CHAPTER II

REVIEW OF RELATED LITERATURE

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CHAPTER –II

REVIEW OF RELATED LITERATURE

2.0 Review

Review of related literature means to locate, to read and to evaluate the past as well as the current literature of research concerned with the problem in hand for investigation. The importance of related literature cannot be denied in any research. It is an important aspect of the research project which works as a guide post, not only with regard to the work done in the field, but also to perceive the gaps and lacunas in the concerned field of research. It helps in understanding the potentialities of the problem in hand. Besides this, review of related literature is always concerned with the planned investigation. The time spent in such a review is invariably a wise investment.

Like other fields, the research worker in the field of education also needs to acquire comprehensive information about what has been done in the particular area in which he intends to take up a problem for research. Good (1963) remarked that, “The Survey of related literature may provide guiding hypotheses, suggestive methods of investigation, and comparative data for interpretative purpose. The main purpose of Survey of literature is not compilation but an analytical review of the various researches. It stimulates and encourages the investigator to get deep into the intricacies of the problems and enables him to formulate hypothesis regarding their possible solutions”. Scott and Werthimer (1968) “Review of related literature may serve avoid unnecessary worn out problems and may help to make progress towards solution of new
ones.” Fox (1969) stated that “Review of the previous research will yield clues to the techniques of research. The researchers would hope to gain help in deciding will yield clues to the techniques of research. The researchers would hope to gain help in deciding how to do his own project by seeing how others have studied in the area and the success they have achieved with different research approaches, methods and techniques”. In the words of Mouly (1970) “Survey of related literature avoids the risk of duplication, provides theories, ideas, and explanations on hypotheses valuable in formulating the problems and contributes to the general scholarships of the investigator”.

Good (1963) claims that the survey of related literature is an essential and crucial aspect of a research project. It is quite helpful in making a straightforward statement of need for the investigation avoiding two extreme of an apologetic attitude. Koul (1984) emphasized that “review of related literature enables the investigator to avoid useless and unfruitful problem areas and unintentional duplication of well established findings”. Research takes advantage of the knowledge which has accumulated in the past as a result of constant human endeavour. Review of the related literature helps allowing the researcher to acquaint himself with current knowledge in the field or area, in which he is going to conduct research.

The review of literature provides the rationale or basis for the hypothesis. The rationale for method, sample, tools and statistical techniques is also obtained from the review of the studies. Again, the results and findings are discussed at length with the help of review of the related literature. Thus the findings of earlier studies may support some formulations or contradict them, to advance some reasons for it.
It enables the investigator to critically analyse the shortcomings in the sample methodology and design of the previous research studies conducted. Therefore, review of related literature is a must for the successful completion of research. A careful review of literature is one of the major stages or steps in any research study. The research must try to become familiar with his problem by going through the studies. It helps the researcher to lay a sound foundation for his investigation. Though it is time consuming, but a fruitful phase to help the research worker to find out what is already known.

Due to the lack of resources and time, it was not possible for the investigator to get access to the entire published and unpublished researches in the field but still an attempt has been made to study the literature concerned with the investigation in the hand. In this Chapter the investigator has attempted to note down some points which are relevant to the study on previous literature and a theoretical overview of the study. Several research reports suggested that the research has not provided conclusive results on the efficacy of integration or segregation (Kunc, 1984; Biklen, 1985; Algozzine & Maheady, 1986; New Brunswick school District, 1986; the Saskatchewan Teachers’ Federation, 1986). Other recent literature, however has suggested that there is a growing body of research expressing cautions generalizations in support of the effects of integration (Certo, Harding, & York, 1984; New Brunswick School Division, 1986; Slavin & Madden, 1986). These cautions are based on criticisms which suggest that research on this topic is a relatively recent development and that findings are limited in both nature and strength (Algozzine, Maheady, 1986). De Noronha, 1985 compares integration with segregation and concluded that apart
from exhorbitant cost of mainstreaming residential schools, students in integrated programme achieve more knowledge on academically, physically and socially.

Although the question of most appropriate educational setting for the challenged is by no means a new one, it is a question that is currently enjoying a renewed interest in the light of various pressures to “mainstream” the challenged children. The arguments that the challenged child must receive an individualized and appropriate educational experience, when possible within the larger educational setting have a good deal of common sense appeal and are based on a substantial amount of evidence as well. On the other hand, there are, for many children serious obstacles to create an “appropriate educational settings” within the public educational setting. These difficulties should not be ignored, otherwise the net result for the challenged child will be negative. Some of the relevant research from recent literature has been highlighted in this section with special reference to their educational setting issue which contributes to a better understanding of the characteristics of two types of setting with the degree of challengeness of those children, the investigator is interested in, and their effects on self-concept and adjustment.

For the sake of convenience, and further application in interpretations the investigator has divided the present study of related literature into the following different sequence:

2.1 Studies pertaining to Self-concept in Integrated Vs Segregated Educational settings.

2.2 Studies pertaining to Adjustment in Integrated and Segregated Educational settings.
2.3 Studies pertaining to Self-concept of Visually challenged children.
2.4 Studies pertaining to Self-concept of Hearing challenged children.
2.5 Studies pertaining to Adjustment of Visually challenged children.
2.6 Studies pertaining to Adjustment of Hearing challenged children.
2.7 Studies pertaining to Self concept and Adjustment of Visually and Hearing challenged children.

2.1 Studies pertaining to Self-concept in Integrated and Segregated Educational settings

Self-Concept is basically the sum total of the perception an individual has about him or herself. The historical roots of special education are found in Europe and America. In the second half of the twentieth century, new thinking and realization have opened new directions for education of the challenged children. There was a spurt of interest in this area. But in India this area has not been properly and exhaustively investigated. Enhancing the self-concept of students with special needs that are included in regular primary school classes has a positive impact on their academic achievements as well as on their personal and social development. Factors that appear to influence the self-concept of students with special needs include the following: severity or degree of challengingness, age of onset of challengingness, acceptance of the challengingness by parents, type of schooling (education in regular school or special school) and special support, labeling and identification group adherence (Montgomery, 1994; Westling Allodi, 2000; van Gurp, 2001; Cambra, 2002; Mrug, Wallender, 2002; Jambor, Elliott, 2005). Major researchers in the area of self-
concept on visual and hearing challenged children in integrated and segregated educational settings are given below.

Burns (1982) in a study with physically impaired adolescents studying in special schools found them feeling academically adequate and that school met their emotional and social needs and fostered their Self-esteem.

There have been a number of studies these have compared the Self concept of placement effects but the results in this area are perplexing or equivocal. Maddeen and Slaven (1983); Chapman (1988) have suggested that special class placement leads to poorer self concept some have suggested that there is increased self concept and some have found no difference.

Lalkhen and Norwich (1990) studied the Self concept and Self esteem of adolescents with physical impairments in integrated and special school settings. 39 adolescents, from special school, partially integrated and fully integrated placements constituted the sample and quantitative and qualitative indicators of Self concept and self esteem were assessed. The data were analysed and showed that the result is that the physical Self concept was significantly lower than other aspects of Self concept for all three groups. The physical Self concept was progressive lower from separate to partially to fully integrated settings, meaning thereby lowest in fully integrated setting. Physical Self concept was also found to be more independent of other Self concept aspects in the fully integrated group. Post hoc comparison indicated that mean self esteem level was significantly higher in the fully integrated than the separate school (t = 2.43, df =26, p < .05) but not between the fully and partially integrated settings.
Usher (1996) studied the effects of programme placement on the Self concept of students with orthopedic disabilities. The sample included 38 orthopedic students in inclusive programme placement and 32 in special school placement. Three indicators of student adjustment to the school environment were examined in relation to programme placement. Students on Self concept, comfort level in the school environment and student perceptions of teacher behaviour. Students were administered Piers Harris Children’s Self concept Scale and the student perception Questionaire. The results show that the students in special schools exhibited stronger feelings of Self concept, i.e. more positive Self concept and more satisfaction with school environment than those in inclusive schools.

Parrota (1997) conducted a study to find the differences between personality as measured on the Eysenck Personality Questionaire, of students studying in integrated and special school settings. Results of the study revealed that the students in special education settings obtained low scores on extroversion and higher scores on neuroticism and psychotism and like sub scales than their counterparts in regular school settings. On the basis of the findings the researcher recommended the need for intervention to promote relaxation and improve Self esteem, communication and co-operation of the students.

Van Gurp (2001) in his study on secondary school students, examined different aspects of Self concept and found that although students educated at integrated centres tended to have a higher academic Self concept, those who attended special schools had a higher social Self concept.
Israelite, Ower & Goldstein (2002) found that the deaf or dual identity is more easily developed in environments that are closer to the deaf culture (special schools for the deaf, families of deaf people, relationships with deaf communities, etc.), progress in integration procedures has shown that deafness can be integrated into a positive identity in hearing environments.

Mrug and Wallender (2002) an intercultural study in which the researchers compare the self-concept of young people with physical disability in The Czech Republic and The United States to that of a normative sample of Czech students without a disability confirmed that the self-concept of young people with a physical disability integrated into regular classrooms did not differ from the self-concept of their peers.

