CURRICULAR STRATEGIES AND ADAPTATION OF CHILDREN WITH MENTAL RETARDATION DR ANJUM MAHDI AND MS BHUVAN ISRANI

Prof. Raj Kumari Gupta (Retd.),

Former chairperson,

Department of Education,

Panjab University, Chandigarh

I have been reading books by Indian authors also so that I can guide my M.Ed. students, if possible, which books are good and which books not to read and which content is not given correctly in which book. Some books are extremely good, clearly presented concepts, replete with works by researchers, and lucid language. Of course, we have our share of ordinary books also.

A review of the book entitled 'Curricular Strategies and Adaptation of Children with Mental Retardation' authored by Dr Anjum Mahdi and Ms Bhuvan Israni, published in 2017 by Kanishka Publishers, is presented here in following pages.

Title appears to be dealing with a very significant theme. However, it is not clear whether adaptation is of children with mental retardation or of curriculum? Secondly, the term mental retardation is obsolete and should be replaced with intellectual impairment.

Chapter one of the book deals with elements, components and dimensions of mental retardation. Chapter has a lot of information in it. Part of it explains conditions, causes of mental retardation well. Some information, though may be otherwise good, need not find place in a chapter on mental retardation e.g. specific learning disability, dementia, sleep disorders, anxiety, fear, eating disorders, table on sex ratio of patients with congenital malformations, delirium etc. Though the chapter reflects commendable knowledge of authors, but book is meant for readers, they can get confused with irrelevant information. The book is published in 2017, reference of DSM-IV is being used. DSM V was published in 2013. The new version of DSM should have been referred to. Since the book is on mental retardation, details of concept, causes, characteristics, prevention, prevalence and associated disorders related to only mental retardation should have been presented. HIV has been mentioned as possible cause of Mental retardation, which does not hold true.

HIV per se does not cause mental retardation. A section on differentiating from other similar disorders would help the reader.

Chapter two is on Prevalence of mental retardation: an overview. In this chapter, after devoting a paragraph to prevalence, definitions of concept, causes, characteristics and class room adaptations have been given. Definitions deserve to be in first chapter, so that reader knows about whom is the information being given. Causes and characteristics do not fall under prevalence. In fact, all content given in prevalence chapter could easily go in first chapter. Class room adaptations can have more details and a separate chapter can be devoted to that.

Chapter three is titled as 'Towards understanding various Syndromes related to Mental Retardation'. This chapter includes lot of details of syndromes like Down Syndrome, Organic Brain syndrome, Coffin-Lowry Syndrome, MASA Syndrome, Alpha-Thalassemia Syndrome, Di-George Syndrome and Fetal Alcohol Syndrome. Some of these are not commonly found in literature. Lot of related information is given here. One of the headings in the chapter under the section 'Understanding Down Syndrome' is- Mental characteristics and Neurology. From the contents, it is not clear why has the term neurology been used. There is nothing of neurons, synapses, spinal cord or brain in the conditions described under it. Secondly, most of the terms described under the heading viz. heart diseases, cancer, thyroid disorder, gastric intestinal, infertility and eye and hearing disorders are not mental conditions, nor is any nerves involvement described here. Heading could simply be 'associated disorders'.

Fourth chapter deals with 'Case studies regarding mental retardation'. Degrees of mental retardation, causes and figures (of prevalence) are being repeated here, which could be justifiably adjusted in chapter one. Information like prevention, cultural factor factors, social factors have been presented well here. Why does relationship between diagnosis of early childhood psychoses and mental retardation find a mention here? Other thing which is dealt with is litigation, about United States, South East Asia Region, socio legal US perspective under the title case studies.

Chapter number five deals with Clinical Classification of Mental Retardation. Right at the outset, without an opening paragraph, clinical classification of mental retardation is given which includes hydrocephaly, microcephaly, cretinism, turner syndrome, phenylketonurea and mongolism. Clinical means based on observations and actual treatment rather than theoretical. In this classification, one finds genetic (turner syndrome), metabolic (phenylketonurea) and other medical conditions mixed up. In the end of the chapter, a line is added: the other clinical types of mental retardation include galactsemia, Klinefelter's syndrome, cerebral palsy etc. Galactosemia (a metabolic disorder) could be covered with phenylketonurea. Tay Sach's disease (another metabolic disorder) does not find place here in the chapter. Normally, these three are discussed together (they are related to three basic foods protein, fatty acids n lipids, and galactose).

Klinefelter's syndrome can find place with Turner syndrome. Cerebral palsy is a condition which does not always have mental retardation as associated condition.

Next chapter (number 6) is devoted to levels, causes, prevention and treatment. Causes are occurring third time in the book, this time with more details. Levels were also presented in first chapter and fourth chapter. Under treatment causes are presented. Moreover, mental retardation is a condition, it can't be treated, only prevention is possible and their functioning can be improved.

Chapter seven on FAQs makes a good reading. It really is a crisp portion of the book and despite repetition at many places increases the readability of the book.

The title of the book made me search for the content based on curriculum strategies and adaptation. Reader could not find any. The title in such a situation is so misleading. Consumer can buy the book looking at the title, but will be disappointed later. Title must be changed to delete curriculum strategies and adaptation.

A subject index and bibliography normally add quality to the book. On page 232, reviewer just checked 'what causes intellectual disability'. The pages mentioned are 199 and 206. On page 206, it does not occur at all, on 199, small paragraph is devoted to that. Causes are given in much more detail on pages74-75. Similarly for vocational training, pages mentioned are 165 and 171. On page, 165 it is dealt with and not on 171 page. Many pages given with themes and concepts are correct also.

In general, lot of repetition is there in the book, organization of the book is not up to the mark, content of book does not justify the title of the book, content could be more precise, parsimoniously presented. All the same, authors seem to have tried well!!!