Social acceptance for the mentally retarded

George E. Suda
SOCIAL ACCEPTANCE
FOR THE
MENTALLY RETARDED

by
George E. Suda

A RESEARCH PAPER
SUBMITTED IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE DEGREE OF
MASTER OF ARTS IN EDUCATION
(EDUCATION OF MENTALLY HANDICAPPED)
AT THE CARDINAL STRITCH COLLEGE

Milwaukee, Wisconsin
1972
This research paper has been
approved for the Graduate Committee
of the Cardinal Stritch College by

[Signature]
(Adviser)
Date [Date]

[Date] [Month], [Year]
TABLE OF CONTENTS

Chapter                                                                 Page
I. INTRODUCTION ............................................. 1

II. EARLY DEVELOPMENT OF SOCIAL MALADJUSTMENT ......... 3
   The Family
   The School
   Causes of Social Rejection

GUIDANCE FOR THE SOCIALLY REJECTED SCHOOL
   Mentally Retarded
   Work
   Remedy
   Leisure

III. SUMMARY ................................................ 23

BIBLIOGRAPHY ............................................. 25
CHAPTER I

INTRODUCTION

No person is able to stand by himself in modern society. In the same way no student, whether normal or mentally retarded, is able to stand by himself, to learn by himself or to have only himself as a social contact. The educable mentally retarded student is a human being, created by God for a definite purpose in life. He must have social contacts as well as any person in our complex society. He is faced with many intolerable daily situations, not being accepted by adults or his peers.

It is therefore the purpose of this paper to attempt to discover the causes, reasons for rejections, and if possible the solutions to the problems of social acceptance of the mentally retarded.

The school must make special provisions to teach personal and social skills to the retarded, not only because of the retardation factor but also because these pupils are often socially and culturally handicapped by their home and community environments. Even when they do not suffer such social privations, the attitudes of their school peers as well as other school personnel may make the attainment of social competence a more difficult task than for others who are more nearly normal. The greater the degree of mental and social inadequacy, the greater the emphasis must be upon teaching simple social skills and adjustments as a base for effective relationships within
the environment.\textsuperscript{1}

It has become apparent to the researcher that the reasons for poor social acceptance of the retarded are inappropriate dress and grooming, improper physical hygiene, deviant behavior patterns, lack of social graces, the stigma of special class placement, cultural deprivation, and familial reputations. These latter mentioned pertain to families whose surnames may cause the mentally retarded child to be unaccepted by his social and academic peers.

CHAPTER II

RESEARCH

EARLY DEVELOPMENT OF SOCIAL MALADJUSTMENT

Every person's social adjustment is the result of his association with his family, with himself and with his social community. Indeed, it is imperative that the retarded individual find complete and assured association within these three vital means toward attaining total social acceptance.

The Family

In today's modern, complex society the ties of the family are all important. The family structure is based upon culture, income, religion, customs and the family members themselves. The bonds of the family should be toward furthering the individual's search to find his respected place in the total of society.

From the time of conception to the birth of a child there is great anticipation for the future of the child. If the child is born mentally retarded there may be an effect upon all members of the family. Parents of such children share in these feelings and have difficulty in adjusting to the advent of a mentally deficient child. Walker emphasizes that parental

attitudes of rejection toward subnormality exists even though unexpressed or camouflaged by over concern or protectiveness. McLachlan and Evans put more stress on other aspects of the parent-child relationship as sources of difficulty, considering that broken homes, constant discord, illegitimacy, and unrealistic parental ambition have adverse effects on the child. Barclay finds that when social age estimates closely approximate or are behind the corresponding mental age estimates, that it very often reflects disturbances in the parent-child relationship which affects attainment of adequate, even though limited socialization skills. Chazam agrees that maladjusted children had interrupted or incomplete relationship with their parents. The child's dependency needs in self-help skills continue for so long a period of time that the rapport that usually exists between mother and child is damaged. Rejecting or smothering attitudes of the parents and siblings arise to aggravate further or defeat the child's weak attempts to establish his identity and to learn the necessary social skills.

It is usually found that a number of factors combine to produce maladjustment in any one case. Each situation is unique. Much will depend

---


5Chazam, Factors Associated with Maladjustment, p. 282.


