

Comparative study on self-perception of differently abled adolescents

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Abstract

The present study was conducted to know the "Self Perception of differently Abled Adolescents". The sample comprised of 180 respondents (60 Hearing Impaired Adolescents, 60 Visually Impaired Adolescents and 60 Physically Deformed Adolescents). The sample was drawn on the basis of purposive sampling technique and the data was collected from Jammu Province, area selected was Jammu. Tool used for study was Dr. Nadeem's Self Perception Inventory and data was collected through school visits.

1.0. Introduction

The self has been defined as a person's perception of his or her nature, character, and individuality. Self concept is the view or impression people have of themselves, it is their self hypothesized identity, which develops over a period of many years. Self-concept is the cognitive perceptions and attitudes people have about themselves. It is sum total of their self-descriptions or self-appraisals. Self-concept is multidimensional, with each dimension describing different roles. One's self-concept is a collection of beliefs about oneself that includes elements such as academic performance, gender and sexuality and racial identity. Generally, self-concept embodies the answer to "Who am I?"

One's self-concept is made up of self-schemas, and their past, present, and future selves. Self-concept is the construct that negotiates these two selves. In other words, it connotes first the identification of the ideal self as separate from others, and second, it encompasses all the behaviors vetted in the actual self that you engage in to reach the ideal self. Behavioral scientists often assert that the self-concept is the sole perspective form which one can understand an individual's behavior because it includes all the dimensions of the self including how one looks (self-image), and what one knows (self-knowledge), and the ways in which these exist for others (fulfilling the ego). Real self is built on self-knowledge. Self-knowledge is derived from social interactions that provide insight into how others react to you. For example, you are about to meet someone for the first time on a date. You are well dressed and you introduce yourself with a smile on your face. However, your date meets you with a frown and declares, 'I don't want to see you!' At first, you think about the frown and wonder whether his or her reaction has anything to do with you. But, the mention of 'you' in the comment tells you that this does have something to do with you. So, you reflect on your past behaviors and encounters trying to figure out if you've met this person before and if you did, what exactly sparked his or her reaction. At this point, you are reflecting on your actual self derived from your self-concept and you attempt to re-align this self with this surprising meeting on the first date. Conversely, if your date greeted you with a smile and said, 'It is so good to see you,' then you would not experience this discrepancy. Instead, you would feel self-assured with your actual self intact. The ideal self is the self that you imagined to be on that first date. You thought about the context to your self-knowledge and imagined how the date would see you. It did not go as expected, which gave rise to the conflict between your actual and imagined self. If it did go as expected, your actual self would have matched your ideal self in this moment in time of your life.

The ear and eyes are the gates of learning for mankind. The ability of communication is a crucial factor to thriving, working ability and emotional well-being. Man is highly dependent on senses from these he builds his world, learns to conceptualize and to reason. The five basic sense organs play an important role in personality of an individual of all the five senses, audition is perhaps the most important sense organ since it is primary means by which we monitor or interact with linguistic environment. There are more than 600 million people with disabilities in the world today (UN Report, 2003). Deafness and hearing loss may be defined according to the degree of hearing impairment, which is determined by assessing a person's sensitivity to loudness (Sound intensity) and pitch. The unit used to measure intensity is the decibel (dB), the range of human hearing is approximately 0-130dB. Sound

louder than 130dB is extremely painful to hear. Conversational speech registers at 40-60dB. Deafness describes people whose hearing loss is in the extreme: 90dB or greater. Deafness is defined by the Individuals with Disabilities Education Act (IDEA) as "a hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, which adversely affects educational performance. Hard of Hearing, audition is deficient but remains somewhat functional. Individuals who are hard of hearing have enough residual hearing that, with the use of hearing aid, they are able to process human speech auditory. Deafness and hearing loss may be defined according to the degree of hearing impairment, which is determined by assessing a person's sensitivity to loudness (Sound intensity) and pitch. The unit used to measure intensity is the decibel (dB), the range of human hearing is approximately 0-130dB. Sound louder than 130dB is extremely painful to hear. Conversational speech registers at 40-60dB.

