

Comparing the psychological well being factors among the parents of the mentally retarded children with those of the normal children

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ABSTRACT

The aim of the present research was to compare the psychological well being factors among the parents of the mentally retarded children with those of the normal children. The descriptive research is comparative - causative. The statistical population of the present research includes all the parents of the mentally retarded and normal children whose children were studying in the mentally retarded and normal schools in Mahabad in the educational year of 2012-2013. For this, 80 parents of the mentally retarded children were chosen through the random sampling and 80 parents of the normal children were selected through the multistage random sampling. To collect data, the Ryff psychological well being questionnaire was used. To analyze data, the multivariate variance analysis statistics was applied. The results of the multivariate variance analysis statistics shows that there is a significant relations with regards to the positive relationship with the others, mastering the environment at the alpha level of 0/01 ($P < 0/01$), and with regards to the self acceptance factors, independence, having purpose in life and personal development at the alpha level of 0/05 ($P < 0/05$). There is a significant difference between the parents of the normal children and those of the mentally retarded children with regards to the psychological well being factors (positive relationship with the others, mastering the environment, self acceptance factors, independence, having purpose in life, and personal development).

Keywords: Psychological well being; Self acceptance; Independence; Having purpose in life; Personal development

1. INTRODUCTION

The birth and presence of a child with mental retardation in each family could be an unfavorable and challenging occurrence that could follow the possibility of stress, frustration, feeling of sadness, and hopelessness. Various evidence indicated that the parents of the mentally retarded children face emotional, social and economic problems that are often limiting, destructive and conclusive in nature (Khamis, 2007). On the other hand, family plays a key and amazing role in the social life of the child. The responsibility of the family is to take care of and rear the children, to establish a healthy relationship among the members as well as to assist the children independence (Dyson, 2000). When there is a mentally retarded child in the family

environment, and there is a need to special mental and physical facilities, the frustration and feeling of sadness as well as wishes gone with wind will bring the entire family under its own pressure (Alizade, 2005). According to the world health organization definition, mental health means the ability to communicate coordinately with others, to improve social and personal environment, and to solve conflicts and personal inclinations rationally, justly and appropriately (Khaledian et al, 2013). On the other hand, man has always longed for a good life and for many years, the finding a good life concept and the way it is achieved has overwhelmed all sorts of thoughts and contemplations (Davern, 2004). What is true, is that the presence of psychological well being is part of the psychology of life quality that has been defined as the peoples' understanding of their own life in the range of emotional behaviors, mental performances as well as mental health aspects and includes two parts .The first part is the personal judgment as to how people make headway in their lives, while the second part of it encompasses pleasurable experiences.

Some researchers have conceptualized psychological well being with regards to the specific factors and processes such as emotional processes (Roothman et al, 2003). In Myers (2000), opinion, mental well being implies how people evaluate their lives, and Ryff (1989), emphasizing that the positive health is beyond a lack of illness, refers to the fact that the psychological well being hinges on what the person needs for well being. He believes that mental well being includes, Self, acceptance, positive relationship, independence, command on the environment, having a purpose in life as well as personal development. Goldsmith et al (1997), maintains that the mental well being includes receptions by the person with respect to the coordination level among the prescribed goals along with performance implications that are achieved through the process of continued evaluations, leading to internal but rather stable satisfaction of the succession of life. Also, the feeling of well being or life satisfaction is important for two reasons. Mental, physical health materialization, life longevity, establishing the value of cheerfulness for the man, measuring the life quality index along with economic and social indices. In fact. Mental well being or life satisfaction is the biggest man's wish and his most important goal that affects people's mental health more than any other factor (Diener et al, 2003). Researchers have shown mothers of mentally retarded children compared to those of the normal children have generally lower health levels (Ahmadpanah, 2001), more stress (Dumas et al, 1991) and lower psychological well being level. Ilai and Esmaeli (2000) conducted a research under the title of examining the adaptability proportion of the parents of mentally retarded children with respect to stress making factors at mentally retarded schools in Sari. Results indicated there is a significant relationship between stress making factor and parents' demographic variables with the educational level, parents' professional status as well as marriage status, marriage duration, retarder children, age of retarded child, and the age of diagnosing the child's mental retardation. Narimani, et. al. (2007), did a research under the title of comparing the mental health level of the mentally retarded children mothers with that of the normal children mothers. Findings showed that there is generally a significant difference between the mental healths of the two groups of mothers. Haldy and Hanzlick (2000) reported mothers of the children affected with down symptoms compared to the mothers whose children are safe. When these children reach the adolescence age, mothers will have more disable feelings and more depression. Brandt (2002), performed a research with the subject of examining anxiety and depression among the mothers whose children are affected with psychotic disorders and those mothers whose children are mentally retarded and found out that depression and anxiety scores are significantly higher in mothers whose children are mentally retarded.

