

Psychosocial Challenges Students with Disabilities Encounter in selected Primary Schools of South West Ethiopia

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ABSTRACT

The study was mainly organized to assess the psychosocial difficulties students with disabilities face in selected upper Elementary Schools of South Western Ethiopia emanating from home and environment that might have long lasting effect in life time. Qualitative study was undertaken to get relevant information from students with disabilities in selected schools, their respective teachers and family/caregivers employing purposive and availability sampling techniques. Interview, focus group discussion and outside observation were conducted as major tools of data collection from respondents. Accordingly, the result of this study shows that students with disabilities face a number of psychosocial problems that could vary from home to home depending on the family backgrounds, educational and economic statuses of the care givers. The major ones reveal that emotional instability, discrimination, segregation, self blaming, hiding attempts, depressions of different levels, bad feeling from home, suicidal attempts and parental rejections are the prominent ones raised by respondents. In conclusion both the family/caregivers and the students with disabilities encountered different levels of psychological and social problems from home, neighboring community and the larger societal settings due to cultural, religious and belief related impacts. Hence, training at different level for family, teachers and students with disabilities were recommended as to minimize the psychosocial difficulties with continuous awareness raising and education on disability matters as a long-term way out.

Keywords: difficulties, disability, elementary school, psychosocial

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INTRODUCTION

Background - A psychosocial disorder is a mental illness caused or influenced by life experiences as well as maladjusted cognitive and behavioral processes. The terms psychosocial refers to the psychological and social factors that influence mental health (EIAE, 2012). Social influences such as peer pressure, parental support, cultural and religious background, socioeconomic status, and interpersonal relationships all help to shape personality and influence psychological makeup. Individuals with psychosocial disorders frequently have difficulty functioning in social situations and may have problems effectively communicating with others. It is important to note that the causes of mental illness are diverse and not completely understood. As of Adelman and Taylor (2012), the majority of psychological disorders are thought to be caused by a complex combination of biological, genetic (hereditary), familial, and social factors or bio-psychosocial influences. In addition, the role that each of these play can differ from person to person, so that a disorder such as depression that is caused by genetic factors in one person may be caused by a traumatic life event in another. The symptoms of psychosocial disorders vary depending on the diagnosis in question. In addition to disorder-specific symptoms individuals with psychosocial dysfunction usually have difficulty functioning normally in social situations and may have trouble forming and maintaining close interpersonal relationships.

People who experience disability for the first time undergo stress; cope with life transitions, value changes, and experience disability issues across their life spans (Donald et.al., 1996). From a sociological perspective, people who experience disability for the first time also have to deal with the role of family, cross-cultural issues and adjustments, the consequences of negative demeanor's towards people with disabilities as a whole, and the roles of professionals who work to assist them with adjusting. Their system of life and living has changed in many different ways, meaning they must endure a process of adjustment and self-evaluation.

The experience of an injury that leads to a psychological or physical disability is similar to enduring a mourning process and might be equated to the loss of a loved one; for example. The mourning process can involve adjustment to the disability the person experiences and may be divided into a series of four stages or tasks - shock, denial, anger/depression, and adjustment/acceptance (Wanger, 1995).

The experience of a form of disability forces the issue of, 'finding one's self.' Some people take pride in the things they learn about themselves through the experience of a form of disability. They appreciate the way disability helps to define their values. However, emotional aspects associated with a new form of disability are many times a major factor in determining the person's outcome and the benefits related to rehabilitative efforts. Effective psychological intervention is beneficial where ensuring recovery from an injury that has caused a form of disability is concerned. Many people experience more than four stages of adjustment to a physical disability in life time while others get confused in the period in-between.

Rose, Mondna-Amaya, et.al. (2011) underlined that every single way that matters, disability does not change a person. Instead, disability threatens concepts a person has held about who they are. People bring to their disability whatever mix of beliefs, attitudes, talents,

charisma, fears, or social skills they have or have the capacity to develop. Who a person is impacts their ability to adjust to disability.

On the other hand, Students with disabilities are an extremely heterogeneous group, varying by type and severity of disability, as well as by the many variables found in the population at large, such as income, family characteristics, temperament, and intelligence. This heterogeneity means that some students have capacity to withstand the overwhelming psychosocial impacts they faced in lifetime while most of them stuck in the devastating challenges they encountered. The question of competing with the 'normal' ones to survive and effectively function in their community surrounding is another issue of interest that needs relevant response in their environs.

