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Resilience: An Emic Perspective of Adolescents with Disabilities from Segregated and Integrated Schools

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Abstract

Education creates opportunities for marginalized communities to win emancipation from the hardships of life. Adolescents with disabilities are at a severe disadvantage in many parts of the world, especially Pakistan. Literature provides very little information about the personal perceptions and opinions of adolescents with disabilities about their school life. The current study aimed to explore the dynamics of resilience (ability to bounce back) from the emic perspective of adolescents with disabilities in both segregated (special) and integrated (mainstream) schools. Both intrinsic and extrinsic factors influencing resilience were explored using a qualitative research design. Three rounds of semi-structured interviews were conducted with adolescents with disabilities (N=13) from both segregated (n=9) and integrated (n=4) schools. The data obtained was analyzed through the Interpretive Phenomenological Analysis (IPA). The results revealed that all participants of the study possessed basic characteristics of resilience including recovery, active coping, positive emotionality and social connectedness. Further in-depth analysis indicated a marked difference between the approach of segregated and integrated schools determined by supportive factors in recovery, problems faced in daily functioning due to disability, reasons for social connectedness, purpose in life and self-reliance. From the findings it is evident that the school environment, teachers' cooperation and peer support are key distinguishing factors among the two groups under study. School support is very important for personal as well as well as psycho-social development of adolescents with disabilities.

Keywords: adolescents, emic perspective, integrated schools, resilience, segregated schools.

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Introduction

Education is the basic right of every individual and a very vital part of the progress of any nation. It gains even more importance when focus is shifted toward adolescents with disabilities. Such adolescents are still at a severe disadvantage in many parts of the world, especially in Pakistan, and education creates opportunities for marginalized communities to emancipate themselves from the hardships of life (Bengtsson & Gupta, 2017). Since the passing of the Americans with Disabilities Act (1990), more recognition is given to persons with disabilities, preferably addressing them as 'special persons' or 'differently abled' people to remove the stigma (Black & Stone, 2005; Sefotho, 2014). However, in the orthodox setup of Pakistan, this practice has not been adopted. In this article, the researcher will use the above quoted terms.

Different models of disability serve as lenses to explain the diverse issues that differently able adolescents face and the coping mechanisms they use to cope with different challenges and opinions of the various strata of society who create and implement those models. With the passage of time, changes in opinions have been noticed and it is evident from literature (Janardhana, Muralidhar, Naidu & Raghevendra, 2015; Shaw & Stol, 2018; Wright, Masten & Narayan, 2015). In this research, keeping in view the limited knowledge of school teachers (especially integrated schools), the focus remains on the "social model of disability" which explains that a "person with disabilities includes those who have long term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on equal basis with others". The model stresses the social aspect of disability faced during social interactions and other barriers that prevent a special person from participating fully in the society (Goering, 2015).

Due to many social and interpersonal barriers, special persons are deprived of their rights of self-assertion as well as identity and personality development, which are prime needs of the adolescent age. Unfortunately, the treatment of special persons remains the same in modern times; the traditional mindset, customs and trends continue to strengthen special persons' victimization in the domain of education, employment, social mobility and physical access (Janardhana et al., 2015). Researchers (Bullock & Zolkoski, 2012; Bullock, Zolkoski & Estes, 2015) have stated that this victimization is more intense for children and adolescents with disabilities because autonomy and self-esteem, which are the natural demands of this age, are denied to them (Steinberg, 2011).

These problems mainly arise due to misconception about disability and persons with disabilities prevailing in the societies (Teferra, 2005; Katsui & Mojtahedi, 2015). They stated that misconception and lack of knowledge

about the natural talent of special persons are coupled with negative attitude towards them. These social attitudes are the major root causes particularly for special children to be hidden away from sight, kept at home and deprived of social mingling. These limitations constitute more serious obstacles than the limitations induced by disability itself (Abna, Maas, Nhaga, Otte & Tchuda, 2013).

It is the prime need of the hour that focus should be shifted to the abilities rather than the disabilities of special persons in order to help them to become differently abled persons. Indeed, the ratio of disable persons is continuously increasing day by day. United Nations Development Program indicates that approximately 650 million people, who constitute 10% of the world population, have one or multiple disabilities and 80% of these Persons with Disabilities (PWDs) are living in developing countries (World Health Organization (WHO), 2014). Old statistics show that the total population of PWDs in Pakistan was 5.035 million. Among this population of disabled persons, the distribution of specific disabilities is as follows; orthopedic disability 19.2%, persons with multiple disabilities 8.3%, visual disability 8.2%, mental retardation 7.6%, hearing impairment 7.5%, and various forms of schizophrenia and allied syndromes 6.4% (Helping Hand for Relief and Development, 2012). Unfortunately, even the census of 2018 does not provide the exact number of PWDs in Pakistan.

