

Mental retardation: a global problem

Dr. I. K. Pai

THE issue of mental handicap has an international importance because it is one of the serious problems, the world is facing today. Though the mentally retarded persons had always been with us, the awareness of the problem and concept of mental handicap have become well spread rather recently all over the world. The studies in this area are passing through a phase of rapid development. However, the problem needs a multidisciplinary approach to tackle it in an effective way. Clinicians, geneticists, psychologists, psychiatrists, bio-chemists, social workers, educators etc., have to work together to make any significant contributions.

Right from the human civilization, the nations have largely rejected from the human scene the people who are mentally retarded. They are regarded at best as hopeless burden or at worst as a threat to safety and decency. Despite universal sympathy for mentally handicapped, unlike in the developed countries, a humanitarian and enlightened view of retardation is virtually absent in our country.

It is estimated that about 2-3% of global human population suffers from mental retardation of different levels and unfortunately majority of them are below the age of 15 years. In India, though there has been no country wide survey to assess the magnitude, small scale surveys undertaken in different parts of the country reveal that the Indian scenario is not differ-

ent from the world scene, indicating that we are having about 20 million mentally retarded persons amongst us.

Mental retardation is a syndrome found in many disorders of known etiologies. It is defined as a condition of arrested or incomplete development of intellectual capacity arising from inherited causes or induced by diseases or injury. Factors which give rise to mental retardation are complex and arise from interplay of genetic and environmental factors. Mental retardation is also associated with one or more causes such as imbalances in amino acid metabolism, defects in lipid metabolism, impaired metabolism of mucopolysaccharides, chromosomal aberrations, chromosomal translocations, mosaics, single gene disorder, consanguineous marriages, culture etc., According to WHO criteria, mental retardation could be classified as mild (IQ 52-67), moderate (IQ 36-51), severe (IQ 20-35) and profound (IQ below 20). It is in the last two categories that some etiological factors could be identified and in the etiology of these biochemical and genetic factors play a significant role. It is also in these types there is a hope and scope for early detection and early intervention. Further, it is unfortunate that in a rural and agrarian country like ours, where education is not considered as an important asset, those with mild retardation go un-noticed and is inherited from generation to generation with much ease.

Mentally handicapped persons are those, who are impaired

with intelligence and in ability to cope with the complexity of day to day life. There is no sharp dividing line between normal and sub-normal nor those who are retarded equally impaired in all human functions. Many of the mentally retarded are physically sound. But they can not co-ordinate the body movements. Changes may be fostered towards the maximum development of human qualities by the process of education, socialization and physical care. Service of MR have the same goals as services for all children and adult. Only hope for mentally handicaps is the fact that every individual (no matter how severely impaired) is capable of learning as long as life endured and is responsive to the environment. However, though the MR learns from their experiences, they live in the shadow of their deformities like any other persons living with their physical handicap.

Mentally retarded (MR) child can take its birth in any family. Though the scientists know several reasons for mental retardation, yet the mystery of mental retardation is not fully understood.

Once the family realises that MR child is born in their family, the members of the family should provide good nourishment, better training and best love and affection to the MR child, so that it can improve a lot and can lead its life without much help from the others. The training provided to the child will not only help the child to develop physically but also

helps in overall development. Because of this, the scientists pay utmost importance for the training in early stages of MR child's life.

Generally we do not pay much attention for the mental agony or the sufferings of the parents of MR child. At the same time, it is not advisable by such parents to neglect the MR child. If at all the parents neglect the child, it will have profound affect on the child's learning process, education and over all development. So, the parents of MR child should never be carried away by the emotions. They should understand the reality and take the situation as a part of life and see that what best they can do to develop the child into a better citizen of the country.

Whenever the MR child is born in the family, the parents will be generally subjected to three main agonies such as 1) arrival of such child will be surprise arrival in the family 2) the parents think why such a child is born only to them and 3) the future time and money they have to spend for the child. When MR child arrives in the family against the ambitions of the parents, many of the parents will be disgusted in life or feel astonished over the surprise arrival, may change their attitude towards the mental retardation of the world. Many of them over a period of time console themselves and will serve for the betterment of such children of the society.

Several parents love their MR child because it is their progeny;

at the same time they hate it because it is MR. The parents of such children have to face different problems at various stages of child's growth for eg; when the child attains schooling age, when it seeks for some job, when it sexually matures etc., To face such problems the parents have to be guided properly well in advance and should be provided with some training to tackle such problems effectively. By doing so, the parents can play a crucial role in the overall development of the MR child.

According to our constitution, all the children between the age of 6 and 14 have to have schooling. However, it could not have been possible for all these years. That too, amongst MR, only one out of hundred gets education. In our country there are about 286 special schools meant for MR children. But their number is too small compared to the number of MR children in the country. That is why for the over all development of MR children, there should be integrated education system. By doing so, the problem of dropping out of MR children because they could not compete with normal children will be overcome. When a MR child studies along with other MR children, they too learn very fast and in a better way. Further, as there are several levels of MR it will be easy to test them and teach them. Keeping these things in view, as first step, the MR children should be made to have their education in general school, but in separate classrooms with separate curriculum.