

Parental Attitudes Towards Mentally Retarded Children: An Egyptian Sample

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Parental attitudes and practices have significant effects on the prognosis of mentally retarded children. 50 mothers and 10 fathers of mentally retarded children completed a questionnaire of parental attitudes. The most prevalent attitude of mothers is the equality in treating children while the least attitude is their stability in treating their children. Fathers are more accepting to their children. No differences were found in parental attitudes towards the three grades of mental retardation. Mild negative correlation between mothers, attitudes and IQ of the child, mild positive correlation with the age of the child were formed.

(Egypt.J. Psychiat.,1994,17:170-175).

Introduction

Mental retardation has a great impact on the family. Having a child who will remain a mental cripple for his entire life places parents in a great conflict. It is the failure to resolve their conflicts that often results in chronic bitterness, resentment or apathy (Stubblefield, 1977). Although some parents of mentally retarded children have been described as defensive, depressed, overprotective, denying, guilt ridden and rejecting, the majority are well adjusted (Szymanski & Crocker, 1989).

For many family members, especially mothers, management of a mentally retarded child may constitute an all consuming task. Crnic et al, 1983 found that the cumulative impact on daily parenting hassles and difficulties in dealing with children represent significant stressor that may subsequently affect parent and family functioning.

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Parental reactions to mental is controversial. They are a resultant of many feelings : frustration, hurt, fear, despair, ambivalence and projection of blame. It is believed that parental reactions might take sequential stages namely awareness of a problem, denial, recognition of the basic problem, search for a cause and finally acceptance of the problem (Gearheart & Williton, 1979). Some studies reported more depressive symptoms or higher levels of malaise and dysphoric affect in mothers of children with handicaps than others having normally developing children (Friedrich & Friedrich, 1981; Breslau & Davis, 1986; Wilton & Renaut, 1986). On the other hand extensive research by Macphee et al (1986) who studied repeatedly maternal feelings over time, found no difference between both groups.

A common viewpoint is that parental reactions are affected by some variables including the type of handicap, degree of severity, socioeconomic status, presence of physical defects, age of the child, parents' life philosophy and beliefs, discrepancy between parents and child's intellect, support by other ex-

tended family members, support by professionals, and non professionals e.g. (parental organizations).

The incidence of mild mental retardation is considerably variable (Innes et al 1968) while that of moderate to severe grades are constant. Social and educational services provided by the community do influence the mild retardation. Kaplan and Sadock (1991) reported higher incidence in rural areas than urban ones. Persons of normal IQ tend to move to cities while those of limited IQ or retarded remain in their rural societies.

This study aims at studying the prevalent parental attitudes towards mental retardation in an Egyptian sample. Correlation between parental attitudes, age and degree of mental retardation are tried.

Subjects and Method

50 mentally retarded children were selected from Abou El Rish hospital. Cairo University from November 1993 - January 1994. DSM III - R was used for diagnosis. Children with gross physical, neurological, endocrinal disorders and Down's syndrome were excluded. Every child was submitted to the following:

A- Clinical history and physical examination. History was taken from the mothers in all cases.

B- Assessment of each child's intelligence using the Arabic version of Stanford - Binet test (Ahmed & Meleka, 1968).

C- Application of parental attitudes scale for mentally retarded children (Hamza., 1992). This questionnaire consists of 60 statements designed to measure parental attitudes by 5 sub - scales along the following dimensions:

1- Awareness and understanding of the problem of mental retardation . non understanding.

2- Optimism / pessimism.

3- Acceptance / rejection.

4- Stability / hesitancy.

5- Equaity / discrimination.

All mothers of the 50 children for study completed the questionnaire. Only 10 fathers could be available.

Statistical techniques applied are percentage, means and standard deviations, correlation coefficient (Pearson CO) and one way analysis of variance.

Results

Our sample included 26 males (52%) and 24 females (48%). As shown in table one mean age was 8.88 years and mean IQ 46.8

As regards children's education 19
Table 1
Mean Age and I.Q.

