GENDER DIFFERENCES IN SELF-CONCEPT AMONG ADOLESCENTS WITH LOW VISION

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This study aimed to investigate whether there were differences in self-concept among adolescents with low vision due to gender. The sample population consisted of (23) adolescents, 12 (10 males and 13 females) aged 12-17 years in the first year of secondary school. The researcher used the Tennessee Self-Concept Scale (TSCS) for the evaluation of Self-Concept. The results of this study showed that there were some differences in the adolescents' self-concept and self-behavior due to gender. Female students scored lower on social self-concept, family self-behavior, and moral self-behavior dimensions than male students, but higher on physical self-concept.

Self-concept is an important concept of any child's development. As children develop a sense of self and interact with and gain experience in the world, their self-concept is affected. Self-concept is defined as the value that an individual places on his or her own characteristics, qualities, abilities, and actions (Woolfolk, 2001).
The importance of self-concept within educational settings has been discussed by several scholars and has led to the performance of studies examining the role of self-concept in school performance (Oliva, 1999).
The term self-concept refers to the ordered set of attitudes and perceptions that an individual holds about him/herself (Woolfolk, 2001; Tuttle and Tuttle, 2004 and Wolffe, 2000).
The self-concept comprises three main elements:
1. the identity of the subject or self-image, referred to as the perceptions of him/herself;
2. self-esteem, which is related to the value individuals attach to the particular manner in which they see themselves;
3. a behavior component, reflecting how self-concept influences and formulates the individual's behavior (Zaqol, 2001; Machargo, 1997; Tuttle and Tuttle, 2004 and McClun and Merrell, 1998).

Baumrind (1991) suggested that the development of self-concept of children and adolescents requires an environment that provides the freedom to explore and experiment and protection from danger. Individuals with high self-concept tend to have confidence in their own abilities to make decisions, expectations for successful outcomes, and relationships that are characterized by respect and dignity (Tuttle and Tuttle, 2004). Therefore, the manner in which a disability interacts with the processes and factors that are involved in the development of self-concept is an important area of research.

Some young children with disabilities have negative self-images; they may view themselves as failures, have negative thoughts about themselves, depending on their parents and others, and may have difficulties with social skills (Vernon, 1993). To develop a healthy self-concept, they need to be provided with interventions, such as counseling, stress-reeducation techniques and help with developing their personal and social skills. To develop self-concept, adolescents with disabilities may need specific instructions, such as making eye contact and facing individuals when they communicate.

Previous studies
Recent studies have focused on the differences of self-concept of adolescents with normal vision. Although, the results of those studies and their empirical validity were diverse, most found that there were important differences due to gender. Young women scored lower than young men, especially from 12 years on when their self-confidence and acceptance of physical self-image decreases

(Orenstien, 1994; Marssh and Hattie, 1996 and Oliva, 1999). Harter, Bresnick; Bouchy and Whitesell (1997) concluded that young girls find it difficult to create a stable self-image, and therefore tend to have difficulties during the process. Similarly, Rothemberg (1997) indicated that girls over 12 years were more at risk of suffering from depression than young men.
Although the way in which impaired vision affects the development of self-concept in young people is unknown, the study by Meyen (1992) showed that negative attitudes of peers, parents and teachers toward adolescents with low vision could undermine their self-perception. Similarly, Beaty (1991) and Carin (1997) suggested that young people with visual impairment, including with low vision had a lower self-concept in several dimensions than their peers without visual impairment.

The fact that adolescents with visual impairment scored lower in some dimensions of self-concept due to the difficulties that many of them face when integrating into school and society, probably because the adolescents are perceived by peers as less attractive or because they have obstacles in establishing social relations (Roseeblum, 2000).

After reviewing numerous studies, the researcher found that none examined gender differences in adolescents with low vision. There were, however, relevant data related to the differences between gender and self-concept in blind people, Harter et al., (1997) who found that blind people showed extreme values, they either had a very low self-concept or overrated their personal attributes compared to sighted people. In contrast, Peterson; Sarigiani and Kennedy (1991) indicated that blind men had more positive and realistic self concept than blind women. Rothemburg (1997) also noted these diffences and found that women scored higher on personal identity, physical and family and social self-concept and men scored higher on self-satisfaction and moral self-concept.

