A DIFFERENCE IN SUCCESS IN SOCIAL SKILLS YOUNG PEOPLE WITH AND WITHOUT DISABILITIES

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Abstract
The aim of this paper is to determine the differences in life skills of young people with and without disability in chronological age from 18-35 year-old in Tuzla Canton. The respondents sample consists of two sub-samples. First sub-sample contains 50 young people with disability, chronological age from 18-35 of both genders. Second sub-sample contained 50 young people without disability, chronological age from 18-35 of both genders. Research data were analysed using method of parametric and non-parametric statistics. Frequencies, percentages and measures of central tendency have been calculated (arithmetic mean and standard deviation). P-values have been used for examining the difference between variables and variance analysis has been used for examining the importance of differences. The results show that there is a significant statistical difference between young people with and without disabilities in the majority of life skills assessed: managing money, feeding skills, hygiene, taking care of health, household management, culture of living, transport. Based on the results obtained, it is recommended to start the program and training in early age which will make life easier to disabled persons and their families.

Keywords: Young People with Disability, Young People without Disability, Independence, Life Skills.

Introduction
In the world of variety it is general opinion that being different is discriminating in many life spheres. Today, in Bosnia and Herzegovina live large number of people, with different level and type of disability, which are coping with being a part of society. Still, being included in local community does not imply that people with disability ask for additional care of public but, it implies their commitment and possibility to achieve rights as a human and citizen. People with disabilities are spread all over the world and in all levels of society, with share of 10% of total population (Anić, 2002). Within the ecological concept, around 25% of population is affected by disability (Rački, 1996). Word Disability implies “any limitation or ability reduction in undertaking any activity, in the way, or within scope, which is considered normal for human being”. Disabled person, though, is a person with disability (Rački, 1997). People with disabilities are any person with different body, thought or mind state or illness which permanently disables the fulfillment of personal and social need in everyday social and economy life (Žunić, 2001). Expression disability, as well as the earlier “defect”, however, still has a negative connotation besides other personal characteristics, where imitation, impediment and disability are put forward (Zovko, 1990). In the last few decades, in our society, at least three common models in the approach to disability phenomenon which are mutually intertwined and they affect the relationship between the community and disabled people, as well as relationship between disabled people towards disability phenomenon and themselves (Zahirotović, 2009). In order to determine the base for standardized assessment of functioning and the interaction with the environment it is necessary to make a specification for each separated function, activities and factors of environment when defined. In order to achieve the basis for a standardized evaluation of the functioning of people, and its interaction with the environment it is necessary for each of the outsourced functions, activities and environmental factors to make a specification of when the damages on the observed variable does not exist, when the damage is mild, moderate, or strong/total (Strnad and Benjak, 2010). The philosophy of independent living of people with disabilities is based on the principle that people with disabilities are not passive recipients of care and aging, but people who can and have the right to control their own lives, to make choices, make decisions and take responsibility for them (Dinkić and Momčilović, 2005). The main principles of philosophy of independent living of people with disabilities are: choice, making a decision, control, responsibility and the right to make a mistake. The preconditions for an independent living for people with disabilities are: the possibility of obtaining relevant information, the possibility of exchanging experiences

