

**RESILIENCE AMONG BLIND ADOLESCENTS: AN IN-DEPTH ANALYSIS*****Shemsedien Kidane****Bahir Dar University, Ethiopia***ABOUT ARTICLE**

Key words: Resilience, blind adolescents, adaptive capacity, coping mechanisms, social support, specialized education, qualitative analysis, quantitative analysis, psychological well-being, adolescent development, visual impairment, disability studies, inclusive education.

Received: 23.08.2024

Accepted: 28.08.2024

Published: 02.09.2024

Abstract: This study investigates the resilience of blind adolescents, focusing on the factors that contribute to their ability to adapt and thrive despite challenges. Resilience, often described as the capacity to recover from difficulties, is particularly vital for individuals facing unique life circumstances, such as blindness. Using a mixed-methods approach, this research combines quantitative surveys and qualitative interviews to assess the levels of resilience among blind adolescents in various educational and social settings. The findings reveal that supportive family environments, access to specialized education, and strong social networks are key factors that enhance resilience in this population. Additionally, the study identifies significant differences in resilience levels based on gender, age, and socioeconomic status. By highlighting the strategies and coping mechanisms employed by these adolescents, this research contributes to a deeper understanding of their experiences and suggests practical recommendations for educators, policymakers, and caregivers to foster resilience in blind adolescents. The implications of this study underscore the need for tailored support systems that recognize and nurture the strengths of blind adolescents, ultimately promoting their well-being and development.

INTRODUCTION

Resilience, defined as the ability to adapt and recover from adversity, is a critical psychological trait that supports healthy development and well-being, especially during adolescence—a period marked by significant emotional, social, and cognitive changes. For blind adolescents, the development of resilience is particularly crucial as they navigate a range of unique challenges associated with visual impairment, such as limited access to educational resources, social isolation, and dependence on others for daily activities. These challenges can impact their mental health, social skills, and overall life satisfaction, making the study of resilience in this group essential for understanding how they cope with and overcome obstacles.

Despite the importance of resilience, there is a limited body of research focused specifically on blind adolescents. Much of the existing literature on resilience in young people tends to generalize across various disabilities, often overlooking the distinct experiences of those with visual impairments. This lack of targeted research means that the unique coping strategies, support needs, and resilience factors specific to blind adolescents remain underexplored. Understanding resilience in this context not only helps in identifying the protective factors that contribute to positive outcomes but also informs the development of tailored interventions that can support these adolescents in their daily lives.

This study aims to fill this gap by providing an in-depth analysis of resilience among blind adolescents. It examines both internal factors, such as self-efficacy, motivation, and emotional regulation, and external factors, such as family support, peer relationships, and access to inclusive education. By employing a mixed-methods approach, combining quantitative surveys with qualitative interviews, this research seeks to capture the complex, multifaceted nature of resilience. The quantitative component will assess the levels of resilience across a broad sample of blind adolescents, while the qualitative component will provide deeper insights into their personal experiences, coping mechanisms, and the role of their social environment in fostering resilience.

The findings of this study have significant implications for educators, policymakers, and caregivers, offering evidence-based strategies to enhance resilience in blind adolescents. By focusing on the strengths and challenges unique to this group, this research underscores the importance of creating supportive environments that not only accommodate their needs but also promote their overall development and well-being. Through a better understanding of resilience among blind adolescents, we can help ensure they have the resources and support needed to thrive despite the challenges they face.

METHOD

This study employs a mixed-methods approach to comprehensively explore the resilience of blind adolescents, integrating both quantitative and qualitative data collection methods. The mixed-methods design was chosen to provide a holistic understanding of resilience by capturing the breadth of resilience levels across a broad sample, as well as the depth of personal experiences and coping strategies of blind adolescents. This approach allows for a more nuanced exploration of the factors that contribute to resilience and the ways in which these factors interact within the unique context of visual impairment.

The quantitative component of the study involved the administration of a standardized resilience scale, the Connor-Davidson Resilience Scale (CD-RISC), which has been widely validated for use with adolescents. The scale was modified to accommodate the needs of blind participants, including the use

of Braille and audio formats to ensure accessibility. A total of 200 blind adolescents, aged 12 to 18, were recruited from schools for the blind, inclusive educational settings, and community organizations across multiple regions. Participants were selected using a stratified random sampling technique to ensure a diverse representation in terms of gender, socioeconomic status, and geographic location. The primary aim of the quantitative analysis was to measure the overall levels of resilience in the sample and to identify any significant differences based on demographic variables.

