

Chapter 2

Review of Literature

Reviews in study have been taken from sources like journals, electronic databases like Science Direct, Google Scholar, Pub Med, etc. to gain insight and gather information about the research problem under study.

Review Layout

1. Prevalence of Intellectual Developmental Disability among children.
2. Challenges faced by parents of children having Intellectual Developmental Disability
3. Effectiveness of intervention Program on child's adaptive behavior.
4. Effectiveness of Parenting Skill Program on Parental self-efficacy.
5. Effectiveness of Parenting Skill Program on parental mental well-being
6. Effectiveness of Parenting Skill Program

Prevalence of intellectual developmental disability among children

World Health Organization (WHO 7th March, 2023) report stated that around 1.3 billion world population suffered from one or other type of disability. This disability affects one in six children, which accounts 16% worldwide.¹ In India, 2.21% of the population is disabled in some way.⁴ As per Statistical Profile: 2021, the proportion of intellectual disable person was approximately 0.2%. The prevalence rate of ID in state of Uttar Pradesh and Delhi was found to be 0.2 % and 0.1 % respectively³

India has a high rate of intellectual Developmental disability (IDD). Among mental problems, intellectual Developmental disability barely comes in third after anxiety and depressive disorders. To determine the pooled estimate of the prevalence rate of ID, a systematic analysis and meta-analysis was done by the Russell PS et al (2022) in India. International and national descriptive studies, cross sectional and epidemiological studies were searched. Out of 290 studies, 19 articles were included. Results of the study revealed that rate of proportion of intellectual disability was found to be almost 2% in India, which will increase the burden on the nation as well as on worldwide.⁴

Pattnaik et al. (2021) analyzed the National Family Health Survey (NFHS)-5th report from 2019 to 2021 in order to estimate proportion rate of disability. The research study adopted a cross-sectional design and 28, 43,917 participants underwent screening using computer-assisted personal interviews. The participants were selected for research through a two-step sampling method. It was concluded that India has nearly 4.52% children living with disabilities and this disability rate was found four people per 100 people. The most prevalent kind of disability was locomotors (44.70%), present mostly in the age group of 0–14 years whereas intellectual disability rate was found to be 20.28%. Furthermore, Lakshadweep/UTs had the highest overall prevalence rate whereas Delhi, Mizoram, and Sikkim had the highest incidences of mental, locomotors and speech disabilities, respectively. Therefore, more emphasis should be given on programs, services related to disability should be provided to people free of cost who are in great need of it.⁵⁶

Prospective research done by Rani et al. (2018) to examine the prevalence, patterns of dysfunction, and severity of impairment within families with a child who has an intellectual disability and children who are typically developing. Study result showed that out of 62 families in both the groups, 53% of families with special needs children and 19% of families with typically developing children experienced family dysfunction. Therefore, study concluded that family dysfunction was more common among families with a child having special needs. The patterns of dysfunction differed between families with special needs children and those with typically developing children.⁵⁷

A comprehensive literature review and meta-synthesis was carried out by Buckley et al. (2020) in a view to estimate prevalence of mental health problems among ID children and adolescents. Nineteen studies were involved, comprising 6151 children and adolescents. Findings of research showed major psychiatric disorders among ID children and adolescents were viz. Conduct Disorders 34%, attention deficit hyperactivity disorder (ADHD) 30% and anxiety disorder 21%.⁵⁸

As per National Health Interview Survey conducted in USA among children of three to seventeen years between 2009 and 2016 reported by McGuire et al, the estimated prevalence of Intellectual Disability was found to be 11.1% followed by MSHL 6.4%, Cerebral Palsy 3.2%, blindness and hearing loss 1.6%.⁵⁹

Challenges faced by the parents of children having Intellectual Developmental Disability

Ntshingila et al. (2021) conducted a qualitative study in Giyani from November 2018 to January 2019 to explore and document the perspectives of parents who had

children with intellectual disabilities. Participants were selected using purposive sampling, and information was gathered by in-depth conversation, notes taking and by observing the participants behavior towards their ID child. It was revealed that majority of parents of children with ID experienced variety of problems when it came to caring for them such as maximum parents reported psychological distress (such as future anxiety, depression, despair), lack of support from their family and community in handling and controlling the inappropriate behavior of their ID child. Furthermore, along with various caring challenges, some parents were having spiritual faith in God who will heal their problems. Additionally, the study suggested that there should be an integrated approach among family members and health care professionals in managing the inappropriate behavior of ID child. Researcher also identified the need of conducting the awareness program for the community people and parents with aim to improve the adaptive behavior of the ID child.⁶⁰

