Perception of a Social Work Trainee Towards Children with Disabilities

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Abstract

Any impairment that is cognitive, developmental, intellectual, mental, sensory and physical or a combination of these is defined as a disability. It is a wide term that covers impairments, participation restrictions and activity limitations. A disability is not necessarily a health problem alone. According to the World Health Organization, 'it is a complex phenomenon reflecting the interaction between features of a person's body and features of the society in which he or she lives'. According to a recent study by the World Health Organization, 15% of the population in the world lives with some or another form of disability. The percentage has risen since the last census in 1970. In a Census taken in the year 2000, it was found that 21 million people in India have some kind of disability. This is almost 2.1 % of the Indian population. Out of a 2.1 %, 1% were visual impaired, 0.2% were speech impaired, 0.1% were hearing impaired, 0.6% had loco motor disability and 0.2% were mentally impaired. Tamil Nadu was found to have the highest number of disabled females than males. Mortality rates of children with disabilities was found to be 80% by the UN Enable. Estimates say that in India, 12 million children were found to be living with some form of disability. Children with disabilities are either shunned or frowned upon by society. Impairments such as learning disability are ignored or disregarded. This can lead to emotional and social interaction problems among children with disabilities. Various factors lead to disabilities among children, they can occur before birth, at the time of birth, after birth, due to some form of accidents, malnutrition, hereditary factors, infectious diseases and so forth. The present paper attempts to portray the various problems experienced by children with disabilities. The paper also explains social work interventions such as case work and group work

Keywords: Disability, Case work, Group work

1. Introduction

According to CRIN, over 150 million children around the world have some form of disability. 50% of the children with hearing impairment and 60% of the children with intellectual impairment had been sexually abused. 90% of children with disabilities will not live to see their twentieth birthday. There are several incidents where medical professionals kill children with disabilities and write it off as a form of mercy killing. Any impairment that is cognitive, intellectual, mental, physical, and sensory or a combination of these is said to be a disability.

A disability is a condition or function judged to be significantly impaired relative to the usual standard of an individual or group. They affect a person' participation in life. In India, children with disabilities come under the Ministry of Social Justice and Empowerment. It has been noted that no single minister is assigned for the protection of these children. It has been estimated that in India, 12 million children are living with disabilities. Only 1% have access to schools while one-third of most of the disabilities can be prevented. Children with disabilities are subject to deprivations and limited opportunities in several dimensions of their lives.

The social work trainee was able to come in contact with children with disabilities at a 'Home for disabled children' during her period of internship. This paper attempts to describe her experience with the children who resided at the home. During her internship, the trainee met children with different kinds of disabilities. Their ages ranged from as young as five years to twenty years old. The hole provided regular physiotherapy for the children as well as other basic necessities. The agency also provided vocational tailoring classes for children who were willing to learn. The children were sent to local special schools in accordance with their disabilities.

A total of 25 children resided at the home. The trainee would spend eight hours each day for three days a week at the agency, interacting with the children and performing given tasks. The parents of the children with disabilities would come to visit the children once in a while. Most of the children hailed from rural backgrounds where their families were mostly agricultural workers with minimal income. The home took care of the children school fees, uniforms, shoes and so on. Some of the children had multiple disabilities.

1.1.1. Causes of Disabilities among children:

Disabilities in children can be due to a number of factors:

1. Before birth:

During pregnancy, if the mother is affected by a disease or has an accident this can badly affect the

child as well. If the mother suffers from malnutrition it can also cause a deficiency in the baby, as a result, the child can be mentally or physically deficient.

2. During Birth:

Accidents can occur during delivery that can cause disabilities in children. Difficulty during delivery can hinder the supply of oxygen to the child's brain, which can lead to severe damage to the nervous tissues of the brain or the spinal cord. This can cause mental impairment in the child. Instruments used during delivery, for example, forceps can damage the brain of the child.

3. After birth:

If proper care is not given to the child after birth this to can lead to a disability.

4. Malnutrition:

Malnutrition is one of the main causes of disabilities in children. When proper nutrition is not given to a child he becomes physically weak. For example, lack of calcium causes malformation of bones. Deficiency of vitamin A can cause visual impairment in children.

5. Accidents:

Accidents can lead to disabilities. In some cases, the wrong medication can cause permanent disabilities in children.

6. Hereditary factors:

Children can receive genes of deficiencies from their parents. The child may be visually impaired, speech impaired or mentally impaired by birth.

7. Infectious diseases:

Infectious diseases lower the immunity power of a child he then becomes susceptible to diseases if he is not given proper immunization diseases like mumps can cause hearing impairment or polio can cripple the child.