Previous research found significant impact of religion on cognition and attitude of people about mental illness and physical disabilities (Etieyibo & Omiegbe, 2016; Goodley, Liddiard & Runswick-Cole, 2018). The common perceptions of Pakistanis about the causes of disabilities are not scientific; many would attribute the cause to misfortune, sins or wrong deeds of the person or his family and the resultant curse from God, or possession by some evil forces (Ahmed, 1995; Alam, 2016).

Therefore, special children experience multiple factors of exclusion and discrimination since their families keep them hidden. Special persons often complain about discrimination they face and the resultant low self-esteem, not because of the intrinsic nature of their disability, but due to rejection, social isolation, prejudice, ignorance and lack of services and support they receive in school life (Lansdown, 2012; Schofield, 2017).

This alarming situation calls for sound steps to eradicate and prevent disability in our country. Literature shows that the cultural and religious context is very important to understand the perception of society about disability as PWDs face multiple social, economic, physical and political, and religious barriers, which hinder their freedom of participation in the society. These barriers lead to stigmatization and misunderstanding of abilities and aspirations of PWDs. Hameed (as cited in Pasha, 2012) has reiterated that inclusive education has been noted as an emerging trend in Pakistan.

It is a well-established fact that despite the challenges and stigmatizing attitude, many children with disabilities survive and lead successful lives (Black & Stone, 2005). This is explained by the 'Resilience Theory', which is linked to a strength-based approach and is described as the ability to bounce back in the face of adversity (Kvalsund & Bele, 2010) by getting proper education. It also deals with strength-based practice, an orientation in social work that focuses on competencies, possibilities and promises of family and communities which are different for every person and also vary in every society (Raffety, 2018).

Resilience as a process constitutes the interplay of multiple resources. These resources are equally distributed between an individual and his social context. Being part of a collectivist society, social support provided by the close social circle constitutes the backbone of resilience (Benard, 2014). Whenever social support for special persons is discussed, groups in their immediate social environment are likely to be more effective in helping them to become confident and well-adjusted in their life. Resilience theory states that protective factors for the resilience of children or adolescents lie within the family, schools and community including peers (Breda & Theron, 2018).

Resilience is explained and studied in the context of a two dimensional construct regarding the exposure of adversity and the positive outcomes of that adversity. In the process of resilience, two kinds of factors are significant. The first are protective factors (which promote resilience) and the second are risk factors (which hinder resilience). These factors operate at both individual and social levels (Diminich & Bonanno, 2013).

Researchers emphasize that resilience is an interactive process between an individual and his environment and also between protective and risk factors. When attention is shifted towards special persons, these factors acquire prime significance in making them confident and motivated towards their rightful position in society (Montgomery, Papadopoulos, Papakonstantinou & Solomou, 2014). This demands an ecological perspective of resilience, so the focus of attention in this particular research paper is the Ecological Model of Resilience presented by Bronfenbrenner in 1979. His ecological perspective focuses on the development of the individual in a system of relationships affected by numerous aspects of the surrounding environment (Bronfenbrenner, 1994; Bronfenbrenner& Morris, 2006).

It explains that intrinsic factors are building blocks that are necessary for resilience; a secure base – the child feels a sense of belonging and security, a sense of self-efficacy – a sense of mastery and control, along with an accurate understanding of personal strengths and limitations and a sense of self-esteem – an internal sense of worth and competence (Singal, 2015; Ttofa, 2017). The extrinsic factors include at least one secure attachment and relationship as well as access to wider supporting factors such as extended family and friends,

school and/or community (Daniel & Wessel, 2002; Gard, Torres, Fuent, Vera, Cabezas & Garci, 2017).

Inclusive educational practices are being endorsed internationally. UNESCO sponsors the 'Education for All' initiative and states that all children, including those with disabilities and other special needs, are entitled to the equity of educational opportunity. Regular schools with this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; but in Pakistan we do not excel in inclusive education mainly because of the lack of proper infrastructure, unprofessional teachers and discriminatory attitudes of teachers and able-bodied persons (Farooq, 2012).

