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# The effect of perceived social support On personal and social adjustment of orthopaedically and visually handicapped high school students

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# Abstract

The study deals with the effect of perceived social support on personal and social adjustment of orthopedically and visually handicapped students. The statistical population was 180 girls and 192 boys high -school students, out of which the sample size of 372 were 5 and omaly selected (182 orthopaedically & 190 visually handicapped).

Two standard questionnaires is namely Sarason et.al on social support, and California test of personality Thorp et.al on adjustment (personal & social) were used. A two- by- two factorial design was used. The ANOVA results showed a significant difference between orthopedically and visually handicapped. Regarding handicapped students personal and social adjustment, high and low perceived social support was indicated. The results have also been discussed in light of other investigations.

### INTRODUCTION

In a rapidly changing world of today, each change makes new demands on individual's ability to adjust and encounter with the complex task of adjustment. The well-adjusted individual is one who can cope up successfully and effectively with personal and situational demands (Worchel and Goethals, 1985). Since sources of frustration are many and diversified, one basic source, which lies within most of the individuals, is their personal disability. Evidences indicate that all psychological affects of disabilities are negative, disruptive, annoying, agonizing, and dissatisfying (Shontz, 1970).

In spite of great attention which recently is being given to the handicapped, the bulk of their problems is still unsolved. Although persons with disabilities suffer from a variety of problems, their adjustment can be facilitated if some attention is paid to their personality factors and environment, which significantly contribute to the their adjustment. An important factor related to the family relationship and environment is the social support an individual gets in the process of making adjustment. Having social support seems to benefit people's health (Berkman, 1986). According to Juntunen and Atkinson, (2002) a stable

well-functioning social support network contributes to an individual's sense of safety, coherence, stability, and meaning in life thereby, facilitating his adjustment Need is therefore, imperative to understand various concepts involved in the study such as adjustment, perceived social support and handicap.

## METHOD AND PROCEDURE

The total sample consisted of 372 handicapped subjects. Out of these, 182 belong to orthopaedically and 190 to the visually handicapped girls and boys. All the subjects studying in various grades I-IV in the schools. The present study was advanced by employing a factorial design involving the two ways (2x2) analysis of variance. Firstly, the variable of type of handicap was divided into two categories of handicapped student, namely Orthopaedically and visually handicapped; subjects in each of these two groups were then divided into two groups on their perceived social support that is, high and low social support based on the top 27% and the lowest 27% criterion (Kelly, 1939).

# **QUESTIONNAIRES**

- (1) Measure of adjustment: Persian translated version by Khojaste Mehr (1992) of the original California Test of Personality (CTP) by Thorpe et al. (1953).
- (2) Measure of social support: Social Support Questionnaire (SSQ) developed and standardized by Sarason et al. (1983).

In the present study the reliability coefficients for measures of California test of personality (CTP) as well as perceived social support, were computed on 372 orthopeadically and visually handicapped student using Kuder-Richardson formula 20. Results have been placed in the table 1 below.

Table 1. Reliability coefficients of CTP and SSQ

Sub-scales of CTP and SSQ	Reliability
CTP (Personal adjustment)	.88
CTP (Social adjustment)	.79
Social support questionnaire (N)	.96
Social support questionnaire (S)	.95

The validity of standardized questionnaires used in this study is well established, these tools are popular and often used in Iran set-up.

## RESULTS AND DISCUSSION

In accordance with the factorial design employed in the study, the main effects of two independent variables that is types of handicap and perceived social support and their interactional effects (of the second order) on the criterion variable of adjustment have been analyzed by using a two way (2x2) ANOVA. In order to locate the trend of differences, the F-test was followed by t-test for examining the significance of differences between two groups. The results of summary of ANOVA along with t-test have been presented bellow.