1.1.2. Types of Disabilities:

There are various types of disabilities some examples of common disabilities are:

1.1.3 Hearing impairment:

Hearing impairment refers to the loss of hearing. It can range from mild to profound. An individual with a mild hearing impairment may have problems understanding speech while those with moderate hearing impairment require a hearing aid. Some individuals can be severely deaf and rely on lip reading for communication. Hearing loss can also be defined as a diminished ability to hear sounds that other people do. Deafness refers to the inability to understand speech even though the sound is amplified. There are three types of hearing impairments:

A. Conductive Hearing Loss:

This can be due to inflammation, the buildup of ear wax or a malfunction of the ossicles or the ear drum may be defective. The ossicles can be impaired due to infection, trauma or amkymosis.

B. Sensorineural Hearing Loss:

Hearing loss is caused by a dysfunction in the middle ear, cochlea, auditory nerve or brain damage. Long term exposure to loud noises is a common reason for hair cell damage in the ear that leads to Sensorineural hearing loss. Individuals with this hearing loss can benefit from a cochlear implant.

C. Mixed Hearing Loss:

This is a combination of both conductive and sensorineural hearing loss. Long term ear infections can damage the ossicles and the ear drum. In some cases, surgery may restore hearing.

Children can acquire hearing loss due to ear infections, meningitis, wrong medication, measles, chicken pox, head injury, mumps and noise exposure. Genetic factors are believed to cause more than 50% of genital hearing loss in children.

1.1.4.Visual Impairment:

Visual impairment refers to the loss of vision it has many degrees from mild to profound. When one or more parts of the eye or the brain cannot process images because they are diseased or damaged can lead to severe or total loss of vision. Some children are born with congenital blindness caused due to an infection or it can be inherited. Conditions that cause vision loss after birth include amblyopia, cataracts, diabetic retinopathy, glaucoma, macular or trachoma. The most common cause of visual impairment is a cataract. It usually affects people in their sixties or seventies but sometimes children are born with a congenital cataract. Visually impaired children can become isolated from others easily.

1.1.5.Intellectual impairment:

A person with an intellectual impairment has a disability and that is characterized by limitations intellectually and inadaptive behaviour, these include daily social and practical skills. Intellectual functioning refers to the capacity to learn, reason, and solve problems and so on. Intellectual learning can be measured through an IQ test. An IQ test score 70 indicates a limitation in intellectual functioning. Adaptive behaviour is the collection of practical, social and conceptual skills that are learned and performed by people on a daily basis. Conceptual skills refer to language and literacy, concept of time, money and numbers; and self-direction. Social skills refer to interpersonal skills, self-esteem, social problem solving and the ability to follow rules, etc. Practical skills include activities in daily life, occupational skills, following a routine, etc. Children with intellectual disabilities will develop skills much slower than normal children. There are different signs of intellectual disabilities in children. They can appear during infancy or maybe unnoticeable until a child reaches school age. Symptoms include rolling over, sitting up, crawling, or walking late. They will have an inability to connect actions with consequences. They will have difficulty with solving problems or thinking logically. The most common causes of intellectual disability are genetic conditions; this includes Down syndrome and fragile X syndrome. It can be caused due to problems with pregnancy. If the mother is an alcoholic, addicted to a substance of use, was malnutritioned, had an accident, etc. Intellectual disability can be caused due to problems due to child birth or due to illnesses and injuries.

1.1.6. Locomotor impairment:

Locomotor impairment is a disability of the bones, joints or muscles leading to the restriction of the movement of the limbs. It can also be a usual form of cerebral palsy. So cerebral palsy is a group of non-progressive conditions characterized by an abnormal motor control posture resulting in brain injuries that may have occurred in the peri-natal, neo-natal or infant period of development. Some common conditions give rise to locomotor disability poliomyelitis, amputation, cerebral palsy, injuries of the spine, head, fractures, etc. A child with a locomotor disability may not be able to grasp objects with ease. They may have an absence of any part of the limb. They may have difficulty in walking or moving their arms.

1.1.7. Learning impairment:

Learning impairment affects a person's ability to acquire, process or use either spoken, written or non-verbal information. They interfere with learning skills basic skills like reading, writing, etc. They can also interfere with skills like time planning, reasoning, organization, memory, and attention. They not only affect a child's academics but also their relationships as well. A learning impairment can always be cured or fixed, however, with appropriate intervention, people with learning impairments can achieve success at work, in school, in relationships and in society. Some common learning disabilities include dyscalculia, dysgraphia or dyslexia. *1.1.8. Autism:*

Autism is a range of conditions exhibited by challenges with social skills, repeated behaviour, speech and nonverbal communication. There are many types of autism caused by different combinations. These combinations can be genetic, non-genetic and environmental influences. These influences increase the risk for a child to develop autism. Symptoms of autism appear between the ages of two or three. They can also be diagnosed as early as eighteen months. Researchers have noted that autism runs in the family. If a parent carries a gene change this can be passed on to the child, even if the parent does not have autism. There is an increased risk of autism if the parent is of an advanced age, if a pregnancy is spaced less than a year apart, pregnancy or birth complications, etc.

