CHAPTER 4

ANALYSIS AND INTERPRETATION OF DATA

This chapter presents the findings of the study, which are interpreted from the data collected for the research and analyzed in accordance with the study's objectives.

Data collected was first coded and entered in a master data sheet and then analyzed using SPSS 22.0 version. Data was checked for normal distribution by applying Kolmogorov-Smirnov test. As data of all dependent variables viz child's adaptive, parental self-efficacy and mental well-being were not normally distributed, Mann-Whitney test was used to compare means between experimental and control group. Furthermore, Friedman test was used to find the difference within the groups.

Organization of findings

The analyzed data were organized and presented according to the objectives of the study.

 Table 6: Comparison of socio-demographic characteristics of children between groups.

		Experimental Group		Contro	l Group		р
Sample Characteristics		<i>n</i> =80		n=	-80	X ²	value
		Frequency	Percentage	Frequency	Percentage		
Age (Years)	5 to 8	40	50.0	49	61.2	2.051	0.15
	9 to 12	40	50.0	31	38.7		
Gender	Male	51	63.7	53	66.2	0.110	0.740
	Female	29	36.2	27	33.8		
Level of	Mild	46	57.5	46	57.5	0.000	1.00
Intellectual	Moderate	34	42.5	34	42.5		
Disability							
Duration of	1 to 3 Years	43	53.8	37	46.2	0.900	0.34
Attending	4 to 6 Years	37	46.3	43	53.7		
special school							

n=160

Note: Fisher's exact/ Chi square p<0.05

Table 6 depicts that most of children with IDD in experimental 50% (n=40) and in control group 61.2% (n=49) were in the age group of five to eight years. The most of children with IDD in experimental 63.7% (n=51) and in control group 66.2% (n=53) were males, majority of children in both groups 57.5% (n=46) had mild category of ID, most of children in both groups 57.5% (n=46) exhibited mild category of ID, maximum number of children with IDD attended the special schools since one to three years in experimental 53.8% whereas in control group 53.7% (n=43) attended the special schools since three to six years.

All demographic variables of children with IDD were similar in both groups therefore, both the groups were homogenous.

Table7:	Comparison	of socio	demographic	characteristics	of	parents	between
groups.							

n=160

Sample Charac	teristics	Experime	ntal Group	Contro	l Group		p value
		n=	=80	n=	=80	X ²	
			Percentage	Frequency	Percentage		
			(%)		(%)		
Parent's	Mother	68	85.0	64	80.0	0.693	0.405
Relationship	Father	12	15.0	16	20.0		
with child							
Age of Father	25-35	58	72.5	64	80.0	1.242	0.26
(Years)	36-45	22	27.5	16	20.0		
Age of Mother	25-29	20	25.0	23	28.8		
(Years)	30-34	47	58.0	48	60.0	0.947	0.62
	35-39	13	16.3	9	11.3		
Religion	Hindu	69	86.2	73	91.2	4.36	0.113
	Muslim	11	13.8	05	06.2		
	Sikh	00	00.0	02	02.5		
Place of	Urban Area	76	95.0	73	91.2	0.87	0.349
residence	Rural Area	04	05.0	07	08.8		
Type of family	Joint Family	19	23.8	15	18.8	0.59	0.440
	Nuclear	61	76.2	65	81.2		
	Family						
Monthly	20,000-40,000	61	76.3	59	73.7	0.133	0.71
Income	41,000-60,000	19	23.8	21	26.3		
(in Rupees)							
Mother's	Primary	14	50.0	14	50.0	0.273	0.872
education	High school	31	47.7	34	52.3		
	Graduation or	35	52.2	32	47.8		
	above						

Mother's	Unemployed	69	86.3	68	85.0	0.51	0.822
employment	Private	11	13.7	12	15.0		
status							
Father's	Graduation	45	59.0	40	50.0	6.309	0.043*
education	High school						
	education	35	56.3	34	42.5		
	Primary	00	00.0	06	07.5		
	education						
Father's	Govt.	18	48.6	13	16.25	1.00	0.317
employment	Private	62	50.4	67	83.75		
status							

Note: Fisher's exact/ Chi square test, p<0.05

Table 7 depicts that majority of parents in experimental group 85% (n=68) & in control group 80% (n=64) were mothers, maximum number of fathers in experimental 72.5% (n=58) and in the control group 80% (n=64) fell within the age range of 25 to 35 years, maximum number of mothers in experimental group 58% (n=47) and in control group (60%) (n=48) were between ages group 30 to 34 years, majority of parents in experimental group (86.2%) (n=69) and in control group 91.2% (n=73) belonged to Hindu religion, majority of them in experimental 95% (n=76) and in control group 91.2% (n=61) and in control group 81.2% (n=65) were living in nuclear family, most mothers in the experimental 86.3% (n=69) and in control group 85% (n=68) were unemployed while a significant number of fathers in experimental group 50.4% (n=62) and in the control group 83.75% (n=67) were employed in private sector job.

All socio-demographic variables of parents with IDD were similar in both groups except father's education (p=0.043). Therefore, both the groups were homogenous.

Objective 1: To determine the effectiveness of parenting skill program on child's adaptive behavior.

H0: There would be no significant difference in child's adaptive behavior score between the experimental and control group after the implementation of Parenting skill program at <p0.05 level.

Table 8: Com	parison	of child's a	daptive	behavior sco	re between	the groups.

n=160

Level of Adaptive Behavior of	Score Range	Experimental Group <i>n</i> =80		Со	ntrol Group <i>n=</i> 80	X ²	р
children		n	Percentage (%)	n	Percentage (%)		value
Mild	50-70	28	(35%)	26	(32.5%)	0.112	0.738
Moderate	35-49	52	(65%)	54	(67.5%)		

Note: Fisher Exact test/Chi Square test, p <0.05

Table 8 depict that maximum number of children with IDD in both the experimental group 65% (n=52) and control group 67.5% (n=54) were in the moderate category of ID. Both the groups were compared for homogeneity in terms of level of adaptive behavior of children.

