

## Enhancing the Well-Being of Locomotor Disabled People

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### ABSTRACT

Locomotor disabilities are one among the many disabilities in which the body movements are hampered. These disabilities can have detrimental effects on the functioning of individuals. It can affect the self-esteem of an individual and consequently lead to poor adjustment and sometimes maladjustment. Considering the detrimental effects of locomotor disabilities on the effective functioning of individuals the researchers have conceptualized the present study. This investigation aim is to study how intervention in terms of adjustments and aspiration can help in enhancing the well being of locomotor disabled persons. This study is conducted in two phases. In the 1st phase 100 locomotor disabled people from Vocational Rehabilitation Centre for Physically Disabled, Hyderabad were approached and using standardized tools their adjustment and level of aspiration was obtained. Subsequently after analyzing the data it was found that 63 people had poor adjustment and low level of aspiration. Appropriate psychological counseling interventions were planned and were provided to these subjects on individual basis. Once again the adjustment questionnaire and level of aspiration questionnaire were administered, between pre and post measures of adjustment and level of aspiration in which a significant difference was found. Thus, this study revealed that intervention like counseling helps to enhance the well being of people with locomotor disability.

**Keywords:** *Locomotor disability, Adjustment, Level of Aspiration, Counseling*

**D**isability can be defined as any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being.

Locomotor disability is defined as a person's inability to execute distinctive activities associated with moving both himself and objects, from place to place and such inability resulting from affliction of musculoskeletal and/or nervous system. In other forms of disabilities such as visual impairment an individual may resign and limit himself/herself to certain tasks, but in the case of the locomotor disabilities, the individual is fit in every other sense except the mobility. When easy movement is disarming a person from performing

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his/her function effectively it causes some amount of stress in them and comes in their way of achievements. They can have detrimental effect on his adjustment and aspiration.

From the beginning, mythical perceptions and stereotypical attitudes have portrayed individuals with disabilities as different, aberrant, deficient, incompetent, and more. But like gender and ethnicity, a disability is simply one of many natural characteristics of being human. There have always been people with disabilities and differences in the world, *and there always will be*. Disability is the disadvantage or restriction of activity caused by a contemporary social organization which takes no or little account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities. Physical disability is therefore a particular form of social oppression." (Union of Physically Impaired Against Society, 1981). Therefore it is the responsibility of the psychologists and other medical professionals to enhance the well being of these disabled.

Well-being is a state of human existence in which a person's basic needs are adequately met and satisfied. It is a broader concept, which deals with many aspects such as self confidence, adjustment, self esteem, level of aspiration, self concept etc. This article majorly concentrates on improving adjustment level and aspiration level of the locomotor disabled people by intervention techniques.

Research has proved that interventions such as role salience intervention, peer interaction intervention, and academic support intervention help to enhance the social acceptance of adolescents with physical disabilities. (Mpofu.E 2009)

### ***Adjustment***

Adjustment can be defined as the process by which living organism maintains a balance between its need and the circumstances that influence the satisfaction of needs (Shaffer.L.S.1985). Adjustment plays an important role in one's life as it helps to adapt to different environment. Proper adjustment leads to better interpersonal relations, less use of defense mechanism etc. Adjustment includes sexual adjustment, emotional adjustment, social adjustment, and health adjustment.

Turning to Physical disability it can be categorized as a major cause of maladjustment and its severity can be related to an increased likelihood of being single. Single people with physical disabilities are more depressed than those who have a partner. Studies also suggest that among couples where a partner has a physical disability marriage may add burdens which do not exist in more normal relationships. (Taleporos .G & McCabe.M.P.2013)

Coming to the body esteem the research demonstrated that people with more severe physical disability experienced lower levels of body esteem than people with able-bodies. They devalued all aspects of their body more than able-bodied. For males with physical disability, the unique predictors of high body esteem were decreased need for assistance, higher self-esteem, lower depression and higher sexual esteem; for females with physical disability, the

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unique predictors were higher self-esteem and higher sexual esteem (Taleporos. G & McCabe.M.P.2013).

Other findings suggest that the adolescents with physical disability are uninformed or misinformed about general sexual knowledge; they have many misconceptions about sexuality and their disability and therefore have less sexual adjustment. (Berman Helene & Harris Dorothy, 2009).

### *Level Of Aspiration*

Level of aspiration is an individual's future expectation or ambition. It refers to the estimate of one's future in a given task. In today's world of competitiveness there is not a single individual who is devoid of ambition in some or other forms. A great deal of individual variation is found with regard to goal setting behavior. People with an equal amount of ability may also differ in their goal setting behavior and people with a disability tend to have low level of aspiration.

