

## Indian Parents' Role in Special Needs Children's Rehabilitation

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### ABSTRACT

The purpose of this essay is to clarify the intricate relationships between numerous topics pertaining to the rehabilitation of kids with special needs and the crucial responsibilities parents can play in that process.

Method: review of the literature and concepts.

Result and conclusion: In the family, being a parent is a cause for joy and celebration. However, when a child is disable by birth, it puts parents in a difficult predicament. Parental acceptance of the child and support of their growth and development are crucial. Parents will play a crucial role as a kid's facilitator and teacher because every child develops in sensory-motor, cognitive-perceptual, and psychosocial domains in a different way. The difficulties of raising a disabled child is complicated by India's medical and rehabilitation facilities, as well as parents' socioeconomic status, education, and disability knowledge. In this situation, parents must play a significant part in their child's growth in all spheres of life and in helping them live dignified lives in society.

**Keywords:** *Indian parents, Special need, Children, Rehabilitation*

### Introduction

For the parents, having a kid is a life-changing event. A lovely baby arrives in your home, in your family, in your community. It is a joyful and festive moment. When the new baby is introduced, the family members speculate on what the infant will become: a football star, a musician, a pilot. But what happens if it turns out that this new child has a disability? What if there are medical issues? What if issues arise regarding any potential special needs that this child may have. It can be challenging to parent a child who has a developmental delay or impairment or is at risk for developing one. The battle to manage other aspects of family life, such as raising siblings, preserving connections, and sustaining oneself, is reflected in the phrase "minimizing repercussions." [2]

650 million individuals, or around 10% of the world's population, are disabled. They make up the largest minority in the world. There are between 120 and 150 million children and teenagers with disabilities worldwide. [3].

According to the Indian Census of 2001, there are 21.9 million people is disable in India (2.15% of the total population), and 7 million people in the age range of 0 to 19 have a disability. Persons with physical, mental, speech, hearing, and visual impairments are included in this data. 35.9% of people with disabilities are in the age range of 0 to 19 years old. Every tenth child either has a physical, mental, or sensory handicap from birth or develops one over time. Disability rates of 75% are avoidable. Only 1% of disabled children receive an education, and only 20% of them live until their 40th birthday. [4]

In raising this set of kids and preparing them to integrate into society and make contributions, parents' roles become crucial. Parents can act as their own children's best advocates. [5]

### **Problems with pediatric rehabilitation**

Congenital birth abnormalities, developmental delays, developmental disabilities, and multiple disabilities are common in newborns.. However, the health sector is sometimes too underdeveloped to respond promptly or effectively to impairment, particularly in rural regions. Children with disabilities receive little specialized care.

Government hospitals' pediatric departments lack the facility and resources to care for children with impairments. Occupational therapists, physiotherapists, prosthetists and orthotists, speech therapists, and other rehabilitation specialists offer assistance to children in India with special needs, but the number of specialists at government hospitals in the states is extremely low or nonexistent. The problem is made worse by all of these barriers to a disabled child's rehabilitation.

### **Parental Problems**

The development of the child is significantly influenced by the family. In India, a child's mother in particular experiences a great deal of emotional stress when the child is delivered with a disability. In impoverished nations like India, mothers are frequently blamed for giving birth to disabled children. A kid's development can be harmed by a parent's ongoing sorrow or guilt over the fact that their child has a congenital defect, has undergone trauma, or has developed a chronic illness that may be genetically connected. (6) It's crucial for parents to approach their children and the circumstance with a strong sense of positivity and a balanced emotional response. It's crucial for parents to recognize their emotional reactions after having a kid with a disability. Children with disabilities in the Republic of India have access to specialized institutions that are equipped with schooling facilities and non-formal education preparatory programmes. (12)