Statement of the problem - A number of psychological adjustments have little to do with the disability a person experiences; they are issues everyone does (Rose, Forber, Espelage & Aragon, 2013). As an example, a person might be frustrated because they are having a hard time finding someone to love and believe it is their form of disability that is the cause of the loneliness they feel. The issue of psychosocial perspectives; however, is a part of many people's lives, whether they experience a form of disability or not.

Anyways, what individuals with disabilities in Ethiopian context feels were not yet studied that intricate the difficulty these students face in education where nobody is concerned to identify, assess and intervene the challenges/difficulty they face in home and institutions. Consequently, confronting the psychological and social impacts exerted upon them in a community where diversity is not well treated and understood, thinking about success in academic endeavor and securing relevant career opportunity in a competitive world becomes a gloomy destiny. To curb and at least minimize the difficulties students with disabilities faces in education and home settings, conducting relevant research in the psychosocial difficulty these students face in their environs is an indispensable issue of the time.

Based on the intricate difficulties students with disabilities face in both family and school environment, it seems crucial to answer the following research questions to alleviate or minimize the psychosocial challenges piercing their life.

What are the major psychological difficulties students with disabilities face in elementary school settings related to their disability?

Are there any societal impacts students with disabilities faced in the elementary school settings different to others?

What major psychosocial factors these students develop due to the disability they encountered in life that might interfere with their education in elementary schools?

How do students with disability deal with the life challenging impacts they faced in the family and school settings?

Objective of the study - The main intent of this study is assessing the psychosocial difficulties students with disabilities faces in selected upper Elementary Schools of South Western Ethiopia due to the impairment they encountered in life. Specifically, it deals with the following issues in focus:

To identify major psychological difficulties students with disabilities encountered in elementary schools due to the impairment they stumble upon;

To examine social impacts they may happenstance in the elementary school settings manifested from their impairment;

To explore predisposed psychosocial encounter in their surrounding that may interfere with their success in elementary schools; and

To assess how these students cope-up with the psychosocial challenges they experienced in life time to become effective in their education.

Significance of the study - This research undertaking is critically noteworthy for students with disabilities to identify their difficulties and search for intervention and counseling support available in their own settings. The outcome of the study is also useful for policy makers and education offices to identify, assess and find treatment possibilities for these students since disability right to services, education and intervention is due concern. The families of these students also benefit much since it paves way to access and search for possibilities and methods of supporting their children's difficulty. The finding is best input to conduct intervention on these students through elementary to the higher institutional settings as continuation of the study. It additionally serves others who want to conduct similar research as a foundation to further the study to advanced level.

Scope of the study - The study was geographically delimited to government identified elementary schools of South Western Ethiopia. It was conceptually restricted to psychological and social impacts of disability on the students at elementary schools of aforementioned identified schools. This may involve the psychosocial aspects of disability these students face in the actual settings of education and home settings of present and past experiences respectively.

RESEARCH METHODOLOGY

The study was designed to examine psychosocial difficulties students with different forms of disabilities faced in schools giving specific preference to students at upper Elementary Schools of South West Ethiopia. It employed qualitative research inquiry which presumed the relevant approach undertaken to secure relevant information from the informants.

Study sites - The study sites were selected amongst the upper elementary schools of South Western parts of the country giving great attention to geographical locations of educational settings employing purposive sampling technique based on their practice of mainstreaming the Students with Disabilities. Accordingly, one school from Jimma (Jimma), two from IluAbabor (Bedele, Mattu), and one from East Wollega (Nakamte) were included in the study. Totally four schools were involved.

In this study both primary and secondary sources of data were used to extract reliable information. The primary sources of data were students with disabilities, parents of the same students, selected teachers of integrated classes and one counselor at a school. Secondary

sources of data were limited students medical and school records which were secured from counselors and student record offices upon permission.

Population and sample - The study populations identified in this study were all students with disabilities assigned in the selected schools. If prior identification was not done, it is possible to select the students with respective school leaders employing different strategies. In schools where the numbers of students with disabilities were more than eight, the researcher employed purposive sampling technique to draw the samples for the study as of the methodology assigned. But all other schools where the numbers of students with disabilities were less than planned sampling, availability technique was employed. Parents of the same were also selected even if the number is very low. A counselor and two SNE and/or regular teachers of integrated classes were included in the study. A total of twenty respondents from each site was planned which was summoned to all the sites while purely sixty four informants involved in the study ultimately.

