

CHAPTER-V

DISCUSSION

In this chapter, the results of the present study are examined according to study objectives and in relation to the findings from other studies.

1. Socio-demographic variables of IDD children

Research findings were similar to a multi phased study conducted by Adithyan et al. in (2017) among caregivers of children with ID in Tamil Nadu, India, where it was reported that majority 34 (68%) of the caregivers had children with intellectual disabilities aged 10 years or older and a significant portion 34 (68%) of these children were boys, majority 46 (92%) of parents of children belonged to Hindu religion.⁷¹ The results of study were also similar with study done by Barlow et al. (2006) which revealed that majority of children with disabilities were in age group up to ten years in intervention group and up to twelve years in control group.⁷⁸

Findings of present research revealed that majority 52 (65%) of children with IDD in experimental and 54 (67.5%) in control group were having moderate level of intellectual disability. Similar findings reported by Faden et al. (2023) revealed that maximum of children in intervention group 5 (50%) and in control 17 (51.3%) had moderate level of symptoms related to neurodevelopmental disorder.¹⁰⁴ Another study done by Kilincaslan et al. (2019) revealed that majority of children in intellectual

disability group (ID) 26 (51%) and in autism spectrum disorder group (ASD) 23 (45.1%) had moderate level of intellectual quotient.¹⁰⁵

2. Socio-demographic variables of parents of children with IDD

Data in present research depict that most of parents in both experimental 68 (85%) and in control group 64 (80%) were mothers, maximum of fathers in both groups was 25 to 35 years, maximum of mothers in both groups were falling in age range of 30-34 years. In experimental group, the majority 35 (52.2%) of mothers were graduates, and they were not doing any jobs 69 (86.3%). Majority of fathers 45 (59%) in experimental and in control group 40 (50%) were graduates. In occupation category, majority of fathers 62 (50.4%) in experimental and 67 (83.75%) in control group were doing private job.

Result of the research was similar with study done by Barlow et al. (2006) where it was reported that majority 42 (85.7%) in intervention group & 40 (87%) in control group were mothers.⁷⁸ Another study conducted by Jenaro et al. (2020) among 515 caregivers of individual with disabilities revealed that majority 357 (69.3%) of caregivers were female and majority of them 357 (69.3%) were not doing any job.¹⁰⁶ Similarly, a multi phased study by Faden et al. (2023) reported that reported that the majority of parents were mothers 14 (51.9%) and fathers 12 (75%) and both were in the age group of 35 to 49 years. Majority of mothers 17 (63%) and 9 (56.3%) of fathers had completed bachelor's degree and were employed.¹⁰⁴ Another study done by Wakimizu et al. (2014) reported majority of caregivers were mothers 53(98.1%).¹⁰⁷

3. Effectiveness of parenting skill program on adaptive behavior

Results of present study revealed that adaptive behavior score of children in experimental group increased consistently at 6th month, 9th month and 12th month compared to control group concluding the effectiveness of the intervention. Therefore, researcher rejected null hypothesis and accepted research hypothesis stating that intervention would be beneficial in improving adaptive behavior of children with IDD.

Results of present study are supported by Kilincaslan et al. (2019) with the objective to compare the daily living skills of children with intellectual disability and AD. Findings revealed that children with AD showed lower scores compared to children with intellectual disability when it came to personal hygiene, dressing, safety and interpersonal skills.¹⁰⁵ Similar study conducted by Hofmann et al. (2021) involving one thousand one hundred twenty five ID children were between the age of four to nineteen years, found improvement in socialization among ID children attending centers.¹⁰⁸

Furthermore, present study results were similar with RCT research done by Oswald et al. (2018) reported that a group intervention called ACCESS program was found to be effective in enhancing social, adaptive, self-determination and coping skills of caregivers and adults having ASD.¹⁰⁹

As per findings conducted by Wakimizu et al. (2014) revealed reduction in children's behavioral problems, changes in parenting practice and promotion of family empowerment were observed for up to 6 months administrating the intervention.¹⁰⁷

In randomized controlled research done by Leung et al. (2012), stated effectiveness of group positive parenting program in reducing the child behavior problems and dysfunctional discipline style parental stress and conflict in experimental compared to control group. Furthermore, this positive change was sustained even during a follow-up period of six months.¹¹⁰

In a meta-analysis done by Sanders et al. in 2014, examined 116 studies examined over the last 33 years that focused on the multilevel system of the positive parenting program. This program demonstrated a significant positive improvement in children's social, emotional, and behavioral skills. Furthermore, it was associated with heightened parental satisfaction and self-efficacy, reduced parental conflict, enhanced parental adjustment, improved communication between parents, and enabled independent observation of a child's desirable and undesirable behaviors.¹¹¹ Another research done by Vankayala et al. (2021) revealed that administrating the training program to the children with intellectual disabled will increase their social skills, lessen their dependency on their parents, and thereby lessen the difficult situations for parents.⁸⁶

