

Research Paper

Self-concept among adults with intellectual disability in relation to quality of life

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ABSTRACT

Education and training of persons with intellectual disabilities are now not limited to only very basic needs of life. Today, there is a growing concern of an ideal quality life for persons with disabilities which has also been supported by the Rights of Persons with Disabilities Act, 2016 and as of now it is their inherent right. In the present study investigator tried to find out relationship between self-concept and quality of life among adults with intellectual disability (AwID), for which sample of 50 students were selected using purposive sampling techniques from Government Rehabilitation Institute for Intellectual Disabilities (GRIID), Chandigarh falling under the category of mild intellectual disability (IQ- 50-70). Descriptive research was employed in which Self Concept Scale developed by Ahluwalia & Singh (1986) and World Health Organization Quality of Life (WHOQOL- BREF (1996) to assess self-concept and quality of life respectively were used. Product moment correlation and t-test were used which revealed that males exhibited a higher level of self-concept and quality of life compared to female adults with intellectual disability. The results also reveal that with increase in the age of adults with intellectual disability, there comes a wisdom of maturity and responsibility, which might lead to have a clearer idea about self-concept and quality of life. Thus, there is a positive correlation between self-concept and quality of life among adults with intellectual disability leading to conclusion that AwID who have a better self-concept will have the better quality of life. Hence, these two variables are positively correlated.

Keywords: *Adults with intellectual disability, self-concept, quality of life.*

A normal healthy child develops in all the aspects of human society but some children differ from average or normal children in terms of their bodily, psychological, social, educational, emotional and behavioral features to an extent that they require special educational services to develop to their optimum capacity. Adults with intellectual disability often encounter exclusive range of challenges that are related with having a disability. These can include low expectations, reduced prospects and biasness in various

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areas of life. They may face rejection from the society, anxiety with the behavior that others exhibit towards their disability. Intellectual disability is one among the most challenging disabilities (Nazli, 2014). Adults with mild intellectual disability (ID) often encounter demanding social interactions and frequently employ maladaptive managing strategies to achieve these interactions. There is a scarcity of data base research on self-concept among persons with intellectual disabilities. Persons with mild and moderate intellectual disability have an IQ ranging from 35-70 and exhibit limitation in adaptive abilities and communication skills. It surfaces that some research studies with children with developmental disabilities have been slow because of procedural issues. Quality of life (QoL) measurement gives information regarding the health status beyond diagnosis, impact of the disease and its impact on different domains of life (Geyh et al, 2010). With support of trained professionals there is a wide scope in the area of self-concept and self-esteem where people disability can take a lead (Ahmad, 2015).

The QoL for adults with intellectual disabilities (AwID) is basically determined by the same or similar indicators that determine the quality of life for the general population, but there are specific characteristics that are associated with the developmental characteristics of these individuals, their position in the society and their interaction with the community. As many authors point out (Schalock, 2007; Schalock & Verdugo, 2002; Schalock & Keith, 2004), the quality of life in these individuals are primarily determined by: emotional stability, personal relations, physical and material well-being, personal development, the degree of autonomy and the possibility of self-determination, social inclusion and realization of their rights. A number of studies have been carried out all over the world to establish the association between self-determination and career opportunities in relation to the quality of life among people with intellectual disability. A correlation between self-determination and QoL have been demonstrated by various researches (Wehmeyer & Schqartzs, 1998).

Objectives

1. To study self-concept and QoL among AwID with respect to gender and age.
2. To find out the correlation between self-concept and QoL among AwID.

METHODOLOGY

Sample

AwID, IQ ranging 50-70 (mild intellectual disability) studying at Government Rehabilitation Institute for Intellectual Disabilities (GRIID), Chandigarh, were included in sampling frame. Using purposive sampling techniques 50 subjects were selected as sample that were falling under inclusion criteria.

Design

In the present study researcher employed descriptive survey research.

Tools

Self-Concept Scale developed by Ahluwalia and Singh (1986) and published by National Psychological Corporation; Agra was used. The test comprises eighty items in all with 'Yes' or 'No' responses and fourteen lie items to identify check if the children have filled it accurately or not. It is verbal paper-pencil test consisting of six sub-scaled.

