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Attitude of Mothers Towards Care of Intellectually Disabled Children Studying In Selected Special Schools of Calicut District, Kerala

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Abstract:

Background of the study

An intellectually disabled child requires more parental attention and involvement than a normally developing child. The attitude of parents towards their disabled child plays an important role in adaptive skill development in child and improving the quality of life of both parent and child.

Objectives of the study

The main aim of this study was to assess the attitude of mothers towards care of their intellectually disabled child.

Methods

A descriptive study was conducted to assess the attitude of parents of intellectually disabled children. 150 parents of children with mild and moderate intellectual disability were selected for the study. The sample was selected with purposive sampling method. The setting of the study was three selected Special schools at Calicut district, Kerala. A demographic questionnaire and a parental attitude scale for problem children by N. Rangaswamy (1989) were administered to assess the attitude of parents towards care of their children. A descriptive statistics was carried out to find out the mean attitude scores of parents towards their intellectually disabled children.

Results

Majority (81.3%) of mothers spent 4-8 hours per day for their job or house hold works. The time spends for care of their intellectually disabled child was 3-6hours per day by majority (81.3 %) of mothers. Majority (60%) of the children belonged to the age group of 13-17 years. The results showed that majority (46%) mothers having a moderately unfavorable attitude (mean score 42.3 and 36.7 % mothers were having a favorable attitude and 17.3% of mothers having highly unfavorable attitude towards care of their intellectually disabled children. The results showed that there is no association between the gender of child ($\chi^2= 4.72$), age of the child ($\chi^2=1.117$) and

educational status of the mother ($\chi^2=3.84$) with parental attitude. There is a significant association found in mother's occupational status ($\chi^2=15.38$) and family income per month ($\chi^2=12.74$) with the attitude of mothers.

Conclusion

Parental attitude towards care of intellectually disabled children has very important role in the proper growth and development of the child. This study shows that majority of the mothers were having a moderately unfavorable attitude towards their children.

Key words: Intellectually Disabled Children, Parental Attitude, Special Schools

I. INTRODUCTION

The development of a healthy child actually begins before conception, with the parents' health and their genetic factors. It is important that, along with child's physical well-being, social and mental health also must be considered. The health of the family as a whole plays a major role in determining the health of each child within that family. This applies not only to children's physical health but to their emotional and social health, as well. Intellectually disabled children are the children with low IQ level and lack of adaptive skills. Intellectual disability can be characterized by significant limitations in two or more of the following applicable adaptive skill areas, communication, self care, home living, social skills, self direction, health and safety, functional academics, leisure and work.

It can be estimated that there are nearly 24 million individuals in India with intellectual disabilities, out of which approximately six million are moderately, severely or profoundly handicapped. The risk of mild ID is highest among children of low socioeconomic status (Durkin et al., 2007; Maulik et al., 2011). Out of the 24 million, 0.8 million are adults over 20 years of age whereas 15 million are children below 10 years of age. (CBR Manual: Concept and Extent of disability in India).

Mentally challenged children are the children with intellectual disability and problems in adaptive behavior. The term mentally challenged has adopted recently and it was previously termed as mentally retarded or intellectually disabled. Intellectual disability can be characterized by significant limitations in two or more of the following applicable adaptive skill areas, communication, self care, home living, social skills, self direction, health and safety, functional academics, leisure and work. Mental retardation can be assessed with combination of IQ tests along within social adaptation test. There is a wide range of predisposing and precipitating factors which can result in an equally wide range of difficulties for mentally challenged children.

Parents have a major role in helping children grow and develop to their full potential. The social life of parents was found to be disrupted by the presence of an intellectually disabled child in the family. Parents also experienced conflicts in the community and experience social withdrawal due to the behaviour of child. Daily life and activities of parents may very much affect by the presence a mentally challenged child. Parent's attitude towards their child is important for the proper functioning of whole family. Intellectual disability continues to be growing challenge for the parents in specific and to the societies in general worldwide (Journal of Personality and Clinical Studies, 2002).

II. OBJECTIVES AND METHODS

1. To assess the parental attitude among mothers of intellectually disabled children towards care of their children
2. To find out the association between selected demographic variables with parental attitude towards care of intellectually disabled children

II.1. Research Design

Descriptive research study with one group pretest only design chosen for the study.