7Chazam, Factors Associated with Maladjustment, p. 279.
upon parental experiences, education and culture, the family income, religious beliefs, the degree of acceptance or rejection of the retarded child, state Begab and Kanner. Congenital factors, especially stress during pregnancy, are particularly important as they are likely to result in multiple impairment of mental retardation, a tendency to physical weakness and proneness to emotional maladjustment. 9

In some families of low socio-economic status, retardation of a child may be only one of the many serious problems affecting the family and is not therefore, always perceived as a crisis situation. 10 The familiarly retarded child might not be different from other family members and thus not present new problems. 11 Many mentally retarded adolescents in such families, who are in the higher functioning range of retardation seem to have much in common with their normal contemporaries and have acquired some social skills in the process of daily living. 12

Parents seem better able to adjust to the problem of retardation if there are normal siblings in the home. The retarded child's siblings are more adversely affected by a high degree of dependency on the part of the retarded child. Boys have a more negative influence on marital integration

9Chazan, Factors Associated with Maladjustment, pp. 277-278.
11Felsenthal, The Role of the School Psychologist, p. 29.
12Gerhenson and Scheiber, Mentally Retarded Teenagers, p. 108.
than girls and as the mentally retarded boy grows older, he generally has an increasingly disruptive effect on his parent's marriage. Normal sisters, but not brothers, are given parent substitute responsibilities and are adversely affected by their responsibilities.

The family's religious involvement has a significant effect on the acceptance of the retarded child. Mothers who consider themselves more intense in religious practices indicate more acceptance of their retarded children and Catholic mothers tend to be more accepting of their retarded children than non-Catholics. Farber concurs with the latter statement in finding that participation in the Catholic Church is supportive.

The School

The mentally retarded individual's adjustment is influenced by many stressing pressures. These may be family status, peers, and siblings. The recognition by a child of his ability to influence others is the beginning of social behavior. This takes place between the first and second months of life. The child exhibits this recognition when he cries to be picked up. Social smiling appears as a reflex activity by the third month after birth and becomes selective and purposeful by the sixth month. Social interaction with peers begins relatively early depending upon opportunities for

---

14 Ibid.
15 Ibid.
such contacts. Such interaction is impersonal and another child appears to be pretty much as play material. Fighting, usually over playthings, appears between nine and thirteen months, as does a primitive form of cooperation. The social use of play material becomes evident between fourteen and eighteen months. The period between nineteen and twenty-five months gives evidence of a decided spirit in social activity with children modifying their behavior in adjustment to a partner's activity. Cooperative behavior increases by the age of three. 19

School entrance not only increases the opportunities for social interaction but also provides most children with the first real opportunity to test the role to which they have been assigned by their families and reevaluate the rules which they formerly accepted as universal and infallible. 20 The social skills that are required in school are highly dependent on higher mental processes of judgement, reasoning and dealing with abstract symbols. These processes are those in which the deficient person exhibits serious short-comings. 21 Due to loneliness and rejection the retarded individual is frequently taken advantage of by his peers. 22 His peers' active rejection causes isolation because of the individual's behavior patterns involving aggressiveness. 23

---

20 Ibid.
21 Ibid., p. 41.
22 Fe1senthal, The Role of the School Psychologist, p. 29.
Being so far behind his chronological skills to deal with his peers, the retardate loses contact and grows up through these formative years as an isolated child deprived of the necessary social stimulation and lags in all growth gradients. The entire chronology of growth is upset and the child either arrives late at a designated point in his life or never arrives at all. The ambivalent attitudes of his peers are confusing and distressing to a child who is having great difficulty understanding the world around him. He is faced with the alternatives of either yielding completely and thus assuming a dependency status which stifies all future growth or engaging in bizarre or fantastic behavior that obscures the potentials that originally may have been present.

The intellectually handicapped has a more pervasive deficiency and is surrounded by more hostile feelings and influences. Individuals so affected will indicate an impairment in the intellectual functioning as a result of which some degree of social inadequacy will be present. This social inadequacy is apparent in each stage in the lives of these individuals. Adulthood, if attained, may be a period of continual dependence upon others. This further increases the individual's dependency and propels him into a parasitic role with his parents as his host.

