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THE STUDY ON THE PHYSICAL AND PSYCHO-SOCIAL ISSUES OF PHYSICALLY CHALLENGED CHILDREN

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A physically challenged child is one which deviates from the normal physically, mentally or socially. It is one of the burning problems of the children." A crippled mind in crippled

body" represents the monstrous prejudice towards the physically challenged. The growing children cannot wait. The innocent smile of the disabled children will melt out heart but only for the moment. As soon as we move on, we forget the momentary pang of pity which had arisen in our heart. If only that fleeting emotion could be kept alive, the disabled children of India would find a new life. This study was to assess the physical and psychosocial problems of physically challenged children. The findings of the study showed that physically disabled children had more emotional and social problems than there physical disability. Assessment of severity of the problem showed that many children had a severe problem in physical, emotional and social aspects of their problem. Physically challenged children never escaped from their cocoons. But they do change slowly, there cannot be a magic pill for the same, time alone will do it. This study helped to view the child holistically. Physically challenged children's cry for help will give more inspiration to the society to think about the proverb "prevention is better than cure

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INTRODUCTION

Children's health is tomorrow's wealth.Child health is nation's wealth and hence to the investment on child health is equally important and to be counted as that of any investment in basic industries.

Children are cherished and loved and have a special place in our lives. But a large number of these children however cherished and loved become a cause for our sorrow because of their disability, illness or death. Now a day the disabled people are more visible in the society. In schools, universities, buses, offices, market place, park, theatre etc. A disability becomes a handicap when it interferes with one's ability to do what is expected at a particular time in one's life. The capacity to move on is one's fundamental characteristics of every living being. In one sense, therefore, every restriction on mobility could be viewed not only as a restriction on the living space of individual but an inroad into the very care of his life (Jillian 2008) A disabled child is an individual who has been prevented from full participation in usual activities of his age. It is a disadvantage for a given individual resulting from impairment or a disability that limit or prevents the fulfillment of a role that is normal for that individual.

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A physically challenged child is one which deviates from the normal physically, mentally or socially. It is one of the burning problems of the children." A crippled mind in crippled body" represents the monstrous prejudice towards the physically challenged. This attitude makes the disabled persons a displaced person". (Ash 2017). It is estimated that around the world, between 93 and 150 million children living with a disability (UNESCO 2015) and approximately 80 percent of those children are living in a developing country. The American Community Survey (ACS, 2016) estimate the overall rate of people with disabilities in the US population in 2016 was 12.8% for those of 5-17, the rate was 5.6%. The Global Burden Disease estimates the number of children aged 0-14 years experiencing moderate or severe disability at 93 million (5.1%) with 13 million (0.7%) children experiencing severe difficulties. (WHO 2018) In India, children with disabilities mainly come under the purview of the Ministry of Social Justice and Empowerment. In India, 1.67% of the 0-19 population has the disability. 35.29% of all people living with disabilities are children. Other estimates say that India has 12 million children living with disabilities. Only 1% of children with disabilities access to school and one-third of most disabilities are preventable. (Childline 2018)

Significance of the Study

As a result of disability, the child has to face a number of problems in his life and he is not able to perform the role expected of him in the society. It is a common condition which can give rise to a number of physical, emotional, social and adjustment problems in facing the children are tremendous (Rebecca C, 2017).

Physically challenged children possess the same basic need as everyone else. As we strive to develop new treatments are more effective prevention for childhood illness, we must simultaneously attend to the emotional as well as social needs of our affected children. Childhood conditions vary dramatically in their severity and impact on the quality of life of the child and his family.

The growing children cannot wait. The innocent smile of the disabled children will melt out heart but only for moment. As soon as we move on, we forget the momentary pang of pity which had arisen in our heart. If only that fleeting emotion could be kept alive, the disabled children of India would find a new life. So we have to think that "Our smile is their fortune". Various writers have mentioned various problems and coping strategy related to Physically challenged children. The researcher felt the need for gaining knowledge in these problems and thus felt interest in this study. Further it is felt that, this study will help the nurse to view the child holistically and thus can deal with the multiple aspects of the physically challenged children.

