

## **Guidance Of Mental Retardation: A study**

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### **The role of the proposed research.**

The present study has assessed the psychosocial problems [related to the mentally retarded children] encountered by the parents of the mentally retarded children. The informational needs of the parents have also been investigated. All the aforesaid psychosocial variables were assessed using either questionnaires or interviewer rated schedules specifically designed for the present purpose. In order to examine the needs and problems of parents of mentally retarded children fathers and mothers of such children were assessed individually and separately (i.e., in the absence of other members). The separate assessment of father and mother has been proposed in order to control the influence of the presence of others on the response and reactions of the respondent. Such assessment would also control the influence of social desirability to a larger extent and would facilitate the honest disclosure of the actual problems encountered by the parents.

The present study has been conducted on a purposive sample of 100 parents (100 mothers and 100 fathers) of mentally retarded children. Various clinics and hospitals having the facility to provide treatment and care for mentally retarded children in Varanasi city were initially identified. From the OPD and/or Inpatients department of these hospitals, 150 parents of the mentally retarded children were incidentally sampled. However, 5() parents were not included in the present study either because (1) either father or mother of the MR child was not accessible for data collection, and/or (2), either father or mother showed their unwillingness to participate in the present study. Thus, only those 100 parents were included in the study in which mothers and fathers both agreed to participate in the study and were accessible for data collection. The final sample included both parents having a male and parents having a female mentally retarded child.

The final sample (of parents) was "rawn" from the following institutes where parents of MR child were seeking treatment and rehabilitation services for their offspring.

Deva center for Institute of Mentally Retarded Children.

Mandit Bal Vidyalay, Kashi Vidyapith.

S.S. hospital B.H.U.

Cerebral palsy center, Sigra and various private clinics.

**Inclusion and Exclusion Criteria**

Only those parents were included in the present study whose child was mentally retarded and the severity of retardation was from mild to moderate as per the DSM-IV-TR criterion of diagnosing Mental Retardation (See Annexure for DSM-IV-TR criterion). Here it is important to mention that the diagnosis of MR was made by the concerned psychologists/clinical psychologists of the organization where the MR child was visiting for consultation and therapeutics services.

### **Steps of the proposed research.**

The items of the inventory were drawn from many sources. Questionnaire on resources and stress- short form (Donovan: 1998); survey for parents of children with handicap conditions (Brash: 1982); Parenting stress Index (Abidin: 1995) formed the major sources of the items. Personal interviews conducted with parents of mentally retarded children, discussions with professionals in the field and undertaking exhaustive review of both Western and Indian literature on the subject provided the idea for needed items. On the basis of the above-mentioned review sources nine areas of problems of parents with mentally retarded children were identified. They were family, physical, social, vocational, child management, financial, psychological, psychosomatic and professional advice problems. Under each area 8-15 items, focusing on the theme of the problem were tentatively composed and these items were subjected to more careful

scrutiny. The items, which seemed to overlap with another, were critically examined. An item conveying the idea most clearly was retained. The wording of some items was changed to make it suitable to express the same, wherever necessary. This process of scrutiny and evaluation finally yielded 3-10 items under each area.

### **Significance of the proposed research.**

The general and specific impacts of some kind of handicap of a child in a family could nowhere be comparable to those families having normal children without any sort of handicap. Among the other kinds of child's disabilities, the presence of a mentally retarded child in a family is known to impose severe mental and social stress and inhibitions of a relatively higher magnitude demanding unforeseen special needs and services to be attended not only on the mentally retarded children per se but also for other normal persons involved in giving care to the mentally retarded children such as their fathers, mothers, brothers, sisters, and grand parents.

Mental Retardation has posed a great problem throughout the world due to its highly complex, social, medical, psychological, legal and educational components, apart from various unanticipated problems. It is considered as one of the most difficult problem to understand, define, educate and manage to everybody's satisfaction at different levels of the human community.

In the past years the fortunes and misfortunes of the retarded were guided by superstition, ignorance and fear, to many centuries with first record in Greece and Rome. A significant beginning in the evolution of positive social thought towards the mentally retarded was established in the 19<sup>th</sup> century and considered that the mentally retarded persons have also rights in the society. Sparked by the leadership of IZARD, Sequin, Howe and others, the scientific enquiry succeeded superstition and fear through their pioneering efforts. Consequently, sound educational and training programs were developed to manage mental defects, and institutional facilities were established. These techniques were applied largely to very retarded person, the major form of retardation identifiable at that time. Although program emphasis within the institutions was often merely custodian, a milestone has been passed in the acceptance of public responsibility for the retarded and the provision of human care for them in public support facilities were earmarked.

### **Objectives of the proposed research.**

The evolutionary concepts on human genome were considered important as compared to the other organisms. The useful change is adapted in the direction of better interaction with physical, chemical and biological environments. Changes are inevitable in different organs of human system to win over even adverse surroundings step by step through the process known as micro evolutionary changes. Apart from mutation and selection a third force in the genome is often referred as drift of genes. In living systems which are non adaptive by nature fixing either recessive gene or the dominant gene. It is difficult to locate the non-adoptive genes or less adoptive in living system and they perpetuate together with mutant and select genes and may be unavoidable participant even in human genome expression. Though, the studies on human genome project are getting completed, though to pin out the differing genes might be difficult at this stage. It may partly be presumed that the mentally retarded individuals may score more non-adaptive factors at some brain centers, which usually bring down the IQ level as compared to normally intelligent and interactive human being to the environment forces. In this context it is imperative that cent percent adaptive organic changes in the genome with the rapidly changing physical and chemical environments, a rare possibility. The environment especially for humans, with rapidly changing culture is highly challenging to cope up with, however, the human genome has its known base in organic evolution. Dose the genes involved in MR do have any significance in the human genome capital, distributed in more than 10 billion population of the world, if so what is its role in human genome adaptation, perpetuation and prosperity. Why these nonadaptive genes are not eliminated

by selection, are the fundamental questions from the genetic standpoint. Many researchers are of the view that chromosomal abnormality (e.g. trisomy 21) is associated with profound congenital defects and mental retardation.

### **Findings of the proposed research.**

Further, to find out statistical significance of pattern of mean difference on need requirements of parents of mentally retarded children, in relation to the level of retardation of their children, t-test was conducted. It was found that mean difference was statistically significant for needs like Information Condition, Facilitating Interaction, Services, Personal-Emotional, Personal-Social, Support-Physical, Financial and Government Benefits.

However, mothers and fathers did not differ significantly in the need areas like child management, occupational planning, sexuality, marriage, hostel, family relations and future planning. The foregoing areas of no significant difference among the needs of parents in these areas might not remain the same in future and when some of the needs gain significances at the levels of individual parents level suitably they should be guided to successfully go ahead with other needy areas to overcome the problems as much as possible in the direction MRC management. In essence nothing can replace the role of parents in bringing up MRC.

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