**Insights into self-concept of the adolescents who are visually impaired in India**

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*The study aims to explore the nature of selected domains of self-concept (namely behaviour, Intellectual and school status, physical appearance and attributes, anxiety, happiness and satisfaction) of the sighted adolescents and the adolescents with a visual impairment. The sample (N = 160) have been drawn by simple random sampling from 100 sighted adolescents and 60 adolescents who are visually impaired from the selected schools of West Bengal (Eastern Part of India). Mean, Standard Deviation and Student’s t-test has been computed for analyses of data. Significant differences were noted among the adolescents who are sighted and visually impaired with respect to the overall self-concept scores including the domains namely physical appearance, popularity, happiness and satisfaction. The results of this study will assist parents, advocacy groups and special educators to comprehend the areas in which the sighted students and students with visual impairment need help and support, in order to develop positive self-concept.*

Self-concept has an important implication for positive existence, and is a significant variable for achievement and positive development in the society in every sphere irrespective of being challenged or non-challenged. Recognizing its wider coverage than any other trait of personality self-concept has been chosen for the present investigation for its important implication in general well-being of the adolescents who are visually impaired.

One of the most obscure terms, found in psychology is *self*. The exact time of its origin is still unknown. However, it appeared long before the beginning of the systematic explanation of personality the origin of which can be no doubt be traced to the philosophers. According to Carl Rogers (1959) *self* is the portion of the personality which consists of perceptions of *I* or *me* and develops out of the organism’s interaction with the environment. By *self* Freud (1945) used the term years ago to refer to this organized aspect of personality and numerous other theorists have adhered to this usage (Warren, 1962; James, 1890, 1902). Self-concept is the cognitive or thinking aspect of self (related to one’s self-image) and it is generally considered to be the totality of a complex, organized, and dynamic system of learned beliefs, attitudes and opinions that each person holds to be true about his or her personal existence (Purkey, 1988). Franken states *there is a great deal of research which shows that the self-concept is perhaps, the basis for all motivated behaviour* (1994, p. 443). It is the self-concept that creates the motivation for behaviour. Adler (1930) says that it gives meaning to life creating the goal as well as helping to fulfill it. This supports the idea that one’s paradigm or world view and one’s relationship to that view provide the boundaries and circumstances within which we develop our vision about possibilities. When people know themselves they can maximize outcomes because they know what they can and cannot do. Self-concept is based on accumulated perceptions throughout the lifespan and is strongly influenced by the interplay between their own actions, the reactions of others, and one’s perceptions of the events and their surrounding behaviours and outcomes (Byrne, 1996; Davis-Kean & Sandler, 2001). This dynamic aspect of self –concept is important because it indicates that it can be modified or changed (Franken, 1994). As the individual achieves a sense of his own identity he tends to view each situation in the light of his own motives, assumptions and feelings. Thus the effects of a particular environment become increasingly dependent upon the way it is experienced by the individual.

*Self-concept as a construct has had a long history within psychology and education because it provides a gauge to determine the effects of academic and social functioning on the emotional well-being of the individual* (Vaughn et al., 2001, p. 54).   Self-concept is generally viewed as a valued educational outcome.  Self-concept is typically defined as a person’s general composite or collective view of themselves across multidimensional sets of domain specific- perceptions, based on self-knowledge and evaluation of value or worth of one’s own capabilities formed through experiences with and interpretations of the environment (Eccles, 2005; Snow et al., 1996).

During the pre-school years, many sources play an increasingly important role in the formation of self, such as family, teachers, classmates, playmates and friends. Self-concept remains relatively stable in adolescence over a two year period. In adult years, one’s occupational associates and sweet hearts, spouse and children influence this process. There are a several different components of self-concept: physical, academic, social and transpersonal. It includes the perception an individual has of one’s physical appearance and of the tangible properties of himself as a person. It covers beliefs, conviction and values he holds. Further it includes the attitudes- has concerning himself as a person, his worth, his right to have his own feelings and thoughts and to make his own choices. The physical aspect of self-concept relates to that which is concrete: what we look like, our sex, height, weight, etc.; what kind of clothes we wear; what kind of car we drive; what kind of home we like in; and so forth. Our academic self-concept relates to how well we do in school or how well we learn. The social self-concept describes how we relate to other people and the transpersonal self-concept describes how we relate to the supernatural or unknowns. For students with disabilities, it may be difficult for them to form their physical, academic, social or transpersonal self-concept because of the negative image and perceptions they have due to their disability.

