EFFECTS OF MENTAL DISABILITIES OF CHILDREN ON THEIR PARENTS

DR. NAHEED ABRAR

ABSTRACT:

It is an important issue in our society that mentally retarded children become a challenge for their families as well as for the country. Special children have countless problems and their parents face various difficulties in the society. This study is focused on the problems of the parents of mentally retarded children and was conducted on four sixty-four cases to find out the problems and effects faced by the parents of mentally retarded children. After statistical analysis of the data was concluded, it was proved that: Parents' monthly income has association with the number of mentally retarded children, which affects the economic condition of the family. Participation in social rituals has some association with the severity and level of child mental retardation. It was also concluded that the parents of mentally retarded children have various health problems like heart disease, depression, diabetes etc. Parent's marital relationship has some association with the severity of the child's mental retardation as well. Accordingly, we have structured four hypotheses. There is a possible relation between the mentally retarded children and the income of their parents. There is a possible relation between the type of mentally retarded children and the participation of their parents in social ceremonies. There is a possible relation between the type of mentally retarded children and the marital relationships of their parents. There is a possible relation between the number of children and the health of their parents.

Children are invaluable assets of a nation.[1] They are the pillars for the foundation of any country. The child of today is the builder of tomorrow and considered a bright star for his/her country and nation. Therefore, it is a responsibility of parents, teachers and governments to perform well for the upbringing and training of children so that they became responsible citizens in future. It is our sacred duty to provide them healthy environment, amusement opportunities and educational amenities. They must get the required nurture and welfare, in the courtyard of the house and in the streets of the neighborhood. Children need the love and affection of their parents and family members which is their right. Parents are the first training institute of children and if this training institute functions properly, the child would become the mason of tomorrow and would prove to be a ray of light for the future of the society.

[1] Begab, M.J, *The Mentally Retarded and the Family*, New York: Base Books, 1966, pp. 34-36.

According to Abraham Lincoln the child is a person who would complete the mission you have started and he is about to stand at the place, you are standing now. The future of humanity is in his hands. It is the foremost duty of parents to assist their child in gaining confidence, courage and becoming mature.[2] Parents should train their children in a way that they could get confidence. It is the duty of the parents to guide the child in every way and try to understand his/her emotions and feelings. The problem of mentally sick or retarded children is an important problem and requires due attention. Such children are not only a challenge for the family but also for the country and nation. Children are not only the assets of a country but also are the pillars on which the foundation of the future of any country is laid down.[3] There are children in every society who are counted among special children due to lagging behind mentally. To nurture them, to honor them and to share the problems and anxieties of their parents is of utmost importance but it is pitiful that due to negligence, carelessness and lack of resources such children have been ignored.

There are many problems with special children. Their parents have to pass through many stages to understand them, correct their habits and enable them to adapt to their environment. Parents should also train such mentally retarded children to be independent so that they are respected and loved as normal children.

These children should get the opportunities of nourishment they deserve in the lap of mother, courtyard of the house and in the streets of the neighborhood because mentally retarded children and persons have the right to enjoy life like other citizens.[4]

Theoretical Framework:

The parents of mentally retarded children are mentally more stressed as compared to the parents of normal children. The question that worries most of the parents is that if they die, what would be the future of their child? Although majority of parents see the difference in physical growth in the children, they do not realize the real problem until the child fails in studies in school. When the parents are told that the mental level of their child is not normal then they start giving attention. The initial effect is visible in many ways and temporary mental stress is a common example. When they come to know about the mental retardation of their child, the foundation of their marriage shakes because they consider it their common failure.[5] The initial years for the parents of mentally retarded child are quite painful and this is the period when the mental retardation of a child is recognized. The most important stage for the parents is to accept the child. When the parents become aware that they are the parents of a retarded child, they face severe

---

[2] Christiansen, J, *Theological Implications of having Handicapped Child*, University of Utah, Salt Lake City, 1969, pp. 19-20.

[3] Lieberman Bernhardt (ed.) *Contemporary Problems in Statistics*, New York: Oxford, 1971, p. 4.

[4] Farber, N.W, *The Retarded Child*, New York: Crown, 1968, p. 13.

[5] Grossman, F.K. *Brothers and Sisters of Retarded Children*, New York: Syracuse University, 1972, p.10.

mental shock and when they are sure that their child will remain retarded for life, they reel with grief, become sad and are caught by several diseases e.g. heart disease, high blood pressure and depression.[6]

In our society, the attitude of parents towards mentally retarded children is not admirable or positive. The parents think that their child is a reason for their disgrace and shame. They feel hesitation in bringing their child in front of guests and they abstain from taking their retarded child with them to any ceremony. The majority of parents do not take part in the education and training of their children but they start considering their retarded child as burden on themselves and their family and do not accept the disability of their child. Usually, the frustration of their other anxieties and deprivations is also taken out on such children. These children are not only ignored but are left on their own. The number of such parents is very small in our society who care properly for their mentally retarded children. Usually, such children are kept tied with chains in houses which enrage them when attention is not paid to their health, cleanliness and nutrition.

