

FRUSTRATION REACTION IN PHYSICALLY CHALLENGED INSTITUTIONALIZED CHILDREN (5-13YEARS).

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ABSTRACT

The present research was undertaken to study the frustration reactions in physically challenged institutionalized children (5-13years). The sample of study was 10 physically challenged institutionalized children, most of whom belong to low socio-economic status families. Interview Schedule and Rosenzweig-Picture Frustration Study (Children's Form) were used for data collection. The study reveals that frustration is observed among these children but most of the children turn blame, hostility against some person or thing in the environment

INTRODUCTION

Today's fast competing and changing scenario of society has forced the individuals to concentrate their efforts on different dimensions of life. It is a matter of great concern that the abilities and potentials of disabled persons have not yet been fully explored and tackled but practically it is a great loss of human resources, which, if discovered, matured, appropriately channelized and utilized could add a new force to the progression of the society. In such an atmosphere of least concern rather neglect, it becomes a moral duty, rather a religious, to identify the handicapped people and to explore their potentials and weakness in scientific ways (Gajendragadkar, 1983). Physical disability is a common experience of everyday life. According to World Health Organizations (1980) disability means any restriction or lack of ability to perform any activity in the manner within the range considered normal for a normal being. Physically handicapped children are defined as those whose non-sensory physical limitation or health problems interfere with the school attendance or learning to such an extent that special services, training equipment, materials or facilities are required. The term currently in use to denote such of children is physically challenge. Physically challenged children are faced with those disabilities, which relate primarily to disorders of the skeleton, joints and muscles including club feet, poliomyelitis, amputation (a missing limb) and fractures or burns that cause contractures. Panda (1999) provides the categories of orthopaedic disability according to extent and severity i.e. mild – below 40%, moderate – 40% - 69%, severe – 70% - 99% and profound – 100% and above. Physically challenged child's development like physical, emotional, mental and social is slower, to a greater or lesser extent, than that of a normal child, even though the handicapped child is of normal intelligence. So his/her concept of himself/herself, as a separate entity, is more difficult to achieve from the beginning.

Frustration is the feeling when we do not get what we want, when something interferes with our gaining a desired and expected goal. *Roseinzweig (1944)* defines frustration as “*frustration occurs whenever the organism meets a more or less insurmountable obstacle or obstruction in its route to the satisfaction of a vital need*”. He says that when an individual faces a frustrating situation, his reactions may be favorable or unfavorable and unacceptable. The degree between favorable and unfavorable behavior depends very much on the frustration tolerance of a person. Roseinzweig defined the reactions to frustrations in terms of three directions intrapunitive, intropunitive and impunities and the type of reactions as obstacle dominance ego defensive and need persistence. Mostly the physically disabled children are blocked by the frustration and due to the frustration these children attack on others or himself/herself. The adjustment of these children with the normal group is quite low. The present study focuses on the concept of frustration reactions in physically challenged institutionalized children and also to understand the level and direction of frustration.

Even in these days, where science and technology has done so much to make disability – ‘*a challenge*’, the local people go only for charity and not for giving a personal ‘touch’ and always isolate these children. These children, who are attending a specialized residential facility, need to be brought into the normalized circles, where they understand the society they will have to face after leaving the institution and the ‘*challenges*’ that they have to encounter and live up to. Exposure to other people with the same handicap is no doubt generally an important experience with a variable effect. To generalize, children tend to find it reassuring that there are other children who have the same problems and that they are not unique. People in the position of becoming handicapped in later life generally report that interaction is easier with new acquaintances than with those who were known previous to the handicap.

METHODOLOGY

The present research was conducted to study the concept of frustration reactions in physically challenged institutionalized children (5-13 years). This institution was situated in Udhayawala in Jammu (J&K State) was selected for the study as it is the only institution meant for the welfare of the physically handicapped children. Children from different parts of the state reside in the institution to attain education so that they can become self-reliant and self-dependent.

Sample Size:

The sample consists of 10 institutionalized physically challenged children.