Chi-square test was found to be 0.112 (p=0.738). The results revealed no significant difference between the groups with regard to adaptive behavior of children. Therefore, it could be inferred that both groups were similar in terms of adaptive behavior of children.

 Table 9: Comparison of the category of child's adaptive behavior between the groups

			Experimental Group (n=80)			Control Group (n=80)				
Variable	Category	Score Range	Baseline	6 th Month	9 th Month	12 th Month	Baseline	6 th Month	9 th Month	12 th Month
			f (%)	f (%)	f (%)	f (%)	f (%)	f (%)	f (%)	F (%)
ild otive wior	Mild	50-70	28 (35)	60 (75)	62 (77.5)	62 (77.5)	26 (32.5)	26 (32.5)	26 (32.5)	26 (32.5)
Child Adaptive Behavior	Moderate	35-49	52 (65)	20 (25)	18 (22.5)	18 (22.5)	54 (67.5)	54 (67.5)	54 (67.5)	54 (67.5)

Level of Child's adaptive behavior 90% 78% 78% 80% 75% 68% 68% 68% 68% 65% 70% 60% 50% 35% 40% 33% 33% 33% 33% 25% 30% 23% 23% 20% 10% 0% Exp Exp CONT CONT Exp CONT Exp CONT Baseline At 6th Month At 9th Month At 12th Month ■ Mild Moderate

Fig. 5: Bar graph representation of comparison of the level of child's adaptive behavior between groups.

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78

Table 9 and fig. 5 depict that the number of children decreased in moderate category and increased in mild category after the intervention in experimental group showing effectiveness of the intervention.

 Table 10: Comparison of mean of child's adaptive behavior score between groups

n=160

Variable	Assessment	Experimental Group (<i>n</i> =80)	Control Group (n=80)	Mean Difference	p value (Mann Whitney U Test)
		Mean ± SD	Mean ± SD		
	Baseline Assessment	46.362±8.09	45.60±7.78	0.76	0.543
	Post Test 1 6 th month	53.425±8.95	45.60±7.78	7.82	0.001*
Child	Post Test 2 9 th month	52.850±9.77	46.15±7.96	6.70	0.001*
Adaptive Behavior	Post Test 3 12 th month	55.288±8.87	45.63±7.76	9.65	0.001*
	Friedman Value	163.040	6.000		
	p value	0.001	0.112		
Note: df=3	*Significa	ant p<0.05			

Table 10 shows significant increase in mean posttest score of adaptive behavior of children, at 6^{th} month 53.425 ±8.95, 9^{th} month 52.850±9.77 and 12^{th} month 55.288±8.87 in experimental group (F=163.040, p 0.001) compared to control group (F=6.000, p 0.112) concluding that the parenting skill program was beneficial in improving adaptive behavior of children.

Thus, researcher rejected the null hypothesis and accepted the research hypothesis.

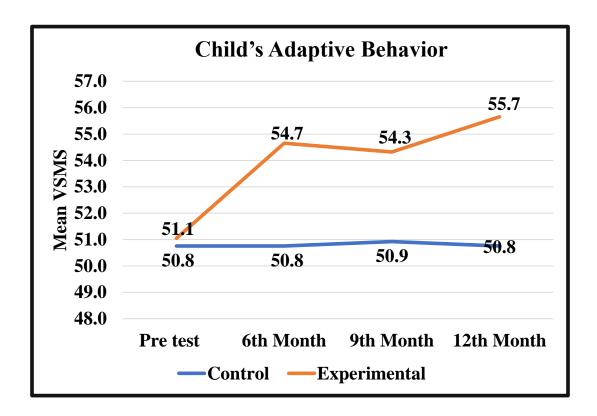


Fig. 6: Line Graph showing the mean of child's adaptive behavior score between the groups

Comparison of adaptive behavior domain between groups.

Table 11: Comparison of mean of adaptive behavior of children for self-help generaldomain between experimental and control group.

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п	-	L	O	U

Self-Help	Experimental Group <i>(n</i> =80)			ol Group =80)		p-value (Mann-
General (SHG)	Mean ± SD	Median (IQR)	Mean ± Median SD (IQR)		Z- value	Whitney U test)
Baseline Assessment	11.6 ± 1.2	11.8 (10.5 - 12.5)	11.5±1.3	12.0 (10.5 - 12.5)	-0.348	0.728
Post Test 1 6 th month	12.2 ± 1.3	12.5 (11.5 - 13.4)	11.5±1.3	12.0 (10.5 - 12.5)	-2.856	0.004*
Post Test 2 9 th month	12.2±1.2	12.5 (11.5 - 13.4)	11.6± 1.3	12.0 (10.5 - 12.5)	-2.793	0.005*
Post Test 3 12 th Month	12.1±1.3	12.5 (11.0 - 13.0)	11.5±1.3	12.0 (10.5 - 12.5)	-2.861	0.004*
(Friedman Value)	63.1]	6.6		
df p value	3.0 0.001*		3.0 0.213			
p value	0.0	01*	0	.213		

*Significant p<0.05

Table 11 and fig. 7 show that Child's adaptive behavior score for self-help general domain increased after implementing parenting skill program in experimental group at 6th month, 9th month and 12th month compared to control group concluding that parenting skill program was effective.