The addition of a mentally retarded child in a family affects the relation of husband and wife. The effects are depicted in four ways: it raises extremely powerful emotions in both the parents; as a symbol of common failure; it disorganizes the family; it provides a fertile arena for disputes. The parents of a normal child see many dreams about the future of their children and innumerable thoughts make their hearts glee. On the contrary, the parents of mentally retarded children see despair and gloom around them and additional fear breeds regarding their future. The thought of failure of their child, rejection in school, inability to work with other children, problems of marriage, incapability of living independently, results in solitude and anxieties. The frustration and restlessness increases as a child grows and being parents the condition of consistent despair remains, making them extremely sensitive.[7]

The prevalence of divorce, marital dispute and disloyalty of husband are common in families of mentally retarded children. When the family circumstances deteriorate due to their child's mental sickness, parents lead worried life. On one side, this child is sick and on the other hand disputes in the house affect the emotions and feelings of the parents greatly. Differences remain between majority of parents and many parents due to poverty and financial problems can not provide education to their child or even attend properly towards their treatment. These worried circumstances and the sickness of their child is an intensely painful stage for the parents. Seeing the condition of their child, the emotions and feeling is to prefer death for themselves and for their sick child. They can neither adapt to the circumstances nor with their family and the society. They remain victims of different psychological and mental problems wishing that if doctors had dealt with the

---

[6] Wentworth, E.H. *Listen to your heart: a message to parents of handicapped children*, Boston: Houghton Mifflin, 1974, p. 57.

[7] Fraenkel, Jack, R. and Wallen, Norman E. *How to Design and Evaluate Research in Education*, 5th Ed. San Francisco: San Francisco State University, p. 556.

sickness before birth, after carrying out full examination, they would not have to face that dilemma.[8]

Among various doctors, child specialists are responsible for treating the child at the time of birth. Disability can be diagnosed at the time of birth and it is the responsibility of the on-duty doctor to inform the parents about the condition of the child. Various other professionals such as psychologists and social workers are also responsible to inform the parents about psychological examination and having their child's mental abilities tested. This is also the responsibility of people who take approval of the parents for any special treatment of the child. School teachers are also responsible as the parents blame the former teachers for not teaching the child properly. Few teachers consider themselves responsible if they fail in fulfilling the educational needs of the child. Majority of parents who charge people of different professions for the sickness of their child are irrational. However, it is also true in very specific cases.[9]

The parents of a mentally retarded child have different sorts of fears which only a doctor can diagnose correctly. Few fears are totally baseless but parents do not analyze them and as a result these fears remain. Unfortunately, answers to all the questions which parents ask cannot be given but questions asked can be generalized as follows:

- What was the reason for the mental sickness of our child and would other children be affected too?
- What would our friends and relatives think about our sick child?
- Would we have to care for our child lifelong or would there be a day when we get rid of the punishment?
- What would be the effects of this sickness on our family?
- Who would take care of our child when we are gone?

These are some of the questions which recur in social studies associated with parents of mentally disabled children. Parents do not have experience or prior knowledge about mental illness. Such knowledge if present can generate hope and subside their fears. An expert professional can satisfy parents regarding these questions by providing answers in a clear and unambiguous way. When parents are informed about the illness of children, some basic knowledge should also be provided at that time and this knowledge must be very clear and must not worry the parents.

The more a professional meets parents of mentally retarded children, the more he/she is able to understand their needs. Normally such parents blame themselves for the sickness of their child. In our society people hold the view that birth of a disabled child is a punishment for some misdeeds committed by the parents in the past. This kind of attitude makes parents prone to resigning to fate and instead of getting professional help for their

---

[8] Kramm, Elizabeth R. *Families of Mongoloid Children*, Washington DC: US Department of Health, 1963, p. 78.

[9] Gayton, W.F. *Management Problems of Mentally Retarded Children and their Families*, Pediatric Clinics of North America, 1975, p. 561-570.

child they accept it as a punishment. This state of affairs compounds the difficulties of the sick child and also the anxieties of the parents.

One example of such an attitude is that of children suffering from Rubella Syndrome. Mothers who get measles during pregnancy transfer this disease to their unborn child. Parents feel guilty and suffer from depression and anxiety. At the same time no improvement takes place in the condition of the child. Such parents and children offer a very difficult case when it comes to counseling by doctors. In such situation, professionals can only try to engage parents in healthy activities and try to soften their image of themselves as criminals.

