

## Resilience among Adolescents with Visual Disabilities

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*Resilience is often defined as the human's amazing ability to bounce back and thrive in the face of serious life challenges. The foundation of resilience includes psychological and social resources that act as a buffer against the negative outcomes of risk exposure. The present study aims at exploring the lived realities of adolescents with visual disabilities (n=5) between the ages of 12-18, years and how they experience and actively cultivate resilience despite adverse life situations. Using the Resiliency Scales for Children and Adolescents developed by Prince-Embury (2007, 2005) and a semi-structured interview schedule, participant's psychological resources such as their self-concept and sense of autonomy, as well as their environmental mastery and sense of relatedness were examined. This can benefit the parents, caregivers and professionals developing the right understanding regarding their experiences. This can also help to create effective resilience training programs that raise the expectations and motivation of adolescents with disabilities for realizing their potentialities and strengths, and to facilitate human flourishing despite difficult life circumstances.*

**Key Words:** resilience, physical disability, self-concept, environmental mastery, competence

### Introduction

According to the UN Convention on the Rights of Persons with Disabilities (2006), "Disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with other" (as cited in Verma, et al., 2017). The Census 2011 estimated that the people with disabilities constitute 2.21% of the total population of India (Sivakumar, 2013). It also estimated that 19% of the disabled population has visual impairment and the highest number of the persons with disabilities are in the age group of 10-19 years, out of which 18% are visually challenged (Verma, et al., 2017).

The condition of disabled people is extremely deplorable in the country. Out of the total population, 45% are illiterates, out of which 38% are the males and 55% are the females. In terms of work status, only 36% of the disabled persons are working, out of which 47% are males and 23% are females (Verma, et al., 2017). This, coupled with misconceptions and negative social attitudes about their condition can lead the persons with disabilities to experience discrimination in the form of bullying, teasing and social exclusion (Pittet et al., 2010), being economically, physically and/or psychologically dependent on their family, and being forced to live in poor conditions (Tirussew, 2005). This makes them one of the most disadvantaged groups in the country.

Historically, researchers have concentrated on negative developmental outcomes, like "deficiency" and "dependency" that may interfere with the person's adjustment to his or her disability (Tirussew, 2005). Hallum (1995) in his comprehensive review of past studies, stated that disabled adolescents often feel undesirable, both socially and occupationally. For example, they may feel inadequate due to having fewer friendships (McGavin, 1996). Patterson and Blum (1996) found that male adolescents with chronic conditions have more emotional problems than females when the prognosis of the condition is uncertain, an important risk factor in developing vulnerability. Thus, conventional research uses the risk-deficit model, which focuses on disability as a barrier in self-development, especially "when societal discriminatory attitudes are widespread and lack of opportunities for self-growth and development is non-existent" (Tirussew, 2005). Few studies have focused on both the risks and protective factors.

However, psychologists today have begun to identify people with disabilities with high success and to examine the factors responsible for their achievements. This interest was sparked by resilience research that grew out of longitudinal developmental studies of at-risk children, such as those exposed to substance abuse or domestic violence (Masten, 2001). Resilience is humans' amazing ability to bounce back and even thrive in the face of serious life challenges (Baumgardner & Crothers, 2009). Masten (2001, p. 228) defines resilience as a "class of phenomenon

characterized by good outcomes in spite of serious threats to adaptation or development". Masten (2001) notes that resilience requires individuals to confront some kind of the significant life challenge that threaten their normal development, and favourable outcome, following the threat. Baumgardner & Crothers (2009) suggest that the foundations of resilience include psychological resources like a flexible self-concept, a sense of autonomy and self-direction, and environmental mastery and competence. It also includes social resources like intimacy and social support. A resilient person, therefore, may be described as someone who has access to resources that act as a buffer against the negative outcomes of the risk exposure (Craig, 2012).

Today researchers focus on protective factors, like quality relationships that help to cultivate resilience (Ungar, 2007; Runswick-Cole & Goodley, 2013). Tirussew (2005) found out that caring and supportive relationships within the family and outside the familial context, like school and neighbourhood, can help a disabled person build a positive self-esteem and self-efficacy, which are important to function effectively in different areas of life like school, job, family and community. Patterson and Blum (1996) have noted that physical traits like attractiveness, and personality traits like flexibility and gregariousness, provide resilience to disabled adolescents. Overall, evidence suggests that people with disabilities can lead a successful life and can manage a stable physical, social and psychological functioning, despite adverse situations.

