

## Children With Mental Retardation And Associated Disabilities

This book, Psychological distress & expressed emotions in mothers of children with mental retardation & children with autism, represents the stress and expressed emotions of mothers of disabled children. This research was done during 2008-2009 at Sweekaar Rehabilitation Institute for Handicapped, Secunderabad while the author pursuing her M. Phil Rehabilitation Psychology. Book contains 5 chapters with references and appendix. It discussed the stress in mothers of children with disability as mothers are more active in their child's care and bear most of the burden associated with it. As the author also experienced stress due to her family environments such as her brother-in-law is a bedridden person due to brain damage and her mother-in-law has psychological problem and which made her to start the course of M.Phil Rehab Psychology.

Brain disordersâ€"neurological, psychiatric, and developmentalâ€"now affect at least 250 million people in the developing world, and this number is expected to rise as life expectancy increases. Yet public and private health systems in developing countries have paid relatively little attention to brain disorders. The negative attitudes, prejudice, and

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stigma that often surround many of these disorders have contributed to this neglect. Lacking proper diagnosis and treatment, millions of individual lives are lost to disability and death. Such conditions exact both personal and economic costs on families, communities, and nations. The report describes the causes and risk factors associated with brain disorders. It focuses on six representative brain disorders that are prevalent in developing countries: developmental disabilities, epilepsy, schizophrenia, bipolar disorder, depression, and stroke. The report makes detailed recommendations of ways to reduce the toll exacted by these six disorders. In broader strokes, the report also proposes six major strategies toward reducing the overall burden of brain disorders in the developing world.

A “groundbreaking” memoir about raising a special-needs daughter in an era of misinformation and prejudice—a classic that helped transform our perceptions (Publishers Weekly). It was my child who taught me to understand so clearly that all people are equal in their humanity and that all have the same human rights. Pearl S. Buck is known today for earning a Nobel Prize in Literature and for such New York Times–bestselling novels as *The Good Earth*. What many do not know is that she wrote that great work of art with the motivation of paying for a special school for her oldest daughter, Carol, who had a rare developmental disorder. What

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was called “mental retardation” at the time—though some used crueler terms—was a disability that could cause great suffering and break a parent’s heart. There was little awareness of how to deal with such children, and as a result some were simply hidden away, considered a source of shame and stigma, while others were taken advantage of because of their innocence. In this remarkable account, which helped bring the issue to light, Pearl S. Buck candidly discusses her own experience as a mother, from her struggle to accept Carol’s diagnosis to her determination to give her child as full and happy a life as possible, including a top-quality education designed around her needs and abilities. Both heartrending and inspiring, *The Child Who Never Grew* provides perspective on just how much progress has been made in recent decades, while also offering common sense and timeless wisdom for the challenges still faced by those who love and care for someone with special needs. It is a clear-eyed and compelling read by a woman renowned for both her literary talent and her humanitarian spirit. This ebook features an illustrated biography of Pearl S. Buck including rare images from the author’s estate.

*International Review of Research in Mental Retardation* is an ongoing scholarly look at research into the causes, effects, classification systems, syndromes, etc. of mental retardation. Contributors

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come from wide-ranging perspectives, including genetics, psychology, education, and other health and behavioral sciences. Volume 37 of the series focuses mainly on topics relating to parenting and families, including chapters on the transition to adulthood for individuals with intellectual disability, contrasts in parenting across early school-age children with developmental delays, parental contributions to communication development, and siblings of individuals with intellectual disabilities. \*

Provides the most recent scholarly research in the study of mental retardation \* A vast range of perspectives is offered, and many topics are covered \* An excellent resource for academic researchers

Children living in poverty are more likely to have mental health problems, and their conditions are more likely to be severe. Of the approximately 1.3 million children who were recipients of Supplemental Security Income (SSI) disability benefits in 2013, about 50% were disabled primarily due to a mental disorder. An increase in the number of children who are recipients of SSI benefits due to mental disorders has been observed through several decades of the program beginning in 1985 and continuing through 2010. Nevertheless, less than 1% of children in the United States are recipients of SSI disability benefits for a mental disorder. At the request of the Social Security Administration, Mental Disorders and Disability Among Low-Income