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Table 2
Summary of ANOVA in respect of main effects of TH and PSS along with their interactional effect on PA have been presented below:

n Personal Adjustment (PA)	SS	df	MS	F
Main Effects of Type of Handicapped on Personal Adjustment	410.03	1	410.03	6.42*
	23623.29	370	63.85	-
	24033.32	371	-	-
Main Effects of Perceived Social Support on Personal Adjustment	255.09	1	255.09	4.10*
	12443.50	200	62.22	-
	12698.59	201	-	-
Interactional Effects of Type of Handicapped and Perceived Social Support (TH X PSS) on Social Adjustment	202.45 265.10	1 1	202.54 265.10	0.72 0.46
Error	5.449	1	5.92	.89
Total	12235.32	198	61.79	-

Table 3

The t-ratio for the difference between means of Type of Handicap and Perceived Social Support in respect of Personal adjustment (PA)

Variable	Group	Mean	SD	t-ratio
Personal Adjustment (PA)	OH	51	8.4	2.53*
	VH	48.9	7.5	
Personal Adjustment (PA)	HSS	51.07	9.51	2.025*
	LSS	46.18	5.83	

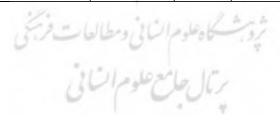


Table 4
Summary of ANOVA in respect of main effects of TH and PSS along with their interactional effect on SA have been presented below

cial Adjustment (SA	A) SS	df	MS	F
Main Effects of Type of Handicapped on Social Adjustment	34.41	1	34.41	0.63
	20082.32	370	54.28	-
	20116.73	371	-	-
Main Effects of Perceived Social Support on Social Adjustment	2189.23	1	2189.23	47.68**
	9182.95	200	45.915	-
	11372.18	201	-	-
Interact ional Effects of Type of Handicapped and Perceived Social Support (TH X CS) on Personal Adjustment	of 135.32	1	135.32	2.98
Error	8970.00	198	45.30	-
Total	AL JA	201	-	-



Table 5
The t-ratio for the difference between means of Type of Handicap and Perceived
Social Support in respect of Personal adjustment (PA)

Variable	Group	Mean	SD	t-ratio
Social Adjustment (SA)	OH	49.45	8.75	.79
	VH	48.84	5.73	
Variable	HSS	50.75	7.62	
				6.905**
Social Adjustment (SA)	LSS	44.17	5.81	.79

- \* Significant at the .05 level of confidence
- \*\* Significant at the .01 level of confidence

The relevant portion of the main effect due to type Handicap (OH and VH) on the criterion variable of personal adjustment drawn from the table of summary of ANOVA(Table 2) along with the result pertaining to comparisons of means (Table 3) show that F-value equal to 6.43 and t-ratio of 2.53 were found to be significant. Whereas the F-ratio (Table 4) due to the effect of type Handicap (OH and VH) on social adjustment was not found significant. Explanation for the present finding may lie in the more severe losses suffered by VH persons than sighted OH. This loss makes him unable to lead full, free and an independent life. His dependence seems contribute to his perception of himself as an object of pity and charity, a life deprived of human dignity and self-respect. Perhaps this is the root of greater isolation and withdrawal tendencies and thus a more severe

feeling of not being at ease with oneself of visually handicapped persons (Rogow, 1972) when compared with orthopaedically handicapped. Moreover there is not much difference between social adjustment of VH and sighted including the OH.

F-values equal to 4.10 and 47.68 (Tables 2 and 4) due to effect of perceived social support (HSS and LSS) on personal and social adjustment was found to be significant. An examination of their means (Tables 3 and 5) suggest that students in group with high degree of perceived social support (HSS) scored higher (M=51.07 and M=50.75) than group with low perceived social support (M=46.18and M=44.17) on personal and social adjustment respectively. Therefore, it can be concluded that perceived social support emerges as an important factor of adjustment. The interactional effect of type of handicap and perceived social support both on personal (F=0.89) and social (F=2.98) as shown in (tables 2 and 4) were found to be non significant.

Being a handicapped person, one suffers many losses; starting from physical disorder losses may end to through a feeling of self-pity, loss of self-worth or self-reliance. However, appropriate social support promotes hope, provides guidance, recovers a sense of self-monitors the adequacy of one's functioning, ensures adequate rest, and enable the handicapped to enjoy stability of mood. Therefore, overall adjustment to particular stressful events is embedded in social ties. Results supported by findings of Morrow (1981); Schmaling (1984); Rounds (1986); Sarason, Sarason and Shearin (1986); Ishi-Kuntz (1987); Shisana and Calentano (1987); Richter (1987); Varni, Katz, Colegrore and Dolgin (1994); Jou and Fokada (1994); Kashani, Canfield, Burduin, Soltys and Reid (1994); Zandt, Pearl, Sally and Wang (1994); Furukawa et al. (1999), Reynolds (2001) and Horner (2002), who all revealed that there was a positive relationship

between social support and adjustment .and individuals with less supportive sources feel more isolated, more disturbed, and less cooperative with others.

