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The Impact of Self Perception on the Personality Development of Persons with Visual Impairment in Fako Division of South West Region, Cameroon

Nsagha Sarah Mboshi
University of Buea, Cameroon

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ABSTRACT

Perceived as an overwhelming tragedy, severe visual impairment relegated its victims to lives of hopelessness, questionable behaviour and dependence. In most cultures of the ancient world, blind people were either revered as having mystical powers or reviled as beggars and misfits. In ancient Israel, blind men were tellers of sacred stories. This study was aimed at investigating "The Impact of Visual Impairment on the Personality Development of Persons with Visual Impairment in Fako Division". Three research objectives guided the study which were: to find out the effect of congenital blindness on the personality development of persons with visual impairment, to investigate the effect of adventitious blindness on the personality development of persons with visual impairment, and to examine the effect of low vision on the personality development of persons with visual impairment. A descriptive Survey research design was adopted in this study. The purposive sampling technique was used to get the sample for the study. 18 persons with visual impairment formed the sample of the study. The instrument for data collection was the Questionnaire and was validated by some classmates and lecturers of the field of Special Education, and the supervisor of the study. The data was analyzed using descriptive statistics. The findings showed that: congenital blindness affects the personality development of persons with visual impairment with an average mean of 2.6, adventitious blindness affects the personality development of persons with visual impairment with an average mean of 2.8 and finally, low vision affects the personality development of persons with visual impairment with an average mean of 2.9 in the Fako Division. The study suggested that the government should reinforce laws binding families, communities and the society at large so as to do away with prejudice and stereotypes which affects personality development. Aid should be given to special centres by providing necessary equipment's to facilitates their training so as to make them confident and reduce low self-esteem in persons with visual impairments.

Corresponding Author:
Nsagha Sarah Mboshi

KEYWORDS: Self Perception, Personality. Development, Visual Impairment, congenital blindness, adventitious blindness, low vision.

INTRODUCTION

Understanding the stereotype mind-set on how many human beings and different institutions view disability, people with disabilities adopt various mechanisms to safeguard their self-concept or self-esteem. Some attempt to preserve their self-esteem by identifying with "people without disabilities", while others group themselves to form new organizations in order to combat negative stereotypes by creating positive images, developing self-empowerment, and bringing about social change (Watson, 1998). Others may adopt the stigma of disability, which may lower their self-esteem or can avoid friendships with more 'able' people for reasons connected with self-esteem maintenance.

There are many types of disabilities in which visual impairment is one. Silberman (1998) sees visual impairment as a range of visual losses that require adaptations for learning in a variety of environments. It includes blindness as well as other degrees of visual impairment. In his perspective, the term visual impairment covers a spectrum of deficits affecting the sense of vision. Persons with visual impairment in every society are people with vision loss that constitute significant limitations to visual capabilities, resulting from diseases, trauma or a congenital or degenerative condition that cannot be corrected by conventional means (Arditi and Rosenthal, 1998).

Meanwhile, Personality refers to differences in behaviours among individuals that are consistent over time or contexts

(Réale and Dingemanse, 2010). In addition, Personality development is the development of the organized pattern of behaviours and attitudes that make a person distinctive (Real et al. 2010).

LITERATURE REVIEW

Being in a world suited for the sighted means there will be multiple normal mishaps. Lack of accessibility for the visually impaired is a central to a number of the issues the blind or low visual individuals face (Nyman, Gosney and Victor, 2012). There is limited number of inclusive/accessible activities for visual impaired, which are as simple as museum visit. Moreover, accessible books are not abundant either.

