CHAPTER-V

FINDINGS, CONCLUSION AND SUGGESTION

On the basis of data analysis Following Findings, Conclusions were drawn for this study.

(A) FINDINGS:

SECTION-I RESPONDENT DEMOGRAPHIC /PERSONAL PROFILE

- From the Present Study it is found that most of the respondents that (n=111) 71.6% of the respondents belonged to the age group between 26 to 45yrs.
- Looking to education profile it is found that Most of the respondents (n=66)42.6% have done graduation.
- Majority of the respondents (n=118)76.1% engaged in job, while 13%(n=21)have their own business.
- Majority of the respondents (n=55)35.5% had monthly income between Rs.5000 to 10,000.
- Looking towards family type than (n=78)50.3% belong to joint family system, while (n=70)45.2% belong to nuclear family.
- Majority of the respondents (n=95)61.3% have the first born child among the number of the children.
- Regarding the complication in delivery (n=117)75.5% respondents had complication during delivery.

SECTION-II CHILD'S DEVELOPMENT

- (n=110)71% of the respondents child's milestone was Normal.
- (n=103)66.5% of the respondents told that their child started speaking between age of 1 to 3.yrs.
- Majority of Parents (n=112)72.3% told that their child started walking between age group of 1 to 3 yrs.
- Most of the respondents (n=125)80.6% told their child started sitting between the age group of 1 to 3 yrs.

- (n=116) 74.8% respondents told their child started standing between the age group of 1 to 3 yrs.
- Majority of the respondents (n=139)89.7% told that their child gave first smile between the age group of 1 to 3 yrs.
- (n=140)90.3% respondents told that their child started rolling between the age group of 1 to 3 yrs.
- (n=76)49% of the respondents told their child having normal emotional level.
- Majority of the respondent's child (n=78)50.3% having the normal in language development.
- (n=108)69.7% respondent's children having the general and normal appearance.
- Looking towards the child's co-operative it is found that (n=75)48.4% children sometimes co-operate.
- (n=100)64.5% children are taking participation in activities at their school only.
- There is significant association between education and child participation and p value is (.009) Hence it can be say that education does play a role in child socialization process. Here hypothesis is proved.

SECTION-III SOCIALISATION OF CHILDREN.

A) PLAY:

- (n=47)30.3% of the children play content by sound producing objects and toys.
- (n=46)29.7% of the children play with constructive toys, blocks, and clay.
- Majority of the respondents (n=87)56% told that the toys purchased for their children on occasions.
- Majority 0f the respondents (n=84)54.2% told that their children allowed to play as their pleases.
- (n=102)65.8% children are given toys to play whenever the child desires.
- (n=85)54.8% are children allowed to play in the house only.
- Majority of the respondents (n=75)48.4% sometimes allowed to their child to play with other children.

B) COMMUNICATION:

• Majority of the respondents (n=71)45.8% told that their children indicates needs and desires by requesting.

- Majority of the mother's responds(n=72)46.5% towards their child's need by giving what the child desire.
- It is found that majority of the children (n=68)43.9% go to their mother when they need.
- (n=71)47.1% children mostly ask questions to their mother.
- (n=61)39.4% respondents always replied to their child's question.
- (n=72)46.5% children desires to be company of their mother only.
- (n= 54)34.8% children often seeks physical contacts.
- (n=97)62.6% of the respondents told that their children communicates in socially approved manner with their parents.
- Majority of the respondents(n=57)36.8% told that their child seeks permission to go out.
- Majority of the respondents (n=78)50.3% told that their child sometimes interferes in adult's talk and activities.
- (n=50) 32.3% children interfere by asking questions, while others by making noise and creating needs.
- Most of the respondents (n=141)91% keep the balance diet for their children to keep body healthy.
- Majority of children (n=58)37.4% are given feeding by mother and father alone.
- Majority of the respondents(n=62)40% told that the child does not eat much without any help.
- (n=96)61.9% children are given food at regular interval.

SECTION-IV PARENTAL ATTITUDE TOWARDS AUTISTIC CHILD.

- (n=116) 74% respondents agree with the statement that autistic child is a matter of shame and their social-economic situation is stressful.
- (n=121) 77% respondents strongly disagree about the autistic child is burdon on family and autistic child is sin.
- (n=52)33.5% respondents agree with attitude that the social-economic situation is stressful.
- (n=91)58.7% respondents agree that their child is depend on others for daily activities.
- (n=73)47.1% respondents agree that their child should live upon donation.
- (n=73)47.1% respondents agree that their child is gift of god.

