



An Investigation into Male Student's self-concept and Anxiety with Specific Disabilities in Learning and Comparing them with Ordinary 3rd and 4th Grade Students at Primary Schools in Tehran in Academic year 2012-13

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PREFACE

Kids are more vulnerable among different segments of the society, because they are comprehensively dependent on the family and have not reached an age that they would be able to experience an independent life and do not know any other world except games, entertainment and education. Meanwhile, there are perhaps kids who are not able to spend their childhood as their ordinary peers because of mental and physical disability and are faced with special and specific difficulties (Shaywitz, Morris, 2008). Although most of these kids spend time with their ordinary peers and study along with them because of not paying attention to their special condition and the lack of its recognition, despite this fact, they can never be good rivals for their classmates. Among kids with specific difficulties, kids with specific learning disabilities spend more time with ordinary kids because they are similar to their ordinary peers in terms of everything (intellectual, physical, developmental). It means that they have poor educational performance (Ahmad Aei, 2011). Learning disability is a general expression involving a heterogeneous group of learning difficulties which reflects in various forms like basic difficulties in listening, speaking, reading, writing, reasoning or mathematical abilities (Seyf naraghi and Naderi, 2012, A). specific disabilities in learning expression was first introduced by Krik in 1962 (Afrooz, 2009); and its main characteristic in the kid or teenager is the lack of academic progress in the field of reading, written expression or mathematic in comparison with the kid's general intelligence ability. It is often difficult for these kids to keep up with their peers concerning some matters. Specific disabilities in learning cause the kid's progress to be less than what is expectable based on potential power and educational opportunities (Sadock, translated by Rezaee, 2008). Students with specific disabilities experience constant failures in learning because there is a remarkable difference observed between these kids' learning process and academic progress; it means that according to the conducted intellectual tests, it is expected that the student would manage to cope with studying and doing their homework, but their scores suggests another fact (Ashouri, 2012). Regarding the difficulties these kids experience at school and in the family environment, it could be easily guessed that they would be face with more behavioral and emotional problems compared to their peers (Halahan and colleagues, translated by Alizadeh and colleagues, 2011). Students with specific disabilities in learning feel disappointed towards their studying abilities and they hardly ever grow motivation and the motivations which could be seen in them carries an external aspect rather than internal. They cannot approve that if they show more effort, they will achieve more success and instead of that, they try to ascribe their failures to their abilities (Halahan and Coffman, translated by Javadian, 2007). In addition, these students perceive themselves mostly with negative statements compared to normal students because of their constant academic failures and socially tend more to consider themselves to be incompetence and unacceptable (Halahan and colleagues, translated by Alizadeh and colleagues, 2011). These students may not be accepted by their peers because of their behavioral and academic difficulties and this faces them with the danger of negative self-concept (Pijl, 2010). Self-concept is individual's mental representation of their own that is made of experiences and thinking about these experiences. Kids gradually transform different kinds of specific experiences into

general games from themselves (Rio, 2011). Kids with specific disabilities in learning often lack appropriate experiences such as acceptance, confirmation and admiration by school administrator and especially teachers; and they are not often favored by their friends, teachers and the family; their inabilities in doing homework and studying cause them to be counted as lazy or weak people (Ahmad Aei, 2011). Anxiety is also one their most widespread difficulties which is very influential in their individual and social life (Bateson, 2011). Anxiety is a common response to the tense stimulus and is a pervasive, unpleasant and subtle disquiet which is often accompanied by automatic symptoms such as headache, sweating, heartbeat and stomachache (Sadock and Sadock, translated by Rezaei, 2008). Kids with specific disabilities in learning develop anxiety and fear by reason of learning disabilities in the subjects such as science, math and reading and writing and this feeling causes them to lose their concentration; consequently, they do not learn the lesson; in fact, a cycle of fear and anxiety forms in the kid's mind which reduces his/her mental abilities and skills and so he/she is frightened of school and lessons (Salahshour, 2011). It is continually observed that parents and teachers have heaped threats, punishments, scorns and denials on them because of their constant academic failures and lack of timely recognition of their inability that this issue itself provokes their behavioral and emotional problems such as negative self-concept and inclusive anxiety. Therefore, specific disabilities in learning follow poor self-concept, disquiet and anxiety. The percentage of these students is high and unfortunately in the majority of the cases is suspected of being less intelligent, less talented and lazy. Such difficulties not only leads to an academic deterioration and family and country's economic loss but most of the time has led the student to be scorned, punished and threatened more because of parents and teachers' lack of proper, accurate awareness; this could cause them to grow the unpleasant sense of poor self-concept and low self-esteem in their pure spirit and even consolidate this weak self-concept, anxiety and disquiet (Ahmad Aei, 2011). If these kids are not constantly supported because of their problems and school administrators and the family cannot establish a helpful and constructive relationship with them, they will undoubtedly lose their self-confidence and have their difficulties increased (Afrouz, 2009). Therefore, the progress of science and awareness in order to quickly identify kids' behavioral and emotional difficulties who suffer from specific disabilities in learning is a necessary action so that trainers, school administrators and parents would be able to take steps so as to educate and raise them as preferable as possible in an environment free of stress and tension. Having the knowledge of mentioned matters not only control these kids' behavioral and emotional difficulties but improve their self-concept, otherwise in addition to having the educational expenses wasted, the kid's educational outcome will decrease and will have bad influences and dire consequences for the family and society. Considering the texts of the research, the main hypothesis of this research is that whether there is a difference between male students with specific disabilities in learning and ordinary students.

