Problems of Anxiety Among Differently Abled Children: An Academic Perspective

D. Vasantha Kumari¹, Prof. V. Venkateswarlu²

¹Research Scholar, Department of Sociology and Social Work, Acharya Naarjuna University, Guntur, Andhra Pradesh, India
²Professor, Head & Chairman UG BoS, Department of Sociology and Social Work, Acharya Naarjuna University, Guntur, Andhra Pradesh, India

ABSTRACT
Differently abled children may feel sometimes confused, insecurity, anxious, disoriented, isolated, worried, rigid and less happy. These emotions fluctuate and subject to turbulent and unpredictable behavior. Stress therapy can lead to a reduction in stress, anxiety, better sleep, a strong system, improved relationships, better academic results, improved performance at work and even a better memory. The present study examines the stress and anxiety levels among the differently abled children in the selected study area and it analyzes the effectiveness of stress therapy on the anxiety levels among the differently abled children. The study further evaluates the association between the demographic variables and the anxiety level among the differently abled children. The present research study adopts Descriptive Research Design. Both primary and secondary data were utilized for drawing conclusions from the study. Interview Schedule method was employed to extract the primary data from the selected sample respondents. The sampling area selected for the study was Krishna District of Andhra Pradesh. The sample size comprises 140 sample respondents. The nature of the sample was that of the physically challenged children with different disabilities studying at different special schools in the study area. Statistical tools like percentages, mean, standard deviation, t-test and chi-square test were applied in order to draw the inferences from the study data. The study concludes that there exists a significant difference between the pre and post stress therapy anxiety levels among the differently abled children and there exists a significant association between the demographic variables and the anxiety levels of the differently abled children. The study further concludes that the stress therapy and other practices of stress management are very helpful for reducing the anxiety and stress levels among the differently abled children especially in the perspectives of academic aspects.

Keywords: Differently abled children, Demographic factors, Anxiety, Stress therapy.

INTRODUCTION
Differently abled children may feel sometimes confused, insecurity, anxious, disoriented, isolated, worried, rigid and less happy. These emotions fluctuate and subject to turbulent and unpredictable behavior. They are extremely sensitive to feeling and behavior. Due to Inadequate fulfillment of needs and deprivation in various aspects, disabled children are vulnerable to different problems. Differently abled children aged below 15 years consist of 23% in India. Approximately 10% of the world population is disabled children. In India, it is estimated that out of the 100 population, 8 to 9 people live with
disabilities. Among them nearly 17% of population consists of children in different age categories. Child anxiety may affect the parent and the entire family. It may break the relationship of the entire family. Sometimes this type of anxiety may affect the society and leads to stress, relationship difficulties, aggressive behavior, social phobia and lack of interest in enjoyable activities. These factors may adversely affect the child's performance at various levels.

Stress therapy can lead to a reduction in stress, anxiety, better sleep, a strong system, improved relationships, better academic results, improved performance at work and even a better memory. Stress therapy has been used effectively to help people with several physical and emotional problems, life threatening illness such as cancer, chronic conditions such as asthma and rheumatoid arthritis, drug and alcoholic addictions, eating disorders and trauma. It has also been shown to be beneficial for combating low self-esteem, depression, anxiety, stress related ailments.

The handicapped child needs to be trained for an independent living with special training and education. Medical personnel are responsible for creation of awareness in the society about the prevention of handicaps, the abilities of the child with a handicap condition and the potentialities present in him/her. Health management should emphasize on three levels of prevention of stress levels among the handicapped individuals. Medical personnel are also contributing in the special care settings for the handicapped children to bring them as close to normality as possible, physically, mentally and socially. Thus, it is proposed to examine the anxiety and stress levels among the differently abled children in the academic scenario.

REVIEW OF LITERATURE

Physical disability either congenital or acquired may lead to feelings of inadequacy (Chang & Johnson, 2008). Marschark (1993) suggested a strong relationship between physical and mental functioning in humans because any type of physical or sensory deficiency disturbs one’s overall psychological functioning by creating an obstruction in normal flow of such processes, leading to an experience of the world, which is distinct in context.

