CHILD REARING PRACTICES OF CAREGIVERS OF CHILDREN WITH DOWN SYNDROME IN THE THREE SPED SCHOOLS OF AGUSAN DEL SUR

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ABSTRACT

The percentage of those who are identified as having certain disabilities has changed considerably over several decades. Those with a disability have special needs that are to be provided if they are to realize their full potential. To do this, a number of people must work collaboratively and must perform different roles and functions. These people include special education teachers, other related professionals and service providers, and most specially, their own families. In the Philippines, Health Grades Inc. (2011) estimated that there are about 107,802 people who are living with Down syndrome (DS). With this statistics, not much is written about how these children are raised by their parents/guardians. This study determines which practices among caregivers from the three Special Education (SPED) schools in Agusan del Sur are effective in child rearing and to recommend a training program for the caregivers of these children. Seventeen caregivers and five special education teachers were interviewed in the study. Their children were also observed to identify their present level of performance. It was then found out that certain practices were deemed effective in the rearing of these special needs children. Hence, the findings in the study were made use in the formulation of a training program which aims at providing opportunities for caregivers to understand better their situation, optimize their resources and put them in a better position to guide and rear their children.

Keywords: Down syndrome, Child rearing practices, Special Education

1. Introduction

Heward (2006) stressed that the family is the most powerful and pervasive influence in a person’s life, as well as the life of someone with disability. Parents and family members help the child learn literally hundreds of skills long before a teacher arrives. Self-help skills and even academic competence may be even learned through the help of the family.

Even researchers today have recognized that the family of the person with a disability can help in their educational efforts. Berry and Hardman (1998) have found out that the family, in fact, can have a positive influence on the educational process and that to ignore the family is shortsighted because it can lessen the effectiveness of teaching. Parents are recognized as to have more to offer in the treatment of their children.

Similarly, Hallahan and Kauffman (2006) emphasized that parents and family members have the greatest vested interest in their children and are usually the most knowledgeable about their children’s needs. They also revealed that parents have a unique role to play with their children who
are handicapped. Their twenty-four-hour-a-day role in care and their lifelong responsibilities put them in a special situation.

As it is true that parents play a vital role in the life of the child with disability, Lin (2002) stipulated that raising a child with intellectual disability requires emotional strength and flexibility. This child has special needs in addition to the regular needs of all children, and parents can find themselves overwhelmed by various medical, care giving and educational responsibilities. Thus, whether the special needs of the child are minimal or complex, the parents are inevitably the key players.

Nonetheless, it is to be accepted that every child, special or not, is able to learn, develop and grow to some extent. Psychologists, educators, and parents all agree that these children with exceptionality have the right to be nurtured, to be cared for, and to be treated as a normal child. They believed that these children with special needs, though having the deficiency, should not be neglected especially by their parents and even by the education sector. The same still holds true to children with Down syndrome (DS). As stressed by Buckley (2002), the family is the child’s most important resource and this is true for all children including those with DS.

2. Statement of the Problem

This study aimed to describe the child rearing practices of caregivers of children with Down syndrome (DS).

More specifically, the research sought to answer the following specific problems:

1. What is the profile of caregivers of children with DS in terms of: age; civil status; educational background; socio-economic status; and attendance to seminars in SPED?

2. What are the child-rearing practices of caregivers of children with DS in terms of Physical, Cognitive, Emotional and Social aspects?

3. What is the present level of performance of children with DS on the different areas of development (Physical, Cognitive, Emotional and Social)?

4. Is there a significant difference in the physical performance of children when grouped according to their caregiver’s profile?

5. Is there a significant difference in the cognitive performance of children when grouped according to their caregiver’s profile?

6. Is there a significant difference in the emotional performance of children when grouped according to their caregiver’s profile?

7. Is there a significant difference in the social performance of children when grouped according to their caregiver’s profile?