Research method

Regarding the nature of the subject, this research is of practical kind and its conducting method is Field Research.

Statistical population

Statistical population of the present study is comprised of male students with specific disabilities in learning and 3rd and 4th grade ordinary students at primary schools in Tehran. According to the presented statistics by related organizations, there are 188000 male students studying on 3rd and 4th grade at primary schools in Tehran and that at least 1 percentage of them suffer from specific disabilities in learning (1880) who are studying along with ordinary students (a brief statistics on educational and administrative factors in different educational terms in the 19 districts of Tehran, the department of project and program, 2011-12).

Sample, sample size and sampling method

Regarding the expansion of statistical population of the present study and with regard to the consideration of the number of samples in the last three researches in the field of kids with specific disabilities in learning and estimating their averages, the statistical sample of the present study involves 60 people of the 3rd and 4th primary students in Tehran that 30 ones of them with specific disabilities in learning and 30 other ones are ordinary students; so 15 students with specific disabilities in learning and 15 ordinary students from each grade fill out these questionnaires. The sampling method of the present research is conducted using the available method from 3rd and 4th grade primary students at Farhikhtegan Pouya private schools and Avicenna state school. Schools consultants and teachers were asked for help in order to select students with specific disabilities in learning in this study.

Data gathering tool and method:

A questionnaire was used in order to gather data from the targeted population. The questionnaires of this research are: A) Kid's self-concept scale B) Kid's anxiety list (Silverman).

Kid's self-concept scale

The present scale has been prepared using the well-known Piers-Harris's Kid's self-concept scale (1969). This test includes 80 questions whose answers are yes or no. This scale consists of 14 lie detector questions and is a pencil-paper verbal test which has been applied successfully to the third to twelfth grades. This scale which is aimed at helping clinical interpretations involves six alternative scales of self-concept that are considered to be important in the kid and adolescent's psychology and they are: behavior, academic and mental status, physical appearance and attitudes, anxiety, fame, happiness and satisfaction. A point is assigned to each yes or no response. The total score is obtained by adding up the scores of 6 domains. The highest score for the self-concept scale is 80 the lowest is zero. The reliability of the test by Bauz-test method is 0.88 and has been reported 0.79 by the split-half method.

Kid's anxiety list

This list was made by Silverman and colleagues (1995) and is a semi-structured anxiety interview which is proposed to evaluate kids' anxiety in 11 domains. These domains are: school, classmate, war and natural disasters, financial status, health, bad events, future accidents, appearance, family and other anxieties which have not been put on the previous levels. Veymz and colleagues (1997) and Siverman and colleagues (1995) have reported internal validity between 0.60 and 0.95 for each of the suggested anxieties and upper than 0.96 for all of the anxiety levels. In addition, its reliability equals 0.75 obtained by retest method for the total number of anxieties and 0.78 for the total number of anxiety domains; its intensity, abundance and frequency are asked to them for each of the reported anxieties by the kid.

Data analysis method

In this research, the t-test for independent groups has been used by applying SPSS software.

RESULTS

Table 1: The comparison between self-concept and its subscales

Components \ Statistical index	The value of t	Freedom degree	Significance level
Behavior	2.594	52	0.012
Mental and academic status	5.076	52	0.000.
Physical appearance and attitudes	2.395	51	0.020
Anxiety	2.502	21	0.021
Fame	2.539	21	0.019
Happiness and satisfaction	0.896	21	0.381
Self-concept (total)	0.607	14	0.554

According to the findings obtained from the research that is presented in the table above and regarding the independent t-statistic, the average of self-concept in these subscales: behavior ($t= 2.59$, $sig= 0.12$), mental and academic status ($t= 5.076$, $sig= 0.001$), physical appearance and attitudes ($t= 2.39$, $sig= 0.02$), anxiety ($t= 2.50$, $sig= 0.21$) and fame ($t= 2.53$, $sig= 0.019$) in kids with specific disabilities in learning is different from normal kids. Regarding the measured value of t which is more than 1.96 and the researcher's fallible level is less than 0.05 in the mentioned components, then the value of t is significant, whereas there is no significant difference in the other dimensions of self-concept and its total point among these two groups. Thus, it could be judged this way that there is a significant difference observed in some of the self-concepts components between kids with specific learning disabilities and normal kids; as a result, the null assumption suggesting the lack of difference is rejected and the research hypothesis suggesting that there is a difference in some of the self-concept dimensions between normal kids and kids with specific learning disabilities is confirmed. These findings are in consistent with the results obtained from the studies by Komeijani (2008), Pijeal (2010), Wagner and Newman (2010) and Kingston (2013). According to the previous researches, in order to illustrate these findings, it could be said it is clear that constant academic failures and the lack of timely recognition of these kids' inability and threats, punishments and contempt from parents and especially teachers compounds these students' negative self-concept. Teachers and school administrators usually count these kids as intellectually disabled ones by the reason of the lack of sufficient awareness, while if parents and school administrators matter this issue, most of these problems will be possible to be controlled and even eradicated by funding and spending time slightly and the least damage to these kids (Wagner and Newman, 2000). During studying especially at primary school, the kid's approval and admiration who is suffering from learning specific disability by

school administrators especially teachers is more influential than the role of parents in boosting self-concept. Caring and knowledgeable teachers can have a remarkable influence on these kids' academic progress and self-concept improvement by paying attention to their slight developments and highlighting their strengths when dealing with them. Therefore, being aware of these kids' problems is essential and it would not be exaggerating if said that teachers determine students' mental and health condition (Salahshour, 2011).

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