Sampling Techniques

Purposive sampling technique was used to select the sample from a residential institution, as home-based sample could not be obtained even after door-to-door survey.

Criteria for Sample Selection

For selecting the sample following criteria were taken into consideration:

Institutionalization

Only those children were selected who resided in the institution for physically challenged children.

Age Group

Children should be in the age group of 5-13 years.

Tools Used For Collecting The Data:

Interview Schedule and Rosenzweig-Picture Frustration Study (Children's Form) By- *Udai Pareek and Saul Rosenzweig*. (1959) were used for data collection.

PROCEDURE OF DATA COLLECTION

Rapport Establishing

Permission from the head of the institution was taken in order to visit the institution. For rapport building (establishing), the investigators visited to the institution for many times. The investigators interacted with children and their care takers in the institution. The purpose and features of the study were explained to them. Mean while informal observations were recorded.

Data Collection

Initially rapport was established and participatory approach was used to collect the information from the institution about physically challenged children. The requisite data was collected with the help of tools, which were employed during field work. The children were assured that the information and data will not be disclosed and will only be used for research purpose. They were requested to fill the form individually in front of the investigators and asked to complete the tests as quickly as possible to avoid any alterations to their immediate responses.

DATA ANALYSIS

Both qualitative analysis and statistical measures were used.

RESULTS AND DISCUSSION

Background Information:

Table no1: Showing Background Information of the Respondents

Variables	\bar{X} *
Age of the Respondents	11-15 years
Educational Qualification	3 rd
Father's Educational Qualification	Illiterate
Father's Occupation	Farmer
Ordinal Position	2 nd
Onset of Disability	3-5 years
Age at joining the Institution	3-6 years
Schooling before joining the Institution	Yes
Visits made by Parents in the Institution	Weekly
Visits made by children at the Home	Yearly
*Median value used.	

Table no 1 reveals that the median age of the respondents was 11-15 years and the educational qualification was 3rd standard. Median educational qualification of the father was illiterate and median occupation, farmer. Results show that all the mothers were illiterate and were housewives. All the children belong to the nuclear families. The median ordinal position of the children was 2nd and median onset of disability was in the age group of 3-5 years. Median age at joining the institution was 3-6 years. All the children received treatment before joining the institution. Median visits made by parents in the institution were weekly whereas children visit their homes yearly.

Rosenzweig-Picture Frustration Study (Indian Adaptation):

Table no 2.1: Percentage distribution of the respondents according to the G.C.R

G .C .R %	N	%age
30-39	5	50
40-49	2	20
50-59	2	20
60-69	-	-
70-79	1	10
Total	10	100

G.C.R may be regarded as “one measure of the individual’s adjustment to a normal group”. The above table (2.1) shows that the majority of the children have G.C.R, 50% which falls under the category of 30% - 39%. It indicates that the adjustment of the majority of the children with the normal group is low.

Table 2.2: Percentage distribution of the respondents according to the profile and deviation pattern

	E		I		M	
	N	%age	N	%age	N	%age
0-10	-	-	9	90	7	70
11-20	3	30	1	10	3	30
21-30	6	60	-	-	-	-
31-40	1	10	-	-	-	-
	O – D		E - D		N – P	
	n	%age	N	%age	n	%age
0-10	10	100	-	-	7	70
11-20	-	-	1	10	2	20
21-30	-	-	6	60	1	10
31-40	-	-	3	30	-	-
Total	10	100	10	100	10	100

E = Blame, Hostility, etc. are turned against some person or thing in the environment

I = Blame, Censure, etc. are directed by the subject upon himself

M = Blame for the frustration is evaded altogether, the situation being regarded as unavoidable; in particular, the “Frustrating” individual is absolved.

O – D = Blocked by the frustration.

E – D = Attack others or himself.

N – P = Go for some solutions of the problem.

