Chapter Twelve

CONCLUSION

The emergence of the present research focus was based on certain psycho-social implications of the phenomenon of mental retardation. The problem of mental retardation is a profound one with a minimum availability of special training or intervention programmes for the retardates. The need to understand the dynamics or variables operative within the family milieu of an E.M.R. child is crucial as the family operates as a primary intervention agency for (a) supplementing skills within a school going retardate, (b) maintaining and reinforcing skills within a retardate who has left the intervention programmes influences and (c) educating and inculcating skills within a non-school going retardate.

The present research focus was on the identification and analysis of variables operative within the family milieu of an E.M.R. child functioning in a special educative programmes and an E.M.R. child who has left the school and is functioning outside the purview of the special school. For such a research it would be appropriate to conduct a longitudinal study, incorporating an analysis of families of a group of E.M.R. children attending a special school, and then reassessing the same families for their maintenance of skills and vocational competence, within the retardate, after the retardate has passed out
of the school. Such a research paradigm would have been too time consuming. Hence, a cross sectional study was developed in two phases to suit the research aim.

The research at phase I involved a time phased classification of school going E.M.R. children into criterion groups of improvers and deteriorators, based on the level of cognitive, affective and psycho-social functioning, as assessed by the school personnel and the researcher. This was followed by an attempt to relate the retardates improvement or deterioration to the variables operative within the family milieu of the retardate, and the retardate's perceptual framework towards his family, school and self.

Phase II of the cross-sectional study involved a classification of E.M.R. children who had left the special school 3/4 years ago into criterion groups of improvers and deteriorators, based on the assessment of the family. The research aim was to relate the retardates progress or deterioration to the variables operative in the efficacy of the family as a maintenance agency of skills inculcated within the retardate, and the level of vocational and rehabilitational competence achieved by the retardate.

The following conclusions arrived at in the initial phase of the research programmes were as follows: The identification of the family dynamisms of the two criterion
groups and their consequent comparison, revealed marked differences in the family dynamics of the two groups.

(a) The improver's family dynamics were characterized by a positive goal oriented behaviour towards the psycho-social growth and rehabilitation of the retardate. The family milieu provided was perceived by the retardates as a stimulating, caring, conducive environment for the E.M.R. child. The other variables operative within the family milieu were a high marital integration level of the parents, the sibling attitudes towards their retarded sibling were favourable and nurturant in nature, the pooling of the psychological and physical resources of the family to cope effectively with the retardate, an allowance of social participation for the retardate to develop social adjusitive skills and an unified attempt of the family to supervise and reinforce the retardate's inculcated skills and cause a further induction of adequate adjusitive and cognitive skills.

(b) The improving retardates perceived the family milieu as a conducive, favourable milieu in which they were able to maximise their growth potentials. They also reported favourable interaction patterns with the special school teachers and the peer group. They expressed satisfaction at the school curricula
and did not report any difficulties in coping up with the skill induction programme or the curricula within the school. The improvers displayed minimal descriptive behaviour or patterns of uneasiness within the classroom behaviour. Regarding the retardate's perceptions towards his self, the improvers however reported certain basic inadequacies and a high anxiety element within their self. But these dynamisms did not hamper their school progress or adjustment factors. They displayed a keen interest in the school inculcation programme and were able to benefit better as the inculcation programme was also reinforced within the same milieu.

(c) The deteriorator's family dynamics were characterized by a lack of goal directed behaviour regarding the retardate's rehabilitation, the supervision of the retardates basic adjustment and cognitive skills and inculcating adequate social competence in the retardate to function effectively within the school, family or the social community. The siblings of this group were hostile and indifferent to the retardate's needs and often engaged in bullying behaviour towards the vulnerable retardate. The family unit, apart from sending the retardate to the special school, did not undertake any further training or skill induction measures for the retardate. The
Family dynamics assessed also displayed interpersonal distortions within the family. These were a low marital integration level, sibling parent relation distortions, sibling retardate relations grossly unfavourable. The family as a unit failed to unify in its attempts for the retardate's rehabilitation.