2. Conceptual Framework

Daniel and Wessel presented six domains of resilience, which fulfill the capability of a person to be resilient. These include secure base, education, friendship, talents and interests, positive values and social competence (Daniel & Wessel, 2002; Daniel, 2007). Among all these domains, education is of prime importance for adolescents, which allows them to excel in their academic career and to obtain a sound position in society. Educating children with disabilities is a modern day challenge for the people of the world. Only a small proportion (for example, from 1% to 10%) of children with special needs have ready access to schooling and those who do typically must attend a segregated school. Very few of these children have the opportunity to attend a regular school with their able-bodied peers. For centuries, the setup of segregated schools is working throughout the world but now progress is being made to introduce inclusive education for adolescents with disabilities.

Social support remains the major protective factor for people with disabilities and it acts as the backbone of resilience. It is found in the proximal circle of the individual and the most important resources for support provision for an adolescent with impairment are family, teachers, peers and schools (Weir, 2017). These support factors are considered for both students studying in integrated and segregated schools. Inclusion is facilitated by positive attitude of social groups while their negative attitude hinders it (Freriksen, Laat & Vervloed, 2013).

Literature provides very little information about the personal perception and opinion of adolescents with disabilities about their life. International community has made progress in grasping the experience of people with disabilities. So, this paper is an attempt to grasp the emic perspective of adolescents with disabilities and show how they perceive the process of resilience while studying in two different setups, that is, segregated and integrated setups.

The selection of both integrated and segregated schools for this research allows the researchers to find out the differences in the perceptions of students studying in specific contexts related to school environment and attitudes of teachers and peers.

3. Objective

To identify the differences in the dynamics of resilience among adolescents with disabilities from segregated (special) and integrated (normal) schools.

4. Methodology

The researchers chose qualitative research method for this study for acquiring detailed information regarding the complex phenomenon of resilience. Semi-structured interviews were used as a tool for data collection. Interviews were conducted with the help of interview guide, which was formulated after extensive literature review and with the help of experts. Interpretive Phenomenological Analysis (IPA) was used to achieve a deeper understanding of how adolescents with disabilities think about their experience of resilience and social support and its impact (Smith, Flowers & Larkin, 2009). This qualitative study focused on the emic perspective of adolescents with impairment and intends to facilitate the supportive attitude of parents, teachers and peers to make these adolescents strong enough.

This particular research was divided into two phases on the basis of tasks done in these phases. Phase I comprised the initial requirements of the study which included the preparation of demographic sheet and interview guide for resilience. Their feasibility was also checked. Phase II comprised interviews conducted for the final study. After the completion of interviews, transcription of data and analysis through Interpretive Phenomenological Analysis were performed.

4.1 Sample and Sampling Technique

The sample for this study was selected from the schools of Muzaffarabad. A sample of 13 adolescents with physical and visual impairments (congenital/acquired), of both genders {male (n=5) – female (n=8)}, in the age range (13-17 years) were collected from segregated (n=9) and integrated (n=4) schools. The sample was selected through purposive sampling and also through snowball sampling for adolescents studying in integrated schools.

4.2 Instruments

To collect data for the final study, demographic sheet and semi-structured interview guide were used. Observer observation was used as a parallel technique to increase the validation of the collected data.

4.3 Data Collection

Phenomenological interviewing involved a series of interviews including three interviews with each participant. Following Seidman (2011), the researchers designed a series of three interviews for an in-depth exploration of the various aspects of special adolescents' experiences, especially in the context of their school life (Yin, 2015). Prior to the conduction of interviews for the main study, the researchers obtained the consent of the institution's head where the participants were studying. After getting permission from the relevant authorities, the researchers accessed the participants. Before starting any conversation, the researcher introduced themselves to the participants and also introduced the purpose of the study. The first interview in this study was just an introductory session, serving the purpose of rapport building with the participants. Demographic sheet was also filled in this session.

After a gap of one day, the second session of interviews was conducted. This session concentrated on detailed information about their experiences related to the particular phenomenon. Before starting the interview, the researchers took verbal consent of the participants for the audio recording of their interview. While conducting the interview, the participants were asked open-ended questions related to their experiences. Only relevant questions were asked on the basis of the responses of the participants, interview guide and research objectives. Then the third and final interview was conducted which was a sort of a follow up interview. In this interview, few aspects which demand a more in-depth understanding were explored and the concerns of participants if any were discussed (Seidman, 2011).

