

**Management Of Frustration Among Parents With Severely
Intellectual Impaired.**

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Abstract

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Introduction

Present investigation is an attempt made to find out effect of cognitive therapy on frustration management of severely intellectual impaired. Intellectually impaired child is social stigma among Indian family. Feeling of inferiority elicited among the family members specially in parents, it leads to stress as a result either the family members try to hide the fact or knowingly send the child to a general school to escape the stigma. A vast section of Indian Society still rejects and segregates the mentally retarded citizens and violates the human rights. We should work upon creating a different and much better future for the mentally retarded citizens and their families. However frustration will continue to rise with the struggle for equal rights and quality service for the retarded children and their parents. An intellectually disabled child is a family burden which is usually a serious factor for the parents in India. The majority of children with this disorder have traditionally been cared for by their families.

The nature of stress in parents of the intellectually impaired child has many studied extensively. Prabhu (1989) reported care stress, social stress and financial stress in parents. Gupta & Jain (2002) revealed that less educated, low-income group and rural parents have more problems with their Spastic mentally handicapped children. Mary (1990) found that almost all mothers reported strong feelings for their child immediately after receiving the news of the disabling conditions. The most commonly expressed negative emotion was a

feeling of grief or sorrow, which had lessened over time. Pariante & Carpiniello (1996) showed more of emotional distress, poor social relationship and lack of holidays or free time. Various factors contributing to stress in such parents have been studied. Datta et.al (2002) represented that expressed emotions toward the child, age of the child and income as important factors associated with burden. Dermott and Rothenberg (2000) concluded that teachers are frustrated with a lack of parental involvement in literacy activities at home and at school. Social support and empowerment oriented professional practice were found to have a mediating effect on family stress, Bauman (2004). Wagner et al (1991) indicated that intellectually disabled children have a more difficult time making the transition to adulthood and even the parents of disabled children confirm that the impact of transition was felt by them. Rangaswami (1995) emphasized on the parental attitudes of mother towards retarded children who have a significantly higher negative attitude. Mc Nair & Rusch (1991) reported that parents of mild & moderate disabilities wanted independence with job. Oliver & Sapey (1999) revealed that the birth of a child with mental retardation can be a trauma & shattering event for a family. The parents experience chronic sorrow which affects their reaction to their children. Kumar & Akhtar (2001) found that mothers of intellectually disabled children had a higher level of anxiety as compared to mother of normal children. The high level of stress experienced by parents leads to social isolation, feeling of being restricted & dissatisfaction.

Problem – Level of frustration and its management among parents with severely intellectual

Impaired children.

Objectives-

- 1) Find out level of frustration among parents with severely intellectual impaired Children.
- 2) Influence of cognitive behavior therapy on level of frustration among the parents Of intellectual impaired children.

Hypothesis-

- 1) It was hypothesized that parents of severely intellectual impaired children will show
Higher frequency on E', E & I categories.
- 2) Cognitive Behaviour Therapy increases the frequency of responses on M, e & i
Categories.

Design –

It is a quasi experimental research in which cognitive behaviour therapy worked as I.V. and changes in the level of frustration of the parents was D.V. Pre and post design is used in which seven weeks therapeutic sessions were given and further classified twice in a week. Each CBT Session was of 45 minutes. Measurement of responses on P.F. study revealed the effect of Cognitive Behaviour Therapy in post sessions.

Sample-

Random sampling technique is used to select the parents of severely intellectual disabled from different special schools of Jodhpur from Rajasthan. 40 parents were selected who have only one intellectually disabled child in their family. It is also taken care of that the child should not have any other related associate disorder. Family income was also matched. Only those parents were finally selected whose child was admitted to special schools at least from last 2 years.

Tests-

Reaction to frustration is measured through P.F. study Pareek et.al. (1968). CBT is a type of counselling of mental health. It helps in coping with stressful life situation. It increases tolerance and reduce sensibility.

Procedure-

Researcher went to special school to take list of parents whose children were severely intellectual disabled. Parents were contacted, and aim of study was cleared to them after establishment of rapport. Test was administered which was followed by CBT session for seven weeks i.e. twice in a week 45 minutes per session was given individually at home. Assessment of frustration level was again assessed immediately after the therapeutic session with the help of PF study which was followed by reassessment of frustration.

Results & Discussion-

Mean and SD on different categories of PF study of parents with intellectually disabled children for Pre & Post sessions along with the 't' values.

** Significant at .01 Level * Significant at .05 Level

No response was reported for I', M' and m categories for Pre and Post sessions.

Findings indicated significant reduction in the parent's frustration level followed the cognitive behaviour therapy programme. Frustration was reported among parents of intellectually disabled children who was managed after cognitive behaviour therapy sessions and revealed change in the parental perception and reaction towards their children. Findings provided support for the cognitive behaviour therapy outcome as effective treatment and also evident by Nadler et.al (1971) state higher levels of acceptance of a mentally retarded child by their parents are associated with greater coping efforts by relying either on self (i.e. self-help fort) or others (i.e. help-seeking). Current results after frustration management programme represented significant difference between the means of categories like E', E and I between pre-post sessions.

Sessions	E'		E		I		M		E		i		GCR	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
Pre	5.60	1.70	5.90	2.70	5.10	2.32	1.96	1.01	2.02	1.06	2.30	1.10	6.11	2.81
Post	3.70	2.17	3.80	1.88	4.20	1.88	2.92	1.93	2.89	1.16	3.60	1.98	8.24	3.12
T	4.41**		4.11**		2.00*		4.36**		3.95**		3.71**		3.23**	

It highlights that there is a change in the parental perception towards outside frustrating situations E', (t=4.41, P<.01) and significant reduction in the scores where the frustration was throwing on some person E (t=4.11, P<.01) and sometimes blaming towards themselves i.e. on category I (t=2.00, P<.05). Cognitive behaviour therapy significantly increases responses for the categories like M (t=4.36, P<.01), e (t=3.95, P<.01) and i (t=3.71, P<.01). It reveals that parents after the post sessions prefer to gloss over the frustrating situation and seeking the solution either from someone or from their own. Ooi et.al (2008) provided some evidence of the effects of the cognitive behaviour

therapy for high functioning autistic child in reducing anxiety, parental and teacher stress. Present findings reveal that category of GCR (group conformity response) improved significantly which put parents close to the normal norms of their society for their reaction to frustration ($t=3.23$, $P<.01$). The above views are also close in collaboration with Gohel et.al (2011) reported that early intervention programmes which gave early strength for the natural support system for the parents who have emotional problems and suffer from mental worries because of having child with mental retardation.

Conclusion-

As normal children progresses from one development stage to the next, their parents observe them with pride, anxiety and alarm. Parents have expectations of them based on social, family and experimental standards. When the children's behaviour deviates from the established standards family crisis may develop. In this situation most of the parents experience stress, physical stress, mental stress. This stress leads towards frustration. Cognitive behaviour therapy helped in minimizing frustration level. It is concluded that CBT helps to the parents in handling to special need child Parents play a key role in the life of all mentally challenged children regardless of the kind of problem the child suffers from. Parental associations and organizations should be set up in the Indian society to promote more help and services for such mentally retarded children. Awareness and demonstration programs should be conducted for the parents and other family members to systematically train their own handicapped children. They should develop teaching materials, seminar camps and audio presentation to equip parents. Though Indian government introduced Parliament bill, Right to Education (), takes in that each child has right for his/her education including all disabilities, will take time to come in force.

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