### **Child-related issues**

A kid with certain disabilities might not be able to explore their surroundings and other learning opportunities for their physical-motor, cognitive, social, and psychological growth. As a result of their impairment, they are unable to socialize and play with kids their own age. The child also serves as a platform for the parents, particularly the mother, to vent their frustration and sadness. In response to the mother, the child exhibits certain behavioral issues that make it more difficult for those kids with disabilities to be rehabilitated. The importance of body image increases as a youngster enters puberty. For kids with impairments, peer contacts are especially crucial. For a child to overcome their difference and transition into adult existence, their capacity for physical, emotional, and intellectual adaptation is crucial. (6)

### **Developing Problems**

Rapid developmental changes take place throughout the first few years of life. From being completely reliant and having reflex-controlled movements, the newborn baby transforms over the course of five years into a youngster who is somewhat independent and prepared for school. Realizing the significance of biological, social, cognitive, and behavioral components is essential to understanding child development. The child's development in one area has an impact on the others as well.

It's crucial to think broadly while interacting with kids and avoid concentrating solely on one thing. (6) With reference to the Developmental Issues chart, Piaget divided childhood into five distinct phases. It is crucial to list the first and second years of life separately since they involve such significant physical and mental changes. When the child is between the ages of three and five, development-related concerns are more cohesive. Progress is more qualitative and quantitative between the ages of 6 & 12. Adolescence is the final stage of a child's growth that requires special attention. The youngster grows proximally and distally. Simply said, this means that the infant must first strengthen and coordinate their trunk and head before strengthening and improving their limbs' gross motor skills. From birth to age two, sensorimotor development is the main emphasis of Piaget's (1952) stages of cerebral development. Sensorimotor development basically define that the infant is tuned in to collecting information from their surroundings through their five senses and responding to it physically. (9). In describing the psychosocial stages of development, Erik Erikson (1968, 1977) claims that the kid is going

through a crisis of learning whether to trust or not to trust. The development of fine motor skills takes up the majority of the second year of physical development.

### **Parental Participation in Children's Rehabilitation**

prevention of issues relating to a child's impairment

There is continuous investigation into the genetic and environmental roots of birth abnormalities and disabilities. In many instances, technology helps us understand and prevent problems. For instance, prenatal testing is becoming more advanced. Safer and more reliable diagnostics include:

- MRI and MRI scan results, which are sometimes combined with blood test data to predict birth defects.
- Amniocentesis, maternal blood testing to assess the likelihood of chromosomal disorders,
- and pre-conception counseling

### **Accepting the feelings that arise**

The emotional reactions that parents experience after giving birth to a new child with a disability are entirely normal, but they must be acknowledged if they are to help in their kid's rehabilitation.

### **Looking for the right assistance**

Speaking with someone who has Parents should seek support for themselves and their children. Ask your doctor or a hospital social worker if they know other parents with children with the same sickness been through the same situation may be helpful.

### **Acknowledging the child**

It's important to appreciate the child like any parent would, by snuggling or playing, and keeping a watch out for developmental milestones (even if they differ)and exchanging happiness with loved ones and friends. As a result, the youngster will have a sense of belonging and will assist in their own rehabilitation.They have access to books on pediatricrehabilitation, the internet, and other informational resources. Information accessibility helps ease parental anxiety and concerns.

### **Aid in early diagnosis**

Parents can help discover and diagnose any disability or growth and development delay to reduce future health concerns. Early help is best. Early intervention services include feeding support, identifying assistive technology, OT, PT, SLP, nutrition, and social work. Early intervention involves a team of professionals assessing a child's needs and developing a treatment plan.