Instruments - Since the study employed qualitative type of research design, it was predetermined that FGD, observation and interviews were the major instruments in collecting relevant data from the sampled individuals. FGD was held with Students with Disabilities and parents while semi-structured interview were done with teachers and counselor of a school. Additionally, certain records of the sampled student's psychosocial difficulties were examined.

Data Analysis - Informants were communicated to give informed consent in providing information for the researcher. Those informants unwilling to give information and unable appearing were exempted from sample. Informants were below the set number of respondents planned to involve on the study since many of them were occupied by personal and social routines they had at the moment. Data from interview was recorded and kept for analysis and transcribed accordingly after translation. Conclusions and the way forward for the coming intervention phases were drawn from the result of the study.

Since this study was conducted with human being, following strict code of ethical conduct was mandatory. Specifically, getting permission either in oral or written form, confidentiality and security of information got due attention in this study.

RESULTS AND DISCUSSIONS

This chapter deals with biography of respondents participate on the study and results obtained from respondents as collected from primary and secondary sources. The following table depicts representation of the respondents with their categories.

Background of Respondents - Participants involving in the study came from three sources who directly have relation with the psychosocial conditions of students with different disabilities. Equal numbers of students and parents were planned to participate on the study where only few from all groups appear as the time of data collection on preferable period. On the other hand, moderate numbers of respondents from all groups participated on the study

that can give real picture of the population from all respective schools. Students with disabilities and parents of the same involved who were willing to participate on the study are portrayed in the following table.

Table 1. Characteristics of respondents

<i>No</i>	<i>Respondents Characteristics</i>	<i>Sex</i>			<i>Frequency in %</i>	<i>Remark</i>
	<i>Parents</i>		6	1	32.81	
	<i>Students</i>	6	8	2	50	
	<i>SNE Teachers</i>			1	17.19	
	<i>Total</i>	5	9	4	100	

As indicated on the above table, the numbers of respondents were high around student's participant on the study where it parallels nearly set of scales to parents and special needs education teachers. Most of the parents advance issues of work related problems to participate on the study where the researchers recognized that most of the families are from poor economic background whom are searching for daily life earnings. Therefore, students and teachers were with more access of availability to appear as respondents on the study.

Analysis of students with disabilities response - Students from different disability groups participate in this study among concentrating on students with Physical impairments, partially hearing (Hard-of-Hearing) and the intellectually disabled children. Except Nakamte center, only one and two groups of disability clusters involved with their parents on the study. Some children have living unaccompanied with any family or relatives that live by the aid of others and or personal effort irrespective of the impacts imposed by the impairments.

When students explain of the psychosocial difficulties come across in their life, children with disability perceive the disability (feelings, emotions, understanding ...) as an encounter in life. One of the physically impaired children feels bad about herself and presumes as the difficulty is source of her fate. Predisposed psychosocial difficulties she encountered in home situation bring to bear bad feeling about her father and community in the neighborhoods. Because of this and related conditions like misunderstanding, poor relationship, undermining her due to impairment and neglect as common behaviors she had observed in her parents' home, she runs away. In different position to this finding, Rose and Espelage (2012) argued that the presence or absence of a disability is not necessarily a risk factor, but rather risk factors are likely the hallmark characteristics associated with the disability. Attributable to these factors, she aspires to go to towns and beg sitting on roads where nobody knows her since begging is a deprecating status quo for the family and

relatives among Oromo community. Fortunately, one of her relative took her to Nakamte town where she lives with for two years serving the lady in home making to the family.

After second year of her life, the student requested her relative to take her to school. But, she refused doing so where one of the neighbor heard the situation and opened the student new opportunity even if she couldn't assist for long. One day, relative of this student expelled her from home where she got the first exposure to outside world. On the next day of removal from relatives home, the neighbor took her to MoLSA and MekaneYasus church where she found one of the SNE teachers remarkable in her life. Special needs education teacher with these organizations found her small hut where she faced independent life for the first time. She then started retailing vegetables, fruits and cereals in small market around her home and started schooling in integrated school of Burka Bekumsa Elementary School of Nakamte. She has a wheelchair donated to her from an NGO which helps her move to any place including market place, school and church.

When discussing with the researcher, she indicated that she was psychologically affected from family interaction, relation and impairment she encountered. Social segregation, discouragement, anger and denial of parents affected her relationship and attitude towards her parents. Psychologically she feels tempered, suspicious, irritable and annoyed when hearing about her past life state of affairs. She has also no confidence about the organizations who helped her before since are now distant to her problem. She also rose about conditions in market place and school since some of them are not accepting students with disability and interested supporting them. On the contrary, the student is easygoing, stable, free narrating, easy disclosing her problem and feeling.