The present study was aimed at understanding the lived realities of adolescents with visual disabilities, between the ages of 12-18 years and how they experience and actively cultivate resilience despite adverse life circumstances. Case study method was used to shed light on their self-concept, environmental mastery and sense of relatedness with people, their hardships, and their personal and social resources for coping. These insights can benefit parents, caregivers and professionals in developing a useful understanding of their experiences. Further, this knowledge can be used to create effective resilience training programs for adolescents with disabilities to realise their potentialities and strengths, and to facilitate human flourishing despite difficult life circumstances.

## Method

### Participants

Five participants in the age group of 12-18 years with visual impairment were chosen for the

research. The participants were selected through convenience sampling.

### Measures

**Resiliency Scales for Children and Adolescents.** Developed by Prince-Embury (2007), it has three scales, each having their own subscales (Prince-Embury, 2007) namely, Sense of Mastery Scales and Sub-scales, Sense of Relatedness Scale and Sub-scales, and Emotional Reactivity Scales and Sub-scales.

**Sense of Mastery Scales and Sub-scales.** It is 20-item self-report questionnaire, with three content areas- Optimism, Self-Efficacy and Adaptability. Internal consistency using Cronbach's alpha coefficient was reported as 0.93 (Prince-Embury, 2007).

**Sense of Relatedness Scale and Sub-scales.** It is a 24-item self-report questionnaire, with four sub-scales- Sense of trust, Support, Comfort and Tolerance. Internal consistency using Cronbach's alpha coefficient was reported to be 0.94 (Prince-Embury, 2007).

**Emotional Reactivity Scale and Sub-scales.** It is a 20-item self-report questionnaire measuring emotional reactivity, which may be viewed as pre-existing vulnerability, arousal, or threshold of stimulation prior to the occurrence of adverse events or circumstances (Prince-Embury, 2007). It has three content areas- Sensitivity, Recovery and Impairment. Internal consistency using Cronbach's alpha coefficient was reported to be 0.92 (Prince-Embury, 2007).

Response options in all the three scales are ordered on a 5-point Likert scale- 0(Never), 1(Rarely), 2(Sometimes), 3(Often), and 4(Almost Always). The scales use T-score equivalents for each scale total raw score. Reliability coefficients range from 0.94 (Emotional Reactivity) to 0.95 (Mastery and Relatedness) for the total sample (Prince-Embury, 2007). Criterion group comparisons with matched groups provided strong and consistent validity evidence for the Resiliency Scales (Prince-Embury, 2007).

**Resource and Vulnerability Indexes.** The Resource Index combines the assessment of both, the individual's Sense of Mastery and Sense of Relatedness, which helps to summarise his/her positive strengths. The Vulnerability Index quantifies and estimates the individual's personal vulnerability by a discrepancy between his/her Emotional Reactivity Scale score and Resource Index score.

**Semi-structured Interview.** A semi-structured interview schedule was also used to tap in the subjective experiences of the participants. Questions like, “How do you see your life in general?”, “Did you face any discrimination during your childhood years?”, “What challenges do you face in your day-to-day life?” and “What was your parents’ reaction when they came to know about your illness?” were asked. The questions focused majorly on the experiences of discrimination, daily problems and their management, behaviour of significant others and people in general, self-concept, and hope for future changes.

#### **Procedure**

After the participants were selected, they were asked for their permission to participate in the research. Rapport was formed, information about the research was provided, and anonymity and confidentiality of data was assured. First, they were given the Resiliency Scales for Children and Adolescents. The basic instructions and test items were read aloud to them. Participants gave their responses orally, which were marked by the researcher in the response sheet. Then, the participants were encouraged to talk about their disability and

issues associated with it through a semi-structured interview. Each interview lasted for 20-30 minutes.

#### **Results**

The responses of the participants on the Resiliency Scales as well as on the Resource and Vulnerability Indexes were scored. The raw scores were converted into T-scores and interpreted using the manual. The participants’ raw scores, corresponding T-scores and interpretation for all the three scales are presented in Table 1 through 5.

