Abstract

Introduction: Presence of mentally retarded children in every family affects on the structure and mental health of family specially parents. The purpose of this research is the comparison of the mean of psychological well-being, mental health and self-esteem between parents of normal and educable students.

Materials & Methods: This was causal-comparative and retrospective study and the instruments were three questionnaire of self-esteem, public mental health GHQ and psychological well-being. Self-esteem questionnaire is including three scales of academic performance, social evaluation and external evaluation. The GHQ questionnaire is consisted of 28 items while psychological well-being questionnaire include 19 item for life satisfaction, 13 item for happiness and optimism, 8 item for growth and development, 8 item for positive relationship with others and 10 item for autonomy. The results were analysed by SPSS software.

Results: This research showed that normal students parents have more psychological well-being than educable students’ parents, moreover two groups of educable and normal students parents are equal in mental health and self-esteem structure and there isn’t significant difference between them.

Conclusion: This research showed that psychological well-being in educable students’ parents is lower than normal students’ parents. Thus it is suggested that educational organization of exceptional children arrange courses for improving psychological well-being of educable students’ parents.

Keywords: Students, Mental Health, Self Concept, Parents

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Introduction

Family are one of the most natural groups that can provide human needs. The duty of family is caring and upbringing children, creating a healthy relationship with others and helping independence of children even if the child are mentally retarded, blind or deaf. Mentally retardation is a particular state of mind that occurs in the different situations before or after the birth.

Birth and presence of mental retarded child in every family may be considered as an adverse and challenging event that follow the possibility of despair, stress, sadness and depression. Various evidences show that parents of children with intellectual difficulties encounter more social and economic problems and often emotions that have destructive, pervasive and limiting nature. In this situation, although all family members and their function are injured, it is assumed that caring the child with this problem puts the family at the suffering risk of mental health problem.

Researchers have shown that parents of mentally retarded child have lower levels of public health and psychological well-being more anxiety [1]. During the past century a lot of psychologists have agreed that human needs self-esteem. In psychological literature there are detailed subjects about self-esteem and until now a lot of investigations and researches are performed to determine their relationship with multiple variables. More researches approve that high self-esteem is one of the most positive and effective factors in mental health while low self-esteem is a disposed factor that can cause psychological disorders. Self-esteem means sense of being valued. This sense is resulted from overall thoughts, feelings, emotions and experiences during the life. All people, regardless of age, gender, cultural context and type of work they have, require self-esteem. People who have good feelings about themselves usually have a good feeling to their lives.

They can encounter to problems with confident and overcome them [2]. Educable mentally retarded children are a group of mentally retarded children with IQ 50 to 75 and in the age range of 6 to 12 years. In this research, an educable mentally retarded is a child who studies in a special school based on education experts’ assessment. Also one of the groups that is studied in this research are parents of mentally retarded children.

A normal child is a child who has no problem for mental retardation, blindness and deafness, no problem about learning disorder and no specific psychological problem. Exceptional child and his/her parents have mutual influence not only each other but also on family members such other offspring. Presence the exceptional child often harm to family interaction. The level of this vulnerability sometimes is to the extent that the family mental health damage seriously. A person who is mentally health can overcome the problems, compromise to him/her self and
other people and not be disappointed in inevitable internal conflicts [3]. World health organization defines health as a perfect physical, mental and social well-being and it’s not only the absence of patient (world health organization 2001, 2004).

The new patterns of health mainly emphasize on negative characteristics and measuring instruments of health often deal with physical problems (such mobility, pain, fatigue and sleep disorders) psychological problems (such depression, anxiety, and apprehension) and social problems (such disability in social role, marital problems). In the past few decades Ryff et al (1926) [4] submitted psychological pattern of well-being or positive mental health. This pattern is composed of six factors that consisted of self acceptance (having positive attitude about him/her self), positive relationship with others (communicating intimately with others and ability of sympathy), autonomy (feeling of independence and the ability to resist the social pressures), targeted life (having purpose in life and fulfilling it), personal growth (growth feeling continuously) and environmental mastery (the ability to managing environment). Ryff pattern widely has been considered in the world. He submitted this pattern at the base on mental health and believed the components of mental health pattern are positive and this will help the measurement of level of well-being and person’s positive function. The research has shown that the parents of mentally retarded children generally deal with the risk of family problems and emotional difficulties [5].