After accepting the truth of the sickness of the child, parents are caught with severe grief and despair. All their dreams and wishes for their healthy child are demolished.[10] Some parents prefer death to the birth of a disabled child and some nurture a desire of death for their sick child. In some societies such parents wear a particular dress, depicting their grief and gloom. The counseling of such parents is very important as only then professionals can hope to enable the sick child to lead a normal life.[11]. According to some studies the normal siblings of the retarded child also desire his/her death. In such cases counseling services should be provided to the whole family. In recent times a number of parents have demanded that life saving drugs should not be given to mentally disabled children. This attitude further impedes efforts to provide quality living to mentally disabled children. This makes the provision of psychological counseling to parents and siblings in particular and wider society in general, all the more important.

Although, such attitudes on the part of parents and siblings engender ethical and social issues, we must understand that in order to gauge the extent of the ordeal of parents, we must put ourselves in their shoes. Only then we will be able to appreciate their concerns. Professional services must be very forthcoming in such situations and must endeavor to help both the child and his/her parents.[12] The more we examine the relations of retarded children and parents the more we come to know about the circumstances in which the attitude of the children reaches the level of intolerance, which becomes unacceptable for the parents. It has been observed that parents are reluctant to take care of mentally disabled children due to the following reasons:

- Due to the fact that the child is unsuccessful in fulfilling the expectations of his/her parents, they don not take due interest in his/her proper up bringing. Parents assume that their child won't be able to achieve anything so they divert their attention to their healthy children.

---

[10] Featherstone, Helen. *A Difference in the Family: Living with a Disabled Child*, New York: Penguin, 1980, p. 38.

[11] Edgerton, Robert B. *The Cloak of Competence, Berkley*: University of California Press, 1993, p. 35-40.

[12] Hardman, Michel L, Drew, Clifford J. et al, *Human Exceptionality: Society, School and Family*, New Jersey: Allyn & Bacon, 1930, p. 48.

- Some parents set unrealistic targets for their children and when they fail to reach them, they become frustrated

The last step of parents is to accept the sickness of the child and also that it is a permanent disability. By accepting the child, parents accept their own person and this is beneficial for both parents and child.[13] The most important fact is that mentally disabled children have their feelings, desires and needs and they also have to enjoy life like other normal children. The acceptance of such children by parents goes through a lengthy and difficult period. It includes grief and sorrow, disappointment and guilt, mistrust, periods of depression and anxiety. Some times it happens that such parents think that having a disabled child in the family would create problems for other family members.[14] The parents of retarded children express concerns and fears the same way as the parents of normal children do. But the majority of such parents belong to the upper strata of society. Parents of mentally disable children are different in the sense that they shoulder more responsibilities.

Often parents are keen to know the medical condition of their child and are even very forthcoming in comparing the disabilities of their child to other sick children. They also want to know and inquire from doctors whether they can go on having children or not. Unfortunately the treatment of majority of mental sicknesses is quite impossible. In few cases where sickness is related to emotions, actions, environment or deprivation, psychological treatment and provision of better environment can help substantially. In some medical cases, e.g. Gluconenia, balanced diet can reduce the illness. For the treatment of dumbness, doctors treat dumb children by special techniques and it can be improved, in case the wisdom of the child has not been affected severely. The treatment provided should not be very harsh financially because non availability of resources is a major factor in most children not getting proper treatment.

It is crucial that continued arrangements be made for proper nurturing of mentally sick children. For this proper planning is required on the part of parents and professionals. Parents are the first and most important source of care for such children. In case they are unable to provide it, they must consult professionals on how best to arrange for care and accommodation of their child. Mentally disable children, like their parents, also want to hear positive and clear messages. They are quite capable of thinking what is right or wrong with them and how it would affect their lives. They also want to know how they can make their lives better and become useful members of society. Often parents and even professionals are unable to understand the true feelings of these children and thus fail to decide what is best for them. Such children often get wrong messages from people who speak to them rudely or use bad language. These children want to hear clear and

---

[13] Nibert, David A. 'The Political Economy of Developmental Disability', *Critical Sociology*, Vol. 21, No. 1, 1995, pp. 59-80.

[14] Neil, C. 'Theological Implications of having a Disabled Child' Panel Discussion, East Texas State University, p. 14.

unambiguous messages and in the process align their feelings about the society.[15] The retarded child is often a victim of complexes that is why other people talk in hints with him/her or give them ambiguous messages. These children want to know the problem they have and what is its treatment. Keeping them away from truth does not bring any benefit, while it can impinge negatively on the growth of the child. The mentally retarded children also want acceptance like others from the society which is a basic human need. Retarded children are not different from other children. They are respectable individuals of the society and should be treated as such.