A multi phased study including qualitative and quantitative approach done by Sanchez et al. (2021), with aim to identify the constraints, coping methods used and experienced by the inclusive education teachers while working with students having intellectual disabilities in Cebu City. Participants were selected through the judgmental sampling techniques and data was gathered from 13 inclusive education teachers by interview method. The study's finding showed that among 10 management constraints, only 3 were stressful for inclusive education teachers (Such as individualized Education Program, session plan, participating in children well-being), out of 10 support system constraints, only 2 were noticed stressful at some extent and out of 19 behavioral problems, 10 problems including child's temper tantrum behavior, throwing, withdrawal

behavior, aggression etc. were triggering the stress among educators. Whereas caretaker and lecture room related problems were not be stressful for the inclusive education teachers. Additionally, majority of inclusive education teachers' previous experience, religious belief and personal and professional efficacy were found to be useful for handling the stressors. Hence, study result showed that managing the inappropriate behavior of the students were the most dominate issue and triggering the psychological distress for inclusive education teachers and these behavioral problems were managed by the healthy coping strategies through intellectual, interpersonal and bodily coping techniques. It was suggested that special schools should design their educational system curriculum as well as special collaborative teaching approach in such a way that their inclusive education teachers can excel their practical competency in dealing with the intellectual disabilities student.⁶¹

A correlational and cross-sectional research conducted by the Jandrić et al. (2021) to examine the self-efficacy of parents in two special centers located in Croatia. 107 parents with the age of 28 to 57 years and children with the age of 7 to 14 years participated in the study. There were three categories of parents selected such as parents without intellectual disability children, parents having children with mild level of ID, and children with moderate/severe ID. The result of the study showed that parental satisfaction had indirect relationship with child's intellectual disability, parent's occupation & perceived stress whereas parental education had direct relationship with parental satisfaction. Furthermore, parental self-efficacy had indirect relationship with perceived stress, and parents' educational level, but there was no relationship with child's intellectual disability. According to the results, sense of competency considered

significant aspects in terms of reducing the behavioral challenges and more emphasis should be given on interventions and programs that would assist the parents in coping the problems pertaining to their child's intellectual disability.⁶²

A research study done by Maheswari et al. (2020) to compare the Parental Stress and QOL among both caregivers of ID Children in Erode, Tamil Nadu. The study recruited those 60 parents whose children were having intellectual disability and aged two to eighteen years. Findings of research highlighted that mothers were having more stress (18.15 ± 3.65) as compared to the fathers (13.47 ± 4.24) whereas QOL was more or less same in both parents (mother 52.53 ± 7.20 and fathers 55.68 ± 10.03). Study concluded that parental stress worsens the QOL of both parents. The study suggested that intervention will help to improve the parental mental well-being.⁶³

Gribanova et al. (2020) conducted descriptive research to identify mother's perspectives towards their special needs child. The study recruited twenty-eight mothers whose children attended the center for Therapeutic Pedagogy and Differential Education. It was reported that some of the mothers were happy with their bond with their children and hardly had any family conflicts over how to raise a child. Although mothers generally have good attitudes toward their children with special needs, they frequently have ambiguous or adverse opinions when comparing their children to others. They undervalue children's individual interests and activities and have unbiased demands for their children with special needs. Furthermore, majority of women rated their current interactions with their special needs child favorably; on the other hand they frequently rated their interactions poorly with special needs child in the past, which reflect the

prevalence of concerns, fears, and feelings of guilt for their special needs child. Additionally, at least 14% of mothers were having an unfavorable attitude towards their special needs children and they require specialized psychological and educational help for replacing unrealistic demands on them.⁶⁴