Cambra and Silvestre (2003) in their study resulted significant differences between integrated students (students with hearing impairments, physical disabilities and learning disabilities) and their counterparts in the social and academic dimensions, which is lower in children with special needs, but the differences in physical self-concept dimension are not statistically significant.

2.2 Studies pertaining to Adjustment in Integrated and Segregated Educational settings

The overall psychosocial adjustment of individuals with challengeness has been a topic of much interest but of considerable disagreement. Adjustment is inevitably tied in with issues of independence, sufficiency and control and will vary from person to person influenced by their character, previous experiences and support network. Research on psychosocial adjustment has incorporated a
variety of questions ranging from the impact of progressive or immediate visual or hearing loss, anxiety, the inability to work, avoidance, and bullying to the role of support networks such as friends, families and charities. Human beings not only adapt to their environment but through the use of intelligence change the environment to meet the needs more effectively. He learns to develop himself by exchanging the demands and influence of his environment. In the process of meeting the demands of life one may be encountered with problems of health, emotion, and social anxiety. It is generally agreed that a child’s school experience and adjustment to it, cannot be viewed in isolation of what goes on at home. The home and family environment is one of the strongest continuous forces affecting any child’s development, more so in the case of challenged children. The Warnock Report recognised the importance of family life and placed considerable emphasis upon parental involvement from the earliest stage of diagnosis, right through life. Lack of parental acceptance and understanding of the challenged child’s early development needs may have a lasting effect upon his educational success, adjustment and self-concept.

Parents are, first of all, home teachers of all roles. This is the most natural. Parents teach their children the skills of daily living. They serve as models for appropriate behaviour. Parenting needs to be recognized as a skilled job. From a psychological standpoint parental acceptance of the child is so important for the child’s development that it is tempting to create to cite parent counseling services as the most crucial need at this time for the field of special education.
Parents who do not accept and adjust to the child’s challenged escalate their child’s difficulties, maladaptive behaviour patterns that emerge in the relationship between parents and their challenged child can arise from either of two opposite but equally harmful reactions. Parents may either overestimate or underestimate their child’s abilities and potential. Overestimates may be due to parents’ denial of their child’s problem. Such parents are prone to establish unreasonably high standards for their child’s behaviour or development. Because the child wants to please the parents but not capable to fulfilling their expectations, he or she continually faces feelings of frustration, inadequacy and other negative emotions such as guilt, disappointment and uncertainty as to his or her place in the affections of the parents.

On the other hand, some parents seem to overcompensate for their challenged child. Some typical behaviour of these parents include setting goals that are too easily attained, praising or rewarding the child for work that is below his or her level of functioning, and intervening unnecessarily when the child is working on difficult tasks. Such behaviours convey the message, that the parents do not recognize or appreciate the child’s actual abilities. These signals undermine the development of high self-esteem and a positive self-concept.

Once the challenged child goes to school, the influence of the school environment increases, and slowly the teachers and peer group started playing an equally important role, in his/ her life. During this period it is largely the school environment that provides experiences, with success and failure that form the basis of evaluation of one’s self, coping mechanisms and adjustment to others in society.
A challenged child is very likely to have to make an adjustment involving his or her educational programmes. The adjustment may range from simply modifying his or her study habits or methods to full time, participation in the special self-contained programme. Professionals who work with the child should strike to minimize whatever educational disadvantage(s) may be imposed by the challenged. The goals of the child’s educational programme should emphasize activities to compensate for, or overcome his or her challenged.

Experience with broad range of peers is not a superficial luxury to be enjoyed by some students and not by others, but rather an absolute necessity for maximal achievement and healthy cognitive and social development. Social interactions with peers may be the primary relationships within which development and socialization takes place.

Simply placing challenged and non-challenged students in physical proximity to each other does not mean that constructive interaction will take place. In order for peer relationships to be constructive influences, however, they must promote feelings of belonging, acceptance, support and caring, as opposed to feelings of rejection, abandonment and alienation. The more accepting peer relationships, the more children and adolescents are willing to engage in social interaction provide positive social rewards for each other, use their abilities in achievement situations and behave appropriately in the classroom (Johnson, 1980)

Over and above the special methods and materials, teacher used to use in working with the challenged child in the special education settings. Perhaps the most element of the challenged child’s
educational experience is a positive social climate. Teacher can provide a model for accepting individual differences in general and specifically valuing each child’s including the challenged child’s abilities and contributions. The child’s classmates will imitate the teacher and assimilate the underlying nondiscriminatory attitudes. Being accepted by one’s teacher and classmates nourishes the challenged child’s self-concept and self-esteem, thereby promoting not only social development, but also cognitive growth and educational achievement. Thus, the challenged child will be more willing to take the necessary risks associated with attempting challenging tasks, and through accepting such challenges will be stretched to reach his or her full potential.

In school, irrespective of what type of programme the challenged child is involved in, it is the peer group which provided the base of security that the family had previously provided. Peer groups provide children with an opportunity to define themselves as members of a group, form relationships, interact with equals and realize that they are of value to others (Newman, 1982).

The social environment to which the child is exposed is one of the important factors; McGuinness (1970) used the Vineland Scale to compare the social maturity of visually impaired children in various educational settings, including itinerant teacher, integrated school and special school settings. The subjects were fourth through sixth graders with utmost light perception, most of whom had been visually handicapped since birth. All three groups showed scores somewhat lower than sighted norms. He also found that children in itinerant teacher and integrated settings showed higher social maturity.
score/age appropriate behaviour than those from special school setting suggesting that this result was due to the relative lack of contact by children in special school setting with age appropriate behaviour, and of the greater attention and availability of special help in the special school setting. Presumably this places less requirements on the children to solve their own problems. The integrated school setting provides the visually handicapped child an opportunity for reality testing of adaptive behaviours and coping skills, so necessary to life adjustments (Maron, 1977). Thus McGuinness interesting results are not necessarily a function of the type of school, but rather of type of people in any school, who work with visually handicapped children.

Kennedy Northcott, McCauley and Williams (1976) and Darbyshire (1977) studied on oral-only children in integrated settings have indicated that (a) deaf children show more interactions with deaf children and fewer with hearing children and (b) deaf children show more interactions with teachers than do hearing children.

Fenton & Ethel Cort (1981) conducted a study on physically disabled students to find out the difference between those studying in regular and special school settings. Twenty physically disabled children from mainstreamed transferred from special to regular school setting constituted one group. An equal number of students still in special school for the physically disabled children constituted another group. The two groups were matched with each other with respect to academic achievement on the comprehensive Tests of Basic Skills. After all subjects had completed one year schooling either in special or regular school settings, they were again measured on the Quality of Social Life Scale to see their adjustment to school life. The results of
the study indicated that physically disabled children in regular or mainstreamed school setting showed significantly adjusted to school life.

The important question of the social benefits of mainstreaming, a move advocated by a number of experts Hegarty et al. (1981), stressed on the benefits of integration in terms of social and emotional development of special child. The study specified gains in self-confidence, independence, reduction of untoward and bizarre mannerisms, realistic acceptance of one’s own disability; all increasing the level of acceptability and social adjustment. The integrated setting with sighted peers raises the morale of the visually challenged children seeing themselves on a more realistic way. This facilitates interaction and the challenged child develops a sense of belonging to the school (Dean, 1989) and feeling of participation within a normal life setting.

Wood, Wood, Griffiths, Howard (1982) extensively examined teacher-student conversation in oral-only classrooms in England. They reported that when teachers showed high proportions of questions, children showed very low rates of conversation. Thus a very strong effect was found for teacher style. Deaf children appeared quite passive and only elaborated their own answers 14 percent of the time. Further, they very infrequently asked for clarification or repetition of teacher communications, which appeared to confirm the suspicion that while they are often in doubts about what the teacher had said, they still took a passive linguistic stance. As might be expected in oral-only children, hearing loss was strongly related to the length of child utterances, but intelligence showed no such relationship.
Anita (1982) examined the social interactional skills (which are components of adjustment) of deaf and hearing children in partial mainstream contexts in Grades 1 to 6. Once again the above conclusions were substantiated, of particular interest was Anita’s comparison between children from oral and Total Communication classrooms. First, there were no differences in the rate of interaction between these two groups, second deaf children used less oral communication when in mainstream situations.

While attempts at facilitating interaction in mainstream settings have proven ineffective with young children, Ladd Munson and Miller (1984) reported encouraging findings in a high school integration programme. In this programme 48 secondary level deaf students were integrated over a 3 year period in occupational education courses at local schools. Findings indicated improvement over time in that deaf students engaged in higher rates of social interaction with hearing peers during the 2nd year of participation. Further deaf students received average ratings on peer sociometric measures. Parent and teacher interviews indicate improved self-confidence in 60 % of the cases. However, over one-half on the deaf students still reported difficulty with making hearing friends at school and little or no out-of-school contact with hearing peers was reported. Unfortunately, no information was provided on the communication and/or speech skills of these deaf students. Taken together, these findings suggest mainstreaming success may be much higher in the secondary grades where child maturity leads to a more conducive interpersonal climate. Modifications for programmes involving younger children in
mainstream situations appear to be necessary to facilitate higher rates of social interaction in the elementary school years.