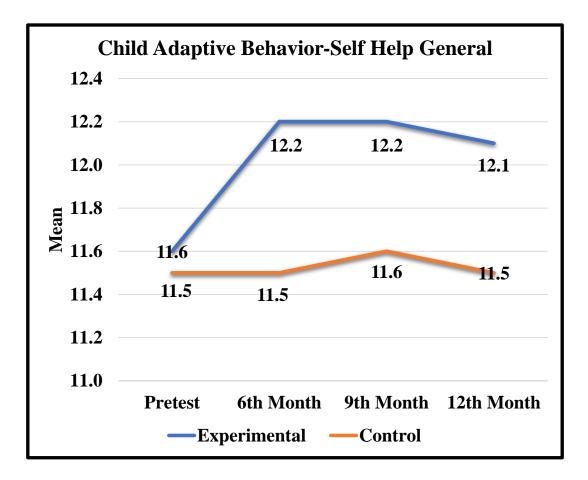


Fig. 7: Line Graph representing mean of child's adaptive behavior for self-help general domain between the groups

 Table 12: Comparison of mean of adaptive behavior of children for self-help eating

 domain between the groups

Self-Help	-	ntal Group =80)	Control Group (n=80)		Z- value	p-value (Mann-
Eating	Mean ± SD	Median	Mean ±SD	Median		Whitney
(SHE)		(IQR)		(IQR)		U test)
Baseline	7.9±1.1	8.0(7.0 - 8.5)	7.7±1.2	7.5(6.6 - 8.5)	-0.855	0.393
Assessment						
Post Test 1	8.4±0.9	8.5(7.5 - 9.0)	7.7±1.2	7.5(6.6 - 8.5)	-3.550	0.001*
6 th month						
Post Test 2	8.4±1.0	8.5(7.5 - 9.0)	7.8±1.1	8.0(7.0 - 8.5)	-3.188	0.001*
9 th month						
Post Test 3	8.6±1.1	8.5(7.5 - 9.5)	7.7±1.2	7.5(6.6 - 8.5)	-4.419	0.001*
12 th Month						
Test Value		·				
(Friedman	10	03.6		2.3		
Value)						
df	3.0		3.0			
p value	0.0	001*	0.	503		

n=160

*Significant p<0.05

Table 12 and fig 8 show that adaptive behavior score of children for self-help eating domain increased after implementing parenting skill program in experimental group at 6th month, 9th month and 12th month compared to control group concluding that parenting skill program was effective.

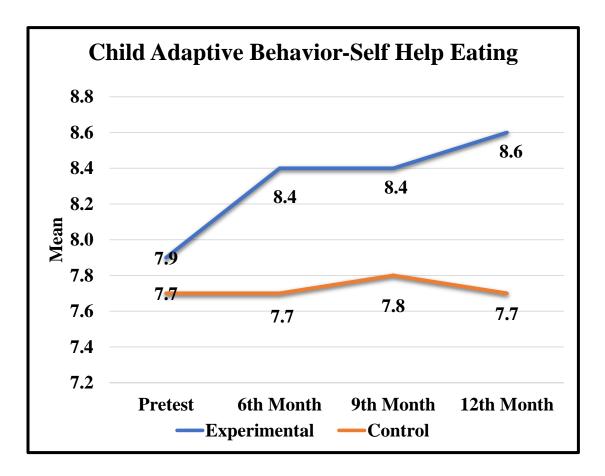


Fig. 8: Line Graph representing mean of child's adaptive behavior for self-help eating domain between the groups

 Table No. 13: Comparison of mean of adaptive behavior of children for self-help

 dressing domain between experimental and control group.

n=160

Self-Help Dressing	Experimental Group (n=80)		Control Group (n=80)			p-value (Mann-
(SHD)	Mean ± SD	Median (IQR)	Mean ± SD	Median (IQR)	Z- value	Whitney U test)
Baseline		6.0		6.0	-	
Assessment	6.2±1.7	(4.5 - 7.5)	6.0±1.9	(4.5 - 8.0)	0.304	0.761
Post Test 1		7.5		6.0	-	
6 th month	7.3±1.5	(6.5 - 8.5)	6.0±1.9	(4.5 - 8.0)	4.321	0.001*
Post Test 2		7.5		6.0	-	
9 th month	7.3±1.6	(6.0 - 8.5)	6.0±1.7	(4.5 - 7.5)	4.654	0.001*
Post Test 3		8.0		6.0	-	
12 th Month	7.9±1.5	(7.0 - 9.0)	6.0±1.9	(4.5 - 8.0)	6.385	0.001*
(Friedman						
Value)	133.2		0.7			
df	3.0		3.0			
p value	0.00	1*	0.8	80		

*Significant p<0.05

Table 13 and fig 9 show that adaptive behavior score of children for self-help dressing domain increased after implementing parenting skill program in experimental group at 6th month, 9th month and 12th month compared to control group concluding that parenting skill program was effective.

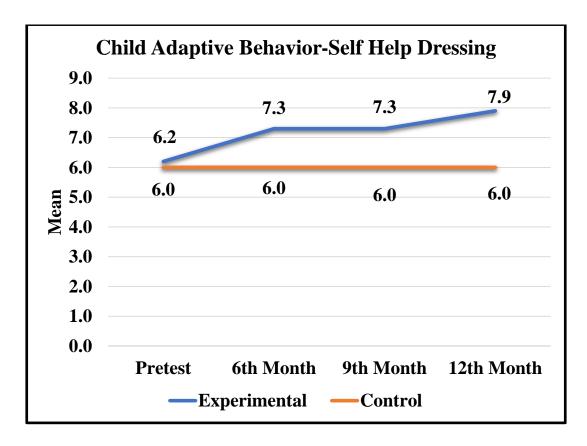


Fig 9: Line Graph representing the mean of child's adaptive behavior for self-help dressing domain between the groups

Table 14: Comparison of mean of adaptive behavior of children for self-directiondomain between groups.

<i>n</i> =160

Self- Direction	Experimental Group (n=80)			Control Group (n=80)		p-value (Mann-
(SD)	Mean ± SD	Median (IQR)	Mean ± SD	Median (IQR)		Whitney U test)
Baseline		0.5		0.5	-	
Assessment	0.8 ± 0.9	(0.0 -1.0)	0.7±0.9	(0.0 - 1.0)	0.011	0.991
Post Test 1		0.5		0.5	-	
6 th month	0.7 ± 0.8	(0.0 - 1.0)	0.7±0.9	(0.0 - 1.0)	0.385	0.700
Post Test 2		0.5		0.5	-	
9 th month	0.7 ± 0.8	(0.0 - 1.0)	0.7±0.9	(0.0 - 1.0)	0.288	0.773
Post Test 3		0.5		0.5	-	
12 th Month	0.7 ± 0.8	(0.0 - 1.0)	0.7±0.9	(0.0 - 1.0)	0.043	0.966
(Friedman				•		
Value)	3.8		2.4			
df	3.0		3.0			
p-value	0.28	30	0.4	91		

p<0.05

Table 14 and fig 10 show that adaptive behavior score of children for self-direction domain increased after implementing parenting skill program in experimental group at 6th month, 9th month and 12th month compared to control group concluding that parenting skill program was effective.

