

# Coping Strategies for Physically Challenged Children

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## Abstract

The aim of this research is to assess the coping strategies of physically challenged children. The area of assessment included in physical, emotional and social problems related to their physical disability. Descriptive research design was selected to study the physical, emotional and social problems and its coping strategies of physically challenged children. Purposive sampling technique used for 50 samples of Physically challenged children between the age group of 10-15 years who were educated at the special school in Mangalore. It was reached from the result of the findings that physically challenged children are using negative coping mechanism for social problems related to their physical disability whereas physical and emotional problems related to physical disability most of them are using positive coping mechanism.

**Keywords:** *Physically challenged, coping strategies, positive coping, negative coping*

## 1. Introduction

The capacity to move on one's own is a fundamental characteristic of every living being. Every restriction on mobility could be viewed not only as a restriction on life space of the individual, but an inroad into the very care of his life. It is estimated that around the world, between 93 and 150 million children living with a disability (UNESCO 2017) and approximately 80 percent of those children are living in a developing country. The American Community Survey (ACS, 2016) estimate the overall rate of people with disabilities in the US population in 2016 was 12.8% for those of 5-17, the rate was 5.6%. The Global Burden Disease estimates the number of children aged 0-14 years experiencing moderate or severe disability at 93 million (5.1%) with 13 million (0.7%) children experiencing severe difficulties. (WHO 2018)

In India, 1.67% of the 0-19 population has the disability and they are coming under the purview of the Ministry of Social Justice and Empowerment. 35.29% of all people living with disabilities are children. Other estimates say that India has 12 million children living with disabilities. Only 1% of children with disabilities access to school and one-third of most disabilities are preventable. (Childline 2018). Coping with disability of a child is challenging, from dealing with staring, teasing, and bullying, to the frustrations of not being able to take part in an activity or keep up with peers. There are some physically challenged children who just cope better in general and some of them have a more difficult time adjusting.

Physically Challenged children feel that they are somehow inferior to the normal child. They are terribly uncomfortable in their presence. They also face problems in social interactions also. Although they may be accepted within the family the child may feel sense of shame and rejection in the society.

Coping involves acceptance of the functional limitations, his state of dependency, constant frustrations in attempting tasks and in communicating about the problems. Physical discomfort from procedures, treatments, immobility and changes as a result of physical challenges influence all aspects of the child's growth and development and all areas of his life.

The coping strategies of the physically challenged children are influenced by the child's development and use of coping mechanism. The coping mechanism includes the problem solving, turning to others for help, support, comfort and approval, acceptance of disability, emotional control, insight, defense to seek relief, attachment with others, close friendship with others, communicating thoughts and feeling and sharing information about disability. One might assure that the grater the person's disability, it is more difficult for him to accept it or to achieve good adjustment. In addition to the usual developmental task, a physically challenged child must make unique, complex adjustment to himself, to his physically challenged conditions and to his immediate world. Other adjustment must be made to parents and to a world disturbed about his conditions.

If the physically challenged children are giving adequate care and finding solutions for their problems, they can stand alone in their need. It is interesting to notice that Franklin D. Roosevelt, 32nd President of the United States had polio. As a young man he remained paralyzed for the rest of his life and he spent much of his adult life in wheel chair. He lent powerful support to fight against polio in the country. There wouldn't be so many problems in disabled children, if parents and others would give more time to the children's problem. For this reason, this research is important to determine the coping strategies used by the physically challenged children in their physical, emotional and social problems to understand the positive and coping adaptation using by them.

## 2. Method

Research Approach: Descriptive research design was selected to study the physical, emotional and social problems and its coping strategies of physically challenged children. Purposive sampling technique used for 50 samples of Physically challenged children between the age group of 10-15 years. Tool: A closed-ended structured questionnaire was prepared to assess the coping strategies in physical, emotional and social problems of the physically challenged children. In order to establish the reliability, of the questionnaire split half method was selected which is a test for internal consistency. The purpose was to find out whether the

statements were clear or unambiguous, whether the students could easily understand and also whether they were able to interpret it correctly. After establishing validity and reliability, the tool was finalized which had two sections: Sociodemographic characteristics and the coping strategies assessment data which consists of 21 questions under three dimension like physical, emotional and social .