On the contrary, parents, siblings and significant others perception about children with impairment vary from family to family. Some are open minded and accepting for all the children without any segregation including school opportunity. But, most of the family get in to shock, denial and compliant when their children identified with any form of impairment. Due to this fact, students face social and psychological difficulties in home, schools and community.

Some of the students with hearing impairments (the deaf and hard of hearing) elaborated that they are discriminated from peers, parents and community due to communication gap that exist between them. Social integration is low among the hearing and non-hearing which make the physical mainstreaming lose and staggering. Hence, they prefer special schools by far to integration where most of them develop demonstrative relationship among themselves and their teachers equally treating them unconditionally. In the integrated elementary schools, only few hearing students are interested to establish positive relationship with the hearing impaired individuals either from empathy or humanity or spirituality or humbleness which made the hearing impaired psychologically and socially segregating themselves in partial attachments for their own benefits as indicated by most of the integrated hearing impaired students. Psychologically they develop little fear, suspicion, emotionality, irregular behavior and distress. Supporting this finding James (2005) underlined that discrimination of cultural values or ethnicity has a negative effect (depression and aggression) on psychosocial development and behavior of a child. It also effects self-esteem, academic achievement, stigmatization and psychosocial functioning of children in general

and children with special needs in particular. Alternatively, limited interaction with family, poor social attachment and solitude in the home. As indicated by most of the students, they prefer to be with their peers in the school to better communicate, interact, socialize, feel happy and enjoy together with the hearing impaired counterparts. Other groups share similar opinion, develop social collaboration, playing and intermingling together where few hearing students start approaching them incrementally.

Children with visual impairments have different opinion with that of the hearing impaired corresponding persons where they entertain, interact, work and freely live together with all groups of students in the school. The reason they raised was that the language of communication involved in socialization among all the students in the integrated schools are the same that facilitated for their relationship and maintain positive interaction than the hearing impaired ones. The psychological and social relation of students with visual impairments are in a challenging condition for lack of visual simulation, awkwardness of locomotion in homes and environs, feeling of inferiority and self-discouragement they develop due to the visual impairments they stumble upon. Analogous to this finding, National Alliance on Mental Illness (NAMI, 2012), identified that despite how well-adjusted, emotionally strong, or mature a person may be, the experience of a new form of disability is an event that shakes many of a person's basic beliefs about their life. In similar manner, as stated by the majority of visually impaired students, the psychological difficulties they encountered are mostly from internal one and self-emanated than from the externalized situations. They also indicated that physical handicappedness are the major ones that they mostly face in life than social challenges in their respective schools and community settings. Some of the physical challenges they face are unwholesome road locations, journeys on corrugated fields, uneven and cast off streets, unsafe school environments and muddled classroom arrangements from time to time.

Very few students with physical and neurological related impairments share limited psychological and social difficulties almost similar to that of the hearing impaired. In support to this study result, Adelman and Taylor (2012) underlined the issue indicating a large number of students are unhappy and emotionally upset; only a small percent are clinically depressed. Some of these students indicated that fear of requesting their friends wait for them when going to schools or come back from schools to home since are unable walking fast as of their friends. Almost all of them, except the one from Burka Bekumsa of Nakamte town, have a stick made locally to support them walk to the schools on very difficult and highly corrugated rural roads as a crutch. This made them to highly reject themselves, lost hope and socialize poorly with friends and teachers as well. But, family and relatives are the one who take more responsibility carry exercise books, project works and assignments to and from schools in support of these children. If the child with physical impairment has no relative or brothers or sisters, he/she is responsible holding all these burdens while going and coming back to/from school. Because of this fact, some of them are aggressive, unhappy and irritable towards themselves, others and creator as discussed. Unkind parents also made them to psychosocially distress. In similar studies, American College Counseling Association (2010) stated that everyone who has experienced or witnessed crises is likely to be affected in one way or another.