Children with visual impairment rarely express independence, self-advocacy and self-direction skills in their behaviour (Agran, Hong and Blankenship, 2007; Runjić, BilićPrcić and Alimović, 2015). Visual impairment, inadequate attitude of parents, teachers, and peers toward a blind or low vision child have a negative influence on the sense of security and self-assessment of the ability to make everyday decisions independently (Anđelković, Vučinić, Jablan, and Eškirović, 2012; Bardin and Lewis, 2008; Lieberman and Robinson, 2004). Many authors agree that young people with visual impairment are more dependent on others; they are submissive and have lower self-esteem compared to their typically developing peers (Head, 1992).Young people with visual impairment are not greatly interested in setting and achieving career goals (education and choice of profession) (Pfeiffer and Pinquart, 2012). Numerous studies have determined that people who lose vision during their life are faced with lower self-confidence and self-respect, loss of personal security, and changes in interpersonal relations that is self-withdrawal (Cherry, Keller and Dudley, 1991).

In terms of time, blindness is categorized into two: congenital blindness and adventitious blindness (Moore, Graves, and Patterson 1997; Hupp, 2003). However, Hartsock (2008) believes that there are three kinds of blindness: congenital blindness, blindness in old age, and adventitious blindness but, Getzel and Mellor (1985) believed that blindness in old age is adventitious. Moreover, congenital blindness refers to a condition of blindness that was already present at birth or occurs at an early age. However, individuals who at one time were sighted but subsequently lost their vision are described as having an adventitious blindness (Kitchin and Freundschuh, 2000; Sen, 1988; Holbrook and Koenig, 2000; Moore, Graves, and Patterson, 1997; Hupp, 2003). In addition, adventitious blindness refers to an individual who becomes blind after five years of age, meaning individuals with this type of blindness will probably have some visual memory and can use visualization (Sardegna, Shelly, Rutzen, and Steidl, 2002). In general, congenital blindness refers to an individual who was born without useable vision while adventitious blindness is the terminology used to refer to vision loss after years of sight all of which have varied consequences on the individual (Turner, 2005).

On the other hand, low vision means the inability to read newsprint even with best correction (when wearing conventional eyeglasses or contact lenses) (Maino, 1993). Functionally, low vision refers to a loss of vision that may be severe enough to hinder an individual's ability to complete daily activities such as reading, cooking, or walking outside safely, while retaining some degree of useable vision (Nsagha, 2019). Low vision is decreased visual performance that prevents performance to full capacity compared with a typically sighted person of the same age and gender. It may be a consequence of reduced acuity, abnormal visual field, reduced contrast sensitivity, or other ocular dysfunction (Faye, 1984).

According to Hupp (2003), congenital blindness refers to loss of vision at birth. People who are blind from birth have different set of challenges. Congenitally blind individuals lack a visual reference for social contact. Many have delayed social skills; develop involuntary physical movements or "blindisms", and many lack skills to explore their surroundings adequately. Leonhardt (1990) states in his study of blind children that blindisms or mannerisms, can include staring, eye poking or rubbing, pulling on the eyelids, gazing at lights or other bright objects, holding the head low, bent walk, abnormal walk/shuffle, and seeking out narrow or small spaces. All of these behaviours in small children with a visual impairment can be transient or develop to become permanent socializing behaviours. This can and does affect the child's social interaction with others.

Similarly, Parke, Shallcross, and Andersen (1980) found that blind children used head nods appropriately in conversation, although the children produced those nods in a narrower range of circumstances than did sighted children. In a study of even younger blind children, Urwin (1979) reported that none of her three blind participants produced request gestures or communicative points during the preverbal period. However, there was some suggestion that the blind children did use other types of gestures in their attempts to communicate. Although Urwin's (1979) children failed to point, they did make use of "sophisticated forms of body play" to attract the attention of their caregivers. More recently, Preisler (1993) confirmed findings previously reported by Dunlea (1989) and Urwin indicating that blind children made use of repeated body movements to request the continuation of an activity, and that the first symbolic, communicative acts produced by blind infants were expressed by body or hand and arm movements related to a certain action (like: bathing).