Developments in recent years have shown an increasing interest in the educational needs and aspirations of disabled adults. The findings in this area indicate that, usually, the earlier someone had acquired a disability, the less likely they were, as adults, to have achieved professional or higher qualifications, and that the level of qualifications reached among women being surveyed was particularly low. (Preece Julia, 1995)

## **METHODOLOGY**

### *Aim*

- To enhance the well being of locomotor disabled people through psychological counselling

### *Objectives*

1. To see whether men and women with locomotor disability differ significantly in their adjustment and level of aspiration.
2. To assess the adjustment level and level of aspiration of girls.
3. To study the effect of intervention (psychological counseling) on improving the adjustment and level of aspiration of locomotor disabled person.

### *Hypotheses*

1. Men and women with locomotor disability differ significantly in their adjustment and level of aspiration.
2. Intervention will help to improve adjustment and level of aspiration among locomotor disabled persons.

### *Sample*

The sample was taken from Vocational Rehabilitation Center for Physically Disabled, Hyderabad. The study was conducted in two phases. In the first phase 100 people (50 men &

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50 women) with locomotor disability in the age group 20yrs to 30 yrs were chosen and the two tests were administered on them. After the scoring was done, the Mean and SD were calculated separately for boys and girls. On the basis of Mean + 1SD and Mean – 1SD, 27 boys and 36 girls were found to have poor adjustment and low levels of aspiration.

*Note: Some among the sample were found to have poor adjustment but higher level of aspiration and vice versa. These people were not included in the sample*

### **Tools Used**

1. Global Adjustment Scale (GAS)
2. Level of Aspiration Measure (Bhargava.M & Shah.M.R)

### **Procedure**

The study was conducted in three phases: Pre test, Intervention and Post test

#### **Pre test:**

In this phase the tests of adjustment and level of aspiration were administered on 100 people (50 men & 50 women) and scoring was done according to the manuals, these scores were taken as criteria to separate people with poor adjustment and good adjustment and similarly people with low aspiration level and high aspiration level were also separated. On this basis 27 Boys and 36 Girls who were found to have very poor adjustment and low level of aspiration. Only these subjects were chosen for the intervention program.

#### **Intervention program:**

In this phase an intervention program was planned according to the needs of the individuals i.e for 27 Boys and 36 Girls who had poor adjustment and low level of aspiration. If there was poor adjustment in social aspects an intervention was planned to improve their social skills. The person with poor social adjustment was helped to improve their communication skills, interpersonal skills, conflict management skills and encouraged them to make small attempts to mingle in public etc. Similarly the emotional and health adjustment was also taken care of. These 63 people were given appropriate psychological counseling. This intervention program was conducted in about 10-15 sessions. Each session was of 1- 1.5 hrs for a period of one month depending upon the requirement of the subject.

Similarly in the level of aspiration also they were helped to set realistic goals and a SWOT analysis was done and the subjects were helped to overcome their problems and change their outlook.

#### **Post test:**

After the intervention program has been completed and the researcher gained some confidence about the subject, the post test was conducted again by administering the two scales i.e. the adjustment scale and the level of aspiration scale. The statistical analysis was again done to find out the adjustment and level of aspiration scores. The Means and SD's were calculated to see whether there are any changes in these 63 people and were compared to Means of the pre test scores.

**Scoring:**

The adjustment scores were calculated by using transparent Stencil Scoring key. Each dimension has a sten score from 1-10. Sten score from 1-2 indicates excellent adjustment, 3-4 indicates good adjustment, 5-6 indicates average adjustment, 7-8 poor adjustment and 9-10 unsatisfactory adjustment.

The level of aspiration provides for three types of scores 1. Attainment Discrepancy Score (ADS) 2. Goal Discrepancy Score, (GDS), and 3. The Number of Times The goal Reach Score (NTRS).

Attainment Discrepancy Score (ADS) of the subject is measured. The ADS is the difference between aspiration and the achievement. It is calculated by subtracting the expected performance from the actual performance. A positive ADS indicates the aspiration is high and a negative ADS indicates that the aspiration of the person is low. High aspiration and low aspiration was calculated in this way.

Goal Discrepancy Score (GDS) is measured by the difference between actual score on the previous trial and goal set up of the next trial. If GDS is positive suggests that one's goal is higher and if the GDS is negative it suggest that one's goal is low.

Number of Times the Goal Reach Score (NTRS) is obtained by the number of times where actual score is equal or more than the expected score.

*Note: As the purpose of the study is to measure the difference between aspiration and achievement. the GDS and NTRS scores have not been taken into consideration.*

**Statistical Methods**

The data analysis was done using the Pearson correlation method and t-ratio.