Perception of parents and school - Perception of school community towards the child when joined the school (peer, teachers, and admin) is of diverse type. Some students are sympathetic; others get feared or may like to laugh and mock them or isolate them when they first come across such a difficulty unless the child has siblings or relatives who support. Therefore, first day of schooling is difficult to most of the students with any form of disability as stated by the parents and teachers. Specifically, when students with squinted eye or spastic children come to school, the first day observation and experience among young students was/is teasing and mocking until they get friendly to these children. Because, students see the situation (disability) as outlandish if not accustomed to it in the past. Most of the time, perception of family is highly dependent upon visibility of the impairment, family background (education, religiosity, family size, economy, empathy, etc.) and cultural contexts of the community (values and norms). In relation to family perceptions, Bandura (1978) stated that discrimination of cultural values or ethnicity has a negative effect (depression and aggression) on psychosocial development and behavior. It also effects self-esteem, academic achievement, stigmatization and psychosocial functioning.

The relationship the students have with family, school community and neighbor vary from family context to the others. Some studies support similar finding where there is heterogeneous problems and thinking are evident. Similarly, Cooper and Speece (1990) stated, students with disabilities are an extremely heterogeneous group, varying by type and severity of disability, as well as by the many variables found in the population at large, such as income, family characteristics, temperament, and intelligence. As indicated above, positive communication among family members could be realized if parents are educated and have economic capability. As indicated by most of the respondent students with disabilities, their families were nervous, angry, disturbed, unhappy, dissatisfied and discouraged of the disability which a student faced while seeing the problem. This is common among students in all areas where these students develop discontentment, poor discernment about family, low self-esteem, suspicion about family and others, withdrawal and unhealthy behaviors. Social marginalization and child abuse is common deeds of most of the family members, schools and few community members.

The family presumes the child with disability as a challenge or difficulty encountered the family due to sin they made in life and/or crime they did on others either by the parents or ancestors in life time. Because of this and related factors, the parents hide their children in home scenery and disinclined to disclose to neighborhood families and send to schools. If this challenge interferes with education, psychological and social build of students with disabilities, future progress of these children could be in danger. Most of the bad fate these children faced are begging, daily laborer if able to do so, out-of-schooling and may be they join street children at extreme cases. But, any child who joined school can get support from teachers at different levels of life whether it help the child for success in schooling or the vice versa is true.

Children responded to the difficult or challenging circumstances differently depending on the capability of the student's evolving experience, internal confidence, personality and external support the student has from around. Some of them flee from home or cry, distancing from the family or relatives, instigate labeling and try to form their own

society. As indicated by one of the hard of hearing student from Mattu, *I am happy being with my colleagues and being in school since most of my friends are hearing impaired students. I feel at ease, communicative, relaxing, enjoying and sociable among friends of the same difficulty and with our teachers; since they know and use my language (sign language) in classrooms, on the playing fields and social interactions. When we go back home, no one from family members can use sign language that highly affects our communication, social relation and emotional wellbeing in home and neighboring community. Hence, I am angry when communicating, distressed on interaction, kick and beat younger siblings and wish to hide myself in work. I am now having two cows and more than five sheep. My mother is the only responsible member of my parents helping me and my property in the home even if our interaction has challenge.* This implied that the response the child and others have towards students with disabilities are more or less similar. Most of them are in crisis due to the challenges they face in the home either from siblings and/or parents.

The coping mechanisms these children employed in life are development of defense mechanisms like rationalization, sublimation and denial of the problem. They internalize the problem after searching for different possibilities and options they are able to consume. Consequently, Wagner (1995, ed.) identified that psycho-socially speaking, maltreated children struggle with impaired language development, less pro-social behavior, lower levels of cognitive maturity, more aggressive behavior and more insecure attachment to their mothers. One of the respondent student from Bonga mentioned that coping mechanisms are so difficult which takes longer passage to catch-up. In this long journey, some of the students with disabilities lost hope and freeze where the respondent is the one who was seeking support being on the street of Bonga town. The comment they raised during problematic situation is trying to calm down himself being with individuals having related difficulty in maintenance to one another. In their response to interview points raised by most of the informants, psychological and social support including financial aid to students with disabilities in schools, family and community settings are welcome. They also need awareness raising and training on disability and community understanding towards disability matters in their locality.

Some schools are more cooperative and welcoming as stated by certain parents and teachers of the same. Unlike other centers, in Biftu Elementary School of Nakamte Town, the school community were/are openhearted for all students with disabilities. Let be the disability, they have a welcome program for those students with at risk and vulnerable ones through their clubs as deliberated by teachers on the focus group discussions. All the staff including principals and administration members was mentally and physically ready to accept and treat these students without any discrimination and temperament alteration towards students with disabilities. The team found this school as a model even to special needs classes except support to students with severe impairments. This is because of lack of appropriate educational knowledge and experience to use Braille and sign languages when necessary.