However, several studies reported the superior performance of persons with late-onset blindness compared to persons who are congenitally blind, suggesting that prior visual experience is also critical for the development of spatial cognition

(Fortin, Voss, Rainville, Lassonde, and Lepore, 2006). Losing one's vision is described as a type of death, a process in which one becomes a different person and adjustment to that loss becomes a task of intimal reorganization or a rebirth (Cholden, 1954). Visual loss causes a constraint in the variety and depth of cognitive experiences. Without sight, a person is deprived of feedback and the available semantic nonverbal and contextual cues of the situation. Lip reading is impossible, as is the recognition and interpretation of non - verbal cues, for example, facial expressions and gestures. There is a loss of certainty in the location and recognition of who is speaking, especially in a group. The person who is blind may lack his/her former ability to judge the meaning of silences in the conversation; is it his/her turn to speak? Are the others leaving or sharing a private joke? Many people who are blind develop a 'broadcast' voice (Cutsforth, 1951) in order to be sure to address a listener.

Acceptance of loss is a process of value changes (Dembo, Leviton, and Wright, 1975; as cited in Carl, Roland, Breshears, Gaona, Hogan, Burton and Leuthardt, 2013). Hence, the absence of ability to unconditionally accept oneself can lead to a variety of emotional difficulties, including uncontrolled anger and depression (Carson and Langer, 2006). People with adventitious blindness, especially those with severe physical impairments, are likely to experience severe psychological trauma from both the personal loss and the changes from their former state. Consequently, people with adventitious blindness may require greater effort and more time to adjust than those with congenital disabilities (Li and Moore, 1998). Of the five senses that human beings possess, sight has always been considered the most important. It has long been acknowledged that vision loss may bring about varying degrees of psychic suffering, undoubtedly greater than the distress resulting from other forms of sensorial impairment, at all ages (De Leo, Hickey, Meneghel, and Cantor, 1999).

Research on psychosocial adjustment has incorporated a variety of questions ranging from the impact of progressive or immediate visual loss, anxiety, the inability to work, avoidance and bullying to the role of support networks such as friends, families and charities. Morse (1983) reviewed several studies on the psychosocial adjustment of children with low-vision. He concluded that children with low-vision tend to be more unsettled by the limits of their vision, when compared to those whose handicaps are more severe. In addition, parents of children with low-vision seem to be less understanding of the disability than those of blind children (Bateman, 1962). Peadboy and Birch (1967) who found that children with low-vision tend to exhibit with more frequency underachieving behaviours and fatigue and are more prone to emotional problems echoed these results.

Rosenblum (2000) found that although many teenagers had negative feelings about their visual impairment, the extent of this negativity varied among individuals with some deliberately hiding their visual impairment while others expressing unhappiness but understanding it as a part of life. A study by Huurre, et al., (1999) on the social support and self-esteem among Finnish adolescents with visual impairments found similar results. In addition, Griffin-Shirley and Nes (2005) found no significant differences in the level of self-esteem and empathy between sighted and visually impaired preadolescents. These authors argue that the family may relate the lack of difference to recent trends in education and inclusion as well as greater awareness of the disability. Sacks (1996) observe that in many cases low-vision devices can be used to help individuals use their functional vision and enhance their self-esteem. He notes however, that these should be carefully instituted as they are highly conspicuous and may draw unnecessary attention to the individual.

Regarding Rogers, everyone strives to obtain an ideal self. Additionally, Rogers theorized that psychologically healthy individuals actively move away from roles shaped by others' prospects, and instead look within themselves for justification. Conversely, neurotic individuals have self-concepts that do not match their skills. These individuals are afraid to receive their experiences as valid, so they distort them, either to protect themselves or to win approval from others (Aronson, Wilson, & Akert, 2007). Based on the self-categorization theory that proposed by Turner, the self-concept consists of at least two levels which include a personal identity and a social one. In other words, one's self-evaluation depend on self-perceptions and how others distinguish them. The self-concept can replacement rapidly between the personal and social individuality (Guimond, Chatard, Martinot, Crisp, & Redersdorff, 2006). In this regard, children and youths begin participating social identity into their self-concept in elementary school by measuring their situation among peers (Trautwein, Lüdtke, Marsh, & Nagy, 2009).