Carey (1986) in an assessment of socio-emotional adjustment in segregated and mainstreamed hearing impaired children found that the mainstreamed children perceived themselves to be more competent in terms of global self-worth and physical and cognitive competence, but not in terms of social competence. These children were also significantly more internal than the segregated children. Finally the mainstreamed children displayed generally more mature problem solving skills than did the segregated children.

Tobin (1987) in his study was expressed clearly by teenagers the benefits of the integrated versus the segregated setting, where two third were of the opinion that the ‘specialist’ schools were more suitable for pupils with severe visual impairments; as the classes were smaller, individual attention received was greater as also the availability of specialist staff and resources. Amongst the disadvantages enumerated were the special schools isolated them from the real sighted world, to the extent that they had insufficient knowledge of the ordinary world, and few friends in the local neighbourhood. This they felt would make adjustment to the real world difficult, on leaving the special school. It has been found that children who had attended both residential and public school programmes showed the best social adjustment, with residential school next. Public school students had the poorest adjustment. This could be the outcome of the positive influence of both the residential and public systems, on those children who had availed both programmes.
Berth et.al. (1996) while investigating some characteristic of mainstreamed hard of hearing students in Sweden a sample of 26 hard of hearing university students in Sweden answered a Questionnaire about their socio-economic status, health, social support, well being, and educational experiences. Students were typically from families of higher socio-economic status than peers; reported more frequent feelings of loneliness, mild depression and anxiety but indicated stronger commitment to their education and greater academic and classroom integration.

Rashmi and Avinash (2008) in a study compared 29 students with visual impairment, all boys in the age range of 14 to 25 years participated. The students were from class IX, X and XI. The participants were residents of Hanuman Poddar Inter College for the blind - the special school for boys with visual impairments, Varanasi, which was purposely selected. The participants included students with total visual loss and partially sighted students. A Self made Questionaire in Braille was used by the investigators. It consisted of 16 items of ‘yes’ or ‘no’ responses type to know their willingness for integrated education with non-disabled students in residential schools. It was found that that 19 out of 29 participants, i.e. 65.5 percent indicated that they would like to study in regular classroom of general schools with non-disabled students in contrast to the study of Norwich (1997) where majority (15 out of 19) of students with moderate learning difficulties indicated lack of confidence in mainstream school. However, 89.66 percent of the participants felt they would face difficulty in studying and understanding subjects in regular classroom.
Venkat Lakshmi, Geetha & Krishna Murthy (2009) in a sample of 140 parents of visually impaired children out of which 70 children attended integrated schools and 70 children attended special residential schools were selected for the study. The Attitude Scale for the parents of visually impaired children was administered. The study revealed that there is a difference in the opinion of the parents of visually impaired children, attending special and integrated school towards the social and emotional behaviour and sibling attitude of visually impaired children. Parents of visually impaired children attending integrated schools are of the opinion that their children have a balanced social and emotional behaviour. They were of the opinion that since the visually impaired children attending integrated schools are day scholars, their interaction begins at home, continues at school and in the community at large, when compared to their counterparts studying in a special school which is residential in nature.

2.3 Studies pertaining to Self-concept of Visually challenged children

The development of self in blind people is not similar to those having normal vision. While the sighted child knows that non-self is vast and more complex than self, the blind child’s direct experience is very limited. He fails to put himself into the position of another person and evaluates himself from the point of view. According to Cutsworth (1950) the problem of ego development in blind people has a dual pattern. First when he develops compensation reaction to show that inadequacy does not exist in him, he grows along the line of compulsive personality. Secondly, he develops a false sense of security by failing to meet life aggressively and it results in hysterical responses which only add conviction to his feeling of inadequacy. Cutsworth writes, “This
dual pattern”, makes the child apparently erratic, inconsistent, and difficult. His social world tends to approve, develop and exploit his compulsive compensations and at the same time to deplore and be baffled by his hysterical responses. There is no general agreement as to whether the Self-concept of individuals who are blind or have low vision differs from that of the sighted. Results from several studies summarized in Morse (1983) vary as to the positive and negative attitudes the blind and visually impaired children and teenagers have towards themselves. Here it is worth noting that all these experiments used different scales in their assessment of Self-concept.

Jervis (1959) conducted a study to compare the Self-concept scores of blind children and youth aged 15 to 19 years with that of comparable sighted children from residential school. Interview and card sorting task were employed as methods to collect the relevant data. On the card sorting task the subjects selected cards containing statements, which be considered applicable to the interview was structured around the series of stimulus and two psychologists rated the response. The results of the study revealed no significant differences on Self-concept measures in either of the two methods of assessment. However most of the blind subjects expressed their concern for the future while most of the sighted subjects were quite sure and positive about their future. He also found that visually impaired youths have either very poor Self-concept, or they overvalued their personal attributes compared to sighted people. He also concluded that there were no significant differences between the blind and the sighted.
Zuhich and Ledwith (1965) compared the Self-concept scores measured on Lipsitt’s Self concept Scale, of sighted boys and girls with the comparable sample of blind students of fourth grade. Each child judged himself or herself how well or poorly adjustments such as friendly, trusted, lazy and jealous applied to them. No significant differences were found between blind and sighted students. However, gender differences showed the girls to possess more positive Self-concept than the boys. The blind child irrespective of gender tended to use the extremes of the scale more frequently than did the sighted.

Scott (1969) analyzed social development in terms of social role, suggesting that the child’s Self-concept is acquired in large part through interactions with other people and depends on the expectations that others have for the child. If they expect the child to behave with limitations that they believe to be characteristic of visually handicapped children, then these limitations will come to be part of the child’s self-concept and will tend to be expressed in the child’s behaviour.

Meighan (1971) administered the Tennessee Self-Concept Scale (TSCS) to a sample of 203 visually handicapped (blind and partially sighted) adolescents aged 14 to 20 years and the results showed significant differences between the self-concept of the blind and that of the people who were not blind. It was also found that no significant differences were observed between the sub-groups of adolescents with visual impairments. However, a study by Williams (1971) compared a sample of blind adolescents using Bill’s High school Index of Adjustment and values produced the opposite results, blind subjects reported significantly higher self-concepts.
Head (1979) in a study using the Tennessee Self-concept Scale compared the self-concept scores of 40 visually handicapped adolescent subjects across three educational settings i.e. residential, resource room and itinerant programmes and found no significant differences on self-concept scores of visually impaired adolescents in educational settings. However, results showed that school placement and visual loss did not affect the strength of subject’s self-concept.

The results were very much similar to the findings of Chapman (1988); Cooley & Ayers (1988); Grolnick & Ryan (1990); King et.al. (1993) found in a number of studies that individuals with disabilities have lower levels of Self-esteem and Self-worth. However, the difference between the two groups of physically disabled namely blind and orthopedically disabled was found very little on Self-concept.

Obiakor (1986) conducted a study to compare the development of self-concept in normally sighted and visually handicapped students over the three groups, i.e. (i) normally sighted tested in a written format, (ii) visually handicapped tested orally by using the general and visually impaired forms of self-assessment inventory. Results indicated that there are only minor differences in the self-concept of the three groups. Since the visually impaired maintained higher scores in some instances, the perceptual notion that visually impaired has low self-concept was not supported. Self-concept is area specific in nature for normally sighted and visually impaired students at different grade levels.

Beaty (1991 &1992) investigated the potential effect of vision loss in adolescents’ self perception. She found that visually impaired adolescents differed significantly in the level of self-concept from their
normal sighted partners. Out of the five sub scale scores (Physical self, Personal self, Moral/ Ethical self, Social self, and Family self), the group means for the visually impaired subjects were lower than those of the sighted partners on all of the sub-scales as well as the Total Positive Scale. Furthermore, self-concept of visually adolescents was significantly lower than their sighted partners in Moral/ Ethical self, Family self and the Total Positive score on the Tennessee Self-concept Scale. Thus, it was concluded that visual impairments had an effect on Self-concept.


Singh & Hellode (1993) in a study of comparison between blind and normal students on their Self-concept found the former to be at par with the later on all dimensions of Self-concept. The sample comprised of 30 blind (by birth) and 30 normal students, aged 8 to 16 years studying in IV to VIII classes; Self-concept Questionaire by Saraswat was used and data were analysed by employing ANOVA.

Shiela Dorothy (1994) in a study with teenage visually impaired adolescent learners compared their self-concept scores across educational placement in public and residential schools. The target population was those adolescent learners with a primary functional visual impairment in the age range of 12 to 18 years and who were engaged in an academic instructional curriculum. The two groups were constructed one comprising of 17 students enrolled in residential school and the second group comprised 15 students who were receiving support services of the itinerant teachers. To assess the self-concept of subjects Piers Harris Children’s Self-concept Scale in the
primary learning medium was administered. The sample consisted of high proportion of males and those with vision loss in birth. The data were analysed by employing two-tailed test. Results revealed no significant differences on self-concept scores of the two groups.

Sacks (1996) found that individuals with low vision perceive themselves more negative, expressing feelings of isolation and unjust fault when compared to the blind or sighted.

The studies on self-concept and self-esteem of sighted and blind people by Alexander (1996), Peirce and Wardle (1996); adults by Fok and Fung (2004); and on adolescents by Kumar and Meena (1997), Huurre et.al (1999), Griffin - Shirley and Nes (2005), Lopez-Justicia et.al., (2000, 2001, 2005), Lifshitz et.al., (2007) and have suggested that visually impaired children are not at more risk of developing low Self-concept than sighted counterparts. Comparative studies of blind and sighted adolescents found no differences in Self-concept and established that the relations with friends contribute significantly to the improvement of visually impaired young people’s Self-concept.