II.2. Setting of the study

The study was conducted at 3 special schools at Calicut district, Kerala. The parents of intellectually disabled children studying in Prashanthi Special School, Pratheeksha Special School and Asha Kiran Special School were selected for the study.

II.3. Population

Mothers of children with mild and moderate intellectual disability

II.4. Sampling technique

Purposive sampling method was adopted to select the subjects for the current study.

II.5. Sample size

A total sample of 150 mothers of children with mild and moderate intellectual disability was selected for this study. From each special school 50 children and their mothers were selected.

Criteria of sample selection

1. Mothers of children with mild and moderate intellectual disability
2. Mothers of children who admitted in selected special schools of Calicut district , Kerala
3. Mothers who are able to read English or Malayalam
4. Mothers who are willing to participate in the study
5. Mothers who are in the age group of 25 to 55 years

Exclusion criteria

1. Mothers who are having any sensory impairment
2. Mothers who are with any intellectual disability
3. Mothers who are not residing with the intellectually disabled children

Ethical consideration

The ethical committee clearance was obtained from Iqraa International Research Centre, Calicut district, Kerala to conduct the study. Permission has taken from Prasanthi special school, Asha Kiran special school and Pratheeksha special school, Calicut to conduct the study. The researcher has obtained informed consent from the participants of the study.

Description of data collection instrument

A socio demographic questionnaire is used to assess the baseline characteristics of the mother and intellectually disabled child. A Parent Attitude Scale for Problem children by

N RangaSwamy (1989) was administered to assess the attitude of mothers, regarding caring of their intellectually disabled children. This scale is used to measure the attitude of parents towards their problem children. It covers the areas like, overprotection, acceptance, rejection, permissiveness, communication, attitude towards education, home management and hostility.

Scoring

This scale consists of 40 items spread equally into above mentioned 8 areas. Three point scale pattern was adopted. The items are to be answered in terms of 'yes', 'cannot say' and 'no'. The items from 1-5, 9-15, 21-27, 31-40 scored using the pattern of 'no'-0, 'cannot say' -1: and 'yes'- 2. Item number from 6-8, 16-20 and 28-30 are scored with scoring patterns of 'yes'-0; 'cannot say'-1; and 'no'-2. Thus maximum possible score is 80. The subscales are arranged in such a way that first five items are about over protection, and the following every consecutive items are about acceptance, rejection, permissiveness , communication, attitude towards education , home management and hostility respectively. Subscales can be obtained by adding the subscale items. The total attitude scale scores are interpreted as below:

Below 50%	-	Favorable attitude
50% to 60%	-	Moderately unfavorable attitude
More than 60%	-	Highly unfavorable attitude

Data collection procedure

The data collection procedure started in the month of October, 2019 at Prashanthi special school, Asha Kiran special school and Pratheeksha special school, Calicut district, Kerala. After obtaining permission from the institutions, the mothers of children with mild and moderate intellectual disability have selected by using purposive sampling method. Informed consent has taken from the participants. As per the instruction of researcher, mothers of intellectually disabled children were assembled in the school for data collection. The data collection procedure conducted in three consecutive days by covering each school per day. In the first day, data collected from 50 mothers of children studying in Pratheeksha special school, second day at Prashanthi special school and third day at Asha Kiran special school. A Parent Attitude Scale for Problem Children by N Rangaswamy has administered to the mothers, after giving instruction. The filled up attitude scale was collected back from mothers after 20 minutes.

III. ANALYSIS AND FINDINGS

The data collected from mothers of intellectually disabled children were analyzed by using descriptive statistics like mean, standard deviation and percentage. A chi square test was done to assess the association between selected demographic variables and the attitude of mothers.

