the mongoloid baby
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MOST of the four million babies born in this country each year are normal and healthy. They get off to a good start. They fulfill their parents' hopes and dreams.

A few babies, however, are not so lucky. Something is wrong with them. They are different from normal babies, and from the beginning they have problems. Among these different ones are the babies we call mongoloid. Before birth something happened to them that interfered with their development. This disturbance shows itself in failure of certain parts of their bodies to work smoothly and in the condition people call mental retardation.

Differences you can see

Most people first notice a difference in the eyes of these babies. They appear to be far apart and
somewhat slanted. Also, usually an extra fold of skin is on the inside corners of the eyes.

These babies were first called mongoloid long ago because their slanting eyes reminded some persons of people from Mongolia.

The eyes are often the first clue a doctor has that a baby might be mongoloid. That causes him to look for other clues. The head, for instance, of most such babies is slightly smaller than normal. The back and front are somewhat flattened, making the forehead seem large and the rest of the face small. Usually the arms and legs are short when compared with the rest of the body. Sometimes the hands are stubby. The little
finger may be short and curve inward, because the second bone is not well developed. The space between the first and second toe may be extra wide. The tongue may protrude. The ears may appear oddly shaped and not well developed.

One such sign in a baby may not mean much. But a number can mean that before the baby was born, a disturbance in growth took place.

**How many babies are mongoloid?**

Mongolism happens to about 1 out of every 600 or 700 babies. Many parents who have mongoloid children have had normal babies before. Many have normal babies afterwards. Some parents have had more than one mongoloid baby, but that is rare. Studies show that the chance of having a mongoloid baby increases if the mother is over 35 years of age.

**Causes are not known**

There are many theories about what causes the growth disturbance that results in mongolism. As yet, however, no one knows with certainty what these causes are.

Most experts think that the interference happens very early in the development of the baby, and long before it is born.
Some of the latest research shows that the body cells of these babies have one more chromosome than those of other people. Chromosomes are the tiny threads in each cell which determine, among other things, a person's sex, body build, and hair coloring. The number of chromosomes is fixed in the cell from which a baby grows. Therefore, the unusual pattern of chromosomes found in mongoloids makes some researchers believe that these babies were different from the very beginning.

No cure is known

As yet no way of preventing mongolism is known. By the time mongolism shows itself in a newborn baby, there is no way to correct it. There is no known cure. Brain cells and other parts of the body which have been affected by the disturbance in their early growth cannot be replaced.

Even though mongolism cannot be cured, good care and training can help these children make better use of the abilities they have.

Knowing early is important

Knowing that a baby is mongoloid and understanding what this means are important for everyone concerned. For the baby, it means that the chances
are greater that he will get the right kind of care sooner. For you, the parents, it means that you can begin earlier to make the many adjustments that have to be made before you will be able to accept his differ-
ences. The sooner you can see your baby as he is, and as he will be, the better.

Many of the problems which frequently occur with mongoloid babies can be prevented if you know early what to look for and what to expect. Because these babies do not fight infections very well, regular checkups by the doctor are most important. The doctor will want to watch infections which may be minor or unimportant in normal, healthy children much more closely in these babies. He'll want to pay closer attention to the baby's heart and eyes. Many mongoloids have heart and eye trouble as a part of their condition.

Understanding about mongolism early can also help explain some things which puzzle or worry many parents of these babies. For example, their muscles are often loose. When picked up or held, they feel limp and double jointed. They may seem lazy and not move much. Frequently they can't suck well.

What will he be like?

You will begin to notice some differences in your baby the first year. He may be less active than other babies, or he may seem to be extremely "good" in that he doesn't cry much.

Taking care of him will be much like taking care of any other baby. The first few months, he will want and need the same kind of care you would give
any baby. He will respond to love like other babies do, and he will go through all stages of development. However, expect him to take longer to go through each stage than most other babies do.

How slow will be be?

When your baby is very young, the retardation may not be very evident to you. But unlike most babies, he will probably delay beginning to focus the eyes, to grasp, roll over, sit up, crawl, walk, and so on. Later on, the retardation is usually easier to recognize. That is when he may find it hard or impossible to talk, take directions, carry out orders, sort colors, read and write, understand numbers, reason, solve problems, and so on.

The fact that a baby has only a few of the visible signs of mongolism does not always mean that retardation is slight. Some of the more severely retarded have only a few signs. Some less retarded often show many more. Whether few or many, the visible signs are clues to a growth disturbance which can affect many parts of the body—including some parts that cannot be seen, like the brain.