Grade of MR	Mild	Moderate	Severe	Total
No	23	18	9	50
Mean age in years	9.2	8.2	9.35	8.88
Mean IQ	57.8	40.9	25.2	46.8

38%) did not go to school, 3 (6%) attend special schools for retarded children and 28 (56%) are in primary schools. As for the mothers' level of education and occupation, we found that 40 mothers (84%) were illiterate; 4 finished primary education, 3 preparatory and only one (2%) reached secondary school. 44 mothers (88%) were housewives and 6 were clerks. Data about fathers revealed that 24 (48%) were illiterate, 13 (26%) had primary school education, 12 (24%) preparatory and secondary education and only one father was a university graduate 22 (44%) of fathers were professionals, 14 (28%) manual workers, 10 (20%) employees and 4 (8%) merchants.

Results of the questionnaire showed "stability" in treating the retarded child is the least prevalent attitude among mothers while the most prevalent attitude is "equality" in treating them. For fathers, "equality" in treatment and "acceptance" were the most prevalent attitudes. Table II shows comparison between attitudes of each parent on the questionnaire.

Scores reveal that on acceptance / rejection dimension fathers were more accepting than mothers. On stability / fluctuation, fathers are more stable in their attitudes than mothers.

Analysis of mothers' and fathers' scores on each dimension of the scale revealed that 46% of mothers and 50% of

compared to 50% of fathers and 78% of mothers discriminate between the mentally retarded child and other children while 60% of fathers showed no discrimination.

Further analysis of total scores on the scale showed 44% of mothers have a negative parental attitude towards their mentally retarded child while 60% of fathers showed a positive attitude. Correlation between total scores of mothers and fathers (0.02-0.51) were statistically nonsignificant, yet they pointed to a positive correlation between mother's attitude and the age of the child and a negative one for fathers.

Correlation between parental attitudes and the IQ of the child were not statistically significant. No significant difference was found between mothers' attitude and the grade of mental retardation (using one way analysis of variance).

Discussion

In our study we found that 44% of mothers had a negative attitude towards their mentally children. This agrees with others who reported non - acceptance and even rejection of mentally retarded children by parents (Chin et al, 1978; Ahmed, 1987; Szymanski & Crocker, 1989). But, on the other hand we find 46% of mothers showing a positive attitude. A possible explanation for this is the high percent of illiterate mothers (84%) represented in this sample and who also come from a low socioeconomic class. This class of population places greater value on physical disabilities rather than mental ones (Chin et al, 1975) while higher socioeconomic groups tend to place greater emphasis on educational disabilities and limitations in the child's cognitive skills. It ought to be mentioned here that religious beliefs and concepts in Egypt play an important role in parents' acceptance of their retarded child, especially among people of this

Table 2
Comparison Between Attitudes

Dimension	Mothers		Fathers	
	mean	SD	mean	SD
1- Understanding the nature of MR	31.14	4.21	31.20	4.05
2- Optimism / Pessimism	32.34	2.26	32.50	2.22
3- Acceptance / rejection	32.68	2.54	34	2.36
4- Stability / Fluctuation	28.26	2.70	30.20	2.90
5- Equality / Discrimination	34	1.87	35	1.33
Total	158.12	10.23	162.9	9.57

fathers did not understand the nature of mental retardation. 58% of mothers and 60% of fathers felt optimistic about their children's future. 58% of mothers showed acceptance of the mentally retarded child compared to 80% of fathers. 54% of mothers showed fluctuation i.e. are unstable in managing their children

class. Grateful acceptance of God's gift and the strong belief in His mercy that encompasses everything allows for acceptance of the child. The high percent of instability of mothers in treating their children might be explained by lack of education, too.

The relation between parents' attitudes and the degree of severity of mental retardation is controversial. We found no significant differences between parental attitudes and the three grades of retardation. Our finding disagrees with others (Glaser, 1978; Szymanski & Crocker, 1989) who reported the degree of mental retardation to be among a variety of factors that directly affects parental reactions.

