ABSTRACT

One of the greatest contribution of psychology in recent times is the emergence of “Positive Psychology” or psychology of strengths, the focus of which is to understand those individuals who experience deep happiness, wisdom, resilience and well-being and to help others develop these capacities in themselves.

The present research aims to explore resilience and parental acceptance as determinants of sense of well-being amongst disabled. Sense of well-being is an important objective of human existence, and many factors contribute to it. For the disabled, who are faced with additional problems and challenges, it becomes a matter of even greater concern. The topic of our study is, therefore, “Resilience and parental acceptance as determinants of sense of well-being amongst disabled”. The major objective of the research is to study whether resilience and parental acceptance contribute to well-being.

Resilience is a broad term and various studies conducted on resilience have expounded certain factors which comprise resilience. Therefore the researcher had studied resilience both as a single factor and six specific factors comprising resilience. Further, two other psychosocial factors, age and gender, were taken into account. Therefore the total number of factors studied by the researcher in the context of their contribution to well being were ten.

Since no appropriate tool to measure resilience was available, therefore the first task before the researcher was to develop a scale to measure resilience. The rational-theoretical method together with the factor analytic method was used by the researcher for the construction of the scale.
The researcher, with the help of empirical studies and literature search prepared a comprehensive picture of the concept of resilience. Six factors appeared to be important in this regard. A pool of items reflecting each of the factors defining resilience was created with the help of the teachers and senior research scholars of the department. Experts scrutinized these questions very minutely to ensure that they were unambiguous and clear, that is all the subjects get the same meaning of the statements, which is one of the fundamental assumptions of rational theoretical approach, in fact of all approaches. The screening and rewording of items helped to establish the face validity. It has been pointed out by Kelly (1969) and Hasan (1997) that more than one approach to scale development may be needed for constructing a good scale. Therefore, item homogeneity of the scale was established with the help of factor analytic method (principal component analysis). Six factors, which emerged were given appropriate subtitles, after face validity confirmed that they measure a particular kind of psychological attribute. The six factors which have been studied by the researcher are (i) self esteem, (ii) self efficacy, (iii) perseverance and tenacity, (iv) perception of social acceptability, (v) optimism and (vi) spirituality.

Briefly stated, self-esteem, is the degree to which the self is perceived positively or negatively; that is one’s overall attitude towards the self. Self-efficacy may be defined as people’s beliefs about their capabilities to produce designated levels of performance that exercise influence over events that affect their lives (Bandura, 1986). It refers to one’s belief about one’s own abilities and capabilities. Perseverance and tenacity, is the steady persistence in course
of action, in spite of difficulties, obstacles and discouragement. It is regularly used in the favourable sense. **Perception of social acceptability** – refers to the extent to which a person perceives that he/she is accepted by others. In other words to what extent he/she has qualities which make him acceptable to others. **Optimism** is defined as a generalized expectancy that one will experience good outcomes in life. A disposition to believe in favourable rather than unfavourable outcomes to problems. The term **spirituality** is generally used to denote certain positive inner qualities, and perceptions. It does not include narrow, dogmatic beliefs and obligatory religious observances. It is a unified quality of mind, heart and soul and refers to feelings, thoughts, experience and behaviours that arise form a search for the sacred.

After following all the steps diligently, the resilience scale was developed. The Cronbach alpha reliability was found to be .816 and Guttman split half reliability is .804.

With the help of the Resilience scale constructed by the researcher, resilience and its six component factors were studied. Sense of well-being was measured by PGI Well-Being Scale, developed by Verma et al. (1986). Parental acceptance was measured by Parental Acceptance Scale developed by Ansari (1975).

A sample of 200 orthopaedically disabled subjects (100 males and 100 females) participated in our study. Subjects were drawn through purposive sampling. The age range of subject was 8 years to 16 years.
Two groups (high scoring and low scoring) were formed in terms of each variable under study and with the help of t-test, significance of difference between the two groups on the dependent variable, were studied. Since the criteria on which the two groups were identified was a psychological variable (e.g. resilience, parental acceptance etc.) the kind of difference that emerges from the t-test may be deemed to be a relationship (Field, 2000). Therefore, the design, though predominantly a two group design, has characteristics of correlational design also.

The statistical analysis used in the present research was (i) t-test. (ii) 95% confidence interval of the mean differences. (iii) factor analysis (principal component analysis), computation of which involves Kaiser-Meyer-Olkin (KMO) measure and Bartlett’s test of sphericity. The statistical analyses was conducted with the help of SPSS 11 software.

Resilience and parental acceptance, gender, age were factors selected for study. Resilience was studied both as a single factor and also in terms of six component factors, namely self-esteem, self efficacy, perseverance and tenacity, perception of social acceptability, optimism and spirituality, bring total factors to ten.

Resilience as a single composite factor was not found to contribute to well-being amongst the orthopaedically disabled. Disabled subjects high on resilience and low on resilience did not differ on their mean scores on resilience.
However three component factors of resilience were found to contribute significantly to the experience of well-being amongst the disabled. Disabled subjects high on self-efficacy, were experiencing significantly greater sense of well being than subjects low on self efficacy. This finding was predicted in the population also.

Perception of social acceptability is another factor that was found to contribute to feelings of well-being in the disabled sample. The sample consists of orthopaedically disabled subjects. The physical self is an important aspect of an individuals self-image. Being genuinely accepted within the group is a factor, which has a very special meaning for the disabled. Therefore those perceiving themselves as socially accepted experience greater well-being than those low on perception of social acceptability.

The third factor which was found a significant predictor of well-being amongst the orthopedically disabled was optimism. Optimism and hope is an important quality for the disabled. Those who possess this quality are manifesting the will to transcend odds that may occur and have high hopes for the future. This positive quality endows them with the experience of well-being. It is strongly felt that resilience should be taken as a broad theoretical framework with significant implications for positive psychology, but the various factors which comprise it should be the focus of research.

Parental acceptance emerged as a significant predictor of well-being for the disabled. Analysis of the mean difference revealed that the phenomena would be found in the population also. Parents perhaps are one of the basic
sources which provide experiences leading to feelings of well-being. Accepting behaviour of parents gives a child warmth, affection, approval, security, and understanding. A child needs a reasonable degree of acceptance in order to lead a healthy, happy and a decent life.

Gender and age are the other two variables which were studied by the researcher. Amongst the disabled, women were significantly lower on well-being than men. The orthopaedically disabled girls constitute a group that experience many major problems. The disturbed picture of the future is one big problem. Therefore it is not surprising that in terms of well-being, she is in a poorer position than males.

Different age groups of disabled also have shown difference in terms of well-being. The subjects falling in low age group experience greater level of well-being than subjects falling in high age group.

Thus the overall picture suggests that well-being is a dynamic phenomena with different factors contributing to it. Resilience as a single factor may not contribute to well-being, but its component factors, with varying degrees contribute to well-being. Parental acceptance emerged as a strong predictor of well-being. In the non-disabled sample, resilience, self-esteem, perseverance and tenacity are found to be significant predictors of well-being.

It must be noted that researchers, psychologists, and people working in the area of disability, must focus on resilience enhancing strategies, and create more awareness about disability in the general population and particularly amongst the parents of disabled.