# *Self-Concept and the Physical Impairment*

Physical disability in itself may not be as bad physical experience as the social one, especially in those cases where the handicap is visible. It is only recently that the *Disability* has been termed as a *Challenge*, impediment for an individual. Such individuals grow up with a very negative self-image resulting in low motivation and aspiration (Sharma et al., 2004). They grow up they *cannot do* where as when the disability is offered as a *challenge* their outlook towards life changes (Joiner et al., 1989).

Physical disability adversely affects the self-concept (Elbaum & Vaughn, 2001). Successes, fame and enjoyable events in life lead to the enhancement of self-concept while failure, disharmony and discontentment tend to lower the concept of one (Blomquist et al., 1998). Self-concept is considered to be the most significant factor in human life as everyone is continuously striving towards self-actualization, self-realization and self-enhancement, and is constantly wishing to avoid self-condemnation and self-lowering experience.

Self-concept develops through childhood. Children with disabilities often experience that their development is slower as compared to the normal child. So these children with disabilities possess very poor self-concept (Sharma et al., 2004). Being given a name and being addressed by it is a basic part of the development of a concept of oneself. Studies conducted by Joiner et al., (1989) show that there is a positive relationship between assertive behavior and degree of acceptance of disability among person's disabilities.

Fichten et al., (1991) concludes that in everyday social encounters, the individuals with disabilities, their thoughts and feelings were more negative. It was also seen that the mental health too was affected by the poor physique. Studies conducted by Varni and James (1996) indicated that the affect of perceived physical appearance on psychological adjustment distress is mediated by general self-esteem.

# *Emergence of the Problem*

Self-concept has been taken as an important aspect of personality of a person and is perhaps one of the important domains for the development of individuation of a person causing effect on various part and parcel of everyday life. The self-concept has always been examined and looked upon by various researchers in India and abroad from not only from a psychologist’s point of view but also from an educationist and sociologist’s point of view. Considering its importance the present study is an attempt to compare the adolescents who are sighted and visually impaired with respect to their selected domains of self-concept.

# *Selected Domains of the Self-Concept for the Present Study*

The six dimensions selected for the study were *Behavior*, *Intellectual and school status*, *Physical appearance and attributes*, *Anxiety*, *Popularity*, *Happiness and Satisfaction* (Piers-Harris, Children’s Self-Concept Scale, 1969). *Behavior* is the outcome of personality. Confidence of a man is reflected by his behaviour and vice versa. A persons feeling about his own self will have an impact on his future achievement, learning, decision making etc.

*Intellectual and School Status* constitutes as having good understanding, knowledge and reasoning. The status of a person in school provides more opportunity to think and reason and gives broader outlook about himself and his life and develops his self-concept.

*Physical Appearance and Attributes* is based on how an individual perceives himself and his surroundings determined by his effort and goals, his strivings and aspirations. One’s view or picture of himself, his ideas about his physical appearance and characteristics or quality incorporates his/her self-concept. Since others perceive and react to the individual at least partially in terms of his physical appearance, it is not surprising that the individual’s body image may continue to be an important component of his identity and self-concept throughout his life.

*Anxiety* is fear acquired as a result of many frustrating and denigrating experiences encountered by the individual. Most often the child is not aware of the cause of his anxiety or misery. If this anxiety and misery turns severe one may develop disturbances of bodily function which may disrupt responses and behavior in life.

*Popularity* includes all those aspects or areas of life in which an individual is personally involved in his/her acceptance in family, peer group, school, community etc and is an important aspect of a person’s self-concept. Popularity means how well someone is liked or disliked by everyone, however, in the real world, popular means the people everyone aspires to be.