The definition of low vision used in this study was published by the WHO in 1992: a person is considered to have low vision if, after treatment and/or optic correction, visually acuity (VA) is 1/3 and only the perception of light is present, or if the visual field (VF) is smaller than 10 degrees, although the person uses or is potentially able to use vision to plan and execute a task. VA is considered to be the top of the capacity of the visual system to distinguish subtle details of the environment at a specific distance. VA refers to the zone visible space surrounding a specific point, while the body and eyes are kept still (cited in Al-Hadidi, 2001).

Until recently, the majority of people with low vision were considered blind. The learning and teaching strategies used were identical. These educational dynamics began to change, as evident differences were found between low-vision and blind people; therefore, studies on the features of both groups must be considered.
The purpose of this study was to determine the existence of differences in self-concept of young women and men, aged 12-17 years, with low vision. The following research question was addressed:
Are there any differences in self-concept between young women and men, aged 12-17 years, with low vision?

Method

Participants

The sample of this study consisted of 23 adolescents (10 male and 13 females), with low vision. The participants were attending their first year of secondary education and they were randomly selected from secondary schools in Al-Karak Governate in the south of Jordan. All participants were diagnosed as having low vision; none of them were blind.

Instrument

The instrument used was the Tennessee Self-Concept Scale (TSCS) developed by Fitts (1965). This instrument was chosen because it is easy to administer, standardized, and covers a complete range of psychological adjustments indicators (Fitts, 1996). According to Fitts, the reliability and validity of the TSCS of self-concept (0.91), self-esteem (0.98) and self-behavior (0.88). This instrument has been used in other studies of teenagers with characteristics similar to those in the present study, such as Johanson and Johnson (1991); Obiakor and Style (1994). The (TSCS) provides information on the multidimensional structure of self-concept, which is considered essential in such instruments.

The scale consists of 100 statements, 45 of which are expressed affirmatively and 45 negatively. The remaining 10 questions are items related to self-criticism and are from the L scale of the Minnesota Multiphasic Personality Inventory (MMPI). The items are classified into three dimensions: 1. identity

and self-concept *how does the individual see him/herself* (30 items); 2. self-satisfaction or self-esteem *how does the individual accept him/herself* (30 items); 3. self-behavior *how does the individual behave towards him/herself* (30 items). Each one of the three dimensions contains five specific subscales, e.g. personal self (valuation of his/her personality), family self (how do the subjects feel in the family), moral (valuation moral), social self (social relations), and physical self (valuation of his/her appearance and physical condition).

Prior the administration, the TSCS was first translated into Arabic , then it was given to three specialists in the English language to evaluate the validity of the translation. To grant the content validity of the instrument, it was given to four specialists in counseling and special education. According to their suggestions and recommendations, some of the items were modified to suit the Jordanian environment.

To estimate the reliability of the adopted translation of the instrument, it was administered to a sample of (40) teachers , and a split-half method was used to calculate the internal consistency coefficient, which was (0.82), which is acceptable to be adopted in such study.

Procedure

All 23 students were given a copy of the scale printed that was enlarged to a size that could be read comfortably by the subjects of the study.

Results

The data were analyzed with an appropriate test of differences of the means for independent groups depending on homoscedasticity (SPSS statistical package, v. 9.0). Mean scores obtained by female subjects for each factor and dimension of self-concept measured by the TSCS with the mean scores obtained by the male subject were compared. Results are summarized in table (1).

Table 1

Difference in means of self-concept, self esteem and self-behavior scores between adolescent males and females

Variables	Male		Female		Difference Means	
	Mean	SD	Mean	SD	T	P
Family of self concept	26.17	2.79	26.00	5.22	0.074	0.924
Moral self-concept	23.44	3.44	23.53	3.64	0.115	0.910
Personal self-concept	23.67	4.61	22.76	3.54	0.533	0.599
Physical self-concept	19.83	3.25	22.29	1.86	2.28	0.033*
Social self-concept	23.50	3.99	19.71	3.65	2.14	0.044*
Family self-esteem	20.00	3.95	20.00	4.12	0.000	1.00
Moral self-esteem	19.83	1.60	19.94	2.01	0.118	0.907
Personal self-esteem	23.33	2.25	21.35	4.14	1.10	0.282
Physical self-esteem	24.00	3.58	21.24	4.59	1.33	0.197
Social self-esteem	23.50	5.09	22.29	3.26	0.673	0.508
Family self-behavior	23.83	3.54	19.53	3.06	2.84	0.010**
Moral self-behavior	25.67	1.63	21.59	3.79	3.59	0.002**
Personal self-behavior	19.83	2.86	18.24	4.04	0.888	0.385
Physical self-behavior	20.67	6.25	18.53	3.81	1.09	0.288
Social self-behavior	20.83	5.85	20.76	3.11	0.037	0.971