Method of data collection: Permission to conduct the study was obtained from head of the Institution and finally, individual consent was taken from the samples before collecting the data. The researcher was present personally and explained the need and importance of the study to the participants for their cooperation. Data collection was over within 7 days. Care was taken to maintain the privacy and confidentiality.

**Analysis:** Data were captured and analyzed using the SPSS statistical package version 16. Descriptive analysis (frequencies, mean, median, mode and cross-tabulations) were used to analyze all items on the questionnaire and the problems to selected demographic variables were compared and tested statistically using "chi-square test.

### 3. Result

**Table 1: Characteristic of Children**

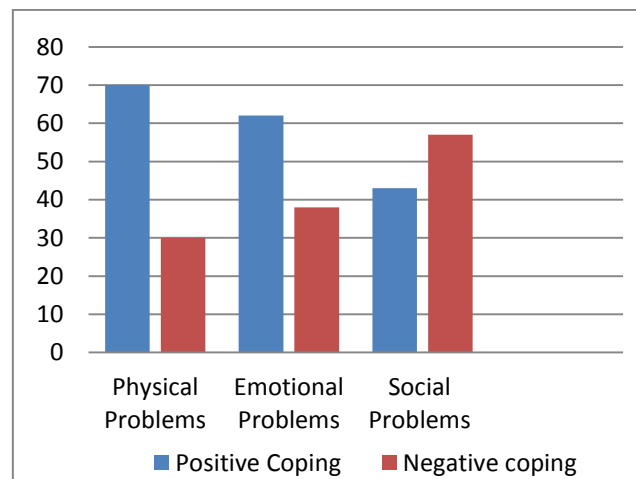
Variable	N	%
Sex		
Male	20	40
Female	30	60
Age		
14-16 years	23	46
12-14 years	19	38
10-12 years	8	16
Education of Parents		
Illiterate	8	16
Primary Education	10	20
High School	25	50
Above High School	7	14
Religion		
Hindu	35	70
Christian	6	12
Muslim	9	18
Family		
Joint Family	20	40
Nuclear Family	30	60

Out of the 50 physically challenged children, 40% were male children and 60% were female children. Majorities (46%) were in the age group between 14-16 years and 38% were in the age between 12-14 years and only 16% were below 12 years. Education of the parents showed that 50% of the parents have high school education and 16% were illiterate and only 14% had above high school education. Majority (70%) of the children belonged to Hindu religion and only 12% in Christian religion and remaining participants were in Muslin religion. (Table 1)

#### Assessment of the Problem

It is observed that to overcome problems related to physical challenges children are using positive or negative coping mechanism. Finding showed that to overcome physical problem 70% of the children are using positive coping mechanism like getting help of others and managing with all difficulties where as

30% of them using negative coping mechanism like limit the activities within the circle or avoid the situations. In emotional problems 62% of the children are using positive coping strategies like try to make friendship with others and discuss the problem with them or overcome the problem through meditation and prayer where as 38% were using negative coping mechanism. But in social problem majority of the children (57%) were using negative coping mechanism and only 43 % were using positive coping mechanism (Figure1)



**Figure1: Percentage Distribution of Coping Mechanism used for the problem**

#### Coping strategies used for the Physical problems

Percentage distribution of coping strategies used for physical problems showed that in physical problems like climbing steps, bending, wearing a dress, doing household work, and daily activities more than 70% of the children are using the positive coping mechanism like getting the help of others or managing the problem by themselves with all the difficulties. The remaining percentages of children are using the negative coping mechanism in these physical activities. 62% of physically challenged children are using the positive coping mechanism in walking and taking bath daily and others are using negative coping. 74% of the physically challenged children are using the negative coping mechanism like limit the activities and avoid the situations when they get chance to play with others and only 26% are using the help of others or managing with difficulties.

