

Psychological Well-Being and Locus of Control in Adolescents with Visual Impairments

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Abstract

Psychological well-being and locus of control have been implicated in persons with visual impairment [1]. But a lot is required to be investigated in Indian context pertaining to impact of such sensory impairments on psychological determinants in person across the age-groups. The present study was a part of PhD thesis which aimed at assessing the impact of visual impairments on Psychological well-being and locus of control of adolescents. For the purpose, a sample size of 100 adolescents (50 adolescents with visually impairments and 50 normal adolescents) was selected through purposive sampling technique. The Indian version of Rotter's scale on locus of control scale [2] and Verma's Psychological Well-being (Verma and Verma 1989) were administered for data collection and statistical analyses by the t-test and correlation. Results revealed significant difference on variables between adolescents with and without (normal) visual impairments. Unexpectedly, adolescents with visual impairments showed higher internal locus of control than normal adolescents, but as hypothesized, poor Psychological well-being.

Keywords: Visual Impairment; Psychological Well-Being; Locus Of Control Impaired

Introduction

Loss of vision and visual impairment are burning significant issues of health and rehabilitation all over the world. In U.K. approximately two million people are living with sight loss [3]. According to Royal National Institute for the Blind [4] 80 million people are living with blindness in India regardless of age-group. India is now home to the world's largest number of blind people of the 37 million people across the globe who are blind over is million are from India. Should the current age-sex specific rates of moderate visual Impairment continue, the prevalence in the years 2010 and 2020 would be 9.2% and 10.7% [5] said.

Studies have explored that visually impaired adolescents and adults had lower levels of psychological well-being than their sighted adolescents. Burmedi., *et al.* [6] conducted a systematic study and suggested that vision loss is associated with depression, poorer quality of life and reduced social activity. Nyman., *et al.* [7] have also supported this findings. Psychological well-being (which is interchangeably used for quality of life also) is the subjective feeling closer to mental health, contentment, happiness, vital energy, and satisfaction with life and work, self-actualization of one's full potential and property [8]. One of the most important obstacles for visually impaired adolescents is emotional one. Psychological well-being deals with people's feelings about everyday experience in life activities [9]. The visually im-

paired adolescents have either Internal or external control effecting their psychological well-being. These adolescents also may struggle to experience a good and peaceful life.

Adjustment to visual loss is really very difficult, tremendously challenging, and failure to which is bound to cause and catalyze discouragement and despair in persons with visual impairments (PWVI) at different stage of life-span development. Vision loss adversely affect the Psychological well-being and locus of control of visual Impairment Normal Adolescents. Result of Thurston and Mcleod (2010) focuses on association between sight loss and depression. Nolett, *et al.* (2016, 2019) observed that 40% of people attending the clinic with visual Impairment has significant low quality of life. On the contrary, 75% PWVI with Internal locus of control did not display signs of depression. Pinquart and Pfeiffer [10] conducted a study on 200 visually Impaired individual to identify the psychological well-being visually Impaired individual with unimpaired control group. The sample included 155 Individual, who are visually impaired. Result showed that visually impaired people showed a strong decline of Psychological well-being and required parental and peer support for well-being [11,12]. The effect of profound vision loss on psychological well-being in adolescents, young Adult, and middle aged adult showed poor psychological well-being. Children with visual impairment showed behavioural and emotional problem, low sleep quality [13]. Adolescents who are blind and those who have low vision had similar level of psychological problem (Martin Pinquart and Jens 2014). HM Arrow [14] found decrease in psychological well-being vision loss is associated with depression, poorer quality of life and reduced social activity. Nyman, Gosney and victor [15] loss of vision associated with cognitive functions' impairments in adolescents. Identified declining vision as having a greater association with cognitive, deterioration. The visually impaired adolescents reported lower psychological well-being than their healthy peers whereas significant difference observed [16]. Visual Impairments lead to difficulties, worse psychological well-being and locus of control [17]. More often are feeling of loneliness and difficulties in making friends, self-esteem, school achievement and social skills. Adolescents with visual impairment need more support in their psychological well-being.

In fact, all the aforementioned researches reflect on findings of western studies likely to be affected by several psychosocial factors, for example, parental relationships and involvement, financial determinants, awareness of facilities and statutory provisions, provisions an available services for PWVI, social safety and security etc. Indian society and culture are quite different from the western counterpart in several respects. Moreover, there are several studies available on impact of visual impairment on psychological well-being in general but not in relation to adolescents, as well as, very scanty number of researches have been found on locus of control in PWVI specially in adolescents. The current research was aimed at investigating psychological well-being and locus of control in Indian adolescents with visual impairments. It was conducted with following hypotheses: (i) The adolescents with visual impairments (AWVI) have poor psychological well-being and locus of control than normal adolescents without visual impairments (NAWVI). (ii) Male participants have better psychological well-being and locus of control in relation with their female counterparts in the study group. (iii) There is a relationship between locus of control and psychological well-being.

Methodology

100 adolescents with severe and above level of and without visual impairments (50 in each group with equal sex-ratio) were selected from the regional capital of Patna (Province of Bihar) through purposive and convenient sampling techniques. The age-group of the sample was 16-19 years of age. The sample was matched on sociodemographic variables, e.g., age, sex, socio-economic status, education level, marital status etc. No participants with additional medical/psychiatric complications were included in study group, as well as, incomplete questionnaires were not included in scoring and computerized statistical analyses. The respective directors were informed about the nature and purpose of the research, and, a prior formal consent was duly received from the directors of respective centers of AWVI, as well as, from the participants and their informants for data collection. An objective statistical analyses were computed for analyses of results, discussion and conclusion.