8. What practices are strongly related with child performance?

9. What training program for enhancing child rearing practices can be developed based on the findings of the study?

3. Significance of the Study

Since this study delved on the child rearing practices of caregivers of children with DS, the information derived from this undertaking is a great help to special education workers, guidance counselors and parents themselves who have been working to address the educational needs of the aforementioned children.

This evaluation is of great importance to the following:
Parents and Caregivers. Findings of this study may provide insights into the role parents and caregivers play as advocates of their children’s education. This will help parents and other caregivers improve their attitude towards their differently-abled children and eventually lead them to be more responsive to the latter’s needs. With the findings, they will be able to know how to handle their children effectively.

Children with Down syndrome (DS). Findings and recommendations will be geared towards their needs and their holistic development shall be achieved when the Child Rearing Effectiveness Program shall be conducted.

Special Education Teachers. This will help SPED teachers in understanding their individual pupil, underscoring the uniqueness of an individual, thus focusing on the possible contributions a child with Down syndrome may share in their class.

School Administrators. Awareness of the child rearing practices employed by primary caregivers and the factors associated with these will lead in the formulation of guidelines on improving relationships among teachers, parents and administrators on the subject of child-rearing. This may likewise help in planning or improving the existing Child Rearing Effectiveness Program for Caregivers, for both school and parents to become more attuned to the needs of the present times.

Guidance Counselors. Results of this study may help guidance counselors in upgrading existing services that relate to parent/home-school partnership.

Community Stakeholders. This study may persuade the PTCAs (Parents, Teachers and Community Associations), local school boards, LGUs and other community stakeholders to help mobilize and develop the needed resources such as policy framework, materials, and advocacy to guarantee the conduct of seminars and trainings for parents of special needs children. The findings may also enlighten them that even children with disabilities have the capacity to learn and may be assets to the community.

Researchers. Other researchers who wish to undertake similar study may find this a good source of information.

4. Scope and Delimitations of the Study

This study focused on the child rearing practices of caregivers of children with DS and the relation of these practices with the socio-economic profile of the caregivers and the areas of development of the child.

The respondents of this study were from the three (3) special education schools/centers in Agusan del Sur that have been operating for more than three years, namely: San Francisco SPED Learning Center at San Francisco; and Bayugan Central SPED School; and Sta. Irene Central SPED School at Sta. Irene, Prosperidad. A total of 17 primary caregivers; seven from San Francisco SPED LC; four from Bayugan Central SPED School; and six from Sta. Irene Central SPED School and participated in this study. Their children are currently enrolled in the self-contained classes of the aforementioned schools and are diagnosed or identified as children with Down syndrome.

Results were confined to the responses elicited in the questionnaire, focus group discussion made on child-rearing practices, and observations. Variables under investigation were likewise restricted to the factors that are related to the child-rearing practices of caregivers of children with DS.
5. Conceptual Paradigm of the Study

The framework explains the relationships of the variables included in the study. The topmost box refers to Caregivers, who serve as the main respondents of the study from whom we derive the different child rearing practices. The second box from the top refers to the child rearing practices employed by caregivers in raising their children with Down syndrome in the different areas of development such as physical, cognitive, emotional and social. These child rearing practices and their interrelationship are the influences on the child’s present level of performance. Based on the result of the study, a proposed training program for parents/guardians of children with DS shall be made.

5. Methodology

This study used the descriptive-survey method to describe the factors related to child rearing practices of caregivers of children with Down syndrome and their possible implications on child rearing effectiveness program. Parents and teachers identified the children’s present level of performance through a questionnaire. Focus group discussions among caregivers and observations by three MAED-SPED students were also conducted to substantiate the results.

A training program for effective child rearing of parents/guardian of children with Down syndrome shall be the output of this study. This focuses on the least rated practices of the caregivers that must be strengthened and the most observed practices that must be sustained.
Arithmetic mean and F-test Analysis of Variance (ANOVA) were the statistical treatments used.

