



Participation of children with intellectual disability compared with typically developing children



Matthew King^a, Nora Shields^{a,*}, Christine Imms^b, Monique Black^a, Clare Ardern^a

^aDepartment of Physiotherapy, La Trobe University, Victoria 3086, Australia

^bDepartment of Occupational Therapy, Australian Catholic University, 250 Victoria Parade, Fitzroy VIC 3065, Australia

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ABSTRACT

We compared participation in out-of-school activities between children with intellectual disability and children with typical development using the Children's Assessment of Participation and Enjoyment and Preferences for Activities of Children questionnaires. Thirty-eight pairs of children were matched for age (mean age 12.3 ± 2.7 years), sex (17 female, 21 male), location (32 metropolitan, 6 regional) and socioeconomic background (mean SEIFA score 1021 ± 70 and 1024 ± 66). When compared to their typically developing peers, children with intellectual disability participated in fewer *Active-Physical* and *Skill-Based* activities and in more *Recreational* activities. Children with intellectual disability participated less frequently in *Skilled-Based* activities, had a higher preference for *Recreational* and *Self-Improvement* activities, enjoyed *Self-Improvement* activities more, and participated in a higher proportion of *Social* activities at home and in a lower proportion of *Recreational*, *Active-Physical*, *Skill-Based*, and *Self-Improvement* activities alone. These differences may be due to reduced physical, cognitive and social skills in children with intellectual disability, or a lack of supportive environments.

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1. Introduction

Children with intellectual disability may participate in fewer activities outside school than their typically developing peers (Abells, Burbidge, & Minnes, 2008). Participation in outside school activities is important for all children as it optimises physical growth, increases cultural awareness and psychological wellbeing and establishes community relationships (Murphy & Carbone, 2008). Children with intellectual disability may have reduced motor, communication and social skills and have lower cognitive functioning than their typically developing peers (Pratt & Greydanus, 2007; Westendorp, Houwen, Hartman, & Visscher, 2011), and this may lead to fewer opportunities to participate in recreation, leisure and sporting activities (Ehrmann, Aeschleman, & Svanum, 1995; Matthews, 1979, 1982; Solish, Perry, & Minnes, 2010). Lower levels of participation in activities outside of school among children with intellectual disability may encourage the sedentary behaviour (Frey & Chow, 2006) and social isolation (Rimmer, Rowland, & Yamaki, 2007) that are commonly reported in this group.

Five studies have compared the participation of children with intellectual disability to their typically developing peers (Ehrmann et al., 1995; Margalit, 1984; Matthews, 1979, 1982; Solish et al., 2010). These studies included between 20 and 82

* Corresponding author at: Department of Physiotherapy, Health Science 3, Kingsbury Drive, Bundoora, Victoria 3086, Australia. Tel.: +61 3 9479 5852; fax: +61 3 9479 5768.

E-mail address: n.shields@latrobe.edu.au (N. Shields).

children with intellectual disability and an average age of 3 to 10 years. Data were collected in these studies by questionnaire sent by post (Ehrmann et al., 1995; Margalit, 1984; Solish et al., 2010), email (Solish et al., 2010) or interview (Matthews, 1979, 1982). These studies found no differences in participation in informal activities such as playing with toys (Margalit, 1984; Matthews, 1982) and in leisure activities such as doing puzzles (Ehrmann et al., 1995; Matthews, 1979; Solish et al., 2010). However, children with intellectual disability were reported to participate in fewer physical activities (Ehrmann et al., 1995; Matthews, 1979, 1982) and in fewer social activities in the community (Ehrmann et al., 1995; Matthews, 1979; Solish et al., 2010), and to spend less time doing academic activities such as homework (Margalit, 1984) or attending a public library (Ehrmann et al., 1995; Matthews, 1979) than children with typical development.

In 2001, the World Health Organisation introduced the International Classification of Functioning, Disability and Health (ICF) (World Health Organisation, 2001), which considers body structure and function, activity limitations and participation restrictions when evaluating health outcomes and recognises disability as a universal human experience (World Health Organisation, 2001). The ICF incorporates participation as one aspect of describing, measuring and treating disability and led to a paradigm shift in the way health care professionals view disability (World Health Organisation, 2001). This shift in perspective may have facilitated how children with intellectual disability participate in outside school activities. However, since the introduction of the ICF, only one published study (Solish et al., 2010) has compared the participation patterns of children with intellectual disability with children with typical development.

Several factors may influence a child's participation in outside school activities, including their age, sex, residential location (for example, metropolitan or regional area) and socioeconomic status. Of the five previous studies that have compared the participation of children with intellectual disability and children with typical development, no study adequately accounted for all of these potential confounders (either via selection criteria or statistical adjustment). All five studies attempted to account for the potential for socioeconomic status to influence children's participation but only one study could be identified that matched groups for age, sex and socioeconomic status (obtained as a surrogate of parent age and education level) (Margalit, 1984), and this study was completed before the introduction of the ICF and prior to a number of policy changes related to educational inclusion.

Different dimensions of participation can be described including diversity (number of activities participated in), frequency (how often activities are participated in), location (where activities are participated in), companionship (with whom activities are completed), enjoyment, and preference for activities. Previous work investigating participation in children with intellectual disability has focused on evaluating participation diversity and frequency. Two studies have evaluated companionship (Matthews, 1979; Solish et al., 2010), and one study has evaluated location (Matthews, 1979). To our knowledge, no previous studies have investigated the enjoyment and preference aspects of participation in relation to children with intellectual disability. Understanding all these aspects of children's participation is important to explain potential differences in participation patterns and to guide interventions aimed at enhancing participation. Participation preference is particularly salient because children typically exhibit greater motivation to participate in activities they prefer (Watkinson, Dwyer, & Nielson, 2005).

As the available evidence base was largely obtained prior to the introduction of the ICF, has not always controlled for potential confounding variables, did not investigate certain aspects of participation and included mostly younger children with intellectual disability, we undertook to complete a study that would address these limitations. Such a study has the potential to contribute to the knowledge base and to guide families and practitioners in supporting activity choice and participation by children with intellectual disability. The aim of this study was to compare the participation in outside school activities of children with intellectual disability with children with typical development. Our research questions were:

1. Is the level of participation (diversity and frequency) of children with intellectual disability the same as their peers with typical development?
2. Are their differences between these groups in terms of their enjoyment, preference for, companionship during and location of participation?

Based on previous literature we hypothesised that, when compared to their typically developing peers, children with intellectual disability would participate in fewer *Active-Physical*, *Skill-Based*, *Self-Improvement* and *Social* activities, less frequently. We also hypothesised that there would be no differences between the groups in the domains of preference and enjoyment, that children with intellectual disability would participate in a higher proportion of *Self-Improvement* activities with others, and in a higher proportion of *Active-Physical*, *Skill-Based*, *Self-Improvement* and *Social* activities at home.

2. Methods

A secondary analysis was performed on data extracted from two existing databases. One database included data collected from 286 children with disability including 67 children with intellectual disability. A second database included data collected from 403 children with typical development. The children with intellectual disability were matched for age, sex, location of residence (metropolitan or regional area) and socio-economic status (indicated by Socioeconomic Index for Area (SEIFA) score) (Australian Bureau of Statistics, 2006a) with children with typical development. There were a total of 38 matched pairs and data analysis was completed on these data. Fig. 1 displays the process of participant recruitment and sampling.

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