

Parents Sufferings To Endure Children With High Prevalence Disabilities: A Quantitative Inquiry Inside The Province Of Punjab, Pakistan

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Abstract

The Individuals with High Prevalence Disabilities can be more annoying, uncooperative, and difficult type of human beings as compared to any normal individual (Federici, et al., 2017). This ultimately raises the level of burden related to clinical and of functional variable of families with disabilities (Irazábal, et al., 2012). Major objectives of the study were to see the significant differences between parents' sufferings about children with High Prevalence Disabilities living in urban and rural areas, house wives or professional working mothers, their gender and qualification. A Sample of (N = 421) parents living in urban areas (N= 220) and rural areas (N = 201) was randomly taken from the province of Punjab, Pakistan. The researchers used self-developed research tool (reliable at Alpha= 0.93) to answer the questions of present study. The researchers in to two teams personally visited the parents and collected the data by translating the questionnaire in their native languages. The major findings confirmed that there are significant differences among all demographic variables such as gender, age, locality, and education of parents on enduring individuals with high prevalence disabilities in Punjab. It is recommended that awareness seminars and workshops should be conducted at all levels by the teachers to change negative attitudes of parents to endure their children with high prevalence disabilities.

Introduction

Human being is the masterpiece of the tremendous manufacturer of this universe. Every person is unique himself despite several similarities and commonalities among them. Man has been trying to differentiate himself from other human beings by creating different labels and categories on the behalf of cast, color, creed, economic status, abilities, and other characteristics since ancient times. Disability is one of those diversities which we use to prove differentiation among people.

The history of disability is as old as history of man. Hundred's years ago, disability was considered as dilemma because it perceived as a bad result of parental sins. At that time, with disabilities had no social right even then sometimes their lives were at risk. In past, special were most deprived segment of societies (Tremblay, 2007). After long while people started think about the social rights of Individuals with High Prevalence Disabilities. In the beginning of 19th century various educational institutions were evolved for them but in fact of different reforms, most special persons are still spending their lives as a marginalized segment of society due to their exclusion from better opportunities of life. Moreover, disability has a significant relation with financial constraints and social acceptance. Similarly, disability is both a reason and outcome of poverty. That's why; it can lead to job loss and decrease the income, difficulty in schooling and skills seeking, financial burden, and several other problems that causes economic hardships (Vallas & Fremstad, 2014).

Review of the related literature

Perceptions about disabilities are of individual's personal point of view (MacDonald & Hall, 1969). The 'good' and the 'bad' perceptions of Individuals with High Prevalence Disabilities deliberately hold two parallel stand points about physical and mental conditions. These perceptions are seen on the extremes of good or bad stratagems, and never lift ideas regarding disability as to be middle grounded (Munyi, 2012). The influence of the family's perception of disability on the process of rehabilitation outcomes and resilience take time to be accommodated socially in a well way as adaptations is dynamic and go on for the whole span of life (Youngblood, & Hines, 1992). Armstrong, et al. (2016) explained that the disability of any nature with any level of frequency and intensity appears in different perspectives for different people depending on how disability mediates among critical factors. The exposure of the disability takes the stances differently for different disabled enable the individuals to perceive life based on their life experiences (Armstrong, et al., 2017). Their survival with unusual conditions of uniqueness takes the stance of their inner strength. Perceiving life as bringing quality and constant involvement in it fundamentally gives rise to the sense of excitement (MacMillan, et al., 2014). Diener and Diener (1996) conducted a study and defined the perspective of those disabled who perceive life with the sense of contentedness and are very pleased and thankful to God to live with disability. Such enthusiastic acts and constructive thoughts are characterized by their inner strength (Esmail, 2010). Schwab (2017) conducted a study and illustrated that the cognitive growth and maturation collaboratively open the new doors to perceive disability. Thence enable the individuals with disabilities to perceive life with new understandings and explanations. Schulz and Decker (1985)

