CHAPTER : I

INTRODUCTION
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General Introduction:

All human beings climb a universal developmental ladder. They climb up this ladder is characterised by an orderly, sequential achievement of developmental milestones. The universality of human development is founded in the fact that relative ability/disability does not have material impact on the sequence of developmental of achievement. Relative ability/disability, however, can materially affect both the rate of developmental achievement and the potential for ultimate achievement.

Among our population are large numbers of children and adults who differ so markedly in mental, physical, emotional or behavioural characteristics from the peers as to require special help in realising their optimum potential. Various terms have been used to designate these differently abled children but in most common useses is “handicapped”. The term is descriptive of the circumstances of the person who is at a disadvantage in displaying the reactions and patterns of behaviour of the normal segment of the society because of physical, mental, sensory or emotional disability or any combination of these.

In USA federal laws for the handicapped during the 19th century were designed primarily to meet specific disability problems for groups such as the deaf and blind. Later in early 20th century new laws were enacted to provide services for all disabled persons.

Education for all is a basic tenet of our democratic faith and the opportunity for each individual to develop optimal potential is a guiding principle of our education system. In the progress towards equalised educational opportunities for all, handicapped individuals have not always received due consideration. The development of special programmes and methods of instructions and the integration of handicapped students into the regular school programmes have had to wait largely upon enlightened public opinion regarding the handicapped and their special needs (Fait & Dunn, 1984).

In many advanced countries Education for all handicapped Children Act was promulgated around 1975. One of the important feature of such laws was that “all
handicapped children be provided a physical education programme design to meet individual and specific motor needs. They emphasised that programme of physical education is required for the development of –

i) Physical and motor fitness

ii) Fundamental motor skills and pattern

iii) Skills in aquatics, dance, individual and group games and sports.

In India such wide enactment for the handicapped are not in existence. A number of schemes have developed to impart education for the handicapped. The scope of physical education in such institutions are limited. The present study has been undertaken with a view to look into the present status of physical and motor fitness of the handicapped boys in comparison to their normal group.

One of the important, extraordinary, beautiful, valuable and expensive that nature has created particularly on the earth is human life.

According to the universal declaration of Human Rights of the United Nations (1948), all human beings are born free and equal in dignity rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.

The human rights are held equally by all persons simply by virtue of being human. They go beyond the basic rights of life and liberty to include cultural, economic, social and political rights essential for the maintenance of human dignity.

Everyone, as a member of society, has the right to social security and is entitled to realization, through national effort and international co-operation and in accordance with the organization and resources of each state of the economic, social and cultural rights indispensable for his dignity and the free development of his personality.

A new approach to disability took shape in the 1970s and would rightfully be called the human rights approach. It smooth the way for major international declarations related to the rights of the disabled.
The existence of disabled members are not uncommon in any society. The disability in any person of any kind irrespective of its congenital or acquired in nature could also turn into a most difficult disability in the social context unless positive efforts are made by members of the concerned families and society. It must be realized that the disabled are as much an integral part of the society as any body else. Only proper care, affection, love and understanding can blossom them into independent adult individuals capable of contributing towards families, their societies and the nation at large.

Disability is a human rights concern. The quality of life of the disabled population is low and since disability entails loss of productivity, this is substantial considering the large population of persons with disabilities. Disability also entails emotional and financial pressure for the care givers of the disabled.

The Disabled persons are neglected in the society. People are not interested to think about their problems. It is a matter of quite interesting that present scientific information has established that physical education is an integral part of education and rehabilitation of the Disabled persons. There are various programmes in this regard but that too is not sufficient. It’s indeed helpful to know about health related physical fitness, cardio-vascular endurance, personality development, intelligence and social maturity skill of the hearing impaired, visually impaired and normal children. It’s needless to mention here that we should know in detail the differences between the disabled and normal children, as far as trait of personality is concerned.

1.1 Disabilities the term:

Disability is a condition or function judged to be significantly impaired relative to the usual standard of an individual or group. The term is used to refer to individual functioning, including physical impairment, sensory impairment, cognitive impairment, intellectual impairment, mental illness and various types of chronic disease.

Definition of disabilities change with the ideas that express people’s notion of values, importance, measures and life. It is therefore not possible to give one definition of disabilities.
According to Oxford dictionary (2000), disability is a physical or mental condition that means you cannot use a part of your body completely or easily, or that you cannot learn easily.

According to Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, defines disability is a person suffering from not less than forty percent of any disability as certified by a medical authority.

According to WHO defines impairment as a normal process of change with physical, anatomical and cognitive structure coming with age or other factors but which does not interfere with the performance of activities expected from an individual. It remains an important loss which may be compensated by some aid but if the impairment interferes with the process of education or work, it becomes a disability. A disability is a social disadvantage flowing from people's attitude towards a person with disability.