Table 1: Distribution of demographic characteristics of mothers of intellectually disabled children

N=150

Sl no	Demographic variables	Number	Percentage (%)	
1.	Age of mother	25-35 years	48	32.0
		36-45 years	62	41.3
		46-55 years	40	26.7
2.	Educational status	Primary	35	23.3
		Secondary	67	44.7
		Higher secondary	48	32.0
		Degree	0	0
		Post graduation	0	0
3.	Occupational status of mother	Coolie/daily wages work	15	10.0
		Clerical / administrative work	30	20.0
		Technical/ professional work	2	1.30
		House wife	103	68.7
4.	Time spend for job or house hold work by mother	< 4 hours	5	3.3
		4-8 Hours	122	81.3
		>8 hours	23	15.4
5.	Time spend for care of child at home per day	3-6 hours	122	81.3
		7-10 hours	28	18.7
		>10 hours	0	0
6.	Age of the child	6-12 years	60	40.0
		13-17 year	90	60.0
7.	Gender of the child	Male	75	50.0
		Female	75	50.0
8.	Family income in rupees per month	<5000	2	1.3
		5001-10000	110	73.4
		10001-15000	36	24
		15001-20000	2	1.3
		>20000	0	0
9.	Intellectual disability level of the child	Mild	4	2.6
		Moderate	146	97.4

Table 1 depicts that the demographic characteristics of mothers of intellectually disabled children. It shows that majority (41.3%) of the mothers belongs to the age group of 36-45 years. Majorities (44.7%) of the mothers were having higher secondary education and there was no one belongs to the category of degree and post graduation level. Majority (68.7%) of the mothers was house wives and only 1.3% mothers were belongs to technical/professional job category. Majority (81.3%) of mothers spent 4-8 hours per day for their job or house hold works. The time spends for care of their intellectually disabled child was 3-6hours per day by majority (81.3 %) of mothers. Majority (60%) of the children belonged to the age group of 13-17 years and there were 50% of male children and 50% of female children. There were no families belonged to the income of more than 20000rs and majority (73.4%) belonged to the monthly income of 5000-10000rs. Only mild and moderate intellectually disabled children and their mothers included in the study. In that majority (97.4%) were belonged to the moderate intellectual disability.

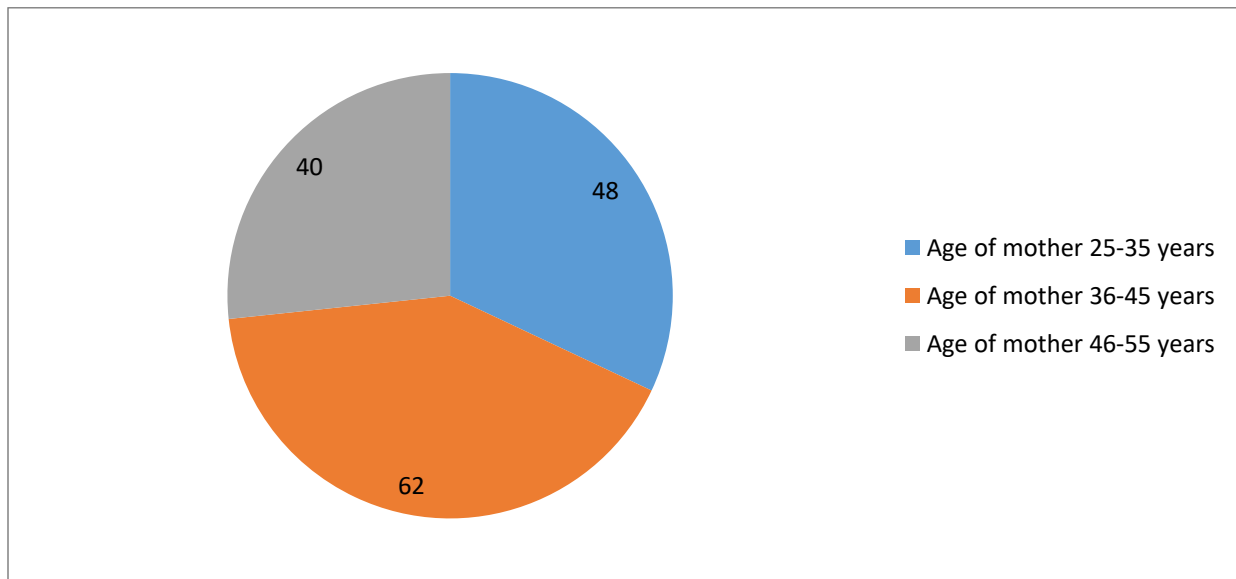


Fig:1: Pie diagram showing age distribution of mothers of intellectually disabled children