METHODS AND PROCEDURES

The research design adopted for this study was the descriptive survey research design, in which a large population is studied by collecting and analysing information only from the sample of the population considered to be representative of the whole and in turn generalizing the results obtained on the entire population. Hence, the researcher used a descriptive survey because of the quantitative nature of the study, and because data was collected from a sample, using a questionnaire for the purpose of identifying and describing the population represented by the sample at that particular time.

The population was made up of all persons with visual impairment in the Fako Division, Southwest Region of Cameroon. The sample was made up of 18 persons with visual impairment in Fako Division who purposive selected from three sub Divisions in Fako Division. The accessible and sample population was chosen purposefully since the

researcher's focus is on the personality development of persons with visual impairment. Buea, Limbe and Tiko were selected because it hosts the majority of persons with visual impairment in Fako Division. Only persons with visual impairment who are between adolescent and adulthood were selected for the study. This is because the researcher was looking for factual information that better answered the research questions under investigation and also the researcher believes that only persons with visual impairment above the mentioned age range provided the information needed on personality development since they have experienced more challenges that persons with visual impairment face and know the impact it has on them.

The instrument used was a self-constructed questionnaire which was one visual impairment and their personality development.It was designed based on the objectives of the study using a Likert scale (Strongly Agree, Agree, Disagree, Strongly Disagree) and the various indicators deduced from the dependent and independent variables. In order to accelerate the administration and detailed analysis, the questionnaires had both structured and unstructured items, which were composed, of all the variables the study was aimed at investigating and was divided into two sections.

RELIABILITY OF INSTRUMENT

Table 1: Reliability Statistics

Sections	**Cronbach's Alpha**
Congenital Blindness	0.69
Adventitious Blindness	0.76
Low Vision	0.64
AVM	**0.70**

A pilot study was carried out on 5 persons with visual impairment in Muyuka which was not considered as part of the sample population. The scores obtained were used to calculate the reliability coefficient using Alpha Cronbach. The Reliability Coefficient calculated in the average was 0.70 which was considered reliable for the study.

METHOD OF DATA ANALYSIS

The study used descriptive statistics. The qualitative data was analysed thematically with the aid of themes, groundings and quotations. The themes were the key words or umbrella terms, which emerged from the respondents' direct statements of which similar statements were grouped together. Groundings on the other hand were used to indicate the number of times a particular theme emanate from the direct responses of the respondents. In analysis of qualitative data, the concepts/themes were considered more important than the groundings. This therefore implies that a concept that emerged more than once was considered of equal value like any other concept(s) that emerged just once.

PRESENTATION OF FINDINGS

Table 2: To what extent does Congenital Blindness affect Personality Development?

S/N	**Items**	**SA**	**%**	**A**	**%**	**D**	**%**	**SD**	**%**	**M**	**DL**
1.	I communicate with people around me freely	2	33.3	4	66.7	0	0	0	0	3.3	A
2.	I always participate in conversations at home	2	33.3	4	66.7	0	0	0		3.3	A
3.	I belong to social groups and actively participate in them (Churches, Schools/Job site and cultural meetings)	1	16.7	2	33.3	3	50	0	0	2.2	R
4.	As a person with Visual Impairment I know my legal rights and privileges and I stand up for it	3	50	3	50	0	0	0	0	3.5	A
5.	I get very irritated and angry when I am not respected	1	16.7	1	16.7	2	33.3	2	33.3	2.2	R
6.	I can use my white cane on someone if that person takes me for granted	1	16.7	1	16.7	2	33.3	2	33.3	2.2	R