Singh et al. (2012), defines disability as any restriction or lack of ability to perform an activity in the manner or within the range considered normal for a human being.

Good (1959), points that a disability is i) A defect in physique, intellect or behavior ii) Any abnormality that renders achievement more difficult.

1.2 Causes of Disabilities:

Many people are born disabled and many obtain disability after birth in the way of life. Persons above the age of 60 are vulnerable for the beginning of disability. Physical disability is mainly an old age problem. The greater part obtained disability above the age of 60 years in all types of disability. Overall the results give an indication that for all the types of disability i.e., hearing, visual and locomotor disabilities etc..

Singh et al. (2006), pointed that several factors are responsible for causing disability. It is a fact that in the less developed countries the causes are mainly malnutrition, unhygienic surroundings, endemic diseases, lack of basic knowledge of hygiene and lack of basic medical facilities. Socio-economic status of a particular society does make some reflection on the problem of disability.
Malnutrition, lack of hygiene, lack of access to appropriate medical services, lack of adequate care during pregnancy, inept handling of a difficult delivery and lack of timely treatment of high fevers and infectious diseases cause disability. These causes are largely due to poverty. Poverty contributes to disability because of inadequate services and loss of earning power.

**Other causes of disabilities are hereunder:**

(i) Chromosomes:

Human chromosomes are 46 and it is found that several major disorders were traceable to chromosomal abnormalities. Two of these are associated with Mental Retardation, ‘Down syndrome’ and ‘Klinfelter syndrome’. These and other conditions are caused by such abnormalities as extra or missing chromosomes or loss of part of a chromosome. Chromosomal abnormalities are not rare and they are the single most important cause of spontaneous abortions, occurring in at least 20% of cases.

(ii) Genes:

Although chromosomal disorders have been considered under the rubric ‘genetic’, they are not heritable in the same way as gene-determined conditions. There are three kinds of gene mechanisms:

(iii) Non-Genetic Biological factors:

(a) Pre-Natal:

1. Infection: Rubella, Toxoplasmosis, syphilis, cytomegalo virus Maternal - fetal blood incompatibilities: Rh and ABO.

2. Drugs and alcohol: Heroin, methadone, antiepileptic and alcohol.


5. Prematurity: Types I, II & III.


7. Head Trauma: haemorrhage, infection.

(b) Post Natal:

1. Infection: Encephalitis, meningitis, brain abscess, post Immunization cephalopathy.

2. Cerebral Trauma: Head Injury, cerebrovascular accidents, haemorrhage from coagulation defects, thromboses, ruptured aneurysm.

3. Poisons and environmental toxins: lead, mercury.


5. Hormonal deficiency: hypothyroidism.


7. Brain Tumors, Epilepsy, Nutrition.

(iv) Other Diseases:


2. Diseases of the Eye: Some of the common causes for blindness in India are as follows:

   Cataract, Glaucoma, Corneal Ulcer, Xerophthalmia, Conjunctivitis, Retinal detachment, Albinism, Astigmatism, Nystagmus, Optic Atrophy, Retinitis Pigmentosa, Trachoma.

   Bhatt(1963), stated that there is a great confusion prevailing in the minds of common people regarding the nature of hereditary defects. They often mix up the terms hereditary, congenital and familial. A hereditary defect is one that passes down from generation to generation because of some sort of disturbance in the working of the inherent mechanism. It is significant that a particular condition may be hereditary and yet, it may not manifest itself at birth or for many years to come or might not have appeared before in the individual's immediate family. This may appear paradoxical in view of the implication that a hereditary defect passes on from one generation to the other, but it does not happen in mutation, that is when rare recessive genes are pooled together or when new black genes come into being.
1.3 **Type of Disabilities:**

Types of disabilities include various physical and mental impairments that can hamper or reduce a person's ability to carry out his day to day activities. These impairments can be termed as disability of the person to do his or her day to day activities.

Singh et al. (2012), the disabilities are categorised into the following two types:

i) **Physical Disabilities:** Physical disabilities include blindness, deafness, deformity, muscular and nervous disorders, paralysis and loss of limbs.

ii) **Mental Disabilities:** There are two general kinds of mental disabilities - Mental Illness and Mental Retardation.

According to Persons with Disabilities Act, 1995, Disability means blindness, low vision, leprosy cured, hearing impairment, locomotor disability, mental retardation and mental illness.

Joseph (2004), stated that the disabled persons are those who suffer some kind of bodily impairment that interfere with their normal functioning. Accordingly, there are four major categories of persons with disability or in other words, the differently abled. They are the blind or visually impaired, orthopedically disabled or locomotor disabled, speech and hearing impaired and the mentally challenged. Physical disability is a deviation from the socially valued characteristics of an individual in a given society.