Role of SNE in the integrated schools—SNE teachers indicated that regular education teacher's (RET) perception and understanding about students with disabilities are by far poor. Because of this, regular education teachers have no good feeling, humor, love, empathy

towards these children. They couldn't support their education. One of them stated that *nowadays, some of these teachers become challenging towards SNE teachers and we become reserved specifically regarding children with behavioral difficulties. On an occurrence, all RET agree and signed petition towards a girl with behavioral disorder with the consent of the principal in our integrated school of Kidus Gabriel Elementary School. But, when the principal participated on one workshop organized by Ormia Education Bureau on issues of Students with Disabilities, he was ashamed of his did and showed behavioral modifications in the meantime even if the internal situation of this person was not changed from the bottom of his heart.* One can realize from this description that there exists inconsistency of ideas as participated on workshops and got awareness about disability matters. Anyways, this change needs permanent paradigm shift psychologically, behaviorally, emotionally and in internal attitude towards students with disabilities. If not, momentary change and counterfeit transformation is not good that couldn't surpass lip services and personal benefits to get subsidy of the workshops.

The SNE teachers of Jimma Elementary Schools elaborated how they could have identified a child with disability in their respective classroom or schools as the following. *All children coming to our school are with identified cases such as MR, Partially sighted or HoH, with paralysis or other health related problems. Our school is one of the schools having special classes and integrated ones in the same compound. We now are hoping to transfer the special class to resource room if Education Offices accepted our request.* In this integrated primary school (grades 1-8) a number of children study in upper primary school. Level of discrimination, isolation and bullying is almost nil or very limited which is similar to that of none disabled ones. Because of this, psychological and social problem is at minimal level when compared to other schools. Teacher's perception to students with disability showed certain difference on this issue where students stated that social discrimination on playing grounds and bullying are common in their schools while psychological problems are permanently observed around principals and other school admin. Hence, this was taken as research gap where detailed study is relevant to get the difficulty or variation of perception and understanding between both groups of the respondents.

As of perception of teachers from Burka Bekumsa of Nakamte, they have virtuous assertiveness towards the child with disability and disability itself. The teachers explained that most of the students with disabilities are confident towards themselves except complaining of parents, environment, and economic insufficiency of family, lack of attention from concerned government bodies like education office, social affairs and specifically municipality in Nakamte town. They had indicated that government and nongovernment bodies are responsible for misbehaving, antisocial and misconducts of these students since no one takes care, attention and enforce rule of law to support these children in schools. Taking responsibility and accountability was/is pushed towards special needs education teachers alone where all others refrain from commitment all the time and in schools.

Special needs education teachers were asked whether the family see the child apart from disability (understanding, feeling, emotion, assistance). They viewed that some parents and caregivers see the child as negative and cruel because of the disability encountered. Still these parents need awareness and sensitization training on disability and child with disability.

Because of this, few children, specifically the mentally retarded (intellectually disabled) and physically impaired accuse their parents to SNE teachers. This is common among all the students from different schools where the study was carried out.

Any rapport the teachers observed that students with disabilities had with the non-disabled students (contact, support, advice) was last question raised. Students play, eat and drink together without any discrimination as of the discussants. The non-disabled assist the disabled in all affairs. But, there is great intrusion of subject teachers in making children not to help their peers which is seen as dangerous behavioral act by few teachers in Burka Bekumsa Elementary School as the SNE teachers and one of the student with PI mentioned. These forms of interaction create a gap between students who are interested to work, play and interact with their friends irrespective of the ability and disability. As mentioned by other respondents, some of the regular education teachers are imposing their personal biases against students with disabilities which seem excessively traitorous for psychosocial wellbeing of students with disabilities in the integrated schools.

How peer groups, some teachers and certain admin personnel perceive the students and their problem with good understanding and perception in their respective schools as stated by several teachers in different schools. But, all things go in their own ways and personal understanding of teachers and their good will. Some are cruel and others are humble towards CwDs. The unit leaders are not as harsh as the case confirms that there is no support except sympathy without help. The same is also true on the family side where some are very good and supportive while others are cruel.

We made agreement with charity organization and bought eye glass for a lady now attending grade eight by 800 birr. Her father came to our school and challenged as why we pay this huge amount to one lady. He said 'with this huge amount of money, you may buy for all my children having the same problem; or otherwise, they may use it interchangeably' SNE teacher.