Another study done by Benitez et al. (2020) was revealed that educational social skills intervention was helpful in modifying the inappropriate behavior of children ID.⁹² According to a study conducted by Center et al. (2020), it was concluded that positive parenting intervention showed a positive effect in reducing the stress related to parenting of mothers of children with ID. It was also helpful in strengthening the mother-child bond.⁹³

Study findings were also similar with research done by Kleefman et al. (2014) revealed parenting intervention was beneficial for parents of children with borderline and mild ID in resolving the psychosocial issues of their children.¹⁰² According to a study done by Arakkathara et al (2019) reported that interventional program proved to be helpful in increasing the resilience and well-being of mothers of children with intellectual disability.⁹⁴

4. Effectiveness of parenting skill program on parental self-efficacy

Data presented in the present study revealed that mean score of parental self-efficacy was increased specifically, at 6th month (73.97 ± 7.46), at 9th month (81.60 ± 6.30) and at 12th month compared to control group concluding the effectiveness of intervention. Therefore, researcher rejected null hypothesis and accepted research hypothesis stating that parenting skill program would be effective in improving parental self-efficacy.

Another study by Barlow et al. (2006) revealed the significant reduction in anxious mood of caregivers, improvement in self-efficacy and psychosocial well-being in managing their children's sleeping pattern and eating habits in intervention group when compared to control group.⁷⁸ According to multiphase research done by Whiting et al. (2019), revealed that most of parents in intervention group reported increased self-concept, self-motivation, and feeling better supported and stronger as a result of the intervention program. Furthermore, there was a notable decrease in the distress and significant improvement in parental confidence and resilience were observed after the intervention.⁷⁶ A comprehensive literature review was done by Hohlfeld et al. (2018) studied the 25 research articles and revealed that parenting training programs resulted in

significant improvement in parental self-confidence levels compared to initial assessment. Particularly, parents of children under the age of 5 exhibited the most significant improvements in their levels of parental self-confidence after the parenting interventions. Additionally, this review suggested that healthcare professionals should emphasized on implementing such training programs that boost parental self-confidence.⁷⁷ Results were similar with another research conducted by Sofronoff et al. (2002) revealed that in comparison to the control group, parents in intervention groups reported reduced problematic behaviors in their children and improved self-confidence after the interventions, both at the 4-week and 3-month follow-up assessments. Furthermore, it showed a variation in self-confidence between mothers and fathers, as mothers reported improvement in self-efficacy after the intervention compared to fathers.⁷⁹

5. Effectiveness of parenting skill program on parental mental well being

Results of present research study revealed that mean score of parental mental well-being was increased specifically, at 6th month (46.54 ± 8.56), at 9th month (49.33 ± 8.57) and at 12th month (53.35 ± 8.66) compared to control group concluding that parenting skill program was beneficial in enhancing parental self-efficacy score. Therefore, researcher rejected null hypothesis and accepted research hypothesis stating that parenting skill program would be effective in improving mental well-being of parents having children with IDD.

Study result are supported by research finding done by Ashori et al. (2019) revealed that parenting intervention resulted in reducing somatic symptoms, alleviating

anxiety and depression, improving social functioning, and enhancing the overall mental well-being of mothers raising children with ID.⁸² A comprehensive review carried out by Chua et al. (2021) revealed parenting programs was helpful in enhancing the mental well-being of parents of children with DD in terms of reducing their stress, anxiety, and depression.¹¹⁴ Furthermore, the findings of the research were similar with a study done by Neece et al. (2016) revealed that intervention proved to be helpful in modifying the inappropriate behavior of children with ID and thereby beneficial in improving the mental well-being of parents.¹¹⁵

Strength of the study

1. A control group was included for the purpose of making comparisons.
2. The investigator regularly provided reminders via telephone calls and motivated them to practice the behavioral techniques which they learnt during intervention sessions.
3. This study incorporated techniques and activities that were easy to practice and recall.

Limitations

1. The actual parenting behavior of parents of children with IDD at home was not observed by the researcher.
2. Responses given by parents regarding child's adaptive behavior were taken into consideration for data collection and analysis.

Summary

This chapter included a discussion of the study's findings in accordance with its objectives. The results were contrasted with similar studies conducted on a comparable sample. Additionally, the chapter emphasized the strengths and limitations of the study.