Singh et al. (2012), According to Rehabilitation Council of India the disabilities are categorised into the following four types:

1. Mental Retardation & Associated Disabilities
2. Visual Impaired & Associated Disabilities
3. Hearing Impaired & Associated Disabilities

Definition of four major categories of disability are hereunder:
(i) Mental Retardation:

Guha (2008), Mental Retardation defines that a condition of arrested or incomplete development of mind of a person which is specially characterized by sub-normality of intelligence.

(ii) Visually Impairment:

Visual impairment is a functional loss of vision. The animal eye is like a camera that collects, focuses and transmits light through a lens to create an picture of its environment.

According to Persons with Disabilities Act, 1995, visual impairment or blindness means (i) Total absence of sight or (ii) Visual acuity not exceeding 6/60 or 20/200 (snellen) or (iii) Limitation of the field of vision subtending an angle of 20 degrees or worse.

(iii) Hearing Impairment:

According to Persons with Disabilities Act, 1995, hearing impairment means loss of sixty decibels or more in the better ear in the conversational range of frequencies.

(iv) Loco motor disability:

According to Persons with Disabilities Act, 1995, Loco motor disability means disability of the bones, joints or muscles leading to substantial restriction of the movement of the limbs or any form of cerebral palsy.

1.4 Need of Disabilities:

The basic needs of a disabled child in any society are not different from those of normal children. He wants his recognition in the society and acceptance from his fellow students in the school. This acceptance reassures security, which is though a mental or a psychological aspect. Education and physical training are best mean for a disabled to develop his capacities and potentialities and to become an useful member of the society.

There are many social and psychological problems faced by a hearing impaired person. The basic problem arises due to lack of communication with
the society. He is unaware of that knowledge which he had it instantly with his ears. The hearing impaired person's unawareness of the sound also causes another defect in him i.e. dumbness or muteness. Without two of the vital communication means, frustration creeps in them and become more and more rigid day by day.

As an incorporated part of education system physical education should bear responsibility of the rehabilitation of the disabled through adaptive physical education and recreational activities. By means of physical activities, development such as physical, mental, social, psychological and some specified personal skill, is possible. In this fast moving society disabled need to be educated and prepared for life with a reasonable level of economic in-dependence, self-help skills, and social normalization.

Clarke (1970), reported that actually the needs of disabled or handicapped persons in a democratic society are not different from those of normal children, such a child wants acceptance and recognition from his fellow students in the school. He wants his security that grows out a acceptance in the process of growing up and living with the social groups.

Joseph (2004), stated that the disabled person needs to be understood and treated like a normal human being, as an individual and as a member of a family, community and society at large. His attitude towards his personal self, fellow human beings and society and vice-versa are important for the development of his fuller self and integration into the mainstream. For this his various rehabilitation needs such as training, employment, availability of assistive devices, orientation and mobility and such others must be met and the problems regarding the same have to be answered so that he can contribute as a responsible and full-fledged member of society.

According to World Conference on Human Rights (1993), Children with special needs’ are considered as children with needs, which have to be met so that they are able to benefit from the exercise of all the assured rights. In other words, special attention needs to be paid to ensure nondiscrimination and the equal enjoyment of all the human rights and fundamental freedoms by disabled children. The international law has many a time reaffirmed that all human rights and fundamental freedoms are universal and thus unreservedly include persons with disabilities.
International concern for children with disabilities was first expressed in the Declaration on the Rights of Child 1959, which includes not only physical and mental disabled, but also the concept of social disabled. Declaration proclaims that children who are physically, mentally or socially disabled should be given the special treatment, education and care required by their condition.

There are individuals who learn very fast. Some others who do not learn very fast but, with reasonable teaching learning input, can learn prescribed tasks, may be over a relatively longer time segment. There are some individuals who find it difficult to learn without special inputs. These are the individuals who have special learning needs which arise out of sensory, intellectual, psychological or even socio-cultural deficits. For example, persons with visual, hearing or other impairment have learning problems. So have persons with a low level of intellectual functioning and those with disorders in psychological processes. These conditions, impairments or disabilities hamper the normal development of individuals intellectually, socially, emotionally and physically. Needless to say the discrepancy in their development and the development of those without such impairment depends on the type and degree of the disability. There are, however, ways to reduce this discrepancy through restorative, habilitative and rehabilitative inputs, including education. Thanks to significant developments in medical science, technology and education, the lives of disabled persons can be normalized through special inputs. These persons can also be educated using special instructional methodology and instructional material and learning aids and equipment specific to special learning needs. It also requires additional teaching competencies in the teacher, in case of hearing impairment children, special teachers are indispensable. This is, therefore, that component of education which employs special instructional methodology, instructional materials, learning teaching aids and equipment, and special teaching and managerial competencies to meet educational needs of persons with specific disability or disabilities like in this case the hearing impairment children. These needs may be congenital or may arise out of conditions appearing at any stage of life.