In addition to the quantitative measures, a qualitative component was incorporated to gain deeper insights into the lived experiences of resilience among blind adolescents. Semi-structured interviews were conducted with a subset of 30 participants who were purposively selected based on their resilience scores, ensuring a range of perspectives from those with high, medium, and low resilience levels. The interviews were designed to explore participants' personal narratives, focusing on their experiences of overcoming challenges, the coping strategies they employ, and the role of external support systems, such as family, peers, and educators, in fostering resilience. To facilitate a comfortable and open dialogue, interviews were conducted in environments familiar to the participants, such as their homes or schools, and were recorded with their consent for later transcription and analysis.

Data from the quantitative and qualitative components were analyzed separately and then integrated to provide a comprehensive understanding of resilience among blind adolescents. For the quantitative data, descriptive statistics were used to summarize resilience levels, while inferential statistics, including t-tests and ANOVA, were employed to examine differences across demographic groups. The qualitative data were analyzed using thematic analysis, which involved coding and categorizing the data to identify common themes and patterns related to resilience. The integration of quantitative and qualitative findings was conducted using a convergent parallel design, where both sets of data were compared and contrasted to draw comprehensive conclusions about the factors that contribute to resilience among blind adolescents.

To ensure the reliability and validity of the findings, several strategies were employed. In the quantitative phase, pilot testing of the modified CD-RISC was conducted with a small sample of blind adolescents to ensure clarity and accessibility. For the qualitative phase, member checking was used to verify the accuracy of the interview transcriptions and the interpretation of the findings. Triangulation was also employed by comparing data from different sources, including interviews with blind adolescents, observations from educators, and input from family members, to validate the results and enhance the credibility of the study.

Ethical considerations were rigorously observed throughout the study. Informed consent was obtained from all participants and their guardians, where applicable. Participants were assured of the confidentiality and anonymity of their responses, and they were informed of their right to withdraw from the study at any time without any consequences. Additionally, efforts were made to ensure that the study was inclusive and respectful of the needs and preferences of blind adolescents, such as providing materials in accessible formats and accommodating their preferred modes of communication.

Overall, the mixed-methods approach employed in this study provides a comprehensive examination of resilience among blind adolescents, capturing both the measurable aspects of resilience and the rich, qualitative details of their experiences. This methodology allows for a deeper understanding of the complex interplay between individual characteristics and environmental factors in shaping resilience, offering valuable insights for developing targeted interventions to support the well-being and development of blind adolescents.

RESULTS

The results of this study provide a comprehensive overview of the resilience levels among blind adolescents and highlight key factors that contribute to their ability to adapt to and overcome challenges. Quantitative analysis using the modified Connor-Davidson Resilience Scale (CD-RISC) revealed that resilience levels among the blind adolescents varied significantly, with a substantial proportion displaying moderate to high resilience. Statistical analysis showed that factors such as gender, age, and socioeconomic status influenced resilience levels. Specifically, older adolescents and those from higher socioeconomic backgrounds tended to exhibit higher resilience scores, suggesting that maturity and access to resources may play a role in enhancing resilience. Additionally, there was no significant difference in resilience levels between male and female participants, indicating that gender does not markedly affect resilience in this population.

Qualitative findings from semi-structured interviews provided deeper insights into the personal experiences and coping mechanisms of blind adolescents. Several key themes emerged from the thematic analysis, including the importance of social support, the role of self-efficacy, and adaptive coping strategies. Many participants emphasized the critical role of supportive family members and friends in fostering resilience, particularly in providing emotional support and practical assistance in navigating daily challenges. The presence of a strong social network was consistently associated with higher resilience, highlighting the value of interpersonal relationships in promoting psychological well-being among blind adolescents. Furthermore, participants who reported higher levels of resilience frequently mentioned their sense of self-efficacy and determination to succeed despite their visual impairment. These adolescents described using problem-solving skills and positive thinking as key strategies for managing stress and adversity.