The table reveals that the percentage of E in majority of the children is 70%, which comes in the category of 21% - 30%. It means that in all the children blame, hostility was turned against some person or thing in the environment to a large extent. The percentage of I of most of the children (90%) falls in the category of 0 – 10% which shows that these children direct blame etc upon themselves. The percentage of M of majority of the children (70%) falls in the category of 0 – 10%, which indicates that blame for the

frustration is, evaded altogether to a little extent. The percentage of O-D of all the children (100%) falls in the category of 0 – 10%. It indicates that these children are blocked by the frustration. In case of E-D the percentage of majority of the children (90%) fall in the category of 21% - 40%, which shows that due to frustration these children attacked others or themselves. The percentage of N-P only 10% children fall in the category of 21% - 40%. It means that less number of children go for solution of the problem.

Table no 2.3: Percentage distribution of the respondents according to the super-ego (s-e) patterns

	<u>E</u>		<u>I</u>		<u>E + I</u>		E- <u>E</u>		I- <u>I</u>		M + <u>I</u>	
	n	%age	n	%age	n	%age	n	%age	N	%age	n	%age
0-10	10	100	10	100	9	90	1	10	10	100	4	40
11-20	-	-	-	-	1	10	4	40	-	-	3	30
21-30	-	-	-	-	-	-	4	40	-	-	3	30
31-40	-	-	-	-	-	-	1	10	-	-	-	-
Total	10	100	10	100	10	100	10	100	10	100	10	100

E = Aggressively denies that he is responsible for some offense with which he is charged.

I = Admits his guilt but denies any essential fault by referring to unavoidable circumstances.

M = Blame for the frustration is evaded altogether, the situation being regarded as unavoidable; in particular, the "Frustrating" individual is absolved.

E = Blame, Hostility, etc. are turned against some person or thing in the environment

I = Blame, Censure, etc. are directed by the subject upon himself

The table no 2.3 reveals that the percentage of E which falls in the category of 0 – 10%. It means that all the children aggressively deny that they are responsible for some offense with which they are charged to a large extent. The percentage of I of all the children (100%) falls in the category of 0 – 10% which shows that these children admit their guilt but deny any essential fault by referring to unavoidable circumstances. The percentage of the E + I of most of the children are 90% which means that the children aggressively deny that they are responsible for some offense and some times they admit their guilt but deny any essential fault by referring to unavoidable circumstances. The percentage of the E – E of majority of the children is 80% which falls in the category of 11% – 30% which means that the children aggressively deny that they are responsible for some offense and turn their Blame, Hostility, etc. against some person or thing in the environment The percentage of I - I of all the children (100%) falls in the category of 0 – 10% which shows that these children admit their guilt but deny any essential fault by referring to unavoidable circumstances and direct blame, censure upon themselves. The percentage of the M + I of majority of the children is 70% which falls in the category of 0-20% which means that the children admit their guilt but denies any essential fault by referring to unavoidable circumstances and blame for the frustration is evaded altogether.

Table no 2.4: Percentage distribution of the respondents according to the trends.

Trends	1		2		3		4		5	
	n	%age	n	%age	n	%age	n	%age	n	%age
E ← +.23	-	-	1	10	-	-	-	-	-	-
E ← +.33	-	-	2	20	-	-	2	20	-	-
E ← +.37	-	-	1	10	-	-	-	-	-	-

E ← +.43	-	-	1	10	-	-	-	-	-	-
E ← +.45	-	-	-	-	-	-	1	10	-	-
E ← +.50	3	30	-	-	-	-	3	30	-	-
E ← +.67	-	-	-	-	-	-	1	10	-	-
E-D ← +.33	-	-	-	-	-	-	-	-	1	10
I → -.33, M → -.1	-	-	-	-	-	-	1	10	-	-
I ← +.50, M → -.67	-	-	1	10	-	-	-	-	-	-
M → -.1	-	-	-	-	-	-	2	20	-	-
M → -.33	-	-	-	-	1	10	-	-	-	-
M → -.60	-	-	1	10	-	-	-	-	-	-
O-D → -.1, N-P → -.1	-	-	-	-	-	-	-	-	1	10
O-D → -.1	-	-	-	-	-	-	-	-	1	10
None	7	70	3	30	9	90	-	-	7	70
Total	10	100	10	100	10	100	10	100	10	100

The results of the table no 2.4 reveal that in all the trends majority of the children have E as positive i.e. E ← +.50 it means that the frustration reactions in majority of the children are high.