The first mission should be taken to make the community responsive to the needs of the disabled children, in general to their educational needs. The society had to leave it's so called sympathetic behavior and have to give all the natural and
human right to the disabled. The law should not only be formed but administered strictly for the Right of the Disabled.

According to Henry Webb (1981), disabled do not need pity but they need encouragement in their efforts to overcome their disabilities so that they become asset to the society in-lieu of liability. They also have the right to grow-up in the world, which looks at them not with a scorn or pity but which welcomes them exactly as it welcomes everyone, which offers them identical privilege and identical responsibilities.

1.5 Neglected/Deprived Disabled:

Society is formed consisting of various people from all walks of life. The growth and development of a nation depends on the progress and balanced enhancement of mankind. Facts remains that the Disabled people are being neglected by the society for a long time especially in the weaker parts of the society where poverty, mal-nutrition prevails and which reflects illiteracy, ignorance and superstition.

Auxter (1981), stated that the time has come when we no longer tolerate the neglect of disabled; these people have the right to work, to the best of their ability to know the dignity which every human being is entitled. These people who can and must be helped to help themselves, that is their constitutional right which is clearly affirmed in number of recent court decisions.

1.6 Society and Disabilities:

We live in a society as its members. The very purpose of forming a society is to live together, develop together and to have recognition. He wants his security that grows out a acceptance in the process of growing up and living with the social groups.

Disabled persons often are excluded from the mainstream of the society and denied their human rights. Discrimination against Disabled persons have a long history and take various forms. They range from undesirable discrimination, such as the denial of educational opportunities, to more delicate forms of discrimination, such as segregation and isolation because of the imposition of physical and social barriers. Effects of disability based discrimination have been particularly severe in fields such as education, employment, housing, transport, cultural life and access to public places.
and services. This may result from distinction, exclusion, restriction or preference, or denial of reasonable accommodation on the basis of disablement, which effectively nullifies or impairs the recognition, enjoyment or exercise of the Rights of Disabled persons.

However, the experiences from developed societies have indicated that provision of affirmative social, cultural, economic, legal and healthcare actions and support through barrier free environmental setting with the help of scientific, technical aids and appliances have significantly reduced their disabilities and the way for their smooth inclusion, interaction and adaptation with the society and surroundings. Social model of disability views handicaps more as a consequence of oppression, prejudice and discrimination by the society. Therefore a view that handicap is made and not acquired by a majority of impairments and disabilities are forward recognition globally.

Despite some progress in terms of legislation over the past decades, such violations of the human rights of persons with disabilities have not been systematically addressed in many societies. Most disability legislation and policies are based on the assumption that disabled persons simply are not able to exercise the same rights as non-disabled persons. Consequently the situation of persons with disabilities often will be addressed in terms of rehabilitation and social services. A need exists for more comprehensive legislation to ensure the rights of disabled persons in all aspects - political, civil, economic, social and cultural rights on an equal basis with persons without disabilities. Appropriate measures are required to address existing discrimination and to promote thereby opportunities for persons with disabilities to participate on the basis of equality in social life and development.

Progress of any society is held back by the weakness arising from poverty, disability and lack of opportunities. Whereas it is difficult to prevent and control poverty as well as disability, it is within human reach to provide opportunities for individual growth, to facilitate the progress of the society.

1.7 Role of Community:

According to the Persons with Disabilities Act, 1995, the act was passed in December 1995 and became enforceable on Wednesday, 7 February 1996. The Act establishes the responsibility on the appropriate governments and society to provide
equal opportunities to persons with disabilities. Some of the important rights guaranteed by it are:

1. Right to have free education up to the age of 18 years. Also 3% of seats reserved for admission in educational institutions.

2. Right to have preferential treatment in the matter of employment by reservation of 3 percent vacancies for them in government and public sectors undertakings.

3. Right to have preferential treatment in allotment of land and housing.

4. Prohibition of discrimination on the ground of disability in any area of life, education, training and employment etc..

5. Right to have access to buildings, roads and transport and other public services.

Others role of the communities for disabled are hereunder:

1. Setting up special schools.

2. Sponsoring a special child’s education.

3. Distribution of clothes and food to special children from poor families.

4. Organising recreational activities for these children.

5. Providing scholarships to deserving students with disability.


7. Organising public awareness programmes.

8. Serving as volunteers in special schools.

9. Starting vocational training programmes and by providing employment opportunities to individuals with disabilities.

Resheed (2008), stated that there are so many challenges encountered by the functionaries of the integrated education for the hearing impaired and normal children. The demonstration in the class, issue of special material, using of aids, teaching approaches, skills, evaluations, etc. to hearing impaired is entirely different to that of normal children. So, teachers, heads of schools, and the children themselves encountered many challenges. The hearing impairment causes more disabilities than
the visual impairment. Due to hearing impairment one cannot learn language in natural setting. Inspite of our auditory ability sometimes may be due to the noise or any other distraction we are unable to enjoy or appreciate certain communications. Our sense of hearing enables us to be close contact with our physical environment.