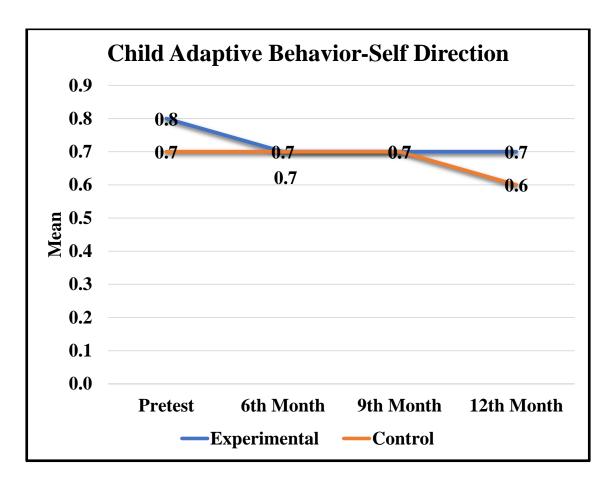


Fig. 10: Line Graph representing the mean of child's adaptive behavior for self-direction domain between the groups

Table 15: Comparison of mean of adaptive behavior of children for occupationdomain between groups.

n-100

Occupation	Experimental Group		Control Group			p-value
(OCC)	(n=8	80)	(n=80)		Z-	(Mann-
	Mean ± SD	Median	Mean ± SD	Median	value	Whitney
		(IQR)		(IQR)		U test)
Baseline		6.8		7.0	-	
Assessment	7.1±1.6	(6.0 - 8.0)	7.2±1.5	(6.0 - 8.0)	0.272	0.786
Post Test 1		7.5		7.0	-	
6 th month	7.8±1.3	(7.0 - 9.0)	7.2±1.5	(6.0 - 8.0)	3.450	0.001*
Post Test 2		8.0		7.0	-	
9 th month	7.9±1.2	(7.5 - 8.5)	7.1±1.6	(6.0 - 8.0)	4.032	0.001*
Post Test 3		8.0		7.0	-	
12 th Month	8.0±1.3	(7.5 - 8.5)	7.2±1.5	(6.0 - 8.0)	4.365	0.001*
(Friedman						
Value)	83.1		4.8			
df	3.0		3.0			
p value	0.00	1*	0.1	87		
*Significant	m<0.05					

*Significant p<0.05

Table 15 and fig 11 shows that adaptive behavior score of children for occupation domain increased after implementing parenting skill program in experimental group at 6th month, 9th month and 12th month compared to control group concluding that parenting skill program was effective.

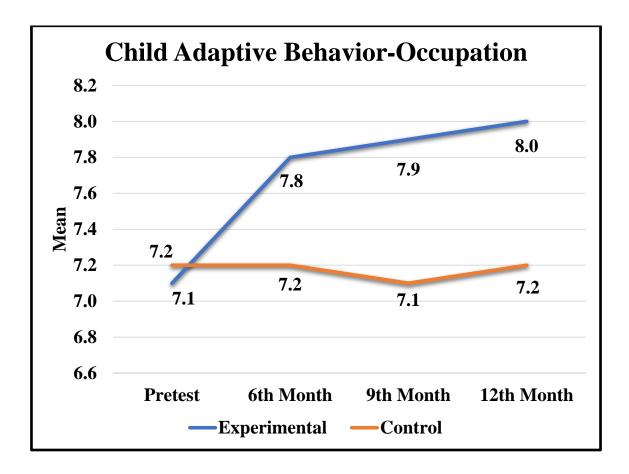


Fig. 11: Line Graph representing the mean of child's adaptive behavior for occupation domain between groups

Table 16: Comparison of mean of adaptive behavior of children for Communicationdomain between groups

n=	1	6	0

Communication	Experimental Group		Control Group		Z-	p-value
(COM)	(n=	=80)	(n	=80)	value	(Mann-
	Mean ±	Median	Mean ±	Median		Whitney
	SD	(IQR)	SD	(IQR)		U test)
Pre-Test						
(Baseline		6.5		6.5	-	
Assessment)	6.3±1.6	(5.0 - 7.5)	6.0±1.6	(4.5 - 7.0)	1.301	0.193
Post Test 1		6.5		7.0	-	
6 th month	6.3±1.5	(5.0 - 7.9)	6.2±1.6	(5.0 - 7.5)	0.374	0.708
Post Test 2		7.5		6.8	-	
9 th month	7.1±1.7	(6.0 - 8.5)	6.2±1.6	(5.0 - 7.5)	3.278	0.001*
Post Test 3		7.0		6.8	-	
12 th Month	6.5±1.5	(5.0 - 8.0)	6.2±1.6	(5.0 - 7.5)	1.407	0.159
(Friedman						
Value)	93.6		7.9			
df	3.0		3.0			
p value	0.0)01*	0.	048*		
*Significant r	<0.05					

*Significant p<0.05

Table 16 and fig 12 shows that adaptive behavior score of children for Communication domain increased after implementing parenting skill program in experimental group at 6th month, 9th month and 12th month compared to control group concluding that parenting skill program was effective.