World Health Organization Quality of Life test was used, which consists of a 26-question assessment. It yields a multi-dimensional profile of scores across various domains of QoL.

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Procedure

After, the clearance of research and ethics committee of GRIID, investigator sought pre-requisite permission from the concerned authorities of the institution and selected subjects on the basis of inclusion criteria. Investigator took informed consent from the subjects, as all the subjects were above 18 years of age and hence, legally competent to take their own decisions. Given the complications of their disability conditions, the investigator read out clearly all the details in the consent form to the subjects making them understand, that the information and conclusion thus drawn from this study shall remain confidential. To ease the comprehension the investigator tried to seek out the Hindi version of both the tools, but was only able to get Hindi version of the SCS tool. Before starting the data collection subjects were made clear to answer the questions without any prejudice for the results. The selected subjects were requested to complete the questionnaire on self-concept and quality of life. Wherever subjects faced any problem in understanding of the questions, investigator helped them with easiest language possible.

RESULTS

Table 1 represents Skewness and Kurtosis for self-concept among AwID on the basis of gender

Domains of Self Concept	N	Mean	SD	Skewness	Kurtosis
Behavior	50	11.64	2.58	-1.14	0.89
Intellectual & School Status	50	11.50	3.75	-0.78	0.31
Physical Appearance & Attributes	50	9.02	1.99	-0.32	-0.41
Anxiety	50	7.66	2.80	-0.39	-1.09
Popularity	50	7.40	1.76	-0.06	-1.06
Happiness & Satisfaction	50	6.88	1.04	-0.31	1.59
Total Self Concept	50	44.34	7.92	-0.44	-0.31

Table 2 represents Skewness and Kurtosis for QoL among AwID on the basis of gender

Domains of Quality of Life	N	Mean	SD	Skewness	Kurtosis
Physical Health	50	22.16	2.94	-0.05	-0.89
Psychological Health	50	19.84	3.50	-0.16	-0.85
Social Relationships	50	9.92	1.70	-0.29	-1.22
Environmental Health	50	25.92	4.69	-0.23	-1.19
Total Quality of Life	50	77.84	11.01	-0.23	-1.14

The values of skewness were found to lie within ± 1 range. Value within ± 1 range could be accepted as having skewness of moderate range (Croxtton & Cowden, 1956). In the present study, the total sample is N= 50. Table 1 and Table 2 shows the values of mean, SD, skewness and kurtosis of self-concept and quality of life for both the genders respectively indicating that the distribution of scores is normal as all the values lies between ± 1 , but social science research it is acceptable between the range of ± 2 . This satisfies the assumption of normality. As data is showing normal distribution, it justifies the use of parametric test even is the N is small.

Table 3 represents Level of Self Concept among AwID

Score	High	Above Average	Average	Below Average	Low	Extremely Low	Total
Male	0 (-)	1 (2%)	9 (18%)	16 (46%)	4(12%)	5 (36%)	35 (70%)
Female	0 (-)	0 (-)	0 (-)	8 (53%)	5 (34%)	2 (13%)	15 (30%)
Overall	0 (-)	1 (2%)	9 (18%)	24 (48%)	9 (18%)	7 (14%)	50 (100%)

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The results highlight that there was hardly any participant in the sample who could score high score in self-concept. Whereas in females there was hardly any participant who could score above average in self-concept as compared to males (2%). The male could score 18% in average self-concept as compared to females who couldn't score any. However, 53% of the female participants could prove to have below average self concept as when compared to males who could make only to 46% of the sample. The female participants could show 34% in low self concept, while for extremely low there were only 13% females who could show the self concept. The male participants could show 36% in extremely low self concept.