The Community

Recent trends in education and vocational rehabilitation have forced the local community to accept the mentally retarded individuals as one of its

---

26 Ibid., p. 10.
27 Ibid., p. 11.
When the mentally retarded finally reaches the stage of adulthood and his school term is terminated, the individual is faced with further degradation. In a community where all are either engaged in work or being prepared for work, retarded adults who do not work feel degraded, isolated, and unable to adjust to a normal life. If he is able to find work the retarded adult is severely penalized. His problems arise from basic retardation in normal development and limitations in social competency. He needs to resolve his feelings of inadequacy and insecurity derived from a life-long history of failure in competing with others around him. 28

When the community is knowledgable concerning retardation the mentally retarded person is better accepted and adjusted in the environment. Community pressures can be supportive or non-supportive. The community's understanding of the problem can be a source of confidence or distress in daily living. Parents continually face the problem of public reaction to their retarded child. 29

Causes of Social Rejection

Society has come to expect certain conformities from its members. For most individuals these mores are learned incidentally. For the mentally retarded individual these are not acquired but must be taught in a structured fashion in order that society does not socially reject him.

Rejections of an individual come about through his interaction with others within his sphere of influence. Dunn states that the mentally retarded


29Felsenthal, The Role of the School Psychol, pp. 31-2.
pupils are not rejected by their classmates because they are slow in learning school subjects but generally because of lack of cleanliness and unacceptable behavior of aggressiveness probably as a reaction to failure.30

The educable mentally retarded child can learn how to care for his personal hygiene and how to appear well groomed in order to be socially acceptable. He must react adequately at social gatherings and in public places and must know how to meet ordinary daily situations.31 Kern and Pfaeffle relate that the most resented characteristic retardates display is anti-social behavior.32 These behaviorisms may well have been the result of the retarded's inability to compete in school and in intellectual situations.33

Physical size and stamina plus freedom from physical handicaps may be one of the prime determinants of success. Physical well being and desirable self concepts appear to be closely related to the personality syndromes of mental retardation.34

The first impression a person receives of another is that of his appearance. A person's physical appearance is likely to affect the person's acceptance by others on the grounds that the person who obviously looks sub-normal is more apt to arouse feelings of rejection in others. Therefore he is not only evaluated less favorably and blamed for nonexistent failures, but people also behave differently and generally less favorably toward him.

If a person is physically blemished, he may feel responsible, ashamed and deserving of punishment. At the other extreme, he may feel his condition should not be stigmatized or that he is not accountable for it. A person who thinks he is perceived as stigmatized will do what he can to dispel this unfavorable impression. He is not only evaluated less favorably and blamed for nonexistent failures, but people also behave differently toward him. This contributes more to his difficulty in relating to society.

35Chazan, Factors Associated with Maladjustment, p. 282.
37Ibid., p. 171.
38Ibid., pp. 178-179.
39Ibid., p. 170.
MENTALLY RETARDED

A person perceived with social maladjustment has had this developed because of a variety of causes and not by heredity alone. The school is probably the child's first formal introduction to social interaction. If the initial interaction is unpleasant, the academic and peer group relations may suffer for future educational pursuits.

Mentally retarded children must be taught many things which normal children learn spontaneously or incidentally. Often they must be taught to play and to be helped in developing creative qualities that give them fun and pleasure. When this has been achieved the retardate can gain the same satisfactions from participating in social activities as other people. These satisfactions derive from: (a) being recognized and accepted in the group situation, (b) a sense of accomplishment in activities in which he is successfully interacting with his peers, (c) the experiences of self expression, especially when making positive contributions to the group's activities, (d) the enhancement of self-esteem, (e) the feelings of "belonging".

In American education there seems to be growing emphasis in the formal academic disciplines and emphasis on the whole child seems to be declining. The business of the school is to transmit knowledge, not to concern itself

40Gershenson and Scheiber, "Mentally Retarded Teenagers", p. 104.
with children's personalities or emotions. \textsuperscript{41}

Children who are maladjusted and rejected by their early peer groups often grow up to be poorly adjusted, unhappy adults and thus likely to be low achievers in school. \textsuperscript{42} Professionals must take into account not only what the child is but also how he got there and what kind of support the family and society are willing to provide. \textsuperscript{43} Problem children are what they are because of some condition or situation and this condition or situation has the possibility of being removed and the child is a most likely candidate for complete recovery. The primary problem is the discovery of the cause of his condition. \textsuperscript{44}

Work

Society frowns upon the person who is unemployed and does not earn his place in society. Persons who are unable to earn their way monetarily are looked upon with disgust and little sympathy even though they may be handicapped physically and mentally and unable to support themselves. The mentally retarded should be steered in a course toward an employable state in which he can support himself even though it may be partially. Society will thus look upon him in a more favorable attitude and will accept him as a useful citizen.