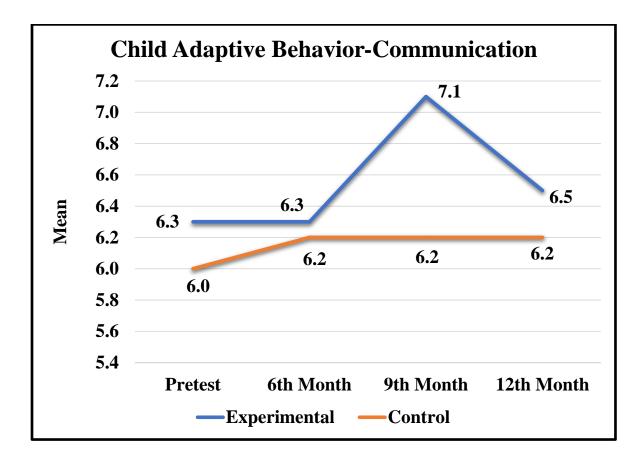


Fig. 12: Line Graph representing the mean of child's adaptive behavior for communication domain between the groups

Table 17: Comparison of mean of adaptive behavior of children for locomotiondomain between groups.

n - 100

Locomotion	Experime	ntal Group	Control Group		Z-	p-value
(LOC)	(n=	=80)	(n=80)		value	(Mann-
	Mean ±	Median	Mean ±	Median		Whitney
	SD	(IQR)	SD	(IQR)		U test)
Pre-Test						
(Baseline		6.0		5.5	-	
Assessment)	5.4 ± 1.3	(4.5 - 6.5)	5.1 ± 1.5	(4.5 - 6.0)	1.195	0.232
Post Test 1		5.5		5.5	-	
6 th month	5.6 ± 1.3	(5.0 - 6.5)	5.1 ± 1.5	(4.5 - 6.0)	1.550	0.121
Post Test 2		6.0		6.0	-	
9 th month	5.6 ± 1.3	(5.0 - 6.5)	5.4 ± 1.3	(4.5 - 6.5)	0.963	0.335
Post Test 3		6.0		5.5	-	
12 th Month	5.7 ± 1.2	(5.0 - 6.5)	5.1 ± 1.5	(4.5 - 6.0)	1.974	0.048*
(Friedman						
Value)	25.7		51.9			
df	3.0		3.0			
p value	0.0	01*	0	.029		
*Significant	n<0.05					

*Significant p<0.05

Table 17 and fig 13 shows that adaptive behavior score of children for locomotion domain increased after implementing parenting skill program in experimental group at 9th month and 12th month compared to control group concluding that parenting skill program was beneficial.

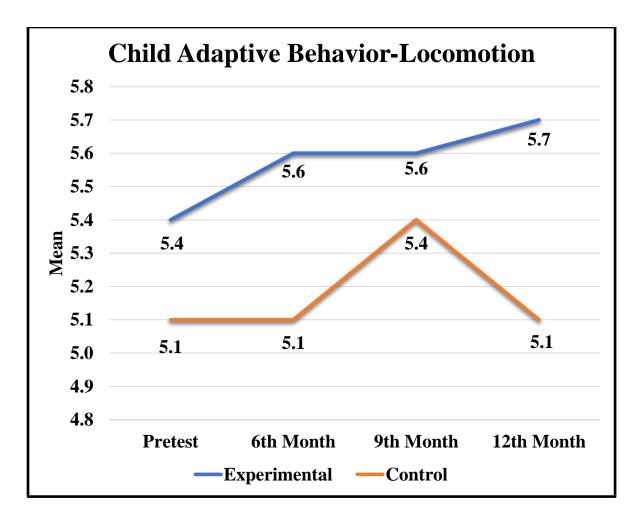


Fig. 13: Line Graph representing the mean of child's adaptive behavior for locomotion domain between the groups

Table 18: Comparison of means of adaptive behavior of children for socializationdomain between groups.

Socialization (SOC)	Experimen <i>(n=</i> 8	-	Control Group (n=80)		Z-	p-value (Mann-
	Mean ± SD	Median (IQR)	Mean ± SD	Median (IQR)	value	Whitney U test)
Pre-Test		()		()		
(Baseline		6.0		6.0	-	0.460
Assessment)	5.4±1.6	(3.5 - 6.9)	5.6±1.5	(5.0 - 7.0)	0.726	0.468
Post Test 1		7.0		6.0	-	
(6 th month)	6.0±1.7	(5.0 - 7.0)	5.6±1.5	(5.0 - 7.0)	2.575	0.010*
Post Test 2		6.8		6.0	-	
(9 th month)	6.0±1.7	(4.5 - 7.4)	5.4±1.6	(3.6 - 6.9)	3.095	0.002*
Post Test 3		6.5		6.0	-	
(12 th Month)	6.1±1.7	(6.0 - 7.4)	5.6±1.5	(5.0 - 7.0)	2.563	0.010*
(Friedman						
Value)	82.	4	5.	6		
df	3		3			
p-value	0.00	1*	0.1	30		
*Significant	p<0.05		•			•

*Significant p<0.05

Data mentioned in table 18 and fig 14 shows that adaptive behavior score of children for socialization domain increased after implementing parenting skill program in experimental group at 6th month, 9th month and 12th month compared to control group concluding that parenting skill program was effective.

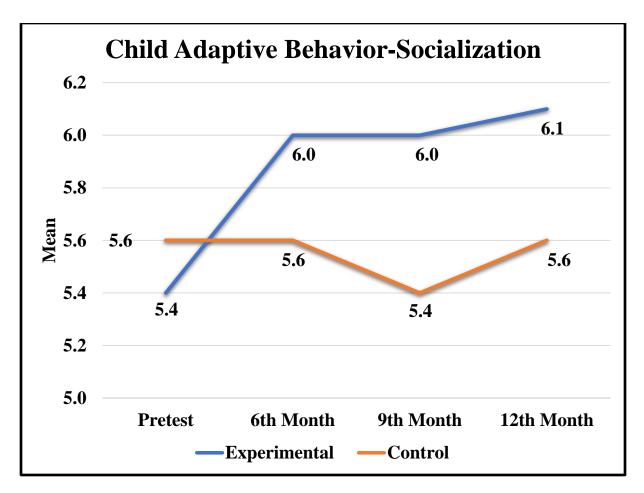


Fig. 14: Line Graph representing the mean of child's adaptive behavior for socialization domain between the groups

Objective 2: To determine the effectiveness of parenting skill program on parental self-efficacy.