For the qualitative data, all the interviews were transcribed and subjected to thematic analysis. First, the verbatim were highlighted and codes were generated. Second, the broader themes were drawn. The emerging themes were self-growth through autonomy and direction; personal resources in the environment; and hope for the future. The verbatim, codes and emerging themes are shown in Table no. 6. These themes were then discussed in the light of the participants’ scores on the Resiliency Scales. Further, inferences were drawn and the convergent and divergent themes drawn from the cases were discussed.

*Table 1: Participant 1’s raw scores, corresponding T-scores and interpretation of Resiliency Scales*

<b>Scale</b>	<b>Raw Score</b>	<b>T-Score</b>	<b>Interpretation</b>
Sense of Mastery	66	55	Average
Sense of Relatedness	64	42	Below average
Emotional Reactivity	43	66	High

RES (Resource Index) = 47 (Average); VUL (Vulnerability Index) = 62 (High)

*Table 2: Participant 2’s raw scores, corresponding T-scores and interpretation of Resiliency Scales*

<b>Scale</b>	<b>Raw Score</b>	<b>T-Score</b>	<b>Interpretation</b>
Sense of Mastery	52	45	Below average
Sense of Relatedness	57	38	Low
Emotional Reactivity	40	63	High

RES (Resource Index) = 39 (Low); VUL (Vulnerability Index) = 65 (High)

Table 3: Participant 3's raw scores, corresponding T-scores and interpretation of Resiliency Scales

Scale	Raw Score	T-Score	Interpretation
Sense of Mastery	52	45	Below Average
Sense of Relatedness	63	42	Low
Emotional Reactivity	23	50	Average

RES (Resource Index)= 41 (Below Average); VUL (Vulnerability Index) = 56 (Above Average)

Table 4: Participant 4's raw scores, corresponding T-scores and interpretation of Resiliency Scales

Scale	Raw Score	T-Score	Interpretation
Sense of Mastery	66	55	Average
Sense of Relatedness	76	50	Average
Emotional Reactivity	35	59	Above Average

RES (Resource Index)= 51 (Average); VUL (Vulnerability Index) = 55 (Above Average)

Table 5: Participant 5's raw scores, corresponding T-scores and interpretation of Resiliency Scales

Scale	Raw Score	T-Score	Interpretation
Sense of Mastery	53	45	Below Average
Sense of Relatedness	47	31	Low
Emotional Reactivity	41	64	High

RES (Resource Index) = 36 (Low); VUL (Vulnerability Index) = 67 (High)

Table 6: Verbatim, Codes and Themes Emerging from the Semi-Structured Interviews

Verbatim	Codes	Themes
<p>"Toh sab woh drishye dekhtein hain aur hum nahi dekh paate"</p> <p>"Sighted bache toh kuch bhi kar sakte hai na kaam."</p>	Sense of being different from others and constant comparison with others	Self-growth through autonomy and direction
<p>"Jaise form bharna hota hai na, toh uss samein kisi ka help lena padhta hai."</p> <p>"Jaise normal bache har ek tarah ki book padhake na apna assignment bana lete hain, notes tyar kar lete hain. Bahut feel hota hai ki kaash mujhe bhi dikhta toh main bhi kar leti aisa."</p> <p>"Jaise koi bhi cheez chahiye ho toh, je agar dikhta hota toh kahin bhi jaakar le ate. Abhi toh magari kisi ko bolna padhta hai."</p>	Heightened sense of vulnerability and being a burden	