\textsuperscript{42}M. M. Bushwell, "The Relationship Between the Social Structure of the Classroom and the Academic Success of the Pupils," \textit{Journal of Experimental Education}, XII (September, 1953), pp. 37-52.


The mentally retarded and his fellow workers' relationships are formed more readily between members who are of the same socio-economic or cultural background. The members of this group are able to relate more easily to each other.\textsuperscript{45} For the socially handicapped the remedy is to remove or mitigate as far as possible environmental influences that hinder making an adequate social adjustment in life.\textsuperscript{46} It is therefore important that the socially rejected mentally retarded be given proper placement in employment allowing personal growth according to individual capacity and need, the adjustment of the individual to other persons, to groups and society and the motivation of the individual toward the improvement of society, the recognition by the individual of his own rights, abilities and differences of others.\textsuperscript{47}

Professionals who are concerned with the employment of the mentally retarded in competitive industry have stressed the importance of understanding their personal and social adjustment patterns. Rehabilitation and training of the mentally retarded puts stress on the development of personal and social skills rather than on the mastery of specific vocational skills.\textsuperscript{48} Therefore the employment of the individual should be geared toward the job, not the job toward the individual. The person's intelligence is found to be

\textsuperscript{45}Gershenson and Scheiber, \textit{Mentally Retarded Teenagers}, p. 108.

\textsuperscript{46}Lemee, \textit{Social Adjustment}, p. 11.


significantly associated with his vocational adjustment\(^49\) and so it is vital that the mentally retarded be given proper employment placement.

**Remedy**

After the cause of the situation has been discovered, a carefully planned program for recovery should be followed. The program should follow:

1. An accurate differential diagnosis.
2. A considered prognosis.
3. Accurate treatment.\(^50\)

Teachers can help students who are social isolates by being trained in sociometry. This training would help the students improve their social position.\(^51\) Chennault showed that pupils who have rated lowest on the sociometric pretest gained significantly in both peer acceptance and self perceived peer acceptance following their mutual participation with pupils who were rated highest on the sociometric pretest.\(^52\)

Friendships can develop for reasons other than personality characteristics and similarities, and the proximity of the subjects. These friendships once developed are not static and are susceptible to reinforcement contingencies. When children are reinforced jointly, each member of the pair becomes a cue for reinforcement for the other. These experiences will then

\(^49\)Ibid., p. 170
\(^50\)Lemee, *Social Adjustment*, p. 11.
\(^51\)Amidon and Hoffman, *Can Teachers Help*, p. 149.
have a concomitant effect on the evaluation of friendship status; the greater
the amount of reinforcement, the more intense the friendship.53 These con-
ingencies as a part of the subject's environment lead to practical implica-
tions for behavior management. Parents and teachers who are concerned with
the peer relations of their children and students might be encouraged to
use reinforcement techniques to modify their children's interaction. This
technique can be used for modification of friendships and can be of value to
professionals interested in improving the social status of disadvantaged
and the disturbed child.54 It has been found that children who are rejected
by their peers are likely to have learning difficulties.55

Experience with groups of mentally retarded indicate that while
individuals change within the group, there is some group movement toward higher
levels of activity. Individuals, however, do learn to participate in activities
with their peers and in social adequacy appear to move closer to the social
expectations of their chronological age.56

In order to aid the child in furthering his peer group acceptance,
parents, teachers and professionals should:

1. Train the child to adjust to and interact with other children. It
   seems helpful to develop a "group spirit" or loyalty to other members
   of his class.

53Burton Blow and Janet Rafferty, "Changes in Friendship Status as a
54Ibid., p. 120.
55Amidon and Hoffman, Can Teachers Help, p. 149.
56Gershenson and Scheiber, Mentally Retarded Teenagers, p. 108.
2. Children should be exposed to many situations outside the school premises.

