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BASIC FACTS ABOUT HANDICAPPED CHILDREN

by

Dr. Maria Egg-Benes
Director of the Municipal Centre, Backward Children,
Zurich, Switzerland

The care of mentally and otherwise handicapped children is a very important part of mental health work, because in this area effective preventive action can be taken.

The deficiency of children is one part of the mental health problems of a whole population, because the defective child is only one member of the family unit and must fit in as well with the family as with the greater unit of community life.

We know that mental and other deficiency problems can occur in any family - rich or poor, highly educated or not; and it does happen in every country of the world. In every country where statistics about mental and other deficiency diseases are available, the proportion of the population afflicted is above two per cent. This means that in every population of ten millions, two hundred thousand persons might be mentally and otherwise handicapped, one third of them, i.e. about seventy thousand, at what we call school-age.

Problems of the families

The father, mother, brothers and sisters all suffer because of the problems of the handicapped child. This means, that in every population many thousands of persons have to deal with these children: all of them need help to gain the right attitude towards the handicapped.

An unhealthy attitude towards a child's handicap can not only aggravate his condition, but can cause much pain and unnecessary anguish to the parents, as well as to sisters and brothers.

Parents who find themselves confronted with the fact that their child is mentally deficient are exposed to all sorts of ill-founded advice and false information offered by well-meaning but ignorant relatives, neighbours, and other people. They also have their misconceptions built on faulty information. Hence, they suffer under various fears, anxieties, and superstitions which prevent them from seeing the problems objectively and trying to do what is best for the child and for the family. Some of these parents feel that their child's condition is due to something wrong they may have done. They suffer guilt feelings from thinking that they somehow helped bring on this condition. Some of them feel vaguely that this ailment is due to "bad blood". Others believe it is just wished on them by God because they were not good people. In all cases there is a fear that something terrible has happened, a revolt against this that is wrong, and a fear that this interferes with the most personal and most important part of one's life.

The parents do not get along with their usual educational pattern and so they frustrate the child or they give him up. In both cases the behaviour of the child gets worse instead of better. The families just support him as there is no means to get rid of him. But when these unwisely treated handicapped children grow up, it might become impossible to support them. Then they must be shut in somewhere, and thus they fill the mental hospitals: this is not the right solution of the problem.

The different kinds of handicaps

The deficiencies of childhood can be very different.

1. The emotionally disturbed children are the so-called "problem children". They are just as intelligent as any other child of the same age. Yet they do not adjust well in the social life of their surroundings and show different behaviour problems, i.e. lying, disobedience, impudence, laziness, stealing, sexual disorders, etc. They are often sentenced by the Court, and so we find them in prisons or in homes for juvenile criminals.

Children younger than fourteen years should not live together with criminal men or women, as their failures are behaviour problems which require different treatment. In many cases these are neglected children who improve if they get care and affection. Some of them suffer from mental disorder of some kind, some of them even from organic cerebral defects. Usually there is a glaring lack of homogeneity among the inmates of prisons and homes for juvenile criminals.

Therefore, if a child shows behaviour problems, his whole personality should be analyzed in order to find out why he behaves in a certain way. Not the misdeed is important, but the personality of the child. The disagreeable symptoms which the child shows are signs of his uneasiness.

Punishment does not change character. The problem child needs patient re-education in a comprehensive surrounding. He needs a sense of security if he is to mature. To feel secure he needs even-tempered and patient educators. Agitated and uncontrolled actions of parents or educators produce similar results in the child. By such methods a barrier of uncertainty and fear is established between children and adults, instead of a bond of trust and cooperation.

Fear produces aggressiveness. That is why so many emotionally disturbed children have an aggressive behaviour. If they get confidence in their educators, then - and only then - will they be ready to accept their rules and to adjust to their way of life.

2. The feeble-minded or backward children. Their minds develop more slowly than those of normal children and so their intelligence and their reactions are more primitive than they should be at a certain age. Often their movements are clumsy. Some of them are also physically handicapped or disfigured. Others are handsome and good-looking; it is impossible to judge by appearance. All of them behave as if they were younger. So a child of nine might behave as one of five years: In this case he can understand or accomplish or learn only such things as a child of five years old could.

There are different degrees of retardation. If a child is slightly behind his age, we call him "subnormal" or "moron": he is not very different from a normal child and is often treated as dull or lazy. If the mental handicap is more severe, the child is called "feeble-minded" or "imbecile". The most severely handicapped are the "idiots", who are unable to avoid common dangers and to appreciate or to satisfy natural wants.

Many of these children are medically incurable, but all of them can improve by appropriate educational training. The aim of all pedagogical endeavours is to promote development of these children as far as possible, to give them the right attitude (in the widest sense of the word), to make them acceptable to society, however low their level might be, and to make them as independent as possible. Therefore, they must be systematically taught how to meet the situations of every-day life (how to clean themselves and their housing, to dress and eat properly, etc.). In early years these children should be taught recreational crafts such as cardboard work, bead work, painting, drawing, embroidery, knitting, etc., so that it will be possible to teach them later useful crafts like weaving, rug making, pottery, carpentry, etc.

