

PSYCHOLOGY OF HANDICAPPED PEOPLE AND THEIR BEHAVIOR



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ABSTRACT

A significant number of professionals from all walks of life throughout the globe are dedicating their careers to the field of rehabilitation. They go to tremendous lengths in order to facilitate the integration of the handicapped individual or kid into

regular society. and the course of everyday life. There are moments when all of their hard work pays off in a big way. The majority of the time, the extent of one's achievement is constrained by factors that are not fully understood.

Keyword: handicapped, tremendous, lengths, professionals.

INTRODUCTION

Everyone who is engaged in the education of disabled children, including the parents, teachers, counselors, social workers, and occupational therapists, naturally has to be concerned with the children's physical wellness in addition to their academic and occupational development. In addition, they need to ensure that the handicapped have a healthy general psychological adjustment as part of their aims. Therefore, in order to effectively interact with handicapped children, one must have a solid awareness of not just the physical challenges, but also the psychological and social issues they face.

Whether he is dealing with physically normal children or children with special needs, the contemporary educator makes growing use of experimental and quantitative assessment of personality in his efforts to optimize educational experiences for his students. In this area, an effort has been made to determine the elements that have an impact on the growth of self-awareness as well as social relationships. The primary concern of this research is to investigate how these two aspects of one's personality are connected to one's level of athletic ability.

The overarching issue, therefore, seems to be the need for improved comprehension of the influence of a physical handicap on the psychological development of impaired children. There is no consensus in the literature that physically handicapped children are inevitably maladjusted, but when a child is, it is generally agreed that physique was only one factor in an extensive context of environmental and personal conditions acting together. This makes it difficult to disentangle the threads of cause, reaction, and effect (Barker et al., 1953).

It is widely held among personality theorists that the self-concept is the pivotal point around which all behavior revolves; that the formation of the self-concept follows a developmental sequence that begins very early in a person's life; and that a child's parents, peers, and teachers all play a very significant role in the mental image that the child eventually forms of himself.

The particular issue is that, despite the significant progress that has been made in medicine, there is now very little optimism that disease and incapacity can be eradicated. Instead, many of the physically impaired children who, in the past, would not have lived are today, because of the current medical knowledge, able to live a life span that is virtually equivalent to a normal life span. This is due of the advancements in medical technology. This, in addition to the typical rise in population, is evidence that the number of people who are unable to move freely due to physical impairment is on the rise.

Although there is a substantial body of written material on the subject, relatively little systematic study has been conducted on the behavior and personality development of people who have physical disabilities. In soma to psychological research, the primary methodological challenges that have been identified are as follows: selecting representative samples and securing adequate controls; the absence of instruments for measuring physical disability; and the absence of appropriate tests for assessing behavior and personality difficulties. Many of the studies have either been descriptive in their character or comparative

in form, in which the psychological and/or social adjustment of disabled children are compared with that of participants who are physically normal.

A study conducted by Norris and Cruickshank in 1954 on the adjustment of teenagers who were physically disabled found that despite the fact that these children experience the same challenges as other adolescents their age, the disability added an additional layer to the difficulties they faced. In spite of the fact that there are minor differences between handicapped and non-disabled kids on paper and pencil examinations, one of the more reliable results is that handicapped adolescents are less mature than non-handicapped youth, especially in their reactions to encountering new circumstances.

The psychological implications of physical limits on the self-image, which results in physical and social insecurity, loss of status in the eyes of others, and rejection by society, are on the list of the most prevalent frustrations observed among the handicapped, according to Noel (1955).

It is widely acknowledged that the degree to which a youngster is accepted by his or her peer group is a crucial component in the maturation of the child's sense of self. Not only does the kid with a disability have limited physical capabilities, but he or she may also have restricted access to certain types of play activities. It is possible that other children may treat him differently than they would if he did not have a disability, and he may come to feel that not only is he unique, but that he is also special.

The particular objective of this research will be to analyze the connection that exists between a kid's self-concept and the reputation that they have among their peers when the child has a physical disability. The five hypotheses that will be put to the test are based on the theoretical consequences of having a physical handicap on the process of creating a sense of one's own identity. Because the social stimulus value of the child to his peers as a source of observational data has not been fully exploited as a criterion measure of adjustment, the peer reputation in this study is to be regarded as a criterion measure of adjustment. This is due to the fact that the peer reputation of the child was measured.

Within the context of this research, an effort is made to evaluate the impact that having a physical impairment has on certain facets of one's life, such as one's capacity to walk or talk. More specifically, the following hypotheses will be put to the test:

The degree of the physical disability will have a negative link with the self-concept score that is given. The self-concept score will have a negative connection with age in the physically challenged kid. This link will be stronger as the child gets older.