suggested that the disabled ultimately adjust in the long run by perceiving control and self-blame by the side of parents. In this regard, the disabled do not take the burden of their disability and hence not beaten by it. According to Wright (1980) all this develops constructive thoughts amongst the families of Individuals with High Prevalence Disabilities. However, most of the Individuals with High Prevalence Disabilities do not perceive their sufferings and obstacles of life as appreciable as to express gratitude (Bunning, et al., 2017). They do not always consider their disability as guarantee to be awarded in the afterlife (Meloni, et al., 2015). Undoubtedly, the Individuals with High Prevalence Disabilities are troublesome as something wrong goes on in their normal procedures of growth and development (Smith & Williams, 2004). The Individuals with High Prevalence Disabilities can be more annoying, uncooperative, and awkward type of human beings as compared to any normal individual (Federici, et al., 2017). This ultimately raises the level of burden related to clinical and of functional variable of families with disabilities (Irazábal, et al., 2012). While Singhi, et al. (1990) described that the psychological problems are ultimate results of bringing up a child with disabilities. Hence the disabled and the suffering families perceive life as tiring and full of stress. Though, most of the Individuals with High Prevalence Disabilities want to pass socially and culturally fulfilling lives (Otte, et al., 2013). But it is truly true that medical based problems inherently work inappropriately in the bodily functions of Individuals with High Prevalence Disabilities and make their lives hard to survive by restricting them in the ways of progress (Morgan & Tan, 2011). Several barriers restrict them to be employed and hence they remain unproductive members of the society (Brittain, 2004). The Individuals with High Prevalence Disabilities perceive life as unkind and face employment barriers (Cook, 2006). Though working with an Individual with High Prevalence Disability can be difficult due to physical or mental challenges (Kuper, et al., 2014). On the other hand, Individuals with High Prevalence Disabilities show their strengths on workplaces and hence prove that they can be self-supporting individuals of society, they are not lazy with weaknesses only (Hampton & Mason, 2003). They can work for what they want in accordance with their potentials. As life is disciplined in its actual essence, the Individuals with High Prevalence Disabilities are disciplined and attract towards a quality of life (Abdelgawad, et al., 2012).

Research Questions

Following were the research questions of the present study:

1. What was the significant difference between parents' sufferings about children with High Prevalence Disabilities living in urban and rural areas?
2. What was significant difference in parents' sufferings about children with high prevalence disabilities based on their literacy level?
3. What was significant difference in the perceptions of domestic mothers and professional mothers about miseries of children with high prevalence disabilities?
4. What was the significant difference in the parents' sufferings about children with high prevalence disabilities based on their ages?

5. What was the significant difference in the parents' sufferings about children with high prevalence disabilities based on their gender?