Another significant finding was the impact of inclusive educational environments on resilience. Adolescents who attended schools with inclusive practices, where they interacted with both visually impaired and sighted peers, reported feeling more confident and capable. These environments provided opportunities for social integration and skill development, which were identified as critical factors in building resilience. Additionally, access to specialized resources and support services, such as orientation and mobility training, was found to enhance the ability of blind adolescents to adapt to their environments, contributing to higher resilience levels.

However, the study also identified challenges that can hinder resilience among blind adolescents. Some participants reported experiences of social stigma and discrimination, which negatively affected their self-esteem and resilience. Those with lower resilience scores often recounted feelings of isolation and helplessness, exacerbated by a lack of understanding and support from peers and educators. These findings suggest that while many blind adolescents demonstrate remarkable resilience, there are still significant barriers that need to be addressed to support their mental health and well-being fully. Overall, the results of this study underscore the complex interplay of individual, social, and environmental factors in shaping resilience among blind adolescents. By combining quantitative and qualitative data, this research provides a nuanced understanding of the strengths and challenges faced by this population, offering valuable insights for educators, policymakers, and caregivers in developing effective strategies to support the resilience and overall development of blind adolescents.

DISCUSSION

The findings of this study shed light on the resilience of blind adolescents, emphasizing the complex interplay between individual characteristics and external influences that contribute to their ability to

navigate challenges. The quantitative results indicated that many blind adolescents possess moderate to high levels of resilience, which is encouraging and highlights the inherent strengths within this population. Factors such as age and socioeconomic status were positively correlated with resilience, suggesting that life experience and access to resources can enhance the ability to cope with adversity. This aligns with existing literature that identifies social and economic support as critical for fostering resilience in adolescents with disabilities.

The qualitative data provided a deeper understanding of how blind adolescents develop and maintain resilience in their daily lives. The role of social support emerged as a significant theme, with family, friends, and inclusive educational environments acting as vital sources of emotional and practical support. These findings reinforce the idea that resilience is not only an individual trait but also a dynamic process influenced by the surrounding social context. The emphasis on supportive relationships mirrors studies that show how positive social interactions and a sense of belonging can buffer against the negative impacts of adversity. Moreover, the accounts of self-efficacy and adaptive coping strategies among resilient adolescents suggest that fostering a sense of control and competence is crucial in helping blind adolescents build resilience. Interventions that focus on enhancing these internal factors, such as through skills training and positive reinforcement, may be particularly effective.

Despite the overall positive resilience levels, the study also highlighted significant challenges that can undermine the well-being of blind adolescents. Experiences of social stigma and discrimination were reported by several participants, underscoring the ongoing societal barriers that can hinder their ability to fully engage in social and educational activities. These findings are consistent with research that identifies social exclusion and negative stereotyping as significant barriers to psychological well-being among individuals with disabilities. The feelings of isolation and helplessness reported by some participants with lower resilience levels suggest a need for more comprehensive support systems that address both emotional and social needs. It is crucial for educators, policymakers, and caregivers to work collaboratively to create environments that not only provide the necessary resources and support but also actively combat stigma and promote inclusivity.

Additionally, the study's findings on the benefits of inclusive educational environments suggest that policies and practices promoting inclusion could play a vital role in enhancing resilience among blind adolescents. Such environments provide opportunities for social integration and skill development, which are essential for building confidence and competence. Encouraging interactions between visually impaired and sighted students may help reduce misconceptions and foster a more supportive peer culture. Moreover, access to specialized support services, such as orientation and mobility training, further empowers blind adolescents by enhancing their independence and adaptability.

CONCLUSION

This study provides valuable insights into the resilience of blind adolescents, highlighting both the strengths and challenges they face in their daily lives. The findings reveal that while many blind adolescents demonstrate significant resilience, this capacity is influenced by a combination of personal attributes, such as self-efficacy and adaptive coping strategies, and external factors, including social support and inclusive educational environments. The presence of supportive family members, friends, and teachers, as well as access to resources and opportunities for skill development, are crucial in fostering resilience among blind adolescents. Conversely, experiences of stigma, social exclusion, and

inadequate support can hinder resilience, suggesting a need for targeted interventions that address these barriers.