After the completion of data collection, the transcription of verbal data into written text was started, followed by data analysis through the Interpretive Phenomenological Analysis (IPA) and the presentation of results. Transcribing previously recorded interviews is a time consuming and potentially tedious work. It normally takes 4 to 6 hours to transcribe a 90 minute interview tape. While transcribing the interviews, the researcher should take care of the contextual information regarding that particular verbatim and the nonverbal responses of the respondent (Seidman, 2006).

4.4 Data Analysis

After the transcription was completed, the next step of data reduction and analysis was started. At this point, the researchers started the IPA of the data (Smith et al., 2009), which is inductive in nature. It not only includes a single step of data analysis but also has the following attributes; (a) development based on what is exceptional to a member and what is shared among them; (b) explanation of the experience which relates to an interpretation of the experience; (c) adherence to understanding the member's perspective; and (d)

psychological focus on individual meaning-making within a specific setting (Smith et al., 2009).

In this type of analysis, the first stage is to develop descriptive comments about the interview transcript and its aim is to report the content of the data. Key phrases, explanations, descriptions, and emotional responses are identified by the researchers while developing descriptive comments. At the next level of analysis, the researchers focus on how the transcript reflects the ways in which content and meaning are presented linguistically and the researchers' notes take the form of linguistic comments. During the third level of analysis, the researchers move into a more interpretive stage of analysis while making conceptual comments and determining the key concepts they feel may be emerging from the analysis of the data.

At this stage, the researchers start to develop insights into the data that would enable them to develop themes in the following phase of analysis. After taking the initial notes about each participant's responses, the researchers search for common emerging themes across all participants by examining discrete sections of the transcripts and simultaneously recalling what they have learned during their analysis up to this point. The themes not only reflect the participants' original words and thoughts but also the researchers' interpretations. In the development of themes, the researchers support each theme by descriptive, linguistic, and conceptual comments made by each of the participants.

IPA as a qualitative technique borrowed from the spectrum of content analysis was utilized in this study. After completing the transcriptions, the initial themes were extracted from every transcript and then the researchers moved towards the classification of similar initial themes under a single major theme. The data was interpreted for this purpose and to authenticate the results, the verbatim of the participants were cited within the interpretation.

In this study, to manage the researcher's biases and knowledge of this phenomenon, they sectioned or put aside their biases and other information of the phenomenon acquired from individual and scholarly sources. This increased the authenticity of the data and restricted the impact of their own perceptions and interpretations of meaning.

5. Results and Discussion

Results cover two major aspects of resilience as recovery and sustainability (Hall, Reich & Zautra, 2010). They are further divided into subthemes, such as recovery is divided into problems faced due to disability, time taken to bounce back and factors which help to bounce back. Similarly, sustainability is divided into active coping, positive emotionality, cognitive appraisal, social connectedness, purpose of life, self-efficacy and sociability. The in-depth analysis led the researchers to find out the reasons for each of these dynamics

of recovery and sustainability in the perspective of adolescents with disabilities.

5.1 Recovery

Recovery is one of the major components of resilience, defined as the healing of wounds after any traumatic event. It is further explored in the form of problems faced due to disability, time taken to bounce back and factors that help in recovery. Problems faced due to disabilities remained the same for both types of adolescents; both of them were of the opinion that due to disabilities they faced physical, functional and attitudinal problems (Breda & Theron, 2018).

"I have to face a lot of problems, I cannot do anything independently, my mother used to do all for me"

"Whenever I go out with my family, there are few people who call me with sarcastic names which I really don't like"

Time taken to bounce back is mentioned from 1 to 6 years, however, the reasons were different for participants from both types of schools. Teachers' support and opportunities for participation arising in their life were the hallmarks of the differences between the two school setups. The participants studying in segregated schools mentioned that they were able to cope effectively and more confidently due to the protective factors in the form of family, teachers and peers (Masten, Narayan & wright, 2013).

"My parents, friends and teachers support me all the way to reach here"

Henderson and Milstein (as cited in Frey, 1998) stated that teachers in schools can motivate and foster the resilience capacities of students by giving them a caring environment and friendly relationships to boost their self-esteem.