Our results point to a mild positive correlation between mothers' attitudes and the age of the child and a moderate correlation for fathers. We, therefore agree with Minnes' (1989) viewpoint about the child's age being a significant predictor to maternal stress and it diminishes with age. As for fathers, we might say that while mothers come to accept the child and care for him as he grows older, fathers become more and more susceptible to stress and fear concerning the child's future.

Being more involved and responsible about daily activities and care of the mentally retarded child, it might be understood why mothers appear to be more negative in their total parental attitude score than fathers. Owing to the small number of fathers in our sample (10) compared to mothers (50), the more positive attitude of fathers compared to mothers might not be conclusive. Our findings, therefore, point to the importance of supportive, educative and counselling services for parents of mentally retarded children. The use of modern intervention programmes and skill training techniques for mentally retarded children could never be fruitful without the active

cooperation of parents. This raises the importance of better understanding of family problems, stresses and conflicts and points to the importance of understanding, supporting and teaching parents how to manage their child.

Lastly, we recommend further trials to measure parental reactions among higher social and educational strata to study whether parental scores will differ among higher social and educational levels.

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Les Attitudes des Parents Contre les Enfants Mentalement Retardés: Une échantillon Egyptienne

Les attitudes des parents et leurs manières ont un effect prognostic significatif pour les enfants mentalement retardés. 50 mères et 10 pères ont complétés un questionnaire pour l'attitude des parents. L'attitude le plus prévalant pour les mères a été l'égalité du traitement des enfants, tandique le moins éait la stabilité du traitement. Les pères ont été plus acceptant pour leurs enfants. On n'a pas trouvé de différences dans les attitudes des parents pour les 3 degrés de retardation mental. On a troué une corrélation négative entre les attitudes des mères et l'intelligence de l'enfant et une corrélation positive avec l'âge de l'enfant.

موقف الوالدين تجاه أطفالهم المتأخرين عقلياً

في عينة مصرية

تسمى هذه الدراسة إلى التعرف على الاتجاهات الوالديه تجاه الاطفال المتخلفين عقليا في عينه مصريه. وترجع أهميتها إلى التأثير المباشر للوالدين على مصير هؤلاء الأطفال. وقد طبقت هذه الدراسة على خمسين طفل من المتخلفين عقليا والمترددن على عياده الطب النفسى بمستشفى أبو الريش لجامعة القاهرة وقد تراوحت أعمار الأطفال بين ٦ - ١٢ سنة وتم عمل الأتى: تاريخ الحاله والفحص الاكلينكى ثم مقياس الذكاء باستعمال ستانفورد بينيه. ثم استبيان الاتجاهات الوالديه الذى طبق على خمسين أم وعشره آباء، ودلت النتائج على ان اتجاهات الامهات اتسمت فى نسبه كبيره بالتذبذب فى معاملة الطفل والتفرقه بينه وبين الآخرين ولم تفهم حوالى نصف الامهات بالعينه طبيعه التخلف العقلى أما الآباء فإظهرت النتائج أنهم أكثر عدلاً وثباتاً فى المعاملة، كما دلت النتائج أن ٤٤٪ من الامهات لهم اتجاهات سلبيه تجاه ابنائهم المتخلفين ووجد ارتباط سلبى وضعيف بين اتجاهات الامهات ومعامل ذكاء الطفل وارتباط سلبى متوسط بين اتجاهات الآباء وذكاء الطفل. أما بالنسبه لعمر الطفل فقد ارتبط ارتباطا ايجابيا باتجاهات الامهات وسلبياً للآباء. لم يظهر البحث أي فروق داله احصائيا بين الفئات الثلاثه للتخلف (الضعيف والمتوسط والشديد) على جميع أبعاد ومقاييس الاتجاهات الوالديه وفى المخرجه الكلية للوالدين.