There is no way of knowing how intelligent any baby will be. You can watch a baby’s development over a period of time and compare this with the development of most other babies. Such a measure may show if there is retardation. It can also be a very rough
index of how much retardation there is. But the rate of growth and development is not exactly the same thing that is measured later on by intelligence tests.

**Growth and development does take place**

Your mongoloid baby will grow in body, mind, and in his social life. How much he might grow in any one or all of these will vary and depend on such things as how retarded he is and the kind of help which he can get.

As your baby grows, the big problem will be his retardation. The Children's Bureau Publication No. 374, “The Mentally Retarded Child At Home” (35 cents from the Government Printing Office, Washington, D.C. 20402) tries to answer some of the questions you may have about his upbringing.

**Home care or institution care?**

Whether you will be able or should try to care for your mongoloid baby at home is not an easy decision. In the past, some parents have been advised not to take their mongoloid baby home from the hospital. They were told that one way to solve their problem quickly was to place the baby at once in a boarding
home or institution. Then they would not become attached to him. Also that would avoid possible later problems should they find they really cannot take care of him or that he upsets the other children.

**Home trial helps some parents**

Few families have been able to solve all of their problems by a quick, easy placement. Without a trial period at home, many begin wondering how much more progress the baby could have made if he had gotten the care only parents and a family can give.

The parents who have cared for their baby at home seem to feel less disturbed about placing him later on. They feel they have at least done the best they could but that it did not work out.

**Making a decision**

Just because your baby is mongoloid isn't reason enough to place him. At birth, no one really knows what the retardation will mean either for the baby or for you. How he affects you and your other children is an individual thing. No one should generalize about it.

Some mongoloid babies may need to be placed away from home right away. But for many more, placement may not be necessary at all. Usually there
is no need to be hasty. Certainly, such an important decision should be carefully considered.

It may help to remember that any decision you make about this does not have to be final. Things change. Right now it may or may not be the best thing to keep your baby at home. It may continue to be best for a year or more. But it may not be 2 or 5 or 10 years later.
If the question of placement away from home comes up, it may help you to decide by honestly trying to answer two questions for yourself:

1. "What is best for my baby?"
2. "What is best for me and my family?"

What is best for the baby?

Generally, a good home is the best place to bring up a baby. Most babies, even handicapped ones, do better in their own home. A baby's own home can give the important love and attention much better than an institution can. A mongoloid baby certainly needs this. He especially needs it during infancy. Perhaps because he's less self-sufficient, he may need this even more than most babies. Only a few mongoloid babies have the kind of medical or handicapping condition which needs special care that cannot be given in the home.

If his own family can't care for him, a substitute family is second best.

What is best for the family?

Mongoloid babies placed away from home usually are placed because it seems best for the family.
The health of the mother may make it impossible for her to give him the care he should get. The needs of the other members of the family may be such that they could not be met if the baby stayed at home. In some instances, a brother or sister who is different may create social problems for the other children.

On the other hand, many families feel that a different child has drawn them closer together. They believe that growing up with a retarded child has actually been helpful to their other children. When the parents can accept a different child, the other children probably can, too, because children tend to reflect the attitudes of their parents.

You will need help

In planning for and taking care of your mongoloid baby, you can use a lot of information. You will be going through many trying periods. People don't always do their best thinking when they are upset. Talking your problem over with someone who knows and understands often can help.

At first, your doctor is a person you naturally would turn to. Not only can he give you facts about mongolism, but he can apply these to your baby. At the beginning, his main concern will be to get your baby off to as good a start as possible, to keep him healthy, and to tell you about how he will grow and develop.

If you have no doctor, you can find out about the
medical help you need from your local medical society, or from the maternal and child health division of your local or State health department.

A public health nurse can help you. Among other things, she can tell you ways to take care of the new baby. She can show you how to use what you have in your home to give the baby what he needs.
Later on, she can help you teach your baby to feed himself and to become toilet trained. Talk with your doctor about this nursing help. Or you can find out about it from your local or State health department.

A social worker can help with your personal or family problems. He can talk over these problems with you and assist you in making decisions and finding
solutions. Your doctor or nurse can probably tell you how to find this type of help. You can also ask about it at your local health or welfare department, hospital, social agency, welfare council, or community chest.

A few communities have special clinics for retarded children. Such a clinic has a team of specialists, including some of the professional workers mentioned above. Find out from your doctor if a clinic is near you. With a pediatrician as director, many of these clinics have been organized by local and State health departments.