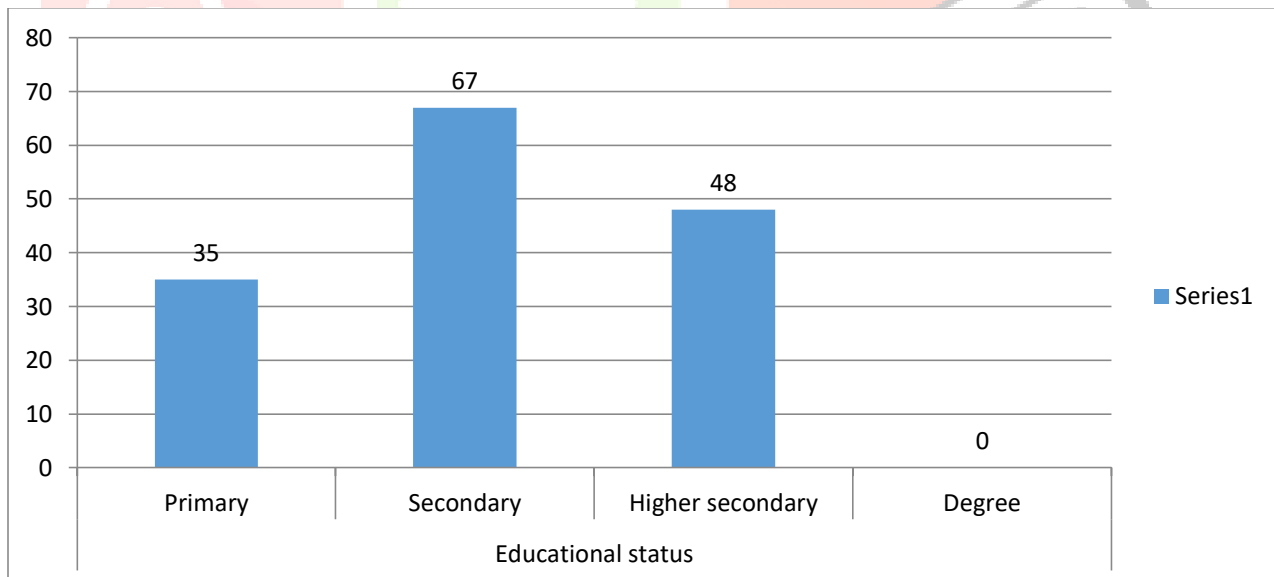


Fig:2: Bar diagram showing the distribution of educational status of mothers of intellectually disabled children

