

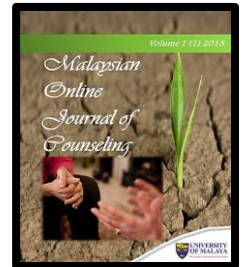
ADAPTATION TO VISION LOSS AND FAMILY MEMBERS ATTITUDE TOWARDS ADVENTITIOUSLY BLIND PERSON IN KUALA LUMPUR

Ahmad Shamsuri Muhamad, Melati Sumari (PhD), Lau Poh Li (PhD)¹

ABSTRACT

The purpose of this study was to identify the changes and problems faced by a group of adventitiously blind persons in the Klang Valley, Malaysia. This study covers the issues of adaptation to vision loss and also how the family members treat them. This study also aimed to see whether gender and level of blindness affect the adaptation. Besides, this study also sought to determine the correlation between overprotection attitudes by family members with level of adaptation to vision loss. A set of questionnaire was distributed to 49 participants. The findings indicate that the level of adaptation to vision loss is moderate. In addition, the study found that gender and level of blindness did not affect the level of adaptation to vision loss. Finally, the study revealed that there was a negative correlation between overprotection attitudes among family members with level of adaptation to vision loss. Research findings and suggestions for future research are discussed.

Keywords: people with disability, visually impaired people, adventitiously blind; family, adaptation to vision loss



[1]
Department of Educational
Psychology and Counseling
Faculty of Education
University of Malaya

Corresponding Author:
Faculty of Education
University of Malaya
shamrisme@gmail.com

INTRODUCTION

The World Health Organization (WHO) estimates that 15% of the world's population consists of people with disabilities (PWDs) (World Health Organization & The World Bank, 2011). From this amount, 161 million are visually impaired which is 37 million people are totally blind while 124 million people have low vision. Some 85% of visually impaired people live in third world countries and more than 82% are aged 50 years and above. In general, uncorrected refractive errors and cataracts are the leading cause of blindness in low-income countries (World Health Organization & The World Bank, 2011).

Malaysian Government estimates that there are 1.3 million people with disabilities (PWDs) in this country (Zinaidah, 2006). However, based on the statistics obtained from The Department of Social Welfare, only 426838 (PWD) were registered up till September 2012. Of this number, 38728 which is 8.98% are visually impaired. Based on the statistics, the number of registered visually impaired people has been increasing from year to year. A new statistic issued in September 2012 shows that 4604 visually impaired people have been registered. This includes people who have vision problems from birth as well as adults who have vision problems due to accidents or diseases.

Adventitious blind person is a person who originally has normal vision and later is diagnosed with vision problems by a medical officer. As these are people who have gone through life with good vision, blindness may affect them badly. The new vision status tends to make them more temperamental, prone to boredom, quick to panic, passive and reclusive (Mohd Nor, 2005). As they enter the world of blindness, they generally face limitation of movement, unsure about their future, suffer loss of income, compulsion to leave their studies, difficulty in facing society, and difficulty in accepting their predicament (Mohd Nor, 2005).

A study by Shirley, Kelley, Matlock, and Page (2006) on five diabetic patients who lost their vision found that the blindness had a negative impact on their families and daily life. Among the impacts were over-protection by their families and inability to continue working, which in turn affect them financially.

In this study, the authors identify the changes and problems experienced by the adventitiously blind people. These problems relate to difficulty in adapting to the blindness and the way the family members treat the members who lost their sight. This study also attempts to determine how far the gender factor affects the subject's ability to adapt to the vision loss. Besides, the study also assesses how different level of blindness affect the adaptation to vision loss. Finally this study examines how over-protection by family members is related to adaptation to vision loss.

METHODOLOGY

This study was carried out in a number of places in the Klang Valley. Forty nine subjects involved in the study and these subjects lost their vision at the age of 16 or older. These subjects were identified from the association of the blind and universities and from colleges which have students with vision problems.

A set of questionnaires consisting of three sections was administered. Section 1 consists of questions about their personal information. In section 2, the 14-item Adaptation to Vision Loss

(AVL) scale (Horowitz, Reinhardt, & Raykov, 2007) was used. The scale measures the degree of adaptation of loss of vision. The choices of answer are 'strongly agree', 'agree', 'disagree' and 'strongly disagree'. Higher AVL score indicates higher adaptability. The internal reliability of AVL for this study is .81.

Section 3 consists of 18 item of Overprotection Scale for Adults to measure the extent the subject feels he is over-protected. The study uses the 18-item Overprotection Scale for Adults (OPSA; Thompson & Sobolew-Shubin, 1993). The scale measures the overprotection level felt by subjects. This include over-protection, non-encouragement of self-reliance, shielded from stress, and not treated as an adult. The answer choice ranges from 1 to 4 (i. e. '1' for strongly agree to '4' for strongly disagree). The total score is 18 to 72. The internal consistency reliability of AVL used for this study is .83.