3. Eliminate undesirable behavior by attempting to substitute desirable habits. \(^{57}\)

4. Teachers and administrators should realize that not all children in any given classroom can be completely rehabilitated. Although most can be helped, none should be made worse as a result of classroom experiences. On the other hand, an entire class cannot be penalized by undue time demands on a teacher by one child.

5. It should be realized that any special or unique condition of a child is likely to be accompanied by some degree of emotional and social disturbances.

6. Communities and schools should work together both to get at the roots (prevention) and treatment of emotional and social disturbances.

7. Programs of parent education should be set up on a broad scale. Most probably these should be in conjunction with public school systems. Such programs should be sufficiently broad to include therapeutic or treatment provisions for parents of disturbed children. Parent problems are usually at least two-fold: poor attitudes and poor practices. The latter may be based either on the former or a lack of or wrong information, but most frequently poor attitudes are responsible for poor practices.

8. Every school should include a core (not necessarily an ambitious one) of specialized personnel to aid in the detection and remedial education of disturbed children. Teachers and administrators should be trained to utilize such personnel. It is not justifiable to expect teachers to be full-fledged psychiatrists, psychologists, and social workers; they need and deserve intelligent guidance from relevantly trained special personnel.

9. Wide-range facilities should be provided for the treatment of disturbed children: individual guidance, minor re-arrangements, and flexibilities of regular classrooms, special small group procedures (including special guidance classes), special rooms or even schools (in larger communities) and for the most disturbed youngsters, residential treatment centers. These are now so expensive that only the larger cities and/or individual states can afford them, yet they are economical in the long run.58

Leisure

In today's world man has advanced himself by many labor-saving scientific devices. These devices have furnished man with more leisure time than ever before. Many communities have been negligent in furnishing leisure time activities for its citizens. The American Association for Health, Physical Education and Recreation has suggested six goals for American recreation:

1. Personal fulfillment.
2. Democratic human relations.
3. Leisure skills and interests.

4. Health and fitness.
5. Aesthetic appreciation.59

Recreation facilities and personnel have been reluctant to offer services to the mentally retarded. All the old stereotypes of the retarded seem to make recreational administrators "back off" from providing services to the retarded.60

A system of services should be set up to meet the recreational needs of all retarded citizens. Camping, physical education, park facilities and recreation all need to be incorporated in a network of services. The type of existence offered to the mentally retarded in the community will in large part be predicated upon the social acceptance of the community.61 Not all retarded persons need these segregated services, as many in higher levels of retardation are able to compete satisfactorily within groups of their peers. Others need to be given group and recreational experiences in segregated settings. The emphasis needs to be on expanding the environment, encouraging growth through play and ego-satisfaction as a result of positive interpersonal and group-social relationships. The person must come first and the disability come second.62

In the past the organisations which built the foundations of group work were the self help and informal recreational ones: settlement houses, American Association for Health, Physical Education and Recreation (1966), in R. M. Scheer, "Fusion of Social Group Work and Recreation Skills in Providing Service to the Mentally Retarded," Training School Bulletin, 65 (May, 1968), p. 23.

60Scheer, Fusion of Social Group Work, p. 27.
61Ibid., p. 27.
neighborhood centers, and camps. Today our ever expanding recreational needs must look at the services provided to the retarded. Whether these people are pre-schoolers, teenagers, young adults, or senior citizens, they are entitled to the very best quality of services. Because of their specialized needs, these services will often have to be tailor made.

Whenever possible recreational facilities provided for the retarded should be provided by already existing agencies. The programs should be geared toward the individual's interests and needs: group experience, satisfaction of group activities, personal growth through social relations, and an opportunity to participate as a responsible citizen. Because the retardate is limited in social experience, it is necessary to have a highly structured program planned that remains similar from week to week. As the participant becomes more accustomed to the pattern, he begins to anticipate what will come next deriving much satisfaction from this accomplishment.

The New York City Chapter, Association for Help of Retarded Children formed a teen club called the "Queen's Teens." The group was called a "club" on the assumption that the term would have status significance to the adolescents. This teen program listed five purposes:

63 Ibid., p. 23.
64 Ibid., pp. 27-28.
65 Ibid., p. 27.
66 Ibid., p. 22.
67 Gershenson and Scheiber, Mentally Retarded Teenagers, p. 108.
1. A medium of enjoyment for mentally retarded children.