Figure 1 analysis of Level of Self Concept among AwID

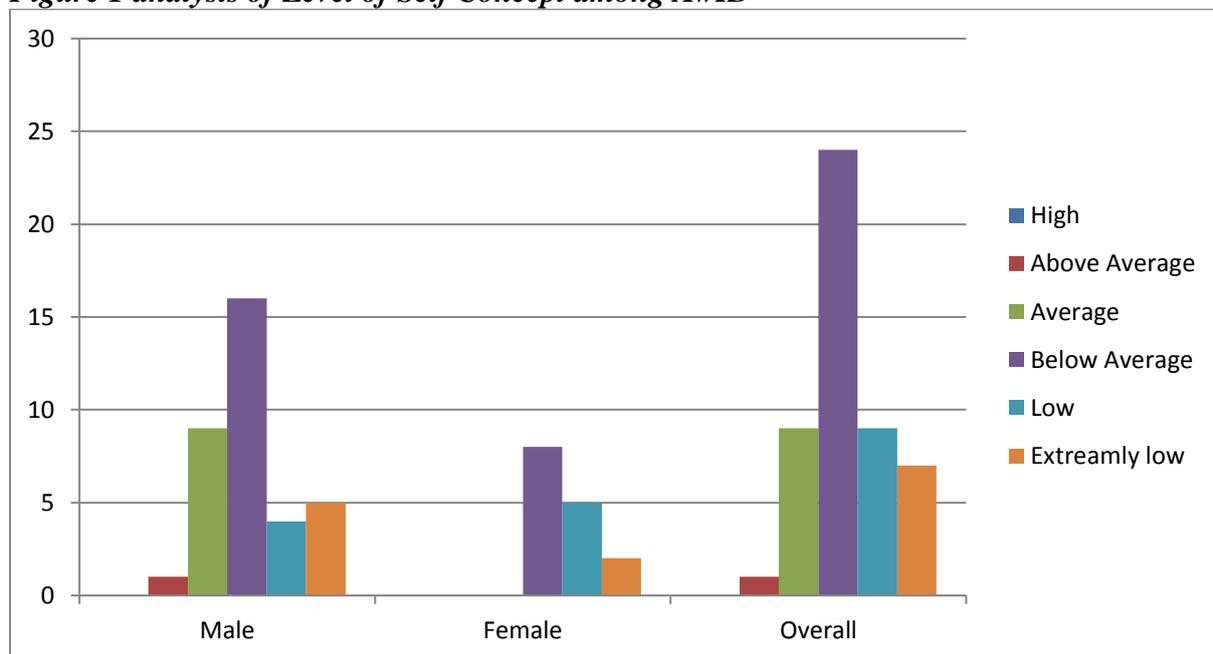


Table 3 shows Mean and SD of self-concept among AwID on the basis of gender

Domains of Self Concept	Gender	N	Mean	SD	t-value	p-value
Behavior	Male	35	12.14	2.34	2.187	.034*
	Female	15	10.47	2.80		
Intellectual & School Status	Male	35	11.60	3.87	.285	.777
	Female	15	11.27	3.58		
Physical Appearance & Attributes	Male	35	9.17	2.18	.817	.418
	Female	15	8.67	1.50		
Anxiety	Male	35	8.40	2.74	3.089	.003**
	Female	15	5.93	2.19		
Popularity	Male	35	7.74	1.70	2.182	.034*
	Female	15	6.60	1.68		
Happiness & Satisfaction	Male	35	6.97	0.98	.946	.349
	Female	15	6.67	1.18		
Total Self Concept	Male	35	45.97	7.82	2.324	.024*
	Female	15	40.53	6.98		

*Significant at the 0.05 level, **Significant at the 0.01 level.

The range of SD for male and female for Behavior domain of Self Concept was 0.46, the SD of various domains of self Concept depicts that there was a minor range of deviation between male and female, which depicts the homogeneity in data with low variance. The

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highest range of SD has been found in physical appearance and attributes (0.68), which might be because of difference in mood and opinion about self. The range of SD in total Self Concept was 5.44. The SD has been found to be higher in females in all the domains of self-concept indicating that the data was scattered.

Table 4 Shows Mean and SD of QoL among AwID on the basis of gender

Domains of Quality of Life	Gender	N	Mean	SD	t-value	p-value
Physical Health	Male	35	22.63	3.12	1.755	.086
	Female	15	21.07	2.22		
Psychological Health	Male	35	20.43	3.18	1.864	.068
	Female	15	18.47	3.91		
Social Relationships	Male	35	10.11	1.59	1.241	.221
	Female	15	9.47	1.92		
Environmental Health	Male	35	26.54	4.18	1.449	.154
	Female	15	24.47	5.60		
Total Quality of Life	Male	35	79.71	10.23	1.887	.065
	Female	15	73.47	11.86		

The range of SD was found to be highest in Environmental Health (0.92) domain for males and females in quality of life, and then followed by psychological health (0.72), social relationships (0.34) and physical health (-0.9). This shows that there was a minor range of deviation between males and female, depicting homogeneity in data with low variance.

