CHAPTER-V
FINDINGS AND CONCLUSION

5.1. Introduction:

This chapter presents findings of the study, a brief description of the study, summary of the study, and the investigator has attempt to give an account of suggestions for further studies in this field. To observe the major findings in a research is very important. Because, these findings will take a particular decision in the problem.

5.2. Statement of the study:

“A critical study of Mentally Retarded Children with special reference to four institutes of Guwahati city –Assam”

5.3. Objectives of the study:

The study was done with the following objectives:

- To study about the different causes of mental retardation of children.
- To find out the various problems of mentally retarded children at different level.
- To study about the preventive approach of mental retardation of children.
- To study about education and training of mentally retarded children at different level of retardation.
- To study about the role of parents, teachers, society and institutions in general which can play a vital role in order to improve the environment of the mentally retarded children.
5. 4. Hypothesis of the Problem:

The following hypotheses were formulated for the present study:

1. There are significant causes of mental retardation arising from biological and psychosocial factors.
2. There are various existing problems of mentally retarded children at different level.
3. There are some significant remedies of mental retardation of children.
4. There are some significant provisions of education and training for mentally retarded children at different level.
5. The role of parents, teachers, society and institutions in order to improve the overall environment of mentally retarded Children.

5.5. Sample of the Study:

In the present study the samples were:

• 120 mentally retarded children, ages ranging from 6-18 years, including mild, moderate, severe & profound retarded children of four non-government institutions of Guwahati city of Assam.
• 60 parents of mentally retarded children.
• 20 teachers including coordinator of above stated four institutions.

5.6. Method of the Study:

For the purpose of the present study, Descriptive Survey approach method was selected as it seems to be appropriate to accomplish the objectives of the study.

5.7. Tools of the Study:

In gathering the data relevant to the study, the following instructions or tools were mainly used: interview schedule (self-made by the investigator), observation, case study and discussion method was also used.
5.8. Findings of the Study:

Based on the data analysis, the major findings of the study can be stated regarding sample characteristics as follows:

- Most mentally retarded children were Hindus.
- Out of 60 parents, majority of parents (27%) have higher school level education.
- About 23% of parents were govt. service.
- The large no of parents (33%) had monthly income in the range from Rs.2936-4893.
- Most of the pregnant mother (47%) were over aged pregnancy.
- Most of children were from (70%) nuclear family.
- Out of 60 cases, 10% cases were due to prenatal causes of MR of children.
- 3.3% prenatal cases of mental retardation were Hypertension.
- Other 3.3% cases of mental retardation were nutritional disorder.
- Out of 60 cases, 20% of cases of MR were due to natal & neonatal factors.
- Out of 20% neonatal cases, 7% cases of MR were low birth weight (below 2.5 kg).
- Out of 60 cases, 23.3% cases of mental retardation were due to postnatal factors.
- Out of 23.3% of postnatal factors, 8.3% of cases of mental retardation were caused by nutritional disorder.
- Out of 60 cases of mental retardation, 30% cases were due to psycho-social factors of mental retardation.
- The prime psychosocial causes of mental retardation were poor economic condition that were 13.3% of cases.
- Out of 60 cases of mental retardation, only 3.3% cases were hereditary caused.
- Out of 60 cases, 5% cases of mental retardation were caused by accident.
- Out of 60 cases, 5% cases of mental retardation were unknown caused.
- Out of 60 cases of mental retardation, only 3.3% of cases were other problems of Mental retardation that comprised over religious belief and superstitious belief.
- 75% of the mother delivered the baby in the hospital.
- Out of 120 mentally retarded children, 35% of mentally retarded children had motor development Problems.
• Out of 120 MRC, 75% mentally retarded children had behavioural problem.
• 68.33% cases of mentally retarded children had academic problem.
• 51.66% of mentally retarded children had suffered from self help skills problems.
• 48% of mentally retarded children had poor attention problem.
• Other 48% of mentally retarded children had the problem of poor memory.
• 33% of mentally retarded children were unable to properly adjust social interaction in family, peers and others.
• 25% of mentally retarded children had revealed negativism.
• 21% of mentally retarded children had speech and communication problem that could not express and communicate properly with their peer groups and others.
• 18.33% of mentally retarded children were accompanied with the physical problems.
• Out of total 75% behavioural problems, 16% mild MRC had some such problems.