FINDINGS

There are 49 subjects for this study. Of this number, 31 are males (63.27%) and 18 are females (36.73%). A number of 13 (26.53%) of them are totally blind, while 10 (20.41%) of them have light perception and 26 (53.06%) have low vision.

Descriptive statistics were used to examine the mean of overall adaptability to their vision problems in relation to the feeling overly-protected by their families. Table 1 shows the mean for both.

Table 1

Level of Adaptation to the Vision loss and Feeling of Over-protection

Item	Mean	Grade
Adaptation to Vision Loss	27.633	average
Feeling of Over-protection	39.612	average

Table 1 shows the mean for the adaptation to vision loss and the feeling of over-protection. For the level of adaptation to vision loss, the mean is at 27.633 which is within the 15-28 range and is considered an average adaptation. The mean for the feeling of being over-protected is at 39.612 which is also an average adaptation.

T-test is used to see the mean difference between the male and female subjects,. Table 2 shows the mean difference between the male and female subjects with regard to their adaptation to vision loss. The null hypothesis is as follows:

H. : There is no significant difference between male and female subjects in their adaptation to vision loss.

Table 2

Difference between Males and Females with Regard to Adaptation to Vision Loss

Gender	N	Mean	SD	Sig.	t, Test
Male	31	28.03	4.5054		
Female	18	26.94	5.5463	0.458	.748

Significant for $p < .05^*$

Table 2 shows the significant value from the independent t test that examines the mean difference in adaptation to vision loss. As shown, the p value is .458 which is higher than $< .05$. Therefore, the null hypothesis is not rejected. Male and female subjects have no significant difference in their adaptation to vision loss.

To study the difference in mean between the subjects who are totally blind, people with light perception, and people with low vision regarding their adaptation to vision loss, the one way ANOVA test is used to test the hypothesis. The null hypothesis is as follows:

H₀ : There is no significant difference among the three groups with regard to their adaptation to vision loss. Table 3 shows the difference in mean among the three groups in their adaptation to vision loss.

Table 3

Differences in Three level of Blindness with Regard to Adaptation to Vision Loss

	Type III Sum	df	Mean square	F	Sig.
Between Groups	42.71	2	21.36	0.69	0.51
In Groups	1415.21	46	30.77		
Total	1457.92	48			

Table 3 shows the 3 level of blindness in relation to adaptation to vision loss. At $p < .05$, there is no significant difference in the 3 level of blindness with respect to their adaptation to their vision loss because the value to attain is much larger (i.e., .906). So the null hypothesis is accepted.

To examine the relation between over-protection by the family and adaptation on vision loss, the Pearson correlation is used. Table 4 shows the results.

Table 4

Correlation between Over-protection by Family and Adaptation to Vision Loss

Adaptation to Loss of Vision	Pearson's Correlation	1	-.454**
	Sig. (2-tailed)		.001
	N	49	49
Over-protection	Pearson's Co-relation	-.454**	1
	Sig. (2-tailed)	.001	
	N	49	

** Correlation is significant at .01 (2-tailed).

From Table 4, the feeling of being over-protected by the family is negatively related to adaptation to vision loss. This means that over-protection may cause the subjects to have less ability to adapt. The reverse is also true, that is, if over-protection is not so immense, the ability to adapt increases.

DISCUSSION AND CONCLUSION

In conclusion, this study shows the importance of understanding adventitiously blind people who are in the process of adaptation to vision loss. The results show that the subjects' desires to adapt as well as their position of being over-protected are at an average level. This study also shows that gender and level of vision defect do not affect the adaptability of the subjects. Over-protection by family members does have an impact on participants' ability to make an adaptation.

Family members play an important role in helping the adventitiously blind people to adapt to blindness by understanding the limitations faced by the subjects and offering emotional support. The support given can reduce the problems faced by the subjects which stemmed from the feeling of embarrassment and being a burden to others.

Rehabilitation and mental health counsellors who work with this group may consider inviting family members to discuss about the issue. Discussion with family members will allow them to better understand the support that they should give and the acceptable protection expected by the blind family members. However, it is important to note that family support is not enough to help blind adults make an adaptation to their new vision status. There may be other factors that may also encourage or hinder blind people to adapt, such as self-reliance, surroundings, and the type of help received by people around them. Future researchers are encouraged to study this issue further through a phenomenological approach in order to gain a clearer and holistic understanding of the issue.

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