Chapter - 5

DISCUSSION
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During the last decade, the awareness that the mentally challenged can be given interventions which can bring about changes in the desired direction has led to the establishment of a large number of institutions to cater to this objective. Earlier, institutions were conceived of as places where those having mental pathology would be kept and cared for minimising the pressure on concerned families. Now institutions are not merely places where the mentally challenged pass their time, they are concerned with imparting appropriate skill training and education. It is imperative that the social scientist must contribute in this sphere. In the present context the social scientists must undertake studies which will help to understand what exactly organizations undertaking skill training programmes are doing and whether they are achieving desired result. A realistic picture must be presented and areas in which improvements can be made should be suggested. This is exactly what the present researcher set out to do.

If we observe our finding at a glance, one thing is very clear and that is in most spheres some improvement has occurred in the children undergoing the programme. If we look at parental expectations from the programme, we find that parents have great hopes from the programme. They expect that its benefits will touch upon almost all
spheres of life ranging from acquisition of simple skills essential for sustenance to self dependence and autonomy in terms of vocational and job skills. It is natural for parents to desire an overall improvement in their children. However there are certain areas in which more improvement was observed. The three aspects in which maximum improvement was seen, were self sufficiency, interpersonal skills, academic growth (functional), irrespective of gender and age. These aspects were the ones where best results were seen, most improvement being in academic growth with reference to each of the skills, we find that when talking of improvement, parents refer to the same activity in terms of need for more improvement also. For example in self sufficiency, they pointed out positive achievements in areas like self feeding, ability to take care of activities like personal hygiene, dressing oneself, combing hair, keeping the house clean and doing simple calculation and identification of objects. However, parents, while showing satisfaction desired more improvement in toilet training and personal care, hygiene, understanding about money and time. This was the picture in all activities. For example improvement was seen in interpersonal skills as well as academic growth by many parents but need for improvement was also pointed out.

This is a very important point. In a situation like this, there is no magic formula for absolute transformation. Some of the etiological factors which have led to this conditions are not amenable to modification and therefore place some constraints that cannot be
overcome. However there are many constraints which can be overcome and it is in such areas that we can achieve much. The three areas where maximum improvement was observed by parents were self sufficiency, interpersonal skills and academic growth. This was irrespective of age and gender. We took age as one of the variables with the feeling that those of higher age would be probably be individuals who had undergone a longer period of learning in the institutions. The fact that almost the same picture of improvement and need for improvement was operating leads us to believe that the length of learning period is not linearly related to improvement; the condition of the child determines the extent to which improvement occurs.

If we glanced at the goals considered important by the teachers we find that according to them the goal with highest priority is interpersonal skills in which good conduct and desired behaviours are prominent. This is followed by academic growth, self sufficiency and language acquisition. Again the picture is similar for parents and teachers in the sense that absolute improvement is not visualized, the same activity were improvement observed and it is also the same activity in which need for improvement is indicated. Here the area in which most improvement seen is interpersonal skills, self sufficiency and academic growth, most improvement being in academic growth.

As in the case of parental perceptions, in the case of teachers also, gender is not a distinguishing factors in terms of improvement or non-improvement. There is hardly any differences in each of the disease
groups. Those with mental retardation and other disorders like mental retardation with physical deficits show similar degree of improvement and need for improvement. Cases of autism, Cerebral Palsy and Down Syndrome are very limited in the number but the picture which emerges is the same.

It is true that complete learning in terms of perceived goal has not been observed but behaviours like those relating to self-care, identification of objects and understanding their usage, together with performance of simple calculations are important day to day activities in which even a little mastery reflects better life quality. In the same manner when in interpersonal skills children are able to acquire to some degree good conduct, desired behaviours, ability to interact with and get along with others, even if it is to some degree, it is an important contribution. Teachers also gave priority to almost the same objectives, but they emphasized acquisition of good behaviours more than any other goals. The researcher observed that teachers did not expect the children to achieve mastery in all spheres rather they had a simpler picture of expectations. One reason of this could be their better knowledge and information regarding the group under study and therefore a modest picture of goals and expectation.

An interesting fact which was observed by the investigator was that parents and teachers did not share any common platform from which to operate. Teachers had a particular system of communication and a particular schedule of teaching. When the child went home, and
parents so to say took over charge of the child, they had no idea about the manner in which the teachers use to teach the child. So they expected the child to do home work in the manner the other siblings did and except for being guided by intuition the parents had no guidance as to handling these special child. Thus, two important partners in this venture of special educations, are actually working in isolation. Except for routine monthly meetings between teachers and parents, there was just no communication.

When the researcher decided to visit these institutions, there was a vision and picture that some innovative methods and special techniques would doubtless be found in their intervention and methods. In four of the institutions visited, the methods used for children in normal schools. The few changes that were observed were related to the fact that there were fewer children and therefore more personal attention. The status of the child also elicited a more human responses. By and large the method was instructional method with blackboard, a few charts. Play activity consisted of skipping rope and other simple games which were conducted by the teachers. In one school it was professed that play method is being followed. The researcher found three important activities through which children were taught all skills. These three activities were (i) dancing, (ii) games, (iii) models and charts. The routine instructional method was avoided. Since the play method is considered the most desirable method to be followed when dealing with differently abled children, the researcher felt that it would
be enlightening to compare performance of these children with those going to in institution where play was not used. The assessment of teachers for play and non-play group was compared. Results can be seen in Table 39.