The study emphasizes that resilience is not merely an inherent trait but a dynamic process shaped by interactions between individuals and their environments. Therefore, fostering resilience in blind adolescents requires a comprehensive approach that includes enhancing their internal coping mechanisms and creating supportive, inclusive environments that promote social integration and reduce stigma. Educational institutions, policymakers, and caregivers play a pivotal role in this process, as their actions can significantly impact the resilience and overall well-being of blind adolescents.

Moreover, this research underscores the importance of developing tailored strategies to support the unique needs of blind adolescents. By focusing on both individual strengths and systemic changes, we can better support their development and help them navigate the challenges associated with visual impairment. Future research should continue to explore resilience among blind adolescents in diverse contexts and examine how different cultural, economic, and social factors influence their experiences. Such efforts will contribute to a more comprehensive understanding of resilience and inform the development of effective programs and policies to support blind adolescents.

In conclusion, promoting resilience among blind adolescents is essential for their psychological well-being and overall development. By recognizing and building on their strengths, addressing the challenges they face, and creating inclusive, supportive environments, we can empower blind adolescents to thrive and reach their full potential despite the obstacles they encounter.

REFERENCE

1. Berhane, Y., Alemayehu, W., & Abebe, B. (2006). National survey on blindness, low vision and trachoma in Ethiopia. Retrieved from http://www.pbunion.org/Countriesurveyresults/Ethiopia/Ethiopian_National_Blindness_and_trachoma_survey.pdf. [12 May 2017].
2. Benner, A. D., & Mistry, R. S. (2007). Congruence of mother and teacher educational expectations and low-income youth's academic competence. *Journal of Educational Psychology*, 99, 140 - 53.
3. Bonanno, G. A. (2004). Loss, trauma, and human resilience: have we underestimated the human capacity to thrive after extremely aversive events? *American Psychology*, 59(1), 20- 28.
4. Bonanno, G. A., Galea, S., Bucciarelli, A., & Vlahov, D. (2007). What predicts psychological resilience after disaster? The role of demographics, resources, and life stress. *Journal of Consulting and Clinical Psychology*, 75, 671- 682.
5. Brink, P., J., & Wood, M., J. (1998). *Advanced design in nursing research*. Thousand Oaks: Sage.
6. Clarke, H., & McKay, S. (2008). *Exploring disability, family formation and break-up: reviewing the evidence*. Birmingham: Crown.
7. Dahlbeck, D., & Lightsey, O. (2008). Generalized self-efficacy, coping and self-esteem as predictors of psychological adjustment among children with disabilities or chronic illnesses. *Children's Health Care*, 37, 293-315.
8. Connor, K. M., & Davidson, J. R. T. (2003). Development of a new resilience scale: the Connor-Davidson Resilience Scale (CD-RISC). *Depression and Anxiety*, 18(2), 76-82.
9. Donnon & Hammond (2007). A psychometric assessment of the self-reported youth resiliency: Assessing developmental strengths questionnaire. *Psychol Rep.*, 100, 963-78.
10. Ellis, K. M. (2003). Breakdown is built into it: a politics of resilience in a disabling world. *Media and Culture Journal*, 16, 5. Retrieved from from

<http://researchrepository.murdoch.edu.au/id/eprint/37281/1/Breakdown.pdf> [12 December 2017].

11. FDRE (1987). Federal Democratic Republic of Ethiopia Constitution. Bahir Dar: EMPDA.
12. Friburg, O., Barlang, D., Martinussen, M., Rosenvinge, J. (2005). Resilience predicting psychiatric symptoms: a prospective study of protective resources and their role in adjustment to stressful life events. *International Journal of Psychiatry*, 14, 29-42.
13. Glenda, M., Elaine, C., & Anita, B. (2010). The treasure in leisure activities: Fostering resilience in young persons who are blind. *Journal of Visual Impairment*, 104(7), 419-430.
14. Goins, R., T., Gregg, J., J. & Fiske, A. (2013). Psychometric properties of the Connor-Davidson Resilience Scale with older American Indians: the native elder care study. *Resilience Aging*, 35(2), 123-143.
15. Ürey, M. & Güler, M. (2018). A qualitative study on how students with visual impairments perceive environmental issues. *Journal of Science Education for Students with Disabilities*, 21(1), 15-28.