Backward children are peaceful persons if they feel that they are accepted as they are with their limitations, and if they are not frustrated. If they are carefully educated, if they have good manners and the habit of working, they can later earn partly or even entirely their living. They can become beloved members of a working staff, if someone else thinks for them.

3. Physically handicapped children need special care, so that they may become happy and useful members of society in spite of their handicap. Several forms of paralysis disfigure the child: he seems to be feeble-minded, even if his intelligence is normal.

(a) Spastic children who suffer by cerebral palsy often behave like idiots, although half of them have a normal intelligence. Their limbs might be so stiff, and their movements so uncontrolled, that they cannot accomplish anything. Some are even unable to speak. Rehabilitation is possible for a considerable number of them by systematic physical training and careful speech-training.

(b) The epileptic child needs medical care. It is far more difficult to diagnose this disease with children than with grown-ups, because epilepsy has manifold manifestations in childhood. Although medical therapy has great importance, the success is largely dependent on other factors, such as the atmosphere at home and at school. Educational measures are necessary to allow the epileptic child a good adjustment into the community life and to protect him thus from gliding off socially, in spite of the difficult character which is one part of this disease.

(c) The deaf child is often treated as if he were feeble-minded, yet the deaf-and-dumb child is just as intelligent as any other child. The absence of acoustic stimuli gives him a poor and distorted picture of his environment. So the child's experience of the outer world remains less rich; but his inner world, the world of emotion and feeling is not handicapped. He suffers by his isolation, due to his lack of speech. Therefore he must be taught to speak and to read from the lips of the speaker. Speech-training of the deaf-and-dumb has the best results when it is started in early childhood. Afterwards these children can get the same education as normals, and also vocational training for almost every profession (farmer, mechanic, sawing, industrial sawing, drawer, etc.).

(d) The blind child gets through his hearing all kinds of information about the things of this world. But all his knowledge is merely partial. He tends sometimes to be satisfied with partial education and also with partial or no activity. The education of the blind must help him to really get to know his environment and to develop his personality. A good vocational training is important, so that he might become as independent as possible.

Ways of help

It is a mistake to fill the mental hospitals with such handicapped persons who would not need such care provided they got social habit training in childhood. Mentally and otherwise defective children who are well-trained socially and have good manners can be very pleasing people. Experience shows that they can be taught to do useful work, and therefore there is no necessity to put them in mental hospitals.

Defective children need special schools: not old-fashioned "asylums", where they are merely shut in and fed, but boarding schools (or in big cities, day schools), which are in contact with the outside world, and which enjoy the interest of more or less influential local personalities.

Special training is indispensable, because it is not possible to use the same methods for handicapped children as for normal children. The curriculum of primary schools often shows a lack of contact with the surrounding life of the child, which makes it inappropriate for these children. It is not advisable simply to cut out some of the topics of normal schools; the school for defective children is not a simplified primary school, but a different school. The accent must be placed on entirely different things.

The aim of the education of handicapped children is to guide the emotional, social, mental and physical life of these children, so that they also become active and constructive citizens. Therefore, they must be systematically taught how to encounter the problems of everyday life, to have good manners in contact with other children and with adults, to concentrate their capacities on a certain task, to accept and follow orders, etc. They must acquire in a special way basic knowledge of reading, writing and everyday arithmetic.

Moreover, handicapped children must get a well-founded training in the use of their hands, as their future lies in their hands and not in their heads. Therefore, the emphasis should be laid on hand-skills and occupational trades, so that these children when they grow up may stand as far as possible on their own legs and fit themselves in the normal society. All skills and knowledges must be developed in a special way, adapted to the abilities of handicapped children.

Teachers' Training

To secure these ends, teachers must receive a special training with a double task:

1. To impart to the teachers the necessary technical knowledge, such as basic aspects of psychology, physiology, pedagogics and thorough training of teaching methods in all school topics as well as in the necessary handworks.

2. To develop the personalities of the teachers, their character, manners, authority, real interest in work, initiative, etc.

This is important because the character of deficient children can only be influenced by giving them good examples in everyday life.

Moreover, it is important to include lectures about handicapped children in the usual courses for those studying medicine, nursing, social sciences, etc. In addition, any of the above groups might obtain facilities to study in other countries.

Through the observation and the help of these groups, early cases will be more easily diagnosed. For the benefit of effective help, it is desirable to recognize these children at the first appearance of difficulties in education.

Different methods of working are required in rural environments than in urban conditions. Ambulatory consulting hours held by a team of a medical doctor, a specially trained educator and a social welfare worker have proved satisfactory. It is important to find a form of organization which is appropriate for a certain country.