7.	I do not take risk for any reason because I feel insecure	0	0	2	33.3	3	50	1	16.7	2.2	R
8.	I love being alone, far from people	3	50	2	33.3	0	0	1	16.7	3.2	A
9.	I feel isolated by my family	0	0	1	16.7	2	33.3	3	50	1.8	R
10.	I always control myself when I get very angry	0	0	3	50	1	16.7	2	33.3	2.2	R
11.	I don't feel aroused when beside an opposite sex	0	0	0	0	4	66.7	2	33.3	1.7	R
12.	I know all the parts and functions of the body of an opposite sex	2	33.3	2	33.3	1	16.7	1	16.7	2.8	A
13.	I don't feel secured besides strangers	0	0	3	50	3	50	0	0	2.5	A
14.	I perform my daily living skills by myself	3	50	3	50	0	0	0	0	3.5	A
Total		**18**	**300**	**31**	**516.7**	**21**	**350**	**14**	**233.3**	**36.6**	**A**
Average										**2.6**	**A**

Total analysis of question one with respect to each items, as shown on table one reveals that, 18 (300%) strongly agreed, 31 (516.7%) agreed to question one. However, 21 (350%) disagreed and 14 (233.3%) strongly disagreed to question one giving a mean score of 36.6 giving an average mean score of 2.6. Summarily, the average mean score for question one of 2.6 shows that congenital blindness affects personality development.

Table 3: To what extent does Adventitious Blindness affects Personality Development?

S/N	Items	SA	%	A	%	D	%	SD	%	M	DL
1	I have friends I communicate with always	3	50	3	50	0	0	0	0	3.5	A
2	I hold positions in social groups (Church, School/Job site, Cultural meetings)	0	0	3	50	3	50	0	0	2.5	A
3	I talk a lot when people refuse to get my point	3	50	0	0	3	50	0	0	3	A
4	I prefer to stay quiet than argue with people	3	50	3	50	0	0	0	0	3.5	A
5	I always stand for my legal rights no matter what happens	3	50	3	50	0	0	0	0	3.5	A
6	I regret and feel bad for haven lost my sight	0	0	3	50	3	50	0	0	2.5	A
7	It is only when I talk that my presence is recognised	0	0	4	66.7	2	33.3	0	0	2.7	A
8	I prefer being indoors than visiting because the environment is not disability friendly	0	0	4	66.7	0	0	2	33.3	3	A
9	I have problems with movement and coordination because of my condition	0	0	0	0	3	50	3	50	1.5	R
10	Even with this condition I feel confident that I can become whatever I wish to be	3	50	0	0	0	0	3	50	2.5	A
11	I am always happy no matter what people do and say about me	3	50	0	0	3	50	0	0	3	A
12	I feel loved by my family because they sacrifice for me	0	0	6	100	0	0	0	0	3	A
13	Most often I feel I am less useful to my family and the society because of my condition	3	50	0	0	0	0	3	50	2.5	A
14	I afford most of my basic needs myself	3	50	0	0	3	50	0	0	3	A
Total		**24**	**400**	**29**	**483.4**	**20**	**333.3**	**11**	**183.3**	**39.7**	**A**
Average										**2.8**	**A**

Total analysis of question 2 with respect to each item, as shown on table 2 reveals that 24 (400%) strongly agreed, 29 (483.4%) agreed to question 2. However, 20 (333.3%) disagreed and 11 (183.3%) strongly disagreed to question 2, giving a mean score of 39.7, an average mean score of 2.8. Summarily the average mean score for question two is 2.8 which shows that adventitious blindness affects personality development.

Table 4: To what extent does Low Vision Affects Personality Development?