The major complain revealed hyperactivity and aggressive behaviour.
• Only 3% cases of mild mentally retarded children had self help skills problems.
• The major problems of mild MRC had academic problem (29%).
• The major 40% of moderate MRC had the problems of negativism.
• 90% of severe mentally retarded children had the problem of self help skills.
• 81% of severe mentally retarded children had speech and communication problem.

Discussion

From the background of the parents, it ensure that there is no significant difference between caste and communities, educational level of parents, religion, types of family, income of the family, occupation of the parents and such other aspects in regards of mentally retarded
children. All the parents are from different caste and communities, educational levels, religion, family background, occupation and income.

The study also shows that the various causes are responsible for mental retardation of children. In recent time, the needful efforts have been made by the government for changing the attitude among the pregnant women, regarding the size of family, taking nutritional food and other care during pregnancy and place of delivery etc., but not yet fully successful. The study revealed that only 75% of pregnant women were brought to the hospital for their delivery. Otherwise 10% cases were the prenatal causes and 20% cases were natal & neonatal causes are responsible for mental retardation of children. In spite of the vigorous health care facilities for pregnant women and their children, the children’s mental disabilities have not been limited till now. It increases day to day in our society.

The present study highlights that 30% of psychosocial causes were responsible for mental retardation of children. These causes comprised broken home, inadequate relationship of the family members, aggressive nature of parents, depression of children, lack of affection, and poor economic condition.

Persha A.J. Rao VRPS (2003) state several psychosocial factors such as psychological trauma, impoverished environment, low socioeconomic status and certain cultural influences on child rearing were identified to be detrimental to development, leading to intellectual disability.

Upadhyay Shambhu & Singh Anju (2009) pointed out that the level of psycho-social problems faced by the parents of mentally retarded children increases with the level of mental retardation of the child. Parents of moderately related children registered more problems, in all aspects, compared with parents having mildly retarded children. The parents of both retarded children expressed fulfillment of different needs. The mildly retarded parents’ needs were more of preventive and adjustment nature where as parents of moderately children were more concerned with life long adjustment and financial security, including government help, of their children.
Singhi, P.D., Goyal, L., Pershad, D., Singhi, S., and Walia, B.N.S. (1990) also state that families with disabled children perceived greater financial stress, frequent disruption of the family routine and leisure, poor social interaction, and ill effects on their physical and mental health as compared to families of control children. The overall social burden scores were significantly higher in both the groups with physically (PD) and mentally disabled (MD) group with disabled children as compared to controls (mean score PD 17.8, MR 14.6, C 0.72, P < .001), and showed a significant inverse correlation with the socio-economic and educational status of parents.

In the earlier discussion, the various causes of mental retardation of children have been discussed as well as the different problems faced by the mentally retarded children in different levels. To protect these causes of mental retardation of children all the preventive measures should be taken by the women from pre-natal period of pregnancy to natal & neonatal period of delivery. The physical and mental health of a baby depends upon the mothers’ health during the pregnancy period, so it is utmost important to obtain a general health check-up should be done at least six months before her pregnancy. The researcher had made a moral effort to find out some preventive measures through certain precautions and adaptive care at different periods of pregnancy of the women. These measures should be applied carefully, so that the mother can give birth a child with sound health and mind. In fact, inadequate health care facilities, unhealthy prenatal care, and the dangers of poor nutrition and alcohol assumptions during pregnancy period etc. are very harmful for the child for both physical and mental health. Poor nutrition during pregnancy causes weakness and anemia for mother and increases the risk of her dying during or after the birth of the child. It is also a cause of miscarriage, or the baby being born dead, too small, mental slowness or brain defects in babies. To prevent malnutrition, pregnant women should take nutritious food. Therefore, pregnant mother should go for regular check-up.