Gebeyehu et al. (2019) conducted cross-sectional research to investigate strain, support networks, and satisfaction among caregivers of ID children. Research study was carried out in 2 Government Special institute of Ethiopia and these special schools were selected through the purposive sampling technique and caregivers of ID children were enrolled through the systematic random sampling method. Data was collected by triangulation method. Study findings showed that caregivers raising children with ID experienced a significantly greater burden and lesser degrees of life satisfaction and social support. Therefore, it was summarized that caregivers experienced great burden, which can be reduced by enhancing the social support which will increase their life satisfaction as well.⁶⁵

A descriptive study by Lalehgani et al. (2018) was done in Iran to explore QOL in terms of health of mothers of children with intellectual disability. Total 306 mothers selected for the study and allocated to the group I (153 mothers having children with ID) and group II (153 mothers having children with normal intelligence). The results highlighted that around 46.8% of mothers having children with ID reported poor QOL in terms of health, whereas 96.5% of mothers of children with normal intelligence reported moderate to high level of quality of life, only few 3.5% has experienced low quality of life. Furthermore, it has been identified that the mothers of children with intellectual

disability were more prone to medical issues, worry, stress, and sadness, reduced self-esteem and worse functional levels, as a result of which their QOL was getting reduced.⁶⁶

Descriptive-comparative research on needs of parents of mentally retarded children throughout their lifespan in both public and private sector institutes of mental retardation conducted by the Mohammed et al. (2016). Data were collected from 112 caregivers by interviewed method. The information was collected through an interview technique. The study results revealed that intellectual, bodily and interpersonal demands were highly significant in both sectors and also these needs of caregivers were not affected by age, gender and level of disability. However, in the private sector, father's employment influenced social demands, whereas in the public sector, father's education affected cognitive demands of their disabled child. The study recommended the establishment of special counseling centers for addressing the difficulties faced by families having children with mental retardation. They also suggested implementation of media programs aimed at increasing public awareness regarding the demands and entitlement of children with disability.⁶⁷

Mushtaq et al. (2015) did research to examine parental attitude towards handling the inappropriate behavior of their ID children. It was decided to conduct an interview session, in which 74 caregivers of children with ID were chosen by convenient sampling technique. The study's findings revealed a link between the positive attitudes of both mothers and fathers towards their children with ID. In terms of positive attitudes, mean score of mothers was higher than mean score of fathers (41.72 ± 6.42), showing that mothers were more optimistic than fathers (37.00 ± 8.25). No significant difference was

observed between fathers and mothers' negative attitude towards their children with intellectual disabilities. It was suggested that further study to be done to determine the factors that affect parental views toward their ID children.⁶⁸

Edwardraj et al. (2010) carried out a descriptive study in order to identify people's opinions and points of view regarding children with intellectual disability. 62 participants which included 17 health care workers, 26 parents of intellectual disability children, 16 educators were selected through the snow ball method. Data was gathered through the focus group discussion. Researcher picked out the major themes from the FGD such as perception about causative factor of disability and its effect on whole family, community, support system and religion. Furthermore, researcher also reported that because of traditional beliefs, negative attitude related to disability was increased among people whose children was having Intellectual disability. It was recommended that there was great need of intervention to the caregivers in order to change their perception regarding disability.⁶⁹

Effectiveness of intervention on child's adaptive behavior.

Heyman et al. (2019) explored the factors that influenced the adaptive functioning of the children with developmental disabilities at school. About 170 children aged between 3 to 15 years were examined in study. The researcher collected data by structured interviews using self-structured questionnaires during home visits. It was found that family and home environment affected the adaptive behavior of DD children in the classroom. Furthermore, children who had close and encouraging connections with their mothers were more able to endure in difficult conditions, whether they arose at

home or at school, because they were more likely to believe in their positive outcome. Additionally, researcher highlighted that early intervention service system helps in enhancing the adaptive behavior of children with DD outside of the house or in the school context.⁷⁰

Research done by Adithyan et al. (2017) to examine positive and negative effects among 50 caregivers of children with ID. A targeted subset was deliberately chosen from the Sarva Shiksha Abhiyaan (SSA) Registry located in Oddanchatram, Dindigul. Majority of caregivers reported the negative aspects like health-related difficulties (sleeplessness, asthma, emotional anguish, and other health difficulties), rearing and caring related difficulties (toileting, clothing, lifting / carrying the kid, washing, medicating, feeding, and brushing), relationship and communication problems (unable to spend time with other child education because of maximum involvement with their intellectual disability child), psychological difficulties (Extreme feelings, intrusive thoughts related to child future), financial difficulties, social problems (Isolation, humiliation, and stigma) Whereas most caregivers reported positive aspects such as increased self-esteem, development of family relationships, and social responsibility.⁷¹