Ronit (2002), has investigated in a research the difference of fathers and mothers of adults with mental retardation at the stress level, compatibility strategies and attitudes about integration of girls and boys. Findings have revealed that mothers due to awareness of disabilities and their children difference with others bear higher stress. Vermaes et al, (2005), addressed the mental disability of the parents in families who have children with disfigured spinal cord. Results showed that such children affect in the longer term the mental adaptability of the parents. Singer (2006) performed a Meta analysis on comparing depressions among mothers with growth disorder children with mothers with healthy children. Results indicated the former group suffer from higher depression and their general health are at greater risk (Harrist et al, 2007).

Bumin et al. (2008), investigated anxiety, depression and life equality among mother with disabled children. Results of the research revealed that such mothers are more anxious and depressed. An increase of depression and anxiety level will worsen life equality. Furthermore, mothers of healthy children act much better in terms of professional performance than mothers with mental retardation. Extra care imposed on parents by children with mental retardation affects parents' behaviors. Emergence of disability among the children will cause emotional disorders and higher economic problems. In this regards, all the member of the family will face crises deriving from the disabled person. Because attending the parents of mentally retarded children in understanding their mental health problems as well as reducing stress could be emotionally important, considering such parents is also important.

2. METHODOLOGY

The statistical population of the present research includes all the parents of the mentally retarded and normal children whose children were studying in the mentally retarded and normal schools in Mahabad in the educational year of 2012-2013. For this, 80 parents of the mentally retarded children were chosen through the random sampling and 80 parents of the normal children were selected through the multistage random sampling. To collect data, the Ryff psychological well being questionnaire was used. To analyze data, the multivariate variance analysis statistics was applied. Given the importance of the higher population of boys with mental retardation, 60 parents of male children and 20 parents of female children were selected. The children of these parents had been understood as trainable in terms of intelligence retardation and they were studying in mentally retarded schools. The sample of the normal children parents was chosen through multistage random methods from Mahabad schools. Since the age range of 65 % of the students with mental retardation was 12-15, for the comparison group, the samples of female girls' parents at the junior schools were selected at the age range of 12-15.

2. 1. Data collection tools

Ryff's psychological well being scale: This scale was designed by Carl Ryff at the University of Wisconsin in 1989. This test consists of 84 questions and 6 factors. The trainees respond to questions at a 6 degree scale (totally disagree to totally agree). 47 questions are scored directly and 37 questions are inversely scored. To investigate the validity of the tool and measure its relation, measurements that were scaling personality traits and hence called psychological well being indices like Bradburn emotional equality, Neugarten life satisfaction and self respect by Riosenberg were used. The results of the Ryff's test correlation was acceptable with each of the above scales. Hence, the above tool is considered a valid tool in

terms of being a construct (Ryff, 1989). Lindfors, Berntsson and Lundberg, 2006 have reported the coefficient range of the internal constancy for different aspects of the Ryff's scale at between 0/65 to 0/70. Also, Ryff (1989) utilized the Cronbach's alpha for examining the reliability of this tool. The obtained alpha for the following factors were; self acceptance (0/93), positive relations with others (0/91), independence (0/86), command on the environment (0/90) having a purpose in life (0/90) and personal development (0/87).

3. FINDINGS

3. 1. Descriptive section

The final sample includes 160 people (80 parents of the mentally retarded children and 80 parents of the normal children) whose average age of the members of the sample is 39 (± 10).

Table 1. Descriptive statistics of the well being psychological factors among the parents of the mentally retarded and normal children.

variable \ Group		Normal			Mentally retarded		
		Average	Average standard error	Standard deviation	Average	Average standard error	Standard deviation
Psychological well being	Self acceptance	61/862	0/714	6/393	59/000	0/885	7/915
	Positive relation	62/637	0/842	7/539	58/800	0/920	8/237
	Independence	62/025	0/856	7/657	59/400	0/894	8/004
	Command over the environment	61/137	0/877	7/849	55/262	0/693	6/204
	Having purpose	62/712	0/808	7/232	60/112	0/882	7/893
	Personal development	63/037	0/950	8/499	60/075	0/970	8/684
	Total	372/675	3/265	29/209	350/187	3/392	30/344

Table 1, shows the average rate, Average standard error, Standard deviation as well as the minimum and maximum trainee scores of the two group's of the parents of the normal and non normal children.