Johanne and Berit (2000) in study compared 104 French and Norwegian blind adolescents, aged 13 to 16 years of age with 84 sighted adolescents on their physical activity, Self-concept and global self worth (self esteem) across different educational settings. The research found that there was no significant difference between the blind Norwegian Integrated and French Special school students in physical activity, skills and competence, physical and social self-concept and global self worth. Also no significant differences were found in the physical and social self and global self worth of blind youth attending different types of schools. Different types of school
provisions did not have any impact on the physical, social self-concept and global self worth of blind students.

Lopez-Justicia et al. (2001) conducted several studies to determine whether Spanish children and adolescents with congenital low vision had lower self-concepts than did their sighted peers. They found that children between 4 to 11 years of age with low vision tended to score lower on all dimensions of self-concept when compared to the sighted children. No significant differences were found in terms of family, physical appearance, self worth and security. This lack of significance appears to be an indicator that these children are receiving and value the support from their family classroom and peer networks. Finally, results for the adolescent aged 12 to 17 group revealed significant differences with the sighted only in terms of physical self-concept with individuals with low vision scoring considerably lower than their sighted counterparts. These results showed that the individuals pay more attention to their physical appearance.

Maite Garaigordobil and Elena Bernaras (2009) administered The Rosenberg Self-esteem Scale (1965); The Revised Symptom Checklist (SCL-90-R; Derogatis; 1983) and NEO Five-Factor Costa and Mac Crae (1992); The Adult and Adolescent Self-concept Adjective Checklist (LAEA; Garaigordobil, 2008) to 90 visually impaired adolescents on their self-concept and self-esteem between 12-17 years of age. The results showed that no statistically significant differences were found either in self-concept or in self-esteem between the adolescents with and without visual impairments.
2.4 Studies pertaining to Self-concept of Hearing challenged children

Shelsky (1957) indicated that the type of disability differently affects the self-concept. Blanton and Nunnally (1964) used a semantic differential to examine attitudes towards the self and reported that deaf children evaluated themselves; more poorly and as less well adjusted than did hearing evaluation and perception between day and residential deaf students and hearing children aged 9 to 12 using drawings in a sociometric choice paradigm. Craig (1965) reported that deaf children in both setting gave more positive self-evaluations than did the hearing students. One might interpret these results as indicating high self-esteem, unrealistic, egocentric perceptions, or attempts to make a positive impression on the examiner.

Smiths (1964) assessed the self-concepts of a sample of disabled high school students and concluded that severely disabled adolescents have significantly lower self-concept scores than adolescents whose physical disabilities were mild, with severely disabled females most negatively affected. Meissner (1966) also studied disabled adolescents, but her findings were not as clear cut as those of Smiths; however, she did find that severely disabled females had significantly lower self-concepts than other females.

Meadow (1969) developed a “cartoon test” with both written adjectives and sign illustrations to compare the self-concept of residential school students with deaf versus hearing parents. Self-concept was positively related to family climate, school achievement, and communicative ability. Schlesinger and Meadow (1972) compared these samples to day school of children with hearing parents and found
the latter group to be similar to the residential students with hearing parents.

Sussman (1973) found a significant negative relationship between self-esteem and the perception by deaf students that others had negative attitudes towards deafness. This study illustrates how the effects of the perceptions of stigma in the ecological context can directly affect self-esteem.

Kelliher (1976), using a modified version of the Coopersmith Scale reported that deaf adolescents showed lower self-esteem than matched hearing controls. Within group comparison of oral versus Total Communication users indicated only one difference among children with profound hearing loss. Total Communication children had higher scores on the school system subscale compared to oral children.

Reich, Hambleton & Houldin (1977) examined differences among students using spoken communication who attended for programme varying in amount of integration fully mainstreamed, itinerant, secondary students in a resource programme, and elementary students in group integration. At the elementary and secondary levels, there were no significant differences in self concept among the students in mainstreamed, itinerant and group integration. However, as the researcher, pointed out, the outcomes cannot directly be compared because of differences in personal and social characteristics among the groups in particular, degree of student hearing loss (the mainstream and itinerant students had considerably more hearing than those in group integration.

Sarfaty and Katz (1978) administered the Tennessee Self-concept Scale to 48 eighth and ninth grade hearing handicapped children in the
age group of 14 to 15 years old. The subjects were being educated in three different environments: a special school, a special class in a regular school, and in regular schools in integrated programme. Results indicated that students in the group integration (special class) setting had the highest scores; the next highest were those of the students in individual integration settings; the special school students had by far the lowest scores. It is also found that there was no difference between the three groups on self-acceptance, and all groups scored significantly differently from and worse than a group of normally hearing peers.

Ndurumo (1980) conducted a study to investigate the effects of mainstreaming of hearing impaired high school students’ self-concept and their perception of hearing people by administering Tennessee self-concept scale over 25 fully mainstreamed hearing impaired students and 36 hearing impaired students enrolled in residential school for the deaf. From this it is revealed that (i) Hearing impaired students both in mainstreamed and residential schools have negative self-concept compared to the normal general hearing population was confirmed. (ii) Mainstreamed hearing impaired students have superior self-concept compared to non-mainstreamed students and the time spent in the mainstream programme enhances positive self-concept was not confirmed although data were on the predicted direction. (iii) Time spent in the mainstream programme fosters positive perception of hearing people by mainstreamed hearing impaired students was not confirmed. (iv) Mainstreamed students with superior self-concepts also have positive attitudes towards hearing people were not confirmed. (v) Self-concept correlates positively with demographic variables confirmed for age, grade, placement, stage of onset of hearing
impairment, and degree of hearing loss, but was not confirmed for sex, educational background and hearing status of friend.

Meadow (1980) stated that the deaf seem to perceive themselves as lacking in comparison with the hearing ones. This results in low self-concept in deaf children; there is evidence that deaf children of hearing peers have lower self-esteem than deaf children of deaf parents.

Schein (1985) found that deaf children showed a higher degree of emotional instability, neuroticism and maladjustments than hearing children. The barriers of deafness and limited language appear to increase a sense of frustration, loneliness and despair.

Marsh (1986) conducted the Self-Description Questionnaire-I, a multidimensional measure, was linguistically modified and sign language videos were produced for those using sig communication. In the main study, the participants were deaf secondary students’ from three school settings: Segregated (institutional) Congregated (a new facility housing the previously segregated school for the deaf and a hard of hearing secondary school) and resource programme (in mainstream schools, providing both special class instruction and opportunities for integration). Examining dimensions of Self Concept, the results identified academic advantages in attending resource programmes and social advantages in attending segregated settings. Overall, deaf students who were integrated with hearing students had better self perceptions of reading ability than those in special classes. Additional analysis with subsamples of deaf students found no significant differences between those using spoken and sign language in any dimension of Self-Concept.
For many years, the literature on Self concept has identified the importance of social comparison on the development of self concept. Cooley (1902); Mead (1934); Sullivan (1953); Harter (1986) based on this literature and the previous research on Self-concept of deaf students in different school settings, students in segregated setting would have more positive peer relations and academic self concepts than the students in the congregated and resource settings. Contrary to expectations, the only significant differences identified among dimensions of self concept among the three school setting groups were in academic areas. The significant differences were between the resource and the congregate settings, the two most similar setting. In order to rule at the effects degree of integration might have on self concept, subsequent analyses found no significant differences in Self concept dimensions among groups of students integrated for III - VIII classes. Therefore the differences among school settings appeared to be specifically a function of school setting, rather than a degree of integration.

Warren and Hasenstab (1986) examined 49 deaf participants and their family environments and found significant relationships between the development of the Self concept and certain educational variables such as rejection, overprotection and discipline.

Ramiah (1990) showed that there was significant relationship between parental involvement and Self concept of the hearing impaired children that the more parental involvement the better Self concept.

The studies which have been conducted in the area of hearing impaired have shown that deaf children did not differ from normal
children. Swarsha (1990) studied the differences between normal and deaf children on perceptions of parental behaviour, perspective taking ability and cognitive functioning. The major findings are that the deaf children did not differ from normal children in perceptions of parental behaviour and perspective taking abilities.

Research conducted on the self-concept of deaf and hard of hearing students and their hearing peers in regular settings has shown inconsistent results. On the one hand, research studied by Loeb and Sarigiani (1986); Leigh & Stinson, (1991), Maxon, Brackett & Van Den Berg (1991) reported that deaf and hard of hearing impaired students have scored lower Self-concept in comparison to their hearing peers, whereas (Koelle, Convey, 1982; Cates, 1991) found no significant differences between the groups.

Jin-Pang and Kewan (1991) compared 30 children aged 9 to 12 with severe to profound learning deficits who were integrated in regular public school, with a two peer group, one from a normal hearing school and one from a special school for the deaf on non-verbal IQ, Self concept and social competence. All three groups of children completed both Raven’s Progressive Matrices and Piers Harris Children’s Self concept Scale. The results of the study revealed that the integrated students showed deficits in self-concept dimensions against the normal hearing peers in relative to special school hearing impaired students integrated children achieved higher scores on global Self esteem.