Phenomenological research was done by Oti et al. (2017) investigated experiences of eleven mothers having five to twelve years of children with ID. The research employed semi-structured interviews as a means of gathering information. The qualitative data underwent analysis and were subsequently categorized into six themes: emotional responses, challenges associated with caregiving, societal responses, understanding of the condition, perceived causes of the condition, and strategies for coping. Study findings

revealed that maximum of mothers shared difficulties associated with raising children with intellectual disabilities. Additionally, some of mothers also mentioned about using coping mechanisms such as relying on their spiritual beliefs, seeking support, and maintaining hope while caring for their children with cognitive impairment. Researcher also emphasized the constructive impact of coping strategies in assisting mothers throughout their caregiving journey with their ID children. The findings from this study offer valuable insights for mental health practice, policy formulation, and research endeavors. Furthermore, they serve as a valuable resource for developing intervention programs aimed at supporting parents of children with ID.⁷²

A research study done by the Schoenbrodt et al. (2016) to evaluate effect of parenting intervention in order to improve the narrative language skills in children with ID. Single group pretest posttest research method was used. The study involved the participation of 14 children comprising of nine girls and five boys, aged between five and nineteen years, each presenting with different level of intellectual disability and their parents. Every participant in the study received services from the Loyola Clinical Center. Caregivers attended an interventional service where they acquired techniques for narrative language abilities. They were also given with a set of materials and two predetermined books. Following the workshop, they continued the training at home with their children over an eight-week period. Majority of the parents reported that gaining knowledge about narrative language abilities proved beneficial in improving their child's language output and comprehension.⁷³

Fujiwara et al. (2011) conducted a non-randomized study to examine the effect of positive parenting program intervention in diminishing behavioral issues among children aged two to twelve years. Thirty eligible mothers were randomly allocated. The mothers in the interventional group went through intervention which consisted of eighteen sessions. Following the intervention, the behavior of children in the interventional showed improvement compared to those in the control group.⁷⁴

Shin et al. (2009) conducted a study to investigate effect of one-year home based intervention designed for children with ID. The study involved thirty children with intellectual disabilities, aged between 3 and 6 years. Among them, sixteen were allotted to interventional group and fourteen in control group. In interventional group, children with ID received training, which included techniques such as modeling, demonstration, and role play. On the other hand, control group did not undergo any training program. Data regarding adaptive behavior of children was collected prior to and following the intervention. The findings revealed improvements in most of the domains of adaptive behaviors in intervention group compared to the control group.⁷⁵

Effectiveness of Parenting Training Program in improving the parental self-efficacy

According to multiphase research undertaken by Whiting et al. (2019) to examine the effect of an intervention on self-efficacy and resilience among parents of children with disabilities. Sixteen parents were enrolled for study. Data was collected by the interview method. Four major themes were created. Psychological adaptation, realistic adaptation, social connection and parent-child relationship. As a result of intervention program, most of parents reported the increased self-concept, self-motivation and felt

better supported and stronger. Furthermore, there was a notable decrease in the distress and significant improvement in parental confidence and resilience were noted observed after the intervention.⁷⁶

A comprehensive literature review was carried out by Hohlfeld et al. (2018) aimed to investigate efficacy of parenting interventions in enhancing parental self-confidence among parents of young children with intellectual disorders. Researcher studied the 25 research articles and revealed that parenting interventions resulted in significant improvement in parental self-confidence levels compared to initial assessment. Additionally, this review suggested that healthcare professionals should emphasized to implement such training programs that boost parental self-confidence.⁷⁷

According to controlled clinical research done by Barlow et al. (2006) aimed to investigate efficacy of an intervention designed for parents of children with disabilities aged up to 16 years. About ninety-five parents were randomly allocated to treatment (49) and control group (46). Parents who were in treatment group introduced to eight-week sessions on the other hand, no intervention were provided to parents in control group. The findings showed significant reduction in anxious mood of parents, improvement in self-efficacy and psychosocial well-being in managing their children sleeping pattern and eating habits were observed in intervention group when compared to control group.⁷⁸