(d) The deteriorators perceived the school and family milieu as hostile and as a threat to their basic equilibrium. They displayed antagonism towards the parents and teachers and reported being subject to sibling and peer bullying behaviour. They reported severe inadequacies within their selves, which disallowed effective social participation, the ability to speak up in class, and prevalence of feelings of continued threat from the environment, they also reported a lack of familial supervision of skills inculcated in school, which disallowed them from functioning at par with the improvers.

An analysis of the family dynamisms of the two criterion groups reveals vast differences which probably account for the retardate's eventual progress or deterioration. The second phase of the research programme afforded the following conclusions:
The major function of the special intervention programme is to provide the E.M.R. child with certain psychological and adjutitive supports to maintain themselves as self sufficient individuals in society. A constant school enrichment and stimulation is crucial for the retardate skills and maintain the mastered skills. For the maintenance of these skills the retardate requires a continuous reinforcing agency. In cases where the retardate finishes his school tenure and re-enters the family fold it is an expected function of the family to maintain the skills of the retardate and inculcate further adjutitive skills within him. It is also the critical function of the family to seek out vocational avenues for the retardate, so that the E.M.R. child develops a certain level of rehabilitative and vocational competence. The present research programme displayed a rather unfavourable trend. 46 retardates out of the sample of 65 retardates, in the follow up research programme displayed distinct forms of deteriorated functioning. These E.M.R. children did not attain any level of vocational and rehabilitative competence.

This trend of results holds a depressive note. Taking the results as a criterion framework, it is indeed disheartening to note that a majority of the E.M.R. sample
after attending a special intervention programme, did not display any improvement or any further inculcations of skills after leaving the school milieu.

This trend of results implies a wastage of the special intervention programme. This is indeed a serious problem as there is only a minimal availability of such training programmes. The results also imply a failure of the family unit to realise its responsibility in the supportive rehabilitation of the retarded.

The fact that emerges from the present research programme is that favourable family dynamics are significant in the psycho-social growth, rehabilitation and achievement of vocational competence within the E.M.R. child. The emphasis then has to be on the education and counselling of families in order to make them develop dynamics which would be favourable for the growth of a mentally retarded child.

A Proposed Extension of the Study

Based on the insight gained during the present research programme certain research extensions are proposed:

(a) The questionnaires developed should be enlarged and critically reassessed to further the inclusion of
dimensions which are crucial in the understanding of the variables and dynamisms operative within the interactional facets of the family of the E.H.R. child and the attitudinal framework of the retardate.

(b) The variables and dynamisms operative within the school and family milieu and the retardate's attitudinal framework which determine the E.H.R. child's cognitive and psycho-social deterioration must be assessed in greater depth. An understanding of these principles would generate improved counselling measures to be meted out to the families of the retardates and improved conditions within the special school related to the retardate's unique needs, anxieties and securities.

(c) To test the efficacy of the counselling principles developed for the families of the E.H.R. children, the following research paradigm must be implemented. A reassessment of the retardate's improvement or deterioration factors and the variables operative within the family environment should be undertaken after a vigorous implementation of the counselling techniques.

(d) The research programme should encompass a critique of other special schools and the assessment of the progress and non-progress of the wards to facilitate
a comparative analysis of different school milieux.

(e) The research programme should be implemented on a sample of non-school going retardates so that the positive/negative effects of the special school are eliminated and the crucial role of the family is highlighted. This point is very critical as approximately 95% of the retarded population within our society are not reached by any special school intervention programme.

(f) Longitudinal follow up research programmes for the E.M.R. children to assess their eventual rehabilitative and vocational competence present a big research gap. Further follow up programmes should be implemented and the E.M.R. children should be assessed after long durations of having passed out from the intervention programmes. These research programmes would allow a feedback of the efficacy of the intervention programmes in providing vocational rehabilitation to the E.M.R. children.