The parents of such children often display despair and lack of enthusiasm vis-à-vis their children and through such behavior they pass on hints to the children that they are not welcome. The effects can be very severe on children and they seek others who consider them equal human beings. It is crucial that at such times they must be provided with counseling and therapy by professionals. Also, there is a need to create awareness about their needs, in the society. In this regard, the professionals should also display warmth and enthusiasm in helping out the child. Every disable child, no matter how severe his/her disability, grows physically. It is the responsibility of parents and professionals to provide proper nourishment so that the child is able to attain his/her natural stature. A mentally retarded child may not be able to perceive the benefits of varied experiences, nonetheless, it is important that he/she be provided with opportunity to grow and lead life as normally as possible.

Another necessary element that is required for the discipline and growth of a child are sectors inside his/her environment. Children who depend unnecessarily on other normal members of a family become dependent on others and shirk taking responsibility. They also lose their confidence. It is quite easy for parents that instead of putting on the child's clothes, he/she is trained and encouraged to put them on him/herself. [16] Similarly the child can also be encouraged to get rid of similar habits in which he/she is dependent on other members of the family. In this way the child can be trained to take up some responsibility and it would help in boosting self confidence. In order to understand these matters, the parents should regularly consult professionals on how best to take care of their child.

The parents of mentally retarded children have their own requirements and feelings. They expect that their family, friends, relatives and professionals related to children problems understand their feelings and affirm it. It is important that parents get in touch with such professionals who work to assist families in coping with a disability. In order for the professionals to help the parents, the parents should also be willing to trust them and provide any information which is required.[17] They want that the information given to

---

[15] Mercer, Jane R. *Labeling the Mentally Retarded: Clinical and Social System Perspectives on Mental Retardation*, Berkeley: University of California Press, 1192, p. 3.

[16] Harter, Susan. *The Construction of the Self: A Developmental Perspective* , New York: Guilford Press, 1999, pp. 38-40.

[17] Berry, P. and Gunn, P. 'Maternal Influence on the Task Behavior of Young Down's Syndrome Children', *Journal of Mental Deficiency Research*, 1984, pp. 269-274.

them would continue to be given in a clear and unambiguous way. Unfortunately, most professionals do not consider expertise in counseling parents as necessary in helping them to care for the retarded child. Majority of professionals are not able to extract vital information from parents because they are not clear in their message. As a result most of the information provided by professionals further confuses the parents. In some cases professionals especially doctors withhold vital information from parents. The disable child falls prey to this trust deficit between parents and professionals. A study found that 33 per cent of all children suffer from a certain syndrome[18], while the parents are kept unaware of it. It is known by a survey that there are professionals who do not take interest in the authenticity of information provided.[19] It is parents' right to ask questions from the professionals regarding diagnosis and treatment. According to Gayton majority of professionals do not provide information to parents due to the reason that they would get worried. He condemns that this thing is not right and provision of wrong information to parents becomes a hindrance in the way of child's future and getting professional services. [20]

Objective of the study:

The purpose of this research is to investigate the effects of mental retardation of children on their parents. It aims to study the dilemmas which parents have to face in rearing mentally disabled children. For this reason, a few organizations that are working for the mentally retarded children in Gulshan Town, Karachi have been selected. There are 9 organizations that are working for Mentally Retarded Children in Gulshan Town in which 500 children are getting education. 464 children have been selected for the purpose of this study from the following three organizations

- Al-Umeed Rehabilitation Association
- Qaideen Special Education Complex
- Nusrat Balkhi Memorial Institute of Children

Research Methodology:

The present study is an exploratory study, which is focused on the problems of parents of mentally retarded children. The study describes various problems faced by the parents of mentally retarded children. The sample of 464 respondents was selected on the basis of stratified random sampling as followed in standard social research.

---

[18] Bruder, Mary Beth. 'Parent-to-Parent Teaching', *American Journal of Mental Deficiency*, 1987, pp. 435-438.

[19] Hebb, D.O. *The Organization of Behavior: A Neuropsychological Theory*, Lawrence Erlbaum Associates, 1949, pp. 39-42.

[20] Chomsky, Noam. *Syntactic Structures*, The Hague: Mouton de Gruyter, 1957, pp. 142-144.

Data Collection/Analysis:

The data for the present study was collected from primary sources through a structured interview schedule. The questionnaires were filled from the selected parents by the researchers in one-on-one interactions. For the selection of respondents empirical methods were employed. The researchers obtained the residential addresses of the parents from the selected institutions and 464 respondents were randomly selected.

To test the hypotheses and analyze the correlation of the two variables, contingency tables have been constructed in order to check the relationship between the variables.