2. A setting which will aid them in social adjustment—one which provides a small intimate face-to-face experience with others of the same age, including members of the opposite sex.

3. Experiences to help them develop simple, useful skills that they can carry over to the home, to the community, and perhaps to employment.

4. Experiences to help them accept themselves and the limitations imposed by their retardation, as well as to utilize their capacities to increase their feelings of self worth.

5. A means of freeing parents for a few hours weekly of the supervision of the retardate and of helping them to carry over into the home and community attitudes that will promote increased independence in their children.

The group worker took the responsibility for planning a program and modifying it to both the groups and the individual's readiness at the time of the meeting. The worker and the volunteers worked with the youngsters in an uncritical and supportive manner in regard to their participation while attempting to further their development in areas of self-care, use of program activities and materials, interaction with their peers and adults and self expression.

As a result of the experiences with Queen's Teens, some general observations can be drawn for group work with the retarded:

1. Retardates, like other individuals, can be expected to react differently to group experiences.

2. The individual's needs take precedence over group needs.

3. Program is planned to provide individuals with opportunities to experience success.
4. Expectations of the level of an individual's performance must vary in relation to the intellectual, social and emotional aspects of behavior.

5. Group activities must be carefully selected to suit the functioning level of the group. 68

The level of adjustment such an individual may attain depends upon potentials that are present, upon early acceptance of a life plan and upon prompt entrance into a realistic program of treatment. The role of the special educator is to recognize individual differences within the group, to assist in the formation of life plans, and to bring his skills to bear upon function of such plans. 69

68Tbid., pp. 104-107.
69Lance, Social Adjustment, p. 11.
CHAPTER III

SUMMARY

People need people. Our society is so complex as to demand that people depend upon various specialized structures. Industry produces through automation many labor-saving devices. In each mold of industrialization, efficiency is measured by the ability of its workers to produce and production is possible only through the harmony of its workers.

Intelligence is not the only facet to achieve success. The ability of one to get along is probably the most important. For people of normal and subnormal intelligence their ability to achieve social acceptance by their fellow man strongly correlates with success.

A child begins his first social experiences within his family. Family ties are so important that early familial experience may affect a child to the extent that in later life very little may be done to remediate earlier damage caused by family influences. His acceptance within a family may have a marked effect. This in turn carries over into the school, community, employment and into his later life. If the acceptance of the individual in society turns to a maladjustment, this may cause a monetary and mental strain upon all agencies with which he has contact.

School authorities are probably the primary agents concerned with the state of the mentally retarded child. Special provisions must be provided, different facilities and curriculum prepared, instructors who are tolerant of
the handicapped and trained to deal specifically with the mentally retarded must be available. School is the potporri; it is expected to overcome, mold, substitute developed traits, gaining sometimes poor results and, at times even adding to the handicap. If further special facilities are not provided, the handicapped person deteriorates to a stage where he is eliminated entirely from an academic environment as well as social contacts.

Employment may be impossible because of his lack of ability to get along with fellow workers. Business operates entirely upon the economic ability of its workers to produce a profit. Finding a niche for a mentally retarded person who lacks the social acceptance skills of his fellow worker is deemed impossible. He is degraded into a role where hardships affect all of society. Agencies which deal with these problems are so hard-pressed that few valid results can be realized.

Public sympathy has demanded that beneficial results be forth coming. Through science and educational advancements, many programs within the community have begun for the mentally retarded individual. Agencies dealing with each complex stage of development have aided mentally retarded people in both accepting themselves and in being accepted by their fellow men. Many communities are still lacking in programs for the retarded due to ignorance, lack of funds or trained personnel.

The socialization of the mentally retarded person is the joint task of the community, the church, the school and the family. Results are achieved through joint effort. The role of society is to serve each of its citizens contributing to them and effecting in each a whole person: physically, mentally and socially.
BIBLIOGRAPHY

BOOKS


Frampton, Merle E., and Gall, Elena D. *Special Education for the Exceptional*. Boston: Porter Sargent Publisher, 1956.


ARTICLES AND PERIODICALS