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Children compares national trends in the number of children with mental disorders with the trends in the number of children receiving benefits from the SSI program, and describes the possible factors that may contribute to any differences between the two groups. This report provides an overview of the current status of the diagnosis and treatment of mental disorders, and the levels of impairment in the U.S. population under age 18. The report focuses on 6 mental disorders, chosen due to their prevalence and the severity of disability attributed to those disorders within the SSI disability program: attention-deficit/hyperactivity disorder, oppositional defiant disorder/conduct disorder, autism spectrum disorder, intellectual disability, learning disabilities, and mood disorders. While this report is not a comprehensive discussion of these disorders, *Mental Disorders and Disability Among Low-Income Children* provides the best currently available information regarding demographics, diagnosis, treatment, and expectations for the disorder time course - both the natural course and under treatment.

This reference work breaks new ground as an electronic resource. Utterly comprehensive, it serves as a repository of knowledge in the field as well as a frequently updated conduit of new material long before it finds its way into standard textbooks.

One of the first books exclusively devoted to applying the theories and approaches used in work with nonretarded children to types of retarded individuals defines the

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developmental approach and explores theoretical issues as they relate to retarded populations.

Approximately 2.5 million people in the United States--one percent of the population--have an intellectual disability (previously referred to as mental retardation). These conditions range from genetic disorders such as Down syndrome to disabilities caused by infectious diseases and brain injury. *Intellectual Disability: A Guide for Families and Professionals*, by one of the country's foremost authorities on intellectual disability, is a comprehensive resource that will be of importance to anyone with a personal connection to a child or adult with a neurodevelopmental disorder. Emphasizing the humanity of persons with intellectual and related developmental disabilities, psychiatrist and pediatrician James Harris provides essential information on assessment and diagnosis of intellectual disability, treatments for specific disorders, and ways to take advantage of the wide array of services available today. The focus throughout is on the development of the person, the positive supports necessary for self-determination, and, to the extent possible, independent decision making. Harris also surveys historical attitudes toward intellectual disability, the medical community's current understanding of its causes and frequency, and the associated physical, behavioral, and psychiatric conditions (such as seizure disorder, depression, and autism) that often accompany particular types of intellectual disability. The book addresses legal, medical, mental health, and research-related issues as well as matters of spirituality, highlighting the ways in which individuals with intellectual disability can meaningfully participate in the spiritual lives of their families and their communities. Each chapter ends with a series of key points to remember, and the book concludes with a list of additional resources of further interest. *Intellectual Disability* is a must-read for parents and

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families of those with neurodevelopmental disorders, providing guidance and essential information to help their family members effectively, and to make a significant, positive difference in their lives now and in the future.

Since the 1970s, the development of normalization philosophy and the implementation of community care policies have highlighted the nature and treatment of psychiatric and behavior disorders in people with mental retardation and rekindled the interest of scientists, psychiatric practitioners, and service providers. With these changes has grown a substantial body of new research and information on the phenomenology, epidemiology, classification, and clinical features of mental illness and behavior disorders in mentally retarded persons. In response to this growing interest and awareness, the editors, together with internationally renowned contributors from the United States and Europe, have compiled the first comprehensive handbook of the current theory and practice of mental health treatment and care in mentally retarded children and adults. Both contemporary and in-depth, this multidisciplinary, multidimensional volume covers all available therapeutic methods, including psychopharmacotherapy, psychotherapy, behavior therapies, cognitive therapy, and the systems approach for all the main diagnostic disorders in people with mental retardation. Parts I and II present an overview of epidemiology and clinical presentation, including research trends, and therapeutic methods, including psychotherapy, psychopharmacology, behavioral therapies, cognitive and social learning treatments, and working with families and caregivers. Parts III and IV focus on psychotherapeutic interventions, such as rational emotive group treatment with dually diagnosed adults, pre-therapy for persons with mental retardation who are also psychotic, and systemic therapy, and how to apply these methods to the treatment of specific