S/N	Items	SA	%	A	%	SD	%	D	%	M	DL
1.	I belong to more than two social groups (churches, Schools/Job sites and Cultural Meetings)	3	50	3	50	0	0	0	0	3.5	A
2.	I believe in myself so I take risk	1	16.6	4	66.7	1	16.7	0	0	3	A
3.	I do not talk anyhow because I do not love interfering in people's issues	1	16.7	0	0	2	33.3	3	50	1.8	R
4.	I fight for my legal rights and the rights of others since I see a bit	2	33.3	2	33.3	0	0	2	33.3	2.7	A
5.	I am always quiet because I do not feel free participating in conversations	2	33.3	3	50	0	0	1	16.7	3	A
6.	I feel my friends are succeeding better than me because of my condition	3	50	2	33.3	1	16.7	0	0	3.3	A
7.	I do not feel I can accomplish my goals in life because of my impairment	5	83.3	0	0	0	0	1	16.7	3.5	A
8.	I afford most of my basic needs by myself	1	16.7	2	33.3	0	0	3	50	1.8	R
9.	I have friends whom I can trust sometimes	2	33.3	3	50	1	16.7	0	0	3.2	A
10.	I have a partner, who am trusting God to get married to when the right time comes	2	33.3	2	33.3	2	33.3	0	0	3	A
Total		**22**	**366.5**	**21**	**649.6**	**7**	**116,7**	**10**	**166.7**	**28.8**	**A**
Average										**2.9**	**A**

Total analysis of question 3 with respect to each item, as shown on table 3 reveals that, 22 (366.5%) strongly agreed, 21 (649.6%) agreed to question 3. However, 7 (116.7%) disagreed and 10 (166.7%) strongly disagreed to question 3 giving a mean score of 28.8, giving an average mean score of 2.9. Summarily, the average mean score for question three of 2.9 shows that low vision affects personality development.

OPEN ENDED QUESTIONS

What are some of the problems you face that affects the development of your personality? They said "they face difficulty in reading due to blurred images especially letters, itchy eyes and headaches, difficulty getting Braille materials and white canes, poor mastery of the environment making movement difficult, they lack sponsors to finance schooling and a friendly environment". They said "society has a negative mind-set towards them hindering interaction with "normal" people, difficulty finding love ones (partners), they emphasised on the fact that society doesn't understand sign language of persons with visual impairment especially when using the white cane, difficulties getting a job, walking alone and not being able to afford the white cane". They also said "people/society look low on them, making them feel inferior like outcast and they suffer from stigmatization and low self-esteem"

What are some of the possible solutions to these problems that you face that affects your personality? The Society's mind-set should be reoriented towards persons with visual impairment and the Society should be sensitized about assisting the persons with persons with visual impairment, the language of the white cane should be included in the curriculum of Driving Schools, the government should provide information in Braille for persons with visual impairment and the prices of the materials they need should be subsidised, and some materials on infrastructures should be adapted and let it be made user friendly to persons with visual impairment. The society should embrace everybody as one irrespective of their disability status, love should be exercised to everybody, and the government should also implement the laws governing persons with disabilities. They (persons with visual impairment) should take their medication regularly, consultation should be done when headaches and eye itching persists, and corrective glasses should be bought to help solve some of their problems.

DISCUSSION OF FINDINGS

Congenital blindness and the personality development of persons with visual impairment

Findings revealed that congenital blindness has an effect on the personality development of persons with visual impairment. This is in congruence with Diana, Gaynor and Karen (2008) who opined that congenital blindness have negative impact on the personality development of persons with visual impairment as inadequate ability to move and orientate oneself which affects the self-esteem and social adjustment. They found out that the participants' severely limited mobility clearly and influenced their occupational choices, space and independence, with a particularly negative change in activities to daily living. They attended fewer social activities and became more dependent on assistance, which made them anxious.

This is equally supported by Brad, Ron, Vincent, Van and Michel (2005) who argued that congenital blindness have negative impact on the personality development of persons with visual impairment as most persons with visual impairment always get angry due to their conditions which intends leads to depression.

