

PSYCHOSOCIAL PROBLEMS AMONG ADOLESCENTS WITH VISUAL IMPAIRMENT.

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“The best and most beautiful things in the world cannot be seen or even touched. They must be felt with in the heart”.

“Imagine the life one has to live without seeing the beauty of rising sun, beauty of blooming flowers and even unable to see the face of his mother”. Eyes are the most precious organ in the human body used to view the world, so one has to face innumerable difficulties in the absence of vision. Childhood is a beautiful state of innocence and joy, but this is often not for the children who are visually disabled. When they play and laugh, they feel isolated, as no one is beside them to hear or bear, as everyday in their life is a big struggle. Disability is proven to be a big hindrance in the normal day to day life of visually impaired children.¹

Blindness is among the most severe of all forms of physical disability. Without vision, blind people are cut off from a major segment of the social and physical environment to which they must adapt. This creates problems for mobility and everyday skilled activities for which vision is important. At the same time, in relating to other people, the blind can only guess at the meanings and intentions of non-verbal communication, and the social context in which these occur. Blindness may therefore create formidable social and psychological problems for the blind children.² These problems are shown to have implications for the integration of the blind children into a sighted society, for the coping and adjustment of the blind, and for the attitudes of the sighted.

The main causes of visual impairment are toxoplasmic macular retinochoroditis retinal dystrophies, retinopathy of prematurity, ocular malformation, congenital glaucoma, optic atrophy, congenital cataracts, opthalmia neonatarum and vitamin A deficiency.³

Visual impairment is an important cause of developmental disability among children, if the visual impairment is undetected or untreated it can have substantial long-term implications for the quality of the life of the child and the family and also can place the burden on public health resources.⁴

Adolescence is the age of physical changes, psychological development and social adjustment. Growth and development occur in interaction with other people that are important to the adolescents such as parents, siblings, relatives, friends, and school personnel. The period of adolescence may cause a great deal of anxiety for the persons with a physical handicap, who faces not only the usual developmental challenges but also the added strain of his or her physical handicap. Visual impaired adolescents have problems in their relationship with friends such as social isolation, being rejected by their peer, having fewer friends, lower socioeconomic status. The visual impairment also interferes the adolescent's social relationship with friends and social activities. They also spend more time alone in passive activities.⁵

Psychosocial development among adolescents with visual impairment

The period of adolescence may cause a great deal of anxiety for the person with a physical handicap, who faces not only the usual developmental challenges but also the added strain of his or her physical handicap.

Tuttle (1987) has claimed that persons with visual impairments have four major problems with which to contend. First, in order to feel competent, they must develop good coping skills and adaptive behaviours. Second, they deal with the task of maintaining a sense of self-esteem in the face of predominantly negative reflections. The third problem centres on visually impaired persons' abilities to maintain control over situations, to perceive alternative courses of action, and to make decisions or choices regarding events in their lives. The fourth problem has to do with the negative impact on self-esteem that results from the fact that a visually impaired person, even with the best of coping skills and adaptive behaviours, is still dependent on others to accomplish certain daily tasks and consequently does not appear to be exercising an internal locus of control.⁶

There are individual variations in psychosocial development among adolescents with visual impairments as there are among those without impairments. Some sources of variation in the growth and development can be attributed to visual impairment, such as onset and severity of impairment (Scholl 1986, Warren 1989).⁷

The effect of visual impairment on cognitive development and behaviour

Visual impairment present at birth could be due to genetic anomalies or due to injury to the developing visual system. Dependent on the cause, the possible presence of other impairments may be indicated, as in rubella.

The degree of residual functional vision refers to acuity, the ability to interpret visual information in a practical sense and the conditions under which residual vision is optimal.

Visually impaired individuals are all very different. The degree of impairment, personality, intelligence, background and the presence of other disabilities all have varying effects. For instance, cognitive ability will affect the ability to conceptualize the environment in the absence or reduction of visual information. Temperament and personal characteristics may facilitate or interfere with adaptive tasks. As a visually impaired child grows older, although acuity may remain constant, visual function seems to improve as they gradually learn how to use the residual vision more.⁸

Social support and wellbeing among visually impair adolescents

Most visually impaired adolescents have reported that their relationships with parents are close and that they receive social support in questions related to impairment mainly from their family members and professionals (Nemshick et al. 1986, Suokas 1992). Parents have been named as important sources of social support in daily functioning and in assistance related to homework (Kent 1983, Wolffe and Sacks 1997). Many visually impaired adolescents have reported also receiving social support from friends (Kef 1999), some of them have reported that although their close friend knows of their impairment, they cannot actually talk to their close friend about visual impairment (Nemshick et al. 1986). Material support such as adequate supplies and equipment have been found to be among important factors in successful mainstreaming.⁹

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