Joseph (2004), stated that a visually impaired or an orthopeadically challenged person with superior intelligence and non-disabled persons with an average mind, which of these two are limited. It depends on what we want them to do. If we want them play football we many prefer the non-disabled person. But to teach history or science the non-disabled person is more limited or handicapped.

The main purpose of the education of the disabled act was to provide an education so that individual with disabilities could become independent adults community. Prerequisite to independent living is the acquisition of the physical and motor skills that will enable these individuals to participate in domestic, recreational and vocational life in the community.

Leon (1957), stated that frustration causes various mental and physiological problems and affects the body capacities of hearing impairment persons. Frustration occurs when a motivated drive is blocked. The obstruction may be either overt or covert. It is mentioned here that overt means external or physical and covert means internal or mental-socio-psychological. In disable persons both type of frustration eventually comes. Frustration in disable person triggers defense mechanisms. Traditionally, psychologists felt that frustration always led to the defense mechanism of aggression. It was thought that, on becoming frustrationed, a person reacts by physically or symbolically attacking the obstruction.

David et al.(1991), stated that like the psychological problems resulting from stress, the behavioural problems of hearing impairment children are often not attributed to stress by family members and even by their teachers. This generate psychological and physical symptoms of stress, the behavioural problems can be controlled, more effectively managed, and even prevented by the individual and the institution.

There may be many coping strategies for stress of hearing impairment, such as discussions, goal setting, behaviour modification, group dynamics,
communication skills, leadership styles, decision making skills, control techniques, management of change and other development techniques.

Generally speaking, there are two major approaches that deal with complexes and stress of the disabled person. First are the individual strategies, which tend to be more reactive in nature. Some individual strategies such as physical exercise, can be both reactive and practice, but most are geared towards helping the disabled person. The idea behind these strategies is to remove existing or potential stressors and thus, like preventive medicine, prevent the onset of complexes and stress for the disabled person.

1.8 Physical and Psycho-Social aspects of disabilities:

In the present study the researcher attempted to view the disabled in terms of their specific traits and states:

1.8.1 Health related physical fitness:

Health related physical fitness consists of those components of physical fitness that have a relationship with good health. The components are commonly defined as body composition, cardiovascular fitness, flexibility, muscular endurance and strength. Health related physical fitness is important for all individual throughout their life span. Health related physical fitness is the ability of individual to a full and balanced life. A totally fit person has a healthy and happy outlook on life.

G.S.(1998), stated that health is a fundamental right of an individual and is considered as a state of physical, mental, social and spiritual well being. Man can live longer and can derive maximum benefit from being in a state of good health. A healthy person is not only a boon to himself but also to his nation and world at large. Health is the foundation head of beauty, courage, tolerance, joy, power, peace, prosperity and creativity. Besides all the sufferings that unhealthy man undergoes which force him to live a cheerless life of depression, diseases, frustration etc., he also pollutes the atmosphere around him with his negative thoughts and affects many more minds with his contagious melancholy.

According to the World Health Organisation (1984) in its Constitution defines health as a state of complete physical, mental and social well-being. Thus good health should enable individuals to develop to the maximum of their physical and mental
potential, the realisation of which needs the action of many economic and social factors.

Kansal (1996), stated that health related fitness is based on the assumption that an adequate level of body development is required for health. The health related fitness is measured by evaluating mainly the following three factors:

I Body Composition (percentage of body fat and lean body mass).

II Cardio-respiratory functions of the body.

III Musculo-skeletal functions especially of abdominal and lowback part of the body.

Robert et al.(1985), States that Fitness is that state which characterized the degree to which a person is able to function efficiency fitness is an individual matter. It is implies the ability of each person to live most effectively within his potentialities.

Worth of life has become one of the major aims of contemporary societies. Society is constantly changing and this is mirrored with the profession of physical education and exercise sciences. During the last 20 years, a great deal of evidence has been reported in medical literature supporting the value of regular vigorous exercise for health promotion. A growing body of research indicates that many diseases that are overly manifested only in adults are results of chronic disease processes that begin in childhood. Recent medical research clearly documents that childhood obesity, which is likely to persist into adulthood, is significantly related to exercise and nutritional habits during early stages of growth and development.

Baumgartner et al.(1987), stated that the contemporary living style, physical fitness, health and nutrition seems to have gained a place of priority. One of the most important goals of physical education programme is to develop physical fitness. Physical fitness is considered as a pre-requisite to healthful and recreational living and function of the body over extended periods of time into adult's life. Health related physical fitness components are those development of which enrich one's health, and on the other hand which are related to certain diseases.
Hersey et al. (1994), stated that Health related physical fitness is body composition. The body composition looks at the ratio of fat in the body compared to the overall levels of lean body mass. When the body fat mass ratio is high we are considered over weight or even obese. This high fat content ratio is a sign of a higher propensity to develop coronary heart disease, diabetes, joint and back pain, arthritis and injuries due to inactivity. There is a direct link in the speed of adding pounds of fat to the lack of physical exercise and reducing the fat ratio both by diet changes, nutrition quality and regular physical exercise are key.