H0: There would be no significant difference in parental self-efficacy score in experimental and control group after the implementation of Parenting skill program at <p0.05 level.

Table 19: Comparison of parental self-efficacy score between the groups

n=160

Variable	Experimental Group <i>(n=</i> 80)	Control Group (n=80)	t value	p value
Parental self-efficacy	Mean ± SD	Mean ± SD		
	51.013 ± 6.551	49.050 ± 6.705	1.751	0.82

Note: Chi square test p<0.05

Data presented in table 19 represent the mean score of parental self-efficacy in the experimental group is higher (51.013 \pm 6.551) compared to the control group (49.050 \pm 6.705).

The two groups were compared for significant difference in parental self-efficacy score. Chi square/ Fisher exact test was used to find significant differences between the groups. The results showed that there was no significant difference in parental self-efficacy score between the experimental and control group at p 0.82.

Therefore, it could be inferred that both the groups were similar and comparable to each other in terms of parental self-efficacy score as per results suggesting that both groups were from the same population. Table 20: Comparison of mean of Parental self-efficacy score between the groups

n=160

Variable	Assessment	Experimental Group (n=80)	Control Group (n=80)	Mean Difference	p value (Mann Whitney Test)
		Mean ± SD	Mean ± SD		
Parental self-	Baseline Assessment	51.03±6.55	49.05±6.70	1.98	0.73
efficacy	Post Test 1	73.97±7.46	48.52±7.58	25.45	0.001*
	(6 th month)				
	Post Test 2	81.60±6.30	48.12±7.09	33.48	0.001*
	(9 th month)				
	Post Test 3	87.55±6.66	48.46±7.20	39.09	0.001*
	(12 th Month)				
	Friedman Value	159.766	6.47		
	p value	0.001*	0.09		
*Significal	nt	n<0.05			

*Significant

p<0.05

Table 20 shows significant increase in mean posttest score of parental self- efficacy at 6^{th} month 73.97 ±7.46, 9^{th} month 81.60±6.30 and 12th month 87.55±6.76 in experimental group (F=6.4 p 0.0.9) compared to control group (F=159.766, p 0.001) concluding that the parenting skill program was beneficial in improving parental self- efficacy.

Therefore, researcher rejected null hypothesis and accepted research hypothesis.

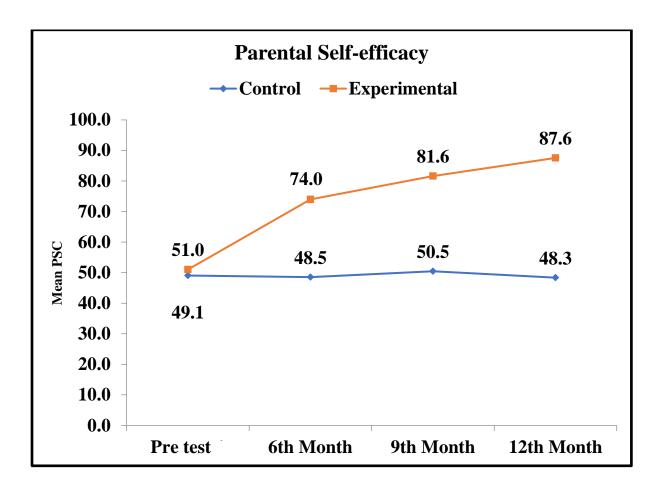


Fig. 15: Line Graph showing the comparison of mean of parental self-

efficacy score between groups

Objective 3: To determine the effectiveness of Parenting Skill Program on Parental Mental well-being.

H0: There would be no significant difference in parental mental well-being score in experimental and control group after the implementation of Parenting skill program at p<0.05 level.

 Table 21: Comparison of Parental Mental well-being score between groups

n=160

Variables	Category	Score Range	Experimental Group (n=80)	Control Group (n=80)	X ²	p value
			f (%)	f (%)		vuiue
Parental Mental well being	Very Low	0-32	29(36.2)	28(35)		0.490
	Below Average	32-40	23(28.7)	26(32.5)	2.067#	
al Men being	Average	40-59	26(32.5)	26(32.5)		
Parent	Above Average	59-70	02(25.0)	00(00.0)		

Chi Square test/Fisher Exact test

p<0.05

Table 21 represents that maximum of parents in experimental 29 (36.2%) and in control group 28 (35%) were having very low level of mental well-being. The two groups were compared for significant difference in parental mental well-being score. Chi square/ Fisher exact test was performed to find significant differences between the groups. The results revealed that there was no significant difference in parental mental well-being score between experimental and control group at p 0.490. Therefore, it could be inferred that both the groups were similar and comparable to each other in terms of parental mental well-being score as per results suggesting that both groups were from the same population.

 Table 22: Comparison of level of parental mental well-being score between the groups

			Experimental Group			Control Group (n=80)				
				<i>(n</i> =80)						
			Pre-	Post	Post	Post	Pre-	Post	Post	Post
Variables	Category	Score	Test	Test 1	Test 2	Test 3	Test	Test 1	Test 2	Test 3
		Range	f	f	f	f	f	f	f	f
			(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)
	Very Low	0-32	25	6	4	-	29	29	28	26
Parental	-		(31.3)	(7.5)	(5)		(36.2)	(36.2)	(35)	(32.5)
Mental	Below	32-40	27	4	4	8	29	29	27	28
well	Average		(33.8)	(5)	(5)	(10)	(36.3)	(36.3)	(33.8)	(35)
being	Average	40-59	28	60	60	49	22	22	23	26
			(35)	(75)	(75)	(61.3)	(27.5)	(27.5)	(28.8)	(32.5)
	Above	59-70	-	10	12	23	-	-	2	-
	Average			(12.5)	(12.5)	(28.8)			(2.5)	

n=160

Data in Table 22 and Fig. 16 illustrated that, in experimental group, majority of 28 (35%) parents of children with IDD were having average level of mental well-being, while 25 (31.3%) had very low level of mental well-being at baseline assessment. Following the implementation of the parenting skill program, there was improvement in the parental mental well-being score. It was 60 (75%) at 6th month, and remain constant at 9th month and decreased to 49 (61.3%) at 12th month respectively. On the other hand, in the control group, 29 (36.2%) majority of parents of children with IDD were having very low and below average level of mental well-being at baseline assessment. There were no

significant changes in level of parental mental well-being over the period of 6th month, 9th month and 12th month. The level of parental mental well-being similar to baseline assessment.