1.1.9. Challenges Faced by Children with Disabilities:

Children with disabilities are one of the most marginalized groups of children to experience a widespread violation of their rights. Discrimination arises not only as a result of their disability but also due to a lack of understanding and knowledge of its causes and implications. It is also mixed with issues such as poverty, social isolation, lack of services and a hostile environment. Children with disabilities are judged by what they lack rather than what they have. Children with disabilities spend much of their lives in institutions, nursing homes or other residential institutions.

Cultural barriers bring a two-fold discrimination on girls and young women with disabilities. These children are stigmatized. They experience discrimination in every aspect of their lives. Negative beliefs about their disabilities are often firmly held by ignorant members of society. A disability is often considered to be "contagious". Lack of data makes it difficult to quantify the extent of discrimination against them. They are often hindered in activities like playtime. This limits their access to social and cultural life.

Children with disabilities have a mortality rate as high as 80%. Depending on the type of impairment the child will need additional support and resources. Poverty is a major contributor to disability. Children who are poor become disable through poor health care, malnutrition, lack of clean water, sanitation, social protection, etc. Children with disabilities may face barriers to education. For example, they are not allowed to join school because their parents have low expectations of them.

Parents with several children often prioritize their children without disabilities over their siblings who have disabilities. Evidence from the research showed that children with disabilities are three to four times more likely to be subjected to some form of abuse. They are emotionally deprived and fail to express themselves due to fear of being misunderstood. A sense of guilt sets in as they begin to believe that they are the cause for problems in their families. The trainee was able to speak to some of the children and learn about the problems they faced. Many of them expressed fear of the future and said that they had nothing much to look for.

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2. Methods of Social Work:

The trainee used methods of social work such as case work and group work to interact with the children. *2.1.1. Case Work:*

It is believed that case study was first introduced by Frederic Le Play in 1829. The popularity in case study in testing theory has developed in recent decades. A case study is a report about a person, group or situation that has been studied. They are produced by following a formal research method. There are three types of case studies: Linear, Process-oriented and Grounded. Under the generalized category of case study exists subdivisions based on goals and objectives of the investigator. They are:

- Illustrative case studies: They are descriptive studies; they utilize one or more instants of an event to show the existing situation. They aim to make the unfamiliar familiar.
- Exploratory case studies: They are performed before large-scale investigations. It is to help to identify questions and select types of measurements before the main investigation.
- 3. Cumulative case studies: They aggregate information from several sites collected at various sites. These studies collect past studies which allow for greater generalization.
- 4. Critical instance case studies: These examine one or more sites for examining situations of unique interests with little to no interest in generalization. This method is useful for answering cause and effect questions.

The trainee conducted a total of five case studies in which she recorded the presenting problem, relevant history, interpersonal style, environmental factors, personality dynamics, cognitive factors, emotional factors, behavioural factors, the trainee's conceptualization of the problem and the therapeutic intervention. Most of the case studies were conducted for children between the ages of twelve and eighteen. The children exhibited issues such as anger management problems, behavioural problems, irrational beliefs, demotivation and shyness. The trainee used therapeutic intervention methods such as ventilation, cognitive behavioural change therapy and rational emotive therapy.

2.1.2. Group Work:

Social group work is a method of social work which helps individuals to enhance their social functioning through purposeful group experiences and to coup more effectively with their group or community problems. There are four types of groups in social group work. They are long term groups, short term groups, closed groups and open groups. Group work helps to achieve the overall objectives of social work through its own unique objectives. They assess individuals in their maturation, they provide emotional and social nourishment, they promote participation and remedy individual and social maladjustment through group intervention strategies. The roots of contemporary group work are traced back to group education classes of tuberculosis patients conducted by Joseph Prat in 1906. Social group work later arose in the later years of the 19th century. They were a result of the problem brought about the civil war. Social group work and social welfare. Group approach was used in charity. However, the history of group work began with the founding of the first school of Social Work in 1936, the Sir Dorabji Tata Graduate School of Social Work in 1936.

The trainee conducted two group works; a recreational group work and an educational group work. There were a total of ten members in each group. The recreational group lasted for three sessions and the educational group work went on for five sessions. Both the educational group and recreational group was a heterogeneous closed group. In the recreational group work the trainee provided activities to help the members interact better with each other. Through the educational group work the trainee sought to help the members overcome problems concerning their education.

3. Conclusion

The experience at the home was enriched with learning for the social work trainee, she was able to connect with the children on an individual level. Communication with some of the children was not very effective due to their disabilities, especially with children with hearing impairment or severe intellectual impairment. She found that many children had hidden talents and longed for attention. Often times they opened up and shared their feelings only after the trainee had spent a considerable amount of time with them. Some of them exhibited trust issues due to negative incidents in their past. Like regular children, they enjoyed games, cultural activities and had aspirations though most of them were not very confident of achieving them. The trainee was also able to meet the therapist who worked with the children and learnt how she provided therapies for children with speech impairments and locomotor impairment.



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