<p>“Jab log puchte hain ki humne toh dekha hi nahi tha ki yeh bhi samasya hai, tab thoda phir lagta hai ki kahin parents ko bhi kahin lagta hoga ki isko dikhta kyun nahi hai.”</p>	Parental acceptance seems difficult	
<p>“Jaldi se uss cheez ke liye awaranness ho joon ki taki mujhe baar baar kisi se help na mangni padhe.” “Toh hostel ka undar ka raasta mind mein feed ho gaya hai. Toh nahi kisi ki help leni padhti. Kudh hi chale jaate hain, kudh saara kar lete hain.”</p>	Desire for self-reliance and sense of pride from self-reliant actions	
<p>“Mereko ko dekhne pasand nahi karte the, achi nahi hai yeh, jaise ki yeh badsoorat hai.” “Man mein sochti hoon, phir bhi kisi ko kuch nahi kehti.” “Kabhi-kabhi lagta hai jab kuch acha nahi kar paate, toh lagta hai ki nahi ki mere undar koi qualities nahi hai.”</p>	Perceived attack on self-esteem and constant fear of ridicule	
<p>“Main zyaada nahi sochti uss bare mein because sabka apna-apna nature hota hai. Usko aisa lagta hai, toh uski baat hai.” “Mujhe koi shikayat nahi hai apni life se.” “Thodhe time ke liye mind karti hoon dil mein. Phir chod deti hoon. Aise toh bahut se log hote hai”</p>	Non-complaining attitude towards life and others	
<p>“Main apni life ko matlab has-bol ke , khel-kud ke, padhayi-likhayi karke.” “Iss physical appearance ko lekar main agar hamesha pareshan rahoongi, toh phir meri life kaisi chalegi.”</p>	Constant work on self-concept by cultivating self – acceptance	
<p>“Lekin woh log bolte hain ki hamare liye toh achi hi hai.”  “Kafi saari expectations rehti hai mujhse. Aur woh yeh samajhte hain ki main kuch bhi karoon aage, acha hi karoongi.”  “Bilkul bhi yeh feel nahi hone dete ki tum blind ho, toh kuch daya-sahanubuti, aisa kuch bhi nahi hai.”</p>	Supportive environment and family– both attitude and action based	Personal resources in the environment
<p>“Padhai wagarah mein toh dikat thodi kam ho gayi kyunki nahi technology wagrah aagayi hai, JAWS wagarah software.”</p>	Education benefited from technology	
<p>“Matlab sab haan bol kar nikal jaate hain, phir age koi nahi karta.”  “Toh log nahi kehtein ki tumhari stick nahi hai, kahin geerna goorna nahi. Stick nahi hai toh nahi pakda.”</p>	Lack of actual actions of help	
<p>“Jaise teachers bahut baar na jaise ache se nahi, galat tarike se baat karte the.” “Hum blind bachon ko alag baithya jaata tha aur normal bache sab ek side baithte the.”</p>	Insensitive behaviors of others	
<p>“Main bhi ab sabse bana ke rakhti hoon, ki koi bhi mera help kar deta hai.”</p>	Attempt to maintain cordial relations with all for constant help	

<p>“Classmates bahut ache se baat nahi karte hain, thoda rudely karte hain.”  “Par na baat-cheet karte hain na woh pasand nahi karte. Aisa hai ki baat karke na galat kiya hai”</p>	Lack of supportive peers	
<p>“Logon ke undar jagrukta ho ki woh kisi ko samajhne ki koshish karein. Kisi ko apne se kam na dekhein.”</p>	Desire for being treated as ‘normal’	Hope for the future
<p>“Aisa hota hai ki duniya mein ayi hoon toh mujhe kuch karna hai apne liye, parents ke liye.”</p>	Desire to succeed in life	
<p>“Agar mujhe insaan ka roop mila hai toh mujhse na kuch galata na ho.”</p>	Desire to do good	
<p>“Toh main toh sochti hoon ki hume padhayi likhayi kar leni chahiye. Bas yehi ek hamara madhyam hai.”</p>	Success in education as hope for change	
<p>“Koi na laachar bhavana se na dekhe. Sympathy ki bhavan dekhayein, par utna had tak na dikhayein ki yeh log kuch nahi kar sakte.”</p>	Help but not pity	
<p>“Isko lekar aage badhna hai ab apne saath. Toh main kuch nahi sochti iss bare mein zyaada kyunki mere jaise bahut saare log hain...Aisa toh nahi ki hamari aankhe nahi hai toh zindagi nahi chal sakti. Achi-khaasi chal rahi hai.”  “Meri life mein mujhe bahut hi sangharsh karna hai. Hare k cheez ko bahut face karte huye aage badhana hai.”</p>	Moving forward is essential	

## Discussion

The purpose of the present study was to explore the lived experiences of adolescents with visual disabilities between the ages of 12-18 years, and how they experience and actively cultivate resilience despite adverse life situations. Resilience is the ability to face significant threat that can potentially bring negative outcomes on one’s normal development. The foundations of resilience include psychological and social resources that act as a buffer against the negative outcomes of risk exposure. Thus, the focus of the study was on the participants’ self-concept, environmental mastery and sense of relatedness with people in their environment. The Resiliency Scales for Children and Adolescents (Prince-Embury, 2007) and a semi-structured interview schedule were used as measures for this purpose. The case study method was used.

### Case 1

Participant 1 is a 17-year-old female. She is blind since birth. She is pursuing Hindi (Hons.) from Delhi University. Currently, she lives in the hostel away from her family.