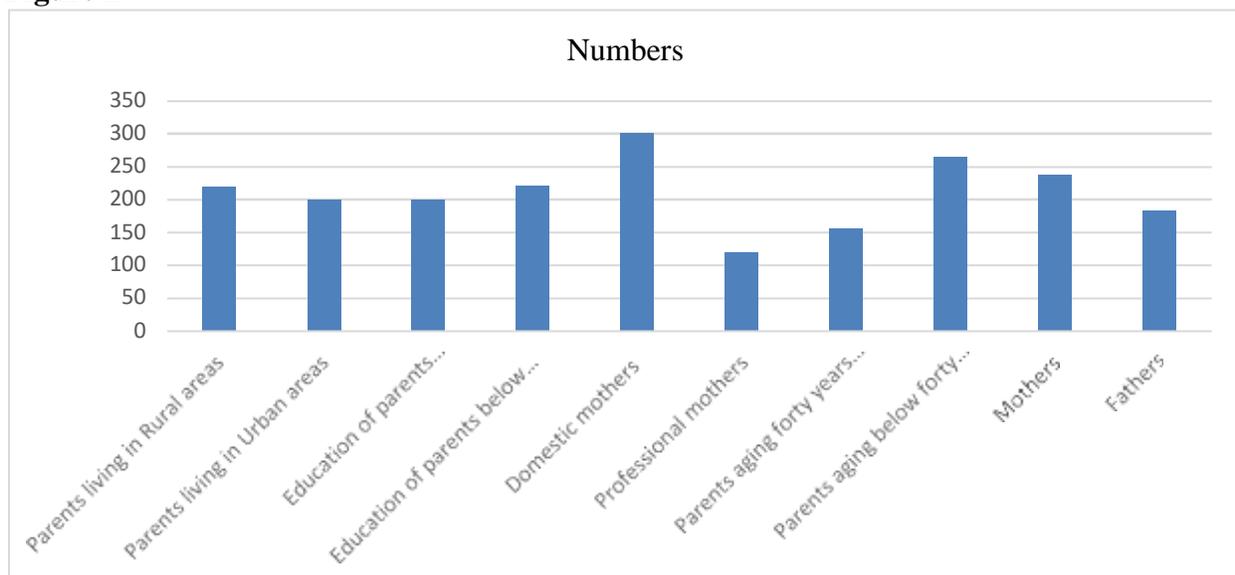
Sample of the Present Study

The present study was comprised of a sample of (N = 421) parents. Parents living in urban areas (N= 220) and parents living in rural areas (N = 201), post graduate and above literacy rate of parents (N = 200) and below post graduate literacy rate of parents (N = 221), domestic mothers (N = 172) and professional mothers (N = 66), parents aging forty years and above (N = 156) and parents aging below forty years (N = 256), mothers (N = 238) and fathers (N = 183) was randomly taken from the province of Punjab, Pakistan. Following table shows category and total number of the sample of the study.

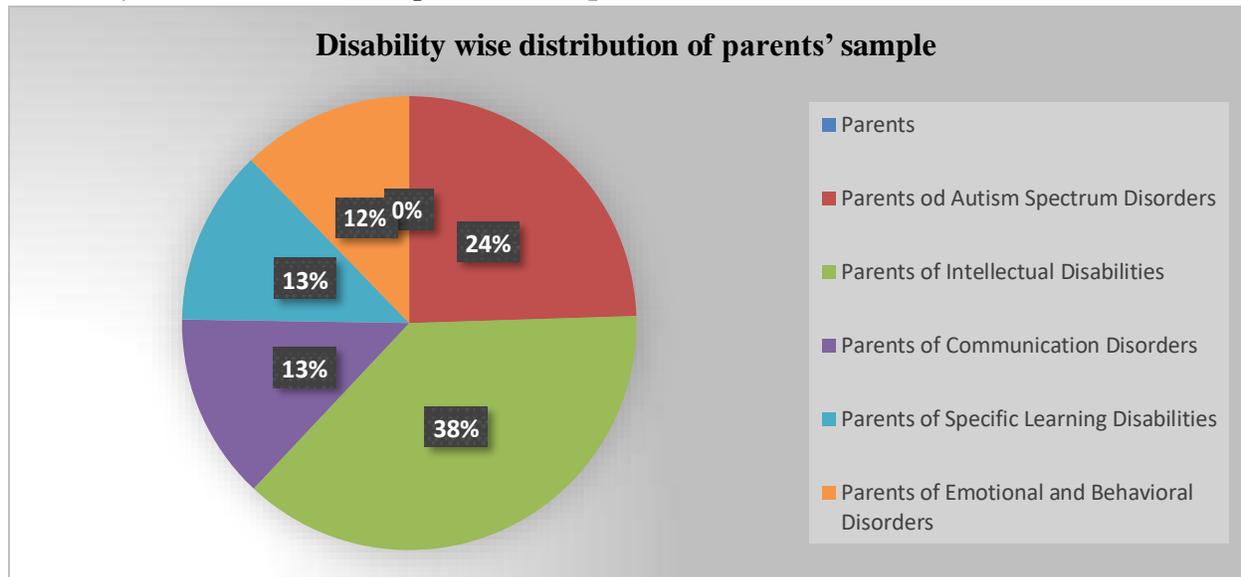
Table 1 Distribution of Sample

Category	F	%
Parents living in urban areas	220	52.25
Parents living in rural areas	201	47.74
Literacy rate of parents (Postgraduate and above)	200	47.51
Literacy rate of parents (below Post graduate)	221	52.49
Domestic mothers	172	71.49
Professional mothers	66	28.50
Parents aging forty years and above	156	37.05
Parents aging below forty years	265	62.94
Mothers	238	56.53
Fathers	183	43.46

Figure 1



Disability wise distribution of parents' sample



Research Design

Researchers have applied quantitative research design and survey method to conduct the research.