STATISTICAL TESTING OF HYPOTHESES:

In the present study the method of Chi-Square has been used to test the relationship between variables and find the conclusions.

$$X^2 = \sum\left(\frac{fo - fe}{fe}\right)$$

Where fo stands for frequently observed and fe for frequency expected, $\sum$ is the sum of X^2 with degrees of freedom (Rows-1), (Columns-1)

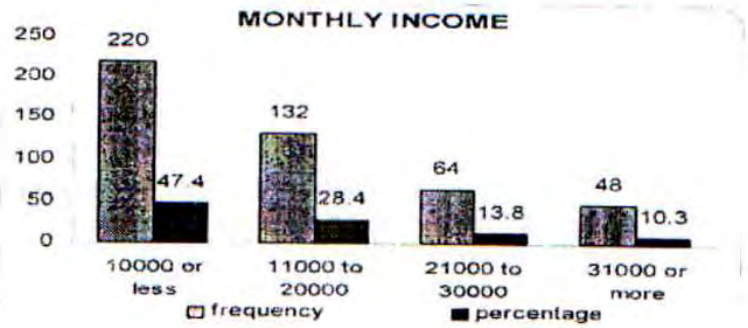
$$C = \sqrt{\frac{X^2}{X^2 + N}}$$

To compute the significance of relationship between variables, where required, SPSS was used to draw the statistical conclusions.

FREQUENCY NO. 1: Monthly Income

S. No	Income	Frequency	Percentage
1	Ten Thousand or less	220	47.4
2	Eleven Thousand to Twenty Thousand	132	28.4
3	Twenty One Thousand to Thirty Thousand	64	13.8
4	Thirty One Thousand or above	48	10.3
	Total	**464**	**100.0**

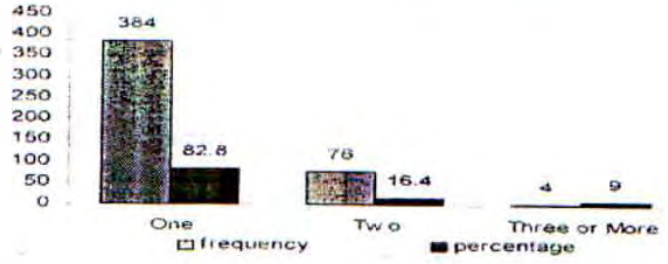
Frequency Distribution No. 1 shows that 47.4% have incomes in the range of ten thousand or less. 28.4% have incomes in the range of eleven thousand to twenty thousand. 10.3% have incomes ranging from twenty one thousand to thirty thousand.



FREQUENCY NO. 2: Number of Mentally Retarded Children.

S. No	Number of Mentally Retarded Children	Frequency	Percentage
1	One	384	82.8
2	Two	76	16.4
3	Three or above	4	0.9
	Total	**464**	**100.0**

82.8% responded that they have one child who is mentally retarded. 16.4% have two mentally retarded children and 0.9% said that they have three or more children who are mentally retarded.

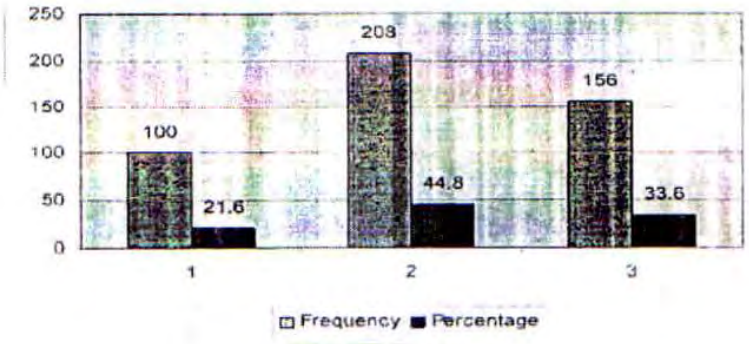


FREQUENCY NO. 3: **Degree of mental retardation**

Sr No	Degree of mental retardation	Frequency	Percentage
1	Sever	100	21.6
2	Average / Moderate	208	44.8
3	Ordinary / Trivial	156	33.6
	Total	**464**	**100.0**

Received result shows that 21.6% children suffer from severe retardation, 44.8% children are moderately retarded and 33.6% suffer from ordinary retardation.

1) Severe 2) Moderate / Average 3) Ordinary

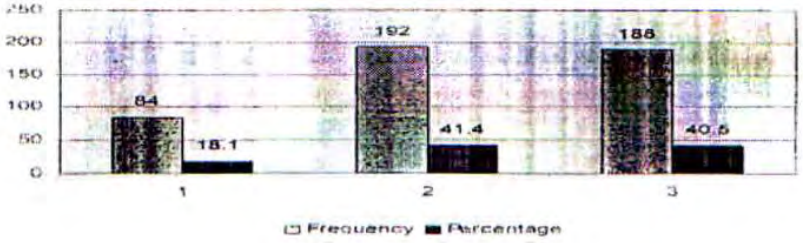


FREQUENCY NO. 4: Your Marital Status Suffers due to your mentally retarded child.

