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STUDY OF ADJUSTMENT IN VISUALLY IMPAIRED AND NORMAL ADOLESCENTS

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Abstract

The main purpose of the present research is to examine relation between various areas of adjustment of visually impaired and normal adolescents. The sample consisted of 100 male respondents of both visually impaired and normal adolescents of the age group of 18-25 years of various rehabilitation centers of Ahmedabad city. The Bell-Adjustment inventory by R. K. Oza was used for data collection. The data of this research were statistically analyzed with mean, SD and 't' ratio. Results revealed that two group of adolescents differ significantly in respect to their home, health, social and emotional adjustment and overall adolescents. Normal adolescents have poor adjustment in their home adjustment, social adjustment, emotional adjustment & overall adjustment as compared to visually impair adjustment. Normal adolescents have better adjustment in health adjustment as compared to visually impair adjustment.

Keywords : visually impaired, home, health, social and emotional adjustment, overall adjustment.

INTRODUCTION

Adjustment is the condition of a person who is able to adapt to changes in their physical, occupational, and social environment.[1] In other words, adjustment refers to the behavioral process of balancing conflicting needs or needs challenged by obstacles in the environment. Due to the various changes experienced throughout life, humans and animals have to regularly learn how to adjust to their environment. Throughout our lives, we encounter various phases that demand continuous adjustment, from changes in career paths and evolving relationships to the physical and psychological shifts associated with aging. Each stage presents unique challenges and requires us to adapt in ways that support our growth and well-being.[1] For example, when they are stimulated by their physiological state to seek food, they eat (if possible) to reduce their hunger and thus adjust to the hunger stimulus. Successful adjustment equips individuals with a fulfilling quality of life, enriching their experiences as they navigate life's challenges.

HOME ADJUSTMENT

None of an individual born adjusted or maladjusted, it is his corporeal, psychological and sentimental perspectives that are influenced and concentrating by the matter of surroundings in which he found himself that adjustment or maladjustment steadily developed. Since ancient times family is the longstanding and the most crucial of all the societies that humanity has devised to control and unified his behaviour as he struggles to gratify his basic needs. In order to comprehend the impact of the family on the individual, it is vital to understand the family and its functions. It has been confirmed by many philosophers and researchers that if a family connection has been good, not only during the early days of life but also during adolescence, the human being will build up into a well-adjusted person. Socialization of the child is presumed to be an important role of family.

HEALTH ADJUSTMENT

The constructive or metabolic effectiveness of the human being is known as health. In people, health adjustment is the expertise of an individual or group to alter and self-overseeing while at the same time confronting mental, physical or social difficulties. In the 1948th constitution, the World wellbeing association clarify wellbeing in its more extensive sense. It can be characterized as a condition of finish physical, mental and social prosperity: not simply the nonattendance of infection or lightness. Wellbeing is that adjusted state of the living life form in which



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the fundamental, agreeable execution of the imperative capacities watches out for the safeguarding of the life form and the typical advancement of the person. The individual is said to be balanced concerning his/her wellbeing and physical improvement just if his/her substantial advancement and capacity are an inconsistency with other persons, equivalent of his ages and he doesn't feel any trouble in the process because of a few deformities or lack of ability in his physical organ. He appreciates the full chance of being balanced

SOCIAL ADJUSTMENT

Social Adjustment necessitates the expansion of social quality virtue in a human being. The social adjustment also requires that we should be social enough to live in harmony with other social beings and feel responsibility and commitment towards ones fellow beings socially and emotionally. In other words, we can say that social adjustment is an attempt made by a human being to cope with the norms, ethics and requirements of society in order to be accepted. Psychologists frequently make use of word adjustment to explain a variety of communal and interpersonal relations in civilization. Deficiency in psychosocial functioning is the scantling characteristic of schizophrenia. In individuals with bipolar disorder, a deficit of social adjustment is seen. In the viewpoint of Plato is man is a social animal. He stays in society and shaped perspectives about the individuals around us. It is the responsibility of every individual to make a conscious effort to behave in keeping with the norms of society so that we can adjust with others.

EMOTIONAL ADJUSTMENT

Emotional adjustment is a vital job because adjustment during emotions guides towards a normal behaviour, whereas mal-adjustment during emotions leads to abnormal behaviour. Emotions are always classified as the prime movers of behaviour. These encouraging states are accumulating houses of power, which may work for strong force and efficiency and strong interruption of mental life. There are many illustrations where even extremely intelligent people are not succeeding to manage their emotions and some average intelligent persons manage their emotions efficiently and pleasantly. It is known as emotional intelligence. During emotions, the person released enough energy to meet the challenges and help him to carry out very tough jobs which he cannot do in usual circumstances. Emotions arouse the self of an individual and make him conquer a sluggish position. But many times emotions may be a great obstacle for adjustment.