Statement of the Problem

A study to assess the psychosocial issues and challenges of physically challenged children attending a special school for handicapped in Mangalore.

Objectives of the study

- 1. To assess the physical problems of physically challenged children.
- 2. To assess the emotional problems of physically challenged children.
- 3. To assess the Social problems of physically challenged children
- 4. Find the association of psychosocial problems with demographic data.

Research Approach: Descriptive research design was selected to study the psycho social problems of physically challenged children attending a special school in Mangalore. The physical, emotional and social problems and how severely it is affected is assessed for physically challenged children. The study was conducted in a selected special school for handicap in Mangalore. 58 Physically challenged children between the age group of 10-16 years were taken as the population for this study. Purposive sampling technique was used to select the subject.

Tool: A closed-ended structured knowledge questionnaire was prepared to assess the physical, emotional and social problems of the physically challenged children. In order to establish the reliability, of the questionnaire split half method was selected which is a test for internal consistency. The Karl Person's correlation, coefficient was found to be significant. The purpose was to find out whether the statements were clear or unambiguous, whether the students could easily understand and also whether they were able to interpret it correctly. After establishing validity and reliability, the tool was finalised which had two sections: Sociodemographic characteristics and Assessment of problems data. The problems assessment data

consists of three dimensions; physical, emotional and social problems. There were three parts in each question. First part is Yes/No type. If the response is Yes, they have to proceed to the 2^{nd} part which requires responseson severity of the problem. If the problem area was identified as "No", no score was given and no need to answer 2^{nd} part.

Method of data collection: Permission to conduct the study was obtained from head of the Institution and finally, individual consent was taken from the samples before collecting the data. The researcher was present personally and explained the need and importance of the study to the participants for their cooperation. Data collection was over within 7 days. Care was taken to maintain the privacy and confidentiality.

Analysis: Data were captured and analyzed using the SPSS statistical package version 16. Descriptive analysis (frequencies, mean, median, mode and cross-tabulations) were used to analyze all items on the questionnaire and the problems to selected demographic variables were compared and tested statistically using "chi-square test.

RESULT

Out of the 58 physically challenged children, 52% were male children and 48% were female children. Majorities (44%) were in the age group between 14-16 years and 40% were in the age between 12-14 years and only 16% were below 12 years. Education of the parents showed that 48% of the parents have high school education and 16% were illiterate and only 12% had above high school education. Majority (74%) of the children belonged to Hindu religion and only 10% in Christian religion and remaining participants were in Muslin religion. (Table 1)

| Table 1 Distribution of study sample according to their | r | | | | | |
|---|---|--|--|--|--|--|
| Sociodemographic Characteristics | | | | | | |

| Variable | Ν | % |
|----------------------|----|----|
| Sex Male | 28 | 48 |
| Female | 30 | 52 |
| Age 14-16 years | 26 | 44 |
| 12-14years | 23 | 40 |
| 10-12 years | 9 | 16 |
| Education of Parents | | |
| Illiterate | 9 | 16 |
| Primary Education | 14 | 24 |
| High School | 28 | 48 |
| Above High School | 7 | 12 |
| Religion | | |
| Hindu | 43 | 74 |
| Christian | 6 | 10 |
| Muslim | 9 | 16 |
| Family | | |
| Joint Family | 23 | 40 |
| Nuclear Family | 35 | 60 |

Assessment of the Problem

Finding showed that 76% of the physically challenged children had emotional problem and 74% had social problems and only 65% had physical problems related to their physically challenged condition. (Figure 1)