Children who experience physical impediment are more likely to have low frustration tolerance (McDermoort & Akina, 1972; Dell Orto & Power, 2007). Many children with physical disability experience anxiety (Boswell & Wingrove, 1974) and also experience depression due to loss and as well as due to the changed behaviours of people around them (Krueger, 1984).

Disabilities are often associated with vulnerable self-esteem (Nosek et al., 2003; Gill, 1996; Cornwell & Schmitt, 1990). It has a negative effect on those who were ambitious and could have achieved their life goals easily in the absence of their present disability (Goodwill & Chamberlain, 1988).

Narimani and Mousazadeh (2010) also found a significant difference in the mean scores of handicapped and normal students on self-esteem. Lasker et al. (2010) noted similar severe psychosocial problems in children with disability in comparison to the healthy ones.

Puranen, Seuri, Simoli and Elo (1999) found that participants displayed symptoms of anxiety and depression more commonly than general population. Above given research evidences show that there is low level of self esteem and high level of depression, stress and anxiety among the physically disabled children. Though there is a need of much more research in this phenomenon to explore it in a better way.
OBJECTIVES OF STUDY
1. To examine the stress and anxiety levels among the differently abled children in the selected study area
2. To analyze the effectiveness of stress therapy on the anxiety levels among the differently abled children
3. To evaluate the association between the demographic variables and the anxiety level among the differently abled children.

HYPOTHESES
In order to verify the empirical validity of the stated research objectives, the following Null-hypotheses were proposed in order to test their statistical significance.
Ho1: There exists no significant difference between the pre and post stress therapy anxiety levels among the differently abled children.
Ho2: There exists no significant association between the demographic variables and the anxiety levels of the differently abled children.

RESEARCH METHODOLOGY
The present research study adopts Descriptive Research Design. Both primary and secondary data were utilized for drawing conclusions from the study. Interview Schedule method was employed to extract the primary data from the selected sample respondents. The sampling area selected for the study was Krishna District of Andhra Pradesh. The sample size comprises 140 sample respondents. The nature of the sample was that of the physically challenged children with different disabilities studying at different special schools in the study area.
The self rating anxiety scale developed by Zung (1997) comprising 20 items with a 4-point rating scale was used by the researcher in the class room setting of the concerned special schools with the help of instructors and medical assistants. Statistical tools like percentages, mean, standard deviation, t-test and chi-square test were applied in order to draw the inferences from the study data.

DATA ANALYSIS AND INTERPRETATION
Table No.1 Pre and Post test anxiety levels among the respondents

<table>
<thead>
<tr>
<th>Level of Anxiety</th>
<th>Pre - test</th>
<th>Post - test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
<td>Percentage</td>
</tr>
<tr>
<td>Normal range of anxiety</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mild to moderate range of anxiety</td>
<td>23</td>
<td>16.4</td>
</tr>
<tr>
<td>Severe range of anxiety</td>
<td>117</td>
<td>83.6</td>
</tr>
<tr>
<td>Total</td>
<td>140</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Primary Data
The table no.1 shows the pre and post test anxiety levels among the respondents in the study area. It shows that with regard to the pre-test anxiety levels among the respondents, 16.4 percent of the respondents are having mild to moderate range of anxiety and 83.6 percent of the respondents are having severe range of anxiety. The table further shows that with regard to the post-test anxiety levels among the respondents, 22.1 percent of the respondents are having normal range of anxiety, 62.2 percent
of the respondents are having mild to moderate range of anxiety and 15.7 percent of the respondents are having severe range of anxiety.

The result shows that majority of the respondents in the pre-test stage of stress therapy had severe range of anxiety levels whereas majority of the respondents in the post test stage of stress therapy had mild to moderate range and normal range of anxiety levels.

**Verification of Hypothesis – Ho1**

Ho1: There exists no significant difference between the pre and post stress therapy anxiety levels among the differently abled children.

