

Knowledge of Psychosocial Implications of Blindness & Low Vision in Children at Govt. Secondary School for Blind Bahawalpur

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ABSTRACT

Introduction

This article discusses several aspects of psychosocial adjustment to blindness and low-vision and proposes that the education of both the self and society are essential for positive adjustment. It exposes some of the general misunderstandings about visual impairment and demonstrates how these are partly responsible for the perpetuation of myths and misconceptions regarding the character and abilities of this population. It argues that confidence and self-esteem are deeply connected to ability and should be regarded as constructive elements of the ego usually manifested in different types of introverted or extroverted behavior

OBJECTIVES

.To find out the status of depression and anxiety among Children of Govt. Secondary School for Blind, Bahawalpur.

Study Design

It was a Cross - Sectional Descriptive Study

Setting

.The study was carried out in Higher Secondary School for blind, Bahawalpur

Period

Study was conducted from 16-03-2016 to 30-04-2016.All 40 Blind Children of Blind School Bahawalpur

Materials and Methods

Data was compiled and analyzed manually.The study was carried out in Blind School Model Town A, Bahawalpur and data was compiled and analyzed .Study was conducted from 16-03-2016 to 30-04-2016.All 40 students of higher secondary school for the blind, Bahawalpur.All the willing students present that day. Any student whom was not willing to be included in the study.This was an observational community. Out of 40 blind children 13 were found to be always depressed, 11 were depressed sometimes and 16 had no signs of depression. • Out of 40 students 21 were satisfied with family care, 10 were satisfied to some extent & 9 were not satisfied with family

care. • Out of 40 children 34 wanted brail machine, 4 wanted laptop & internet & 2 wanted musical instruments. • Children who feel difficulty in making new contacts and who feel uncomfortable in new environment very often were 49.5%, 22.35% had difficulty at times & 40.45% were not having any difficulty

Results

Among the studied blind children 60% of them were found depressed, 72 % were having difficulty in making new contact but 92% were satisfied with family care. A great proportion of blind children experience difficulty in their life and blindness or low vision does have psychological implications on children.

Conclusions A great proportion of blind children experience difficulty in their life and blindness or low vision does have psychological implications on children. Most of them feel difficulty in making contacts with new persons. Most of them are satisfied with the care of family and school administration.

Key Words: Psychosocial adjustment, individual differences, visual impairment & blindness.

Introduction:

Blindness is a devastating physical condition with deep emotional and economic implications.

The consequences affect not only the individual but also the family and the community. The loss of vision after illness or trauma causes major changes in lifestyle, habits of the blind person

which may result in problems in psychological adjustments.¹

WHO has proposed the following definition for blindness :A physical, psychiatric, intellectual or sensory impairment, whether temporary or permanent, provided that it lasts for a significant period of time, that limits the capacity to perform one or more essential activities of daily life and which can be caused or aggravated by economic and social environment.²

Blindness imposes restriction on the ability to move about and control over self and the environment in relation to it. Thus the inability in going out alone makes a blind person feel lonely and isolated. As a result, psychologically he develops a feeling of great fear while going out alone.³

Sighted people are often embarrassed when they first meet a blind person because they are confronted with the question of whether or not to shake hands with a blind person as he is unable to see his extended hand. Blind people are thus, aware of the embarrassment and clumsiness which their presence inspires in sighted people. Deliberate attempts by sighted people to delete all references to vision from their conversation and show over sympathetic attitude towards blind people may further deteriorate the situation which might lead to blind people avoiding much social contact and result in a feeling of isolation from society.

Facial expressions and body attitudes often give important clues to sighted indicating sarcasm, worry, humor and other emotions. The blind people lose the perception of these subtleties

and fail to develop the ability to use them in their speech. As a result of this certain blandness in speech develops. They also fail to sense the visual cues which tell whose turn is it to speak. Because of this the conversation may be marked with unintentional interruptions or embarrassingly long pauses.

Blindisms are those repetitive, compulsive or involuntary tics and mannerisms which affect the congenitally blind more frequently. These include a variety of rolling or blinking movements of the eyes, facial tics, and rhythmic, rocking movements of the head or the whole body which are in general repellant to the sighted.

Blind people may suffer from various psychological problems because of their disability which include

- Denial or non-acceptance of the disability
- Resentment or a feeling of bitterness about having become a victim of the disease
- Feeling of inferiority in comparison to healthy people or feeling of low self-esteem
- Anxiety and depression.

The present survey is based on a comprehensive study conducted at Blind School Bahawalpur to measure the status of depression or anxiety among the blind children. The rationale of this study was to determine the level of psychological impairment in the blind children & to identify the socio demographic characteristics and essential

rehabilitation steps that might improve the confidence & level of satisfaction. The study findings will provide knowledge about the quality improvement leading to understanding & identification of the principal for betterment of individual to highest possible level of functional ability.