Therefore, it could be interpreted that intervention was effective in improving parental mental well-being in experimental group when compared to control group.

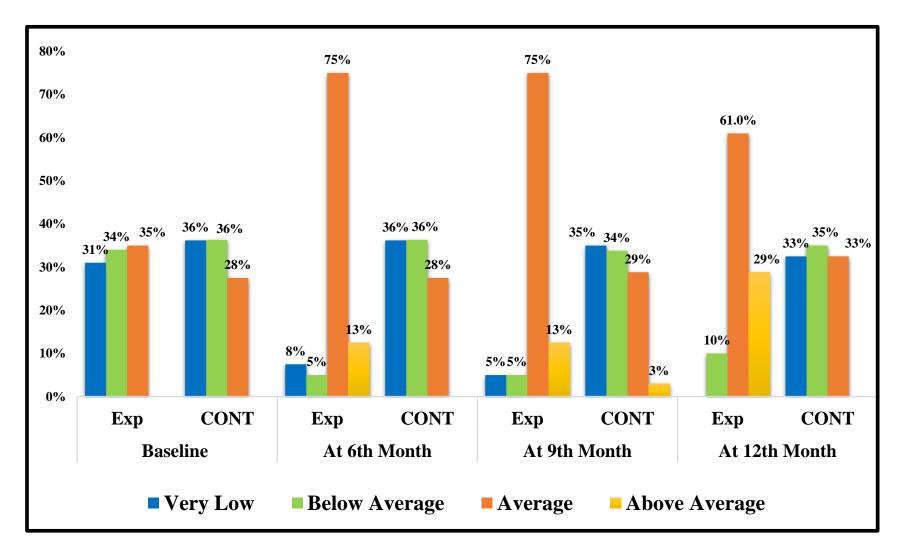


Fig. 16: Bar graph representing the parental mental well-being between experimental and control group

Figure No. 16 illustrated that after administrating the Parenting Skill Program, majority of parents were having average and above average level of parental mental well-being. Whereas, in the control group, there was no change in parental mental well-being.

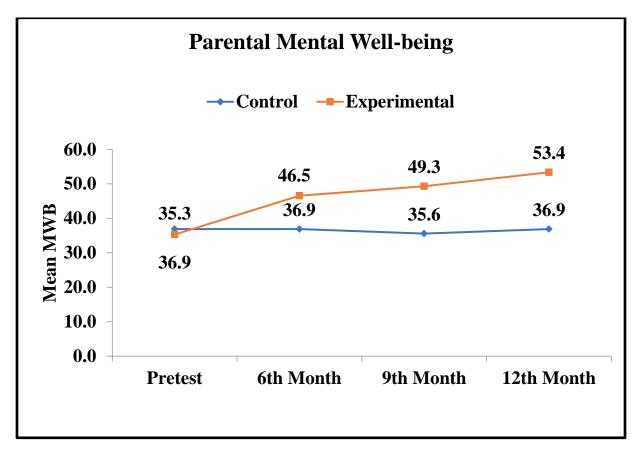
 Table 23: Comparison of mean of Parental mental-well-being score between groups

n=160

Variable	Assessment	Experimental Group (n=80)	Control Group (n=80)	Mean Difference	p value (Mann Whitney Test)
		Mean ± SD	Mean ± SD		
Parental mental	Baseline Assessment	35.30 ± 10.43	36.86± 9.93	1.56	0.262
well- being	Post Test 1 (6 th month)	46.54± 8.56	36.78± 9.88	9.75	0.001*
	Post Test 2 (9 th month)	49.33± 8.57	36.95± 9.85	12.38	0.001*
	Post Test 3 (12 th Month)	53.35± 8.66	37.03± 9.65	16.32	0.001*
	Friedman Value	218.931	6.46		
	p value	0.001*	0.09		
*Significant	n<0	05			

*Significant p<0.05

Table 23 shows significant increase in mean posttest score of parental mental wellbeing at 6th month 46.54 \pm 8.56, 9th month 49.33 \pm 8.57 and 12th month 53.53 \pm 8.66 in experimental group (F=218.931, p 0.001) compared to control group (F=6.46, p 0.0.9) concluding that the parenting skill program was beneficial in improving parental mental wellbeing.



Therefore, researcher rejected null hypothesis and accepted research hypothesis.

Fig. 17: Line Graph showing the comparison of mean of parental mental well-being score between the groups

Objective 4 To determine the correlation between child's adaptive behavior and parental self-efficacy and mental well-being before intervention.

Table 24: Correlation between child's adaptive behavior with parental self-efficacy and mental well-being before intervention.

		<i>n</i> =160		
Variables	Child's adaptive Behavior			
	r- value	p-value		
Parental self-efficacy	0.133	0.094		
Parental mental well-being	0.066	0.405		

** Pearson correlation Test, Significant at the 0.05 level

Table No. 23 depicts that there was weak negative correlation between child adaptive behavior and parental self-efficacy, although it is not statistically significant at the 0.05 level (p-value = 0.094). Additionally, there was mild positive correlation between child adaptive behavior and parental mental well-being, which is not statistically significant at 0.05 level (p-value = 0.405)

Spearman's rho correlation test was used to find out correlation between VSMS and parental self-efficacy.