Table 5 shows Mean and SD of self-concept among AwID on the basis of age

Domains of Self Concept	Age	N	Mean	SD	t-value	p-value
Behavior	18-25	30	10.67	2.82	3.661	.001**
	26-40	20	13.10	1.12		
Intellectual & School Status	18-25	30	11.27	3.61	.534	.596
	26-40	20	11.85	4.03		
Physical Appearance & Attributes	18-25	30	9.07	1.80	.201	.842
	26-40	20	8.95	2.31		
Anxiety	18-25	30	7.03	2.74	1.993	.052
	26-40	20	8.60	2.70		
Popularity	18-25	30	7.13	1.63	1.321	.193
	26-40	20	7.80	1.91		
Happiness & Satisfaction	18-25	30	6.53	1.07	3.126	.003**
	26-40	20	7.40	0.75		
Total Self Concept	18-25	30	42.10	7.50	2.589	.013*
	26-40	20	47.70	7.48		

*Significant at the 0.05 level, **Significant at the 0.01 level.

The range of difference in SD scores on the basis of age was found to be highest in Physical Appearance and Attributes (0.51) Domain for males and females in self concept, and then followed by Intellectual and School Status (0.42) and lowest at Behavior (-0.70).

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Table 6 shows Mean and SD of QoL among AwID on the basis of age

Domains of Quality of Life	Gender	N	Mean	SD	t-value	p-value
Physical Health	Male	35	22.63	3.12	1.755	.086
	Female	15	21.07	2.22		
Psychological Health	Male	35	20.43	3.18	1.864	.068
	Female	15	18.47	3.91		
Social Relationships	Male	35	10.11	1.59	1.241	.221
	Female	15	9.47	1.92		
Environmental Health	Male	35	26.54	4.18	1.449	.154
	Female	15	24.47	5.60		
Total Quality of Life	Male	35	79.71	10.23	1.887	.065
	Female	15	73.47	11.86		

The maximum range of SD was found in domain of physical health with change in age viz. 1.26 while minimum change in SD was found in environmental health viz. 0.01. This shows that there was a minor range of deviation between males and female, depicting homogeneity in data with low variance.

Table 7 shows Correlation between self-concept and quality of life

Correlation (N=50)												
	Bh.	ISS	PAA	An	Po	Hp/	TSC	Ph. H	Psy. H	SR	Env.	TQOL
Bh.	1	.350*	.105	.505**	.307*	.280*	.650**	.470**	.170	.394**	.367**	.397**
ISS		1	.734**	.676**	.657**	-.089	.813**	.709**	.476**	.604**	.600**	.690**
PAA			1	.632**	.642**	-.323*	.655**	.552**	.428**	.434**	.408**	.524**
An				1	.698**	-.021	.880**	.679**	.534**	.551**	.593**	.689**
Po					1	.004	.799**	.558**	.491**	.570**	.510**	.611**
Hp.						1	.139	-.034	-.022	.041	.086	.027
TSC							1	.755**	.533**	.652**	.637**	.744**
Ph. H								1	.544**	.675**	.667**	.829**
Psy. H									1	.647**	.610**	.823**
SR										1	.705**	.841**
Env.											1	.907**
TQOL												1

Behavior (Bh), Intellectual & School Status (ISS), Physical Appearance & Attributes (PAA), Anxiety (An), Popularity (Po), Happiness & Satisfaction (Hp.), Total Self Concept (TSS), Physical Health (Ph. H), Psychological Health (Psy H), Social Relationships (SR), Environmental Health (Env), Total Quality Of Life(TQOL)

*Correlation significant at the 0.05 level (2-tailed), **Correlation significant at the 0.01 level (2-tailed)

Total Self-concept was found be significantly correlated with physical health ($r=0.755$), psychological health ($r=0.533$), social relationships ($r=0.652$) and environmental health ($r=0.637$) at 0.01 level of significance. Total Quality of life was found to be positively correlated with behavior ($r=0.397$), intellectual and school status ($r=0.690$), physical appearance and attributes ($r=0.524$), anxiety ($r=0.689$) and popularity($r=0.611$) domain at 0.01 level of significance. Thus, it can be concluded that in some of the domains of self-concept and quality of life no correlation was found but there was a significant positive correlation among total self-concept and total quality of life among adults with ID, depicting

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that adults with ID, who have better quality of life will definitely have a higher level of self concept and these two variables are positively correlated.