It is expected that there would be a positive correlation between the self-concept score and the likeability score obtained from the peer rating.

It is expected that there would be a correlation between the severity of a physical disability and the overall number of unfavorable ratings received from peers.

It is expected that there would be a negative correlation between the impairment of one's capacity to communicate and the influence that this impairment has on one's peer group as determined by the overall selection scores.

Nearly everything that is written on the psychology of the self that can be found in published works refers to those whose fundamental physical development is considered normal. Despite the significance that is placed on the self as the center of a man's psychological existence, the knowledge that is available to those who are physically disabled in this area is relatively limited. If we want to comprehend a kid or a person, we need to learn how that child or person sees himself in relation to the world around him.

Because of this, gaining an awareness of oneself and being able to accept oneself has become one of the most essential goals of psychology and education. Thankfully, there is now some data that seems to demonstrate that the school can modify its instructional practices in order to assist students in developing healthy and realistic views about themselves. This is great news. If we are successful in achieving this objective, we will be able to avoid the tragic outcome of a kid entering adulthood burdened with anxiety, animosity, defensive sentiments about the self, feelings of guilt, inferiority, or other feelings of self-disparagement and self-doubt (J3rsild, 1952).

Teachers typically fail to recognize the significance of being accepted by one's peers for children and teenagers, as well as the influence that peer group pressure may have on an individual student. In the classroom, the effects of these elements may either lead to situations that are distracting and upsetting or they can contribute to learning experiences that are more productive. The degree to which instructors make an effort to comprehend and enhance their students' social relationships is a primary factor in determining the impact that they have on the academic development of individual students (Gronlund, 1959, p. 235).

The goal of research on body image has been to establish relationships between the sentiments of subjects regarding their physical traits and other factors. According to Bledsoe and Garrison (1962), the self-reports of males place a larger emphasis on their physical traits and their abilities in athletics than do the self-reports of girls. According to Coppie (1961), who conducted research on many components of the self-concepts of 102 fifth-grade boys, the self-concept is dependent on the judgements of others regarding one's talents, particularly motor skills. Jersild's (1952) subjects in grades eight through ten were the most likely to make self-evaluative remarks on their physical qualities.

This was in contrast to subjects of other ages. The findings of other study projects also point to the existence of a connection between self-concept and physical qualities, despite the fact that it is obvious that the physical traits are influenced by a variety of other variables, including the opinions of other people. These attitudes may be influenced by the physical qualities of a person, and the way that person is seen to have those characteristics may, in turn, influence how he views himself.

Despite the fact that there are as many definitions of self-concept as there are self-theorists, these definitions all center around the broad theme that this phrase describes the whole image that a person has of themselves. In addition, there is considerable uncertainty about the connection between the ego, the super ego, and a person's personality and their sense of self-concept. In order to avoid misunderstandings, the meaning of self-concept as it is used by this author will be provided in the next part, along with a number of other terms that are regularly used.

A person is considered to have a disability if they are unable to participate in the regular activities and social interactions that take place in their surroundings as a result of a physical or mental impairment (Scheer and Groce, 1988). In the United States, around 16.7% of children are estimated to have a developmental impairment (Boyle et al., 2011), whereas only 5.2% of children are estimated to live with a moderate or severe handicap. These statistics are based on the most current, albeit out-of-date, estimations (Brault, 2011; UNICEF, 2013). As a result of the Individuals with Disabilities Education Act, which was passed in 1975 and requires inclusive education, the majority of children with disabilities now get their education in the general education setting, where they share classes with classmates who have normal development (Causton-Theoharis and Theoharis, 2008; U.S. Department of Education, 2012). Interactions between students in inclusive contexts like these encourage acceptance and

social inclusion of those with disabilities inside a school setting as well as in society as a whole (Vignes et al., 2009; de Boer et al., 2013). According to Murray and Greenberg (2006) and Masse et al. (2012), social inclusion enables a person with a disability to make friends, take part in social activities, and develop into a contributing and valued member of society. Social inclusion also allows the person to participate in social activities.