Shaffer (1991) studied the effect of mainstreaming of hearing challenged children on their Self concept, 49 moderate to severely profound and profoundly hearing challenged children. Analysing the
data by using three way of analysis of variance as statistical mode, the researcher found no significant interaction between amount of mainstreaming and Self concept with fully mainstreamed profoundly hearing impaired students significantly lower than partially mainstreamed profoundly hearing impaired and lower than both the partially or fully mainstreamed students with moderate to severe loss. Profoundly hearing impaired children’s self concept was found to be negatively impacted by mainstreaming. Students with moderate to severe hearing impaired found higher Self concepts when they were more fully mainstreamed. It also results that benefits of mainstreaming in terms of promotion of positive Self concept may be impacted by the extent of impairment.

Desselle (1994) conducted a study to determine the effect of parental attitudes and family communication patterns have on the Self concept of a deaf child by administering the modified self-esteem inventory over deaf students at the Southern residential school ranging in age 13 to 19. Analysis of the data revealed that there is a positive relationship between the family communication method and the deaf child’s self esteem such that parents who use total communication (speech, finger spelling, and sign) have children whose self-esteem scores are higher than parents who use only oral method of communication. No significant differences were found between the four categories of parental attitude towards child rearing (protective, indulgent, disciplinary and rejecting) and the child’s self-esteem. A positive relationship was found between the student’s self esteem and reading level. No significant relationship was found between the
student’s self-esteem score and the number of years at the residential school.

Wright (1982); Powers (1990); Cates (1991); Cambra, (1994); Martinez and Silvestre (1996); found that there is a group of studies that have researched the Self concept of deaf students, using the development of the same in hearing students as the reference point. Some of these did not suggest any major differences between the Self esteem of deaf adolescents and that of hearing ones. However, Ndurumo (1985); Cambra and Silvestre (2003) suggested that deaf students have difficulties creating a positive Self concept of themselves.

Gupta & Sanwal (2000) compared the attitudes of 25 teachers who had dealt with speech and hearing impaired students and those 20 teachers who had never dealt with, these children. The study was conducted in and around the campus of G. B. Pant University of Agriculture and Technology, Pant Nagar. Among many other questions was included the question on enhancing Self concept and whether it was an important goal special education the ways in which could be enhanced. All participant teachers reported it to be important goals and suggested that engaging in practical activities that provide a warm environment could enhance the Self concept of hearing impaired children.

Majda Schmidt and Branka Cagran (2008) University of Maribori, in an evaluative case study includes students from two 7th grade classes from a primary school (n=42). In one of the classes, the hearing pupils (n=17), three pupils with a hearing impairment. Out of these two hard of hearing boys, a severe hearing impairment was identified (70-90 dB), and a girl of profound hearing impairment (above 90 dB); in all three
students the loss of hearing appeared in the pre-natal period. Also an ordinary regular class, with no integrated students (n=22) from another class by using a scale of Alternative Appraisals, Self-concept Scale by the authors of Cambra and Silvestre (2003). The main findings were: (i) Compared to their hearing peers, integrated learners have a lower academic and social self-concept, as well as general self-concept, but a higher physical self-concept. (ii) There are differences among the students with a hearing impairment in both individual dimensions and general self-concept. (iii) There are no statistically significant differences between the class of integrated hearing impaired students, on the one hand, and the class without them, on the other; however there is a noticeable advantage among students from the class, with integrated learners over the other class, which served as control group in all three individual dimensions as well as in general self-concept.

2.5 Studies pertaining to Adjustment of Visually challenged children

It is mainly through the visual modality that we receive accurate and gestalt impressions of our environment which assist us in orienting ourselves to the environment. As noted by Father Caroll (1961) loss of vision induces a variety of adjustment problems and personality deterrants. It is also pointed out that blindness in an individual exerts a profound effect on his psyche.

Human beings differ in their personalities due to their interaction with different social environments. Because of their different experiences the programming of the central nerve system is unique for each individual. It has been held that blind children show peculiar mannerism after termed as “blindism” which arouses negative feelings in the sighted.
Such stigma however impedes social acceptance and integration of the blind. Due to the belief and prejudices held about blindness, the blind are subjected to a different social environment which is likely to be reflected in their personality. The blind person is dependent on the sighted for a number of information in day to day living. By nature of his dependency he develops the habits of subordination in his relations. He is deprived of various alternatives available to sighted in subordinate roles, thus resorts to compliance (Scott, 1976). Blind children in local public school programmes were perceived to be more mobile than those in residential settings (Blackhurst and Marks, 1977). On the other hand, graduates of public school programmes had more difficulties in personal and home management – tasks, than graduates of residential schools (Hapeman, 1977). Freeman et.al (1991) found that in many cases individual with low vision tend to reject services that would be beneficial because they did not to be labeled as blind.

Brown (1939) found a greater neurotic tendency in the blind. Studies by Hubbard (1945), Hastings (1947) and Malhotra (1979) indicated that the blind were more withdrawn and maladjusted than the sighted.

Zahran (1965) in a study of personality differences between blind and sighted children which is divided between those who contend that blindness leads to compensatory behaviour which may be accompanied by introversion and even maladjustment, and those who find that the process of adjustment in blind persons is not significantly different from that of the sighted with regard to basic personality variables.
Jones, Gottfried and Owens (1966) related to the question of advantages of mainstreaming is the crucial factor of acceptance by other children. It appears that in a sample of high school settings, the blind hold in general a position in the middle of the acceptance continuum. The partially sighted generally ranked higher. Any degree of vision has been found to result in a higher level of social development in any kind of programme (Lowenfield, 1974). This brings up the important questions whether the degree of visual impairment affects adjustments irrespective of type of setting or provision.

Sighted children in mainstream settings feel more discomfort in confronting relationships with totally blind children (Jones, Lavine and Sheel, 1972). Peer group interaction may also be hindered due to the visually impaired child’s inability to see and thus imitate his peers. His lack of vision may prevent him from learning what is accepted by the peer group. Generally, degree of vision has been found to result in a higher level of social development (Lairy and Harrison – Covello 1973). Yet at times the partially sighted face problems due to heir ‘undefined’ role by their peer group. This results in the sighted population expecting normal behaviour from those with low vision, which type may not be able to achieve causing maladjustment (Cowen et.al. 1961 & Lowenfield, 1974). The blind adolescent faces more difficulties in areas related to sex, dating, and participation in valued school activities; giving rise to feelings of frustration, anxiety and insecurity (Lowenfield, 1974). This probably causes more social problems for the totally blind than those who are partially sighted (Jamieson et al. 1977).

Schindele (1974) used the Self-concept and Adjustment Scores to compare the social adjustment of fifth and sixth grade visually
impaired and sighted children. The visually impaired children were from residential and integrated schools. There were no overall differences in social adjustment between the residential and integrated schools of visually impaired samples, or between visually impaired sample and the sighted group. However, closer analysis revealed that the residential school group showed a negative relationship between adjustment and age, (that is the older children were less well adjusted), while the relationship was positive for the integrated school visually impaired groups. Hence Schindele suggested that: While the social adjustment of visually handicapped students in regular (integrated) schools has developed in a realistic surrounding, the social development of the visually handicapped in a residential school is being brought up in a sheltered and unrealistic environment. In this case the good social adjustment of these children might be seriously affected as they grow older and especially when they have to leave the residential school.

Orkan Lecka (1980) in a study compared the blind adolescent’s adjustment to disability across two different educational settings: integrated and special school setting. The Disability Acceptance Scale and the Blind Basic Rehabilitation - rating bank were used to collect data. Results of the study revealed that the blind students studying in normal high schools along with the sighted peers (integrated setting) had higher level of adjustment than those in special school setting.

Kemp (1981) carried out a study concerned with the social and psychological aspects of blindness, particularly blindness in children, personal and social adjustment to blindness, and blind adults, attitudes towards blindness and communication. The study suggested that many
of the problems “in communication between blind and sighted people may be caused by differences in social cues, with blind people shown to be more likely to interrupt and to use fewer gestures than their sighted peers.

Jaysree (1982) has studied manneristic behaviour of visually handicapped and sighted children reports that manneristic behaviour among visually handicapped children is sometimes considered to be a device for releasing tension arising from anxiety and frustration. Using a test based on 17 mannerisms, she infers that even sighted children also exhibit such behaviour in certain situations and that manneristic behaviour varies in different situations. Certain mannerisms tend to be more with visually handicapped children, yet there did not exist a significant difference in this respect between sighted and visually handicapped children.

Morse (1983) reviewed several studies on the psychological adjustment of children with low vision. He concluded that children with low vision tend to be more unsettled by the limits of their vision, when compared to those handicaps are more severe and that their parents seem to be less understanding of the disability than those of blind children.

Spencer (1984) Bishop and Flaine (1986) also attempted to identify the components of successful mainstreaming programmes for visually handicapped students and the major variables most likely to contribute to this success by conducting a study 304 students from 8 districts of USA participated in this study. Respondents also included visually handicapped classroom teachers, school principals, and parents. The data was collected through a three part questionnaire;
original statements accumulated and evaluated opinions through a rank ordering procedure. The data was analysed by frequencies and percentages, constructing contingency tables and chi square statistic. On the basis of study 74 factors associated with successful mainstreaming for visually handicapped pupils were identified. Among the most highly valued components were accepting, flexible classroom teacher, peer acceptance and interaction, available support personnel, adequacy of special supplies/equipment, communication between home or school, the positive attitude of the school principal, the family support/acceptance. Desirable characteristics of the visually handicapped pupils included; “inner drive”, emotional stability, independence skills and academic achievement.