Table no 2.5: Percentage distribution of the respondents according to the total patterns

Total pattern	n	%age
E > M	2	20
E > e	1	10
E > I = M	5	50
E > I & M	2	20
Total	10	100

e = a solution for the frustrating situation is emphatically expected of someone else.

E = Blame, Hostility, etc. are turned against some person or thing in the environment

I = Blame, Censure, etc. are directed by the subject upon himself

M = Blame for the frustration is evaded altogether, the situation being regarded as unavoidable; in particular, the "Frustrating" individual is absolved.

The table no 2.5 reveals that all the children (100%) have E > I, M, and e which means that all the children turn Blame, Hostility, etc. against some person or thing in the environment i.e. the frustration is outer directed.

DISCUSSION

Frustration is natural reaction to blockage of needs at any stage of life but the process of normal socialization teaches us to channelize and sublimate the frustration and delay need gratification. Children with special needs are at a loss because besides the society their own physiology is the blocking factor. In a previous research by Fitchen et al (1991) it was concluded that physically disabled individuals in everyday social encounters, thoughts and feelings were more negative. This suggests that these children will encounter much more negative situations and responses in life. The present research indicates that those children are facing frustration in their environment and they are turning the blame towards their environment and denying their own role in it, putting the blame on certain unavoidable circumstances. Their disability is compounded by their institutionalization and the low socio-economic conditions,

which form their familial backgrounds. Upadhyaya and Tiwari (1985) suggested that low socio economic status is a major contributor to frustration. According to them frustration was negatively related to social recognition, housing, education and recreational facilities and home environment. The children in the institution are living in a segregated world. Their interactions are limited to their peer group, other inmates, the staff and the visitors. Once they move into a normal group they take time in adjusting. Even the normal children sometimes reject such children. Though they accept their disability yet they have a poor self-concept. Sharma, Vaid and Jamwal (2004) too reached similar conclusion that physically disabled children have very poor self-concept. Joiner, Lovett, Linda and Win (1989) indicated that there is a positive relationship between assertive behavior and the degree of acceptance of disability among person's disabilities. The children in the present study are not assertive. They would rather stay out of the group and observe other's play, silently. Such factors enhance their own frustrations but they cannot actively put blame on anybody, though, their frustration at their own disability has been revealed.

The point to be considered here is whether we can offer any normalization to these children? Whether segregated, institutionalized environment is adequate? Whether society just has to stand as an onlooker with altruistic feelings or should it contribute in some other way? Some suggestions based on findings are being forwarded:

- 1 *Building the Self-concept and Self-esteem:* It was found from the reviews that these children have very poor self-concept as well as poor self-esteem so it is the duty of every person to encourage and develop confidence in the children. There are many activities these children can be involved in games and creative activities. This will help in development of positive self-concept, self-worth and self-esteem.
- 2 *Acceptance of ones disability:* Rather than being ashamed of their disability these children need to accept it. It is the responsibility of the community that they provide healthy environment for these children and develop positive attitude regarding their disability.
- 3 *Physical activities:* There is an absence of physical activity that the children enjoyed. There are many activities these children can be involved in like games, sports and creative activities. This will help in channelizing their energies and reduce the frustration level.
- 4 *Social involvement:* Physically challenged institutionalized children's social involvement was very low. Institutions should provide outdoor activities like picnics, educational trips, camps, so that these children interact with other peoples and try to understand the world. In this way they try to modify their behavior and also try to control their emotions especially frustration reactions.
- 5 *Community based rehabilitation:* Community can help by giving free seats to these students in various professional as well as vocational courses. This will motivate these students to go in for higher education, as they belong to low-income families.
- 6 *Vocational training:* Although the institution provides vocational training like knitting, tailoring and music but it is not sufficient in today's world to earn his or her living so institute should go in for computer education, technical education and provide more avenues to children

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