Over-age pregnancy may cause mental retardation among the children especially after 34-38 years of age. If mother is conscious about the probable risk of mental retardation at over aged pregnancy, the increasing rate of the problems of mental retardation can be minimized.
David Werner (2006) states that after 35 ages, there is more chance that a mother will have a child with defects. Mongolism or Down’s disease, which looks somewhat like cretinism, is especially common in babies of older mothers.

Therefore, Poor nutrition is the most common cause of the health problems in children as failure to grow normally, slowness in walking, talking, or thinking, fits or convulsions in small children, anxiety, and various nerve or mental problems, frequent infection, etc. Malnutrition can be prevented or treated by eating a balance of nutritious food and by eating enough. For babies, breast milk is the best complete food for 6 months. After 6 months the baby should begin to get her nutritious food in addition to breast milk. However, children should give enough body-building and protective foods like milk, egg, meat, fish, beans, fruits and vegetables and should give the child frequent meals.

Children should be given the different vaccinations as per the enclosed National Immunization Schedule. Because it protect children against many of the most dangerous diseases of childhood that affect mental health as whooping cough, diphtheria, tetanus, polio, measles and tuberculosis, and neonatal tetanus.

The government of Assam has been introduced some vigorous health care program for the sake of mother and the child. The society should be aware of it and come forward to share these facilities with their active cooperation of the govt. programs. In addition to these the family members should also extend full cooperation to create a suitable good and sweet atmospheric condition for the pregnant women, so that a mother can give birth a child with physically and mentally soundness.

Besides to prevent the factors of mental retardation, the following program on maternal and child health care may be developed at different levels in collaboration of the State and Central Government. The NGOs and other voluntary organization should be involved in this program to control the prenatal, natal & neonatal, and also postnatal causes of mental retardation of children.
The study also reveals that mentally retarded children more or less suffer from various problems. These problems can be improved by the special education and proper training. Provision for special education and training is must for mentally retarded children at different levels of their mental retardation. It is necessary to make separate arrangement for the education of mental retardation. Generally IQ of MRC has very low. So, a great care should be taken while teaching the mentally retarded children. The education of these children differs a lot from that of normal children. Their syllabus has to include self-dependence, etiquettes, conversation, everyday activities etc. While chalkling out their syllabus their level of IQ and behavioral problems have to be considered. Mentally retarded children need to go to special school like other children.

By the adoption of some suitable techniques they can be well trained and made fit for leading near normal life. They should be given sufficient time to teach every step. Play way is the best method for teaching of mentally retarded children. Training in adaptive skills may be possible through the medium of play and music. But training should be regular and systematic.

Mentally retarded children should be taught good habits of cleanliness, pre-social habits like sharing, cooperating with other children, respecting others right participating in group activities, etc. Therefore they should be given vocational training, such as clay modeling, candle making, paper bag making, stitching small items of handicraft, chalk making, Knitting and embroidery, gardening, catering, etc. as far as possible for developing skills that will help the child to live a successful life in future.

Recreational activities such as arrange the picnics to local historical places, park, zoo, etc as possible at every month. However magic show, dress competition, and drawing competition and other cultural programmes should be organized to inculcate social skills and feelings of self-importance. So, special schools should be established by Govt. and Non-Govt. Organizations (NGO’s) for mentally retarded children that will be provided all facilities to lead independent, successful lives through special education and vocational training. The special schools should have equipments with adequate and attractive learning materials play materials, playground and flower garden, etc. Training should be provided such areas in language and communication.
developing; perceptual motor skills; personal and social skills; basic reading, writing, and simple calculation.

Mentally retarded children always are lack of social skills. They are not able to adjust with their peer, family members and the other individuals of our society. In this regard, certain instructional methods such as, group counseling, grouping the retarded with popular children, vocational counseling, etc are appropriate skills to improve social skills of educable and trainable group of mentally retarded children. Therefore, the social reinforcement techniques can be used for all levels of retardation and in all environments: home, school or institutions etc.

