

SOCIO-PSYCHOLOGICAL PROBLEMS AND NEEDS OF MENTALLY RETARDED CHILDREN IN DISTRICTS FAISALABAD AND ISLAMABAD, PAKISTAN

T. Aslam, Z. Batool, N. Hashmi and K. Aslam

Department of Rural Sociology, University of Agriculture, Faisalabad
Corresponding author e-mail: batoolazam@hotmail.com

ABSTRACT

God has gifted human beings with six major power of senses, if any one of these is absent or damaged in such a way that it is unable to perform its function, the person became handicapped. A cross sectional study of 120 mentally retarded children of age 6-18 years was conducted in Faisalabad and Islamabad districts by using convenient sampling technique. The purpose was to study the socio-psychological problems and needs of these children. Teachers at center and parents of these children were interviewed through a well structured questionnaire consisting of open ended and close ended questions. Study indicates that majority (79%) of the children belonged to low income families. The symptom of mental retardation was mostly by birth. It has been also observed that disability is a great problem not only for child but also for the family. Their future should be shaped in harmony and cooperation. Their lives should mature as they broaden their perspectives and gain new experience.

Key words: Mentally retardation, socio-psychological factors, needs of mentally retarded children.

INTRODUCTION

Full participation of an individual in the activities of society, is possible only if the interpersonal relationship of the individual and society are in complete harmony with each other. Full participation depends on an individual's social adjustment. Social adjustment is the preparation and adaptation of young people to their occupational and economic status, in such a way that their social and domestic needs are met. As a matter of precaution it may be pointed out that being able body is in itself no criteria for social adjustment (American Association on Mental Retardation, 2002). Able-bodied persons may be misfit. However, in a society comprising of a majority of able bodied, it is far difficult for the handicapped to adjust to the prevailing social system. God has gifted human beings with six major powers of senses, (the sense of sight, hearing, touch, speech, taste and smell). If any of those is absent or is damaged in such a way that it is unable to perform its function, the person became handicapped. All these senses are so closely related with each other that each part is important and essential for keeping the other part working. Some babies are born with special physical needs or conditions such as cerebral palsy, which may deprive them to walk or talk. Some babies are born deaf or blind and some may have ongoing health problems, such as diabetes or sickle cell anemia, which make difficult for them to learn. A person with mental retardation is "one who, from childhood develops consistently at a below average rate and experiences difficulty in learning, social adjustment and economic productivity". The degree of mental retardation a person has affects how much and how quickly he/she

can learn (Coleridge, 2000). Mental Retardation occurs once in every 33 people. There are some types of mental retardation such as, Down syndrome, Autistic Hyper, Active Slow Learners C.P (Cerebral Palsy), A.D.H.D (Attention deficit hyper active disorder). Mental Retardation is not mental illness but it refers to a person's capability to think reason. Mental illness is an emotional disturbance; it is attributed to heredity or genetic factors, pre-natal abnormalities, environmentally induced biological factors, such as brain damage, socio-cultural factors, that is the intellectual and educational level of the family. Unfortunately, mental illness, Mentally Retardation in Pakistan carries such a stigma that to admit its presence in a family is like revealing a shameful secret. As a result, very little is done for retarded children or adults, apart from locking them away. And yet the problem is widely prevalent, and millions of people suffering from it receive no professional attention or care (American Association on Mental Retardation, 2002). Mental retardation is the most challenging problem of childhood. It doesn't only affect the child but also his parents, siblings, and the community. The mentally retarded children are found in every socio-economic class. It affects the rich and the poor, educated and the uneducated, in all races and creeds. In sum, it is a universal phenomenon. Experts have given various reasons as causing mental retardation.

The study aimed to know the structural and behavioral characteristics of the mentally retarded children. Satisfaction of respondents about technical training of the mentally retarded children and parental attitude to them is also presented in this study.

MATERIALS AND METHODS

The universe of the present study constitute to all the children of age 6-18 years enrolled in the mentally retarded centers and schools, which are working for the mentally retarded children in two, districts named Faisalabad and Islamabad. Two centers for mentally retarded children were selected from each district. A sample of 120 respondents (teachers at center) and parents of mentally retarded children) was collected by using convenient sampling technique. They were interviewed through a well structured questionnaire.

