CHAPTER IV

AIMS AND OBJECTIVES
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Today there is a heightened national consciousness and awareness of both the needs and the potential of children whose development may be impaired as a result of handicapped condition.

There have been numerous reviews on early intervention services in the developed countries. Indeed most of the reviews focused on programmes for socio-economically disadvantaged but limited number of studies have been conducted on the mentally handicapped children. Critical analysis of such published research from abroad on the efficacy of early intervention services for children with disabilities has revealed important conceptual and methodological limitations. Different approaches, therapy methods and goals set also manifest discrepancies due to subjectivity assessment of the problem posed in addition to variations in individuals and their deficits.

Claims of interventionists still range from modest improvement in the functioning of the retarded to promising near normality, however controversy still exists and compelling questions about ongoing educational, therapeutic and support services continue to appear on this scene such as what are the goals of early intervention programmes? How effective are they in promoting better functional competence in children with disabilities? What impact do they have on families?

As mentioned in the previous chapter, "The History of Early Intervention in India" the services of "Early Intervention for the Preschool Mentally Retarded" subjects are of recent origin in India. The centers for
such service programmes are very few and at the beginning level. In addition such services are available in only large cities. It is well-known that widespread occurrence of mental retardation regardless of caste, religion and social-economic status is observed all over the world and same applies to India. Hence there is urgent need not only for public awareness or for the positive steps in prevention and remediation but also for systematic scientific studies on the problem prevalent in our socio-cultural economic background which is so different from other western countries.

The present research study is thus based on the following assumptions:

1. Rate of child's growth and development is most rapid in early years of life. The 50% of the intellectual development of child is completed by the age of 4 - 6 years. Therefore, maximum stimulating experience is provided to child in early life, it may help him to gain optimum growth and development despite the varied degree of brain insult.

2. Appropriate early intervention and the right approaches of training to a mentally retarded child may accelerate the process of social-adaptive normalization.

3. If the problem or disability of the child is identified earlier, the degree of severity occurring later in the life can be reduced.

4. Every mentally retarded child, similar to the normal child, can learn and develop more optimally
in a learning environment which he is very often deprived of.

5. The disabled children's development can be facilitated through alterations in physical environment and child's physical position.

6. A psychological recovery from the trauma of having a retarded child can be enhanced by a planned programme of support and the counselling which indirectly will further help in development of disabled child.

The main objective of this study which is based on the above assumptions is therefore to study the effect of "Early Intervention" in a well-planned situation based on scientific approach of assessment evaluation and therapy.

1. Development of child's physique, muscular coordination and motor skills.

2. Development of good habits and basic skills which are necessary for personal adjustment such as dressing, eating, toilet training etc.

3. Development of social skills and manners.


5. Development of communication skills.

6. Development of cognitive skills e.g. curiosity, imagination, problem solving, etc.
7. Emotional support to the parents, through family counselling.

8. Prevention approach through genetic counselling.

**HYPOTHESIS**

In order to make the objectives of the present study more clear, the following hypothesis is formulated.

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

2. Early intervention increases the child's social age and social quotient which helps him in normalization and in increasing social adaptabilities.

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

4. Early intervention offers psycho-emotional support 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 alternation in physical environment and child's physical position.