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with other people with disabilities, the existence of accessible housing, the existence of technical aids, the
existence of an accessible architectural environment, the existence of accessible transport, the existence
of personnel assistant service (Vučenović and Mastikosa, 2015). The philosophy of independent living is the
result of efforts of the disability movement to see the issue of disability as a human rights issue (Lučić, 2009).
Skill is the ability of an individual to quickly and accurately perform a series of gradually organized
operations or assembly operations for more easily and efficiently performing a task. Social skills enable
people to know what to say, how to make good choices and how to behave in different situations (Ferić-
Šlehan and Kranželić, 2005). Self-esteem in people with disabilities is defined as assessment of their own
capacities to function in a social environment (Omolayo, 2009). Activities of daily living include tasks for
which a person regularly prepares or as an addition for participation in his or her social roles and work in
everyday life (Trombly, 1995). Social skills are one of the most important factors of development of identity
(Erikson, 2008). The management of social interactions is one of the most complex tasks that people do, and
it implies the inclusion of many physiological systems such as visual and auditory perception, speech and
problem solving (Masty and Schwab, 2006). Social skills are the ability to adapt and positive behavior that
enable individuals to successfully cope with the demands and challenges that they face every day (Husić-
Duzić, 2016). Social skills include: fundamental, complex and skills to cope with emotions, skills that replace
aggression, skills to cope with difficulties, planning skills. Based social skills are: self-presentation, listening,
initiate, maintain and end a conversation, asking questions, presenting other people, thanksgiving, giving
compliments. Complex social skills are: search help, search for information, advice, following instructions,
persuasion and apology for the mistake. Skills to cope with feelings are: recognition and expression of
feelings, understanding the feelings of others, dealing with the refusal by another person, displays of
affection, carrying with their own discomfort and self-admission (Ferić-Šlehan and Kranželić, 2005). Social
skills help protect against risky behavior and protection against the development of behavioral disorders.
They enable young people with disabilities problem solving in relation to other people and the ability to
control behavior such as dealing with anger and frustration (Bratovčić and Galijašević, 2015). Life skills are
used daily. They help in communicating with other people and singles. People working on the development
of interpersonal skills are successful in their professional and personal life (Husić-Duzić, 2016).

The aim of the research
The aim of this paper is to determine the differences in life skills in young people with and without
disabilities.

Methodology

The sample
The sample of correspondents consisted of two subsamples. First subsample contains 50 young
people with disability, chronological age from 18-35 of both genders. Second sub-sample contained 50 young
people without disability, chronological age from 18-35 of both genders randomly selected in Tuzla Canton.
The research includes people with disabilities and people without disabilities. In a sample of people with
disabilities the most represented are people with cerebral palsy (40%), followed by multiple sclerosis (24%),
spinal cord injuries (16%), muscular dystrophy (10%), multiple disabilities (4%), amputation (4 %), and
visual impairment (2%). Young people with and without disability differ in level of qualification. Most
young people with disabilities who are included in this study have a high school education according to
regular curriculum and plan of education (72%), while young people without disabilities mostly tend to
have a university degree (76%). Young people without disabilities are more interested in further education
and improvement (52%) compared to young people with disabilities (44%). A very small percentage of
young people with disabilities are using assistive technology in their daily activities (4%). Only 4 (8%) of
young persons with disabilities from the test sample is employed, but the problem of unemployment is
expressed among young adults without disabilities, although, 19 young people (38%) from test sample is
employed. A significant percentage of young people without disabilities (44%) are financially supported by
their parents, and the respective percentage of people with disabilities is even higher (58%). A disturbing fact
is that (6%) of young people with disabilities does not have any income, and 14% receive care and assistance,
which is their only income.

The sample of variables:
It is analysed 7 variables in total: money management, feeding, personal appearance and hygiene,
health, household management, culture, housing, transport.

The method of conducting research
Before conducting the tests provided support by the institution at which the study was conducted
and the parents of children who have been involved in the testing. Considering that in carrying znanstevnog
research must take into account ethical considerations in the process of data collection and analysis of the
results, for the purposes of this study were prepared as follows: The application for approval of conducting
research in all mainstream schools in Tuzla Canton, in the form of "Letters of consent" sent to school principals, approval for the implementation of research in basic scales, TK, "the Ministry of Education, Science, Culture and Sports", oral and written consent of parents of children covered by the research. For the purpose of this study was used Inventory life skills (Life skills inventory /Independent Living Skills Assessment Tool - Department of social and health services - Washington State, 2000), which examines the life skills in different categories that are necessary for independent living, Multidimensional Scale of perceived social support (Multidimensional Scale of Perceived Social Support) (Zimet, 1988). Inventory life skills for independent assessment of life skills consisted of variables to determine the level of development of social skills. The research was conducted with the support of members of expert teams who were previously trained. The survey we conducted through questionnaires completed by members of the professional teams. The questionnaire consisted of questions to assess the independent life skills and consists of variables to determine the level of development of independent life skills (basic, intermediate, advanced, exceptional). The study was conducted for a time period of two months. Respondents answered individually after previously received instructions by the interviewer. Respondents were asked to express their agreement or disagreement, or the degree of agreement or disagreement with the views expressed in the claims. Young people with and without disabilities were tested individually. A time that is provided for filling the questionnaire every patient is 15-25 minutes. All respondents are familiar with the research and are informed on how to complete the questionnaire. By analyzing the responses, we came to the data on the development of social skills in people with and without disabilities.