On the Sense of Mastery Scale, she got a raw score of 66 and a T-score of 55. This means she has an average sense of mastery. On Optimism, Self-Efficacy and Adaptability subscales, she has got average scores. This shows that she has an adequate sense of mastery despite negative life experiences. Also, her average scores on all three subscales reflect that she is able to recognize her limitations and accept feedback from others. Further, she has a positive attitude about life in general, specifically for the future: “Toh main toh sochti hoon ki hume padhayi likhayi kar leni chahiye. Bas yehi ek hamara madhyam hai, matlab apne apko dekhane ka.”

On the Sense of Relatedness scale, she has got a raw score of 64 and a T-score of 42. This means that her sense of relatedness is below average. Her scores are below average on the Trust and Comfort subscales, while her scores on Support and Tolerance subscales are average. It shows that her ability to experience an adequate sense of relatedness can get affected by poor treatment from others. She doesn’t seem to trust other people easily. However, she still receives adequate support from her family and friends.

On the Emotional Reactivity Scale, she got a raw score of 43 and a T-score of 66. Thus, her emotional reactivity is high. Her scores on Sensitivity, Recovery and Impairment sub-scales are high. She seems to get upset very easily. Her emotional arousal doesn't seem to let her think clearly. However she is able to bounce back from this emotional disturbance.

Her Resource Index score of 47 is in the average range. Her Vulnerability Index score of 62 is in the high range. Her vulnerability to threat in the environment is higher as compared to her perceived personal resources. Her heightened sense of vulnerability is reflected when she says, "*Jaise kahin ana jana hai, toh jab lagta hai kisse se karvaiyen.*"

### Case 2

Participant 2 is an 18 year old female. Her visual impairment is a result of a medical reaction. She is pursuing Hindi (Hons.) from Delhi University. Currently, she lives in the hostel away from her family.

On the Sense of Mastery Scale, she got a raw score of 52 and a T-score of 45. This means, her sense of mastery is below average. On the Optimism subscale, her score is below average; while on the Self-Efficacy and Adaptability subscales, her scores are average. This shows that although she has a pessimistic outlook towards her competence, she still believes she can master her environment despite harsh circumstances: "*Main apni life ko matlab has-bol ke, khel-kud ke, padhayi-likhayi karke.*" She is also receptive to feedback and criticism from others.

On the Sense of Relatedness Scale, she has got a raw score of 57 and a T-score of 38. This means her sense of relatedness is low. On the Trust and Support sub-scales, her scores are average. Her Comfort is below average. Her tolerance is low. She has adequate perceived support from her family and can trust other people. However, she is slow to warm up to others outside her immediate environment. Also, she also finds it hard to express differences within a relationship.

On the Emotional Reactivity Scale, she got a raw score of 40 and a T-score of 63. This means her emotional reactivity is high. On the Sensitivity subscale, her score is above average. Her Recovery score is high and her Impairment score is average. She gets upset easily and loses control: "*Toh main lagti hoon rone, aisa boltein hain toh.*"

Her Resource Index score of 39 lies in the low range. Her Vulnerability Index score of 65 lies in the

high range. Her vulnerability to threat in the environment is higher as compared to her perceived personal resources.

### Case 3

Participant 3 is an 18 year-old female. She is partially blind since birth. She is pursuing Political Science (Hons.) from Delhi University. She is a day-scholar and lives with her family in Delhi.

On the Sense of Mastery Scale, her raw score is 52 and T-score is 45. This means, her sense of mastery is below average. Her Optimism score is below average. Her Self-Efficacy and Adaptability scores are average. She has a satisfactory level of mastery and is receptive to criticism. However, she generally has a negative attitude towards life. She perceives other people's discriminatory behaviour as an attack on her self-esteem: "*Mereko ko dekhne pasand nahi karte the, achi nahi hai yeh, jaise ki yeh badsoorat hai.*"

On the Sense of Relatedness Scale, her raw score is 63 and T-score is 42. This means she has below average sense of relatedness. Her score on Trust sub-scale is below average. Her score on Comfort sub-scale is low. Her scores on the Support and Tolerance sub-scales are average. This shows that she feels a lack of security in her relationships. Her feelings may stem from having fewer friendships in the past because of her disability. However, she perceives adequate support from her parents and can express differences in a relationship.