Blindness is defined as absence or loss of visual ability or perception of visual stimulus. Legal Blindness defined by the Social Security Administration (2006), means either that vision cannot be corrected to better than 20/200 in better eye or that the visual field is 20 degrees or less even with a corrective lens. Many people who meet the legal definition of blindness still have some sight and may be able to read large print and get around without support. The Legal definition of Blindness is based on Visual acuity and field of vision. Visual acuity-the ability to clearly discriminate details at a specified distance- is measured by reading lines of letters, numbers and other symbols from the snellen chart.

Devi and Valli (2014) conducted study on self- concept of Normal and Hearing Impaired Students and the problem was of sociological, psychological and educational significance. A random sampling was used for the study of difference between normal and hearing impaired children. Study revealed that normal students were having high self- concept than the hearing impaired children.

Joshi and Rai (2014) conducted a study to determine the self concept and aggression of visually impaired adolescents. A sample of 100 visually impaired adolescent (50 girls and 50 boys) students was selected by purposive simple random sampling method. 'Self-concept list' by Dr. Pratibha Deo and 'Aggression Inventory' by M.K Sultania were used for collection of data. The results revealed that visually impaired adolescents have average self-concept and aggression level. No Significant difference in self-concept was found between visually impaired adolescent girls and boys. But a positive and significant difference in aggression level was found between visually impaired adolescent girls and boys.

Nicholas and Geers (2003) report that the self-perceptions of deaf mainstreamed students appear to be generally positive even when they are not accepted by hearing peers. Researcher used a picture assessment of self-image in a sample of 181, 8- to 9-year-old children who had been implanted since four or more years. Results indicated that self-perceptions were positive in most aspects of daily life, thus counteracting earlier concerns about psycho- social problems in implanted children. Whether positive self-perceptions among deaf students continues into adolescence is yet unknown. It is also important to assess how social identity relates to self-perceptions and psychological well-being in adolescents, given that social identity reflects a conscious affiliation with a shared social group, thereby providing stability and continuity in self-perceptions. Study by Mishra and Singh (2012) revealed that Visually Impaired students were found to have low self-concept. 59 percent Visually Impaired students had poor self-concept and 4 percent students were found to have very high self-confidence. ii) It was found that Sighted students have higher self-concept as compared to Visually Impaired students. A vast majority of 73 percent subjects in the study have scored between 29 and 38 reflecting average self-concept. 18 respondents out of 100 have scored below 28, mean thereby that they hold a very poor self concept. 9 subjects in the study have hold a very high self-concept.

A study from the University of Hong Kong (Fok & Fung, 2004) in which 115 subjects (52 blind and 63 sighted) participated, showed that, in general, both visually impaired and sighted people present similar levels of self-esteem and self-concept.

Griffin-Shirley and Nes (2005) did not find significant differences between 71 students with visual impairments and 88 sighted in their levels of self-esteem.

1.2. Methodology

Methodology constitutes the basic and an important component of every research project. It refers to a plan or strategy used to seek answers to research questions. This includes sorting of variables independent and dependent, tools to be used for their measurement followed by the decision about the locale and sampling

procedure. This chapter provides detail on the design of the study that includes selection of locale, sampling procedure, methodology of data collection and its analysis. It also includes procedures adopted for the execution of the present investigation with the aim to find “Self Perception of differently Abled Adolescents (14-18yrs) in Jammu Province.” The data was collected from two sources. The primary data was obtained by collecting information by using Self Perception Inventory. The secondary data was collected from journals, books and from websites. A detailed account of methodology applied in the present study is given as follows:

1.2.1. Material selection

Locale:

The locale for the study was Jammu province. Out of ten districts of Jammu Province Jammu district was selected. The data was collected from various schools of Jammu. Institutions were selected from areas of Gujjar Nagar, Roop Nagar and Udheywala Talab Tillo of Jammu Province. 14-18yrs of Adolescents were enrolled in these Institutions.

Sample Group:

The sample for the study was divided into three groups.

Group 1: Consisted of hearing impaired adolescents: These hearing impaired were taken from J K Samaj School for situated at Shahidi Choak Jammu. This is a Non-governmental organization that runs for hearing impaired children and is up to 12th standard. Sample taken was in the age group of 14-18yrs.

Group 2. Consisted of visually impaired adolescents: These visually impaired adolescents were taken from two blind schools situated at Roop Nagar Jammu meant for boys and girls. Sample was taken in the age group of 14-18yrs. School was up to 10th standard.

Group 3. Consisted of physically deformed adolescents: These Physically deformed Adolescents were taken from Institute for Physically Handicapped Udheywalla Jammu located at Udheywalla in Jammu. The school was meant for both boys and girls.