S. No	Your Marital Status Suffers due to your mentally retarded child	Frequency	Percentage
1	Yes	84	18.1
2	No	192	41.4
3	So far	188	40.5
	Total	**464**	**100.0**

18.1% answered in Yes, 41.4% answered in No and 40.5% answered in So far.

1. Yes 2. No 3. So Far

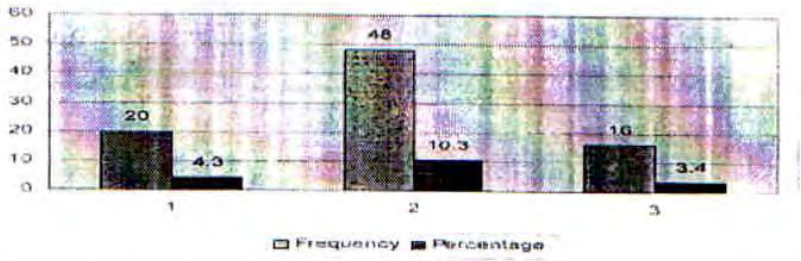


FREQUENCY NO. 5: If yes! How?

S. No	If yes then how?	Frequency	Percentage
1	Trivial argument	20	4.3
2	Severe argument	48	10.3
3	Separation	16	3.4
	Total	**84**	**18.1**

4.3% said that they had trivial argument, 10.3% had severe argument and 3.4% said that the condition of the child led to separation.

1. Trivial Discussion 2. Severe Discussion 3.Separation

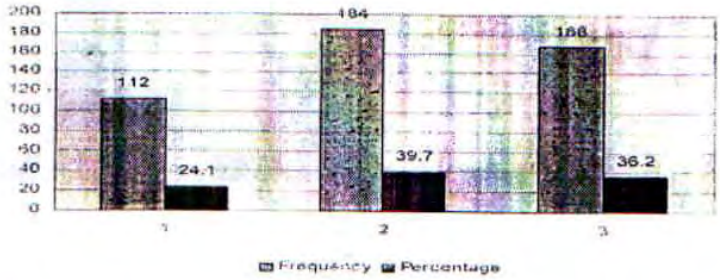


FREQUENCY NO. 6: Are you unable to attend social gatherings due to your mentally retarded child?

S. No	Are you unable to attend social gathering due to your mentally retarded children?	Frequency	Percentage
1	Yes	112	24.1
2	No	184	39.7
3	So far	168	36.2
	Total	**464**	**100.0**

24.1% replied in Yes, 39.7% replied in No and 36.2% replied in So far.

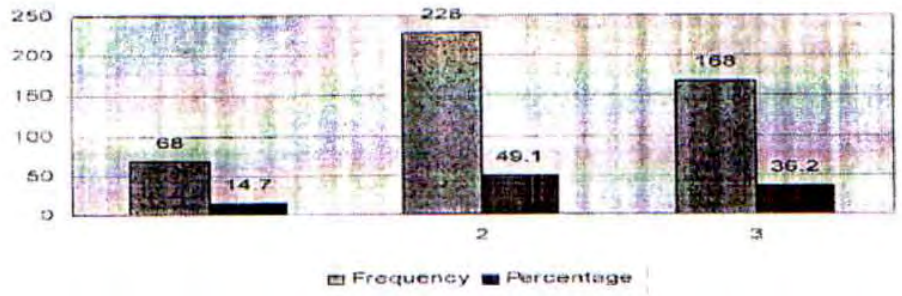
1. Yes 2. No 3. So Far



FREQUENCY NO. 7: Did you suffer from any disease / disorder due to your mentally retarded child?

S. No	Are you suffering from any disease / disorder due to your mentally retarded child?	Frequency	Percentage
1	Yes	68	14.7
2	No	228	49.1
3	So far	168	36.2
	Total	**464**	**100.0**

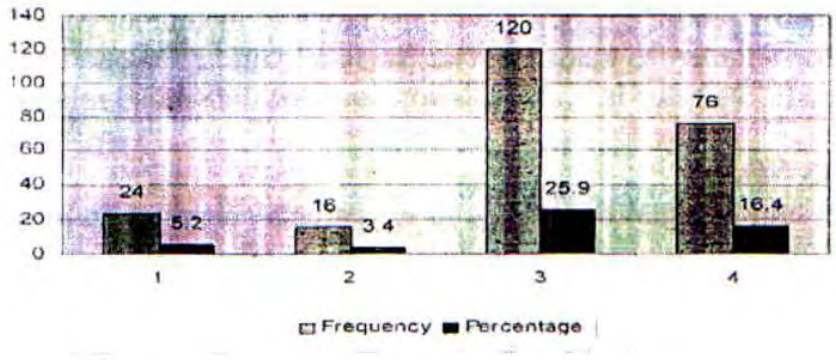
14.7% replied in Yes, 49.1% replied in No and 36.2% replied in So far.
1. Yes 2. No 3. So Far



FREQUENCY NO. 8: If yes then which type of disease / disorder?