Others also challenge their children, specifically the MR since what the family expect vis-à-vis what the children exhibit and act are by far different. Some blame themselves, creator and the child. Since most of the family are economically poor, couldn't help their children than bringing them to schools. Only parents who are educated can support their children in home and assist us collaborating with SNE teachers.

Regarding their comment on the psychological or social problems the child faces/faced, it takes longer time and patience to train children with MR (Mental Retardation) and sometimes children with multiple disabilities. They have indicated that there were deaf-mute (grade 7& 5), MR and epileptic (grade 7), PI (Physical Impairments) and others in SNE classes of Nakamte. This children didn't get appropriate support from the Local Education Offices and Teachers that made the students and parents upset, angry, feel bad and sometimes quit schooling. Parents feel bad about their children in the school where teachers lack capability and resources to aid the students with disability that might facilitate for the development of antisocial behaviors, worry, quarrelsome, stingy and unhappy. As one of the respondents from Bedele indicated, parents come to school with bad feeling and emotion because of their children's unlucky circumstances. Most of them feel that their children are alienated, abandoned and ignored by teachers, students and community. Because of this, they

feel uncomfortable and distant to neighborhoods. Their relationships to their impaired children were also with affected communication, poor interaction, zealous in relationship and bizarre behavior among the family environment.

Parents' response analysis– pertaining to parents feeling, emotion and perception, when identified that their child's disability – shock, anxious, denial, acceptance and sending the child to school is what many parents experience. But, still some parents are unwilling to send their children to public places. Attention they give to the child when compared to the healthy siblings parents indicated that almost all see their children equally except giving them duties and responsibilities that are totally different from the nondisabled due to the difficulty encountered. Some children need more attention than others while parents were unable to provide since they have many children who also seek support. Because of this and similar inability to give special attention, support and follow-up such children are almost unproductive in the home. He is also reluctant to communicate at home but likes to be in school. Some of the parents share similar views even if the magnitude varies from family context to the other.

Behavioral manifestations the child shows in the home, neighbor and school as stated by some parents were discussed. Most of them confirmed that students with disability show unique and bizarre behaviors, inconsistent mood, emotionally unhappy in the home situation, aggression, withdrawal and some obscured feelings. Some parents support opinion of their children in the way that students were/are happier at schools than in homes and neighboring community. Because, they communicate more, play and entertain together when coming together at schools. When coming to homes, no one is at ease communicating them using sign language or give necessary support they need since everybody is on personal and family role.

Any follow-up in the school made for the students was asked. As stated by most of the parents, there is moderate contact with the school sporadically. But, all the parents worry about fate of their children since no authority figures are caring for their children. No one cares about these children except the special education teachers when they were in lower elementary schools. New teachers (regular education) didn't care and give attention to our students. They teach them in schools as they did for others in the school as the children responded on their relationship with the teachers. No tutorial class, no advising, no follow-up and social support for the children when they face difficulty from guards, peer groups or other children who are nondisabled. This specified that regular education teachers are indifferent towards the students with disabilities, their challenge of inability in certain areas and disability which facilitates for the students demanding psychosocial problems.

Students with disability relationship (social interaction)with others (family, neighbor and school) was also area that gets due attention. Most of the family members support that if parents give attention and have time supplementing their children with disabilities, they are good and happy. But there is time constraint to give more attention to the child with disability. Several family members stated and agree that siblings are giving more care and support for the child in the home. Because almost majority of the parents are with low income and involve on daily jobs, contract works, guardian and janitors. Moreover the

parents work condition and educational level didn't permit them give psychological support for their children with disability.

Major difficulties (emotionally, feeling, social relationship, feeding ...) students with disabilities faced in home were discussed with the parents. The major difficulty as agreed by most of the parents were discomfort, unhappiness, feeling bad about self and others, withdrawal, negligence, carelessness, apprehension, negative thought and misbehavior. These categories are difficult psychosocial behaviors that need attention of parents, education personnel, professionals and concerned community authorities. In support to this finding, Satcher (1999) indicated that 'depression is the most common cause of psychosocial disability, and is characterized by persistent sadness, loss of interest in activity, isolation and decreased energy that affect one's ability to enjoy a full life.' If not treated earlier, this disorder may lead to more challenging conditions that may interfere with the future life of the child, family and community as well.

Any challenge from outside (from community or vice versa) was also conversed with parents. Parents indicated that nowadays the community is so cooperative, more socializing, and sympathetic. Only very few children who have personal problems can create problems on children with disability as indicated by parents. Feeling of love, care and support is noticeable in the community substantially. Certain forms of inconsistency observed in schools than community settings where regular education teachers deny psychosocial support for students with disabilities in integrated schools. But this condition shows a discrepancy from school to school as many of them raise points with reliable evidences.