However, study found that one of the major problems of mentally retarded children is difficulty to learn and memorize the things. Through the presentation of materials using concrete objects to improve both learning and memory of MRC followed by pictorial and symbolic material presentation. On the other hand, the severe mentally retarded children need extra care for improvement of their problems. Parental support is a vital need to ensure that infant stimulation. For this type of children, programmes emphasizing SHS, language acquisition, feeding, habit of toileting, and positive socialization, are provided.

At the end of the discussion about the teaching of MRC it can be said that teachers should have the attitude of helpfulness, cooperative, patience, kindhearted, responsibilities, punctual and friendly for their children. They should devote their time and commitment for the development and welfare for these mentally retarded children. The teachers also play a vital role in the classroom. Teachers should follow different methods for learning including the audio-visual method, play-way method etc. The mentally retarded children to be taught by them the usage of good words and expression in regular use, handling of books and other materials properly. Playing games, musical instruments etc in a well equipped and well decorated separate classroom. By the adoption of suitable techniques these children can be properly trained up and made them fit for leading a near normal life. Special education is very essential for disable children to develop in learning and adaptive behavior. All the behavior of disable children can be developed through special education with the help of parents and teachers (Bora Aruna Prabha 2011).
Besides, the role played by the teachers in the classroom, parents, the society, NGOs and other voluntary organization vital role in improving the mental status of the retarded children. Among these the family has the great impact on the development of personality of the child. Therefore, family atmosphere should be good so that there is good cooperation, love and affection, and understanding etc. among the family members. It’s notable that a good home can only take part in the preventive care for the problems of MRC. Parents can also make significant change in the behaviour of mentally retarded children. Parents should give an extra share of love, care and concern to them so that they can live in touch with other members of the family and with other situations of life.

In fact, such types of institutions are very important, helpful and needful for the improvement and development of mentally retarded children. Therefore, such type of institutions should establish in our society. Therefore, from the study it is cleared that all parents of mentally retarded children want to develop their children’s mental behaviour with the help of special education and appropriate training. They need parents support in every step.

The NGOs have a significant role in the provision of services for persons with disabilities. Government should take care policy making, planning, implementation, monitoring. At present, NGOs are able to get for running schools for MRC receive recurring Grant-in Aid from Social Welfare Department. Because, the various schemes have implemented under this department. One of the significant schemes is ICDS scheme which is an outcome of coordinated work from different departments to promote child development. Under this scheme various services provisions are there like Supplementary nutrition, Immunization, Health check ups, Referral services, Nutrition and health education, and Non-formal preschool education. At present there are 219 ICDS projects in Assam, out of which 196 projects are operational. So, it can be expected that the proper implementation and full utilization of these various schemes adopted by the government through the social welfare department will be helpful for child development and pregnant mothers. At presents we are happy to see that gradually the spread of education and medical facilities goes to the rural areas.
5.9. Conclusion of the Study:

These findings highlight that the main causes of mental retardation of children in the area of the study are psychosocial problems faced by the parents of MRC. It is found that mostly mental retardation depends upon to psychosocial problem. The study found that LBW is the main cause of MR of children. Malnutrition of children is the major problem of mental retardation founded by the present study. Study also found that aggressive nature of parents has highly influenced the children’s mental health that leads to mental retardation of children. Therefore, aged pregnancy is the main cause of MRC founded by this study.

In this study it is found that the behavioural problems are the main problems of MRC. It is seen that mentally retarded children have SHS problems, academic problems, speech and communication problem, poor memory and the problems of negativism.

5.10. Summary of the Study:

Mental retardation refers to significantly sub average intellectual functioning resulting in or associated with impairments in adaptive behavior and manifested during the developmental period. Mentally retarded children are deviate from the normal children of their negative side in mental dimensions. A mentally retarded child must have a below- average IQ and difficulty with functioning. They have difficulty in changing their way of functioning appropriate to the various situations in every day life.