### **BIBLIOGRAPHY**

Berkman, L. (1986). Social network, support and Health: taking the next step forward. *American Journal of Epidemiology*, **123**: 559-562.

Furukawa, T.A., Harai, H., Harai, T., Kitamura, T., and Takahashi, K(1999). Social support questionnaire among psychiatric patients with various diagnoses and normal controls. *Psychiatry Epidemiol.* **34**: 216-222.

Horner, K.L. (2002). Personality and intimate support influences in prospective health status. *Health and Medicine*, 6(4), 473-479.

Ishi-Kant, M. (1987). The impact of informal social support on well-being. Comparison across stages of Adulthood. *Paper presented at Annual Conference of the National Council of family Relations*.

Jou, Y.H., and Fukada, H. (1994). Effects of social support on adjustment of Chinese students in Japan. *Journal of Psychology*, **135(1)**: 39-44.

Juntunen, C.L. and Atkinson, D.R. (2002). *Counseling across the life span*. Thousand Okas: Sage.

Kashani, J.H., Canfield, L.A., Burduin, G., Soltys, S.M. and Reid, J.C(1994. Psychiatric inpatient children's family perceptions and anger expression. *Journal of Emotional and Behavioural Disorders*. 3(1), 13-18..

Kelly, T.L. (1939). The selection of upper and lower groups for the validation of test times. *Journal of Educational Psychology*. Vol. XXX, pp. 17-24.

Khojasteh Mehr, G.R. (1992). A comparative study of the personality of blind and sighted adolescents. Unpublished MA Thesis, Submitted in Tehran University, Tehran.

Morrow, G.R. (1981). Social support and parental adjustment to pediatric cancer. *Journal of Consulting and Clinical Psychology*; Vol.49,5, 763-765.

Reynolds, J. (2001). The role of social support in adjustment to breast cancer.

Richter, D.L. (1987). A descriptive analysis of relationship between social support networks and health status in females. *Paper Presented at the Annual Meeting of Southern Gerontological Society*.

Rogow, S.M. (1972). Language acquisition and the blind child: a Study of impaired communication. *Education of Visually Handicapped*: 36-40.

Rounds, J.B. (1986). Social support, stress, and adjustment of spinal cord injury. Paper presented at the Annual Convention of the American Psychological Association.

Sarason, I.G., Levine, H.M., Bashman, R.B., and Sarason, B.R. (1983). Assessing social support: The social support questionnaire. *Journal of Personality and Social Psychology*, **44**: 127-344

Sarason, I.G., Sarason, B.R., and Shearin, E.N. (1986). Social support as an individual difference variable: Its stability, origins and relational aspects. *Journal of Personality and Social Psychology*, **50**: 845-855.

Schmaling, K.B. (1984). Parental attachment, social support, and current life situation. *Paper presented at the Annual Meeting of the Western psychological Association*. CA, April 5-8, 1984, p.12.

Shisana, O., and Calentano, D.D. (1987). Relationships of chronic stress, social support and coping styles to health among namibian refugees. *Social Sciences Medicine*, **24**(2): 145-157.

Shontz, F.C. (1970). The problems and promises psychological research in rehabilitation. In E. Trapp and P. Himelstein (eds.). *The Exceptional Child: Research and Theory*. New York: Appleton- Century Crofts.

social support: The social support questionnaire. *Journal of Personality and Social Psychology*, **44**: 127-344.

Thorpe, L.P., Clark, W.V. and Tiegs, E.V. *California Test of Personality* (1953). *California Test Bureau*, Los Angles, 28, California.

Varni, J.W. Katz, J., Colegrore, M., and Dolgin, J. (1994). Perceived social support and adjustment of children with newly diagnosed cancer. *Journal of Development and Behavioural Paliatries*, **15**,(1): pp. 20-25.

Worchel, S. and Goethals, G.R. (1985). *Adjustment Pathway to personal growth*. New jersey: Prentic – Hall, Inc., Englewood Cliffs.

Zandt, V., Pearl, L., Sally, L., Wang, A. (1994). The role of social groups in adjusting to visual impairment in old age. *Journal of visual impairment and blindness*, Vol. **88(3)**: 244-252.