S. No	If yes then which type of disease / disorder?	Frequency	Percentage
1	Diabetes	24	5.2
2	Heart Disorder	16	3.4
3	Depression	120	25.9
4	Or any other	76	16.4
	Total	**236**	**50.9**

5.4% replied that suffer from Diabetes, 3.4% cited heart disorder and 25.9% said that they suffer from depression and 16.4% responded with Any other.
1. Diabetes 2. Heart Disorder
3. Depression 4. Any other



Monthly income of Parents	Population of mentally disabled children			Total
	One	Two	Three or above	
Ten thousand or less	176	44	0	220
Between eleven thousand to twenty thousand	104	24	4	132
Between twenty one thousand to thirty thousand	56	8	0	64
Thirty one thousand or above	48	0	0	48
Total	384	76	4	464

Chi-Square Test

	Value	Wide Range	P Value	P Value B	Lower Limit (b)	Upper Limit (b)
Pierson Chi-Square	22.885	6	.001	.003	.001	.004
Karamazov	0.157		.001	.003	.001	.004

a) In 4 Column (33.3) the expected count is less then 5 minimum expected count is 0.43.

b) Monte Carlo simulation with 99% during confidence.

RESULT

Point 1: We noted by the observation of relative P Column value that its value is quite low i.e.

(0.003<0.05), this is why Null Theory is rejected. We derived result that there is some relation of mentally retarded children with the monthly income of parents. Besides, it is also proved by Kramer V statistics that as much the P Price / Value is less i.e. (0.004<0.05) and if its value is 0.157, it is apparent that the mutual relation is weak.

HYPOTHESIS NO. 2

H_0 The condition of mental disability and the parents participation in the social parties effectiveness relation is not present.

H_1 The condition of mental disability and the parents participation in the social parties effectiveness relation is not present.

Condition of Child mental disability	Do you abstain from social ceremonies due to your child's mental retardation			
	Yes	No	So Far	Total
High	36	32	32	100
Average	52	72	84	208
Normal	24	80	52	156
Total				464

Chi-Square Test

	Value	Wide Range	P Value	P Value B	Lower Limit (b)	Upper Limit (b)
Pierson Chi-Square	20.821 (a)	4	.000	.000	.000	.001
Karamazov	.150	.000	.000	.000	.000	

RESULT

Point 2: We noted by the observation of relative P Column that it is very low valued i.e. zero and that is why Null Theory is rejected. We derived result that there is somewhat relation of mentally retarded children with the parents participating in the social ceremonies. Besides, by the statistics of Kramer V and by the observation i.e. its value is 0.150 that shows that the mutual relation is quite weak.

Condition of Mentally disabled children	Mentally retarded children's parent's marital relation			
	Yes	No	So Far	Total
High	28	28	44	100
Average	32	96	80	208
Normal	24	68	64	156
Total	84	192	188	464

Chi-Square Test

	Value	Wide Range	P Value	P Value B	Lower Limit (b)	Upper Limit (b)
Pierson Chi-Square	13.079 (a)	4	.011	.012	.009	.015
Karamazov	.119		.011	.012	.009	.015

RESULT

Point 3: We noted by the observation of relative P Column value that it is very low valued i.e. (0.001<0.05) and that is why this Null Theory is rejected. We derived result that there is somewhat relation of mentally retarded children's illness intensity with the marital harmony of the parents. Besides, by the observation of relative column value for Kramer V, we noted that it is low i.e. 0.119, which shows that mutual relation is weak.

Population of mentally disabled children	Victimization of parents in any disease due to child's mental retardation			
	Yes	No	So Far	Total
One	52	204	128	284
Two	12	24	40	76
Three or more	4	0	0	4
Total	68	228	168	464

Chi-Square Test

	Value	Wide Range	P Value	P Value B	Lower Limit (b)	Upper Limit (b)
Pierson Chi-Square	36.235 (a)	4	.000	.000	.000	.000
Karamazov	.198	.000	.000	.000	.000	

RESULT

We noted by the observation of relative P Value that it is quite weak i.e. about zero and that is why it is rejected. We derive result that there is some connection of children's illness intensity with the health of parents. Besides, it is also proved by the Kramer V Statistics that as much it is connected with P price/value it is quite less, almost zero and if its value is 0.198, it shows that mutual relation is weak.

DISCUSSION

The purpose of this research is:.

1. To find out the relation between the kind of mental retardation of children and participation of their parents in social ceremonies.

2. To find out the relation between the type of mental retardation of children and the marital relations of their parents.