### **Work together with experts**

Parents should be proactive in keeping up with all developments in their child's development. According to the majority of studies, parents who are involved feel less anxious since they have a greater sense of control over what is happening to their own child. As a result, the child has less worry from them. Most importantly, if the mother goes to therapy with the child, that will lessen the child's anxiety and, consequently, the emergence of behavioral issues in the child. In order to help their child recover, parents' attitudes must be positive.Parents' attitudes toward their children's physical health practices, communication with their children, connection with their spouse, and attendance at parent-teacher conferences, among other things, were positive. They should be aware of the importance of teens participating in home choirs as well as the need of interior discipline.(12)(D.SaxenaandP.Biswas 2021)

### **Taking an active part in a therapeutic program**

A youngster picks up knowledge through touch, gazing, listening, and communication. In a child's early education, a parent can make a significant contribution. Throughout the child's rehabilitation, the parent can take on the role of an educator.

### **Assessing the child's development**

Parents can use this as a valuable tool to assess their child's progress by continuously noting any questions they have and asking the treating rehabilitation professional for the answers.

### **Taking care of a child's existence in its entirety**

Other aspects of a child's life, such as peer interactions, social and cultural involvements, classroom education, sports and contests, etc., are important. Children develop beyond motor skills. Parents, especially mothers, can help children resolve these challenges.

### **Increasing societal awareness**

The most significant benefit of raising a child with a disability is that the parent may help society advance by raising awareness of the issues the child experiences and potential solutions. Many parents who are going through the same thing can have their lives made easier by them.

### **Program for parent-to-parent support**

Participating in parent-to-parent support programs can aid parents of special-needs children.. Numerous studies have demonstrated the usefulness of this tactic when used in a parental role-playing scenario. [10]Children who had less parental involvement exhibited less progress in the aforementioned areas, whereas those who had more parental involvement improved more.

### **Conclusion**

Undernutrition, accidents, traumas, and pregnancy-related illnesses can all cause disabilities in India. Newborns with disabilities must be registered and offered rehabilitative help.. Here, a parent's position becomes crucial for the welfare of society and the future of their children. The need of these youngsters was also evident, as they discovered there the possibility to live for a little period of time as "normal," as "like the others," which was both valuable and freeing for them.(A. Yadav and J.Yadav 2021)

### **REFERENCES**

1. Loretta Secco M et al, Factors affecting parenting stress among biologically vulnerable toddlers. ISSUES COPMR PED NURSING,2006, JULY-SEP,29(3),131-56
2. Ray LD. Parenting and Childhood Chronicity: making visible the invisible work. PED NURSI, 2002 Dec; 17(6):424-38.
3. UNICEF, UNDP, World Bank, CRIN. [http://www.unicef.org/explore\\_3888.html](http://www.unicef.org/explore_3888.html)
4. India census, 2001. [http://www.censusindia.net/results/disabled\\_main.html](http://www.censusindia.net/results/disabled_main.html)
5. Simms R, Cole FS. The many roles of family members in "family- centeredcare"--part II. Interview by Deborah Dokken. Ped nurs, 2007 Jan-Feb;33(1):51-2, 70.
6. Marie DiCowden: Pediatric Rehabilitation: Special Patients, Special Needs. The journal of Rehabilitation, vol-56, 1990.
7. Physical disability in childhood, Mc Carthy, 1992, Churchil Living Stone.
8. Gail Geller, Lana R. Warren. Toward an Optimal Healing Environment in Pediatric Rehabilitation. The Journal of Alternative and Complementary Medicine. 2004, 10(1).
10. Williams L. The many roles of families in family-centered care--Part III. ped nursing, 2007 Mar-Apr;33(2):144-6.
- 11.A. Yadav and J. Dutta2021A DESCRIPTION ON SOCIALIZATION AND EDUCATION OF PEOPLE WHO ARE CHALLENGED MENTALLYVidyabharati International Interdisciplinary Research Journal (Special Issue) ISSN 2319-4979
- 12.D.Saxena1and P.Biswas(2021)EVALUATION OF PARENTS PERCEPTION ABOUT THEIR TEENAGE CHILD BEHAVIOUR AND THEIR PARENTING ISSUES FOR INFORMAL EDUCATIONVidyabharati International Interdisciplinary Research Journal (Special Issue) ISSN 2319-4979