Children with impairments are not always welcomed by their classmates who are usually developing, despite the clear advantages of inclusive schooling and social inclusion. Negative attitudes, bullying, social exclusion, and isolation are all things that can be experienced by children who have disabilities in any culture (Ochs et al., 2001; Hanvey, 2002; Nowicki and Sandieson, 2002; Cummins and Lau, 2003; Kelly, 2005; Laws and Kelly, 2005; Odom et al., 2006; Guralnick et al., 2007; Shah, 2007; Vreeman and Carroll, 2007; Nugent, 2008; Gannon and McGilloway, 2009; Koster et al., 2010; de Boer et al., 2012a; Lindsay and McPherson, 2012; Snowdon, 2012; Kayama and Haight, 2014). Children who are socially excluded may have unsatisfying peer relationships, low self-esteem, and a lack of achievement motivation. These factors have an impact on the social and academic aspects of their lives, as well as their mental health and general well-being (Juvonen and Graham, 2001; Brown and Bigler, 2005; Murray and Greenberg, 2006; Pijl and Frostad, 2010; Lindsay and McPherson, 2012; Masse et al., 2012; Pijl and Frost

REVIEW LITERATURE

Although the sub-divisions in this chapter are rather arbitrary and overlap, the two key issues, "self- concept" and "sociometry," are covered. Both of these concepts are discussed. It is planned to organize the presentation of the relevant material according to major sections. These categories will contain theories pertaining to the development of the self-concept; research relating to the development of the self-concept and sociometry; instruments utilized in these areas of study; and research challenges associated in the study of the physically handicapped. In addition, there is a short discussion on the misunderstanding of terminology related the self-concept, as well as a brief summary of the key personality theories that relate to the self that have been included. Both of these sections are included in this article.

In addition to focusing on children who have physical impairments for the purpose of this research, a concerted effort has also been made to identify published articles and research papers that compare and contrast the personalities of children with and without disabilities. This study is specifically concerned with the influence that a kid's physical handicap has on

the child's growing sense of self as well as the impact that a child's physical handicap has on the peer group's acceptance or rejection of the child. Included in this analysis are a number of factors that are thought to play an essential role in shaping an individual's evolving sense of self. These include social connections, physical ability, body image, and others.

Studies that have been conducted on the topic of children's social choices and reputations among their peers have focused on a variety of elements, including socioeconomic status, ordinal rank, academic performance, physical traits, and personality characteristics. Very few people have been personally concerned with the link between their self-concept and the reputation they have among their peers.

The process of linking the observation of behavior to the investigation of mental processes is one of the most challenging problems in the field of psychology. One solution to the issue has been to restrict psychology's scope to the investigation of behavior, delegating to philosophy the responsibility of theorizing on the existence of the mind and soul as well as their characteristics (Lowe, 1961).

However, there have been psychologists who have attempted to make sense of human behavior by postulating the existence of a self or ego in order to understand the coherence and unity that they believe they have observed in human behavior. These psychologists have done this in an effort to make sense of human action. Therefore, G.W. Allport (1943) said that the idea of ego was required due to specific deficiencies in association, and he provided a list of eight distinct applications for the notion of the ego in his work.

For the sake of convenience, theories on a self-concept may be separated into three mainstreams, the development of which has shown minimal interaction within the same time period. Even though the concept of "self" can be traced back to earlier philosophers like St. Augustine and Descartes, it wasn't until the early part of the twentieth century that sociological theorists like George Herbert Mead and Charles Cooley emphasized the importance of self-concept in regards to social interaction. A second school of thought about the nature of the self is often associated to such twentieth-century psychological

Carl Rogers and Abraham Maslow are two examples of theorists. In the beginning, Victor Raimy was the one who first voiced their emphasis on the conscious or phenomenal self as shown during psychotherapy (1943).

Jerome Bruner (1965) and Arthur Combs are representatives of a third school of thinking that places an emphasis on the processes of perceptualization (1962). The second set of thinkers has placed a greater emphasis on the impact of conduct on people's views of the experience they have had, in particular their perception of themselves. These seemingly contradictory views may be resolved into a single perspective known as phenomenology, which "places emphasis on the role that a person's conscious self-concept plays in shaping that person's conduct" (Wylie, 1961, page 3). This perspective diverges significantly from those of other modern schools of psychological thought, such as behaviorists and psychoanalysts, for example.

RESEARCH METHODOLOGY

The goal of this study is to gain further information on the physically impaired child's perception of himself as well as his standing among his peers via the use of research methods. As was mentioned earlier, the current study is different from the research that has been done in the past on the self-concept and the reputation among peers. This is due to the fact that the majority of studies dealing with this topic have focused primarily on physically normal children or adolescents.

Three different sets of instruments were used in order to collect the necessary information for this research. The self-concept scale was similar to the one utilized by Lipsett (1958), and the peer reputation scale was comparable to the one utilized by Winder and Wiggins (1961). The children's teacher and their physical therapist evaluated the severity of the children's disabilities, including their capacity to communicate, the extent to which they were restricted in their movement, and the amount of constraint they had. The author came up with this grading system on his or her own.

