

SUMMARY

Introduction

Mental retardation refers to a deficiency in intellectual function coupled with impairment of adaptive function. *Intellectual function* is measured by standardized intelligence tests that yield an intelligence quotient individuals scoring below 70 are considered to be mentally retarded. *Adaptive function* is the individual's ability to perform effectively consistent with expectation for age and culture in the following area: communication, daily living skills, social skills, social responsibility, and independence. (*Fortinash and Worret, 2003*). Children who are cognitively challenged need to learn the maximum amount of self-care possible. Doing so provides them with a sense of control and accomplishment. The nurse assess whether children need special aids to achieve such skills as brushing teeth, combing hair, taking bath and eating (*Pillitteri, 2003*).

Aim Of The Study

This study aims to assess daily living activities of mentally disabled children attending specialized institution in response to caregivers practices.



Subject and Methods

The sample was chosen from scholars and consisted 67 caregivers from **ELtarbia El Fekrya school and Rehabilitaron and Care Center** and 70 mentally retarded childern from **EL Tarbia El-Fekrya and Rehabilitation and Care center**.

To collect data of the study the following tools were used

1-Interview questionnaire for caregivers was includes three parts

- 1-Socio-demographic status.
- 2-Knowledge about mental retardation disorder (Definition, Cause Management, Needs of mental retarded children ,Problem which facing caregivers ,Behavior of caregivers with mentally retarded children).
- 3-Practice of caregivers to train mental retarded children on daily living activities.

2-Observation check list for mentally retarded children include:

- Self-care assessment according to nursing system that includes the following levels dependent, partial dependent, and independent level.

The findings of the study can be summarized as follows:

According to biosocial characteristics of caregivers and mentally retarded children.

The findings showed that more than half of caregivers were 25:35 year, and about two third of them male . More than half highly educated and more



than half of mentally retarded children were 13-18 years as regard of child sex, about two third of children of sample were male.

As regards knowledge of care givers about mental retardation disease there were significant difference between each group. According to needs of mentally retarded children the result showed the presence of health, social, psychological and rehabilitation needs. As regards social needs the child need visits to sibling and family and be accepted from another people. The findings showed psychological needs as a communication needs as correct errors intense language expression and stuttering and need a clear message to understand a sentence. Independent needs, the result showed the child needs the ability to make daily living skills and increases self-esteem. Concerning self-trust needs, the child need encouragement and give the child a sense of responsibility.

As regards to problems which faces caregivers during dealing with mental retarded child.

In relation to psychological problems the caregivers suffering from fear and stress and frustration that related to a slow development and decrease the ability of the child to understand.

Concerning to supplement problems it is presented in inadequate especial teacher and caregivers whose dealings with mentally retarded child, also inadequate of instrument of rehabilitation needs.

Concerning behaviors which are used by caregivers to overcome the wrong attitude of mental retarded child.



The result revealed that more than half of caregivers use explanation of the wrong action and repeat, and others caregivers accept the wrong with comment, also the care givers use the attraction of attention method.

As regard practice of caregivers train mentally retarded child on daily living activities. The result showed that caregivers at private institution more helpfull with mental retarded child, and they more cooperative with the child. While at government institution they need more training to deal with mentally retarded child during daily living activities to improve independency of the child. There were significant differences between government and private caregivers that appears in practice of feeding, showering, personal hygiene, walking and running, home activities, transportation and use telephone.

According to the observation of the mentally retarded children at both government and private institutions. There were significant differences between practice of children to daily living activities at both government and private institutions. That appears at ability to prepare meal, ability to clean him/her self after elimination, the ability to care of their clothes, personal hygiene ability to do activities and ability to answer on telephone. The majority of children's practices of daily living activities in depended group and partial dependent groups. This could be due to that deficit of self-care and practice of this skills, our result, the study revealed that practice of children at daily living skills at government institution decreased than practice of children at private institution that due to ignorance of caregiver at government institution to practice the daily living activities, also the study, showed that, most of children need assistance to be able to do the daily living activities.



As the results of this study the following recommendation were formulated:

- 1- Setting programs that assists in providing self care training and therapeutic treatments to residents of mental retardation center: demonstrates activities such as bathing and dressing to train resident in daily self-care practices converses with residents to reinforce positive behaviors and to promote social interaction.
- 2- Day activities program for mentally retarded children: this day designed to serve those who desire to participate in a program that offers a variety of individualized activities that include training in activities of daily living and personal care assistance recreation, education social skills development.
- 3- Caregivers provide plan as group work for activities of daily living , social skill development and Education are incorporated into weekly schedules for who require growth in these areas.
- 4- Working on training individuals, by putting general policy for training individuals by:-
 - a- Constructing sector in education which responsible for continuous training for all teachers which will benefit children with handicapped in their brains.
 - b- Preparing individuals working in professional training, there is a big shortage.
- 5- Involving of members of caregivers at institution should include nutritionists, audiologists, orthopedists, speech pathologists, ophthalmologist physical therapists, social worker and psychiatrists, that to over come all needs of mentally retarded child.