Sample Size:

From **Group 1** a total of 60 hearing impaired adolescents was taken. Sample taken was 30 males and 30 females.

From **Group 2** a total of 60 visually impaired adolescents was taken. Sample taken was 37 males from boy's school and 23 females from girl's school.

From **Group 3** from physically deformed Institutions a total sample of 60 physically deformed adolescents were taken which comprised as 30 male and 30 female adolescents.

1.2.2. Sampling Technique:

Purposive Sampling Technique was used to select various high schools from Jammu, for selecting the differently abled adolescents from schools of Jammu Purposive sampling technique was used.

1.2.3. Criteria for sample selection:

For selecting the sample the criteria set was:

- a) Differently Abled Adolescents in the age group of 14-18 years.
- b) Differently Abled Adolescents from hearing impaired, visually impaired and physically deformed schools of Jammu.

Tool for the study:

The tool used for collecting the data was:

HOSOCES Adjustment Inventory

- c) Statistical Analysis

The data was analysed with the help of percentage statistics and 't' test.

1.2.4. PROCEDURE:

Tools prepared for data collection were administered on sample groups through personal contact after establishing rapport. In order to elicit information from adolescent the principles of desired schools were approached. They were informed about the nature and purpose of the study. To gather information by using scales

school visits were conducted because information was needed from adolescents of desired schools. Statements in scales were asked by investigator in English, Urdu as the situation demanded.

1.3. Data Analysis:

The collected data was classified and tabulated depending on the kind of information required keeping in view the objectives of study. The data processing included editing, scoring, classification and tabulation so that they were available to analysis. The computation of certain measures along with searching for patterns of relationships that exists among the data group was done with the help of statistical methods. Statistical methods used were percentage statistic and t test.

1.4. Results

The data presented in table 1 shows mean \pm sd in case of visually impaired was 88.98 ± 5.78 and in case of physically deformed was 94.87 ± 6.72 . Further, statistical difference between visually impaired and physically deformed was highly significant (<0.01) on the basis of Self-perception (Real self). Physically deformed had better self-perception than visually impaired adolescents.

Table: 1. Comparison between Visually impaired and physically deformed adolescents on self-perception (Real Self)

Category	No	Mean	S.D	t -value	Significance
Visually Impaired	60	88.98	5.78	5.14	
Physically deformed	60	94.87	6.72		

The data presented in table 2 shows mean \pm sd in case of physically deformed was 94.87 ± 6.72 and in case of hearing impaired 89.75 ± 9.10 . Statistical difference between physically deformed and hearing impaired was highly significant (<0.01) on the basis of Self-perception (Real self). Physically deformed had better self-perception than hearing impaired adolescents.

Table:2. Comparison between physically deformed and hearing impaired adolescents on self-perception (Real Self).

Category	No	Mean	S.D	t -value	Significance
Physically deformed	60	94.87	6.72	3.50	
Hearing Impaired	60	89.75	9.10		

The data presented in table 3 shows that mean \pm sd in case of visually impaired was 88.98 ± 5.78 and in case of hearing impaired 89.75 ± 9.10 . Statistically difference between visually impaired and hearing impaired was not-significant (>0.05) on the basis of Self-perception (Real self).

Table: 3. Comparison between visually impaired and hearing impaired adolescents on Self-reception (Real Self)

Category	No	Mean	S.D	t -value	Significance
Visually Impaired	60	88.98	5.78	0.55	> 0.05 Not-significant
Hearing Impaired	60	89.75	9.10		

The data presented in table 4 depicts mean \pm sd in case of visually impaired was 69.4 ± 6.87 and in case of physically deformed 75.68 ± 6.37 . The statistical difference between visually impaired and physically deformed was highly significant (< 0.01) on the basis of Self-perception (Ideal self). Physically deformed had better self-perception than visually impaired adolescents.

Table:4. Comparison between visually impaired and physically deformed adolescents on Self-perception (Ideal Self)

Category	No	Mean	S.D	t -value	Significance
Visually Impaired	60	69.4	6.87	5.19	
Physically deformed	60	75.68	6.37		

The data presented in table 5 shows Mean \pm S.D in case of physically deformed was 75.68 ± 6.37 and in case of hearing impaired 70.16 ± 8.32 . Statistically difference between physically deformed and hearing impaired was highly significant (< 0.01) on the basis of Self-perception (Ideal self). Physically deformed had better self-perception than hearing impaired adolescents.

