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EFFECTS OF SNOEZELEN ROOM IN MENTAL RETARDED CHILDREN

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Introduction

There are various degrees of sensory integration dysfunctions in mentally retarded children. Sensory integration is the organization of sensory input for use. Function of learning depends on the child's ability to make use of sensory information in order to perceive sensory information from his environment, integrate this information and plan and form purposeful behavior.

Objectives

The aim of the study is the experimental intervention "snoezelen room" will compare with the sensory integrative intervention, vestibular stimulation and neurodevelopmental therapy approaches in the occupational therapy unit.

Methods

Sensory integrative functions, gross motor and fine motor skills and independent in daily living activities were examined in mentally retarded children. Each treatment groups consisted of fifteen Ds children. The first group received Sensory Integrative Therapy in the Snoezelen room , the second treatment group received Vestibular Stimulation and Sensory Integrative Therapy in Occupational therapy unit and the third treatment group received Neurodevelopmental Therapy in Occupational therapy unit. Efficacy of treatment methods was assessed with Southern California Sensory Integration, Vestibular Function, Locomotor Skill, Manipulative Dexterity of hands and Protective Extension and Equlibrium Tests.

Results

Our results indicated that after the treatment sessions significant gains were obtained in the sensory integrative functions and fine hand skills of the first treatment group($p<0.05$) while no significant gains in vestibular system, balance, locomotor skills and reflex development($p>0.05$). In the second treatment group, significant gains were found in all of the skills except locomotor skill-side test ($p<0.05$). In the third treatment group, significant progress was obtained in the whole skills which were tested($p<0.05$).

When these groups were compared statistically significant differences were seen in The Balance on Right Foot-Eyes Open, Pivot Prone Position-Quality Score and Locomotor Skill-Front Tests($p<0.05$); however in the other tests there was no significant differences($p>0.05$).

Conclusion

Sensory integrative intervention, vestibular stimulation and neurodevelopmental therapy approaches are effective treatment methods used as occupational therapy interventions in separate or combined programs in the treatment of mentally retarded children.

In order to organisation of brain functions, sensory integrative intervention in the Snoezelen room is as good as the other therapies($p<0.05$).