* Differences significant at $p < 0.05$

** Differences significant at $p < 0.01$

As it can be seen in Table 1, no significant differences were found between young men and young women for any of the self-esteem components evaluated. The data showed that the family, moral, personal, physical and social self-esteem were similar for young men and young women.

The data differed with regard to self-concept. No differences were found between young men and young women with regard to either family, moral or personal self-concept, while there were significant differences in physical self-concept ($t = 2.28$; $P < 0.033$) and social self-concept ($t = 2.14$; $P < 0.044$). The physical self-concept of young men was lower than that of the young women, but their social self-concept was higher.

Data on self-behavior showed that personal, social and physical self-behavior were similar to both young men and young women (similar means). However, young women had lower family ($t = 2.84$; $p < 0.010$) and moral self-behavior ($t = 3.59$; $P < 0. 002$) than young men.

Discussion

Studying the results obtained from the adolescents of this study, attention is drawn to the fact that young women had a lower self-perception than young men in three of the components evaluated (social self-concept, family self-behavior and moral self-behavior). It is important to note, however, that their physical self-concept was higher. These results indicate that, compared with young men, young women with low vision placed more importance on their physical appearance, body and health. Rothemburg (1997) revealed the same conclusion in a study that compared gender differences between blind men and women studying in a school especially aimed at blind adolescents. The circumstances, however, differed significantly from those in this study. The characteristics of the sample were totally different. The subjects of the present study were low vision students attending regular schools.

The results of the present study do not, however, agree with those obtained in studies that focused on gender differences among adolescents with normal vision. More specifically, a review of studies showed that young women's physical self-concept was lower than that of young men (Orenstin 1994 and Marsh 1996).

In analyzing the results of this study, the researcher found some components of self-concept and self-behavior showed differences when the gender variable was kept in mind, with some disadvantages for women. In fact, young men had higher social self-concept and family and moral self-behavior, for example, they felt more competent in the social field and more valued by their friends than girls of the same age. In contrast, young women seemed to be further limited in social self-concept, probably due to gender-stereotype conditionings. These gender differences may be explained by a number of theories that have been proposed. According to the Hypothesis of Gender Intensification, early adolescence is a period where one becomes more aware of traditionally assigned roles for the sexes. Young girls feel more intensively the problems and limitations that usually accompany women in the society they live in. Imitating their mothers' roles, they may start to understand the place women have in society, which, despite the achievements obtained, often implies a complex set of problems including professionals fulfillment and other's expectations about women's social role. Society places a lot of pressure and demands on women. These results were similar to Harter et al., (1997) who reported that women communicate having more conflicts as they build their self-images.

Results on moral self-behavior have the same explanation. Studies carried out on adolescents of both sexes with no visual impairment stressed the fact that young men, who felt more supported by their parents, were more socially competent and developed more adequate levels of behavior from a moral point of view (Oliva, 1999). The results of the study by Ferrell (1998) with regard to moral self-behavior were similar to those as this study has found for young men.

Conclusion

The main question of this study was to determine whether there were differences in self-concept between young men and young women (aged 12 to 17) with low vision. The data clearly show a difference.

It is worth mentioning that the problem regarding gender differences can be alleviated by using cooperative teaching and learning to value the achievements and contributions of any group member, thus favoring the participation of male and female subjects and their social acceptance by classmates, and train all members in interpersonal skills so that female subjects feel more valued by the other adolescents. These might help in improving young women's self-concept from their pre-school years and preventing later personal or social disorders.

The most useful aspect of the current study, is that it documented the problems of self-concepts in adolescents (aged 12 to 17 years) with low vision. Nonetheless, the results of this study should be carefully analyzed since the size of the sample was small. It is necessary that Future studies using larger samples be carried out so that the findings of the present study can be confirmed.

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