

# Community involvement and socialization among individuals with mental retardation

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Received 22 June 2005; received in revised form 8 September 2005; accepted 12 September 2005

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## Abstract

Mental retardation, a condition characterized by significantly lower than average intellectual ability and adaptive behavior deficits, currently affects between 2% and 3% of the population. Individuals with mental retardation experience many difficulties throughout their lives, with one such difficulty being that they have few opportunities for community involvement and often have few social relationships. To determine if increased community involvement and increased socialization are among the most common desires expressed by individuals with mental retardation, we conducted a study examining pre-existing data of 1348 individuals. The study focused on specific desires expressed by individuals with mental retardation—including, but not limited to, increased community involvement and increased socialization. Although these individuals expressed a wide variety of desires, they expressed a desire for increased community involvement most frequently. Individuals also frequently expressed a desire for increased socialization, change of residence, work-related changes, increased personal belongings, and increased personal activities. We discuss the importance of community involvement and socialization, the link between the two, interactions that could potentially exist among other expressed desires, and ways of increasing community involvement while addressing other desires that individuals with mental retardation expressed.

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*Keywords:* Mental retardation; Quality of life; Socialization; Community involvement; Self-determination

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Mental retardation is a condition characterized by intellectual ability that is significantly below average (specifically, an IQ of 70 or below) combined with deficits in adaptive abilities. This condition typically presents itself during infancy and affects between 2% and 3% of the population (Daily, Ardinger, & Holmes, 2000; Martin, 1997). A variety of environmental and/or

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genetic factors can cause mental retardation. However, in 30–50% of cases, a clear cause does not present itself, even after a diagnostic evaluation (Curry et al., 1997).

Historically, the general population has treated individuals with mental retardation as inferior persons who do not deserve to fully participate in society. As a result, they have been kept from doing so in a variety of ways. We have massively institutionalized them (Brockley, 1999); sterilized them without their consent to prevent the spread of their “defective” genes (Hergenhahn, 1997; Nelson, 1999); and restricted them sexually in other ways (Lumley & Scotti, 2001; Rhodes, 1993). Additionally, individuals with mental retardation have had little opportunity to interact with individuals without mental retardation (Griffin & Sweeney, 1994). They have also participated infrequently in community activities in general. Pretty, Rapley, and Bramston (2002) found that individuals with mental retardation were often lonely, felt isolated, had few social relationships, and spent significant amounts of time at home. The time spent at home was typically in the company of other individuals with mental retardation or paid staff.

Bramston, Bruggerman, and Pretty (2002) conducted a study comparing adolescents with mental retardation to adolescents without mental retardation to investigate which recreational and leisure activities these individuals participated in regularly. The study found that adolescents without mental retardation were more likely than adolescents with mental retardation to shop at malls, supermarkets, and other stores; go to the movies; attend sports venues; dine out; and visit a friend’s house—all activities that involve other individuals and/or being in the community. Individuals with mental retardation, on the other hand, were more likely than individuals without mental retardation to play video games—an activity that is primarily solitary and does not involve going into the community. Modell, Rider, and Menchetti (1997) noted that watching television and listening to the radio are the most common leisure activities for individuals with disabilities, whether the disabilities are mental or physical. These, too, are solitary activities that do not result in any kind of community involvement.

Another study (Kaye, 1997) reinforced the idea that individuals with mental retardation experienced less involvement in community activities than individuals without mental retardation. Kaye (1997) found significant differences between the two groups when it came to the frequency of participating in specific community activities. For example, 58% of individuals with disabilities (mental or physical), as opposed to only 29% of individuals without disabilities, had not been to a movie within the past year. Seventy-six percent of individuals with disabilities (compared to 51% of individuals without disabilities) had not been to a live music performance within the past year. Seventy-one percent of individuals with disabilities (compared to 43% of individuals without disabilities) had not been to a sporting event in the past year. Kaye interpreted the data to indicate that individuals with disabilities often experienced social isolation from the community in which they live. Furthermore, 64% of the individuals with disabilities who participated in the study expressed a desire to become increasingly involved in the community.

By preventing individuals with mental retardation from actively participating in the community, society has also deprived them of opportunities to form much-needed social relationships. Although individuals with mental retardation may have had social relationships with individuals who also had mental retardation, they typically lacked relationships with individuals who did not have mental retardation, with the exception of paid staff members and closely related family members (Griffin & Sweeney, 1994). It is extremely important for individuals with mental retardation to form relationships with individuals without mental retardation for two primary reasons. First, individuals with mental retardation need to participate in “normal” social situations so that they can learn socially appropriate ways of behaving (Sailor,

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