Measuring instruments

For the purpose of this study was used Inventory life skills (Life skills inventory /Independent Living Skills Assessment Tool - Department of social and health services - Washington State, 2000), which examines the life skills in different categories that are necessary for independent living, Multidimensional Scale of perceived social support (Multidimensional Scale of Perceived Social Support) This test examined the Perception of social support, Self-adaptation to space and accessibility of the environment. Inventory life skills (Life skills inventory /Independent Living Skills Assessment Tool - Department of social and health services - Washington State, 2000), Estimator of independent life skills consists of variables to determine the stage of growth of the scale from 1 to 4 (basic, medium, advanced, exceptional), 1 means that the poor and 4 means that the development of social skills is very good. The variables are grouped into seven categories and it: money management, feeding, hygiene, Health, manage the household, habitation, transport. The questionnaire dealing with the evaluation of the perception of social assistance (Multidimensional Scale of Perceived Social Support) contains 20 claims, where it is necessary that the subjects on a scale of 1 (if they do not agree) to 5 (if fully agree) assessment of those claims related to the social support.

Data processing methods

Research data obtained were analysed using method of parametric and non-parametric statistics. Frequencies, percentages and measures of central tendency have been calculated (arithmetic mean and standard deviation). P-values have been used for examining the difference between variables and variance analysis has been used for examining the importance of differences. Data are shown in the table. Data are obtained in statistical analysis software package SPSS 16 for Windows.

Results and discussion

In order to determine the efficiency of performing different life skills, further in the text are shown research analysis results of the level of efficiency of performing different life skills for people with and without disabilities. Considering the results of money management efficiency, shown in the table-1, and p-value less than 0,05, it can be concluded that there is a statistically significant difference between the existence of disability and level of efficiency in money management skill. In a sample of young people with disabilities, are less developed skills related to checking transaction account, planning independent budget, understanding of tax forms and control card payment, in relation to young people without disabilities.

| Table 1. The difference between respondents in the skill of money management |
|---------------------------------|---------|---------|---------|---------|---------|
| Group of respondents            | MANAGEMENT OF MONEY |         |         |         |         |
|                                 | Primary  | Central | Exceptionally | Total   |
|                                 | f  | %      | f  | %      | f  | %      | f  | %      |
| Persons without disabilities    | 0  | 0,00   | 0  | 0,00   | 50 | 100,00 | 50 | 100,00 |
| People with disabilities        | 3  | 6,00   | 5  | 10,00  | 42 | 84,00  | 50 | 100,00 |

χ² = 8,69; df=2; p=0,013;
Considering the results of feeding success, shown in the table-2, p-value less than 0,05, and it can be concluded that there is a statistically significant difference between the existence of disability and level of efficiency in feeding skill. In a sample of young people with disabilities, some issues are determined in the skills of making meals for more people, using cutlery, planning buying groceries, use of household appliances, adjusting the recipe for more people and a healthy diet. Therefore, a minor percentage of respondents with disability with an extraordinary efficiency are reported to perform feeding skill than people without disabilities.

Table 2. The difference between respondents in the skills of feeding

<table>
<thead>
<tr>
<th>Group of respondents</th>
<th>SKILLS FEEDINGS</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Primary</td>
<td>Central</td>
<td>Advanced</td>
<td>Exceptionally</td>
<td>Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons without disabilities</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>50</td>
<td>100,00</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>6</td>
<td>12,00</td>
<td>5</td>
<td>10,00</td>
<td>4,00</td>
<td>8,00</td>
<td>35</td>
</tr>
</tbody>
</table>

\[ \chi^2 = 17.65; \text{ df}=3; \text{ p}=0.001; \]

Considering the results of chi-squared test, p-value is less than 0,05, it is concluded that there is a statistically significant difference between the existence of disability and the level of efficiency of performing a skill related to personal appearance and hygiene. In a sample of young people with disabilities, problems with skills performing are evident in maintaining the clothes clean, washing and drying, ironing and sewing clothes. A minor percentage of respondents with an extraordinary efficiency, in the skill mentioned, are evident with people with disabilities than without.