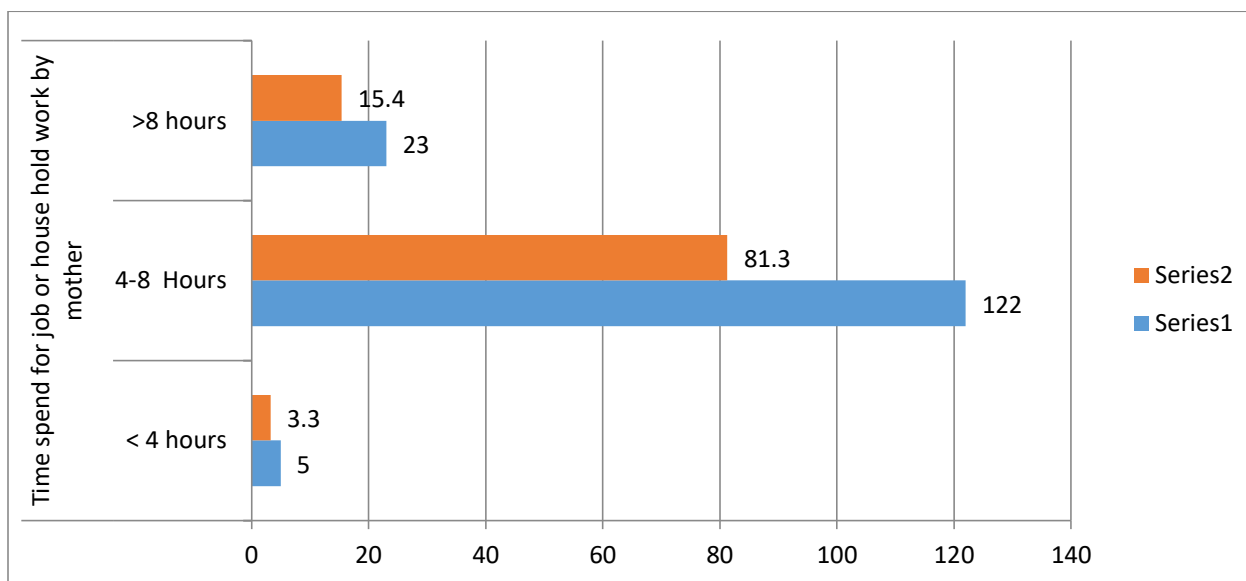


Fig 3: Bar diagram showing the time spend for job or household works by the mothers of intellectually disabled children

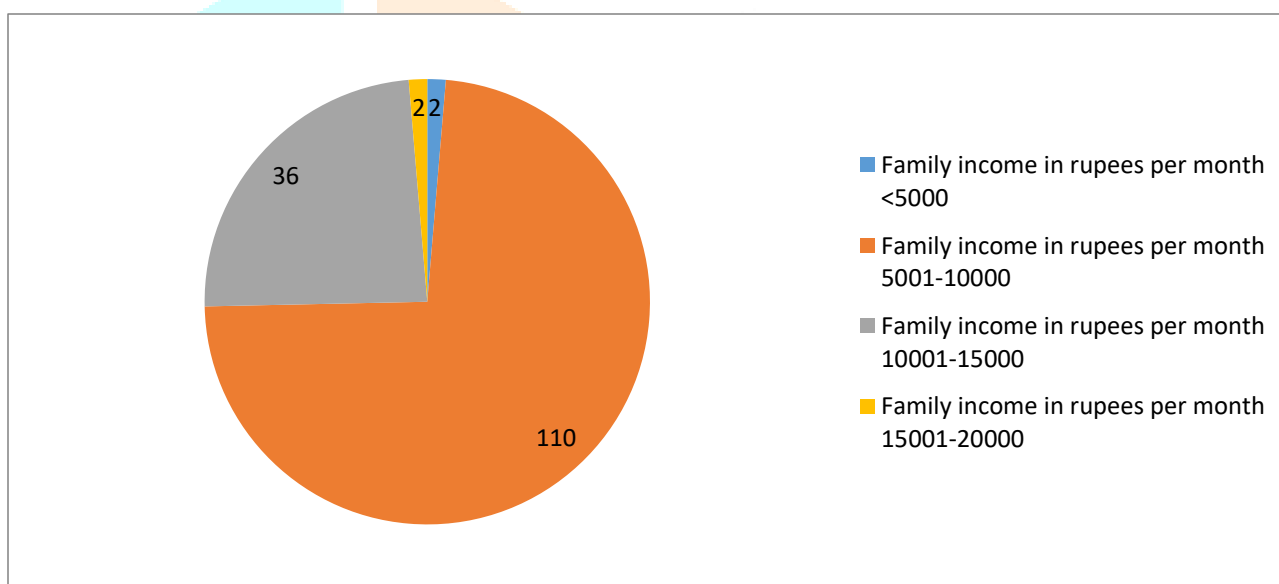


Fig 4: Pie diagram showing the distribution of family income per month in rupees

Table 2: Distribution of level of attitude of mothers towards care of intellectually disabled children

N =150

Level of attitude	Number	Percentage
Favorable attitude (<50%)	55	36.7
Moderately unfavorable attitude (51- 60%)	69	46.0
Highly Unfavorable attitude (>60 %)	26	17.3

Table 2 shows that the majority (46%) of the mothers were having moderately unfavorable attitude towards care of their mentally challenged children. 36.7 % of the mothers were having favorable attitude and only 17.3 % of mothers were having highly unfavorable attitude.