DISCUSSION

Measurement of self-concept among children with ID has been challenging and research has often revealed unclear results. Studies have revealed vivid results, while a study by Heiman and Margalit, 1998 pointed out that children with ID possess a lower self-concept, while another study by Glenn and Cunningham, 2001 stated that self-concept of AwID is the same or even higher than the self-concept of developing children. A study conducted by Li et al, (2006) also stated that children with ID exhibited a higher self-concept than the typical people without disabilities. Based on the results of the study, findings had been drawn from statistical analysis that, there was a substantial correlation between total self-concept and total QoL among AwID. Though the studies related to correlation between self concept and QoL were less to be found but the studies related to other areas like self-esteem, self-determination, choice making etc. comes in agreement with the findings. Wehmeyer & Schwartz (1998) while examining the relationship between QoL and self-determination concluded that persons reporting better quality of life were also recognized as more accomplished in self-determination. Vesna & Natasha (2016) found out the relationship between prospects for making choices and expectations for the future with the QoL among AwID. Above findings support that as the self-concept of AwID improves, there comes a positive change in quality of life of AwID.

Garaigordobil et al., (2007) supports the present study by saying that AwID scored significantly lower in self-concept and self-esteem as compared to people without disability. Stancliffe et al., (2000) revealed through their study that quality of life and a person's self-determination has also been found to be greatly influenced by the working and living environment by pointing out that among adults with intellectual disability, males exhibited a higher level of self-concept as well as quality of life as when paralleled to females AwID. Persons with intellectual disabilities can participate in a full range of physically as well as cognitive oriented play and recreation activities, which helps them to improve their cognitive levels to achieve a better quality of life (Nazli, Chavan & Gupta, 2014). The possibility of practicing self-determination by persons with intellectual disability has been proved by researches (Ahmad & Thressiakutty, 2018). Ittyerah et al., (2007) have further supported the same findings through their study that male had more self-concept than females. Appropriate training can bring quality of life in the lives of people with intellectual disability and their families which ultimately give them a better self-concept (Ahmad & Thressiakutty, 2020). The general positive correlation exists between self-concept and QoL leading to conclusion that AwID who have a better QoL will definitely have the chances of having higher level of self-concept. Thus, making these two variables positively correlated.

Scope

The study aimed to find out the self-concept and QoL among AwID. The previous/ ongoing studies found on the topic were only in two digits, making it more eminent for the researcher to focus on this topic. The study can prove to be seminal in the field of disability studies, as the individual with disability are the neglected lot and IwID are the one who are considered negligible for their very existence. The study can prove to be a voice for them and advocate their rights very well. The self-awareness defines how well confident a person is towards various decisions of life and proves to be an important element in judging a quality of life. Thus, the study can give a right direction to the stakeholders to decide a better curriculum for IwID as well as for the ones who are training the special educators, as they are the ones

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who hold the potential to mold their minds towards right direction. The results point towards the need of their overall growth for developing a better quality of life. Study conducted by Ahmad (2015) suggests that teachers can greatly contribute in self-determination skills of persons with intellectual disability provided they are updated with the current practices. The individuals with intellectual disability who are self determined will have better self concept and quality of life.

CONCLUSION

Adulthood, the period in the human lifespan which is full of attainment of physical and intellectual maturity, is often considered as a period of confusion among adults with intellectual disability as they face dejection from society due to their inability to express emotions and start a family due to their disability condition, which often leads to a development of poor self-concept. The findings of the present study reveal that there is a positive correlation between self concept and quality of life. The policy makers, school administrators and other stakeholder who are involved in making provisions and policies for persons with intellectual disability must pay attention on to increase the self concept. It has been established that the persons having better self concept will likely to have a better quality of life.

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Conflict of Interest

The author declared no conflict of interest.

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