Sofronoff et al. (2002) investigated the effect of parent management training on self-efficacy of parents of children with developmental disorder named Asperger disease, aged between six to twelve years. About thirty-six parents were enrolled to interventional group and twenty in control group. Findings revealed that parents in intervention groups

reported reduced problematic behaviors and improved self-confidence after the interventions, both at the four week and three-month follow-up assessments compared to control group. Furthermore, it revealed a variation in self-confidence between mothers and fathers. Mothers reported more improvement in self-efficacy after the intervention compared to fathers.⁷⁹

Effectiveness of parenting skill program on parental mental well-being

Savari et al. (2021) did cross-sectional research in Iran to compare the QOL and resilience among mothers having children with disabilities and those with typical neuro developed children. About 240 mothers were selected by convenient sampling technique in that there were 120 mothers who were having children with disabilities and 120 mothers were having children with typical neurodevelopment. The findings revealed lower QOL among mothers of children with disabilities compared to mothers of children with typical neurodevelopment. The quality of life was influenced by variables such as having a special abled child, educational level, and resilience. These findings emphasized the importance of implementing rehabilitative and nurturing services aimed at enhancing the QOL of mothers who were having children with disability. Service providers, policymakers, rehabilitation and welfare institutes, and other relevant organizations can benefit from the insights derived from this study. In the light of the study's outcomes, it is recommended that these entities develop educational programs and training courses that promote resilience enhancement, with the goal of improving the QOL, particularly among mothers who currently experienced a lower QOL.⁸⁰

Marquis et al. (2020) compared mental health of parents of children with or without DD. Study concluded that depression or other psychological issues were experienced by parents of children with DD compared to parents of children without DD. Furthermore, study also revealed that parents of children with DD may require programs and services aimed at enhancing their mental well-being.⁸¹

Ashori et al. (2019) conducted a quasi-experimental study to examine mental health among mothers of children with ID. Eighteen mothers were allocated to experimental and control group randomly. The intervention consisted of 12 sessions, each lasting eighty minutes, which were delivered to the mothers in the experimental group. The study's result revealed that this parenting program was effective in reducing both physical and psychological symptoms of mothers in experimental group compared to control group.⁸²

A study done by Bujnowska et al. (2019) on future anxiety among parents of children with and without DD. The study was done in eight special schools of Eastern Poland. Total 103 parents of children with typical development were compared with 167 parents of children with DD. Researcher reported that future worry was greater among mothers having children with DD as compared to fathers of children having DD or not having DD. Furthermore, mothers having children with DD had more anxiety regarding their future health and the meaning of their future life than father having children with DD. Based on the study's results, mothers of DD children are more likely to be at increased risk of experiencing anxiety in the future.⁸³

A cross-sectional investigation done by Gogoi et al. (2017) to examine the psychosocial aspect of mothers with children who have ID and compare these aspects with those of mothers with normally developing children in Tezpur, Assam. Mothers of children with ID and mothers of normally developing children were purposively selected and assigned to first group and second group, sixty in each group, respectively. The first group reported more anxiety and depression than the second group. The QOL of mothers of disabled children was negatively correlated with anxiety and depression. They concluded that anxiety and depression had significant impact on QOL of mothers having children with ID.⁸⁴

Neece et al. (2016) conducted an experimental investigation aimed to determine efficacy of intervention on parents' mental well-being and parental stress among parents of children with intellectual disability. Approximately, 46 parents of children with ID recruited to intervention and control group. Parents of intervention group underwent the multicomponent intervention whereas; parents in control group did not receive any specific intervention. Study findings revealed that parents belonging to the intervention group reported notable reductions in stress and depression, along with higher levels of life satisfaction and fewer behavioral issues in comparison to parents in control group.⁸⁵

