



Behavioral assessment among Mental Retardation related to activities of daily living

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Abstract

Background: Intellectual and developmental disabilities constitutes a major share of permanent handicapping conditions in young children. Also called 'mental retardation', these persons are characterized by appearance of being dull and slow, having slow rates of development since birth in all areas, discrepancy between physical and current mental ages, poor academic achievements with repeated failures at school; along with dependence on others in performance of daily activities like dressing, bathing, toileting, grooming, brushing, etc. **Methods:** A quantitative research design was used for this study in group of mental retardation children at Baby Sarah's Home in Puducherry. A cross sectional descriptive survey was used. A total number of 30 samples were selected by the convenient sampling technique. The data was collected using a structured questionnaire. **Results & Conclusion:** From the findings of the present study it was concluded that majority 50% of the subjects were moderately dependent, whereas 26.6% were fully dependent and 23.3% of the subjects were mild dependent to the activities of daily living respectively. The chi square test revealed that is no statistically significant association between the selected demographic variables such as age of the children, gender, total no of years stayed in home and severity of condition with the level of $p < 0.05$. **Recommendations:** A study can also be conducted in all other MR homes to assess the behavior assessment related to the activities of daily living among MR children. A similar study can be conducted with large samples.

Introduction

Play is one of the most natural and convenient means to reach children. Despite differences in meaning, definitions and understanding on the types or theories of play, it is consistently reported how play is a universal phenomenon in children-including the children with mental retardation. A variety of classification and types of play are acknowledged by different investigators. The phenomenon of play has been investigated in various settings like home, school, playground, indoors, out of doors, single or solitary, group based, with one or both parents, teachers, caregivers and so on. Play has been used in several of the reviewed papers as medium of instruction for normal children as well as those with special needs. Many studies have shown children with aggressive behavior problems to respond differently to hypothetical social problems comparing with other children.

More specifically, children with aggressive behavior problems have poor social problem-solving skills: they are more likely to respond aggressively than other children in social problem situations and also believe that aggressive behavior is more effective than other forms of responses. There is also some evidence that children with mild mental retardation and concomitant behavior problems are more likely to respond aggressively to hypothetical social problems than children with mild mental retardation and no accompanying behavior problems. Very few studies have been conducted with this specific population although children with mental retardation generally show more behavior problems than children with normal intellectual abilities. There is paucity of research in the field of activity log in mental retarded children with behaviors problem. There are very few data based or empirical investigations on daily activities of children with mental retardation-especially those with behaviors problem.

Activities of daily living and communication skills discriminate mental retardation from the other groups while socialization skills discriminate autism from the other groups. Implications of these findings are discussed relative to assessment practices, differential diagnosis, program development and progress monitoring **Temple University (2009)**

Mental retardation is a label used to describe a constellation of symptoms that includes severe deficits or limitations in an individual's developmental skills in several areas or domains of function: cognitive, language, motor, auditory, psychosocial, moral judgement and specific integrative adaptive. **Helen D Pratt (2007)**

Activities of daily living skills training, Snoezelen and vocational skills training. All other treatment and training activities specified in each individual person-centered plan were continued during the 10-week observational period. Snoezelen may provide an effective context for reducing the occurrence of self-injury and aggression **Nirbhay N Singh (2004)**

Classification of Diseases–10th ed. (ICD-10) criteria for psychiatric disorder. They found that 59% of children 8 to 16 years of age who had mental retardation and epilepsy had at least one psychiatric disorder. We do not know yet, however, whether even younger children with delays are at the same heightened risk as these older children and adolescents. **Stromme and Diseth (2000)**

Examines 7 guidelines in the treatment of psychiatric and behavioral problems in MR that were developed based on surveys of 48 experts on the psychosocial treatment and 45 experts on the medication treatment of MR. **American Journal on Mental Retardation (2000)**