Presence of disabled child can have irreversible effects and harms. Psychological trainings consist of teaching life skills and self-assertion, psychological treatments such behavior therapy, types of Psychotherapy and rehabilitative methods about perceptual and cognitive disorders are the type of psychological interventions. Psychological interventions are proceedings that psychologists and consultants apply for prevention and treatment and reducing psychological disorders in people. The final purpose of these interventions is helping people for better understanding of themselves and world around, increasing capability of adjustment and improving mental health [6].

One of the main concepts is well-being model. Health model combines three types of emotional well-being, psychological well-being and social well-being and create comprehensive concept of well-being that encompasses both emotional feature (well-being) and applicable feature (psychological and social well-being). Mental health has 13 signs. 2 of them are related to emotional well-being, 5 signs are related to social well-being and 6 signs are related to psychological well-being. Psychological well-being means actualizing all person’s talents and it includes components of 1- Autonomy (the feeling of ability to manage around and …), 2- Personal growth (having growth continuously and …), 3- Positive relationship with others (communicating intimately an …), 4-Targeted
life (having purpose in the life), 5- Self-assertion (having positive attitude about him/her self and …), 6- Environmental mastery (ability of choice and creating convenient environment and …). Also parents with high self-esteem have more mental health and psychological well-being than parents with low self-esteem. Now the main question of this research is whether the average of self-esteem, mental health and psychological well-being scores are different between parents of normal children and educable children parents or not?

**Materials & Methods**

This causal –comparative and retrospective study included all parents of normal students that have 7 to 12 years and IQ between 50 to 70 in Yazd city.

The instruments were three questionnaire of self-esteem, public mental health GHQ and psychological well-being. Self-esteem questionnaire is including three scales of academic performance, social evaluation and external evaluation.

psychological well-being questionnaire was created by Zanjani Tabasi (1383) [7] for psychological assessment. The scale of psychological well-being measurement includes 77 questions and 6 scale that is consisted of subscale of life satisfaction, spirituality, happiness and optimism, personal growth, positive relationship with others and autonomy. To estimate the internal consistency Cronbach's Alfa method was used. The reliability coefficient for the total scale was 0.94. This coefficient obtained in the secondary test between 0.90 and 0.62.

The self-esteem questionnaire was created by Hetron and Polvi (1991). The scale of psychological well-being measurement includes 20 questions. It is consisted of 3 subscales of external evaluation, social assessment and academic performance. Self-esteem scale is developed by choice. Every choice shows the attitude of interlocutor to him/herself that scoring is base on 1 to 5 likert scale. The total percentage of the scale is 92%.

Public health questionnaire GHQ-28 the most well known screening test that has widely influenced on developing studies in psychiatry is public health questionnaire (Handerson, 1910). Primary form of this questionnaire was consisted of 60 questions.

In the present study, the form 28 item questionnaire was used. GHQ-28 includes four subscales that are A) Physical signs: It devotes to 7 item and examines headache, weakness, feeling the need of strengthening drugs and hot or cold sense in body. B) Anxious signs: It devotes to 7 item and examines anxiety, insomnia, pressure, anger and anguish. C) Disorder in social interaction: It devotes 7 item and evaluates the ability of person in doing works, feeling of satisfaction, sense of usefulness, learning ability. D) Depression signs: It devotes to 7 item and evaluates the sense of worthless, hopelessness, suicide
thoughts, dying wish and disability in doing works (Goldberg and Hiller, 1979).

**Results**

To examine the research hypothesis, that psychological well-being is different between parents of normal children and educable children, a statistical test was used for comparison of independent samples. The results are as follows.

**Table 1.** Descriptive index of well-being between parents of mental and educable children

<table>
<thead>
<tr>
<th>Variables</th>
<th>numbers</th>
<th>Average</th>
<th>Standard deviation</th>
<th>error Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological well-being (parents of normal children)</td>
<td>30</td>
<td>338.63</td>
<td>103.89</td>
<td>18.96</td>
</tr>
<tr>
<td>Psychological well-being (parents of educable children)</td>
<td>30</td>
<td>125.17</td>
<td>15.71</td>
<td>2.86</td>
</tr>
</tbody>
</table>

**Table 2.** The comparison of the mean between the groups being compared

<table>
<thead>
<tr>
<th>Statistical index</th>
<th>Significant difference</th>
<th>d.f</th>
<th>t</th>
<th>error Standard deviation</th>
<th>Difference of average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological well-being</td>
<td>000.0</td>
<td>58</td>
<td>*11.17</td>
<td>19.18</td>
<td>213.46</td>
</tr>
</tbody>
</table>

* P>0.05=

Table 2 shows there is significant difference between two groups in terms of psychological well-being. According to descriptive data in table 1 the mean of psychological well-being in parents of normal children is higher than educable children parents.