**Table 2: Percentage distribution of Coping Strategies used for the Physical Problems**

	Positive Coping		Negative Coping	
	* N(%)	** N(%)	*** N(%)	**** N(%)
Climbing	12 (24)	24(48)	10(20)	4(8)
Walking	11(22)	20(40)	11(22)	8(16)
Bending	19(38)	18(36)	9(18)	4(8)
Taking Bath	13(26)	18(36)	12(24)	7(14)
Wearing Dress	18(36)	18(36)	9(18)	5(10)
household wok	18(36)	20(40)	10(20)	2(4)
Doing activities	15(30)	22(44)	11(22)	2(4)
Play with others	3(6)	10(20)	20(40)	17(34)

\* With help of others or device\*\* Managing with difficulties

\*\*\* Limit the activities \*\*\*\* Avoid situation

#### Coping strategies used for the Emotional problems

In emotional problems findings showed that majority of the children (80%) are using the positive coping mechanism of making friends with others and discuss the problem with others when they are feeling they are the burden to their family and also feeling about the body image related to physical disability. About 64% of the children are using a positive coping mechanism to overcome the emotional problems like isolated feeling, inferiority complex, setting plans and goals in their future life. When others tease, 56% of them are using the positive coping mechanism in that 30% overcome the problems through meditation and prayer. Around 74% of the children are using the negative coping mechanism like always think about the problem and worry about their future when they feel guilty in depending on others in their needs. 42% of children did not mingle with others and limit their activities when they disturbed others tease. (Table 3)

**Table 3: Percentage distribution of Coping Strategies used for the Emotional Problems**

	Positive Coping		Negative Coping	
	* N(%)	** N(%)	*** N(%)	**** N(%)
Feels isolated	20(40)	12(24)	8(16)	10(20)
Body Structure	30(60)	10(20)	8(16)	2(4)
Guilty in dependence	7(14)	6(12)	8(16)	29(58)
Disturbed when tease	14(28)	15(30)	10(20)	11(22)
Inferiority Complex	26(52)	6(12)	8(16)	10(20)
Feeling burden to all	27(54)	13(26)	6(12)	4(8)
Setting Goals	22(44)	8(16)	10(20)	10(20)

\*Make friendship with others and discuss problem \*\* by meditation/ prayer \*\*\* Always thinking and worry about it \*\*\*\* Avoid situation or not mingling with others

#### Coping strategies used for the Social problems

Related to the Social problem most of the children are using negative coping mechanism like isolate themselves without disturbing others and avoid the situations which create problems for them especially problems like participating in school athletic meet and school picnic(80%). 76% of them are using negative coping mechanism when they are seeking help or cooperation from others. When getting chance to take the leadership in their life 60 % of the physically challenged children are feel to avoid the situation. But in attending social functions 64% of children are using positive coping mechanism like use the help of others (16%) and accept the defect and overcome the problem by themselves with all difficulties (41%) (Table4)

**Table 4: Percentage distribution of Coping Strategies used for the Social Problems**

	Positive Coping		Negative Coping	
	* N (%)	** N (%)	*** N (%)	**** N (%)
<b>Social Functions</b>	8 (16)	24(48)	10(20)	8(16)
<b>With Sibling</b>	5(10)	11(22)	22(44)	12(24)
<b>Cooperation from others</b>	5(10)	7(14)	25(50)	13(26)
<b>Taking leadership</b>	5(10)	15(30)	10(20)	20(40)
<b>School Athletic meet</b>	2(4)	8(16)	25(50)	15(30)
<b>School Picnic</b>	4(8)	7(14)	9(18)	30(60)

\* With help of others \*\* Accept the defect Managing with difficulties \*\*\* Isolate without disturbing others \*\*\*\* Avoid situation

#### 4. Discussion

Wallender J.L (2003), conducted a study on children with the chronic physical disorder and their physical psychological adjustment reported that, although children with a chronic disability or physical handicap have been shown to be at increased risk for behavioral and emotional problems, the variability observed in adaptation suggest a wide individual difference.

