especially one with a significant degree of dependence, is long-term and multidimensional, encompassing the physical, emotional, social and organisational spheres of family life. Karwowska [6], [6, c. 100] points out that the family of a child or adult with a disability often experiences overload resulting from the need to combine caregiving, professional and social roles. In a situation of limited external support, carers may experience feelings of loneliness, social marginalisation and a reduced quality of life. Long-term caregiving also contributes to chronic stress, fatigue and health problems. Rutkowska [11], [4, c. 39] emphasises that effective support for families of persons with disabilities should be comprehensive and include both material assistance and emotional, informational and instrumental support. In this context, it is important to

recognise the needs of the carers themselves, who often remain 'invisible' in the support system, even though their mental and physical condition directly affects the quality of care provided to the person with a disability.

An analysis of the situation of families of persons with intellectual disabilities, presented by Karwowska [6], [6, c. 110], points to the multidimensional burdens faced by actual carers in their daily lives. The need to combine caregiving, professional and social roles, coupled with a lack of external support, leads to increasing physical and emotional overload, feelings of loneliness and a gradual decline in the quality of life of the whole family. Long-term caregiving contributes to chronic stress, fatigue and health problems, which in the long term can lead to caregiver burnout. Rutkowska [11], [4, c. 40], on the other hand, emphasises that effective support for families of persons with disabilities should be comprehensive and include not only material assistance, but also emotional, informational and instrumental support.

The author draws attention to the need to recognise the needs of carers themselves, who, despite their key role in the care and rehabilitation process, often remain marginalised in the support system. The mental and physical condition of the carer directly affects the quality of care provided and the functioning of the entire family system. In light of the above findings, the family of a person with a disability should be seen not only as the provider of care, but also as an entity requiring systemic institutional support. This approach provides a significant justification for the development of respite care as a form of assistance that responds to the real needs of actual carers, allows them to take a temporary break from their duties, and promotes mental balance and the ability to provide long-term care.

Conclusions. A review of Polish research clearly indicates that respite care plays a key role in the support system for families of persons with disabilities. The publications analysed emphasise that its introduction contributes to improving the mental and physical well-being of carers, reducing chronic stress and counteracting fatigue and burnout. Thanks to temporary relief, carers can regenerate their resources, take care of their own health, and devote time to other aspects of their personal and professional lives, which directly affects the quality of care provided to persons with disabilities.

Thanks to temporary relief, carers can regenerate their resources, take care of their own health, and devote time to other aspects of their personal and professional lives, which directly affects the quality of care provided to persons with disabilities. At the same time, the literature points to a number of limitations and barriers that restrict the full potential of respite care. These include uneven access to services depending on the region, an insufficient number of qualified staff, limited funding for local government units, and insufficient awareness among carers about the forms of support available. In practice, this means that many families still encounter difficulties in using the services or can only use them for a limited period of time, which partially reduces the effectiveness of the entire support system. From the perspective of special education, respite care should be treated as an integral part of comprehensive support for families of people with disabilities. Taking into account the needs and experiences of actual carers in the design of support programmes is crucial to ensure that services respond to the real needs of users. There is also a need for further development of systemic solutions, both at the level of social policy and in institutional practice, and for new empirical research to assess the effectiveness and efficiency of available programmes.

In summary, respite care is a valuable and necessary form of support that not only increases the comfort and safety of carers, but also promotes the stability and functioning of the entire family system. Its development can contribute to improving the quality of life of families of people with disabilities, increasing their adaptive potential and strengthening the role of carers in the care and rehabilitation process. The importance of this type of support in the pedagogical and social context justifies the need for further theoretical analysis and scientific research, which will allow respite care programmes to be tailored to the real needs of families in Poland and other countries, including Ukraine.

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Я. А. Цигульська. Респітна опік як форма підтримки сімей осіб з інтелектуальною інвалідністю: огляд польських наукових досліджень

Респітна опіка дедалі частіше постає предметом наукового аналізу як важливий елемент системи підтримки сімей, що здійснюють догляд за особами з інвалідністю. Тривалий та інтенсивний характер цього догляду має комплексний вплив на фізичний, психічний та емоційний стан опікунів, обмежуючи їхні можливості соціальної участі, професійної активності та особистісної самореалізації. У зв’язку з цим актуалізується потреба у формах допомоги, які забезпечують тимчасове зменшення навантаження та створюють умови для відновлення особистісних ресурсів членів родини.

Метою статті є здійснення систематизованого огляду польських наукових досліджень, присвячених респітній опіці як формі підтримки сімей осіб з інвалідністю. У роботі проаналізовано публікації польських авторів у галузі спеціальної педагогіки, соціальної роботи та соціальної політики, що дозволяє окреслити міждисциплінарний характер проблематики. Методологічною основою дослідження виступає аналіз і синтез наукової літератури, що забезпечує узагальнення результатів та виявлення ключових тенденцій у розвитку респітних послуг. Результати огляду засвідчують, що респітна опіка позитивно впливає на психічне благополуччя опікунів, сприяє зниженню рівня стресу, запобігає розвитку синдрому емоційного вигорання та підвищує якість життя сімей. Водночас у дослідженнях наголошується на низці проблемних аспектів: обмежена доступність цієї форми підтримки, нерівномірний розвиток послуг на регіональному рівні, а також недостатня поінформованість опікунів щодо можливостей отримання допомоги. З позицій спеціальної педагогіки респітна опіка розглядається як складова комплексної підтримки сім’ї особи з інвалідністю, що має інтегруватися у ширшу систему соціальних та освітніх послуг. У висновках підкреслюється необхідність подальшого розвитку системних рішень, розширення мережі респітних послуг та проведення нових емпіричних досліджень.

Ключові слова: *респітна опіка, підтримка сім’ї, особи з інвалідністю, фактичний опікун, спеціальна педагогіка, соціальна підтримка, якість життя, емоційне вигорання.*

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