**RESULTS AND DISCUSSION**

After the questionnaires were collected back, the percentages of boys and girls with poor adjustment in different areas were calculated. These percentages are depicted in the following table 1:

**Table-I: Percentages of Boys and Girls with poor adjustment in different areas of adjustment**

| Area         | Boys | Girls |
|--------------|------|-------|
| Emotional    | 42%  | 50%   |
| Family       | 30%  | 32%   |
| Health       | 48%  | 60%   |
| Occupational | 32%  | 36%   |
| Sexual       | 68%  | 75%   |
| Social       | 41%  | 57%   |

The Mean, SD and t-ratios of the adjustment scores are calculated for the pre test of boys and girls and are presented in the following table-2

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**Table- II: Means, SD and t-ratio's of Boys and Girls on different areas of adjustment**

|              | Boys  |      | Girls |      |         |
|--------------|-------|------|-------|------|---------|
| Area         | Mean  | SD   | Mean  | SD   | t-ratio |
| Emotional    | 28.35 | 5.06 | 27.17 | 5.88 | 3.84* * |
| Family       | 24.56 | 4.10 | 23.33 | 4.42 | 1.120   |
| Health       | 23.40 | 3.32 | 20.30 | 2.99 | 3.41**  |
| Occupational | 22.30 | 3.06 | 21.57 | 3.87 | 1.500   |
| Sexual       | 27.13 | 4.96 | 25.70 | 3.13 | 1.67    |
| Social       | 26.02 | 3.13 | 23.10 | 3.99 | 2.30*   |

**\*\* Significant at 0.01 level**

**\* Significant at 0.05 level**

Further the Mean, SD and t-ratio of the pre test was calculated between boys and girls on the level of aspiration and the results are presented in table-3

**Table-III: Mean, SD and t-ratio of boys and girls on level of aspiration**

| Boys |      | Girls |      |         |
|------|------|-------|------|---------|
| Mean | SD   | Mean  | SD   | t-ratio |
|      | 0.60 | 0.7   | 0.94 | 2.41*   |

**\* Significant at 0.05 level**

After an intervention was provided to enhance the subjects adjustment in different areas and their level of aspiration ,a comparison was made between the pre-test and the post test by calculating Mean, SD and t-ratio. The results are shown in the following table -4

**Table-IV: Mean, SD and t-ratio's of pretest and post test on different areas of adjustment**

| Area      | Pre test |      | Post test |      | t-ratio |
|-----------|----------|------|-----------|------|---------|
|           | Mean     | SD   | Mean      | SD   |         |
| Emotional | 26.03    | 5.88 | 30.57     | 5.05 | 3.09* * |
| Family    | 28.03    | 2.28 | 29.06     | 3.32 | 1.45    |
| Health    | 24.02    | 2.88 | 26.07     | 3.16 | 2.34*   |
| Occp      | 22.18    | 2.51 | 26.08     | 2.24 | 1.62    |
| Sexual    | 29.59    | 4.13 | 30.02     | 5.06 | 1.14    |
| Social    | 26.91    | 2.08 | 28.01     | 3.41 | 2.52*   |

**\*\* Significant at 0.01 level**

**\* Significant at 0.05 level**

Similarly the Mean SD, and t-ratio was calculated for the pretest and post test scores of level of aspiration and the results are depicted in the following table-5

**Table-V: t-ratio of pre test and post test on level of aspiration**

| Pre test |      | Post test |      | t-ratio |
|----------|------|-----------|------|---------|
| Mean     | SD   | Mean      | SD   |         |
| 0.6      | 0.62 | 0.8       | 0.82 | 2.20*   |

**\* Significant at 0.05 level**

## **DISCUSSION**

Table I indicates the percentages of boys and girls in different areas of adjustment. As it is seen the boys have better adjustment than the girls in all the areas. However, when the t-ratios have been calculated (Table II) it has been found that there is a significant difference between the boys and girls in the areas of emotional, health and social i.e. the boys are better adjusted in these areas when compared to the girls. The emotional adjustment and health adjustment is significant at 0.01 level and the social adjustment is significant at 0.05 level.

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Table III shows the results of level of aspiration. As seen from the table the t-ratio is significant at 0.05 level. Here also boys are having higher level of aspiration compared to the girls.

An intervention programme, planned according to the need of each individual subject for enhancing the adjustment and the level of aspiration was provided and a post test was again conducted.

Table IV indicates the t-ratios of pre and post tests. After the intervention, it was found that the subjects improved significantly in their Emotional, Health and Social adjustment after the intervention programme i.e. the intervention helped them to improve their adjustment levels.

Similarly table V shows significant improvement in the level of aspiration of the subject indicating that the intervention program helped them to set realistic goals.

### CONCLUSION

The study has shown that the intervention program enhanced the adjustment and the level of aspiration among the locomotor disabled people i.e. the hypothesis has been proved as the tests of pre test and post test shows significant difference.

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