- (n=85)54.5%respondents agree about child's lacking in mental growth.
- (n=53)34.2% respondents undecided that autistic child is result of deeds of previous birth.
- (n=107)69% respondents undecided about the belief that autistic child can be cure by supernatural power and cure by support of the family.
- (n=52)33.5% respondents agree about that autistic child can be cure by medication.
- (n=110)71% respondents strongly disagree about to think to kill their autistic child as they are burdon for them.
- (n=90)58.1% respondents agree about in restricting family because of autistic child.
- (n=58)37.4% respondents strongly disagree about to separate autistic child so family can not be affected.

SECTION-V PARENTAL KNOWLEDGE OF AUTISTIC CHILD

- (n=47)30.3% respondents strongly agree about that autism is childhood schizophrenia.
- (n=75)48.4% respondents agree about that autism is an autoimmune condition.
- (n=50)32.3% respondents undecided that autism is a neuro develop mental disorder.
- (n=65)41.9% respondents believe to a great extent to need information about assessment report for their child.
- (n=85)54.8% respondents believe to a great extent that proper decision or help to decide in which training center/school to admit their child.
- (n=73)47.1% respondents believe to a great extent that they need information about where to procure training material.
- (n=58)37.4% respondents believe to a great extent that they need information on the effect of admitting the child special/normal school.
- (n=56)36.1% respondents are not at all need help in deciding where to admit or not to admit their child in a hostel.
- (n=52)33.5% respondents believe to a great extent aware about any financial facility to pay for medicines therapy or other services.
- (n=67)43.2% respondents are not at all aware about information on legislation for autistic child.

SECTION VI PARENTAL PRACTICES OF AUTISTIC CHILDREN.

- (n=80)51.6% respondents believe to a great extent that they require material to help to deal with their child.
- (n=73)47.1% respondents believe to a great extent that they need information on nutrition/special diet.
- (n=63)40.6% respondents believe to a great extent that need information about normal growth & development by attending any of the parenting seminars.
- (n=60)38.7% respondents believe to a great extent that they need to know about what teachers/trainers teaching to their child.
- (n=67)43.2% respondents believe to a great extent that they need help in finding the most appropriate vocation.
- (n=43)27.7% respondents are believe to a moderate extent that they aware about any financially security by transfer of property.
- (n=49)31.6% respondents are believe to a moderate extent that they aware about any saving account to make secure their child's life.
- (n=53)34.2% respondents believe to a great extent that they aware about any pension benefits to make secure their child's life.
- (n=58)37.4% respondents are sometimes faced in helping to eat their child.
- (n=66)42.6% respondents are sometimes faced in dressing to their child.
- (n=65)41.9% respondents are sometimes faced in toilet training to their child.
- (n=52) respondents are never faced problems in brushing to their autistic child and (n=52)33.5% respondents sometimes faced.
- All the respondents sometimes faced problem in grooming, lifting, and giving medication to their child.
- (n=40)25.8% respondents are never having problem of sleepiness due to have autistic child.
- (n=60)38.7% respondents are rarely having the problem of mental worry.
- (n=50)32.3% respondents are sometimes having the problem of blood pressure.
- (n=42)27.1% respondents are never having problem of headache.
- (n=99)63.9% respondents never faced the problem of loss of support by spouse.
- (n=47)30.3% respondents never faced the problem of loss of support by family.
- (n=56)36.1% respondents rarely faced the problem of loss support by in-laws.

- (n=59)38.1% respondents sometimes faced the problem of loss support by relatives.
- (n=45)29% respondents rarely faced the problem of loss support by friends.
- (n=45)29% respondents rarely faced the problem of loss of support by neighbors.
- (n=122)78.7% respondents never faced the financial difficulties for visiting to the doctors & other professionals.
- (n=123)79.4% respondents never faced the financial difficulties for laboratory investigation.
- (n=75)48.4% respondents never faced the financial difficulties for transportation.

SECTION-VII SOCIAL PROBLEMS

- (n=110)71% respondents never feel restricted in attending social function due to having autistic child.
- (n=119)76.8% respondents never feel socially bounded & aloof due to autistic child.
- (n=120)77.4% respondents never feel restricted from pursuing from the learning opportunities.
- 78.7% (n=122) respondents never have experience of embarrassment.
- All most respondents never have experienced of embarrassment by their family and community.
- (n=85)54.8% respondents rarely have experienced of embarrassment by their relatives.