Mental retardation of children is a great problem that affects the children before the age of 18 years. This problem is arising from various factors i.e. prenatal factors, natal & neonatal factors, post natal factors, psychosocial factors, accident, hereditary and other several problems.

There are so many problems of mentally retarded children under different domains as motor development problem, behavioral problem, problems of SHSs, academic, speech & communication, poor attention, poor memory etc.
Therefore, through right education and training it is possible to overcome many of these challenges and allow a child to make the transition into adulthood. Therefore, they need proper care, attention and protection from the community. A preventive approach to mental retardation of children is public education has to be taught, it will have some distinct positive affect.

It is fully noticed that we are often getting the children with mental retardation in our society. Although mentally retarded children is increasing widespread day to day, they are poorly understood by most of parents and society. So study on children with mental retardation is a vital issue in the context of present society.

Keeping in view, the problem arises in our society regarding mental retardation of children this study is taken up. The objectives of the present study were:

- To study about the different causes of mental retardation of children.
- To find out the various problems of mentally retarded children at different level.
- To study about the preventive approach of mental retardation of children.
- To study about education and training of mentally retarded children at different level of retardation.
- To study about the role of parents, teachers, society and institutions in general which can play a vital role in order to improve the environment of the mentally retarded children.

In order to provide background information to the present study, literature review was done particularly focusing on the characteristics of mentally retarded children, causes of mental retardation, problems of mentally retarded children, levels of mental retardation, and mentally retarded children and the family.

To accomplish the objectives of the study, the descriptive method was selected. The sample selection was done by simple random sampling technique. The sample were 120 mentally retarded children up to age of 18 years of four Non-Govt. institutions of mentally retarded children of Guwahati city of Assam, 60 parents of mentally retarded children and 20 teachers.
The data were collected by the adoption of interview schedule, observation techniques, questionnaire and intensive case study method. The data analysis is done by descriptive statistics.

The study result indicated that most of mentally retarded children belonged to the Hindus, large number of parents (33%) had monthly income in the range from 2936-4893, and most of the pregnant mothers were over aged and majority of children were coming from nuclear family. The study also found that prenatal factor, natal and neonatal factor, post natal and psychosocial factor, accident, hereditary cause and others causes were responsible for mental retardation of children. Study find out that prenatal causes of mental retardation were 10%, neonatal & natal causes were 20%, post natal causes were 23.3%, psychosocial problems were 30%, hereditary cause 3.3%, accident 5%, 5% unknown causes and 3.3% other causes of mental retardation of the children. Among these factors, the majority 30% of cases were highly affected by the psychosocial causes of mental retardation of children. This problem includes broken home, inadequate relationship of the family, aggressive nature of parents, depression of children, lack of affection and poor economic condition. Most of these, poor economic condition was the main psychosocial cause of mental retardation. Hence it is clear that higher incidence of mental retardation take place due to psychosocial problems.

After knowing the causes of mental retardation of children, it can be minimized through certain preventive care at prenatal, postnatal, natal and neonatal period. Stress should be given on good prenatal care in this regard. Pregnant women should have adequate consumption of food to maintain good nutrition of pregnancy. Besides, to prevent causative factors of mental retardation of children some program on maternal and child health care may be developed at different levels in collaboration of the State and Central Government. The NGOs should be involved in this program to control the prenatal, natal & neonatal and also post natal causes of mental retardation.

Due to these causes cited above the mentally retarded children face with different problems including their motor development problem, behavioural problem, social interaction problem, problems of poor attention, and problems of SHSs, physical problem, speech & communication problems, academic problem, poor memory and also problems of negativism. Among these behavioral (75%) and academic (68.33%) problems were most among these
children. Study also revealed that the major problems of mild and moderate mentally retarded children were academic problem. Otherwise they had no any motor development problems. Almost all severe mentally retarded children had the problems of self help skills (90%).