To examine second hypothesis, that mental health is different between parents of normal and educable children, a statistical test was used. The results are as follows.

**Table 3.** Descriptive index related to mental health between parents of normal and educable children

<table>
<thead>
<tr>
<th>Variables</th>
<th>numbers</th>
<th>Average</th>
<th>Standard deviation</th>
<th>error Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health (parents of normal children)</td>
<td>30</td>
<td>50.53</td>
<td>5.82</td>
<td>1.06</td>
</tr>
<tr>
<td>Mental health (parents of educable children)</td>
<td>30</td>
<td>51.43</td>
<td>6.72</td>
<td>1.23</td>
</tr>
</tbody>
</table>
Table 4. T test for comparison the independent samples average of the mental health between compared groups.

<table>
<thead>
<tr>
<th>Statistical index</th>
<th>Significant difference</th>
<th>d.f</th>
<th>t</th>
<th>error Standard deviation</th>
<th>Difference of average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health</td>
<td>0.582</td>
<td>58</td>
<td>*0.55-</td>
<td>1.62</td>
<td>-0.9</td>
</tr>
</tbody>
</table>

Table 6 shows that there isn't significant difference between two groups in terms of mental health.

The third hypothesis was, that self-esteem is different between parents of normal and educable children, and the results show that there isn't significant difference between two groups in terms of self-esteem.

Table 5. Descriptive index related to self-esteem between parents of normal and educable children.

<table>
<thead>
<tr>
<th>Variables</th>
<th>numbers</th>
<th>Average</th>
<th>Standard deviation</th>
<th>error Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-esteem (parents of normal children)</td>
<td>30</td>
<td>54.67</td>
<td>9.13</td>
<td>1.66</td>
</tr>
<tr>
<td>Self-esteem (parents of educable children)</td>
<td>30</td>
<td>59.03</td>
<td>9.28</td>
<td>1.69</td>
</tr>
</tbody>
</table>

Table 6. T test for comparison the independent samples average of self-esteem between compared groups.

<table>
<thead>
<tr>
<th>Statistical index</th>
<th>Significant difference</th>
<th>d.f</th>
<th>t</th>
<th>error Standard deviation</th>
<th>Difference of average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-esteem</td>
<td>0.083</td>
<td>58</td>
<td>1.84-</td>
<td>2.37</td>
<td>-4.36</td>
</tr>
</tbody>
</table>

Discussion

This research was conducted for studying the level of difference self-esteem, mental health and psychological well-being between parents of normal students and parents of educable students in Yazd city. The results of this study showed that psychological well-being between parents of normal students are more than parents of marginal students.

The results are consistent with the results of Ahmadpanah (1380) and mikaili (1388) research. Also there isn't significant difference in the term of self-esteem between parents of normal and marginal students. Ahmadi (1377), Khagepour (1377), Zaki (1386) and Ranjbar (1385) in their research showed inconsistent results. One of the reasons of this inconsistency can be a lot of questions in each questionnaire (self-esteem, mental health and psychological well-being) and especially because they were from the type of Likert scale, so interlocutor didn't have any relish to answer them.

Furthermore mental health in parents of educable student and parents of normal student...
are equal. It means that there is no significant difference between parents of normal children and parents of marginal children.

The results of this research are consistent with Mehrabizade et al (1380) research that there is significant difference between parents of mentally retarded children and parents of normal children. Moreover it is consistent with the results of Shariati and Davarmanesh (1370) [9] and Narimani et al (1384) research.

Finally, regarding to the results of this research and positive effects of mental health and self-esteem on people life and on the other hand it has cleared that psychological well-being has growth potential, it is suggested education officials of exceptional children make courses for improving psychological well-being and thereby enhance the quality of educable children life.

References

6. Yousefi LM. Psychological intervention about exceptional children in special needs education. 1387.84,85.