*Happiness and Satisfaction* is being lucky, fortunate, contented and pleased. A child who feels wanted and loved by his mates, is eager and confident to learn, to adjust to the demands of life but a child who is dissatisfied and unhappy casts a negative influence on his self-concept. Happiness is a mental state of well-being characterized by positive emotions ranging from [contentment](http://en.wikipedia.org/wiki/Contentment) to intense joy. Satisfaction is realistically defined as enjoyment of whatever may be desired. Happiness and Satisfaction towards life have an integral role to play on a person’s self-concept.

The objective of this study is to explore the nature of the self-concept with respect to the adolescents who are sighted and visually impaired. This study also aimed to ascertain whether self-concept of the sighted adolescents differ significantly with that of the adolescents who are visually impaired with respect to the selected domains of self-concept. The Hypothesis is there will be significant differences between the adolescents who are sighted and visually impaired with respect to the selected domains of self-concept considered for the study.

# Method

The sample (N = 160) have been drawn by random sampling from 100 sighted adolescents and 60 adolescents who are visually impaired from the selected schools of West Bengal. Only those adolescents with vision impairment were included whose visual acuity did not exceed 6/60 or 20/200 and partially sighted individuals have been excluded from the study. The schools included were from all the districts of West Bengal (Eastern part of India) selected on the basis of stratified random sampling. The samples were matched in terms of age, school, location and socioeconomic status. The sample’s age ranged between 15- 18 years, only students who attended government schools were selected. The location of the schools was in the urban metropolitan areas and the socio economic status of the samples was moderate.

The tools used were General Information Schedule (GIS) indicating demographic and personal information (prepared by the researcher) was administered on participants. The Piers-Harris, Children’s Self-Concept Scale (1969) was also used. The test contains 80 items in all *Yes* or *No* responses. The six sub-scales which are included in the self-concept scale are considered to be important in the Psychological world of childhood and adolescence. The subscales of the scale are: Behavior, Intellectual and School status, Physical appearance and attributes, Anxiety, Popularity, Happiness and Satisfaction. Pilot study has been done on 25% of the sample and the test has been standardized again on the expected sample. The results of the pilot study indicated the reliability coefficient of the scale between 0.79 - 0.88. The validity has been determined by estimating; (a) face validity (b) concurrent validity and factorial validity. Descriptive analysis has been done for the study. Mean, Standard Deviation and Student’s *t*-test have been used.

# Results

Table 1 represent the mean, S.D and t test score of the two groups of sample namely adolescents with visual impairment (N = 60) and sighted adolescents (N = 100). Significant differences (t = 2.11) were noted among the adolescents who are sighted and visually impaired with respect to over all self-concept score. The sighted adolescent students (M = 51.12) were found to be having much positive self-concept about themselves than the adolescents with visual impairment (M = 48.17).

**Table 1. Mean (M), Standard Deviation (S.D), and t-test Values for Self-Concept Scale Along with its Six Component Scores of the Adolescents (Sighted and Visually Impaired)**

|  |  |  |
| --- | --- | --- |
| **Variables** | **Mean and****Standard Deviation** | **t-values for mean****difference between gender** |
|  | **Sighted****(N = 100)** | **Visually Impaired****(N = 60)** | **Sighted****And** **Visually Impaired** |
| Behaviour | M = 10.30S.D = 3.13 | M = 10.58S.D = 2.08 | 0.56 NS |
| Intellectual and school status | M = 10.62S.D = 2.19 | M = 10.98S.D = 2.43 | 0.86 NS |
| Physical Appearance  | M = 7.82S.D = 1.59 | M = 6.42S.D = 2.53 | 3.59 \*\* |
| Anxiety | M = 7.08S.D = 2.55 | M = 7.32S.D = 2.74 | 0.49 NS |
| Popularity | M = 8.78S.D = 1.68 | M = 8.00S.D = 2.13 | 2.36\*\* |
| Happiness and satisfaction | M = 6.52S.D = 1.02 | M = 4.87S.D = 1.32 | 7.50 \*\* |
| Total Self-concept Score | M = 51.12S.D = 7.18 | M = 48.17S.D = 8.26 | 2.11\* |

 \*\* Significant at 0.01 level; \*significant at 0.05 level.