5.1 Participants
The researcher utilized the total population sampling in determining the participants in the study. The respondents of this study were the caregivers and SPED teachers of children with Down syndrome in the three (3) SPED schools/centers in Agusan del Sur that have been operating for more than three years. Seventeen caregivers were involved—seven from San Francisco SPED Learning Center (SFSLC) at San Francisco; four from Bayugan Central SPED School (BCSS) at Bayugan City; and six from Sta. Irene Central SPED School (SICSS) at Prosperidad. Five SPED teachers also took part in the study—two from SFSLC; two from BCSS; and one from SICSS.

5.2 Instrument
The primary tool in this study was a questionnaire drafted by the researcher. It was utilized in gathering the child rearing practices employed by the caregivers in caring for their child with DS and the present level of performance of the latter. Focus group discussion was also conducted and the caregivers’ responses were recorded and transcribed.

An observation of the performance of children with DS was conducted by three MAED in SPED students to be used as a supplement on the performance of the children.

5.3 Data Gathering Procedure
Based from the suggestions and remarks made by the experts, revisions of the said tool followed. The researcher then sought the approval of the respondents to allow the conduct of the study. She personally distributed the questionnaires, conducted the focus group discussions (FGD), and scheduled home visitation of children with DS. The recorded discussions were transcribed and written down using the Jefferson Transcription System.

5.4 Statistical Treatment
The obtained data were tallied, coded, and analyzed. The arithmetic mean and F-test Analysis of Variance (ANOVA) were the statistical treatments used in the study.

6. Findings
The following are the salient findings of the study:
1. As regards the profile of the caregivers it was found out that most of them or 52.9% are aged 46-55 years old; 82.4% are married; 29.4% are college graduates; and majority of them are earning 5,999 pesos and below (41.2%).
2. Only 35.3% of the caregivers have attended seminars or trainings related to special education while 64.7% have not attended any SPED seminars at all.
3. The child rearing practices of the caregivers are the following:
   **Physical Aspects**: The level of performance of caregivers in the physical aspect shows that the practice *always* observed by most caregivers is *training their children in toilet use*, while the practice with the most number of *never* as a response is *letting their children prepare their own meal*.
   **Cognitive Aspects**: The level of performance of caregivers in the cognitive aspect shows that the item with the most number of *always* responses was that which talks about them answering their children’s questions sincerely and honestly.
**Emotional Aspects:** The level of performance of caregivers in the emotional aspect shows that items with the most number of *always* responses from caregivers were those that talk about them explaining why they impose discipline on their children and praising/commending their children when learning new things in the house.

**Social Aspect:** The level of performance of caregivers in the social aspect shows that *teaching their children to say sorry for mistakes committed* was the practice most of the caregivers *always* observe.

4. The level of performance of children with Down syndrome in the physical aspect is found to be *very satisfactory*. There is also no significant difference in the different items for physical performance.

5. The level of performance of children with Down’s syndrome in the cognitive aspect is found to be *very satisfactory*. There is also no significant difference in the level of performance in the different items.

6. It is found out that the overall level of emotional performance of the children with Down syndrome is *very satisfactory*, as shown by the overall mean of 3.61. There is also no significant difference in the level of performance in the different items.

7. As regards the level of performance of the children in the social aspect, it is found that the overall level of performance of the children with Down syndrome is *very satisfactory*. There are also significant differences in the social performance of children with Down’s syndrome in their participation in family meetings and gatherings, in their conversational ability with family members, in their use of words to show courtesy, and in their number of friends in the community.

8. There is no significant difference in the physical performance of the children when they are grouped according to their caregivers’ age, civil status, educational attainment, socio-economic status and attendance to seminar.

9. There is no significant difference in the cognitive performance of children when grouped according to their caregivers’ age, civil status, educational attainment and attendance to seminar.

10. It was found that there is a significant difference in the cognitive performance of the children in an item (item no. 6) when they are grouped according to their caregivers’ socio-economic status since the p-value of 0.038 is lower than the 0.05 level of significance.

