SUMMARY AND CONCLUSION
The main purpose of the research study was to study the attitudes of parents of handicapped children and normal children; identify the factors influencing the attitudes; to examine how effectively a handicapped child manages its daily living activities; to study how the child perceives itself in the family and how the same child perceives the parents' perception; and also to identify how this perception vary in relation to the nature of the handicap.

A pilot study was conducted on a sample of 30 parents (15 fathers and 15 mothers) of all the three types of handicapped children to see whether the adopted attitude scale was appropriate and adequate.

For the main study 120 handicapped children (40 VH, 40 HH and 40 OH) were selected randomly from the registers maintained from among the four special institutes in chittoor district of Andhra Pradesh. Their parents (120x2=240) constituted the main sample of the study. For a comparision of only the attitude, 40 pairs of parents (40 fathers and 40 mothers) of normal children were selected from the neighbourhood of the sample.

In order to collect the socio-demographic information of the child and the family, interview was conducted with the parents of handicapped children. The attitude scale developed by Bhati (1979) was adopted by the investigator and was used to study the parental attitudes toward their handicapped children. In addition, an attempt was made to study the daily living activities performed by the handicapped children.
by using the Daily living activities scale constructed by the investigator. And the handicapped child's assessment of perception of the self and how he is perceived by the parents as perceived by the child were studied by administering the Q-sort deck.

The data collected from the sample were statistically analyzed to assess the general attitude (negative, ambivalent and positive) and to study the significant relationship of each independent variable such as sex, age, schooling pattern of the handicapped children and caste, educational qualification, occupation, monthly income, age of identification and problems faced by the parents of the handicapped children; to the attitudinal pattern of the parents.

The following are some of the important findings.

The parents of the normal children have high positive attitude than the parents of the handicapped children. Fathers of all the three types of handicapped children had a better degree of positive attitude than the mothers of the study.

Though there appeared to be some sex difference, it did not significantly influence the attitudes of the parents.

The age of the child did not play a vital role in the attitudinal pattern of the parents but a difference in the scores indicated in fathers.
Schooling pattern of the handicapped child was related to the attitude scores of the parents. The significant relationship between these suggested that the schooling (institutionalized and non-institutionalized) of the children influenced the attitudes of fathers and mothers of HH children.

It should however be noted that, though the difference between the scores of ambivalent and positive attitudes existed, caste did not play a significant role in the attitudes of the parents.

Educated mothers of HH and OH scored higher for the attitude scores. With the increase in qualification, even the attitude scores were found to be increasing. However, the impact of education did not influence the formation of attitudes significantly.

A clear trend of increase in the mean scores of both ambivalent and positive are observed in the upper level of occupation such as clerical and teaching. Since the heterogeneity in occupation is minimal in the sample, it has no effect on the fathers' and mothers' attitude.

The fathers of VH, HH belonging to upper, lower and middle income families scored higher, compared to the other groups of parents. The focus of monthly income have restricted the attitude scores, but did not play an important role.

Early identification have enabled the fathers of VH, HH and mothers of OH to have scored high positive scores, but the influence is
not found to be significantly related to the attitudes of fathers and mothers.

The attitude scores in relation to the problems faced by the parents confirm that this factor did not determine the attitudes of the parents of VH, HH and OH.

The study found no evidence of significant effect of the factors mentioned with an exception of one or two. However, it is encouraging to note that fathers and mothers of HH had a better positive relationship with their children followed by the parents of OH.

The HH children are found to have performing the activities most independently and the positive correlation of the parents' attitudes indicate a close interaction.

The HH children are found to have a positive high correlation which shows the similarity in the perception of the self and the parents followed by the children with OH condition.

The most important finding of the study is the ambivalent attitude scores which is seen more predominantly in most of the parents of all the three types of handicapped children.

The responsibilities of parents of children with special needs are to be shared between the fathers and mothers. Generally, the mothers are engaged in child rearing, but a very few mothers have the role in
decision making. It is absolutely necessary for the mothers of the handicapped children to be integrated with the development program in order to achieve better attitude towards their children.

Greater emphasis should be focused on the prevention of handicaps. So, the parents should be given proper information about the importance of immunization, early detection and above all the consequences of handicap has to be communicated effectively to all parents. So that they will provide better care and support, within the family.

The emotional and physical state of the parents in struggling to adjust with the handicapped child should be minimised, for which an initiative is required on the part of the counsellor and other educationist to give them information on the assistance available and to encourage them to take full advantage. A positive atmosphere should be built in working and dealing with the parents and their emotions.

It is to be hoped that, proper medical knowledge and a better genetic counselling to be more effectively spread out not only to the parents who live in the urban setup, but also to the rural area side. Because, most of the number of prevalence rate of handicap is found to be more in rural areas.

Right at the moment, parents are not as effectively involved with their child which was evident through the ambivalent attitude in the present study. Information on voluntary agencies and other welfare
agencies could be given, which will enable the parents to overcome the management difficulties and to provide love and warmth towards their children.

The involvement of the fathers in the family is particularly important when there is a handicapped child. The result of the present study revealed that the fathers were better informed and also accepted the handicapped children to the extent possible. Hence, it is deemed to be essential, that the personnel involved in the area of special education should take up studies on the role of fathers in upbringing of their children.

As the parents lack self-confidence to move within the community a strategy which lessens the parental anxiety would be really idealistic. And, the society should also be prepared to accept the handicapped child, the family and the parents.

So, it can be said that the attitudinal changes should be brought. The success of the attitudinal change depends more on the proper motivation; for which the organisers of the welfare agencies should be trained in the family welfare. The grossroot level workers, the supervisors of the ICDS are the responsible persons for not only implementing the programmes but also they need to inculcate the significance of a small family norm. Because, the need and raising a handicapped child was considered to be associated with the socio-economic status of the family.
The parents should be aware of the governmental, voluntary organisations programmes and policies, the specific rights of the handicapped child and how to utilize these rights with regard to the education, special aid, rehabilitation measure and job placement. Changes in attitudes may be achieved only when the parents are aware of the opportunities. In conclusion, this investigation adds to the information to the personnel interested in the area of special education and would aid in establishing the management of problems faced by the parents.

What is expected of every parent is a positive approach to their children's handicapping condition. The parents should knit a web of love around their children which is most essential for the complete development. Success will come to parents who believe in their own strength. Thomas Jefferson reminds us of an important point regarding the future and the challenge of contemporary parenthood. "Freedom is the right to choose, the right to create for oneself the alternatives of choice. Without the possibility of choice and the exercise of choice, a man is not a man but a member, an instrument, a thing".

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**Future Directions**

There is a need for more detailed study of the reactions and the crisis following the diagnosis of a handicapped child. Such attempts could indicate whether the reactions vary according to the type of handicap or remain the same and whether these influence the attitudinal pattern of the parents of the handicapped children. These could be explored by making a longitudinal study of any one type of handicapped children at a time.

The application of case study methods to understand the dynamics of family support and interaction of handicapped children will bring out reliable and practical useful information for developing intervention programme.

It is necessary to have a national policy of the handicapped children to protect the interests and provide social and legal support.