No significant differences (t = 0.56), (t = 0.86) and (t = 0.49) were noted among the adolescents who are sighted and visually impaired with respect to Behavior, Intellectual and school capacity and Anxiety domain of self-concept. Significant differences (t = 3.59) and (t = 2.36) were noted among the adolescents who are sighted and visually impaired with respect to Physical appearance and attributes and Popularity domain of self-concept. The sighted adolescent students were found to have more positive concept (M = 7.82) about their physical appearance and attributes when compared to the adolescent students who are visually impaired (M = 6.42). The sighted adolescents (M = 8.78) were found to be more popular than the adolescents with visual impairment (M = 8.00). In the Happiness and Satisfaction domain of self-concept there was significant differences (t = 7.50) among the adolescents who are sighted and visually impaired. The sighted adolescents (M = 6.52) were found to be more happy than the adolescent students who are visually impaired (M = 4.87)

The Graphical distribution (Figure 1) gives a picture some view of the self-concept domain wise description of the adolescents who are sighted and visually impaired. The sighted adolescents indicated high scores in over all self-concept score and also in some of the selected domains namely physical attributes, happiness satisfaction and popularity. Only in the Intellectual and school status domain the adolescents with visual impairment portrayed their strength.

**0**

**10**

**20**

**30**

**40**

**50**

**60**

**Behavior**

**Intellectual**

**and**

**School**

**Status**

**Physical**

**Attributes**

**Anxiety**

**Popularity**

**Happiness**

**and**

**Satisfaction**

**Self**

**Concept**

**Total**

**Sighted**

**V. Impaired**

**Figure 1. Graphical Representation of Self-Concept Scale along with its Six Component Scores of the Adolescents (Sighted and Visually Impaired)**

# Discussion

The adolescents who are sighted scored higher in the total self-concept scores as compared to the adolescents who are visually impaired. Therefore, the hypothesis which stated that sighted adolescents differ significantly in their self-concept scores as compared to adolescents who are visually impaired was confirmed. This data points in the same direction as those of other investigators (Beaty, 1992; Lifshitz, Hen & Weisse, 2007). Beaty (1992) indicated that the students who are visually impaired were prone to feelings of inadequacy and inferiority which in turn resulted in their low self-concept scores. Lifshitz, Hen, and Weisse (2007) found significant differences between the self-concept scores of the adolescents with visual impairments and that of their sighted peers.

However, other studies found no significant differences in the self-concept scores between the adolescents who are sighted and visually impaired (Fok & Fung, 2004; Garaigordobil & Bernarás, 2009; Jervis, 1959; Obiakor & Stile, 1989; Shirley & Nes, 2005). The differences in the results of the studies may be due to the factors of self-concept investigated, the way the groups were selected, and the method of gathering data. The differences may be related to the instruments employed because some of them assess global self-concept, whereas others explore the differentiated dimensions of self-concept.