Additionally, the selection of the population, the selection of the sample, the administration of the rating instrument, and the plan of analysis are all described in this chapter.

SELECTION OF THE POPULATION

youngsters with physical disabilities who were participating in special programs

Because of an analysis of the demographics of this group, schools were chosen to serve them.

The research that has been done on disabled people has not produced any comparable findings.

youngster in an educational environment with other students who shared his disability with him.

A study conducted in the state of Oregon found that two institutions offered special adapted activities for youngsters with physical impairments. These people were known as the Holladays.

School in both Portland and Eugene, which is known as the Children's Hospital School. The research for this study was carried out at these two specific sites. This is the Holladay.

Classes specifically tailored to the needs of students with physical impairments are offered in Portland.

pupils and is an integrated component of the standard elementary school curriculum. This in some ways contrasted with the Children's Hospital School in Eugene, which was located in services exclusively children who are disabled in a physical way. When we first started looking at this,

Nevertheless, the Director was in the middle of putting together a unique course at the time.

for youngsters that have a mental impairment. In all scenarios, the children received a significant amount of work from their physical therapists.

DATA ANALYSIS

INTRODUCTION

In this chapter, the findings of the research project that was discussed in the previous chapters are provided. The first part of the report will consist of a review of the issues that were brought up previously under the heading "Purpose of the Study," as well as the citation of data that directly relates to these topics. After this, a tabular report of the findings of a correlational analysis of the variables is presented as the next step. In most cases, spoken explanations of the finer points of each table's components in their entirety are not supplied. However, where it is possible to do so, the findings presented here are compared with other similar research that has been done in the past.

In the last section, there is a discussion of what this research means and how it may be used.

The overarching hypothesis for this research project is that the constraints that are placed on a kid as a result of a physical impairment will have an effect on the child's perception of himself as well as his reputation among his peers. Investigation was done on the five theories listed below, which are all related to this topic:

- The degree of the physical impairment will have a negative link with the self-concept score that is given.
- A physically impaired kid will have a deteriorating self-concept as they get older, which will have a negative association with age.
- The score one receives on their self-concept will have a positive correlation with the likeability score they get from their peers.
- The severity of the physical disability will have a correlation with the overall number of unfavorable ratings received from peers, and this correlation will be positive.
- There will be a negative association between the impairment of a person's capacity to communicate and the influence that person has on their peer group as assessed by overall selection score.

Before sending the data to the IBM 1620 Digital Computer for the multiple correlation analysis, the three smaller groups were checked to ensure that they were consistent with one another. The hope was that this would allow them to be combined into a single sample with a N value of 28, rather than the three separate samples having N values of 9, 13, and 6. According to Garrett (1965), "by calculating a single SD, we have a better approximation of the 'real' SD 66n the population; additionally, by increasing N, we obtain a more stable SD based upon all of our examples" (p. 224).

On the recommendation of the author's statistician, the author used the quick compact method developed by John Tukey (1959) to meet Duckworth's specifications in order to conduct the test to determine whether or not there was a significant difference between the groups regarding their ages and levels of physical disability.

A concise explanation of this procedure, as outlined by Tukey, will be provided in the following paragraph before the presentation of the findings of this test to determine whether or not there is a significant difference in the data:

"Given two sets of measurements, obtained under settings (treatments, etc.) A and B, we believe that our identification of the direction of difference is more confidence the less overlap there is between the groups. If one group has the highest value and the other group has the lowest value, then we have three options: (I) we can count the number of values in one group that are higher than all of the values in the other group; (II) we can count the number of values in the other group that are lower than all of the values in the first group; or (III) we can add up the counts of the first and second groups. If the two groups are approximately the same size, then the critical values of the total count are approximately 7, 10, and 13. This is because 7 is the critical value for a two-sided 5% level, 10 is the critical value for a two-sided 1% level, and 13 is the critical value for a two-sided 0.1% level (p. 32).

Tukey continues by stating, "This technique will be totally adequate if the ratio of sizes $n + N$ does not exceed 4:3." By first deducting an integer (the correction factor) from the total count and then comparing the result with 7, 10, and 13, we can make the method applicable to pairs of samples whose sizes are not as well matched to one another. This will allow us to maintain its semi-portability. Even without taking into account the correction factor, this test is helpful in providing an approximate indication of the weight of the evidence. The alternative correction works very well for $N > 7$ and is recommended for people who are looking for a straightforward method that yields significance levels that are almost as conservative as those found in conventional statistical analysis. Tukey goes on to add that since this approach requires simply counting, despite the fact that the computation of a correction factor makes it less compact, it may still be a successful rival in some cases.

The results of Tukey's test to determine whether or not there is a significant difference between groups are presented as the first part of the statement of findings.