Similarly, the study is in accordance with **Y**ukihiko (2013) who argued that congenital blindness affects personality development of persons with visual impairment. He researched on differential outcomes of skill training, group counselling and individual cognitive therapy for persons with visual impairment to find solutions to anger and depression. As part of the living skills training program, group counselling and individual cognitive therapy were implemented to decrease psychological distress for adults with visual impairment because their condition affected their development.

This is supported by the Psychoanalytic theory by Freud (1930) who stated that unconscious motives at work and phobias would lead to avoidance situations in which impulsive behaviour could occur. Freud (1986) noted that some unconscious urges could not be experienced consciously because mental images and words cannot portray them in their full colour and fury and that other unconscious urges may be kept below the surface by repression. He defined repression as the automatic ejection of anxiety evoking ideas from awareness. The unconscious is the largest part of the mind. Here, the dynamic struggle between biological drives and social rules is most fierce. As drives seek expression and values exert counter pressure, conflicts can give rise to psychological disorders and behavioural outbursts.

Adventitious blindness and the personality development of persons with visual impairment

The findings of question two shows that adventitious blindness affects the personality development of persons with visual impairment. This is in line with Anderson, (1974) that agrees to this finding in that emotionally, persons with visual impairment especially those with adventitious blindness are shy and not very active amongst their peers. This is because listening is the chief avenue of learning from their extended environment, as well as from other people. This therefore causes them to be dormant, lonely, shy and inactive, as they only have to listen while others speak and play which affects their development. Also, from the findings of this work, it shows that persons with adventitious blindness always feel bad, angry and aggressive because of their disability, they are always quiet, indoors, they have problems with movement and coordination and find it difficult to provide for their basic needs, this intern proves their adventitious blindness affects the personality development of persons with visual impairment because all these problems faced is due to the disability (visual impairment).

This is supported by Bernard (2003) who argued that adventitious blindness solely depends on self-acceptance, and before fully developing self-acceptance, one may experience several struggles and challenges along the way, which affects one's development. However, the exploration on how people with adventitious blindness accepted themselves plays a vital role since self-acceptance is known to be the very foundation of other areas of self-identity. More so, children with impaired vision or blindness exhibit different range of emotional and physical complications. They feel themselves compromised, victims of some sort of evil, exhibit stereotypical behaviour such as anxiety, depression or excessive thought. They face difficulty in social interactions and making contacts and thus prefer to live in isolation. Language, motor or cognitive delays have a proportional effect on social competence exhibited by a child with adventitious blindness.

This is in congruence with Jung's (1927) theory which stipulated the personality of a person with visually impair is determined by what he hopes to be as well as by what he has been. Therefore, people with visual impairment without hopes or with negative hopes will develop negatively. He described that the unconscious comprised of two layers: the personal unconscious (Mostly ego, contains one of two attitudes extroverted or introverted), and the collective unconscious, which contains traces of memories, shared by the entire human race, inherited from our ancestors (Four main archetypes: persona; shadow; anima/animus; self).

Low vision and the personality development of persons with visual impairment

The findings of question three shows that low vision affects the personality development of persons with visual impairment. The findings show that majority of persons with visual impairment (low vision) believe in themselves, so they take risks but still depend on their parents.

This is in line with Morse (1983) who opined that children with low vision tend to be more unsettled by the limits of their

vision, when compared to those whose handicaps are more severe. This is equally supported by Bateman (1962) who argued that parents of children with low vision seem to be less understanding of the disability than those of blind children.

This is contrary to Head (1992) who argued that young people with visual impairment are more dependent on others; they are submissive and have lower self-esteem compared to their typically developing peers. This is equally contrary to the work of Pfeiffer and Pinquart (2012) where they argued that young people with visual impairment are not greatly interested in setting and achieving career goals (education and choice of profession). Numerous studies have determined that people who lose vision during their life are faced with lower self-confidence and self-respect, loss of personal security, and changes in interpersonal relations that is self-withdrawal (Cherry, Keller and Dudley, 1991; Van Hasselt, 1983, all according to Hersen et al., 1995; Senra, Vieira, Nicholls and Leal, 2013).