VISUAL IMPAIRMENT

Visual or vision impairment (VI or VIP) is the partial or total inability of visual perception. In the absence of treatment such as corrective eyewear, assistive devices, and medical treatment, visual impairment may cause the individual difficulties with normal daily tasks, including reading and walking. The terms low vision and blindness are often used for levels of impairment which are difficult or impossible to correct and significantly impact daily life. In addition to the various permanent conditions, fleeting temporary vision impairment, amaurosis fugax, may occur, and may indicate serious medical problems.

REVIEW OF LITERATURE

Chaudhary and Phogat (2010) studied adjustment of visually challenged adolescents in relation to their anxiety and degree of impairment and concluded that low anxious totally visually challenged males are better adjusted than high anxious males while there was no significant difference between low anxious females and high anxious females, low and high anxious partially visually challenged males and low and high anxious partially visually challenged females on adjustment.

Reema (2010) conducted a study of relationship between self-concept and adjustment of visually impaired adolescents studying in inclusive and special schools. The findings of the study revealed that the development of self-concept was better in inclusive schools. It was even better in the case of male adolescent than the female ones. The relationship between self-concept and level of adjustment in the case of female adolescents was better in inclusive school settings than their male counterparts. This trend was reversed in the case of relationship between those aspects in special schools

Gill (2014) investigated Emotional, Social and Educational Adjustment of Visually Handicapped Students of Special Schools students. By the application of mean, standard deviation, and t-test indicated is no significant difference between the educational, social and emotional adjustments of special school Students belonging to boys and girls.

Pant and Joshi (2016) revealed that children with visual impairment studying in inclusive setup are more emotionally stable than the children with visual impairment studying in special school.

Banoo et al. (2017) revealed that emotionally, physically deformed children have better adjustment than visually impaired. Physically deformed are more adjusted at School than visually impaired children.



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STATEMENT OF PROBLEM

In present research main purpose is to study and compare various areas of adjustment such as home adjustment, health adjustment, social adjustment, emotional adjustment and overall adjustment. The exact problem of this research is "study of adjustment in visually impaired and normal adolescent.

OBJECTIVES OF THE STUDY

- 1. To study the home adjustment between visually impaired and normal adolescents.
- 2. To study the health adjustment between visually impaired and normal adolescents.
- 3. To study the social adjustment between visually impaired and normal adolescents.
- 4. To study the emotional adjustment between visually impaired and normal adolescents.
- 5. To study the overall adjustment between visually impaired and normal adolescents.

HYPOTHESIS

1. There is no significant difference between visually impaired and normal adolescents in relation to their home adjustment.

2. There is no significant difference between visually impaired and normal adolescents in relation to their health adjustment.

3. There is no significant difference between visually impaired and normal adolescents in relation to their social adjustment.

4. There is no significant difference between visually impaired and normal adolescents in relation to their emotional adjustment.

5. There is no significant difference between visually impaired and normal adolescents in relation to their overall adjustment.

METHOD

• Sample :

Total 100 adolescents (50 visually impaired and 50 normal adolescent) were selected from various institute and NGOs. Convenience sampling technique was used for sample selection.

• Tool

In present research Bell's Adjustment Inventory (BAI-O) by Dr. Rk. K. Ojha was used. BAI-O was developed by R.K. Ojha in 1968 based on the original Bell's Adjustment Inventory. It contains 140 questions divided into four areas of adjustment (34 questions each), and the subject has to either choose yes or no for their response. The four areas of adjustment measured in BAI-O are home, health, social and adjustment. The test is meant for student from high school to post-graduate classes.

The reliability of the presented test has been investigated using the split-half method and the test-retest method using Spearman and Brown's formula. The split-half method showed high reliability of .84 for family adjustment, .81 for health adjustment, .87 for social adjustment, and .89 for emotional adjustment. Test-retest reliability was found to be as high as .91 for family adjustment, .90 for health adjustment, .89 for social adjustment, and .92 for emotional adjustment.

The validity of the presented test was investigated with K. Kumar's adjustment modifier. In which, the validity of family adjustment was .82, health adjustment .89, social adjustment .82, and emotional adjustment .81. Following is the new scoring system for the new three-point alternative response.

Sr. No.	Type of Items	Always	Sometimes	Never
I.	Marked Always	2	1	0
II	Marked Never	0	1	2

The lessor score, the better is the level of adjustment.

Procedure for Data Collection

Permission was taken from the institute for data collection and purpose of present research was explain to the authority of the institute. Before data collection consent was also taken from participants and authority of institute. Participant and authority of institute were informed regarding confidentiality of the data. Before data collection report was established with participants. Adjustment inventory was administered in individually setting. After completion of the data collection data scoring was done by the scoring key of inventory then data was enter in excel sheet for data analysis.

STATISTICAL ANALYSIS

In present research to analysed the data mean, SD and t-test was used. Each hypothesis was tested at 0.01 and 0.05 level of significance.