Effectiveness of Parenting Skill Program

A descriptive study was carried out by Vankayala et al. (2021) with the view to examine effect of intervention on stress perceived by parents whose children were having ID in selected Special School, Chittoor dist., Andhra Pradesh. Total 353 parents were recruited in the study through stratified sampling method. Findings of the study

revealed change in mean scores of parents' perceived stress significantly ($t=-37.026$; $p=0.001$) which means that parents' stress levels dropped after two years of particular training compared to when ID children first entered the institution. Furthermore, research revealed that teaching the children with intellectual disabilities will increase their social skills, lessen their dependency on their parents, and thereby lessen the difficult situations for parents.⁸⁶

An experimental study was undertaken in Addis Ababa by Tefera et al. (2021) on effectiveness of intervention based on positive parenting on stress level of mothers having ID child. Pretest-Posttest Control Group design was adopted. About 14 study sample were screened and allocated to two groups. Intervention was given to the mothers of children with intellectual disability in case group whereas no intervention was administered to control group. Findings of the study revealed that positive parenting intervention can be an effective approach to support parents in reducing stress, improving their mental health, and enhancing their ability to raise children with intellectual disability. These outcomes have the potential to benefit both parents and their children, leading to improved family dynamics and overall well-being.⁸⁷

A longitudinal study in Java, Indonesia done by Widyawati et al. (2021) among parents of children with DD to investigate if positive parenting served as a mediator between parental resilience and QOL of children with DD. Indonesia. The data were collected over three cycles, in first cycle 497 families, in second cycle 224 families, and 209 families in the third cycle. Findings of the study suggested that parenting intervention played a pivotal role and served as important key factor in improving resilience of parents

and QOL of children with DD. Hence, positive perception on parenting improves the QOL of parents with DD through the implementation of constructive parenting strategies. Furthermore, researcher emphasized the need to promote effective parenting within the families that have children with DD.⁸⁸

A randomized control trail was done by Bordini et al. (2020) to investigate effect of parent training based on video modelling to enhance the functionality and alleviate symptoms in children diagnosed with autistic disorder and developmental disorder. Parents of 67 children with autistic disorder and mild disability randomly allocated to case group thirty-four and thirty-three to the control group. Parents in the case group went through parenting intervention, which consisted of 22 sessions, however participants in control group received the conventional community-based therapy. The result of the study revealed that parenting intervention involving recorded video demonstration served as a valuable approach in increasing the intelligent quotient (IQ), social and communication skills in children with autistic disorder and intellectual disability (ID) and in minimizing symptoms.⁸⁹

A mixed method research was undertaken by Hronis et al (2020) to assess the perspectives of parents regarding the effect of cognitive behavior therapy on their children with intellectual disability. An online questionnaire was completed by 21 caregivers of children aged 10 to 17 years, with intellectual functioning of borderline to moderate. The results showed that only 10% of the respondents expressed agreement regarding their child's capability to connect thoughts, feelings, and behaviors. Meanwhile, 19% remained uncertain, and a significant majority 62% disagreed or

strongly disagreed with this idea. In summary, 76% of participants concurred that their child could partake in cognitive-behavioral therapy (CBT) with some level of assistance.⁹⁰

Experimental research done by Madhi et al (2020) to examine effect of parenting training program based on self-compassion on problems related to behavior and self-concept among children with IDD. The study consisted of pretest posttest research design. About 30 study sample were screened from 2017 to 2018 and were randomly allocated to either intervention and control group. Researcher administrated eight sessions of training program to the children with IDD who were in interventional group. The study results revealed that the self-compassion-based parenting training program was successful in improving the behavioral problems among children with IDD. Additionally, this intervention not only reduced behavioral issues in the children but also had a positive impact on the self-concept of children with IDD.⁹¹

Benitez et al. (2020) conducted a study comparing educational social skills (ESS) of parents with and without children with ID. A total of 52 parents were chosen using a convenient sampling technique. Research revealed statistically significant change in overall score of educational social skills among parents of children with ID and those without ID. Additionally, a positive correlation was observed between educational social skills and the education level of children with ID. On the other hand, for parents of children without ID, there was a significant positive association with socio-economic status, the child's age and education, and a negative association with the parent's education. It was suggested to design the social skills training for the parents of children

with ID, comprising various techniques like establishing boundaries, disciplining, showing love and attention, implementing discipline which was helpful to modify the inappropriate behavior of ID children.⁹²