Later on, you probably will want to have a psychologist give your child a test to find what his intellectual abilities are. The special educator in the schools can tell if he is ready for some kind of school program, and how he can best be prepared for this. A few others whose help, knowledge, and services you may need at one time or another are your spiritual advisor, school principal, the workers from institutions for retarded children, the recreational leader, the scout leader, and the vocational rehabilitation counselor.

**When he is growing up**

You will have to help your child learn many things as he is growing up. Generally, things other children learn by themselves will be much harder and take much longer for your child. Also, he is going to act like a baby for a much longer time.
Watch carefully for those things he is beginning to do for himself. Encourage him. Help him to do them by himself. That will help him grow up. If you continue doing everything for him, he may always depend on you more than necessary. The better he is
able to take care of his needs, the better he will be able to cope with things in the future.

While your baby is growing in body and mind, he will also be growing emotionally and socially. Sharing, learning to obey, behaving well in public, and so on, have to be taught to children who are retarded as well as to bright ones. The more you can help your child mature by love, by understanding, and by not setting standards that are too high, the more he will be able to get along and be liked by others.

Your child will need a chance to learn about people and the world around him. But his retardation, his different appearance, and the fact that he will be older and bigger than other children of his ability may make it hard for you to give him this chance. People may stare. They may not want to hold him or play with him.

It will also be hard for him to find playmates. You will not be able just to turn him loose and expect him to find his own friends. You will have to help him in this. One way to begin this is to invite another retarded child to visit him. A retarded child may be a better playmate than a normal child since he will be at about the same level as your child. You can get to know parents of such children through your State or local association for retarded children. These mothers and fathers will understand your child and his problems better because they are going through the same experiences.

When your child is able to be away from home
for a time, a nursery-type program may be the answer for both of you. In many places parents have joined together to set up their own preschool program for retarded children. More and more communities are doing this since it gives the mother a rest as well as giving the younger a chance to learn some social skills before he may be ready for special classes in the public school.

*They differ from each other*

Although mongoloid children may look and act somewhat alike, all vary. Each one is an individual and will have his own abilities and limitations, his own likes and dislikes. He may have behavior problems and temper tantrums just as any child does. He can be sad or happy, depending on how secure he feels, and whether the world around him is made interesting and loving.

Behavior problems *usually* result from lack of *understanding* by parents and playmates. Mongoloids who have *understanding* care are *usually* very responsive.

*Schooling*

Many communities today have special day classes for retarded children. To attend, a child gen-
erally must be a certain age and show on tests that he has a certain intellectual ability. Usually, too, he must be toilet trained, be able to follow simple directions, and be able to get along in a group.

Ask your board of education about such classes. It's a good idea to find out about them a good while before your child is old enough or ready for them. If a child is accepted, he can usually attend these special classes until he is 16 or even older.

As an adult

What your child's life will be like when he is an adult is hard to say. A great deal depends on his capacities. Of course, the kind of training and efforts that have been put into his growing up is important, too. A lot depends on the kind of attitude your community has about someone who is different, the jobs he can fill that are open to him, and the training facilities and workshops that exist for him.

What does the future hold for you?

No one can really tell you that. But one thing is certain. You as a parent of a mongoloid baby are not alone. Each year, parents of almost 7,000 new mongoloid babies face the same problems you are facing. These same problems are also being faced by parents
who have mentally retarded children due to causes other than mongolism.

You can often learn much from these other parents. Because it is easier to face and do something about a problem like this as a group, many of these parents have formed associations. Over 500 such groups are scattered over the country. You can find the group nearest you by writing to the National Association for Retarded Children, 420 Lexington Avenue, New York, N.Y., 10017.

Being a parent of a mongoloid baby is going to be harder and more complicated than being a parent of a baby who is not handicapped. It's going to take a great deal of time and patience, and there may be many dark moments. But there will be times of joy.

Every new thing he does can be very gratifying for you and him. He is your baby. And you as his mother and father can get a great deal of satisfaction out of helping him develop to the fullest the abilities he has.
Other Children's Bureau publications on handicapped children

These publications may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C., 20402.

- The Child With Cerebral Palsy. Folder 34. 10 cents.
- The Child With Epilepsy. Folder 35. 10 cents.
- The Child With a Cleft Palate. Folder 37. 10 cents.
- Your Premature Baby. Folder 40. 10 cents.
- The Child With Rheumatic Fever. Folder 42. 10 cents.
- The Child With a Missing Arm or Leg. Folder 49. 10 cents.
- The Mentally Retarded Child at Home. Publication 374. 35 cents.
- The Child With a Speech Problem. Folder 52. 15 cents.
- Your Preschool Child's Eyes. Folder 54. 15 cents.
- Choosing a Hearing Aid. Folder 55. 15 cents.

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