Table: 5. Comparison between physically deformed and hearing impaired adolescents on Self-perception (Ideal self).

Category	No	Mean	S.D	t -value	Significance
Physically Deformed	60	75.68	6.37	4.07	
Hearing Impaired	60	70.16	8.32		

The data presented in table 6 depicts that Mean \pm S.D in case of visually impaired was 69.4 ± 6.87 and in case of hearing impaired 70.17 ± 8.32 . Statistically difference between hearing impaired and visually impaired was not-significant (> 0.05) on the basis of Self-perception (Ideal self).

Table:6. Comparison between visually impaired and hearing impaired adolescents on Self-perception (Ideal self).

Category	No	Mean	S.D	t -value	Significance
Visually Impaired	60	69.4	6.87	0.55	> 0.05 Not-significant
Hearing Impaired	60	70.17	8.32		

1.5. Discussion

The study highlighted that visually impaired had better Real self as well as Ideal self as compared to physically deformed and hearing impaired adolescents. Study by Devi and Valli (2014) revealed that normal students were having high self concept than the hearing impaired. Bat-chava (2003) have also reported lower self-esteem among hearing impaired. Another study by Juyal (2013) exhibited more positive perception and emotional competence among visually impaired as compared to hearing impaired. However study by Mishra and Sing (2012) revealed low self concept among visually impaired.

The study was further carried to compare visually impaired and physically deformed adolescents on self-perception (Real self). A highly significant difference depicted that physically handicapped had better self-perception than visually impaired while as study conducted by Joshi and Rai (2014) reveal that visually impaired

adolescents have average self concept. With respect to comparison of physically deformed and hearing impaired a highly significant association was found on the basis of self perception (Real self) where in it was found that hearing impaired had better self perception than physically deformed. The findings are supported by the Nicholas and Geers et al (2003) who report that the self perceptions of hearing impaired were positive in most aspects of daily life, thus counteracting earlier concerns about psycho-social problems in implanted children. Whether positive self-perceptions among deaf students continues into adolescence is yet unknown. Another study by Farrugia and Austing (1980) reveal that hearing impaired students in residential schools and hearing students in public schools were the most similar in all areas of development. Hard-of-hearing students in public schools appeared to demonstrate lower levels of self-esteem than other students.

The present study highlighted a non-significant association on the basis of self perception (Real self) between visually impaired and hearing impaired. However study by Juyal(2013) indicate that visually impaired adolescents showed more positive perception and were more emotionally competent than the adolescents with hearing impairment. Comparison between visually impaired and physically deformed adolescents on self perception (Ideal self) however depicted a high significance wherein visually impaired were found to possess better self perception (Ideal self) than physically deformed, however study by Grolnick and King et al(1993) found that the difference between the two groups of physically deformed and visually impaired was very little to be significant and concluded that although statistical significance was little but there were adverse impact of disabilities on the development of self concept among the adolescents and they were found to be inferior to normal peers irrespective of the type of disability they were having. In other words the onset of disabilities tends to lower down the self image, self esteem and sense of self worthwhile as no statistical difference was found between hearing impaired and visually impaired with respect to self-perception (Ideal self).

Adolescents with disabilities are more dependent on others than adolescents without disabilities not only in a physical sense but behaviorally and socially as well. Thus self perception and adjustment is low as compared to their normal peer group as the present study has revealed. The findings have a number of implications for assessment and intervention with adolescents with disabilities. Clearly not all adolescents with disabilities are at risk of lower self-perception and adjustment, however if those who are at risk can be identified early before behavior patterns become resistant to change, than interventions may be easier and burden of concern may be alleviated.

CONCLUSION

The present study depicts that visually impaired had better Self-perception (Real and Ideal Self) than physically deformed and hearing impaired. Quality care and support that helps in self-development should be provided to differently abled adolescents. There is a need to address to the lack of trained staff for differently abled adolescents. Parents, families and teachers should be included as partners with policy makers in supporting differently abled adolescent development. Awareness should be created among general public about the rights and Acts of the disabled people which ensures every disabled the right to development as well as survival. Awareness should be created among people regarding the services being rendered by governmental and non-governmental organizations.

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