Kamat (2000), stated to learn the art of healthy living one should learn to tackle his best ability, his physical, biological and social environments. The health of a person is really the foundation upon which all their power of state depends. Real wealth of a country is its healthy men and women and not the mineral wealth or natural resources. The health of the people reflects the nations economic and social well being. Health is our most precious possession both individually and collectively. Nothing is possible without health. Health is not everything but health affects everything. Health is very flexible state of body or mind, it is never static, it fluctuates and to keep pace with it, it has to be renewed every now and then. Health is fundamental human right. It has to be earned by individual efforts. It is a key to success in life. Without health, life is deprived of its joys and pleasure. Health is only a means to live a better life. So to make the life fuller, richer and happier one must have a strong will to live healthy. Unless there is a will to live healthy it is impossible for anyone to draw the best of life.

Schwartz et al. (1991), stated that Participation in regular physical activity (both aerobic and strength exercises) elicits a number of favorable responses that contribute to healthy aging. Additional benefits from regular exercise include improved health, and postural stability, thereby reducing the risk of falling and associated injuries and fractures and increased flexibility and range of motion. Thus, the benefits associate with regular exercise and physical activity contribute to a more healthy, independent life style, greatly improving the functional capacity and quality of life in older adults population.

According to AAHPERD (1973), health related physical fitness can be viewed thus “physical fitness is a multifaceted variety extending from birth to death. Affected by physical activity, it ranges from optional abilities, in all aspects of life through high
and low levels of different physical fitness to severely limiting disease and dysfunction.

According to Edlin and Golanty (1994), health was viewed as the absence of illness. Ways of measuring health were to assess the five D’s, - death, disease, discomfort, disability and dissatisfaction.

The World Health Organisation (1984) in its Constitution defines health as a state of complete physical, mental and social well-being. Thus good health should enable individuals to develop to the maximum of their physical and mental potential, the realisation of which needs the action of many economic and social factors.

Hastad et al. (1994), stated that Health-Related Physical Fitness domain is characterized by those aspects of physical fitness that affect an individual's functional health and physical well-being. It is becoming an accepted practice for physical fitness testing to emphasize health-related components, including body composition (ratio of leanness to fatness), cardiovascular efficiency, muscular strength and endurance, and flexibility of lower back and posterior thigh area.

1.8.2 Personality:

Clarke (1970), reported that Importance of personality in everyone’s life, Scientists and laymen a like want to know more about it and how to control its development. This interest is not of recent origin. Historical records show that personality studies date back to the ancient Greeks. Through the ages the desire to understand what causes differences in personality has motivated investigative attempts, ranging from pure speculation to experiments involving the use of highly controlled measuring techniques.

A person’s response to any circumstances whether it be at work, at in social activities, affects his adjustment to the situation and his adjustment influences his concept of him-self as a person. There is a globular response the child’s personality and his soceity. His personality largely determines his social maturity to society and greatly influences his concept of self.

Schwartz (1991), stated that Recreation has come to exist in many different forms and meanings to many men. To understand its nature is to become familiar with a few of its salient characteristics as an experience. First, recreation should be
recognized as an essential part of life. Fundamental knowledge of human behaviors ascertains the prominence of recreation among the basic activities of life. Recreation must be related to the interests and needs of an individual and geared for his own personal development. Recreation has constructive connotation of physical, mental and social characteristics for the personality. Recreation exists in a multitude of activity forms. Recreation is an act or experience, selected by the individual during his leisure time, to meet a personal want or desire, primarily for his own satisfaction.

Saraswati (1986), stated that referring the importance of Yoga Swami Satyanand Saraswati Observes' The practice of Yogasanas has a deep meaning and value in the development of the physical, mental and spiritual personality whereas pure exercise has a physical effect on the muscles and bones.

Pathak (2008), stated that for sound personality of any child, physical activity has its unique contribution. This contribution becomes more important in case of disabled children. Learning through senses is natural way of acquiring knowledge and it is obvious that if anyone of the senses is lacking, learning is hindered. Then it becomes compulsory for the remaining senses, to be trained and used effectively, to compensate the lacking one. It is seen that disabled willingly does not take part in plays and activities that contributes to fitness and physical development. Thus many wanted goals of education are not achieved.

1.8.3 Intelligence:

Mann and Jack (1968), stated that from the time immemorial human beings have been laying stress on the importance of "physical fitness "as a stray base for "total fitness "of an individual. Physical fitness is not only one of the most important key to be healthy but, it is also the basis of dynamic and creative intellectual activity. The relation between soundness of the body and activity of mind is subtle and complex. To keep himself fit a person requires some sort of physical activity. Physical exercise is very important for children, youth, adults and old people of both sexes to keep them fit.

