

**ROLE OF LOCUS OF CONTROL, SELF ESTEEM AND PERCEIVED SOCIAL  
SUPPORT IN THE PSYCHOLOGICAL ADJUSTMENT OF ADOLESCENTS WITH  
AND WITHOUT DISABILITIES**

By

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for the degree of

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## **ABSTRACT**

Adolescence is a time period generally associated with the pressures of identity formation – a factor that increases the vulnerability to life stressors. According to the risk – resistance facets of adjustment derived from the Disability - Stress - Coping model (Wallander & Varni, 1989) and the Transactional Coping and Stress model (Thompson, Gustafson, Hamlett & Spock, 1992a, 1992b), different psychosocial elements can be held responsible for issues occurring along the adjustment – maladjustment continuum. The present study extended the existing knowledge and tested predictions based on locus of control of reinforcement, self esteem and perceived social support for the criterion of psychological adjustment. It was assumed that there would be a difference in the level of psychological adjustment for adolescents with and without disabilities and that there would be a difference in the level of psychological adjustment between adolescents with sensory and physical disabilities. Furthermore, the proposed model including three psychosocial variables was tested by assuming that locus of control, self esteem and perceived social support will predict psychological adjustment. The three predictive variables were tested separately by assuming that there would be a significant difference in the levels of internality – externality of the locus of control, the levels of self esteem and the levels of perceived social support between adolescents with and without disabilities. Finally, gender differences were observed by assuming that male adolescents with disabilities would show greater levels of psychological adjustment as compared to female adolescents with disabilities. These comparisons were drawn in the largely student based adolescent sample of the 100 disabled (40 blind, 34 deaf and 26 physically

disabled) and 100 nondisabled sample population. Participants completed the demographic information form along with four self report measures. Both hypotheses testing differences in psychological adjustment in the sample of adolescents with and without disabilities were rejected as the differences were insignificant. All explanatory variables in the proposed model for the research were found to be significant resulting in the acceptance of the hypothesis describing the theoretical model. A significant difference was observed in the levels of internality – externality of control and self esteem where adolescents with disabilities were found to have greater levels of internality as well as self esteem as compared to the sample of adolescents without disabilities. However, no difference was observed for the levels of social support as perceived by adolescents with and without disabilities. Gender differences received strong support from the results as male adolescents with disabilities were found to rank higher on levels of psychological adjustment as compared to female adolescents with disabilities. The study has implications on a theoretical level for researchers in the field within the boundaries of the risk – resistance factors as new findings emerge regarding the psychological dynamics of the Karachi based adolescent population both with and without disabilities. Additionally, there are clinical and national policy level implications for preventive strategies to be employed for the better emotional adjustment of the adolescent population.