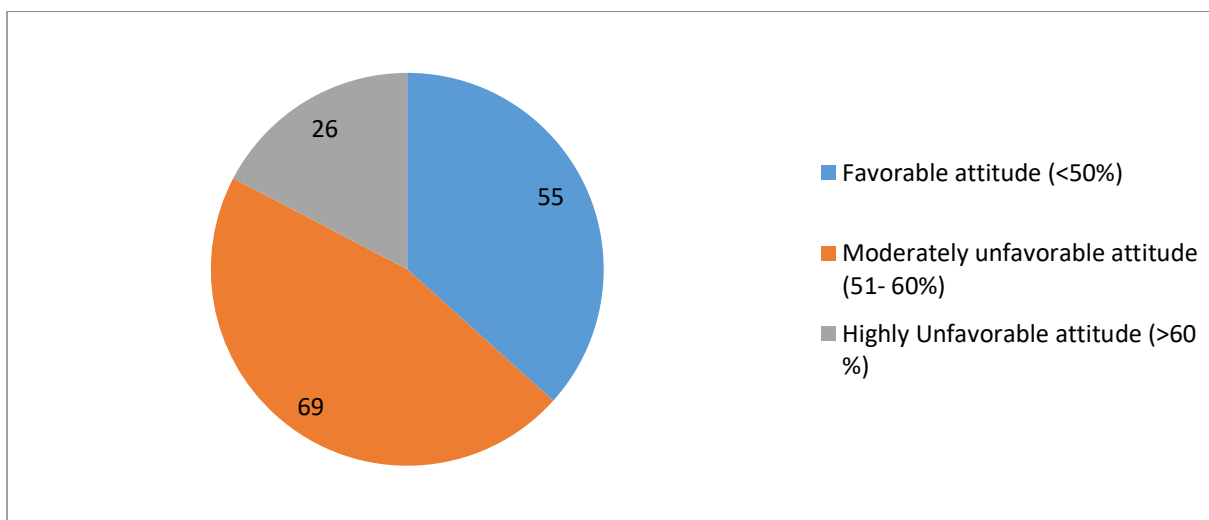


Fig 5: Pie diagram showing the distribution of attitude scores of mothers of intellectually disabled children

Table 3: Mean Percentage Distribution and Standard Deviation of Parental Attitude Scores towards Care of Intellectually Disabled Children

N=150

Variable	Mean score	Standard deviation
Attitude	42.3	7.146

Table 3 depicts that the mean percentage score of parental attitude was 42.3 and the standard deviation was 7.146.

Table 4: distribution of parental attitude scores based on the subscales

N=150

Variable	Subscales	Mean score	Standard deviation
Attitude	Over protection	5.35	1.69
	Acceptance	4.20	1.60
	Rejection	5.4	1.11
	Permissiveness	6.3	1.15
	Communication	5.4	.942
	Attitude towards education	5.18	1.48
	Home management	6.12	1.19
	Hostility	3.97	2.13

Table 4 depicts that the mean subscale scores of attitude of mothers towards their intellectually disabled children. The subscale overprotection (5.35), Rejection (5.4), communication (5.4), and attitude towards education (5.18) showed that there were moderately unfavorable attitudes of mothers towards their intellectually disabled children. The hostility (3.97) and acceptance (4.2) scores of mothers shows favorable attitude and the subscale permissiveness (6.3) and home management (6.12) shows highly unfavorable attitude of mothers towards care of their intellectually disabled children.