Mental disorders occur more commonly in persons with MR than in the general population. However, the disorders themselves are essentially the same. Clinical presentations can be modified by poor language skills and by life circumstances, so a diagnosis might hinge more heavily on observable behavioral symptoms. **J. Am Acad (1999)**

Observations showed significantly more “no-play” intervals for children with delays. Within intervals where play took place, delay group children engaged in solitary play (rather than parallel or social play) 33% of the time versus 12% for children without delays. Moreover, children with delays showed much disruptive entry (53% vs. 0%), and only 53% of children with delays at some time smiled and/or laughed to their peers in contrast to 93% of children without delays. **Kopp, Baker, and Brown (1992)**

Information was solicited from several professional organizations with an interest in behavior, psychopathology, and developmental disabilities through letters sent to 50 prominent researchers and through computer searches of the literature. Approximately 40 relevant instruments were identified. These are described in three sections: (1) the more established instruments, most of which have been published, with detailed descriptions and thorough critiques; (2) relatively new or unpublished instruments, with brief summaries and critiques; and (3) relevant instruments considered peripheral to assessment of behavior disorders, with brief descriptions and no appraisal of psychometric characteristics. **Aman, Michael G (1991)**

Objectives:

- To assess the behavior related to activities of daily living among mental retardation children
- To associate the behavioural assessment regarding activities of daily living among mental retardation children with their selected demographic variables.

Methods

Population of the study

The population for the present study comprised of all school going adolescent girls at Puducherry.

Sample of the study

The sample of the study consisted of 30 mental retardation children's. Pre-experimental research design is used for this study. Quantitative research approach selected for the present study. Convenient sampling is used for this study.

Instrument of the study

Behavioral assessment scales for Indian children with MR (BASIC-MR)

Behavioural assessment scales for Indian children with MR (BASIC-MR) with selected domains includes personal care and appearance, food management, work, social communication, sexuality.

Data Analysis

Severity of condition- considering the distribution and percentage of the subjects according to their severity of condition. Majority 36.6% of the subjects were moderate, around 33.3% of the subjects were mild, about 23.3% of the subjects were severe, minimum 6.6% of the subjects were profound respectively. The distribution and percentage of subjects based on the behavioural assessment related to activities of daily living by using a standardized Behavioral assessment scale for Indian children with Mental Retardation (BASIC-MR). It showed that majority 50% of the subjects were moderately dependent, whereas 26.6% were fully dependent and 23.3% of the subjects were mild dependent to the activities of daily living respectively. The chi-square test revealed that there is no statistically significant association between selected demographic variables such as age of the children, gender, total no of years stayed in home and severity of condition.

Results

The behavioural assessment related to activities of daily living by using a standardized Behavioural assessment scale for Indian children with Mental Retardation (BASIC-MR). It showed that majority 50% of the subjects were moderately dependent, whereas 26.6% were fully dependent and 23.3% of the subjects were mild dependent to the activities of daily living respectively.

The association between selected demographic variables and the behavior assessment related to activities of daily living among mental retardation children are not significantly associated with their score.

Table: 1 Frequency and percentage distribution of subjects according to age, gender, total no of years stayed in home, severity of condition.

N=30

S.NO	DEMOGRAPHIC VARIABLES	FREQUENCY (N)	PERCENTAGE (%)
1	Age in year of the children:		
	a. 20-25	10	33.3%
	b. 26-30	18	60%
	c. 31-35	2	6.6%
2	Gender:		
	a. Male	20	66.6%
	b. Female	10	33.3%
3	Total no of years stayed in home:		
	a. Upto 10 years	20	66.6%
	b. More than 10 years	10	33.3%
4	Severity of condition:		
	a. Mild	10	33.3%
	b. Moderate	11	36.6%
	c. Severe	7	23.3%
	d. Profound	2	6.6%

Age- shows the distribution and percentage of subjects according to age. Majority 60% of the subjects were between the age group of 16-25 years, about 33.3% of the subjects were between the age group of 5-15 years, nearly 6.6% of the subjects were in the age category of 26-35 years respectively. Gender- describes the distribution and percentage of the subjects according to their gender. Majority 66.6% of the subjects are male and 33.3% of the subjects are female.