Test Of Significance Of Difference Between Groups On Variables Relating To Physical Disability And Age (* Significant At 5% Level)

Variable	Groups	Results
General Ability	A + B	0
	A + C	0
	B + C	0
Communication	A + B	2
	A + C	3
	B + C	1
Locomotion	A + B	2
	A + C	5
	B + C	0
Age	A + B	12*
	A + C	6
	B + C	7*

According to the findings presented in Table 1, there was not a discernible gap between the groups in terms of their levels of physical disability. On the other hand, there was a statistically significant age gap between two of the groups at the 5% level, but there was no statistically significant age gap between any of the other groups.

It is clear that there is a significant amount of age overlap across all three groups (ten to thirteen, eleven to sixteen, and thirteen to eighteen years old) (11 to 14). The age of each kid is taken into account in the correlational analysis that was used; hence, the groups were mixed in order to make the statistical treatment more manageable.

CONCLUSION

The impact that having a physical disability has on a child's self-concept as well as the connection between that self-concept and the reputation he has among his peers were the primary foci of this research. When attempting to make sense of children's actions, adults often turn to the idea of "self-concept," especially in educational contexts. In addition, the use of sociometric testing has been implemented on a regular basis so that teachers are able not only to evaluate the social condition of their pupils but also to identify the people who are seen as outcasts or social outcasts by the kids with whom they are grouped.

The hypotheses were developed in light of the ideas about the impact that having a physical impairment has on a person's self-concept as well as their reputation among their peers. Further, it was expected that age, the degree of impairment, and particular talents that were impacted by the handicap would all have a substantial impact on both of these areas of inquiry.

REFERENCES

1. Alexander, C.N., Jr. 1966. Ordinal position and sociometric choices. *Sociometry* 29:41 Allport, G.W. 1943. The ego in contemporary psychology.
2. *Psychological Review* 50:451 -478. Allport, G.W. 1961. Pattern and growth in personality. New York, Holt Rinehart Winston.
3. Amatora, Sister Mary. 1956. Validity in self -evaluation. *Educational Psychology Measurement* 16:119 -126. Ames, L.B. 1952. The sense of self of nursery school children as manifested by their verbal behavior.
4. *Journal of Genetic Psychology* 81:192 -232. Anderson, C.M. 1965. The self as a frame of reference. In: *The self in growth, teaching and learning: selected readings*, ed. by D.E.
5. Hamachek. Englewood Cliffs, N.J., Prentice Hall. p. 1 -13. Ausubel, D.P., H.M. Schiff and E.B. Gasser. 1952. A preliminary study of developmental trends in
6. socioempathy: Accuracy of perception of own and others' sociometric status. *Child Development* 23:111 -128.
7. Ausubel, D.P. 1958. *Theory and problems of child development*. New York, Grune and Stratton. 380 p. Baldwin, J.M. 1913. *Social and ethical interpretations*. New York, Macmillan. 605 p. Bandura, W. and R.H. Walters. 1959.
8. *Adolescent aggression*. New York, Ronald. 475 R, Banham, K.M. 1952. Obstinate children are adaptable. *Mental Hygiene* 36: 84 -89. Barbe, W.B. 1955.
9. Evaluation of special classes for gifted children. *Exceptional Children* 22:60 -62. Barker, R.G. et al. 1953.
10. Adjustment to physical handicap and illness; A survey of the social psychology of physique and disability. New York. (Social Science Research Council. Bulletin 55)

- 440 p. 173 Bass, B.M. and OWL. White. 1950. Validity of leaderless group discussion: observers; descriptive and evaluative ratings for the assessment of personality and leadership Status.
11. American Psychologist 5: 331. Bell, A. 1965. The significance of scrotal sac and testicles for the prepuberty male. Psychological Quarterly 34:182 -206. Bell. J.E. 1956.
12. The nature of social depreciation and of defenses against adjudged: a study of the cerebral palsied child in his family.
13. Unpublished report submitted to the Association for the Aid of Crippled Children, New York. (Cited in: Richardson, S.A., A.H. Hastorf and S.M. Dornbush. Effects of physical disability on a child's description of himself.
14. Child Development 35:894. 1964) Berry, M.F. and J. Eisenson. 1956 Speech disorders. New York, Appleton - Century Crofts. 426 p. Biehler, R.F. 1954. Companion choice behavior in the kindergarten.
15. Child Development 25:45 -50. Bills, R.E., E.L. Vance and O.S. McLean. 1951, An index of adjustment and values. Journal of Consulting Psychology 15:257 -261. Bledsoe, J.C. and K.C.Garrison. 1962.