Furthermore, the finding is similar to Fraiberg (1977) who opined that persons with visual impairment especially low vision communicate better than the rest. One of the most common misconceptions about blind children is that they are equally or more adept in language skills than their normally sighted peers (Fraiberg1977). In reality severe and early impairments are likely to affect the language development of affected children. The differences are in part due to limited access to the environment and to differences in verbal feedback from people around them. They lack visual references and have reduced integration of information from their parents. More recent studies have found that the language of visually impaired children is more self-oriented and that the word meanings are more limited than for normally sighted children (Anderson et al., 1984) but for persons with low vision there is a slight difference since they can see a little.

This finding is in line with Person-Centred Theory Rogers (1954) who opined that personality contains only one construct, the self, or self-concept, which is a collection of beliefs about one's own nature, unique qualities, and typical behaviour. He emphasised that if our ideas about ourselves match our actual experiences, our self-concept is congruent with reality and if our ideas about ourselves do not match reality, this disparity is called incongruence. To Rogers's external factors such as the family environment, health, intellectual development, economic circumstances, cultural influences, social interactions and level of education all influences the personality of an individual with visual impairment.

CONCLUSION

The purpose of this study was to determine the impact of visual impairment on personality development of persons with visual impairment in the Fako Division. The findings of the study showed that the various types of visual impairments have impacts on the personality development of persons with visual impairment. From the study, congenital blindness affects personality development. This can be seen as majority of the participants' responses showed how their personalities are being affected by the impairment. Congenital blindness is a condition of blindness that is already present at birth or occurs at an early age. Age of onset and cause of visual impairment played a dominant role in affecting the adjustment patterns among individuals with visual impairment.

The study also shows that adventitious blindness affects personality development. Adventitious blindness is vision loss after years of sight. Most people who lose their vision do so in their adult years. A large proportion of these individuals become visually impaired in late adulthood reason why accepting the condition becomes a very difficult issue. Persons with adventitious blindness need to understand the idea that self-acceptance is necessary for every person to survive and face all the challenges with a happy disposition in life.

However, the study shows that low vision affects personality development greatly. It is "a person who has measurable vision but has difficulty accomplishing or cannot accomplish visual tasks even with prescribed corrective lenses but who can enhance his or her ability to accomplish these tasks with the use of compensatory visual strategies. Persons with low vision tend to be more unsettled by the limits of their vision, when compared to those whose handicaps are more severe. Also, children with low vision tend to exhibit with more frequency underachieving behaviours and fatigue and are more prone to emotional problems.

RECOMMENDATIONS OF THE STUDY

The findings of the study showed that the various types of visual impairments have impacts on the personality development of persons with visual impairment. Therefore, the following recommendations were made based on objectives.

For those with congenital Blindness, the government should reinforce laws binding families, communities and the society at large so as to do away with prejudice and stereotypes which affects personality development. And aid should be given to various special centres by providing necessary equipment's to facilitates their training so as to make them confident and reduce low self-esteem in persons with visual impairments in general and congenital Blindness in particular.

Persons with visual impairment should be treated with care by their families and the society especially persons with low vision, their problems need to be looked into, and solved. This is to reduce the increase of the impairments in the society. In a case in which the problem can be handled and stopped from becoming severe, everything should be done to handle it (it may be need lenses or operation). Early intervention may

avoid or stop future damage. Parents and the government should be able to see to this.

For those with Adventitious blindness, they should be encouraged to have self-acceptance and self-adjustment since it is a very important aspect that every human especially loss of vision of sight persons. Self-acceptance and self-adjustment needs to be taken very importantly and this aspect are well handled in rehabilitation centres or in specialised centres. It is advised that all persons with visual impairment should be part of a special centre to incorporate important skills to help in their development.

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