3. 2. Inferential Section

To investigate the data obtained the multivariate variance analysis was used and the results are provided in the following table.

Table 2. Levin test based on the variances equality assumption.

Factors	F	Freedom degree1	Freedom degree 2	Sig.
self acceptance	0/710	1	158	0/401
positive relation	0/002	1	158	0/965
independence	0/121	1	158	0/728
command over the environment	3/528	1	158	0/135
having purpose	0/472	1	158	0/493
personal development	0/922	1	158	0/338

As seen in the Table 2, the Levine test based on the assumption of variance equality of the society groups is supported.

Table 3. The results of the significance tests of MANOVA on the main effects of the group variable on the dependent variables.

Variations sources	Value	F	Freedom degree	Sig.	Eta square	Statistical square
Pillai's effect	0/187	5/874	6	0/000	0/187	0/998
Wilks Lambd	0/813	5/874	6	0/000	0/187	0/998
Hetling test	0/230	5/874	6	0/000	0/187	0/998
Roy's test	0/230	5/874	6	0/000	0/187	0/998

Results of the multivariate variance are indicative of the significant difference between the scores of the two groups at the significance level of 0/01. Given the fact that the difference is totally significant, in order it is determined in what factors the difference has been significant, the results of the variance analysis are provided partially in Table 4.

Table 4. The results of the multivariate variance analysis for comparing the average scores of the psychological well being factors in the two groups of children.

Variable	Squared sum	Squared average	F coefficient	Sig.	Eta square	Statistical square	Freedom degree
self acceptance	327/756	327/756	6/331	0/013	0/039	0/706	1
positive relation	589/056	589/056	9/448	0/002	0/056	0/863	1

independence	275/625	275/625	4/493	0/036	0/028	/558	1
command over the environment	138/625	1380/625	27/591	0/000	0/149	0/999	1
having purpose	270/400	270/400	4/719	0/031	0/029	0/579	1
personal development	351/056	351/056	4/755	0/03	0/029	0/582	1

Table 4, Shows the results of the multivariate variance analysis, comparing the average scores of the psychological well being in the two groups of children where according to the information of the table, the F degree observed in the factors of positive relation with the others and command over the environment are 9/448, 27/591, at the alpha level of 0/01 ($P < 0/01$) while in the factors of self acceptance the F degree is 6/331, independence, 4/493 and having a purpose 4/719 while the personal development is 4/755 at the alpha level of 0/05 ($P < 0/05$), the difference is significant. Hence the null hypothesis is rejected and the research theory is supported. It can be said that there is a significant difference with regards to the well being and psychological factor among the two groups of the children.

4. DISCUSSION AND CONCLUSION

The results of the multivariate variance analysis of the research indicate that there is a difference between the parents of the two groups of the mentally retarded and normal children with regards to the psychological well being factors of self acceptance, positive relationship with the others, independence, command over the environment, having a purpose in life as well as personal development. With respect to examining the comparison of the mentally retarded children and normal children, some researches have been conducted where the results are in concert with the current research. Najarian et al. (2001), have indicated that mothers with outdoor professions are much better generally than the mothers of the mentally retarded children. Narimani and Aghamohamdi (2007), have proven that there is a significant difference of mental health believe between the mothers of the mentally retarded and normal children. Singer (2006) indicated that mothers of the disabled children suffer more from depression and their general health level are at greater risk. To explain these data, one can say, among the parents of the mentally retarded children, due to the lack of social links, relations with friends and lack of relationships in the voluntary associations, absence of the social relations as well as negative status, we see a reduced amount of psychological well being relations. Berckman (2001), believes the social situation in which the person lives has a close relation with the well being status of the person. People having extended relations with the other and have interactions in there have higher psychological and well being situations compared to the isolated people. They are also engaged in the social networks and hence, have access to larger sources and are under more favorable conditions. Based on this one can say that in case there is psychological well being, people will increase their social behaviors and social interactions and more importantly they will enjoy more social supports (Aghayousefi and Shariff, 2010). Thus, the parents of the mentally retarded children, in accordance with the conditions and limitations of

their children as well, as different economic pressures have no satisfied feeling of their own life because of their disabled child, thereby not experiencing a suitable mental and psychological status. Undoubtedly, the implications of the lack of mental psychological absence will have substantial repercussions on different functions and competences of the members of the family. To explain these data, one can say, among the parents of the mentally retarded children, due to the lack of social links, relations with friends and lack of relationships in the voluntary associations, absence of the social relations as well as negative status, we see a reduced amount of psychological well being relations.

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