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RESULTS AND DISCUSSION

Table-1

Mean, SD and t-value of home adjustment of visually impaired and normal adolescents

Group	Ν	Mean	SD	t-value	level of significance
visually impaired adolescents	50	15.06	4.85	3.08	0.01
normal adolescents	50	18.06	4.90		

The t-value of visually impaired adolescents and normal adolescents in relation to home adjustment is 3.08, which is significant at 0.01 level. Therefore, the null hypothesis "There is no significant difference between visually impaired and normal adolescents in relation to their home adjustment." is rejected. It indicates that significant difference exists between visually impaired adolescents and normal adolescents in relation to home adjustment. The mean scores of visually impaired adolescents and normal adolescents on home adjustment are 15.06 and 18.06 with SD of 4.85 and 4.90 respectively. Hence, visually impaired adolescents have better home adjustment then normal adolescent.

Table-2

Mean, SD and t-value of health adjustment of visually impaired and normal adolescents

Group	N	Mean	SD	t-value	level of significance
visually impaired adolescents	50	18.06	4.90	3.01	0.01
normal adolescents	50	15.36	4.02		

The t-value of visually impaired adolescents and normal adolescents in relation to health adjustment is 3.01, which is significant at 0.01 level. Therefore, the null hypothesis "There is no significant difference between visually impaired and normal adolescents in relation to their health adjustment." is rejected. It indicates that significant difference exists between visually impaired adolescents and normal adolescents in relation to health adjustment. The mean scores of visually impaired adolescents and normal adolescents on health adjustment are 18.06 and 15.36 with SD of 4.90 and 4.02 respectively. Hence, normal adolescents have better health adjustment then visually impaired adolescent.

Table-3

Mean, SD and t-value of social adjustment of visually impaired and normal adolescents

Group	Ν	Mean	SD	t-value	level o significance
visually impaired adolescents	50	12.70	4.01	4.17	0.01
normal adolescents	50	15.86	3.55		

The t-value of visually impaired adolescents and normal adolescents in relation to social adjustment is 4.17, which is significant at 0.01 level. Therefore, the null hypothesis "There is no significant difference between visually impaired and normal adolescents in relation to their social adjustment." is rejected. It indicates that significant difference exists between visually impaired adolescents and normal adolescents in relation to social adjustment. The mean scores of visually impaired adolescents and normal adolescents on social adjustment are 12.70 and 15.86 with SD of 4.01 and 3.55 respectively. Hence, visually impaired adolescents have better social adjustment then normal adolescent.

Table-4

Mean, SD and t-value of emotional adjustment of visually impaired and normal adolescents

Group	Ν	Mean	SD	t-value	level of significance
visually impaired adolescents	50	11.96	3.64	5.33	0.01
normal adolescents	50	15.80	3.57		

The t-value of visually impaired adolescents and normal adolescents in relation to emotional adjustment is 5.33, which is significant at 0.01 level. Therefore, the null hypothesis "There is no significant difference between visually impaired and normal adolescents in relation to their emotional adjustment." is rejected. It indicates that significant difference exists between visually impaired adolescents and normal adolescents in relation to emotional adjustment. The mean scores of visually impaired adolescents and normal adolescents on emotional



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adjustment are 11.96 and 15.80 with SD of 3.64 and 3.57 respectively. Hence, visually impaired adolescents have better emotional adjustment then normal adolescent.

Table-5

Mean, SD and t-value of overall adjustment of visually impaired and normal addressments						
Group	Ν	Mean	SD	t-value	level of significance	
visually impaired adolescents	50	57.78	15.71	2.66	0.01	
normal adolescents	50	65.08	11.39			

Mean, SD and t-value of overall adjustment of visually impaired and normal adolescents

The t-value of visually impaired adolescents and normal adolescents in relation to overall adjustment is 2.66, which is significant at 0.01 level. Therefore, the null hypothesis "There is no significant difference between visually impaired and normal adolescents in relation to their overall adjustment." is rejected. It indicates that significant difference exists between visually impaired adolescents and normal adolescents in relation to overall adjustment. The mean scores of visually impaired adolescents and normal adolescents on overall adjustment are 57.78 and 65.08 with SD of 15.71 and 11.39 respectively. Hence, visually impaired adolescents have better overall adjustment then normal adolescent.

CONCLUSIONS

- Significant difference exists between visually impaired adolescents and normal adolescents in relation to home adjustment. Hence, visually impaired adolescents have better home adjustment then normal adolescent.
- Significant difference exists between visually impaired adolescents and normal adolescents in relation to health adjustment. Hence, normal adolescents have better health adjustment then visually impaired adolescent.
- Significant difference exists between visually impaired adolescents and normal adolescents in relation to social adjustment. Hence, visually impaired adolescents have better social adjustment then normal adolescent.
- Significant difference exists between visually impaired adolescents and normal adolescents in relation to emotional adjustment. Hence, visually impaired adolescents have better emotional adjustment then normal adolescent.
- Significant difference exists between visually impaired adolescents and normal adolescents in relation to overall adjustment. Hence, visually impaired adolescents have better overall adjustment then normal adolescent.

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