MATERIALS & METHODS

The study was carried out in Blind School Model Town A, Bahawalpur and data was compiled and analyzed .Study was conducted from 16-03-2016 to 30-04-2016.All 40 students of higher secondary school for the blind, Bahawalpur.All the willing students present that day. Any student whom was not willing to be included in the study.This was an observational community. All the parameters like frequencies and percentages were calculated manually. Distribution of status was calculated according to variables (age, depression and anxiety) data was diagrammatically represented to make the information explicable. descriptive cross - sectional study. A pre-designed questionnaire was used for data collection. Children were interviewed after explaining the study and taking their verbal consent. Our questionnaire consisted of questions about logistic variables and questions regarding areas of satisfaction relating to time, care provider, facilities & user charges.Statistical analysis was performed manually in the department of

Observations and Results:

Out of 40 blind children 13 were found to be always depressed, 11 were depressed sometimes

and 16 had no signs of depression. (Table no. 1)

- Children who feel difficulty in making new contacts and who feel uncomfortable in new environment very often were 49.5%, 22.35% had difficulty at times & 40.45% were not having any difficulty. (Table no. 2)
- Out of 40 students 21 were satisfied with family care, 10 were satisfied to some extent & 9 were not satisfied with family care.
- Students were having difficulty in doing routine works were 23.7%, 18.4% found difficulty to some extent & 57.9 % were not having difficulty at all.

Table No 1 Depression among blind children.

Question	Strongly agree	Slightly agree	Dis agree
Finding of depression, helplessness,	31%	37%	32%
Trouble in sleep	34.2%	23.7%	42%
Feeling of little energy	31.6%	34.2%	34.2%
Thoughts of suicide	24%	24%	52%
Ever wanted to cry or sad	39%	18.4%	42%
Total	31.96%	27.6%	40.48%

- Out of 40 students, 9 had great feeling of dependence on others, 15 to some extent & 17 didn't have such issue.
- Among all students 61% of the blind children were satisfied with their lives, 5% were confused & 34% & were not satisfied.
- Among students 24% faced difficulty in concentrating, 31% to some extent and 45% didn't have any difficulty regarding this.
- In leisure time 78% of the children play cricket, 15.8% enjoy gossip, 31.6% listen to music & 15.8% do nothing. (Table no. 3)
- Out of 40 children 34 wanted brail machine, 4 wanted laptop & internet & 2 wanted musical instruments.

Table No 2 Implication in social behavior.

Question	Very often	Sometimes	Never
Difficulty in making contact	55.3%	15.8%	52%
Hesitation in making new contact	44.7%	28.9%	28.9%
Total	49.5%	22.35%	40.45%

Table no. 3 Children do during leisure time.

Activity	Percentage
Play cricket	26.3%
Listen music	15.8%
Gossip with friends	31.6%
Do nothing	15.8%
Other	10.5%

DISCUSSION

- The literature has shown that children with impaired vision have difficulty in making contacts and they like isolation. They exhibit stereotypic or "negative behaviors", such as anxiety, hovering, aggression (antagonistic behavior), or excessive rough- in the previous US study Celeste. He demonstrated neither limited social behaviors neither compromised social interactions.¹²

- The subject demonstrated a greater degree of social competence, and as a result, was less prone to social isolation than the Pakistani peer. What is the cause of such differences? In this study, it is impossible to answer this question due to the limitations of the study mentioned above.¹³ and tumble play that can have a detrimental effect

on social interactions. In contrast to the results of the subject

- However, according to our speculation that in the case of visual impairment, personality characteristics have greater impact on social development than cultural ones, In spite of good social contacts and family care, blind children are found confused and depressed in our part of world. It could be assumed that designing a highly individualized intervention program for development of social competence should be a priority for a blind child. It is important that such a program be independent of cultural influences. Even though the participant expressed less difficulty initiating and sustaining interactions with their peers than previous studies report, we find it is essential to enhance, the child's

participation in group interactions, and to work to secure the positive attitude of

peers toward the child's visual impairment.

Conclusions & Recommendations:

A great proportion of blind children experience difficulty in their life and blindness or low vision does have psychological implications on children. Most of them feel

We should create the sense & awareness in community to be normal & friendly to such children. There should be group projects in which blind children will work with those who are not blind. They should be encouraged and rewarded for their good works. There should be more special school & facilities for blind people so that they can become the useful part of community. There should be proper counseling session and behavior therapies for the blinds. There should be early recognition of psychological symptoms & finding to eliminate the causes before it's too late. They should be provided with more brail machines, syllabus books and modern educational facilities.

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