It may be noted that there was no difference between improvement attained by these two groups. In terms of theory this was an unexpected finding but in terms of ground realities seen by the researcher it was not surprising. Except for dance which was a physical activity with rhythm and music, there was nothing attractive or exciting in games and models which were used. Being repetitive and uninteresting, children did not show any enthusiasm towards them. Since teachers were functioning just through instinct and experience, it was not possible to have a better picture. The majority of teachers were not trained to cater to children with special needs and therefore did not know what exactly should done.

Further, the philosophy of play is that it should be based on participation, sense of enjoyment and capturing the child's interest. All these factors can be strengthened with the teachers ingenuity where games can be invented and modified to retain the child's interest. Here play was basically activities that soon become monotonous. Perhaps trained teachers can take care of that aspect in a better way. Trained teachers would also be able to use methods like modelling which are highly useful in such situations.

An important observation made by the researcher was that despite the many short comings in the programme and facilities in the
institutions, an important force which helped to achieve alleviation of problems was the interaction amongst the children themselves. The social climate, the communication amongst themselves, the feeling of shared problems and perception of similarly had probably resulted in a sense of belongingness and healthy competition. This helped them to improve and learn. This point has been made by a large number of researchers. Pierce and Schreibman (1995) demonstrated that with the help of peer implemented Pivotal Response Training (PRT), PRT by modelling, role playing and didactic instruction, autistic children can learn to engage in prolonged interaction with peers, initiating play, concentration and increased engagement in language and joint attention and positive changes in social behaviour with the largest increases in peer related social behaviour. Again, Pierce and Schreibman (1997) studied multiple peer use of pivotal response training social behaviours of classmates with autism and use peer implemented pivotal response training (PRT), modelling, role play and feedback, found that PRT can increase level of social behaviour.

In an ideal skill training programme goals for such children are set not merely as general goals but broken up into short-term goals which teachers set out to achieve within a small time frame. As far as parents are concerned they had no idea of this but even teachers did not visualise any such programme. It is strongly suggested that in order to give the programme a concrete sense of direction, the general goals
should be broken into sub-goals consisting of specific activities. This would give the child feelings of success and achievement when easy subgoals are achieved and be a reinforcement to parents, teachers and child.

In India, catering to the needs of mentally retarded and other such group is a recent phenomena. Therefore number of trained teachers are few. However, if some meetings and sharing of experience amongst teachers of different institutions are conducted, inputs from trained teacher can be utilized by others also.

Although the researcher has a limited exposure to the area and claims no expertise, some suggestions come to the mind which are being put toward in the paragraphs that follow.

**Suggestions to Institutions**

It is imperative that any suggestions that we wish to give should begin with a word of appreciation for the institutions who are doing their work with sense of commitment inspite of a large number of constraints. Some of these constraints are part of infrastructure problems while some are more concerned with training and awareness amongst personnel who are conducting the programme. With regard to infrastructure problems, it was strongly felt that some essential facilities which are related to effective functioning of the programme, were ostensibly missing. Most of the institutions were accommodated in very small buildings. By and large the rooms were unattractive and dingy. Even in school for normal
children it is always an important consideration to have an attractive environ because children feel happy in a lively, conducive atmosphere. Even more so children with deficit need a happy, pleasing environment. Since most of the institutions have a financial problem and can not focus on such things, they did try to compensate in their own way through colourful chart etc. but even objects and toys which children could used were very limited in number. None of the institutions had state-of-the-art equipments to manage certain special conditions. Some of the more affluent institute visited by the investigator (who incidentally did not participate in our study) had such facilities. For example, for management of certain problems faced by spastics and those with physical deficits, many equipment have come up which help in motor and muscle control. The institutions under study had no facility in this regard. There was also insufficient open space were children could not move more freely and participate in games and physical activity. It is therefore suggested that influential persons of that particular society should make efforts to elicit either state support or create a corpus fund through philanthropists and moneyed organizations to meet expenses relating to better infrastructure, the same salary for teachers, suitable equipments and even sponsoring training programme for teachers.

Since teachers are payed very low salary, those with competence training do not usually come to such institutions. As it is, the number of trained teacher is few, so those available with organization
which we visited were in majority not trained but were basically doing duties on the basis their compassion, intutions and experience. In the absence of trained teachers being available, workshops for sharing of experience among teachers should be organized so that vicarious experience can become part of teachers' repertoire.