Coping mechanisms parents used when thinking about their children's fortune was discussed. What parents rely on is on the act of spirituality and hope that their children may get cured one day or able to deal with after schooling. Others also hope that these children may have a chance to secure support from NGOs and public sectors. Therefore, hope is how parents cope-up with the challenging conditions they face in life due to presence of a child with disability in their home as gift of God.

The general comment up stretched by most parents was complains of schools and administration about reluctance to support these children with different difficulties that made them more upset. Because of this, majority of the parents come to an understanding that only family and special needs education teachers take responsibility supporting these children except few support from NGOs. They strongly blame regular education teachers and education offices for their disinclination assisting and unwillingness supporting their children in schools which may undoubtedly leads to psychosocial difficulties on the top of the students' disabilities.

CONCLUSSIONS AND RECOMMENDATIONS

Conclusions - About one hundred five students were identified with different difficulties which need psychosocial support and physical interventions at different levels in the schools under exploration. Among these:

Forty five and above students have chronic health related problems with fungal and bacterial proliferating on the hairs, skins and limb paraphernalia. This impairment can highly

encroach the mental and social relationship of the students in their respective schools and community settings.

More than thirty students were found with hard-of-hearing who have difficulty in education, social attachment, communications and psychological makeup of the students. Parents and teachers were unable understanding problems of these students and support them whenever they need it. Hearing impairment is one of the psychosocial difficulty people with this impairment face that leads to discrimination, isolation, withdrawal and segregation in schools and community settings due to communication barriers and language usage in family, community and school locations.

Others are with physical impairment (poliomyelitis, hemiplegia, monoplegia, clubfoot and facial paralysis), visual impairments (refraction errors, squinted eyes, and tunnel vision), communication disorders (language and articulation) and moderate intellectual difficulties. These all students face psychological and social difficulties in schools and home as well.

A student found with polio and abandoned from home, faced a number of challenges from family, sibling (her older sister), school, kebele administration and some neighbors around home and market places. This has great interference with her school activity, home and community participation as well as involvement.

Certain parents believe that they are in isolation, segregated from the community and try to hide their emotions to the level possible where none could understand them. They suffer about the impairment their children faced and the discrimination they observe in schools on their children with impairments. Most of the parents agree that their children with impairments have good social interaction and better socialized when in special schools. But, the students (children) discriminatory interaction heightened in the integrated schooling. With this condition, the parents described that almost all of them (students with impairments) faced social, emotional and behavioral difficulties in schools, neighborhoods and community settings.

Special Needs Education teachers share similar opinion with the parents' counterparts. Because, as of the observations of these teachers, students with impairments were confronted with academic, social, psychological and emotional difficulties where no regular teacher gives attention to these students in their respective classrooms. Some of the regular education teachers have poor awareness about students with impairments and some others are apathetic towards these children where the students encountered critical discrimination socially and psychologically. Therefore, social and psychological exclusions were evident on students with disabilities in most of the schools camouflaged.

Recommendations - Based on the result of the study and conclusions drawn, the following intervention plans were forwarded to be accomplished in the second phase of the study.

There were predisposed and apparent psychosocial difficulties students with disabilities faced in all elementary schools under study. Much of them were from poor understanding of impairment and disability. Parents understanding about disability is so customary where people attach everything to fate, God, curse, bad or evil spirit ... that may arise from misconception, lack of knowledge, traditions. Therefore, sensitization workshops

and awareness raising trainings are of paramount importance to enhance understanding and acceptability level of parents of these students in the home and family settings.

On the other hand, students feel bad about their disabilities, lose hope about their future, seek psychosocial support when shocked, isolated, resisted, ignored, when thinking of their impairment and deprived attention from responsible bodies like MoLSA, NGOs and education offices. To assist students develop self-confidence, self-reliance and independent feeling of work in future life; awareness raising for students on impairments and disability matters, education, psychological makeup and social relationship with peers, family, community and school seems critical in this phase which helps them mature in their understanding, knowledge and thinking.

Regular education teachers are either with empathetically segregative positions or develop poor awareness about children with different disabilities in almost all of the schools where these research undertakings were operated. To develop positive understanding between the teachers on children with impairments, it seems better give sensitization and awareness raising trainings on impairments, disability and handicapping conditions.

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