As an extension of the previous work using direct assessment to document the physical and psychosocial problems of physically challenged children, B.K Abraham (2018) showed that physically challenged children are facing physical, emotional and social problems. To overcome the problems in the physically challenged situation, children are using positive and negative coping mechanism. Positive Coping mechanisms like getting help from others manage or accept the defect with difficulties make friendship with others and discuss the problems with them and use meditation or prayer. The negative coping mechanism includes limiting the activities, always thinking about the physically challenged situation and worry about it, isolate themselves without disturbing others, not mingling with others and avoid the situations which are challenging to their daily life.

The present study showed that in physical problem 70% of the children are using the positive coping mechanism the children are using the positive coping mechanism like getting the help of others and managing with all difficulties and the remaining 30% are using negative coping mechanism. In contrary, a study was conducted by Rebecca (2017) revealed that 58% of the physically challenged children are using the negative coping mechanism to overcome their physical problems. Ash (2017) says that, as a group, children with chronic physical disability have been found to be at risk for physiologic adjustment problem.

It is also observed that to overcome emotional problems 62% of children are using the positive coping mechanism and the remaining 38% were using the negative coping mechanism. A study conducted by Stephen (2017) among 116 physically challenged children reported that 72% of the children were more likely to a used positive coping mechanism like information seeking and sharing and social activities. So, both of the studies showed that to overcome emotional problem children are using positive coping mechanism. Aminabhavi (2011) examines the adjustment ability of 60 physically disabled showed that physically disabled children exhibited a lower level of adjustment in the areas of emotion, mood, criminality, and leadership.

The present study observed that in Social problems, 57%of the children are using the negative coping mechanism and only 43% of children are using the positive coping mechanism. In contrary, a study conducted by Winters and Kuechen (1994) showed that out of 125 sample 80% of children used the positive coping mechanism in social problems. Jayaseelan (2018) in his study of the effect of physical disability on the socialization of the child, said that in addition to the usual developmental tasks, a handicapped child must make unique, complex adjustments to himself, to his handicapped conditions and to his immediate worlds.

Holtz (2016) observed that social adjustment challenges clearly remain for some children with disabilities. Most of the children

with disabilities never seem confident in social situations and are reported never to make friends easily, start conversations, control their temper when arguing with peers, or avoid situations that are likely to result in trouble.

## 5. Conclusion

Coping is a constantly changing cognitive and behavioral effort to manage specific external and or internal demands that are appraised as exceeding the resources of the person. The findings from this study have been concluded that those physically challenged children are using negative coping mechanism for social problems related to their physical disability whereas physical and emotional problems related to physical disability most of them are using positive coping mechanism. Greater the person's disability, it is more difficult for him to accept it or to achieve good adjustment. It is a fact that if the parents and others give adequate psychological support and find solutions to their problems, they can stand alone in their need.

Physically challenged children possess the same need as everyone else. An insight into these needs and problems of physically challenged children will help the nurses and other medical professionals to increase their confidence and skill to deal with them. It will give guidance to them to educate the physically challenged children to reduce the extent of the problem-related to the conditions and provide timely counseling to adjust to the condition. Thus Physically challenged children in physical, emotional and social aspects, have to enhance and support their coping strategies in problems to accept the defect and overcome the problem by themselves with all difficulties that they can adapt to the environment they live in.

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## Author Profile

Bindu K Abraham received the B.S. and M.S. degrees in Nursing in 1993 and 1998, respectively. She is interested in research activities in the Nursing and Educational area and published research articles in different international journals.