Physical fitness is not only one of the most important key to a healthy body; it is the basis of dynamic and creative intellectual of activity. The relationship between the soundness of the body and the activities of mind is clever and complex. Much is not yet understood. But we do know what the Greeks knew that
intelligence and skill can only function at the peak of their capacity when the body is healthy and strong, that hardy spirits and tough minds usually inhabit sound bodies. The value of physical fitness and exercise are not circumscribed by age, they are general and apply in some degree to all ages. Certainly individual’s physical fitness problems may vary with age and some problems may be more acute in old age than during youth. Further the need for exercise is shown in maintaining organic soundness, in fat reduction and in motor performance. While such relationships are significant, they are not sufficiently high for predictive purpose, which is to be expected separately.

Garret (1961), stated that every man is intelligent in his own usual self because his correct response to a given situation in it, self shows his basic intelligence. Again it doesn’t mean that he may give a correct response to each and every situation being exposed to him. Thus we can give a statement that every individual has basic intelligence but in varying degree. This degree is what psychologists have been trying to find out, so that they can categorize certain category of people. Efficiency in meeting everyday situations or solving every day problems is perhaps as useful a working definition of general intelligence as any.

Eysenck (1970), stated that it is more or less stable and enduring organisation of a person's character, temperament, intellect and physique which determine his unique adjustment to the environment.

1.8.4 Social Maturity:

Clarke (1970), reported that a person’s reaction to any situation whether it be at work at school or in social activities, affects his adjustment to the situation and his adjustment influences his concept of him-self as a person. There is a circular reaction between the child’s or adolescent’s personality and his school. His personality largely determines his adjustment to school and his adjustment to school greatly influences his concept of self.

It is human tendency to be complete and rhythmic. Movement creates a sense of well-being. Besides creating pleasure, movement and communication are specific type of activities that helps to sustain agility and alertness, besides exerting a deep social and psychological influence. Any exercise or activity, in the long run, would produce some physiological adaptations in the body. Moreover, exercise
increases the capacity for more exercise by stimulating morphological, physiological and behavioural changes in the organism.

The objective of above said study emphasised on mainstreaming of the disabled persons viz. Hearing impaired, visually impaired with their non-disabled counterparts. Disabilities relating to hearing impairment and visual impairment for some difficulties regarding socialisation and to some extent physical fitness as because most of the cases they are not getting the appropriate opportunity to develop their potentialities for personality development, intelligence, health related physical fitness and social maturity at large. Obviously, disabilities having their educational background in integrated or inclusive set up may help to develop the skills of communication, social integration and public relation for better development of their personality.

Disabilities having their educational set up in segregated type of education in exclusive special schools crippled their communication with their normal counterparts and society at large due to non-getting opportunity to mix with their counterparts as well as interaction with the society, as a result of which the manifestation of their human qualities including physical fitness, personality development and social maturity hampers to a great extent.

The present age is for inclusive education for total development of a disabled child with a view to make him a contributive member in the society. The aim is to develop him physically, mentally, emotionally, socially and economically to the maximum possible extent with the avenues of various social activities and full cooperation from all sections in the society. The main spirit of Persons with Disability Act, 1995 envisages Equal Opportunities, Protection of Rights, Full Participation and recognition as an individual in the normal society. The thrust of the said Act meant for total rehabilitation of a disabled child in the society.

The Govt. of India, State Govt. and various Non-Government Organisation(NGO), Social Service clubs, business or commercial houses rendered their service for the welfare of the disabled persons relating to education, rehabilitation, placement and socialisation to become a useful citizen in the country. Appreciating the human resource among the disabled persons, the welfare States like India became the first signatory Country to accept the United Nations Charter of
Rights for the Persons with Disability Act in the year 2008. The United Nations Charter of Rights for the Persons with Disability Act, Geneva envisages to develop the total perspective of human qualities of disabled persons in the society covering all the rights applicable to develop a human being like a normal person in the society.

Researcher thought that study is just a glimpse to co-relate the suggested plan of action regarding health related physical fitness, cardio-vascular endurance, personality, intelligence and social maturity in comparison with the children with hearing and visually impaired with their normal counterparts. Researcher endeavour utmost efforts to make this thesis a successful one with all zeal and diligence. Still, however, miles to go for more innovative ideas and creative planning to make such efforts successful, for that, mass awareness, sufficient opportunities and inclusive atmosphere and planning is necessary on the part of the Government, NGOs, Social Service Clubs and public at large for better implementation and achieving a grand 'SUCCESS'.

1.9 Statement of the Problem:

The statement of the problem is a comparative study between hearing and visually impaired boys in relation to their health related physical fitness and selected psycho-social parameters.