Thus many important aspects of special educations are not found in this institutions. There is no individual centred programme and students are treated as one homogeneous group rather than person's with special problems and special needs. It is an integral part of skill training programme that each child should be assessed as to present status and potentialional and after appropriate intervention should be evaluated periodically. This is an important to give a clear cut direction to the programme. Since no evaluation as to whether any gains have been achieved or status has been maintained or child has deteriorated is maintained, the whole activity is like journey in the dark. Some sort of evaluatory exercise should regularly conducted even if it is not as intensive as those suggested by various researchers in the area (Sprafkin and Gershaw, 1976, Bricker 1986 and Destafano, Hawe and Horne, 1991).

A basic aspect of education for mentally challenged is an approach that teachers and parents are important partner in this venture. In reality however parents and teacher are working in total isolation from each other. There is hardly any interaction between parents and teachers. Occasionally there is a meeting once a month but no real
sharing of problem is there. Thus parents handle the child in almost the same manner as they handle other siblings, teaching them alphabets in same way. There is no common approach or methodology between teachers and parents, often child becomes confused. The importance of parental participation is succinctly brought out by Brooker & Charlie (2001) who reviewed effectiveness of interventions for the decade 1991-2001 and found that family participation was a condition for improvement.

It is therefore suggested that there should be more interactions between parents and teachers. Since the number of students which each teacher take care of is not large, it is possible to have more interactions and to keep a regular evaluation and record of each student. Incidentally, the researcher has knowledge of many such institutions in Iran, where one healthy practice is followed, namely rewarding those parents who are making appreciable efforts in terms of participation in their children's special education and thus helping this programme to function. This practice can also be encouraged here.

This partnership between teacher and parents can be strengthened if some information and literature is given to parents to guide them in undertaking care of their special child. The society and community are also important for helping the child to adjust ultimately to the situation. Encouraging children in simple vocations and taking their help in activities regarding which they have developed capacity
would help them in self sustenance. The community, therefore should also be involved in this venture.

Another important matter relates to counselling of the parents. In India, it is a mother that is considered to be directly responsible for conditions of offspring. Thus a mother who has given birth to a child with any deficits suffers feeling of guilt, sometimes on her own and sometime because this guilt is compounded by societal reactions particularly from in-laws. This sense of guilt is evident from the fact that it is only the mother and not the father who visit these institutions. and even for picking up the child it is mothers, even if they are working mothers, who do this task. In normal schools, it is usually observed that fathers come to pick up their children. Thus counselling for parents particularly for mother is a very important activity which must be undertaken.

Some educated parents who were Muslims with marriages between close cousins regretted that they had not been aware that such problems in offspring could be accentuated by such marriages. Thus, information dissemination in this regard and marriage counselling through appropriate agencies is advisable.

None of the institutions had a trained psychologist or any expert to take care of the child at physical or neurological front. It is suggested that a trained psychologist be part of the institutions and neurologist. pediatrician should regularly visit the school and attend to the problems of
the child.

The component of vocational training is by and large missing in the programme. For the older children it should definitely be there. It is therefore suggested that institutions should be conscious of not only the present learning but future of the child and contemplate some vocationally biassed activity which the child can undertake.

Suggestions for further research

The researcher felt that certain limitations which are inevitably a part of exploratory research are contained in this present exercise. When the researcher entered into actual research, it was like entering in a new world. What had been studied in books was very different from reality. It was felt that eliciting information in the language and manner which was natural and spontaneous to the parents and others should be used. The researcher makes no apology for this but considering the mind set that we have because of our exposure to the traditional positivistic paradigm many aspects may seem to have limitations if we look at them within the traditional research picture. In actually, they are not limitations but usage of a strategy which is more suited to circumstances. Further the researcher was alert to receive inputs at all levels to enhance in-depth understanding and assimilate such inputs to cogent pictures.

The journey of all knowledge proceeds from general to specific. The next stage would be to bring out clear cut specific informations which would help to evolve a holistic picture or model. Even so, it is the
researchers strong feeling that this phenomena should be studied with an awareness that generalizations and broad conclusions can not be expected.

But studying specific aspects in a more indepth manner should definitely be undertaken. The following research themes appear exciting to the researcher on the basis of her experience in the field.

(i) Studying parental attitudes and modes of reacting to the child. It was observed that some parents used punishment ranging from withdrawal of love-expressions to corporal punishment in handling the child. Some used rewards ranging from expression of approval to giving desired objects and pleasant activities. Parental attitudes would indicate how parents perceive their child who has deficits with regard to other siblings, or how parents perceive the impact of their child's disability on their life and family's concerns. This would be a useful area of study.

(2) It would be fruitful to study specific areas more in-depth. For example, if we take up the area of self-sufficiency, it may be proved as to what aspects of self-sufficiency are more amenable to improvement under what conditions. Small training capsules may then be evolved.

(3) Siblings are also a very important aspect of the psychosocial environment of the child. Their attitudes and perceptions are important for the child's adjustment and should be studied.
(4) A comparative study of institutions actually following innovative methods suited to the target group and those following normal, routine methods should also be undertaken.

The area is vast. Hindsight is wiser than foresight. If the researcher were to undertake this research now, some of the above variables would definitely be included to enrich the informations elicited.