Tearre (1985) in a study conducted on 23 partial sighted and blind students examined their behavioural adjustment measured on Child Behaviour Checklist (CBC) and observed that behavioural problems among blind students were as much influenced by cognitive ability as by visual functioning.

Pandey (1985) in a study out of 18 schools for blind children in Uttar Pradesh, two schools were randomly chosen for selecting the sample. A sample of 40 students were selected out of 32 males, 16 belonged to congenitally blind and 16 were post-natally blind and 4 were post natally blind. The tools of Ego-strength Scale and an adaptation of Barron’s ES Scale by S.Q Husan, Prolonged Deprivation Scale (PDS; Mishra & Tripathi), Adjustment Inventory – the adapted version of Eysenck’s and Maudsley Personality Inventory (MPI; Jalota & Kapoor (1965). The t-ratios were computed in order to determine the differences between various pairs of groups. The major findings were:
(1) There was no significant difference in the pattern of affectional deprivation between Congenitally Blind Children (CBC) and Postnatally Blind Children (PBC).

(2) It was also found that blind children had poor ego-strength and poor adjustment. Emotionally they appeared immature and hence there was need for their rehabilitation.

The results of the study indicate that among other factors social-emotional aspects were viewed by the respondents prominently significant for the success of mainstreaming. The thrust of emphasis in the above mentioned articles has been on the development of right attitudes, acquiring social skills, and appropriate behaviours and development of healthy Self concept and Self esteem.

Ammerman et.al (1986) dealt with the psychological adjustment of children with visual impairment. It was suggested that a number of mediating variables influence development in visually handicapped children, including etiology of vision loss, “extent of impairment”, and “residential setting”. It was suggested that although visual impairment places children and adolescents at high risk of “psychological dysfunction”, it does not by itself necessarily cause “maladjustment”.

Rai (1988) of Garhwal University found that blind students were less adjusted on the dimensions of family relationships, emotional stability, and adjustment to reality, mood and conformity. He also found that the adjustment of blind students correlated with interaction of family members, interaction with the sighted, acceptance of blindness and the setting of education. The blind students who had more interaction with the sighted and family members were found comparatively well adjusted.
Banerjee (1988) of Visva Bharati University study the problem of adjustment of visually handicapped school going adolescents. The sample comprised visually handicapped adolescents in the age-group of 12-18 years, who belonged to rural and urban locals. They were selected from three types of schools of West Bengal. The tools used included an Adjustment Inventory developed by the researcher and a personal data sheet. The collected data were evaluated using a three point scale. The distribution of the two groups, Visually Handicapped (VH) and Visually Normal (VN), according to the intensity of total adjustment was found to be significant. It was also found that the group of VH adolescents varies with age of onset of the handicap in their adjustment to the interacting environment.

Sharma Sunita (1988) study centres around the problems of the visually handicapped who was in India, constitute about one third of the blind population of the world and are generally exploited and left out of the mainstream of national progress. It revealed that loss of sight does not produce any special behaviour among the blind. It also found that maladjustment in society, family, and specially in school, and unsuitable school settings are the most prominent factors which lead to academic retardation of the visually handicapped. The study also revealed that after completing pre-primary or primary education at special institutions, emphasis should be laid on placing the visually handicapped in integrated educational settings.

MacCuspie (1990) studied the Social Acceptance and Interaction of Integrated Visually Impaired children. It was the conclusion of the study that basic assumption, about school culture is quite often incompatible with the process of social integration of visually impaired
children. This leads to hostile social environment towards these students who stay at the fringe of peer interaction. The study also suggested that, an initiation of programmes to alter school culture is to facilitate social integration of disabled children.

Meighan (1971), Beaty (1991 & 1992) have found that visual impairment could be the cause of the feeling of incapacity and inferiority, which may be reflected in a lack of social acceptance, low academic results, physical incapacity and poor social adjustment.

Patricia (1992) on the basis of a multistate case study employing participant observation, interviews, and the analysis of relevant documents as the source of data concluded that “the basic assumptions of school culture are challenged by and frequently incompatible with the process of social integration of visually impaired. This results in a hostile social environment for these visually impaired one where the visually impaired child is ‘on the fringe’ of routine peer interaction. Several aspects of school culture which appeared to pose barriers to the social acceptance of visually impaired students are also detrimental to the social acceptance of many other students.

Paranjape (1992) conducted a study on resource room versus special school provision on visually impaired child’s personal adjustment and found that type of school provision did affect the personal adjustment of visually impaired children, to a certain extent. Visually impaired children in special school settings were found to have more problems on personal, social and family adjustment, than those in resource room settings. She also found significant correlation between the type of school provision, personal and family adjustment
as well as day dreaming. A strong association was found between personal and family adjustment.

Rosenblum (1998) in a descriptive study of friendship pattern between 40 adolescents with visual impairment and their 23 best friends found that visual impaired adolescents were successful in establishing and maintaining reciprocal intimate best friendship. The friends engaged in activities together that were typical of adolescents without disabilities. Although some participants stated that the usual impairment affected the activities the friends could do together, they also noted that these limitations did not have a strong negative impact on their friendship.

Ishtiaq Haider (1998) in a study of visually challenged children’s psychological characteristics and their academic achievement found some significant differences on some aspects of these variables across integrated and residential educational programme. In his study, it was found that 55% visually challenged children from residential schools were more educationally adjusted against 31% from the integrated settings. However, the two groups from residential and integrated schools were not found to be significantly different in terms of educational adjustment so with regard to emotional adjustment where only marginal difference was found.

Huurre & Aro (1998) compared 54 visually impaired adolescents with sighted individuals and reported that there was no significant difference between the two groups in terms of frequency of depression. The researchers reported that the people with visually impaired had fewer friends, attended fewer social activities and they suggested that the restricted social activity of visually impaired
individuals might be related to the negative attitudes of other people toward physical disabilities or that the disabled may experience isolation as a result of feeling different due to their impairment.

Prabha (1999) found blind students to be higher on emotional adjustment, low on social and average on educational adjustment. These students were found to be higher on personality adjustment.

Yadav (2000) conducted a study on socio-emotional school climate in relation to adjustment among 32 visually impaired and 32 sighted students. Sinha and Bargava Socio-Emotional School Climate Inventory and Asthana's Adjustment Inventory were administered on the sample. It was revealed that visually impaired had more favourable perception of their socio-emotional school climate and also showed better adjustment to school climate as compared to sighted students.

The general conclusion from many studies indicates that the social competence of visually challenged children develops differently from that of sighted children. Several factors are undoubtedly involved in this pattern. Vision itself is an important variable. Since vision serves as a very useful source of detailed information, it is not surprisingly to find that children with partial vision often shows less severe social developmental lags than totally blind children. For example Maxfield and Field (1942) found that a group of partially sighted children exceeded the development of an age matched group of totally blind children. The pattern of differences was interesting. The results suggest that the (totally) blind children in this study tend to be more docile, have less initiative, are less active and outgoing, are more introverted, and possibly more cooperative than the partially seeing children. Lairy and Harrison-Covello (1973) also found a disproportionately high
number of partially sighted children in their group whose developmental patterns were most nearly like sighted children. The highly competent partially sighted children tended to make more use of their residual vision than less competent children with equivalent vision. Bauman (1973), using the Over-Brook Social Competency Scale, found that children with some useful vision developed many skills significantly earlier than totally blind children. Thus partial vision is an important factor in the development of social skills. At the same time, it is only a potential positive factor whose use must be encouraged in order for the advantages to occur.

2.6 Studies pertaining to Adjustment of Hearing challenged children

In the words of Helen Keller, “the problem of deafness are deeper and more complex, if not more important, than those of blindness. Deafness is a much more misfortune. It means the loss of the most vital stimulus – the sound of the voice – that brings joys, sets thoughts astir, and keeps up in the intellectual company of man”.

Sound is the basis of human speech. The basic indications of the language are sound system. A child who is born deaf or becomes deaf shortly after birth finds it extremely difficult to speak. He is thus a citizen of the silent world, segregated from the world of sound, separated from all other normal human beings in society.

A deaf child, however, does possess the right intellect and intelligence to adjust in the society. Since he lacks the ability to imitate the voices of others, his imitation is limited to an observation of the facial movements of a speaker or to the study, through eyes and touch, of the movements of his own throat, lips and tongue in attempting
speech. The struggle to overcome these handicaps tries the teacher’s patience as well as that of the learner.

Parents also have a crucial role in setting the stage for good sibling relationships. They must not show favouritism toward any of their children. Although they may enjoy different activities with their individual children, they should not give their attention preferentially to any single child. In particular, parents must avoid making comparisons among their children, and instead emphasize each child’s individual strengths. All children will benefit when parents provide experiences and delegate responsibilities in accordance with each child’s developmental level and needs.