SECTION-VIII CROSS TABULATION AMONG KEY VARIABLES.

- With the reference towards the correlation there is positive correlation (.142)between attitude and knowledge & Practices.
- There is significant level of relationship(.000)at 0.001 level among Knowledge, Attitude & Practices.
- There is negative correlation (-.085) between Knowledge, Attitude & Practices and Age of the respondents.
- There is positive correlation (.065) between knowledge, Attitude & Practices and Education of the respondents.

- There is positive correlation(.001) between Knowledge, Attitude & Practices and Occupation of the respondents.
- There is negative correlation (-.109) between Knowledge, Attitude & Practices & Monthly Income.
- There is positive correlation (.006) between Knowledge, Attitude & Practices & Family types.
- With reference to Knowledge, Attitude & Practices has correlation is significant at the 0.01 level.

CONCLUSION

SECTION-I DEMOGRAPHIC DATA OF RESPONDENTS

From the study the researcher has concluded here chi square test result implies that There is significant association between education and child participation and p value is (.009) Hence it can be say that education does play a role in child socialization process. Here hypothesis is proved.

There is significant association between socio demographic information education, income and family type.

From the above study it can be conclude that the family is a primary institution where the child can learn and inculcate the social values, ethics and life importance and well manners.

So, from the demographic point of view majority of respondents were adult between the age group of 31 to 35 yrs. and they have completed their graduation and engaged in job and meanwhile some have their own business having monthly income between Rs.5000 to 10,000. So it shows that they belong to middle class family.

The study revealed that the key variables i.e. Knowledge, Attitude & Practices are inter correlated with each other and single independent variable can affected on the key variable.

As such family is a place where child can get all kind of emotional bondage, love and warm. The study also revealed that the parental practices affected by the independent variables. When the Age increased it affected on the parent's knowledge regarding the rearing up to the child.

There is no significant association between Age and Knowledge, Attitude and Practice. There is significant association between Education and Knowledge, Attitude and Practices i.e. the p value is 0.065. Good Education emphasis on good parenting system.

The another result is the rearing practice also can be improved when the occupation, monthly income is increased. The parents can give good rearing practices with advanced planning for their autistic child. Chi square test implies that there is significant association between Knowledge, Attitude and Practices and family types the p value is 0.006. so, family plays a prominent role in the child's socialization.

SECTION-II PARENTAL ATTITUDE TOWARDS AUTISTIC CHILD.

In our Indian society the person either it is child/ man/ woman or young they are stigmatized if they are suffering from any kind of mental illness problems. so, it is too difficult for the parents, relatives & other significant people around by them and specially for those who are living with the child.

There is no much influence of Age in case of Attitude of Parents towards their autistic child

There is significant Association (8.990) between Education and Attitude of Parent of autistic child.

Education has much influence on Attitude of Parents towards autistic child.

There is significant association(4.180) between Family type and Attitude of Parents of Autistic child.

There is significant difference(8.146) between Monthly Income and Attitude of Parents of Autistic child

Parents are agree that to have an autistic child is a matter of shame and sometimes they also feel it is Burdon on the family. Parents can not live normal life due to autistic child they sometimes feel social, economic stress while some parents believe that an autistic child a gift given by god. While some parents also agree about the belief that to have an autistic child is a result of their deeds of their previous birth.

In present scenario, no one believe in "Bhutvidhya or Supernatural power" or "Black magic". The study also concluded that their child can be cured only when there is full support by family, relatives, neighbors and ultimately whole community.

The study revealed that some parents had also experienced about negative thoughts and suicidal thoughts and also restricting themselves or by making themselves aloof from the society.

SECTION-III PARENTAL KNOWLEDGE TOWARDS AUTISTIC CHILD.

Parents play an important role for the development of autistic children. The study conclude that parents believe that they need help to decide in which kind of training centre/ school /parental seminars and parental material are required to rearing their child.

There is significant association Chi- square value is 0.806 between Age and Knowledge. There is much influence of Age in case of knowledge of parents towards autistic child

There is significant association (1.502) between Education and Knowledge of Parents of Autistic child.

There is significant association (0.627) between Knowledge and Family Type.

There is much influence of family types in case of Knowledge of parents.

There is significant difference(8.146) between Monthly Income and Knowledge of Parents of Autistic child.

