

A Case Study :

A study of attitude of mothers of mentally challenged children involved and uninvolved in the special education programme of their children

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The study was conducted to find out the attitude of mothers of mentally challenged children who are involved and uninvolved in the special education programme of their children. Forty mothers (twenty involved and twenty are uninvolved in the special education programme) were selected from three schools for special children in Chennai. The attitude of mothers was measured and the mean and SD of the data obtained were calculated. t- test was also used to find the significance of variance between involved and un-involved mothers of mentally challenged children on the attitude variables. The results of the study indicated that mothers who were involved in the special education of their mentally challenged children had a more positive attitude towards the handicapped condition of their children than the mothers who were un-involved.

The birth of a child is usually an anticipated event. Parents are excited and have expectations about what the child would look like, whom the child would resemble etc. There are many factors that contribute to the normal development of a child – the parental care, attitude of significant people and availability of stimulating environment.

The birth of an exceptional child can shatter the dreams of parents and can leave them feeling shocked, guilty, bitter, angry and ashamed. Rice and Norman (1995) studied families with an Attention Deficit Hyperactivity Disorder (ADHD) child. The results showed that the course of family adjustment to the ADHD child is difficult and long term and all family members are affected. Higher than normal levels of stress was reported by parents. An exceptional child is different in some

way from the 'average' youngster. Such a special child may have problems or special talents in thinking, seeing, hearing, speaking, socializing or moving. This child may have a combination of special abilities and disabilities. They need special education and related services if they are to realize their full human potential. The exceptional children may be mentally challenged, gifted, learning disabled, emotionally disturbed, physically challenged, or may have disordered speech or language, impaired hearing or impaired sight. Parents of such children can have mixed attitudes towards their children. Biberfeld (1983) studied the attitudes of Jewish mothers towards their mentally retarded children and reported that mothers of mentally retarded children had a negative attitude towards their normal children. Various studies have shown that parents have a negative attitude toward their moderately retarded children. Mental retardation generally refers to substantial limitations in present levels of functioning reflected in delayed intellectual growth and is manifested in inappropriate or immature reactions to one's environment and below average performance in the academic, physical, linguistic and social domains. Special education means specially designed instruction that meets the unique needs of an exceptional child. Special materials, teaching techniques, equipments or facilities may be required.

Limitations in any domain make it very difficult for individuals to cope with the demands they encounter each day. The severity of the condition ranges from mild difficulties to such profound limitations that the person so involved is nearly totally dependent upon others for basic needs.

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Association (1994) in DSM IV defines mental retardation as 'significantly sub average general intellectual functioning... that is accompanied by significant limitations in adaptive functioning' in certain skill areas such as self care, work, health and safety. To qualify for the diagnosis, these problems must have begun before the age of 18.

In the last two decades, research in the field of mental retardation has begun to focus the family of the child with this condition. Relationship between parent involvement and parent knowledge of special education has been highlighted by many research studies. Parents who are involved have better knowledge about their children's condition and techniques to teach them. But most of these studies have been carried out in the West. In India, there are very few studies conducted on the attitude of parents towards their retarded child and effects of parental involvement in special education programme on their attitude towards the condition of the child and hence the need to conduct this study was felt.

The research used an ex-post research design since the researcher had no control over the variables. The independent variables in the study were involvement and non-involvement of the mother in her handicapped child's special education programmes. The dependent variable was attitude of mothers of mentally challenged children. The sample was selected using the purposive sampling method.

The psychological test used to measure attitude was 'A scale to measure parental attitude towards problem children' developed by Rangaswami (1995) of the Institute of Mental Health, Chennai. The scale measures the parental attitudes in terms of over protection, acceptance, rejection, permissiveness, domination, education and future, home management and hostility.

The sample size was forty mothers of mentally challenged children. Twenty of them were involved in the special education programme of their children while the other twenty were not involved in the special education programme. The sample was selected from three institutions in Chennai. The permission from the heads of the institutions and the mothers themselves was obtained first. A personal information questionnaire was then given to the mothers below forty years of age and based on the inclusion criteria given below; twenty of them were selected from both the groups. These forty mothers were then given the attitude scale to be answered.