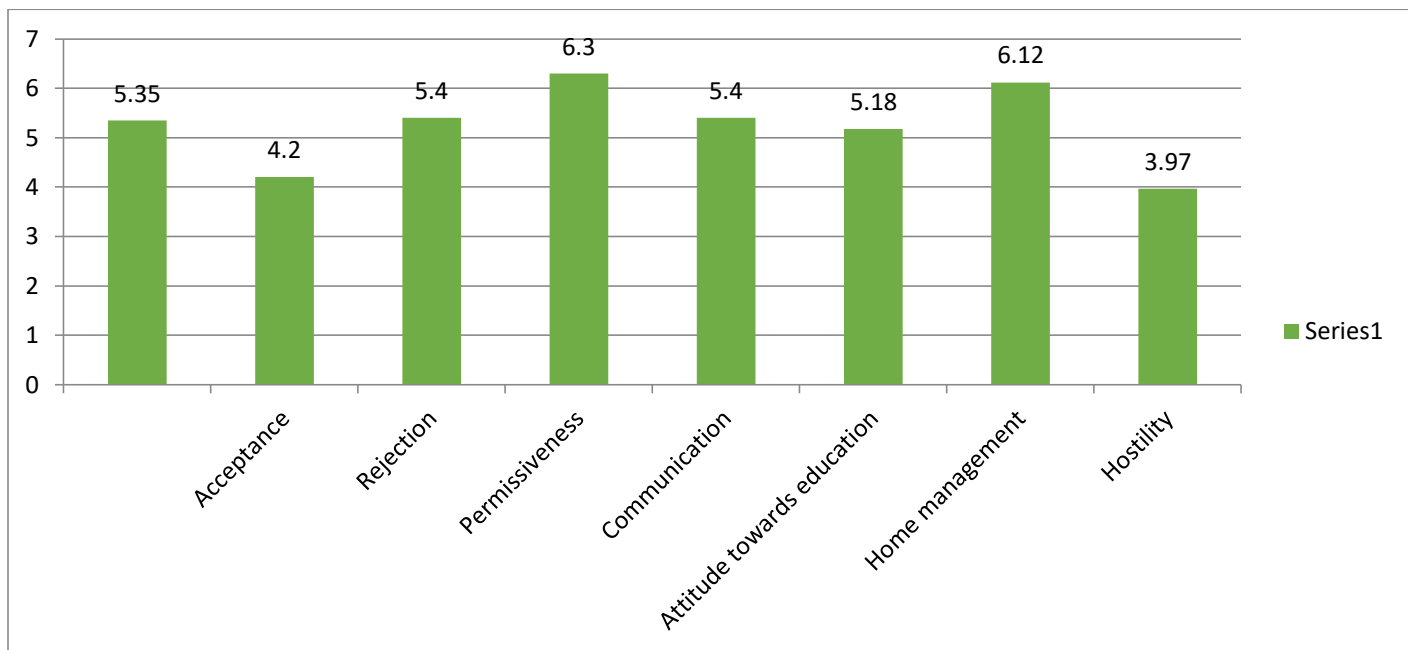


Fig 6: Bar diagram showing the distribution of attitude scores of mothers based on the subscales

Table 5: χ^2 value, Df, table value, p value and inference of attitude of mothers and their selected socio demographic variables

Sl no	Socio demographic characteristics	χ^2 value	Df	Table value	P value	Inference
1	Educational status of mother	3.847	4	9.47	.427	Not significant
2.	Occupational status of mother	15.38	6	12.59	.018	Significant
3.	Gender of the child	4.72	2	5.99	.094	Not significant
4.	Family income per month	12.74	6	12.59	0.047	Significant
5.	Age of the child	1.117	2	5.99	.572	Not significant

Table 5 shows that there is no association between the gender of child ($\chi^2=4.72$), age of the child ($\chi^2=1.117$) and educational status of the mother ($\chi^2=3.84$) with parental attitude as the tabled value is greater than the calculated value at 0.05 level of significance. There is a significant association found in mother's occupational status ($\chi^2=15.38$) and family income per month ($\chi^2=12.74$) with the attitude of mothers.

IV. DISCUSSION

The attitude of the parents towards their disabled children are often accompanied by negative feelings of hostility, shame denial, guilt, grief, projection of blame, withdrawal, rejection (as well as feelings of helplessness, inadequacy, anger, and shock while some others have disbelief, depression, and self-blame (Chandramuki, Shastry, & Vranda, 2012).

The subscale overprotection (5.35), Rejection (5.4), permissiveness (6.3), communication (5.4), attitude towards education (5.18), permissiveness (6.3) and home management (6.12) showed that there were highly unfavorable attitudes of mothers in these areas. The results show that hostility (3.97) was the only area where mothers having a favorable attitude and the subscale acceptance (4.2) shows moderately unfavorable attitude of mothers towards care of their intellectually disabled children. This study thus highlights the extent of unfavourable and unhealthy attitudes in the parents because they viewed their children differently and treated them by being overly cautious and by giving them more attention than required. It is also interesting to focus that the parents' effort to be extra-careful can affect the growth and development of children with intellectual disability, as they would not get any opportunities to learn on their own or to be independent in their living skills.

V.CONCLUSION

Mental retardation continues to be growing challenge for the parents of children with mental retardation in specific and to the societies in general worldwide. Parents of children with mental retardation face difficulties and experience stress in management of their children. There is a parental negative attitude towards children with mental retardation which is highly on home management, permissiveness and lowest on hostility. This study recommends the need for improving the attitude of mothers by taking certain measures at special schools and day care centers.

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