Adjusting to the child’s challengeness is difficult but Kogan (1980) has shown that parents can learn and use techniques for interacting with their child in ways that promote an adaptive relationship. General guidelines for parents in nurturing optimum development include realistically accepting the child, including abilities and disabilities. Parents should be sympathetic but must encourage independence in order to enhance the child’s self-esteem and promote his or her success in the “real” world.

Each parent and any other members of the family must make an adjustment to new realities that are thrust upon them. Deaf parents are more likely to accept a deaf child and to include the child as a contributing member of the family than parents who are not deaf themselves. Since most deaf children are born to hearing parents, the problem of acceptance is one that affects most deaf children.

It is learnt that the effects of deafness will not be the same for the deaf child who is left in isolation from the affairs of a family.
comprised of hearing persons as it is for the deaf child whose family is
deaf or whose hearing family learns to communicate manually so that
the deaf child can be included. The relation of the deaf child to hearing
siblings is also an important consideration.

Brunschwig (1936) experimented with adjustment schedules
constructed for hearing children and concluded that they were
unsatisfactory for the deaf because of the great language handicap of
the deaf. She constructed an Adjustment Inventory especially for the
deaf. When this inventory was used to compare deaf and hearing
children of the same age, she found the deaf only slightly below the
hearing and concluded that deaf school children feel almost as well
adjusted as hearing school children.

Pintner and Brunschwig (1936) found that the deaf child in
families possessing no other deaf members showed lower adjustment
than such children from families containing other deaf members. One
interpretation of this finding credits the deaf adults with better
understanding of the deaf child, thereby facilitating his ability to adjust.

Pintner and Brunschwig (1937) used the same adjustment
inventory to compare children in four schools for the deaf taught by
different methods of instruction and found that manual pupils scored
lowest, but there was no difference in adjustment score between
pupils using the oral and manual method. They also found that
children who came from families where there were no deaf individuals
made the poorest adjustment scores.

Pintner (1942) reported on a general adjustment test and on a
personality inventory for the hard of hearing. He found that slight loss
of hearing seemed to have no effect upon reported feelings of
adjustment, but as hearing loss increased the child tended to check more items indicating less desirable adjustment.

Schlesinger and Meadow (1972) have observed that, in contrast to mothers of hearing children, mothers of deaf children give more constant supervision in order to protect them from accidents and they rely more on physical punishment as a disciplinary technique. They also admitted to feelings of frustration because of problems in communication.

Altman (1973) found that mothers of more linguistically competent oral deaf children, showed more warmth, positive affect and pressure on the child to perform than did those of less competent children.

Wedell-Monning and Lumley (1980) observed six orally trained deaf children and matched controls. They found that mothers of the deaf children were more dominant while their children showed fewer spontaneous attempts to interact and less independent play.

Peer acceptance is one of the components or domain of social acceptance. It is often thought that friendship is a result or product of one’s social skills. The view of peer relationship is reasonable, in that one’s social reputation and quality of social relations are in great measures as result of how effectively one interacts socially with peers.

In this study, deaf students stated that, they found it more difficult to adjust themselves with hearing peers of their own ages than to do so with deaf children. From the reports of deaf student participants in the study, it was also found out that many of the pre-lingual deaf students faced social problems with their peers. As they explained, there was a big communication gap between the hearing
peers. They also indicated that hearing peers tended to take the first position and wanted to be dominant over the deaf ones. They assumed that deaf children were inferior in many respects to the hearing ones and hence, explained deaf students; their hearing peers looked them down.

Vandell and George (1981) carefully examined the quality of interaction between pairs of deaf and hearing preschoolers. They reported that hearing children were more likely to reject the deaf child’s attempts to interact (over 30% of initiations were rejected), while deaf children seldom rejected hearing children’s initiations. Hearing children were also unlikely to modify initiation continuing to talk to deaf children with little use of gestures, touching signs or use of combined modalities. Arnold and Trembley (1979) reported similar findings in a classroom context.

Related to this study, Elser (1959) and Blood (1983) as cited in Sikonen (1994) found that the hearing children apply mainly negative attitudes to the deaf children. Kennedy and Bruininks (1974) cited in Sikonen (1994), however did not find any difference between the social acceptance of the hearing children compared to that of their impaired peers when integrated in regular classrooms. Lane (1987) as cited in Sikonen (1994) explained that hearing persons feel they have known better the needs of the deaf than the deaf themselves. In another study deaf children complained of being teased by their hearing peers (Cole and Edelman, 1991) cited in Sikonen (1994).

Capelli & Colleagues (1995) explores the social development of children with a hearing loss through the measurement of specific psychological factors, such as social status and popularity among peers.
23 deaf children were matched with 23 hearing children all of whom completed a series of sociometric assessments designed to determine the children’s affective knowledge, social anxiety and self-perception. The study found that the deaf children scored significantly lower on ratings of like ability and social preference, and perceived themselves as less socially accepted, as compared to their peers with normal hearing.

Whitmire, Kluwin (1996) cited in Felekech (2000) indicated the deafness has negative impacts on the smooth relationship and social development of the deaf. They found out that deaf students might have positive perceptions about their relationships with other deaf peers than about with their hearing peers.

Catherine et.al (1972) in a study on the school attainments the school attainments of 7 year old from 1958 cohort of 11, 276 children and found that, three groups were distinguished-moderate bilateral, severe unilateral and severe bilateral hearing loss. Even in the first group scholastic attainment was reduced, with speech difficulty and poor oral ability and clumsiness. In the severe group there did the teachers rate greater maladjustment on severe bilateral hearing loss children.

Terry and Rath (1974) in a case study on an investigator group of ten, 10 to 12 year old hard of hearing children integrated into a normal public school for a year and found that they exhibit similar personal space to that of normal children. Another group of 10 hard of hearing children who attended a special institutional school for the deaf exhibited greater interaction distances under varying dyadic interactions with a normal person.
Conner (1976) conducted longitudinal study of deaf children’s development and adjustment, at the Lexington school by the deaf. The data replicate previous findings that deaf children of deaf parents perform better than deaf children of hearing parents in a variety of tasks, including those requiring English language skills. It was found that the deaf parents were warmer and the initial flow of conservation between the deaf mothers and their deaf children was easier.

Reich, Hambleton and Houldin (1977) studied the effects of mainstreaming over time. They found that while integration is beneficial to the academic and linguistic development of the deaf student personal and social problems may increase. Similarly, Ladd, Monson and Miller (1984) indicated that structured activities to support interaction and length of time in the mainstream settings are both important to the successful social and emotional accommodation of mainstreamed deaf students.

In summary, the research to date generally indicates that deaf students in mainstream classes have suffered the personal and social adjustment, especially over time. In particular, the research suggest that meaningful social interactions and friendships between deaf and hearing students are difficult to achieve, even in settings in where integration is an acknowledged goal.

Meadow (1983) also stated that deaf children tend to exhibit characteristics of egocentricity, absence of inner compulsivity, suggestibility, and social ad behavioural difficulties. Personality inventories have also consistently shown that deaf children have more adjustment problem than hearing children.
Stinson (1984) in a study on motivation in integrated educational settings for hearing impaired students found out those normally hearing students in classroom with different motivational orientations. In this study, advantages and disadvantages of classroom with autonomous, competitive, co-operative and intrinsic motivational orientations are identified. He found that low self esteem, less developed senses of personal responsibility, and fear of rejections by peers in competitive situations are cited as potential reasons for the difficulties of hearing impaired students under different orientations.

Mertens (1986) in a study included open ended, written responses by deaf students as well as a following discussion of responses. Her findings indicated that residential school students are more positive about their high school experience than their peers from the mainstream. In her discussion of findings, she concludes that “the pains expressed by the students in the mainstream settings cannot be ignored” and recommends further research to document the nature of the social experiences of hearing impaired high school youth with a larger and more representative sample.

Kluwin and Stinson (1993) compared mainstreamed deaf students with deaf students in separate classes and reported that the separate class students were less socially mature than the mainstreamed deaf students.

Bindu (1993) conducted a study on sample of 645 students including 323 hearing impairment and 322 normal students on their Self concept, social adjustment, personal adjustment and socio-personal adjustment of the subjects were measured. The study indicated significant differences in the mean scores of social
adjustment, personal adjustment and socio-personal adjustment between hearing impaired and normal students were noticed for the total sample and relevant sub-samples.

Milking & Hastings (1975) cited in Sikkonnon (1994) found that deaf children also show a higher degree of emotional instability, neuroticism maladjustment than hearing children. The barriers of deafness and limited language appear to increase a sense of frustration, loneliness, helplessness and despair.

Antia Shirin and Kreimeyer (1996) examined the effects of two interventions namely social skills and integrated activities on the peer social interaction on 105 children aged 3 to 11 with and without hearing impairments. The integrated activities intervention resulted in greater gains in total positive peer interaction than the social skills intervention.

Cappeli, Daniels, Durieux - Smith, Mc Grath and Neuss (1995) focused on the social status of deaf students compared with hearing students discovered that a large number of deaf students were rejected by their hearing peers as compared to only a small number of hearing children who, like the deaf students, also become social misfits.

Some studies indicate that the hearing challenged child is inferior in intellectual ability, educational achievement and personal-social adjustment. They face difficulty in personal-social adjustment and this leads to isolation, withdrawal, frustration and inferiority.