RESULTS AND DISCUSSION

The results obtained from data analysis are presented below:

SOCIO-ECONOMIC CHARACTERISTICS

Table 1. Distribution of characteristics of mentally retarded children

Age (Years)	Frequency	Percentage
6- 10	35	29.16
11- 15	60	50.00
16+	25	20.84
Total	120	100.0
Annually Family Income(,000)		
50-100	52	43.33
100-150	43	35.83
150-200	17	14.17
200 & above	8	6.67
Total	120	100.00
Age of Mentally Retardation(years)		
Since Birth	67	55.83
1 – 5	33	27.5
6 – 10	15	12.5
10 and above	5	4.17
Total	120	100.00
Causes of Mental Retardation		
Genetic	16	13.34
Pre-natal	54	45.00
Natal	36	30.00
Post –Natal	14	11.66
Total	120	100.0

The table shows that. Majority belonged to low paid incomes and as a result many of them were in poor position in the society. According to the data presented that the symptom of mental retardation was mostly by birth (55.83%), whereas 27.5% became mentally retarded at the age of 1– 5, while 12.5% caught the disease of mental retardation at the age of 6 – 10 years, and the rest 4.17% faced (when completely conformed) the problem at the age of 10 or above (Table, 1). As depicted in Table

1, 13.34% cases faced the problem of mental retardation genetically. This indicates that the problem of retardation is not only inherited because in some cases other brothers and sisters had not faced the problem of mental retardation. Post natal cause of mental retardation was found in 11.66% cases, 30% cases had natal, while the majority of the cases (45%) had pre- natal cause of mental retardation.

BEHAVIORAL CHARACTERISTICS

Table 2. Distribution of cases with regard to their behavior with their normal friends, inmates with regard to their parent’s attitude and as they consider a burden.

Behavior with normal friends	Frequency	Percentage
Friendly	70	58.33
Normal	35	29.17
Cold	10	8.33
Harsh	5	4.17
Total	120	100.00
Parent’s attitude		
Loving	84	70.00
Harsh	22	18.34
Indifferent	14	11.66
Total	120	100.00
Response		
To a great extent	76	63.33
To some extent	26	21.67
Not at all	18	15.00
Total	120	100.00

Self confidence is very important for a successful life but in case of disability, it becomes more important. Majority of cases (58.33%) were feeling good and have friendly behavior when they were with their normal friends, whereas 29.17% inmates have normal behavior, 8.33% inmates have cold behavior, while only in cases 4.17% feel harsh/ bad behavior with normal friends. It has been investigated that it is because of the lack of confidence. The special children especially mentally retarded children should have the same opportunities as the other normal children had.

A little girl replied, my parents pay me more attention than my other brother and sister. They try to fulfill my desires. The pattern of treatment received by inmates from their parents was very interesting, 70.0% cases declared that the treatment of the parents were loving, while 18.34% of the reported harsh treatment from their parents, and 11.66% received indifferent treatment from their parents.

It was one of the main thrushes of the study to look into the love; affection & sense of belonging which a mentally retarded child get from the family. While

giving the answer of this question 15% cases stated in negative. They told that their parents take care of them as a normal child, 21.67% inmates answered to some extent, whereas 63.33% told that their parents feel burden.

ROLE OF TECHNICAL TRAINING

Table 3. Distribution of contribution of technical training in improving the disability and parental perceptions.

Contribution of technical training	Frequency	Percentage
To a great extent	67	55.84
To some extent	40	33.33
Not at all	13	10.83
Total	120	100.00
Disability creates hinders for child’s future		
To a great extent	53	44.16
To some extent	42	35
Not at all	25	20.84
Total	120	100.00

Non-formal or technical training gives the child a feeling of self reliance. In order to have an idea about the inmate’s training in improving the disability 55.84% of the inmates belief that their technical skill will be helpful in making their future bright, 33.33% of the inmate’s show their interest to some extent, while only 10.83% inmates were not satisfied with the argument that technical training helpful in making the future bright. In a study, Barnartt (2005) reported that differential training effect on the personality of the mentally retarded children.

It has been observed that disability is a great problem not only for child but also for the family. When a disable member of a society tries to use his/ her capabilities, his/her disability often creates problem for him/her. 44.16% parents of inmates thought that their disability is not a problem in their lives as they hope that their inmates will recover this by training to some extent, while 35% inmate’s parents had believe to some extent, whereas 20.84% inmates parents had believe at all on this statement. They think that this disability never been finished, but most of the parents preferred that their inmates can use their capabilities like a normal child.

Conclusion: Mentally retarded children in our society are not considered as helping hands, rather as a burden. More than half of the mentally retarded children belonged to families in lowest income groups. Suffering with mentally retardation during the pre-natal period was common among cases. Most of the children were satisfied with the attitude of friends to them in the socio-cultural norms of society. Majority of the parents were satisfied with the technical training being provided to their mentally retarded children.

REFERENCES

American Association on Mental Retardation (AAMR). (2002). Mental Retardation: Definition, Classification, and Systems of Supports, 10th Edition. Washington, DC: National Information Center for Children and Youth with Disabilities 444 N. Capitol Street N.W., Suite 846, Washington, D.C. 20001.

Coleridge P. (2000). Disability and culture, Asia pacific disability rehabilitation journal vol. (1): 21-38.

Barnartt, S. (2005). Report of the ASA Committee on the Status of Persons with Disabilities (PWD). P: 144.