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mental illnesses, such as schizophrenia, epilepsy, and mood and anxiety disorders. Parts V and VI discuss how to treat behavior disorders such as aggression/self-aggression (pharmacotherapy and strategic behavioral interventions) and self-injurious behaviors (multimodal contextual approach), including group therapy for sex offenders and a pedagogical approach to behavior problems, and which treatment methods, such as psychodynamically oriented psychotherapy and pharmacotherapy, are most effective with children, including developmental-dynamic relationship therapy with more severely mentally retarded children. Parts VII and VIII provide guidance on mental health services and staff training, including psychiatric treatment in community care and a model for inpatient services for mentally ill persons with mental retardation, and the editors final chapter, which draws together all the various therapeutic approaches described in previous chapters to provide a practical framework for an integrative approach. Filling a major gap in the literature, this indispensable resource for psychiatrists, psychologists, and educators working with mentally retarded persons is also intended for general practitioners, doctors, social workers, and therapists working in the same or related fields.

International Review of Research in Mental Retardation is an ongoing scholarly look at research into the causes, effects, classification systems, syndromes, etc. of mental retardation. Contributors come from wide-ranging perspectives, including genetics, psychology, education, and other health and behavioral sciences.

This book presents the most comprehensive review of research regarding personality and motivational differences in persons with mental retardation. From the personal commentary of Edward Zigler, H. Carl Haywood, and Harvey N. Switzky, the book summarizes

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the classical work of the Yale and Peabody-Vanderbilt School over the last 40 years. A sampling of new directions in research is provided, including work on self-determination theory and practice; decision making; direct and indirect effects of genetic mental retardation syndromes on personality; personality and psychopathology in genetic mental retardation syndromes; a new theory of information processing linking cognition, motivation, and performance; and a sensitivity theory of motivation. This definitive work presents older and evolving newer models and applications to the field in order to demonstrate the power of motivational variables in understanding the behavior of persons with mental retardation. The purpose is to enhance the quality of life in persons with mental retardation and other developmental disabilities.

Pediatric palliative care is a field of significant growth as health care systems recognize the benefits of palliative care in areas such as neonatal intensive care, pediatric ICU, and chronic pediatric illnesses. Pediatric Palliative Care, the fourth volume in the HPNA Palliative Nursing Manuals series, highlights key issues related to the field. Chapters address pediatric hospice, symptom management, pediatric pain, the neonatal intensive care unit, transitioning goals of care between the emergency department and intensive care unit, and grief and bereavement in pediatric palliative care. The content of the concise, clinically focused volumes in the HPNA Palliative Nursing Manuals series is one resource for nurses preparing for specialty certification exams and provides a quick-reference in daily practice. Plentiful

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tables and patient teaching points make these volumes useful resources for nurses.

Explains the causes of retardation, the prevention of retardation through such means as genetic counseling and prenatal care, and the methods of helping retarded children on the familial, social, and educational levels. Shares perspectives of family members, researchers, and policy leaders from five countries on quality of life within families living with a person with an intellectual disability. This book includes a discussion on future research, programs, and policies.

This volume, first published in 1999, provides a single resource for all those working in mental retardation.

This serial was established under the editorship of Dr. Norman R. Ellis in 1966. As a result of his editorial effort and the contributions of many authors, the serial is now recognized as the area's best source of reviews of behavioral research on mental retardation. From its inception, active research scientists and graduate students in mental retardation have looked to this serial as a major source of critical reviews of research and theory in the area.

"This book is meant to help parents as well as teachers understand mental retardation. Chapter 5 describes specific ways in which parents can help their mentally retarded child ..." (cover verso).

Brue's Essentials Intellectual Disability is a concise, up-to-date overview of intellectual disability evaluation and assessment. This text offers a practical, concise overview of the nature of intellectual disability and adaptive skills functioning in children, adolescents, and adults. Coverage includes the latest information on prevalence, causes, differential diagnoses, behavioral and social concerns, test

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instruments, and the new DSM-5 diagnostic criteria. The discussion promotes a deeper understanding of the use of assessment data to inform interventions in clinical practice. Designed for easy navigation, each chapter highlights important points and key cautions to allow quick reference without sacrificing depth. A sample assessment report illustrates how findings should be communicated to better inform treatment, giving you a practical reference to ensure comprehensive reporting. In 2013, the DSM-5 conceptualization of intellectual disabilities was significantly changed. It's important for professionals to have access to the most current guidelines from a variety of sources, and this book compiles them all into a single reference.

