

Impact of Parental Involvement in Training Personal Skills among Children with Multiple Disabilities

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Abstract

The present study aims to identify impact of parental involvement in training personal skills in children with multiple disabilities. Thirty parents within the age range of 25 to 54 years and 30 male and female children with multiple disabilities within the age range of 6 to 19 years participated in the present study. Adapted functional assessment checklist was used to assess the children's present level of personal skills before and after the training of parents. Parental Involvement Questionnaire (PIQ) was used to rate the parental involvement before and after the training. The results revealed that the parental involvement and the performance of children significantly differed after the training of parents. The study motivated the investigator to develop a training manual for parents so that they could train the personal skills of their children.

Key words: Multiple Disabilities, Personal Skills, Parental Involvement

Introduction

Multiple disabilities refer to two or more than two types of disabilities which require more attention and support in education programming. Children with multiple disabilities have difficulty in mobility from one place to another and perform activities of daily living. Also, their socialisation, communication of their needs, ability to solve problems, ability to play and participation in recreational activities are minimized. This leads to severe educational needs that cannot be accommodated in a special education programme solely meant for one of the impairments. As a result, they generally need extensive support across any number of skill areas. And, because of their difficulty to do personal needs, impairment in speech and communication, poor socialization due to cognitive dysfunction, these children pose a serious challenge to their parents.

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The parents of children with multiple disabilities need a great deal of information about diagnosis, management and support services. Parents can assist in the identification, assessment, intervention and implementation of the programmes intended for their children. A child's mastery of daily living skills contributes strongly to prognosis (Gillham et al. 2000) and it has been noted as "essential" to an individual's ability to function successfully and independently in the world (Liss et al. 2001). Personal skills are developmentally appropriate practical skills that are necessary to care for oneself and meet daily challenges.

There are six basic Activities of Daily Living skills (ADL): Eating, Drinking, Toileting, Brushing, Bathing, Dressing, and Grooming. To perform these activities other skills such as gross motor, fine motor and language and communication skills are also required. Needless to add that to support and educate a child with multiple disabilities in personal skills parental involvement is essential.

Parental involvement refers to the commitment of parents related to the school or schooling that can be observed as manifestations of their commitment to the educational needs of their children. This means that a parent who shows these behaviours in a larger extent can be regarded as more highly involved than a parent who shows these behaviours in a lesser degree. Parental involvement has been described in earlier literature and widely recognized (Epstein, 1992).

The author developed six levels of school-related involvement opportunities for parents. These are efforts to assist parents with child-rearing skills such as communicating with families, providing school volunteer opportunities, involving in home-based learning, involving in school decision-making, involving in school-community collaborations. The requirement of including parents in the special education decisions of their children has been shown to have positive effects across multiple studies (Christenson & Reschly, 2010; Elbaum, 2014; Epstein, 1995; Fish, 2008). However, there is a very limited study done in multiple disabilities and parental involvement in training personal skills in children in the Indian context. Therefore, the present study aims to identify the impact of parental involvement in training personal skills in children with multiple disabilities.

Method

Sample

Thirty children with multiple disabilities (cerebral palsy with intellectual disabilities) and their 30 mothers selected for this study using purposive sampling technique. Both males and females within the range of 6 years to 19 years and mothers within the range of 25 to 50 years. These children were selected from pre-primary, primary, secondary and pre-vocational level special schools in Chennai.

Tool

The adapted functional assessment checklist was used to measure the child's functional level of personal skills. Parent's involvement was assessed with self-constructed parental involvement questionnaire (PIQ). The questionnaire consisted of general background about the child, the family members and level of training in personal skills like eating, drinking, toileting, brushing, bathing, dressing and grooming.

The questionnaire was constructed in both English and Tamil. Parental involvement was rated with a four-point rating scale coded by 0,1,2,3 as no, low, moderate and high involvements in extending regularity of training, spending time for training, concentration on training and training of their children professionally. Adapted functional assessment checklist was used to assess the present level of functioning of the children before and after the training of parents. The personal skills checklist was constructed based on the developmental milestones to measure the child's corresponding level from zero age to nineteen years. The present checklist was developed and validated with the inter-rated reliability score 84.6 with split half method.

Development of training module for training of parents

The investigator developed a training module for training parents on how to use the manual and home training methods for their children. The training module contended with objective components of target skills, principles of teaching, strategies of teaching, skills with pictorial illustration and task analysis, method, materials, instructions and evaluation methods. The investigator used lecture method for training the parents with power point presentation, demonstration, modelling and videos. The manual was developed bilingually (in Tamil and English) with instruction and material adaptation.

Procedure

Prior to data collection written consent was elicited from parents. All the parents were interviewed in a quiet room with the help of a prepared questionnaire. Parental involvement was assessed with the help of a parental-involvement-questionnaire. Parents were asked to rate their involvement on training their children in personal skills like eating, drinking, toileting, brushing, bathing, dressing and grooming. Further, all the children were assessed with the help of an adapted functional assessment checklist. Pilot study was conducted to see content and duration of the assessment. Based on the initial assessment, training was given to all parents thrice a week for a period of three months through lecture method with power point presentation and demonstration using different prompts and teaching methods. after three months of training, the investigator reassessed the involvement of parents and the performance of children.

Results and Discussion

It is revealed from the pre- and post-test scores that the parental involvement in the personal skills related to training their children on a regular basis, concentration on training, spending time with them, and training them professionally had improved significantly. The data were analysed qualitatively and quantitatively with SPSS 20 version.