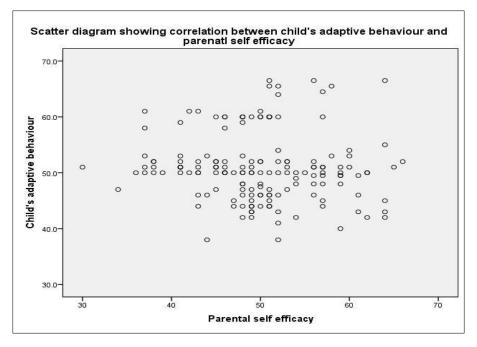
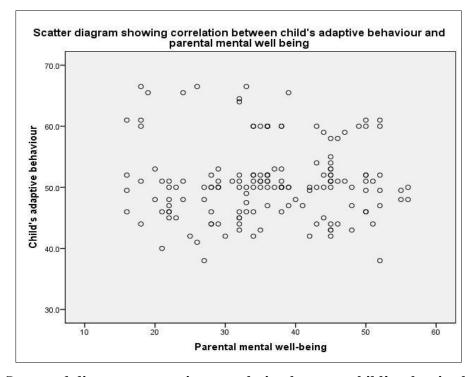
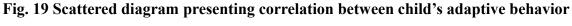


Fig. 18 Scattered diagram presenting correlation between child's adaptive behavior

with parental self-efficacy before Parenting Skill Program.





with parental mental well being before Parenting Skill Program.

Additional study findings

Did you gain	something significant from participating in the Parenting Skill program?					
Theme	Description					
Enhancement	Parents reported that it's a method which soothe myself, and I've noticed					
of Holistic Well-	significant improvements in my overall well-being and a greater sense of calm					
Being	when interacting with child having IDD					
	I couldn't discuss my problems with anyone previously because it involved					
	issues, I hadn't even confronted within myself					
	The researcher created a comfortable atmosphere, making it easy to freely					
	express yourself.					
	As a parent now, I will encourage myself to prioritize and spend time on self-					
	care.					
	Now, I have begun attending dance classes and taking steps to improve my					
	fitness, which has been enjoyable and has made me reconsider my choices.					
	Talking with other parents who have children with the same disability made me					
	feel more relaxed.					
Acceptance and	• Fathers realized that it is not only the responsibility of the mother but					
understanding	fathers too.					
the child with	• Understanding the importance of actively participating in parenting duties.					
IDD	• Intervention helped me to understand our mistakes as a parent we do.					
	• Parents reflecting on their actions and gaining a better understanding of how					
	to improve as caregivers.					
	• This program highlighted our fault of blaming our child for his/her					
	behavior.					
	• Expressing hope for personal improvement as a parent and a commitment to					
	guiding the child in the best possible way.					
	<u> </u>					

	and informative. Reported that they didn't			
informative want to lose their child. They w	ionald he relieved if their shild would be main in			
	want to lose their child. They would be relieved if their child would learn in			
techniques for better way. It's very helpful for	upbringing of my child.			
• Unique and helpful techniques.				
Effective Techniques in Parenti	ng			
Really appreciable session with pra	ctical demonstration. It will be worth to deal			
with disabled child. And I felt more	with disabled child. And I felt more relaxed while attending session.			
Really helpful for parents who need	Really helpful for parents who need guidance on parenting.			
Attending the program is a blessing	g for me, and my family can't believe getting			
all this important information for fi	ee.			
Increased Demand the sessions daily				
positivity Intervention will have great effect of	on our child if we will apply these techniques			
towards the life in our disabled child's life daily.				
of children with Organization like you should help	Organization like you should help us to do the best at home so we do not have			
IDD to suffer. Moreover, parents with t	to suffer. Moreover, parents with these kinds of children are undergoing lot of			
pressure as they cannot afford these	e therapies long term.			
Intervention was so helpful and we	Il discussed practically.			
Reported that I have learnt all small	l little things in this program. Now, I came to			
know how important first 5 Years	know how important first 5 Years to build up the child's personality with your			
continuous guidance. I guess I'm d	continuous guidance. I guess I'm doing better job now.			
From your every session I came to	know as parents what I should do. Your			
intervention is very effective. You a	are making me a better parent.			
Enlightening One of the most important things y	ou taught us that stay calm and control your			
the life of emotionsis the first thing a paren	t must think.			
children with This program not only enlightened	our special child' lives but also brought an			
IDD encouragement and positive hope i	n parents like me.			
Modification in My child's spitting behavior has	reduced in one week after following the			
parents and in aversion advise. Before this progra	m, I was telling her not to spit and it was not			
the behavior of working.				

children with	I m a struggling mother and I think I am in the right path. I think God heard my
IDD	prayer and helped me to attend your session. And I could develop the dressing
	skills, feeding skills independently. I have learnt new ideas from your program.
	Reported I really change my child's daily routine and my family behavior. Nice
	sessions for coming out from depression. It will help to keep the journey like
	this.
	My family is appreciating me the way I am shaping my child now with the help
	of your intervention.
Adequate	Had no idea how to teach and what to teach to my son previously. Now I'm
information	truly thinking about my child's behavior and miracle happened.
and great	Well explained all parenting issues.
service to	Only beautiful mind with powerful soul can do this. You are contributing in the
humanity	emancipation to humankind.
	Excellent sessions to support worried parents. Great service to humanity.
Demand the	Maximum parents requested that session to be conducted daily. They reported
session	that they are everything for their children with IDD and if they will learn the
regularly	techniques taught in the sessions then they will teach to their children in a better
	way, because their children need them most.
	You will be the light in every child's and parent's life who are going through the
	issues. These days all therapy centers have made this as business; they do not
	diagnose and helped the parents or children genuinely.
Practical and	Proved to be highly beneficial for certain parents.
Realistic	Before attending this program, we were struggling with caring for the child
Management	with IDD, but as the program has progressed, we've received more assistance. I
Approaches	now feel more capable of expressing my needs and knowing where to seek
	help.
	The most effective. While other parents reported the feeling of more capable in
	solving the problems related to their child with IDD.
	Parents of children with other developmental disorders should have the chance
	to participate in such a program.

Summary

The researcher studied the nature of the data and analyzed it according to the objectives of the study. Analyzed data was presented in different forms like tables, graphs, and figures. These presentations were described in an empirical and justified manner