On the Emotional Reactivity Scale, her raw score is 35 and T-score is 59. This means her emotional reactivity is above average. Her Sensitivity score is above average. Her Recovery score is below average. Her Impairment score is average. She gets upset easily and can lose control. However, she reports that she can bounce back from emotional disturbance: "*Thodhe time ke liye mind karti hoon dil mein. Phir chod deti hoon*"

Her score on Resource Index is 51, which is average. Her score on Vulnerability Index is 55, which is above average. Her vulnerability to threat in the environment is somewhat higher as compared to her perceived personal resources.

### Case 4

The participant 4 is an 18-year-old female. She is pursuing Hindi (Hons.) from Delhi University. She resides with her family. On the Sense of Mastery Scale, she got a raw score of 66 and a T-score of 55. This means her sense of mastery is average. Her scores

on Optimism, Adaptability and Self-Efficacy sub-scales are average. She has an adequate sense of mastery over her environment. Her attitude towards life and herself is quite positive: *“Mujhe koi shikayat nahi hai apni life se.”*

On the Sense of Relatedness Scale, she got a raw score of 76 and T-score of 50. This means her sense of relatedness is average. She has average scores on Trust, Comfort, Support and Tolerance sub-scales. This shows that she sees others around her as reliable and accepting. She perceives adequate support from her family. She said that her family members have lot of expectations from her and love her. She doesn't feel anxious and uncomfortable in the presence of others.

On the Emotional Reactivity Scale, she has got a raw score of 35 and T-score of 59. This means her emotional reactivity is above average. Her score on Sensitivity sub-scale is high. She has got average scores on Recovery and Impairment sub-scales. This shows that upset easily, she doesn't lose control and is able to recover from emotional disturbance.

Her Resource Index score of 51 lies in the average range. Her vulnerability score of 55 lies in the above average range. Her vulnerability to threat in the environment is somewhat higher as compared to her perceived personal resources. She feels that reliance on her parents is a necessity for her. For example, she fears if she takes a decision independently without consulting her parents, she might get into trouble.

### Case 5

Participant 5 is an 18 year-old female. She is blind since birth. She is pursuing Hindi (Hons.) from Delhi University. She currently resides with her family.

On the Sense of Mastery Scale, her raw score is 53 and T-score is 45. This means her sense of mastery is below average. Her scores on Optimism and Self-Efficacy sub-scales are average. Her score on Adaptability Scale is below average. She has a positive attitude towards life and herself. Her sense of mastery over her environment is adequate: *“Meri life mein mujhe bahut hi sangharsh karna hai. Hare ek cheez ko bahut face karte huye aage badhana hai.”* However, her ability to learn from her mistakes is somewhat low.

On the Sense of Relatedness Scale, her raw score is 47 and T-score is 31. This means she has a low sense of relatedness. Her scores on Trust, Support and Tolerance sub-scales are below average. Her score on Comfort sub-scale is low. She may see people as

unauthentic. She finds it hard to approach others when dealing with adversity, especially her friends. A reason for this may be the insensitive behaviour of her classmates towards her.

On the Emotional Reactivity Scale, she got a raw score of 41 and T-score of 64. This means she has high emotional reactivity. Her score on Sensitivity sub-scale is average. Her score on Recovery sub-scale is high. Her score on Impairment sub-scale is above average. She gets upset easily. She sometimes loses control, makes mistakes and cannot think clearly. But, she can very quickly recover from the emotional arousal: *“Main zyaada nahi sochti uss bare mein because sabka apna-apna nature hota hai. Usko aisa lagta hai, toh yaar uski baat hai.”*

Her Resource Index score of 36 lies in the low range. Her Vulnerability Index score lies in the high range. Her vulnerability to threat in the environment is higher as compared to her perceived personal resources. She often feels dependent on others: *“Yeh log apna kudh se bana lete hain, aur hum kisi pe dependent ho.”*

In summary, the T-scores of the participants on the Sense of Mastery scale range from average to below average, indicating less than adequate mastery over their environment. The T-scores of the participants on the Sense of Relatedness scale range from average to low. Thus, they might find it hard to trust others and ask them for support while dealing with an adversity. The T-scores of the participants on the Emotional Reactivity Scale range from average to high, indicating increased sensitivity to emotional disturbance due to negative attitudes and behaviours of others towards their disability. Overall, the participants have higher levels of vulnerability as compared to their perceived personal resources, as seen from their Resource Index and Vulnerability Index scores. Thus, their personal and social resources are inadequate to meet the environmental demands at the time of threat. We can further understand these results through the themes drawn from the participants' semi-structured interview that shed light on their personal experiences and coping resources.