Table 1. Pre and Post Test Frequency & Percentage of Functional Assessment of Personal Skills of Children with Multiple Disabilities

Domains	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
Emerging	13	43.3%	5	16.7%
Dependent	3	10%	7	23.3%
Independent	14	46.7%	18	60%

The Table above shows the pre- and post-test frequency and percentage score of personal skill deficit among children with multiple disabilities. The pre-test result shows that 43.3% children are in emerging level, 10% are in dependent level and 46.7% are in independent level respectively. The post-test scores obtained from the adapted functional assessment checklist shows that among children with multiple disabilities 16.7% are in emerging level, 23.3% are in dependent level and 60% are in independent level respectively. The results reveal that the pre- and post-test scores significantly differ and so it is concluded

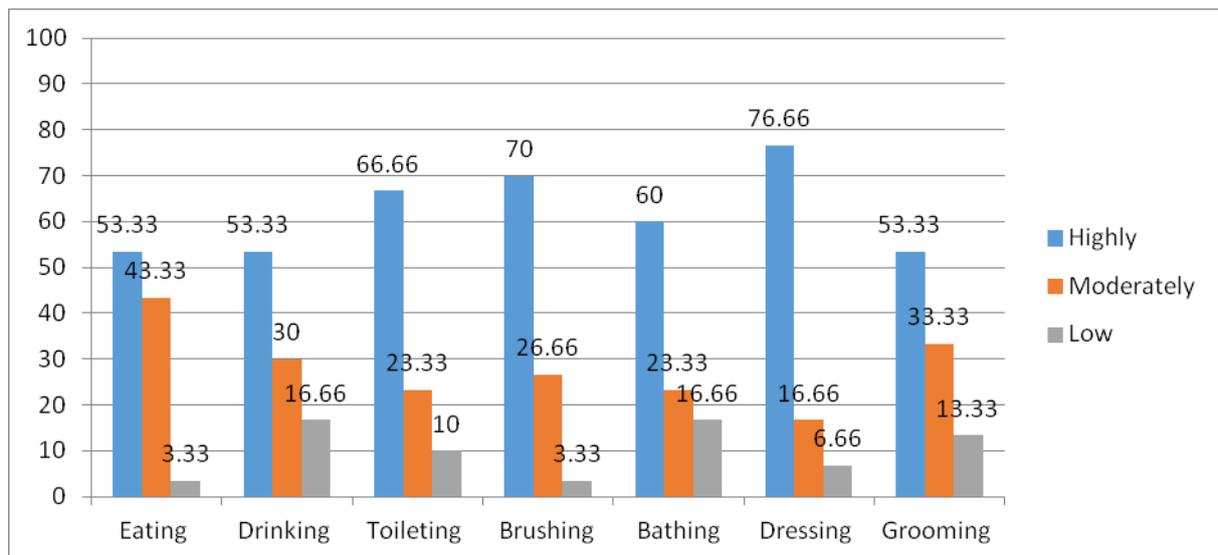
that the parental training increased the involvement of parents in training the personal skills of their children.

Table 2. The Mean, Standard Deviation and t-value of Functional Adapted Assessment of Children with Multiple Disabilities

Variables	N	Mean	SD	T	df	Significance
Pre personal	30	40.03	29.476	7.439	29	0.000
Post personal		55.23	32.119	9.419		0.000

The Table above shows the performance of children before and after training. The mean and t' value of pre- and post-test scores are statistically significant at 0.000 levels.

Figure 1. Percentage of Parental Involvement in training Personal Skills of their children



The figure above indicates the different levels of parental involvement in training personal skills of their children. Regarding high involvement 76.6% are in training dressing skills, 70 % are in training brushing, 66.6% are in training toileting, 60% are in training bathing, and 53.3% are in training eating, 53.3% are in training drinking and 53.3% are in training grooming. Regarding moderate involvement, 43.3% are in training eating, 33.3% are in training grooming, 30% are in training drinking, 26.6% are in training brushing, 23.3 % are in training both toileting and bathing and 16.6% are in training dressing. Regarding low involvement, 16.6 % are in training drinking and bathing, 13.3% are in training grooming, 10% are in training toileting, 6.6% are in training dressing, and 3.3% are in training eating and brushing.

Table 3. Parental Involvement on Personal Skills of Children with Multiple Disabilities.

Variables	Tests	Score		t	df	Significance
		Mean	SD			
Regularity	Pre	23.71	2.812	2.731	6	.034
	Post	26.00	1.000			
Concentration	Pre	26.14	2.854	4.260	6	.005
	Post	27.71	1.976			
Time spend	Pre	24.14	2.116	4.804	6	.003
	Post	27.00	1.826			
Professionally helping	Pre	20.00	2.517	7.249	6	.000
	Post	24.86	1.773			

The Table above shows a significant difference between parents in their regularity in training, concentration, spending time with their children and helping them professionally because there is a significant difference between pre- and post- test scores. Overall involvement of parents shows an increase after training the parents. The present finding agrees with the findings of Entwisle (1990), Hobbs et al.(1984) and Lareau (1989) who had found that the family status variables and related factors such as time, energy, community contacts were significantly related to the involvement of parents in their decision-making and influence.

Conclusion

Children with loco motor and cognitive disabilities need lots of training for all the components. As for their personal skills, they pose a greater challenge to their parents. These latter have obtained adequate experience and knowledge in handling their children effectively even though they might fail to address their needs appropriately. Hence, during the counselling sessions, the parents must be counselled properly on the actual conditions as well as the importance of all the activities of their children. Here the support of the teachers support is very important because the children spend more time in the special education classroom. Teachers could prepare a manual for training in pictorial form and in the regional language with simple steps. This will serve as a valuable guide and be a welcome support for parents to provide appropriate training in helping their children in a professional manner.

Consequently the stress level of parents will also be considerably reduced in training children with multiple disabilities.

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