These problems can be improved through special education and proper training. Mentally retarded children can not read and write as normal children but they can do well in school through the individualized help. They are slow in learning therefore the teacher can adopt specific teaching methods and techniques for delivering education to them. For teaching every teacher must keep in mind the level of mental retardation at first. Based on the retardation teacher should divide learning materials in to small steps and carefully sequence these steps from simple to difficult. They should used actual or real materials that are interesting and age appropriate and relevant to the children. Therefore, teacher should give consistent feedback and reinforcement. For successful learning of mentally retarded children parents should be an integral part of the planning and teaching them. Parents and teachers have great responsibilities for teaching of mentally retarded children. Parents can make significant changes in the lives of a retarded child.

Finally, the NGOs, the Government should actively involve themselves in policy formulation, planning, implementation, monitoring of different programmes of minimizing the status of mental retardation.

The work had been dedicated for mentally retarded children keeping utmost importance on their causes of retardation and policy implications for them. In this regard some significant provisions of education and training had been made for them by the different educational and social institution from time to time and these provisions are discussed by the researcher in appropriate places of this discussion. The researcher had also discussed the rules played by the parents, teachers, society and institutions in this regard.

The researcher had found that there are some significant remedies of mental retardation among the mentally retarded children and the parents have a very positive attitude towards their important. In this way our hypotheses are accepted.
At the end of the conclusion, it can be stated that for the improvement of the problems of MRC, we must give them individualize help, love and care. However the government and NGOs and other voluntary organization should take active part for preventing the causative factors of mental retardation and improving the problems of mentally retarded children. The first and foremost important in this matter is public awareness should be created in our society. 2nd poverty must be removed from our society because poor economic condition of the family becomes the cause of malnutrition and disease that affect the physical and mental health of the children. 3rd Government should take step to financial responsibility liabilities of the institutions and the teachers and other voluntary organization which are involved with mentally retarded children. Therefore, it can also state that the problems of mental retardation of children should be minimized from our society. All parents, teachers, community member, other individuals of our society, NGOs and other voluntary organizations with the help of government cooperation must be take an active role to reduce the problems of mental retardation and overall improvement of mentally retarded children.

5.11. Suggestion for Further Research:

The present study covers only a few areas of mental retardation of children but a vast area of their mental retardation have been completely untouched.

Therefore, on the basis of findings, the following recommendations may be followed for future research study:

- Studies on the various problems of different groups of mentally retarded children separately.
- Separate study on various problems of different periods that are responsible for mental retardation of children.
- Studies on the practical measures to be adopted for managing the various causes and problems of mental retardation.
- Studies to develop effective remedial measures for mental retardation.
- Studies on how can be improved the mental retardation of children.
• Comparative studies on the service of govt. and NGOs relating to education and rehabilitation of mentally retarded children.

• To study the various means and ways for intellectual development of the mentally retarded children.

Children with disabilities are the most vulnerable group and need special attention. The government would strive to:

• Ensure right to care, protection and security for children with disabilities.

• Ensure the right to development with dignity and equality creating an enabling environment where children can exercise their rights; enjoy equal opportunities and full participation in accordance with various status.

• Ensure inclusion and effective access to education, health, vocational training along with specialized rehabilitation services to children with disabilities.

• Ensure the right to development as well as recognition of special needs and of care, and protection of children with severe disabilities.

5.12. Conclusion:

The current study provides valuable insight into the information or knowledge of children with mental retardation. The concept of mental retardation of children is not a new one. But nowadays it is seen that due to so many causes the number of mental retardation of children is increasing. This study reveals that it is an important and contemporary matter. To drive out the causes of mental retardation and to solve the problems conscious people, government, NGOs and parents should have the full responsibility and accountability. Every child has right to live with proper care and opportunities. Right education and proper training it is possible to overcome many of these challenges and allow a child to make the transition into adulthood. However, they need proper care, individual attention and protection from the community. Disable children are the integral part of the world community.