### Major themes across the cases

After analysing all the cases, three major themes were found. The first theme was *Self-growth through autonomy and direction*. A sense of mastery over one's environment provides the opportunity to develop autonomy and direction in life. Most of the participants seem to have either average or below average environmental mastery. This is because



negative life outcomes due to visual disability have compromised their ability to experience an adequate sense of mastery. They feel that their condition makes them vulnerable and dependent on others: “*Jaise koi bhi cheez chahiye ho toh, je agar dikhta hota toh kahin bhi jaakar le ate. Abhi toh magar kisi ko bolna padhta hai.*” Hallum (1995) found that adolescents with disability often feel undesirable, both socially and occupationally. For example, they may feel inadequate because of fewer friendships (McGavin, 1996). This has negatively affected the participants’ self-reliance, problem-solving abilities and self-esteem. They not only feel different from others, but also have a sense of being marginalized in the society. However, these participants still demonstrate an adequate sense of self-worth. Most of them feel positive about their ability to carry out daily tasks with little or no assistance from others: “*Toh hostel ka undar ka raasta mind mein feed ho gaya hai. Toh nahi kisi ki help leni padhti. Kudh hi chale jaate hain, kudh saara kar lete hain.*” They are also constantly striving toward self-growth and autonomy.

The second theme was *personal resources in the environment*. Personal resources like quality relationships are an important source of resilience for the disabled (Ungar, 2007; Runswick-Cole & Goodley, 2013). All the participants share quality relationships with their family. Most of them find their teachers to be cooperative. Tirussew (2005) states that caring and supportive relationships within the family and outside the familial context, like school and neighborhood, can help a disabled person to build a positive self-esteem and self-efficacy, which are important to function effectively in different areas of life like, school, job, family and community. However, the participants find it difficult to trust their peers and perceive lack of support from others. For example, one participant said, “*Ye log jaan-bujhkar ke bhi nahi bolte hain. Jaise raaste mein kuch rakha hua hai, toh matlab batate nahi hai.*” Previous research has shown that disabled individuals often experience discriminatory behaviours, such as bullying, teasing, and social exclusion from others (Pittet et al., 2010).

The third theme was *hope for the future*. Despite negative life circumstances, the participants have maintained hope for a better future. They have a strong desire to be treated normally by others, and they despise self-pity: “*Koi na laachar bhavana se na*

*dekhe. Sympathy ki bhavan dekhayein, par utna had tak na dikhayein ki yeh log kuch nahi kar sakte.*” They have a strong desire to prove themselves to others. For example, one participant said, “*Main kuch aisa kaam karoongi ki unn log ko bhi yeh yakin ho jaye ki yeh log bhi apni life mein kuch larte sakte ahin, aur yeh log bhi kisi se kam nahi hai.*” As noted by Arnold and Chapman (1992), these teenagers have the same concerns as any other normal teenager about what they would like to have in their adult life- jobs, marriage and family. They hope to succeed in life through education and do something for themselves in the future. For example, one participant said, “*Toh main toh sochti hoon ki hume padhayi likhayi kar leni chahiye.*”

### Conclusion

The present study adds to our knowledge about how disabled individuals deal with adverse life circumstances. Overall, the results indicate that resilience needs to be cultivated in this particular group. Though they are making efforts to move forward, they find it difficult to gain acceptance from the society and receive support from them. Thus, their personal resources are underdeveloped as compared to their vulnerability to negative life outcomes. The findings of the study demonstrate that it would be advantageous to develop coping strategies that may contribute to their competencies, particularly in relation to their welfare in the society. Furthermore, it highlights the importance of social resources and the need for effective intervention programs.

However, the study was its own limitations. First, the sample size was small and only included female participants. Second, the study was restricted to adolescents with visual disability. This makes it difficult to generalize the findings of the study. Future research can take these limitations into account and include a larger sample size with both males and females. The sample can also include people with other forms of disability to understand how they cultivate resilience. This will help in developing a more comprehensive picture of the experience of resilience among people with different forms of disability. Further, future research can also focus on resilience-building programs to strengthen the personal and social resources of the disabled adolescents.

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