"My teachers support me a lot to mix up with people similar to me in school"

Supportive factors in recovery are family and peers for both types of adolescents and teachers are protective factors for those who are studying in segregated schools since their teachers are well trained and professionals. The results are supported by a research conducted by Sheridan (2008) that caring, nurturing and supportive relationships enhance resilience.

Schools are said to be one of the most powerful spaces to capitalize on the resilience of students. The attitudes of teachers and school fellows are the major factors that allow students to feel relaxed in school; clear differences were noticed among participants from both types of schools. Similar findings were reported by Ehsan (2018) that teacher's attitude is the major hindrance in inclusive education setup in Pakistan, since it is not only a means to provide

induction in mainstream schools but also ensures the safe social and psychological environment for students with disabilities.

"Our teachers provide every facility to us to avoid every difficulty coming our way, it motivate us to proceed"

The participants from integrated schools did not have any supportive group in their schools; however, they found these social groups in their rehabilitation centers. Al Mustafa welfare organization as a rehabilitation center is a source of affiliation for those who are studying in integrated schools. However, adolescents from segregated schools experience their institution both as a rehabilitation center and a school because it provides them education as well as participation in daily life activities. The positive role of rehabilitation centers is evident from previous researches as well (Dev & Kumar, 2017).

"Maximum credit goes to Al Mustafa for providing us necessities for better life"

The adolescents who were studying in integrated schools remained the victims of sympathetic and odd behaviors of teachers and able-bodied peers in their school as their teachers were not well-trained (Dev& Kumar, 2017). Personal motivation is another important force to acquire from the face of adversity, particularly for students from segregated schools. Religious factors were reported as prime factors to heal them from the negative effects of adverse events in their lives. Similar findings were presented by Abna et al. (2013) that religious factor is the most important protective factor in adverse situations especially in Muslim communities. As one respondent stated that,

"Pray from Allah Pak relieves me from every difficulty of my life"

"I have a strong belief in God because there is always good will behind every happening because it's God's decision for us"

5.2 Sustainability

Sustainability or purposeful engagement in life was noticeably depicted by their responses. It constitutes active coping, positive emotionality, cognitive reappraisal, social connectedness, purpose in life, self-efficacy and sociability. Perceptions about positive and negative aspects of problems were mixed among these adolescents but the participants from integrated schools were rather repugnant to any problem that came across their way as they were facing too many problems which may be related to home, school or society.

"Difficulties should not come our way as we are already facing too much in our lives"

The participants from segregated schools had a strong sense of social network around them, so they were very positive about facing those problems that came in their way. Almost all participants were using active coping to

reduce the uncertainty of the situation and they were also using the defensive mechanisms of affiliation and self-observation. The environment and support from academic institution made participants from segregated schools more confident and self-reliant (Weir, 2017). They were more inclined towards the mechanism of self-observation and turned towards religion which is an indigenous factor explored through this data, while the participants from integrated schools were more inclined towards affiliation (Farooq, 2012).

"I used to share with my good friends and when they are with me I can solve any problem with their help"

"I always tried my level best to manage problems"

"I used to pray to God whenever I faced any difficulty"

Optimism or positive emotionality was reported by almost all participants but the reason for this behavior is different among participants. The participants from segregated schools were using emotionality for personal satisfaction, happiness and problem solving, whereas for participants from integrated schools social acceptance remained more important than all these aspects.

Positive thinking helps to solve problems. This point had the mix support of participants from both setups. To reframe the negative events, humor and indulgence into any other positive activity was mostly used by participants from integrated schools (Benard, 2014).

"I used humor and listening music to wipe out the my tensions"

On the other hand, the habit of re-experimentation was very prominent in the participants from segregated schools; they wanted to do it again for the sake of positive outcomes. Faith in Allah Almighty to avoid the effects of negative outcomes was an essential element of their responses.

"We re-experiment the thing again for the removal of negative effects and to get positive effects"

"I don't get much tension and leave everything to God and this thing gives me strength"

Social connectedness remains a very significant difference among the two groups of participants; the major reason for connectedness is trust in people around them and the reasons for trust are their encouragement, care, support and unconditional acceptance. The other factor that bridges the connection between participants and their social circle is helping behavior. The participants from integrated schools were not socially connected with people to a large extent because they were considerably reluctant to help others and they were not able to help themselves due to their own disability. They helped only their close ones and the reasons were religious concern, reciprocity and

personal satisfaction. These findings are surprisingly contradictory to the majority findings of previous researches which consider integration as a tool of socialization for persons with disabilities (Zvoleyko, Kalashnikova & Klimenko, 2016).