Individual with disabilities are still considered a burden to the Indian society and are neglected (Ghai, 2002 & Halder, 2008, 2009). The *Self-conce*pt represents the personality at large. A child with disabilities may be exposed from birth of their inferiority and incapability which is reflected in every sphere. The societal pressure on adolescents who are disabled is believed to contribute to loss of self esteem (Kef, 2002). As a result, their *Self-concept* suffered in comparison to the sighted individuals. Since others perceive and react to the individual at least partially in terms of their physical appearance, so in the case of the adolescents with visual impairment this aspect was low when compared to their sighted peers (Varni & James, 1996). They were also found to be low on the scale of popularity and also in happiness and satisfaction measure, an important requirement for the development of positive self-concept in an individual. Thus in overall estimation of self-concept score they were found to be low from the sighted (Fitchen et al., 1991). The adolescents with visual impairment were found to be low on the Popularity domain when compared to their sighted peers because they were too shy to interact as a result of their disability perceived by others. Kef (1997) reached similar conclusions that adolescents who were blind and attended regular schools had the smallest social network. Evans et al., (1992) also suggested that the number of social interactions between students with and without disabilities in an inclusive setting declined as the school year progressed. However, Sale and Carey (1995) had contradictory findings indicating that increased learning and social competence of children with disabilities occur from placement in integrated settings. Literature in the areas of wellbeing, depression, mental health, and studies of the psychosocial impacts of visual impairment on adolescents suggest that social isolation and perceptions of disability by peers can impact on the self-esteem of adolescents with visual impairment (Hatlen, 2004; Kef, 2002). This has exactly been the case in this study where the social interaction of the adolescents with visual impairment had been considerably poor, reflecting low on the Popularity domain of self-concept which in turn led to their overall self-concept score to be weak. Their welfare can be positively affected by physical wellbeing, strong friendship and family networks, and encouragement by adults towards independence (Kef & Devkovic, 2004; Koenes & Karshmer, 2000; Rosenblum, 2000). Positive perceptions of disability and inclusion can also have helpful impact (Kef, 2002).

Since the sighted adolescents were found to be higher in most of the domains of self-concept (namely Physical appearance and attributes, Popularity domain) and overall self-concept score, so they were happier and content in life as compared to the adolescents with visual impairment. The very fact that visual impairment was perceived negatively and as a disability made the adolescents with visual impairment quite dissatisfied and unhappy in life, thus reflecting low scores in the Happiness and Satisfaction domain of self-concept. Though no significant differences were noted in behaviour and anxiety dimension, in Intellectual and school status they were found to be interestingly high when compared with the sighted portraying their average or above average potential which is a positive indication.

# Conclusion

A person with a positive self-concept does not necessarily have more skills than a person with a poor self-concept. The potential for a positive self-concept lies within each of us. Self-concept is not carved in stone, it can be changed. Children learn about themselves through their relationships with others. One’s ideas about one self are influenced by others ideas about them. It is from other people that we learn what we are good at and what we are bad at and whether we are lovable or unlovable, clever or unintelligent, wanted or unwanted, which there on become the raw materials for our self-concept. Adolescence is a complex stage of life in which physiological and psychological changes begin and is characterized by a period of heightened storm and stress (Broderick & Blewitt, 2006). Some psychologists believe that adolescents’ self-concept are abstract, complex and differentiated (Inhelder & Piaget, 1948). It can be more critical to develop a positive self-concept for adolescents with vision impairment. Thus this becomes imperative that with proper interventions by parents, teachers and other significant people the self-concept of the individuals who are visually impaired can also be transformed towards developing more positive concept about their own which later on adds to forming self-confidence, healthy personality and multi-faceted development in life.

# *Further Implications*

This research has great implications for parents, teachers and schools dealing with students with visual impairment. The society, family, and the important members cause significant contribution to one’s development of self-concept (Vashistha, 2004). Mishra (2004) revealed that the adolescents with visual impairment who receive parental encouragement excel in their self-concept. Parents can make their ward with disabilities feel positive about their physical appearance making them realize that looking good is not just externally based but rather being good internally.

Parents/ teachers can help students with visual impairment to develop a positive self-concept and appropriately high self-esteem by doing things together, encouraging them and praising them for their efforts and their achievements and by giving them opportunities to do things they feel proud of. This is based on firm foundations when adults get to know children well, taking care to learn about their individual likes, dislikes, and interests. It is very important for children to have their efforts and their achievements noticed and recognized. It gives them feelings of success and confidence, which enable them to risk more learning. Talking and listening to children in an interesting and accepting way can make as much difference. Adult expectations have a big influence on children’s self-concept; it matters very much how adults view the capabilities of the children in their care. Positive feedback like genuine appreciation, expressing acceptance, encouraging doing simple things through constant communication creating an environment of mutual support and caring may boost up their moral and confidence and thus may add positively in the development of positive self-concept.

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