To compare differences in skills and self concept among mentally handicapped young adults, and to show the significance of the admission age and quality of special educational opportunities, a study was made involving 27 persons who had attended regular and/or special education classes. The educational experiences of the groups were organized in the following manner: Group A (age 31-39, IQ 50-67) had attended regular classes in the elementary school years, Group B (age 17-28, IQ 38-70) attended special education classes, and Group C (age 16-18, IQ 58-78) experienced a combination of both regular and special education programs. Each group participated in seven weekly sessions of group psychotherapy. The most significant finding of the study revealed a positive relationship between participation in special education programs and an advanced social, educational, and emotional growth. The importance of early exposure to special programs was also indicated. Related references are included. (PR)
PROBLEM-SOLVING IN RETARDED ADOLESCENTS
AND YOUNG ADULTS

Findings of a Group Psychotherapy Program

by

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INTRODUCTION

Findings of a psychotherapy program are reported in which twenty-seven mentally retarded adolescents and adults explored solutions to their daily problems.

The hypothesis was that a comparison of group differences relative to the acquisition of skills, goals, and self-concepts would show a significant emphasis on the starting age of education and the quality of special educational opportunities, rather than on the Intelligence Quotient.

Also, most presentations of the problems encountered by the mentally retarded have originated from the intellectually endowed. The purpose of this paper is to add a dimension of understanding to the difficulties surrounding mental retardation. Problems will be described as they were identified and discussed by individuals of low intellectual functioning.

METHOD

Volunteers were recruited from a Sheltered Workshop and Senior High Special Education classes. They were divided into three groups of nine members, each group attending an average of seven weekly 1 1/2-hour-long sessions.

The groups were distinguished by the following characteristics:

Group A - Age: 31-38
   IQ:  50-67
   Education: Regular classes throughout all or part of the elementary school years
   Present Placement: Terminal placement in the Tidewater Vocational Center

Group B - Age: 17-28
   IQ:  38-70
   Education: Special Education
   Present Placement: On-the-job Training Program, Tidewater Vocational Center

Group C - Age: 16-18
   IQ:  58-78
   Education: Regular and Special Education
Groups A and B met at the Mental Health Center offices; Group C met in their classroom. The three therapists took notes in addition to tape recording. An effort was made to have at least two of the three therapists available each time. Members of the City Schools and Vocational Center who cooperated closely listened in only with the permission of the groups. The topics for discussions were chosen by the group, with the exception of Group A, to whom topics had to be suggested by the therapist.

FINDINGS

Group A

Group A experienced difficulties in admission and discussion of mental retardation. The questions posed were "What is mental retardation?" and "How do you feel when somebody calls you mentally retarded?" To this, members answered, "To help; to need help; to be crazy; to fail", reflecting the manner in which the mentally retarded often are treated and viewed by society.

The group interpreted the sessions as a testing situation and reacted by deliberately attempting to please and impress, or by withdrawing and refusing to participate. Their feelings apparently were similar to the ones expressed by the other groups, but they had greater difficulty verbalizing them. Attempts of overcompensating their handicap were distinctly seen in creating the fantasy of bandleader, their families being dependent on their income, in being "men about town", the girls being "nice housewives".

The group associated authoritative positions with special privileges and control over others rather than with responsibilities. The boss, in the eyes of the group, "holds the key to the building, talks on the telephone and drinks coffee as and when he pleases".

The members of the group were supportive to each other, but more so dependent on each other. There was little recognition of their own strength.
Emphasis was placed upon "my parents". There was an awareness, though vaguely expressed, of the worries whether they would be accepted in the community; a feeling of insecurity now and for the future. They sensed that they were at the mercy of parents, teachers and potential employers.

The group exhibited a low tolerance for frustration. The topics most frequently avoided and arousing the highest degree of anxiety were mental retardation and death of parents. A topic discussed easily was the Vocational Center, a place of security.

While many of the responses reflected honesty, the group often withdrew from the exploration of feelings beyond a superficial level. The discussion began on a boastful note and progressed, through resistance and denial, to an admission of social exclusion and isolation which they resented. The group wished for social and recreational outlets appropriate to them.

The group desired to be helpful, but also recognized their own need to be helped. Their usefulness was seen in helping others, in baby-sitting, doing chores at home, and fulfilling their duties at the workshop, one of the great advantages of which was the reward in form of pocket money.

There was a general fear of intimacy in heterosexual relationships although most of the members stressed having a boy or girl friend.