This volume is written from the perspective of a competence paradigm for professional practice, which offers a constructive alternative to the more prevalent pathology models. The goal of professional practice is to empower families in coping with the catastrophic stressor of mental illness, recognizing the strengths and resources of families, which have often been minimized in the past, and fostering new collaborative modes of family-professional relationships. Unique features include a consideration of life-span, family system and subsystem perspectives, and powerful personal accounts of family members.

Engaging in sex, becoming parents, raising children: these are among the most personal decisions we make, and for people with mental retardation, these decisions are consistently challenged, regulated, and outlawed. This book is a comprehensive study of the American legal doctrines and social policies, past and present, that have governed procreation and parenting by persons with mental retardation. It argues persuasively that people with retardation should have legal authority to make their own decisions. Despite the progress of the normalization movement, which has moved

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so many people with mental retardation into the mainstream since the 1960s, negative myths about reproduction and child rearing among this population persist. Martha Field and Valerie Sanchez trace these prejudices to the eugenics movement of the late nineteenth and early twentieth centuries. They show how misperceptions have led to inconsistent and discriminatory outcomes when third parties seek to make birth control or parenting decisions for people with mental retardation. They also explore the effect of these decisions on those they purport to protect. Detailed, thorough, and just, their book is a sustained argument for reform of the legal practices and social policies it describes.

Current estimates suggest that between one and three percent of people living in the United States will receive a diagnosis of mental retardation. Mental retardation, a condition characterized by deficits in intellectual capabilities and adaptive behavior, can be particularly hard to diagnose in the mild range of the disability. The U.S. Social Security Administration (SSA) provides income support and medical benefits to individuals with cognitive limitations who experience significant problems in their ability to perform work and may therefore be in need of governmental support. Addressing the concern that SSA's current procedures are consistent with current scientific and professional practices, this book evaluates the process used by SSA to determine eligibility for these benefits. It examines the adequacy of the SSA definition of mental retardation and its current procedures for assessing intellectual capabilities, discusses adaptive behavior and its assessment, advises on ways to combine intellectual and adaptive assessment to provide a complete profile of an individual's capabilities, and

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clarifies ways to differentiate mental retardation from other conditions.

This study examines effectiveness of preschool and family intervention in prevention of cultural-familial retardation. It attempts to resolve part of the complex of influences on early intellectual development in those born into seriously disadvantaged environments that could account for the increased risk for certain children to be identified as mentally retarded. Development of 17 subjects from infancy through age 15 is charted in terms of intellectual and related measurements, alongside 18 controls. Chapters include "Introduction to the Problem"; "The Course of Early Intellectual Development"; "Design and Method"; "Assessment of Intellectual Development"; "Learning and Performance"; "Assessment of Language Development"; "Mother-Child Interaction"; "Follow-up Assessment of Development"; "Analysis of the Children's Performance in School"; "Family Risk and Child's Intellectual Development"; "The Children and Their Families"; and an epilogue discussing the role of maternal mediation and methodological factors. (PB)

This book reviews theoretical and empirical work in the developmental approach to mental retardation. Armed with methods derived from the study of typically developing children, developmentalists have recently learned about the mentally retarded child's own development in a variety of areas. These areas now encompass many aspects of cognition, language, social and adaptive functioning, as well as of maladaptive behavior and psychopathology. In addition to a focus on individuals with mental retardation themselves, familial

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and other "ecological" factors have influenced developmental approaches to mental retardation. Comprised of twenty-seven chapters on various aspects of development, this handbook provides a timely, comprehensive guide to understanding mental retardation and development.

A collection of essays and documents chronicizing the history of treatment, labeling, and understanding of mental retardating in the U.S. NYUP is one the forefront of publishing in disability studies.

First published in 1986. The primary purpose of this book is to provide information about the use of medication for several childhood disorders that require long-term treatment. It is the author's expectation that this information will allow caregivers to make better decisions about the use of medication. This title also examines the importance of evaluating various aspects when medicating a child, including their characteristics, their family situation, and school setting.

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