A quasi- experimental study was undertaken by Center et al. (2020) in Birhan Lehetsanat Rehabilitation Center to assess the effect of intervention based on positive parenting in reducing the stress of mothers having children with ID. Twenty-eight study participants were enrolled in the study 14 for intervention group and 14 for control group. Result showed that mothers in case group had a lower mean stress level (42.57 ± 3.85) than mothers in the control group (48.57 ± 8.59), which was not statistically significant ($t=2.38$, $p > 0.05$). Statistically improvement in interactions of mothers with their children having intellectual disabilities was observed in experimental group compared to mothers in the control group. Study revealed that there was a positive effect of the intervention in enhancing mother-child bond and reducing stress experienced by mothers of children with ID.⁹³

A mixed method study was done by Arakkathara et al. (2019) to evaluate efficacy of POWER intervention on stress, resilience and well-being of mothers of children with ID. Research was done in two stages; in first stage, researcher identified the parenting issues in managing their ID child, through their own experience, discussion with mothers and by reviewing the massive literature, developed the intervention named Promotion of Well-being, Resilience, and Stress Management (POWER). This intervention consisted of 12 components. The second stage involved the experiment to evaluate efficacy of intervention program. About Ten parents participated in the study. Study's findings

concluded that this POWER intervention proved to be beneficial in lessening the stress and increasing resilience and well-being by reshaping negative thoughts, acquiring methods to enhance everyday functioning, developing strong social skills, and creating precise, realistic objectives for a better quality of life.⁹⁴

Burton et al. (2018) did an experiment study to evaluate effect of nurturing intervention for the parents having children with special needs. Around eighty-seven parents were randomly assigned to treatment group 41 whereas 46 parents in the comparison group. Parents in treatment group went through twelve sessions of the nurturing intervention program (This program was designing in view to modify the parenting practices like unrealistic expectations for children; parental lack of concern for children's welfare, physical punishment, the repression of a child's autonomy) in addition to case management services (activities included were domestic centered benefits like creating a care plan, coordinating and linking referrals, providing advocacy, and delivering crisis intervention.), whereas parents in the control group received the customized case management (CM) services. Results revealed that after intervention to the treatment group, parents were more empathetic towards their special needs. Furthermore, attitude of the parents towards physical punishment was improved and seen in both control group and treatment group.⁹⁵

Behroz et al. (2017) performed research to examine importance of training of life skills in improving social skills of students with intellectual disabilities. The study adopted the pretest posttest control group research design. Around 40 children of secondary school that had intellectual disabilities who were between the age of 16 and 18

and attended public schools in Tehran during the 2011–2012 academic year allocated randomly to the case group (Twenty) and control group (Twenty) through simple random sampling method. The case group received nine sessions of life skills training lasted for 50 minutes, whereas the control group remained in a neutral condition. The findings showed that case group significantly differed from comparison group with regard to overall social skills and subscales (cooperation, assertiveness, and self-control) (P 0.005). Furthermore, it was emphasized that educators and parents should emphasize on acquisition of interpersonal skills.⁹⁶

A randomized control trial was done by Hinton et al. (2017) to analyze the effect of a telehealth parenting intervention on parenting and parental self-efficacy among 98 parents of children between two to twelve years with disabilities. Parents were randomly allocated to intervention (51) and control group (47). Finding revealed that telehealth parenting intervention proved to be successful for the parents in strengthening their parental skill and managing the inappropriate behavior of their disabled child. Furthermore, it was also revealed that after the administration of intervention, parents showed considerable changes in their parenting styles and self-efficacy, but there was no improvement in the behavioral and emotional issues of their children, but after 3-month follow-up, it was improved.⁹⁷

A descriptive research study conducted in Assam by Hazarika et al. (2017) aimed to investigate parental attitude towards their children with intellectual and developmental disorder. Participants were chosen using a convenient sampling technique. The study included the 66 parents whose children with intellectual disorders were receiving mental

health services at two daycare institutions. The findings of the study revealed that while parents showed love and acceptance for their children with intellectual developmental disorder, they also exhibited frustration, disappointment, and excessive protectiveness. These factors significantly hindered the child's adaptive functioning and the development of their ability to live independently. Therefore, it was suggested to involve the parents of children with IDD in various programs alongside children's rehabilitation efforts, ensuring a holistic approach to caring for families with intellectual developmental disorder children.⁹⁸