Tools used

PGI locus of control scale

The Indian version of Rotter’s Internal External locus of control scale (RIELCS) [2] was administered (i.e. PGI Locus of Control Scale). It has been developed and standardized by Vohra [18]. This is a quite popular, reliable and valid scale. Its split-half reliability index is between 0.65 to 0.79, and, test-retest reliability index is 0.76. Its validity co-efficient was 0.54.

PGI scale of psychological well-being

This scale measure the Psychological well-being of the individual. Psychological well-being scale to assess the general well-being of the subjects. The scale consist of 20 items organized in domains namely physically (e.g. feeling bothered by illness or pain) mood (e.g. Feeling cheerful most of the time), anxiety (e.g. feeling useful/wanted) of five item each higher total and domain specific scores indicate higher level of well-being. This is a well-known, reliable and valid scale in India.

Procedures

Selection of participants was followed by distribution of questionnaires to the subjects and instructions of the scales. Each item/sentence separately of both scales in two different sessions were explained to each participant and responses were received for scoring and interpretation. The willingness of the subjects to participate in the study was fully taken care of.

Results

Variables	Nature of Sample	N	M	SD	t-value	p-value
LoC	Visual Impairment Adolescents	50	9.37	5.7	1.82	<.05
	Normal Adolescents	50	12.27	6.57	(Not significant)	(1.984)
Psychological Well-being	Visual Impairment Adolescents	50	13.71	5.41	7.21**	>.01
	Normal Adolescents	50	9.77	1.98		(2.632)

Table 1: Statistical analyses through t-test on Locus of control and Psychological Well-being between visually impaired and normal subjects.
 **: Statistical significance.

Variables	Nature of Sample	N	M	SD	t-value	p-value
LoC	Male adolescents with Visual Impairment Adolescents	25	16.11	1.60	8.45**	<.01
	Female adolescents with Visual Impairment	25	12.35	1.72		(2.403)
Psychological Well-being	Male adolescents with Visual Impairment	25	14.50	1.73	3.70**	>.01
	Female adolescents with Visual Impairment Adolescents	25	15.12	1.62		(2.403)

Table 2: Sex difference through t-test on Locus of control and psychological well-being between visually impaired and normal subjects.
 **: Statistical significance.

Variables	Group	Mean	df	Correlation Coefficient (r)	P-Value
Locus of Control (N = 50)	Study group (AWVI)	10.3	98	0.19 (Not significant)	<.05 (.200)
Psychological Well-being (N =50)		3.92			

Table 3: Statistical correlation between Locus of control and Psychological Well-being of Adolescents with visual Impairment.

Discussion and Conclusion

The study was conducted in Patna, capital of the province of Bihar in India. This is because there are some governmental and non-governmental organizations working for the persons with visual impairments. Therefore, it was convenient to find out AWVI for data collection for the research investigation. The age-group of the participants was selected as late adolescence (i.e. 16 - 19 years) because it was difficult to find out AWVI of early adolescence through the respective centers, as well as, strongly likely that participants of early adolescence might not be able to understand the significance of the proposed research and have been answered to questions of the scales honestly. Similarly, as mentioned in the beginning that, since the research was a part of doctoral dissertation to be completed within a given deadline, Therefore, participants with mild to moderate level of visual impairments were not available during the period of data collection and the researchers would have been required to wait for longer time.

In results, It has been observed that though the normal participants (comparison group) scored high on the scale as compared to the AWVI (study group), but the finding was not statistically significant. So, it could be concluded that visual impairments did not affect significantly the locus of control of the study group which could be attributed to uniformity in subjects with severe to complete visual impairments. Secondly, they were free to move like normal individuals in all spheres of life despite such impairments [1]. Nonetheless, since level of visual impairments is likely to affect LoC also, therefore, research are welcome to investigate the needful for exclusive results or extending this research ahead in India. On other hand, the results were statistically significant wherein the study group showed better psychological well-being as compared to normal participants. This finding contrasted with all studies explored for review and current status mentioned in 'Introduction'. It could be attributed to several factors, e.g., available support system from all corners, feeling of entertaining freedom like no less than normal counterparts, personal personality characteristics, and relatively minimal risk-facing in daily life, family structure and involvement of family members etc. But normal adolescents undergo a developmental stage wherein neither they are considered as fully grown adults nor like children, thus discarded by both age-groups. This is a stage of career-making in a throat-cutting competitive stage and other conflicting life issues isolating them from others and resulting into low level of psychological well-being and life satisfaction.

Though there was no significant difference between participants of study group and comparison group (i.e. normal participants) on scores of LoC, but there sex-difference was duly observed between the performance of male and female participants of the study group. It was observed that female participants with visual impairments had better LoC than their male counterparts of the group. Similarly, female participants of the study group also significantly performed better on psychological well-being-supporting findings of several international studies [19,20]. The contributing factors were implicated as nature of parenting, formal and informal social support, personality features, independence in mobility etc. However, few studies explored opposite results [21] might be attributed to level of visual impairments, regional disparity, age etc. Such studies are recommended to include various categories of visual impairments and other socio-demographic determinants in future investigation.

A negative association between psychological well-being and locus of control [22] has been explored in other clinical/rehabilitation domains, but similar investigations have not been found on adolescents with visual impairment. This exploration made this study distinct at least in Indian context. However, the finding on correlation between LoC and psychological well-being was not significant. The results

could be attributable to the factors mentioned above in the context of difference normal participants and AWVI on psychological well-being. Similar studies would be highly appreciable in this context involving more robust and diverse sample-size as India is a country of huge cultural fraternity [23-28].

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