Research Instrument

The researchers used self-developed research tool to answer the questions of present study. It included 13 statements. These statements were measured on five-point Likert scale. This questionnaire was filled by parents of individuals with High Prevalence Disabilities. They had to consider option 5 as 'Very Much', option 4 as 'Somewhat', option 3 as 'Undecided', option 2 as 'Not Really', and option 1 as 'Not at All'. It was reliable at Alpha= 0.93.

Data Collection

The data was collected with help of special schools. The special school heads were approached by the researchers to get the access to the parents of children with high prevalence disabilities. The researchers in two teams personally visited the parents and collected the data by translating the questionnaire in their native languages.

Statistical Analysis

The researchers used descriptive statistics and inferential statistics to find the statistical significance through Statistical Package for the Social Sciences.

Results and Discussion

Table 2 Percentages of Parents responses on the following statements

Sr. No.	Statements	5	4	3	2	1
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1	How much do you think that child with high prevalence disability children with high prevalence disabilities is a test for you?	70%	5%	14%	6%	5%
2	How much do you think that a child with high prevalence disabilities can be sick easily?	54%	10%	15%	16%	5%
3	How much do you think that a child with high prevalence disabilities can raise financial burden?	61%	5%	8%	14%	12%
4	How much do you think that a child with high prevalence disabilities can get hurt easily?	70%	10%	15%	3%	2%
5	How much do you think that a child with high prevalence disabilities can be tired easily?	56%	10%	12%	14%	10%
6	How much do you think that a child with high prevalence disabilities needs special attention to be safe?	66%	14%	16%	2%	2%
7	How much do you think that a child with high prevalence disabilities needs assistance to work in classroom?	70%	10%	8%	10%	2%
8	How much do you think that a child with high prevalence disabilities finds difficult to attend school regularly?	65%	10%	9%	6%	10%
9	How much do you think that a child with high prevalence disabilities lacks mobility?	60%	11%	15%	10%	4%
10	How much do you think that a child with high prevalence disabilities lacks understanding ability for common things?	70%	10%	7%	5%	8%
11	How much do you think that a child with high prevalence disabilities lacks ability to speak?	61%	9%	14%	10%	6%
12	How much do you think that a child with high prevalence disabilities lacks resistance to illness?	64%	12%	16%	2%	6%
13	How much do you think that a child with high prevalence disabilities has unrealistic expectations?	71%	16%	6%	4%	3%

Table 3 What was the significant difference between parents' sufferings about children with high prevalence disabilities living in urban areas rural areas?

Variable of the Study	Living Area	Total Number	Mean Value	Standard Deviation	Degree of Freedom	t-Value	P-Value
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Parents' Living in Urban Areas	220	78.61	8.67			
				142	4.69	.000
Parents' Living in Rural Areas	201	79.81	19.56			

This table shows the significant difference between parents' sufferings about children with high prevalence disabilities living in urban areas and rural areas at $p < 0.05$. The results of t-test demonstrated the significant difference.

Table 4 What was the significant difference in parents' sufferings about children with high prevalence disabilities based on their literacy level?

Living Area	Total Number	Mean Value	Standard Deviation	Degree of Freedom	t- Value	P- Value
Parents' scores of (postgraduate and above) literacy level	220	77.72	9.78			
				142	4.69	.00
Parents' score of lower literacy rate (below post graduate)	221	80.92	17.87			

Note. This table shows significant difference between parents' sufferings about children with high prevalence disabilities based on their education at $p < 0.05$. The results of t-test demonstrated the significant difference.

Table 5 What was the significant difference between parents' sufferings about children with High Prevalence Disabilities of domestic mothers and Professional?

Variable of the Study	Living Area	Total Number	Mean Value	Standard Deviation	Df	t- Value	P- Value
Domestic mothers' score	301	83.71	8.98				
				142	4.69	.00	
Professional Mothers' score	120	78.66	18.92				

Note. This table shows significant difference between parents' perceptions about enduring children with High Prevalence Disabilities of domestic mothers and Professional Mothers at $p < 0.05$. The results of t-test demonstrated the significant difference.