Adibsereshki et al. (2016) investigate efficacy of training based on emotional intelligence on the adaptive behaviors of students having ID. Pretest posttest control group design was adopted. Data was collected from 32 participants who had mild level of IDD and were in the age between 14-18 years. Findings of the study showed that mean posttest and follow-up score was higher in intervention group compared to control group. Therefore, study revealed emotional intelligence intervention was found to be effective in enhancing the adaptive behaviors of Children with ID in experimental group. Hence, special educators and other health care professionals could utilize this program while dealing with ID children.⁹⁹

A randomized control trail was done by Bearss et al. (2015) to compare the effectiveness of parent training with parent education to manage the behavior problems in children diagnosed with ASD. The investigator conducted an initial screening of 267 children, out of this, 180 children were within the age group of 3 to 7 years, diagnosed with autism spectrum disorder and presenting disruptive behaviors, were allocated

randomly to two groups. The first group underwent parent training, which included 11 essential sessions, along with two optional sessions, two telephone follow-up sessions, and two in-home visits. This training aimed to equip parents with concrete strategies for handling disruptive behavior. On the other hand, second group received the parent education which had twelve interactive sessions and one home visit, primarily focused on imparting information about autism but did not include any specific behavior management strategies. It was reported that parent training which incorporated activities such as ABC model (Analysis Behavioral & Consequences), pictorial calendars for everyday task, time management, encouragement and preplanned avoidance proved to be more efficacious than parent education in reducing behavior problems among children diagnosed with ASD.¹⁰⁰

A community based cross-sectional research done by Bazzano et al. (2015) to evaluate the effect of Mindfulness based stress reduction (MBSR) training program on caregivers and parents having children with DD. The intervention program, comprising of eight weekly sessions, each lasting two hours, was provided to the participants in the study. MBSR intervention included the techniques like self-awareness activities, guided imaginary, Deep breathing exercise, practicing conscious relaxation techniques, understanding of the children's DD. A total of 93 participants screened, 76 of them attended the initial session of the intervention program. Among these participants, 66 individuals (87%) completed both the pre- and post-program questionnaires. Furthermore, a subsequent survey was administered two months later, 39 participants (59%) successfully responded to this questionnaire. Study results concluded that MBSR

intervention was an effective approach for alleviating stress and enhancing the mental well-being of parents and caregivers of children with DD.¹⁰¹

A study done by Kleefman et al. (2014) to highlight the efficacy of Stepping Stones Triple P parenting intervention in reducing the psychosocial problems among parents of children with borderline and mild ID in northern area of Netherlands. 209 parents, whose children aged between 5 to 12 years were assigned randomly to case and control group. Parenting intervention consisted of eight to ten sessions lasting for 40-90 minutes were given for 10 to 12 weeks to the parents of borderline and mild intellectual disability children in case group whereas usual care given. Findings of the study identified the psychosocial issues such as child behavioral problems, and parenting stress found to be more common among parents of children with mild to moderate ID. It was concluded that Stepping Stones Triple P (SSTP) is a parenting assistance intervention designed to help parents of children with borderline and mild intellectual disability in resolving the psychosocial issues.¹⁰²

An experimental study done by Francesca et al. (2008) was conducted with an objective to modify parents' misconceptions about mentally retarded children and their behavioral issues, alleviating parental stress, enhancing parental self-confidence, strengthen the parenting skills. Fourteen parents aged between 35 to 47 years were selected and seven each were assigned to case and control Group). The research was conducted in five stages: (1) Initial Assessment, (2) Training, (3) Post-Training Evaluation, (4) First Follow-up, occurring three months later, and (5) Second Follow-up, done at six months later. The result of the study revealed that positive parent child

interaction was consistent and persistent after administrating parent skill training in case group as compared to control group. Researcher also reported the significant improvements in parents' perceptions regarding their mentally retarded children's issues, as well as decreased stress levels and improved parenting abilities.¹⁰³

SUMMARY

This chapter included the existing literature review to acquaint oneself with different aspects and challenges related to the problem under investigation.