"How can I help any other? I am disabling by myself. And they all are healthy people so they can do their work better than me"

"I only help those who help me, if only I can then"

On the other hand, the participants from the segregated schools were very helpful and their helpful behavior was shaped by the teaching of their teachers, they all helped each other as everyone in their circle needed help in one way or other. The reason which they reported was empathy and it is a major and most frequently reported reason for helping others and then the consequent reciprocity (Ehsan, 2018).

"I religiously trust on people around me because they are responsible for my success. So we help each other at every step"

Purposeful engagement in life is the major characteristic of resilient individuals, almost all the participants had some goals in their lives and they were striving to fulfill these goals (Cenat & Darison, 2014). The difference comes in the nature of goals; participants from integrated schools had the goal to be healthy or normal so that they could participate fully in everyday life activities. On the contrary, the participants from segregated schools were taking their teachers as role models and wanted to excel in their educational career so that they could secure a sound future.

"The goal of my life is to be like my teacher who takes care and educate children like us"

"I only want to get my life back as it was before this disability"

Among the personal assets of resilient individuals, self-efficacy is the most important and it comes with the flexibility of adaptation to changes and control on their lives (Tansey, Bezyak, kaya & Ditchman, 2016). Discussing the flexibility of adaptation to changes, participants from the integrated schools were not very confident to perceive change as something positive since changing situations and new people caused them difficulty in adjustment. But students from segregated schools were very flexible for change because they took change as an opportunity to explore new things. According to them, admission in their school was a part of change in their life and it gave them new opportunity to excel, meeting new people, and getting their purpose of life in schools which boosted their self-esteem. The difficulty is that the personal qualities of a child with disabilities are not recognized personally and socially, so teachers do not contribute to their development in integrated schools (Ehsan, 2018).

"Our teachers do not have any special concern with us, which they should have; they come to class, give lecture and move out"

Resilient people are supposed to be more inclined towards an internal locus of control. Participants from integrated schools were focused on the external locus of control while participants from segregated schools were focused on an internal locus of control due to their education, positive qualities and overcoming the disability effect due to accessible environment and infrastructure like ramp, white cane, and Braille system of books; all of this made them more confident to take part or have control on their life.

On the initiation of social relationships participants gave mix responses, no prominent difference was found in this perspective. Taking responsibility of their actions is one of the prime characteristics of resilient individuals. Participants from both setups took responsibilities for their actions but the reaction they showed about their results was quite different. The participants from segregated schools had the opinion that they re-experimented to achieve a good result if there was any task. On the contrary, participants from integrated schools dealt with it with both good and bad mood swings. Socialization is one of the most desired characteristics for students with disabilities and its positive impacts are proved by many researches (Zvoleyko et al., 2016).

"I take responsibility of my every action, if it's good then I celebrate, and it it's not good then I try to do it again for better outcomes"

The sense of self-worth was very prominent in participants from segregated schools. But the participants from integrated schools were not sure about their abilities because they were still the victims of attitudinal discrimination of their teachers and fellows in schools and other hindrances in the form of infrastructure and odd societal behaviors. These negative indicators did not allow them to think of any positive aspect of themselves.

7. Conclusions

It is evident from the current study that the resilience of adolescents with disabilities is affected by intrinsic as well as extrinsic factors highlighted by the Ecological Model of Bronfenbrenner (1994). The support of social groups acts as the backbone of the process of resilience, gives them a sense of self-confidence, encouragement, happiness and sense of self-worth. Change is inevitable with regard to social stigmatization if we welcome the western concept of inclusion in our culture. Firstly, we have to remove the blockades of our odd social attitudes and provide open and equal floor of opportunities to adolescents with disabilities the same way as for normal adolescents, then we will have the right to raise our voice about their capabilities and disabilities.

8. Implications of Study

This study will help in the intervention programs particularly with respect to inclusive education in the Pakistan. Removing the barriers faced by adolescents with disabilities in integrated schools only makes it possible to be successful in inclusive education and in the long run inclusive society for all. It is also hoped that parents, teachers and students can benefit from this study by developing the right understanding of the depth and extent of abilities and strengths of adolescents with disabilities. The study intends to raise their expectations and their expectations would motivate these students with disabilities.

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