1.10 Purpose of the Study:

The purpose of conducting the present study is as follows:-

i) To find out the difference in physical fitness and selected psycho–social states of the hearing impaired, visually impaired and normal boys.

ii) To assess the physical fitness and selected psycho–social states/parameters of the hearing impaired and visually impaired and normal boys.

iii) To compare physical fitness, status and performance in psycho–social parameters of the hearing impaired, visually impaired and normal boys.

1.11 Aim of the Study:

The goal of this study was to better understand the status of health related physical fitness and selected psycho–social parameters viz, personality, intelligence
and social maturity of the hearing impaired and visually impaired in comparison to normal boys.

1.12 Objective of the Study:

Major objectives of the study are given below:

1. To compare the mean scores of the hearing impaired and visually impaired and normal boys towards health related physical fitness.

2. To compare the mean scores of the hearing impaired and visually impaired and normal boys towards personality.

3. To compare the mean scores of the hearing impaired and visually impaired and normal boys towards intelligence.

4. To compare the mean scores of the hearing impaired and visually impaired and normal boys towards social maturity.

5. To show physically, mentally, emotionally, socially and economically to the maximum possible extent of the disabled with the avenues of various social activities and full co-operation from all sections in the society towards a normal life.

6. To co-relate the plan of action regarding health related physical fitness, cardiovascular endurance, personality, intelligence and social maturity in comparison with the boys with hearing and visually impaired with their normal counterparts.

1.13 Delimitations:

The present study was delimited to various points, which are briefly described as under:

i) This study was delimited to two hundred hearing impaired and two hundred visually impaired boys from special schools and two hundred normal boys from general schools of West Bengal.

ii) The study was again delimited to individuals between the chronological ages 10-12 years of boys.
iii) The study has been delimited to state govt. sponsored special schools in West Bengal under the controlled by the Mass Education Extension and Library Services Department.

iv) The study has been also delimited to state govt. sponsored general schools in West Bengal under the controlled by the School Education Department.

v) This study was further confined to assessment of health related physical fitness and selected psycho-social parameters consisting of the following items:

a) One mile run-walk.

b) Sit ups.

c) Sit and reach.

d) Sum of triceps and Subscapular skin fold measurement.

e) Modified Harvard step test.

f) Personality Questionnaire.

f) Intelligence Questionnaire.

g) Social Maturity Questionnaire.

1.14 Limitations:

The present study was limited to various points, which are briefly described as under :-

i) Lack of special motivational techniques and effect of uncontrollable factors like daily routine, diet, sleep, emotional factors etc. which might have influenced the results of the study are being considered as limitations of the study.

ii) Due to lack of time and fund support the study was restricted to only two hundred hearing impaired, two hundred visually impaired and two hundred normal boys.

iii) The confirmation of age of the subjects was done on the basis of office records as well as personal enquiry.
iv) Since this was a field study, using of gadgets and instruments were restricted and limited.

1.15 Hypothesis:

It is hypothesized that :

i) There will be no difference in health related physical fitness and selected psycho-social parameters between hearing impaired and visually impaired subjects.

ii) It is expected that normal peer boys would be different from hearing impaired and visually impaired in respect of health related physical fitness and selected psycho-social parameters.

1.16 Definition and Explanation of Terms:

Impairment:

Guha (2008), defines an impairment is any loss or abnormality psychological, physiological or anatomical structure of function.

Health Related Physical Fitness:

Tanered (1987), defines health related physical fitness as development of qualities necessary to function efficiently and maintain a healthy lifestyle. Each of the components of health related fitness are cardio-respiratory endurance, muscular strength and endurance, flexibility and body composition.

Personality:

Singh et al.(2012), according to Gordon W. Allport defines the Personality is the dynamic organisation within the individual of those psycho-physical systems that determine the individual’s unique adjustments to the environment.

Intelligence:

According to Britannica (2005), meaning of Intelligence is the ability to learn or understand or to deal with new or challenging situations. The ability to apply knowledge to manipulate one’s environment or to think abstractly as measured by objective criteria such as IQ test.
Social Maturity:

Singh et al. (2012), defines Social Maturity is the growth and adjustment that takes place and psychological development of an individual is also associated with it.

1.17 Significance of the Study:

The significance of the study are :

i) The study will throw light on the status of health related physical fitness and selected psycho-social parameters of the hearing impaired and visually impaired boys of this state.

ii) The study will provide a scientific base of evaluation of above mentioned parameters for the hearing impaired and visually impaired boys.

iii) The study will provide feedback information to physical educators and the authorities of the concerned institutions of the hearing impaired, visually impaired and normal persons and also such other various welfare organisations on the above aspects.

iv) The study will help to develop suitable physical education programme and norms for the hearing & visually impaired students.

v) The data available for the study may be useful for further studies.

vi) The data of the study may be useful for comparison by all concerned interested to develop physical fitness of such students.