There is no significant association(1.236) between Occupation and Knowledge of Parents of Autistic Child Various government facility which is also helpful for them in financial crisis and also need knowledge, regarding various medication, therapies and services available in the society. It is also find out that parents also believe in receiving the proper guidance and knowledge about the various government programmes or benefits for autistic children as well as they are also wanted to update and making themselves aware about the legislation for the autism.

SECTION-IV PARENTAL PRACTICE TOWARDS AUTISTIC CHILD.

Parental practice makes the child perfect ,rearing practice can be play a vital role in the child's holistic development . there are number of rearing practice for the child development ,the study concluded that majority of the respondents have requirement of material and good tips to deal with their autistic child as they are facing much difficulty to deal with their child, they also require the diet chart and nutrition information or special diet for this kind of children. Some of the parents are also ready

to attending such a parenting seminars for the mental growth and development of their child, the study revealed that parents also interested to take an appropriate vocational training for the child's development. With the reference to security of their child parents wanted to secure their child by transferring property ,by saving accounts and some pension benefits for their child. It shows the mental worry and stress of parents about the security of their autistic children's future.

The chi square test result implies that the correlation of key variables Knowledge, Attitude and Practice is significant the p value is 0.01.

There is significant association(15.630) in expected value and observed frequency, so there is much influence of Age in case of practices of parents of autistic child.

There is significant Association(6.281) between Education and Practice of Parent of autistic child.

There is significant difference(5.226) between family type and Practices of Parents of Autistic child.

Education has much influence on Practice of Parents towards autistic child.

There is significant difference(8.320) between Monthly income and Practices of parents of Autistic Child

There is no significant association between Occupation and Practices of Parents of Autistic Child.

Suggestions and Plan of Actions

• Parenting is a difficult job, but a child with autism poses extra challenges. The following suggestions may help. Parents should may approach to their doctor, professionals or associations for more information and advice which is necessary to them. The parents should also concern with the other parents whose children suffering from the same situation. It will create great feelings of support and belongingness to them.

On the basis of findings few suggestions are forwarded to the parents to develop competence in order to deal children with ASD in proper manner.

- Parents need to consider counseling to help manage their own feelings about their child's diagnosis.
- Parents should develop their vision to give best treatment to their children and also develop their way of approaching to them.
- Doctor or pediatrician and Psychiatrist also may the mediator for the behavior modification among autistic children.
- Parents should make social groups and also organize frequent meeting especially families of children with ASD to share information and experiences while dealing with such children.
- The Parents should also access and try to best updates with the help of internet and other literature available to get in depth insight and knowledge about the disorder.
- Sometimes Parents should may focus on positive and praise and also become liberal rather than punishment for the mistake of their child.
- Parents should give encouragement to child to get involve in different activities to gain confidence and competence.
- Parents should provide stimulating environment to children in order to grow in a holistic manner.
- Parent should never allow the children to go out alone but try to accompany them.
 The communication between parents and professionals needs to be improved so they will be able to work together more easily.

- It is imperative to develop a training program for workers in the educational system to learn skills on how to work with children with Autism. This will help to ensure that the children with Autism are taught the right behaviors and will receive the most benefit from their education.
- The researcher recommends that research be undertaken into the process of diagnosing autism to create a more effective and efficient process. This increased efficiency will enable the child to receive appropriate intervention far quicker than is currently reported.
- There is a need for general medical practitioners and pediatricians to improve their knowledge of autism thereby enabling them to identify the early symptoms of autism and to refer the parents directly to a specialist for a possible diagnosis.
- There is a need for affordable and accessible schooling for children with autism who are functioning at a level high enough that they do not need to attend a school for autism, but who are not able to integrate into mainstream schooling with ease. The school would need to be a middle ground between mainstream schooling and a school for autism.
- The researcher recommends that these areas be given attention, as action is needed in order to provide opportunities for children with autism and for their parents.
- There is a need for support for parents immediately after the diagnosis of autism and while raising their autistic child. Perhaps, a service could be offered to parents immediately after the diagnosis.
- Such a service could be a consultation with a professional able to provide information, a range of resources and a debriefing. The availability of support groups throughout the child's life is another need of the parents.
- Contact an autism support group such as Autism Victoria for further information, support and guidance.
- Other parents who have children with autism are excellent sources of information.
- Education and Training are very much necessary in Child rearing practice.
- The Autistic children should allow to those persons and place which makes them comfortable.
- IEPS Should be implemented for such children.

