SYNOPSIS

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TITLE OF THE THESIS : EFFECT OF EARLY INTERVENTION ON THE DEVELOPMENT OF MENTALLY RETARDED CHILDREN.

DEGREE : Ph.D.

SUBJECT : Psychology.

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The estimated population of the mentally retarded in India, is about 13 to 18 millions. It has been said that all babies born at a time, at least 5% would turn out to be retarded.

There is now a growing research evidence in Western countries which demonstrated that the earlier remedial training and education can be commenced with mentally retarded children. Intervention designed to prevent or ameliorate developmental retardation among organically handicapped infants have been almost axiomatic despite the lack of convincing scientific evidence for the effectiveness of such efforts.

Early intervention for the preschool retarded subjects is of recent origin in India. Like most human service programmes, demands for resources and documentation of programme impact have increased. There is a lot of controversy regarding the efficacy of early intervention, and compelling questions about ongoing educational, therapeutic and support services continue to appear on this scene. These are e.g. what are the goals of early intervention programme? How effective are they in promoting better functional competence in children with disabilities? What impact do they have on families? Could we prevent mental retardation by early detection, evaluation and intervention? with this as background, the present study has been undertaken to find out the efficacy of early intervention with systematic and scientific approach on development of young mentally retarded children (below the age of six years) in Indian socio-economical & cultural background.

**The Problem** :- The problem under taken for this research was to find out the effect of early intervention on the mentally retarded children. It is generally accepted that the
earliest years of a child's life are the Keystone to future development. The period from birth to five years of age is the most critical because the brain is growing faster in terms of increased brain cell and their network. It is probably at its most plasticity phase. Till is age of five the brain reaches 90% of its adult weight and half of intellectual growth is over.

Early intervention implies a "stepping in" in order to modify action and additional help needed by a child with delayed development. Thus early intervention reflects the belief that earlier is better in order to prevent or remedy or compensate for early developmental disorders.

The Focus :- The main objective of this study is to find out the effect of "Early Intervention" on (1) Development of child's physique, muscular co-ordination and motorskills. (2) Development of good habits and basic skills which are necessary for personal adjustment such as dressing, eating, toileting etc. (3) Development of social skills and manner. (4) Development of emotional maturity. (5) Development of communication skills. (6) Development of cognitive skills. (7) Emotional support to the parents through family counselling. (8) Prevention approach through genetic counselling.

HYPOTHESIS :-

1) Early detection, early assessment and early intervention helps child to gain optimal growth and development which ultimately increases his mental age (M.A.) and developmental quotient (D.Q.) despite the varied degree of brain insult.

2) Early intervention increase the child's social age (S.A.) and social quotient (S.Q.) which helps him in the normalisation and increasing social adaptabilities.

3) Early intervention with systematic and scientific approach helps to improve the child's motor, sensory,
cognitive, communications, and vocational skills.

4) Early intervention offers psycho-emotional supports to the parents and creates more confidence in working with and handling the child.

5) The development of the child with severe physical disability can be facilitated through alterations and physical environment and child's physical position.

6) Early intervention preceded by early detection evaluation helps to prevent the severity of the problem and reoccurrence of such child in the family.

The Framework: The sample of the study consisted of 50 mentally retarded children below the age of 6 years selected from the "Centres for Research in Mental Retardation" run by "Vallabhdas Dagara Indian Society for Mentally Retarded". The study has been focused on the effect of early intervention on the development of 25 mentally retarded and their comparison with those without intervention. Initial assessment was based on different standardised tests such as The Bayley Scale of Infant Development, Kamath Test, Vineland Social Maturity Scale (VSMS), Madras Developmental Programming System (MDPS). Appropriate intervention programme was designed for 25 children of the experimental group by multidisciplinary team of the centre. Different therapies were given to the children of the experimental group in individual as well as in a group setting according to his need for the period of 2 years. Parents were also trained to carry out the same programme at home. The same tests were used for re-evaluation of children of the experimental and control group after one year and at the end of 2 years of period. The mean values of the score obtained on the various tests were used for comparison the data. The student's \( t \) test was used for statistical analysis.

The study is depicted in eight chapters.

Chapter 1 - This is introductory chapter justifying the problem chosen and also focuses on the mental retardation in general. The subtopics included in this Chapters are :-

**Chapter II** - This chapter highlights "Early Intervention."
The subtopics covered are:
(1) What is early intervention? How early? Why?
(2) Definition of early intervention
(3) Historical perspectives on early childhood special education.
(4) The history of early intervention in India.
(5) Approaches to early intervention.

**Chapter III** - Review of literature on the subject is situated in this chapter. Early childhood intervention is a rapidly growing field in the Western more developed countries. Most of the research involves children with delayed development from disadvantaged economic circumstances. The effect on specific and established handicapped conditions are less clear and controversial. Research review on early intervention program for children with special needs along with Indian scenario is also presented in this chapter.

**Chapter IV** - This chapter indicates on the aims and objective and hypothesis of the present study.

**Chapter V** - This chapter discusses the methods, tools and design of the programme. Different tables are presented describing the etiological factor, age/sex distribution, degree of retardation, associated problems of the mentally retarded subjects under study. A brief introduction to the evaluation tests used in the present study are highlighted. Training Programme is illustrated with photographs. Common problems of these children in motor, cognitive, social language and self-care areas are demonstrated. Different therapies to overcome these problems are discussed stressing their importance and efficacy.

**Chapter VI** - This chapter consists of the "Observation" of the present study. The findings of the pre and post results in the experimental and control group as well as their comparison are illustrated in the form of graphs and tables.
As the sample of the present study is heterogeneous, few subgroups are analyzed separately to study different variations, such as Down Syndrome group, Cerebral Palsy group, Profoundly retarded quadriplegic spastic children's group etc.

Chapter VII: This chapter includes "discussion" in which the findings of present study are discussed with reference to the published literature. Important points emerged from the observation were discussed. Analysis of the data in the end was in confirmation with the hypothesis. The overall results of the present study indicated that the majority of children in the present study made progress. This could be contributed to the fact that during the critical developing period, mentally retarded children also make progress like normal children in all aspects but at their own slow progress. However children of the experimental group, due to early training reflected the better outcome in mental (P=0.001), and social development (P=0.001) when compared to the children who received no intervention (i.e. Control group).

The significant increase in different 18 years of the Madras Developmental Programming System of the experimental compared to the control group offered the additional evidence of the implementation of well structured curriculum in the experimental group.

It was noteworthy feature that the progress of the children of the experimental group was faster during first year, and slowed down in the second year. The contributing factor found were the early environmental exposure, and integration of the guided efforts of the therapist.

Despite the moderated increase in social age and mental age of the control group, a decline was observed in their developmental quotient and social quotient. Two contradictory cases are illustrated in this chapter explaining the reasons for success and failure of early intervention therapy. The positive promising effect of family counselling and genetic Counselling giving the examples of cases who underwent these counselling are also discussed.
Chapter VIII: This is the Concluding chapter of the thesis. It provides a glimpse of the whole study, sketching a brief review of the findings. In the end offers recommendation emerged from this study for future research and practical services.

BIBLIOGRAPHY: Relevant references are given at the end of each chapter. Additional references are quoted here.

APPENDICES:  
1) Results of the observation and evaluation of children under study.
2) Case history form.
3) Bayley Scale Of Infant Development.
4) Kamath Test.
5) Vineland Social Maturity Scale.
7) Model of "Early Intervention Unit" to give guidelines to start such centres.

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