11. In items 11 and 15, it was found that there is a significant difference in the cognitive performance of the children when they are grouped according to their caregivers’ attendance to seminar since their respective p-values of 0.044 and 0.024 are lower than the 0.05 level of significance.

12. There is no significant difference in the emotional performance of children when grouped according to their caregivers’ age level, educational attainment, socio-economic status and attendance to seminar.

13. In item 20, it was found that there is a significant difference in the emotional performance of the children when they are grouped according to their caregivers’ civil status since the p-value of 0.048 is lower than the 0.05 level of significance.

14. There is no significant difference in the social performance of children when grouped according to their caregivers’ age, civil status, educational attainment, socio-economic status and attendance to seminar.

15. With regard to practices that are strongly related to child performance, it has been found that caregivers whose monthly salaries range from 21,000-above, 16,000-20,999, 6,000-10,999 and 5,999-below tend to impose independence in their child during eating as compared to those children whose caregivers earn 11,000-15,999 which leads to higher physical performance in the said task of the former groups. This may be attributed to an associated factor brought about by
having helpers by the two upper groups of parents and lack of quality time for supervision by the two lower groups of parents.

16. As regards practices that strongly affect child performance, the practice “Hinayaan namin ang batang sumali sa mga gawain o aktibidad sa paaralan. (We allow our child to participate in school activities.)” which is related to the socio-economic status of the caregivers, is performed better by children whose caregivers earn 21,000-above, 16,000-20,999, 6,000-10,999 and 5,999 and below than those whose parents earn 11,000-15,999 which can be again attributed to an associated factor and not socio-economic factor per se.

17. The practice “Sinagot namin ang bata ng tapat at seryoso kapag nagtatanong na may kaugnayan sa kakulangan ng kanyang pang-unawa. (We provide our child with answers to questions within his/her level of understanding.)” which is strongly related to caregivers’ attendance to SPED seminars leads to better cognitive performance on the part of the children in terms of clarifying their doubts and questions than those children whose caregivers have not attended any seminar at all.

18. The practice “Hinahayaan namin ang batang lumahok sa mga gawain o aktibidad sa paaralan. (We allow our child to participate in school activities.)” which is strongly related to caregivers’ attendance to seminar leads to higher cognitive performance on the part of the children. It seems that children whose caregivers have attended seminar on SPED cognitively perform better in participating in school activities than those children whose parents have not attended any seminar.

19. The practice “Pinakikinggan namin ang batang magpaliwanag tungkol sa kanyang ipinakitang ugali. (We listen to our child’s explanation regarding his/her behavior.)” is strongly related to the civil status of the children’s caregivers and this leads to better emotional performance on children with Down syndrome. Children whose parents are either single or separated emotionally perform better in apologizing when doing mistakes than those children whose parents are married.

7. Conclusions

On the basis of the aforecited findings, the following conclusions are drawn:

1. The caregivers of the children with Down’s syndrome are made up mostly of middle-aged individuals who are experienced enough in child rearing, are married and college graduates. Majority also of the caregivers earn only 5,999 and below which cannot suffice the special needs of their children. Furthermore, most of the caregivers also have not attended any SPED seminar which can greatly augment their knowledge on rearing children with Down’s syndrome.

2. The child-rearing practices of the caregivers in the physical aspect are always practiced by majority of the parents to help their children maintain cleanliness and hygiene and also to promote proper nutrition in their children.

3. The child-rearing practices of the caregivers in the cognitive aspect are always practiced by majority of the parents which aims to develop functional literacy, to promote love for learning and school, and to help them express their opinion in a communicative manner.

4. The child-rearing practices of the caregivers in the emotional aspect are always practiced by majority of the parents so as to boost the morale of the child, to help him/her control his/her emotions and to make him/her understand and practice proper behavior.

5. The child-rearing practices of the caregivers in the social aspect are always practiced by majority of the parents in order for them to help the child socialize with other children, eliminate feelings of inferiority and shyness, to be courteous with other people and to be confident even with their difference from other children.