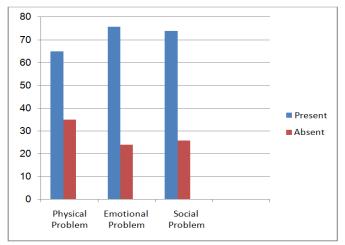


Figure 1 Distribution of the total problem in percentage

Area wise Assessment of the Problem

It is observed that in physical problem 39% of children had severe difficulty 33% had mild difficulty and only 28% had moderate difficulty where as in emotional problem 45% of children had severe problem 30% had mild problem and only 25% had moderate problem. It is also observed 43% of children had severe social problem 30% had mild and only 27% had moderate problem. (Figure 2)

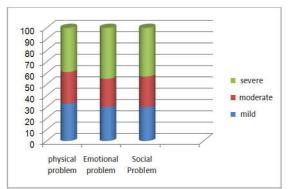


Figure 2 Percentage Distribution of the Severity of the Problem

Item wise Percentage Distribution of Problems and its Severity

Physical problem

Item wise distribution of problems and its severity showed that out of 58 physically disabled children 48 (82%) of the children experienced difficulty in climbing steps and stairs. 72% of them showed difficulty in household works. More than 60% of the participants showed difficulty in walking, bending, taking bath, wearing a dress, doing recreational activities and play with others. 35 members showed difficulty in play with others in that 66% got severe difficulty. (Table 2)

Emotional problem

In emotional problems, out of 58 members, 51(88%) disturbed when others tease them about their disability. Almost 80% of the participants have an emotional problem related to their body image, an inferiority complex about their disability, feeling of a burden to the family, and difficulty in setting and planning goals about their future life. 76% of them are feeling guilty in depending on others for their daily activities and 68% felt isolated in their life. More than 50% of the participants have a severe inferiority complex. (Table 2)

Social Problem

Related to the Social problem out of 58 members more than 40 members felt less cooperation from others, difficulty in taking leadership in life, difficulty in participating athletic meet, negative attitude towards social functions. Almost 68% of the participants have difficulty in mingling with others and participate in school picnic. (Table2)

Association of the Psychosocial problems with demographic variables

Findings showed that demographic factors like type of family has significant association with the psychosocial problems of the physically disabled children whereas factors like sex, age, religion, parent's education had no association with psychosocial problems (X^2 7.54, d.f= 3 p< 0.05)

| SI No | Problems | Mild | Moderate | Severe | Total |
|-------|-------------------------------|--------|----------|---------|---------|
| | | N(%) | N(%) | (N%) | (N%) |
| | Physical Problems | | | | |
| 1 | Climbing | 18(38) | 16(33) | | |
| 2 | Walking | 14(40) | 8(23) | 14(29) | 48(82) |
| 3 | Bending | 17(45) | 8(23) | 13(37) | 35(60) |
| 4 | Taking bath | 18(49) | 6(16) | 11(32) | 36(62) |
| 5 | Wearing dress | 14(40) | 8 (23) | 13(35) | 37(64) |
| 6 | Doing household work | 10(24) | 14(33) | 13(37) | 35(60) |
| 7 | Doing recreational activities | 8(21) | 18 (47) | 18 (43) | 42 (72) |
| 8 | Play with Others | 3(9) | 9(26) | 12(32) | 38(66) |
| | - | | | 23(66) | 35(60) |
| | Emotional Problems | | | | |
| 1 | Feels isolated | 17(32) | 19(24) | 17(44) | 39(68) |
| 2 | Body image | 17(39) | 9(21) | 19(41) | 45(78) |
| 3 | Guilty in dependence | 14(32) | 20(45) | 10(24) | 44(76) |
| 4 | Disturbed when others tease | 10(21) | 12(23) | 29(57) | 51(88) |
| 5 | Inferiority complex | 20(43) | 2 (3) | 34 (55) | 46 (80) |
| 6 | Burden to family | 11(29) | 13(34) | 15(36) | 39(68) |
| 7 | Setting and planning goals | 14(30) | 16 (35) | 16 (35) | 46(80) |
| | Social Problems | | | × / | × / |
| 1 | Attitude to Social functions | 15(36) | 8(19) | 19(44) | 42(72) |
| 2 | Mingling with sibling | 21(56) | 9(25) | 7(19) | 37(62) |
| 3 | Less Cooperation from others | 16(45) | 8(23) | 22(48) | 46(76) |
| 4 | Taking leadership in life | 13(32) | 21(51) | 9(16) | 43(74) |
| 5 | Participate in athletic meet | 2(5) | 12 (29) | 33(72) | 47(81) |
| 6 | Participate in school picnic | 3(9) | 11(29) | 15 (62) | 39 (68) |

| Table 2 Item v | vise Percentage | Distribution | of Problems a | and its Severity |
|----------------|-----------------|---------------|---------------|------------------|
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DISCUSSION