3. To find out the relation between the numbers of mentally retarded children and the health of their parents.

4. There is a possible relation between the mentally retarded children and the income of their parents.

5. There is a possible relation between the type of mental retardation and the participation of their parents in social ceremonies.
6. There is a possible relation between the type of mental retardation and the marital relationships of their parents.

7. There is a possible relation between the number of children and the health of their parents.

8. For the planning of this research, the method of Stratified Random Sampling has been adopted. Accordingly the sample of research is selected by means of class wise stratification. In order to collect the samples the method of Visitor Questionnaire Interview Schedule has been adopted. The questionnaires have been filled in face-t-face interaction. The researcher adopted stratified random sampling which helped in grading and classification of the sample population.

9. As per the statistics gathered from Table (1) it is clear that the income of the majority of retarded children's parents is 10 thousand or less than 10 thousands. 4% – 28% of parents are those whose monthly income is between 11 - 20 thousand and the lowest 3% - 10% percent parents, whose monthly income is 31 thousand or more than that.

10. As per the statistics of Table (2) the condition of 6%-12% children is intense. 8%-44% is average and 6%-33% suffer from mild retardation.

11. As per Table (3), 1-18% said Yes, 4-41% said No, while 5-40% said somewhat.

12. As per Table (4) answering the question "To what extend Marital relations are affected", 3-4% said little argument; 3-10% said severe argument; 3-4% said separation.

13. Table (5) answering the question "Do you abstain from social ceremonies due to your child's mental retardation", 1-24% said Yes, 7-39% said No, while 2-36% said to some extend.

14. Table (6) "Have you been victimized by any disease due to your child's mental retardation", 7-14% said Yes; 1-49% said No, 2-36% said to some extent.

15. Table (7) If Yes, Do you suffer from any disease? , 4-5% said Diabetes, 3-4% said "Heart disease", 9-25% said "Depression", and 4-16% said "Others."

In the first hypothesis, the relation between the number of mentally retarded children and the monthly income of their parents is analyzed. It is correct as per statistical analysis. It is a desire of parents of mentally retarded children that their child is admitted in better institutions where he/she can get vocational and educational training as per their expectations. But majority of parents say that the expenses of these institutions are quite high. The foremost purpose of parents is to provide higher education to their child. They are unable to do so because they remain victims of depression, which affects their health. Therefore, as per statistical analysis and statistics of questionnaire, hypothesis No. 2 is proved. The relation proved in the second hypothesis from the questionnaire/interview is that the parents of mentally retarded children abstain from social or other ceremonies. They are compelled to do so due to unfavorable attitude of others. It is also worth mentioning from the questionnaire and interview that the attitude of relatives and other people in ceremonies is sometimes disgraceful due to the actions of mentally retarded children.

The third hypothesis is related to the marital relations of the parents of mentally retarded child. As per statistics, matter gathered from interview and statistical analysis, this hypothesis is also proved to be correct to some extent. The reason of retardation in children is internal or external marriage. Whether retardation is by birth or accidental, in any case marital relations certainly are affected. Effects on marital relationship range from minor argument to severe argument or even separation. Fourth hypothesis discusses that the number of mentally retarded child/children directly affect the health of the parents, since majority of the mentally retarded children belong to the low income class. The attitude of friends and other relatives, the reaction of mentally retarded children on not fulfilling their needs and non-participation of parents in various ceremonies and the concerns about the future of mentally retarded children, makes the parents prone to various diseases e.g. diabetes, heart disease and depression. These are all those diseases that occur due to tension. Therefore, from all these facts, analysis, numerals of questionnaire and statistical analysis this hypothesis is proved correct.

Recommendations:

(1) Parents should get best consultation for their retarded child and act upon it and give time to their child so that he/she is not victimized or deprived.

(2) Sense of responsibility of mentally retarded children's parents must be awakened so that they play a positive role in the upbringing of their child/children and thus make them useful citizens of the society.

(3) Parents should train their mentally retarded child in a way that they do not depend on others. Many parents do not pay proper attention to their mentally retarded child due to having a large family. That is why awareness is to be raised in parents to give far more time to their retarded children so that they could be trained in a better way. Parents should accept the retardation of their child and accept their child as a noble responsibility.

(4) The syllabus should be up dated and training should be arranged after analyzing the mental condition of the mentally retarded children. The masses should be educated on mental retardation so that they could cope with it and its affects in a better way.

(5) Such programs should be started that are for the care of mother and a child and mothers should be prevented from using excessive medicines during pregnancy due to which the rate of mental retardation is increasing.

(6) Parents should consult doctors every month in order to know the cause of their child's retardation.

(7) Mentally retarded children should be provided far more amenities in the training institutes so that they can get their due place in the society and that people love and respect them.

(8) Retarded children should be provided far more educational and recreational amenities so that they would not be victimized or suffer from inferiority complex. The parents should play a positive role in the treatment and recovery of mentally retarded children.