6. The performances of children in the physical, cognitive, emotional and social aspects are all described to be very satisfactory. The overall performance of the children in all areas does not differ significantly also. However, a significant difference in the performance of the children is
present in some of the items in the social aspect, specifically in their participation in family meetings and gatherings, in their conversational ability with family members, in their use of words to show courtesy, and in their number of friends in the community.

7. The physical performance of the children when grouped according to their caregivers’ age level, civil status, educational background, socio-economic status, and attendance to seminars does not differ significantly. However, there is a significant difference in the physical performance of children in one particular item which is eating by themselves when they are grouped according to socio-economic status which may be attributed to associated factors and not socio-economic status of parents per se. Parents from the two upper categories tend to have helpers to make their children eat independently, while parents from the two lower categories tend to be very busy in earning a living, thus their constant absence or minimal presence during mealtime makes their child independent in eating meals.

8. The cognitive performance of children manifests significant difference when they are grouped according to socio-economic status and attendance to seminars. Children whose parents are earning salaries in the two upper and lower categories show better performance than from children whose parents are earning 11,000-15,999. Also, children whose parents have attended SPED seminars manifest better performance than those children whose parents have not attended any seminar.

9. The emotional performance of children manifests significant difference when children are grouped according to their caregivers’ civil status. Children from single or separated parents are found to perform better than children from married or widowed caregivers.

10. Children’s level of social performance does not differ significant when they are grouped according to their caregivers’ age, civil status, educational attainment, socio-economic status, and attendance to seminar.

11. There are child rearing practices that strongly relate to child performance. The practices “Tinuturuan naming ang aming anak na kumain nang mag-isa. (We teach our child to eat all by himself/herself.)” and “Hinahayaan naming ang batang lumahok sa mga gawain o aktibidad sa paaralan. (We allow our child to participate in school activities.)” are related to caregivers’ socio-economic status.

12. The practices “Sinasagot naming ang bata kapag nagtatanong na may kaugnayan sa kakulangan ng kanyang pang-unawa. (We provide our child with answers to questions within his/her level of understanding.)” and “Hinahayaan naming ang batang lumahok sa mga gawain o aktibidad sa paaralan. (We allow our child to participate in school activities.)” are strongly related to caregivers’ attendance to seminars in SPED.

13. The practice “Pinakikinggan naming ang batang magpaliwanag tungkol sa kanyang ipinakitang ugali. (We listen to our child’s explanation regarding his/her behavior.)” is strongly related to the civil status of the caregiver.

8. Recommendations

Based on the results and conclusions of the study the following are recommended:

1. Child rearing effectiveness seminars, workshops and in-service trainings for caregivers of children with Down syndrome should be conducted.

2. Parents and/or guardians, as caregivers of those with Down syndrome, must look into the different needs of the learners in the different areas of development and take into consideration the importance of attending seminars and trainings as regards the condition of their child and the effective practices that they may use in the rearing of their child.
3. The Proposed Child Rearing Effectiveness Program must be tried out with a representative group of caregivers of children with Down syndrome to determine the effectiveness and relevance of the prepared program.
4. SPED teachers must be competent and skilled in the conduct of free seminars and trainings to help parents and guardians of children with DS become ready as to their challenging role of raising their special needs child.
5. The Teacher Education Institutions (TEIs) must prepare their students and graduates in handling children with Down syndrome as well as those with other special needs.
6. A study on the difficulties of parenting or child rearing should be conducted to further provide information about child rearing.
7. There should be a similar study made on the rearing practices of parents of children with other disabilities or exceptionalities.
8. There should be a comparative study on the performance of children with DS whose parents have undergone Child Rearing Effectiveness Program and those whose parents have not.
9. School Administration must include in their action plan and must allocate funds for the conduct of free seminars/trainings for parents/guardians of children with special needs.
10. To provide a more extensive study on the child rearing practices of caregivers of children with Down syndrome, further researches are encouraged where the present study is limited.

References