The purpose of the present study was to explore the major physical, emotional and social problems of the physically challenged children. Based on the findings presented in the analysis part, a discussion was made in line with the former studies conducted in the area here under. The result of the area wise assessment of the problem showed that the major problems of the physically challenged children in emotional and social area than physical area. There is a great need for support from the family and society. This study revealed the severity of the problem. 45% of children had the severe emotional problem and 45% faced a severe social problem and only 39% had the severe physical problem. According to Holtz &Tessman (2006), approximately 74% of children with physical disabilities have higher stress levels than the average children, whether the stress levels of these children are much higher is unknown, but studies have proven that they are, in fact, higher.

The study revealed the major physical problems facing the physically challenged children. These challenges are difficulty in climbing steps or stairs, walking, bending, take a daily bath, wearing a dress, doing household work and recreational activities and play with others. Bolemen (2015) showed that children with physical disability at increased risk for decreased physical functioning which could result in additional health problems that are associated with their primary disability. The residual effect of the disability consists of changes in the anatomical integrity (shortening, deformity) or changes in functional efficiency. Physical problems are also related to fatigue due to restricted movement and physical activity.

A number of emotional problems can occur in the physically challenged children like hyperactivity, irritability avoidance, and aggressive behavior. The major emotional challenge faced by the physically disabled children is the tease from others about their disability. Many of them feel that they are a burden to their family. Jayaseelan (2018) showed that physically challenged children are mocked by their peers. In this present study, 80% of the physically challenged children are facing inferiority complex related to their physical disability. They feel that they are in some way inferior to the normal child. They are terribly uncomfortable with the normal children's presence. The same percentage of the children had difficulty in setting plans and goals for their future life. The majority of children, regardless of whether they had a physical disability, were reasonably satisfied with their physical appearance or body image. These findings contrast with another researcher Jillian (2008), children with physical disability is always a constant worrier about their body image. They feel that people are curious and notice things that are different than what our society feels is normal.

Physical disability may cause problems in social interaction of the children. Although physically challenged children are accepted by the family, the child may feel a sense of shame and rejection from the society. They are worried about being accepted by friends and classmates. Social integration, representing all aspects of peer relationships, is a problematic health determinant for the adolescent with physical disabilities. In this present study, 76% of the children felt less cooperation from others. Several studies indicate that children with physical disabilities have friends, but their peer-oriented social activities outside of the school settings are lacking. (Male C, 2017)

Findings showed that demographic factors like type of family has significant association with the psychosocial problems of the physically disabled children whereas factors like sex, age, religion, parent's education had no association with psychosocial problems A study conducted by Stephen Heung (2017) showed that there is significant relationship between the structure of family and psychosocial problems of the children. So both the studies agree to the same point.

CONCLUSION

Physically challenged children never escaped from their cocoons. But they do change slowly, there cannot be a magic pill for the same, time alone will do it. This study helped to view the child holistically. Physically challenged children's cry for help will give more inspiration to the society to think about the proverb "prevention is better than cure". The WHO global disability action plan 2014-2021 is a significant step towards achieving health and wellbeing and human rights for people with disabilities. (WHO 2017). Physically challenged children possess the same needs as everyone else. As we strive to develop new treatments for effective prevention of childhood illness. We must simultaneously attend to the emotional as well as needs our affected children. Childhood conditions vary dramatically in their severity and impact on the quality of life of the child and family.

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