Group B

Observations were similar to those of Group A, but there were specific differences noted, particularly related to self-awareness. Although the group denied mental retardation, the members were better prepared and equipped to discuss the term. They considered themselves to be slow learners, stating that they "could make progress whereas the mentally retarded were treated as infants". The group members viewed themselves as useful but neglected members of society.

The responses were spontaneous and of a serious nature. They believed that a high level of independence could be attained if sufficient programs and training were available. The individuals tended to view themselves as victims of circumstance rather than hopeless and dependent.
The group discussed their goals, often more or less unrealistic: marriage, nurses' training, making plenty of money to keep the girls, to mention just a few. However, they failed to identify requirements requisite to the attainment of those goals.

**Group C**

There was a significantly higher degree of self-confidence, more constructive attitudes and goals. The emphasis was directed towards changing both the environment and the position of the individuals within the group. The goals, often established long prior to the start of the program, were evaluated in an effort to explore ways of achieving higher levels of education—as apprentices and in the military service.

A significant characteristic of Group C was its acceptance of mental retardation. There was, however, considerable rejection of the limitations attributed to and experienced by the mentally retarded. The group recognized and distinguished between the problems caused by mental retardation and the problems imposed by misinformed outsiders.

Group C might be called the reaction group. They reacted to the stigma of mental retardation, the limited educational and vocational opportunities available to them, and the isolation of the Special Education program.

The stigma attached to Special Education was repeatedly and readily discussed. Members of the group felt many changes were needed. They challenged the curricula and the lack of opportunities for advancement into regular classes. They offered appropriate solutions to some of the problems, including participation in graduation ceremonies and social affairs, the availability of better books, and a more differentiated approach, inasmuch as some of the members wanted to participate in typing, woodwork and home economics.

Responses of the group reflected a willingness to exchange ideas without fear of rejection and exposure of their feelings. They looked within themselves for solutions to their problems but, at the same time, were able to
accept constructive suggestions when provided by other members of the group.

DISCUSSION

1. Group differences appear to be significantly attributable to life experiences and opportunities rather than mere Intelligence Quotient. The age of the initial effort of help made a considerable difference.

2. Self-confidence was of great importance. Feelings of self-worth were conspicuous among individuals enrolled in Special Education programs throughout the school years.

3. The discussion of mental retardation progressed from denial by Group A to rationalization by Group B and acceptance by Group C.

4. The ability to recognize and define problems and their solutions was practically non-existent in Group A. Group B demonstrated an awareness of problems but was unable to deal with them effectively. Group C could identify problems and suggest satisfactory solutions.

5. There was a deviation in emotional responses within the group and between group members, with a progression of maturity from Group A to C. Affective responses dominated A; intellectual interpretations, Group C. The C Group demonstrated appropriate controls. Its members were able to seek clarification and to interact with their supervisor, who was invited to listen to their suggestions as to curricula and advancement. This rational approach led to modifications of the Special Education Program by the school administration.

6. Group A and B were almost totally dependent upon their peers for social interaction and stimulation. Both groups were non-selective, but appreciative and protective of their companionships with one another. Group C was significantly choosier in their selection of friendships. It could be said that Group C was aware of their own abilities, they had "a place", whereas Group A and B showed a lack of self-awareness in relation to others.

7. Groups A and B were dependent on and protective of their families. Group viewed their families rather objectively and critically with less dependence.
8. There was a vast difference between each of the groups regarding goals. The goal of Group A was that of maintaining the status quo and reinforcing dependence. Group B established goals, but they were unrealistic and lacking evidence of organization or planning toward goal attainment. The formulation of goals by Group C was realistic. They were able to appraise and evaluate situations for planning. They accepted responsibility for themselves and for the future, including marriage, job and occupation.

SUMMARY

The purpose of the program was to gain an understanding of the problem of mental retardation, specifically related to the manner in which the mentally retarded view themselves in relation to other members of society. The most significant finding was a relationship between the enrollment in Special Education programs and the advanced social, emotional and educational growth of special education students when compared with scattered or limited educational experiences. The only slight variation of IQ's reinforces the importance of early exposure and opportunity.

The groups felt it rewarding that a sounding board was provided to them for airing their difficulties at home, at school, and at the workshop. Some individuals talked over and arrived at some satisfactory answers. Changes were noted in attitudes toward each other and their superiors. Benefit accrued from the adoption of suggested changes by the School Administration.

REFERENCES

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