Total no of years stayed in home- indicates the distribution and percentage of the subjects according to total no. of years stayed in home. Maximum 63.3% of the subjects were stayed up to 10 years, around 36.7% of the subjects were stayed more than 10 years respectively.

Severity of condition- considering the distribution and percentage of the subjects according to their severity of condition. Majority 36.6% of the subjects were moderate, around 33.3% of the subjects were mild, about 23.3% of the subjects were severe, minimum 6.6% of the subjects were profound respectively.

Table: 2 Frequency and percentage distribution of subjects according to activities of daily living

Behavioral assessment	Score	Frequency (n)	%
Fully dependent	<10	8	26.6%
Moderately dependent	11-20	15	50%
Mild dependent	>21	7	23.3%

Table 2 depicts the distribution and percentage of subjects based on the behavioural assessment related to activities of daily living by using a standardized Behavioral assessment scale for Indian children with Mental Retardation (BASIC-MR). It showed that majority 50% of the subjects were moderately dependent, whereas 26.6% were fully dependent and 23.3% of the subjects were mild dependent to the activities of daily living respectively.

Table 3: Association between the behavioral assessment regarding activities of daily living among MR children with selected demographic variables.

S.NO	DEMOGRAPHIC VARIABLES		FULLY DEPENDENT		MODERATELY DEPENDENT		MILD DEPENDENT		CHI SQUARE	P VALUE
			F	%	F	%	F	%		
1	Age in year of the children	a. 5-15	2	4%	4	8%	4	8%	2.03	9.49
		b. 16-25	5	10%	9	18%	4	8%		
		c. 26-35	1	2%	1	2%	0	0%		
2	Gender	a. Male	7	14%	10	20%	3	6%	15.61	5.99
		b. Female	1	2%	4	8%	5	10%		
3	Total no of years stayed in home	a. Upto 10 years	5	10%	9	18%	6	12%	9.9	2.92
		b. More than 10 years	3	6%	5	10%	2	4%		
4	Severity of condition	a. Mild	0	0%	5	10%	5	10%	30.95	12.59
		b. Moderate	0	0%	8	16%	3	6%		
		c. Severe	7	14%	0	0%	0	0%		
		d. Profound	1	2%	0	0%	1	2%		

*-p<0.05, significant

Table 3: The chi-square test revealed that there is no statistically significant association between selected demographic variables such as age of the children, gender, total no of years stayed in home and severity of condition.

Discussion

This chapter discusses the main findings of the research study and reviews that in relation to the findings from the result of the present study regarding behavioural assessment related to activities of daily living among MR children at Baby Sarah's home in Puducherry. The total sample were 30, the study was conducted regarding behavioural assessment related to activities of daily living among MR children. The demographic variables are age, gender, total no. of years stayed in home, severity of condition of the MR children's. With respect to age, majority 60% of the subjects were between the age group of 16-25 years, about 33.3% of the subjects were between the age group of 5-15 years, nearly 6.6% of the subjects were in the age category of 26-35 years respectively.

As per data finding towards gender, majority 66.6% of the subjects are male and 33.3% of the subjects are female. With regard to the total no. of years stayed in home, maximum 63.3% of the subjects were stayed upto 10 years, around 36.7% of the subjects were stayed more than 10 years respectively.

In accordance with the severity of condition, majority 36.6% of the subjects were moderate, around 33.3% of the subjects were mild, about 23.3% of the subjects were severe, minimum 6.6% of the subjects were profound respectively.

Conclusion and Recommendations

From the findings of the present study, it was concluded that majority 50% of the subjects were moderately dependent, whereas 26.6% were fully dependent and 23.3% of the subjects were mild dependent to the activities of daily living respectively. A study can also be conducted in all other MR homes to assess the behavior assessment related to the activities of daily living among MR children. A similar study can be conducted with large samples.

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