Carol (1996) examined the social adjustment of deaf adolescents enrolled in segregated, partially integrated and mainstreamed settings. Partially integrated students reported better adjustment than mainstreamed students with deaf peers, mainstreamed students
reported better adjustment than partially integrated hearing peers. Segregated students showed the lowest levels of adjustment overall.

Musselman, Mootilal and Mackay (1996) concluded that, although not all results are equally negative, the preponderance of the evidence supported the conclusion that special schools for the deaf foster socio-emotional growth better than mainstream schools. Deaf students in mainstream schools report feeling socially isolated and lonely, and have lower self esteem than those students in special schools.

Vostanis, Hayes, Du Feu and Warren (1997); Stinson and Antia (1999) found good academic results are generally seen in deaf children who are mainstreamed, but they are also show high degree of isolation and psychological problems when compared with students who associate with other deaf peers.

Cole & Cole (2000) pointed out that 11 to 12 year olds’ time in western industrialized societies is spent with friends. Difficulties in peer relations at this age could then result in feelings of loneliness and isolation. He investigated social adjustment through self reports that involve both the deaf pupils and their peers. These methods are reliable because: (a) pupils who are identified as rejected through these methods tend to maintain this status across grade levels. It showed poor social adaptation (Coie & Dodge, 1983). But not all children who are rejected by their peers are aware of their negative social status (Asher, Hymel, & Renshaw, 1984) (b) more rejected pupils report feelings of loneliness (Asher & Wheeler, 1985).

studied the school adjustment, Self concept in Kerala. It was found that percentages of normal pupils experiencing better adjustment group is higher than the percentage of hearing impaired having better adjustment. The percentage of hearing impaired pupils experiencing poor adjustment group was found to be higher than the percentage of normal pupils having poor adjustment.

Dinhigra et al. (2007) conducted a study of certain selected variables related to select hearing impaired children. Fifteen hearing impaired children in the age group of 10-17, their parents, siblings and teachers comprised the sample. It was revealed that 54% of the children were moderately adjusted, 33% of the children negatively adjusted and the remaining 13% in between the two groups.

2.7 Studies pertaining to Self-concept and Adjustment of Visual and Hearing challenged children

Self concept can be defined as adjustment of the self against external criteria. The Self concept has been used to explain adjustment to disfigurement through work on ‘body image’ (Knudson – Cooper 1981; Thomas 1990; Bronheim, Strain & Biller 1991). The Self concept is also implicated in work assessing Self esteem (the evaluative component of Self concept), in relation to adjustment (Kapp 1979; Pertschuk and Whitaker 1982).

Linda and Shlomo (1978) investigated the impact of different educational settings on the self-concept and adjustment patterns of 48 hearing impaired Israeli pupils aged 14-15 years. The study expected that the hearing-impaired pupils in integrative settings would have different self-concepts and different adjustment patterns than hearing impaired pupils in special school settings. Results showed that the students in the two integrative school settings, group and individual,
had higher self-concepts than students in the special schools. However, there were differences in the adjustment profiles of students in all three settings.

Coker (1979) compared academic achievement and self-concept of 40 visually and hearing handicapped children of grade 3 through 6 attending regular day schools and residential schools by using the Piers-Harris Children’s Self-concept Scale. Results found that no significant difference in the level of self-concept and anxiety level between two groups indicating that school placement was not influencing factor in this area. He stated that the visually handicapped children were significantly happier than hearing handicapped children.

Meadow (1980) stated that the deaf seem to perceive themselves as lacking in comparison with the hearing ones. This results in low self-concept in deaf children; there is evidence that deaf children of hearing peers have lower self-esteem than deaf children of deaf parents.

Bala (1985) studied the disabled and non-disabled children with respect to personality traits, values, Self concept, mental make up and adjustment and compared educational facilities provided in schools of normal vis-à-vis disabled children. The sample of the study consists 1000 students with the age range of 12 to 18 from Haryana State. Major findings of the study indicated a significant difference in personality traits and values of disabled and non disabled children. It was found that:

1. Deaf children were deliberate, inactive, prudent and tender-minded.
2. Personality characteristics found common in all physically challenged children were reserved nature, stiffness, dependence, shyness and apprehensiveness.

3. The adjustment of deaf children was socially, emotionally and educationally less stable. They had poor home and health adjustment.

4. Blind children had poor home, healthy, emotional and educational adjustment.


6. Deaf, blind handicapped children differed significantly from normal children in personality traits.

7. Blind children were restrained, worried and untidy.

   Biyikli (1989) assessed 38 visually impaired, 33 hearing impaired, 34 orthopedically impaired and 37 healthy adolescents using Piers Harris Children’s Self concept Scale and reported that adolescents with visually impaired have similar Self concept characteristics as the other groups except for the hearing impaired. The Self concept scores of adolescents with hearing impaired were significantly lower.

   Arnold and Atkins (1991) conducted a study about emotional adjustment of children. Hearing challenged children integrated during in primary schools were the subjects. It was concluded that students face social problems than emotional problems. The segregation of hearing impaired children was supported at a significant higher level, than the integration of hearing impaired children on self concept and adjustment.

   Sahoo (1991) examined the comparative of the behavioural characteristics of the blind, deaf and dumb and normal children. The
normal children showed much better behavioural functioning as compared to the blind, deaf and dumb. The blind, deaf and the dumb children exhibited low self concept as compared to normal ones. But the blind children did not differ significantly from the deaf children with regard to their self-concept. The independence, responsibility and maturity of the normal children did not differ much from the deaf and dumb children. The deaf and the dumb children were able to maintain good relations with peers just like normal children. The blind, deaf and the dumb children showed more social-emotional problems, as compared to normal children. But the social-emotional of the blind, deaf and dumb did not differ much.

Pradhan, Rajshree (1993) Kurukshtra University assessed a total of 200 handicapped children (visual and hearing) of age 9-13 years comprising of eight sub-groups of 25 each according various combinations of type of school, type of handicap and degree of handicap constituted the sample. The study was drawn from various schools of Pune district of Maharastra. The sub-groups were matched for age, sex and socio-economic status. The Piers-Harris Children’s Self-concept Scale and Pre-Adolescent Adjustment Scale were used by the researchers. All children were assessed individually for the self-concept and adjustment. The scores obtained for self-concept and adjustment were analyzed with the help of correlation and analysis of variance. The Main findings were: (i) In general, handicapped children studying in integrated and segregated settings did not differ from each other on their self-concept and overall adjustment. (ii) However, if the visually handicapped and hearing handicapped were separated then it revealed that the visually handicapped children possessed better self-concept
and overall adjustment in segregated setting while hearing handicapped children possessed better self-concept and adjustment in integrated setting. (iii) There was interactional effect between type of school setting and type of handicap for both self-concept and adjustment. (iv) There was overall interactional effect among all three independent variables for adjustment but not self-concept. (v) Similar trend was found in various sub-areas of adjustment also specifically in home adjustment, teacher adjustment and general adjustment. (vi) However, children had better school adjustment in integrated setting while better peer adjustment in segregated setting (vii) Visually handicapped children had better school adjustment than hearing handicapped children in both settings while there was no effect of type of handicap over peer adjustment. (viii) As a whole the partially handicapped children had higher score than totally handicapped children on their self-concept, adjustment and various sub-areas of adjustment except school adjustment and peer adjustment (ix) The school adjustment was not influenced by degree of handicap but for peer adjustment, partially hearing handicapped and totally visual handicapped children had better scores than their counterparts.

Frank (1983) cited in Sikonnnon (1994) on the self-concept of the deaf, it was found that most deaf persons have more negative attitudes towards their deafness. Moreover, the results indicated that most deaf individuals have adjustment difficulties. Adverse home management, complex communication difficulties and unfavourable treatment cause their problems from family members.

Jyothi & Reddy (1999) analysed the personality factors, adjustment and self ideal discrepancy of 230 deaf students belonging to
14 to 20 age group. Results revealed that there are no significant differences in personality, adjustment and self-ideal discrepancy between the sub-samples.

Irfana and Muhammad (2010) in their study indicated that the social adjustment of the handicapped persons depends upon the self-concept. It also showed that self-concept depends upon age, gender, and occupation and education level. It also observed from the results that social adjustment of challenged persons depends upon their self-concepts i.e. as high would be the self-concept, so high would be the social adjustment of the individual, and similarly as low be the self-concept, so low be the social adjustment of the handicapped.

Nurullah, Burak, Yavuz, Turkay and Kayaalp (2011) examined 40 adolescents aged between 11 and 14 years with congenital complete visual impairment studying in a school for visually impaired children and were matched in with the visual impaired groups in terms of age, gender and socio-economic status. The tools of Socio-demographic Data Form, Children’s Depression Inventory (CDI), Piers-Harris Children’s Self-concept Scale, State- Trait, and Anxiety Inventory for Children were used. When the visually impaired and sighted adolescents were compared on the Piers-Harris Self-concept Scale, it was found that there were no significant differences in terms of total scores. While there was no significant difference between two groups on the sub-scales of happiness, anxiety, behaviour and adjustment, popularity and physical appearance, intellectual and educational situation, the subscale of adolescents with visual impairment was found to be significantly higher than that of the sighted adolescents.