- Where **I** Information in detail about an autistic children
 - **E** Education should be provided on the basis of their knowledge.
 - **P** Programs should be organized such as counseling, Behavior Therapy and other Intervention Programmes for children as well as for Parents.
 - **S** Services for children benefits and relaxation by NGOs, Government should be Provided.
- Search the internet for information on autism management programs, but be aware
 that not all information on the internet can be considered reliable. Check with your
 doctor or autism professionals and be wary of any website that claims a "cure" for
 autism.

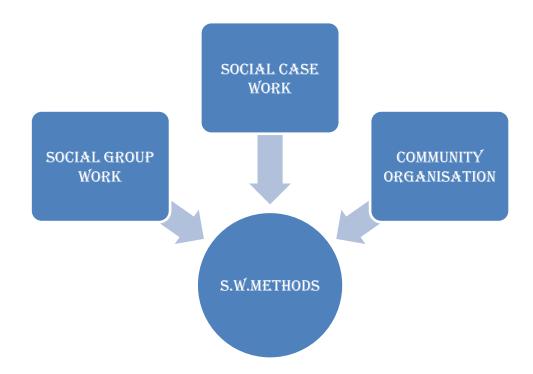
Favorable environment at home

• As Parents suffering from stress because of their child by going outside so autistic children need extra precautions and they also should provide such a safe and favorable environment for them at home.

Precautions should be taken in case of going Outside of Autistic Children.

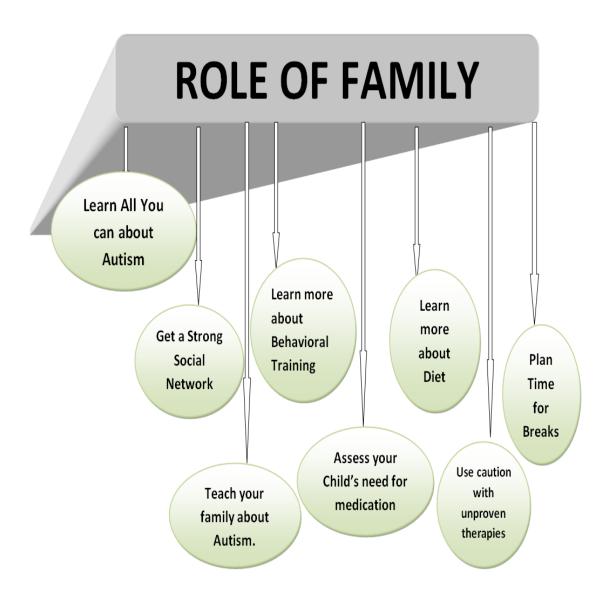
- Try to have another adult with child to help out if needed.
- Choose "family restaurants" or chain restaurants that don't expect perfect behavior from young patrons.
- Take books, pens and toys for your child to play with.
- When eating out or shopping, try to choose non-busy times.
- Reinforce good behavior with plenty of praise.

Try to avoid delays. Important appointments related to child never be postponed or cancelled For example, book the first appointment when visiting the doctor or dentist.



Social Case Work Method: Social workers helps to provide appropriate counseling to the parents and their family members too.

- To provide effective counseling in order to a family to be a effective members of the Individualized Educational Plan (IEP) that plans a child's education, the local school system ,proper diet to the child, at the beginning of the assessment process, written information concerning the nature of autistic child.
- To provide knowledge regarding Cognitive skills, problem behavior, learning disability, basic social skills.
- When working with individual children or groups social work can intervenes such as:
 - ✓ Behavior problems
 - ✓ Emotional Issues
 - ✓ Getting along with friends
 - ✓ Health and hygiene
 - ✓ Anger management
 - ✓ Coping skills
 - ✓ Substance abuses.



Don't tell the student "slow down" or "just relax."

Don't make stuttering something to be ashamed of. Talk about stuttering just like any other matter

Don't complete words for the student or talk for him or her

Role Of

Teachers

Help all members of the class learn to take turns talking and listening. All students — and especially those who stutter — find it much easier to talk when there are few interruptions

attention.

Have a one-on-one conversation with the student who stutters about needed accommodations in the classroom. Respect

the student's needs, but do not be enabling.

Convey that you are listening to the content of the message, not how it is said.

Speak with the student in an unhurried way, pausing frequently Expect the same quality and quantity of work from the student who stutters as the one who doesn't

and they have the listener's