Test applied: t-test

<table>
<thead>
<tr>
<th>Test</th>
<th>Mean</th>
<th>SD</th>
<th>Mean Percentage</th>
<th>Mean Difference</th>
<th>Df</th>
<th>Paired t-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre test</td>
<td>61.9</td>
<td>2.96</td>
<td>77.9</td>
<td>13.3</td>
<td>139</td>
<td>16.632**</td>
</tr>
<tr>
<td>Post test</td>
<td>51.3</td>
<td>5.78</td>
<td>64.6</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Computed

** Significant at 0.01 level of significance

The table no.2 shows the effectiveness of stress therapy on the anxiety levels of the respondents. The t-test result shows that the t-value was found to be 16.632 and it was found to be higher than the table value and it was found to significant at 0.01 level of significance. Hence, the proposed null hypothesis Ho1 was rejected. Thus, it can be inferred that there exists a significant difference between the pre and post stress therapy anxiety levels among the differently abled children.

**Verification of Hypothesis – Ho2**

Ho2: There exists no significant association between the demographic variables and the anxiety levels of the differently abled children.

Test applied: Chi-square test

<table>
<thead>
<tr>
<th>Demographic variables</th>
<th>Pre test</th>
<th></th>
<th>Post test</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Df</td>
<td>Chi-square value</td>
<td>Df</td>
<td>Chi-square value</td>
</tr>
<tr>
<td>Age</td>
<td>2</td>
<td>11.32*</td>
<td>2</td>
<td>0.32</td>
</tr>
<tr>
<td>Sex</td>
<td>1</td>
<td>1.03</td>
<td>1</td>
<td>1.14</td>
</tr>
<tr>
<td>Education of the child</td>
<td>2</td>
<td>12.96*</td>
<td>2</td>
<td>1.36</td>
</tr>
<tr>
<td>Education of the father</td>
<td>4</td>
<td>3.32</td>
<td>4</td>
<td>4.12</td>
</tr>
<tr>
<td>Education of the mother</td>
<td>4</td>
<td>14.04*</td>
<td>4</td>
<td>3.08</td>
</tr>
<tr>
<td>Occupation of the father</td>
<td>3</td>
<td>12.18*</td>
<td>3</td>
<td>1.39</td>
</tr>
<tr>
<td>Occupation of the mother</td>
<td>2</td>
<td>2.08</td>
<td>2</td>
<td>2.58</td>
</tr>
<tr>
<td>Place of living</td>
<td>1</td>
<td>9.83*</td>
<td>1</td>
<td>2.86</td>
</tr>
<tr>
<td>Family monthly income</td>
<td>1</td>
<td>9.36*</td>
<td>1</td>
<td>2.43</td>
</tr>
</tbody>
</table>
The table no.3 shows the association between the demographic variables and anxiety levels among the respondents. It shows that out of 15 demographic variables examined in the study, 9 variables were found to be statistically significant. The chi-square test result shows that majority of the demographic variables were found to be statistically significant at 0.05 level of significance. Hence, the proposed Null-hypothesis-Ho2 stands rejected. Thus, it can be inferred that there exists a significant association between the demographic variables and the anxiety levels of the differently abled children.

CONCLUSION AND SUGGESTIONS
The present study examines the stress and anxiety levels among the differently abled children in the selected study area and it analyzes the effectiveness of stress therapy on the anxiety levels among the differently abled children. The study further evaluates the association between the demographic variables and the anxiety level among the differently abled children. The study concludes that there exists a significant difference between the pre and post stress therapy anxiety levels among the differently abled children and there exists a significant association between the demographic variables and the anxiety levels of the differently abled children. The study further concludes that the stress therapy and other practices of stress management are very helpful for reducing the anxiety and stress levels among the differently abled children especially in the perspectives of academic aspects.

The educational institutions, parents and the Non-governmental organizations in close coordination shall resort to conduct stress management sessions and medical counseling for the physically challenged children in order to make them socially, psychologically and academically strong.

REFERENCES