Inclusion criteria :

- The age of the mentally challenged child must fall within a range of six to thirteen years.

- The child's level of retardation must be mild to moderate.
- The child should have only one disability.
- The age of the mothers must be below forty years.
- The mothers must be familiar with English language.
- The mother should not be suffering from any mental or physical illness.
- There should be only one handicapped child in the family.

The mean and standard deviation of the data were calculated. To test the significance of variance t-test was used to assess the difference between the involved and uninvolved mothers of mentally challenged children.

The results of the study are as given below :

It can be depicted from Table 1 that the mean attitude score of the involved mothers was lower than that of the un-involved mothers indicating that there was a positive attitude to the handicapped condition of their children among the involved mothers when compared to that of the mothers who were not involved.

Table 1 : Mean, SD and t values of the attitude of mothers who are involved and uninvolved in the special education programme

Groups	N	Mean	SD	t-value
Involved mothers	20	27.95	5.84	2.9*
Un-involved mothers	20	34.55	8.02	

*Significant

This result may be because the involvement in the special education programme may have given them a better understanding of their child's condition which has helped in developing a more positive attitude towards their handicapped child.

The results of Table 2 indicate that the mean rejection, permissiveness, home management and hostility scores of the involved mothers were significantly lower than that of the un-involved mothers. This result also indicates that the involved mothers rejected their handicapped children lesser and were more permissive towards their handicapped children and there was a more positive attitude of home management and lesser hostility among the involved mother than mothers who were not involved in their children's special education programme.

The results of Table 3 indicate that there was no significant difference between the attitude of mothers of mentally challenged boys and girls who were involved in their child's special education programme.

The results of Table 4 indicate that there was no

Table 2 : Mean, SD and t-values of the various attitudes of mothers

Parental attitude	Involved mothers N=20	Un-involved mothers N=20	t- values
Over protection			
Mean	7.8	7.95	0.09
SD	1.9	1.6	
Rejection			
Mean	1.8	5.3	3.5*
SD	2.14	3.95	
Permissiveness			
Mean	4.65	2.65	2.5*
SD	2.25	2.64	
Domination			
Mean	7.35	8.35	1.1
SD	3.42	2.06	
Home Management and hostility			
Mean	4.8	7.3	2.3*
SD	1.79	4.35	

*Significant

Table 3 : Mean, SD and t-value of the attitude of mothers of mentally challenged boys and girls involved in the special education program of children

Group	N	Mean	SD	t-value
Involved mothers of boys	13	27.92	5.23	0.06
Involved mothers of girls	7	28.00	6.46	

Table 4 : Mean, SD and t-value of the attitude of mothers of mentally challenged boys and girls uninvolved in the special education program of children

Group	N	Mean	SD	t-value
Uninvolved mothers of boys	7	34.71	6.58	
Uninvolved mothers of girls	13	34.46	8.4	0.14

significant difference between the attitude of mothers of mentally challenged boys and girls who were un-involved in their child's special education programme.

The results of the present study thus suggest that the mothers who were involved in the special education programme had a more positive attitude towards their child's handicapped condition than mothers who were un-involved. The involved mothers rejected their handicapped child less and are also less hostile towards their

handicapped children. They also had a more positive attitude towards their children's home management. The results also suggest that the involved mothers were less permissive than the un-involved mothers. The gender of the child did not make any difference in the attitude of the mothers in both the groups. The involvement of mothers in the special education programme of the child may have led to better understanding of the condition of the child through information provided by the special educator about the child's condition, how they can be managed at home and also the future prospects for the child. The better attitude of the involved mothers may also be due to the interaction with mothers of other children who have similar conditions.

In India, the concept of parents involved in the special education programme is not common. The results of the present study suggest that the parents should be encouraged to be a part of the special education programme of their child with special needs rather than completely depending on the special schools for providing the necessary help to the child.

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