Table 6 What were the significant differences in the parents' sufferings about children with high prevalence disabilities based on their ages?

Living Area	Total Number	Mean Value	Standard Deviation	Degree of Freedom	T-Value	P-Value
Parents' aging Forty years and above higher	156	94.82	7.77	142	4.69	.02
Parents' aging below Forty Years	265	91.11	19.07			

Note. This table shows significant difference between parents' sufferings about children with High Prevalence Disabilities aging Forty years and above and aging below forty years at $p < 0.05$. The results of t-test demonstrated the significant difference.

Table 7 What was difference in the parents' perceptions about enduring children with High Prevalence Disabilities based on their gender?

Living Area	Total Number	Mean Value	Standard Deviation	Degree of Freedom	T-Value	P-Value
Mothers' score	238	94.88	9.83	142	4.69	.04
Fathers' score	183	89.88	17.99			

Note. This table shows significant difference between mothers' sufferings about children with high prevalence disabilities and fathers at $p < 0.05$. The results of t-test demonstrated the significant difference.

Findings

The study reached the following major findings:

1. 71% responded on option very much that children with high prevalence disabilities have unrealistic expectations.
2. 70% responded on option very much that children with high prevalence disabilities is a test for them.
3. 70% responded on option very much that a child with high prevalence disabilities gets hurt easily.
4. 70% responded on option very much that a child with high prevalence disabilities needs assistance to work in classroom.
5. 70% responded on option very much that a child with high prevalence disabilities lacks understanding ability.
6. Significant difference was found between parents' sufferings about children with high prevalence disabilities living in rural and urban areas.

7. Significant difference was found between parents' sufferings about children with high prevalence disabilities based on their education.
8. Significant difference was found between parents' sufferings about children with high prevalence disabilities of domestic mothers and professional mothers.
9. Significant difference was found between parents' sufferings about children with high prevalence disabilities aging forty years and aging below forty years.
10. Significant difference was found between mothers' and fathers' sufferings about children with high prevalence disabilities.

Discussion

Based on the descriptive statistics inferential statistics in this study, it came to know that there is significant difference between parents' sufferings about children with high prevalence disabilities living in rural and urban areas. Likewise, significant difference was found between parents' sufferings about children with high prevalence disabilities based on their education. Moreover, significant difference was found between parents' sufferings about children with high prevalence disabilities of domestic mothers and professional mothers. Similarly, significant difference was found between parents' sufferings about children with high prevalence disabilities aging forty years and aging below forty years. Additionally, significant difference was found between mothers' and fathers' sufferings about children with high prevalence disabilities. These results are in line with the research study conducted by Gusrianti, et al. (2018), which states that educational background and age of parents have an impact on the parents' sufferings to endure children with high prevalence disabilities.

Based on the descriptive statistics it came to know that the highest percentage (70%) respondents perceived children with high prevalence disabilities as a test for them. Moreover, (70%) respondents perceived children with high prevalence disabilities as hurting easily. Likewise, (70%) respondents perceived children with high prevalence disabilities as needing assistance to work in classroom. Similarly, (70%) respondents perceived children with high prevalence disabilities as lacking to understand ability. Additionally, (71%) respondents perceived children with high prevalence disabilities as having unrealistic expectations. This implies that the respondents have failures as parents to endure children with high prevalence disabilities. These results are in line with the research study conducted by Hughes' (1999) who investigated that 56% parents of children with disabilities have not positive feelings about them.

Conclusions

The study ended at the following conclusions:

Parents do not perceive positively to endure their children with high prevalence disabilities. It is very challenging for them to live with them and to provide all relevant services to them for their survival. There are significant differences among all demographic variables such as gender, age, locality, and education of parents' on enduring individuals with high prevalence disabilities in Punjab.

Recommendations

The study recommended the following:

1. Awareness seminars and workshops should be conducted at all levels by the teachers and educators to change negative attitudes of parents to endure their children with high prevalence disabilities.
2. The present study needs to be persuaded with further research to reveal the acceptance of children with high prevalence disabilities by their parents.

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