Table 3. The difference between respondents in the skills of hygiene

<table>
<thead>
<tr>
<th>Group of respondents</th>
<th>APPEARANCE AND HYGIENE</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Primary</td>
<td>Central</td>
<td>Advanced</td>
<td>Exceptionally</td>
<td>Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons without disabilities</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>48</td>
<td>96,00</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>3</td>
<td>6,00</td>
<td>8</td>
<td>16,00</td>
<td>1</td>
<td>2,00</td>
<td>38</td>
</tr>
</tbody>
</table>

\[ \chi^2 = 10.16; \text{ df}=3; \text{ p}=0.017; \]

At the level of success in performing skills regarding health care, there is a statistically significant difference between the existence of disability and the level of success of performing skills related to the health of correspondents. Thus, in the sample of young people with disabilities issues are evident within the skills of taking care of themselves in the case of illness in the manner of getting into medical records, concerns about sexual life and protection from pregnancy and sexually transmitted diseases, concerns about disposal of medicaments, choice of family doctor or dentist or clinic for regular health control. Again, minor percentage of respondents with an extraordinary efficiency, in the skill mentioned, are evident with people with disabilities than without.

Table 4. The difference between respondents in the skills of health care

<table>
<thead>
<tr>
<th>Group of respondents</th>
<th>HEALTH</th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Primary</td>
<td>Central</td>
<td>Advanced</td>
<td>Exceptionally</td>
<td>Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons without disabilities</td>
<td>f</td>
<td>f</td>
<td>f</td>
<td>f</td>
<td>f</td>
<td>50</td>
<td>100,00</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>8</td>
<td>16,00</td>
<td>14</td>
<td>28,00</td>
<td>1</td>
<td>2,00</td>
<td>27</td>
</tr>
</tbody>
</table>

\[ \chi^2 = 29.87; \text{ df}=3; \text{ p}<0.001; \]
The table 5 shows the difference between young people with disability and young people without disability in variable “housekeeping”. Results have shown that there is a statistically significant difference between the existence of disability and level of efficiency in performing a skill related to respondents housekeeping. In the sample of young people with disabilities it has been found that certain issues appear within performing cleaning, small repairs around the house, actions against insects, saving electricity. A minor percentage of respondents with an extraordinary efficiency performance in the skill mentioned is evident for people with disabilities than without.

<table>
<thead>
<tr>
<th>Group of respondents</th>
<th>HOUSEKEEPING</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Primary</td>
<td>Central</td>
<td>Exceptionally</td>
<td>Total</td>
<td>f</td>
<td>%</td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Persons without disabilities</td>
<td>0</td>
<td>0,00</td>
<td>0</td>
<td>0,00</td>
<td>50</td>
<td>100,00</td>
<td>50</td>
<td>100,00</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>8</td>
<td>16,00</td>
<td>18</td>
<td>36,00</td>
<td>24</td>
<td>48,00</td>
<td>50</td>
<td>100,00</td>
</tr>
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</table>

χ² = 35,13; df=2; p<0,001;

Table 6 shows results for variable “culture of living”. Research results show that there is a statistically significant difference between the existence of disability and level of efficiency in performing a skill related to respondent’s culture of living. In the sample of young people with disabilities it has been found that certain issues related to the knowledge of the term lease, advance payment, rental and the advantages and disadvantages of living with a roommate. A minor percentage of respondents with an extraordinary efficiency performance in the skill mentioned is evident for people with disabilities than without.

<table>
<thead>
<tr>
<th>Group of respondents</th>
<th>CULTURE HOUSING</th>
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<tbody>
<tr>
<td></td>
<td>Primary</td>
<td>Central</td>
<td>Advanced</td>
<td>Exceptionally</td>
<td>Total</td>
<td>f</td>
<td>%</td>
<td>f</td>
</tr>
<tr>
<td>Persons without disabilities</td>
<td>1</td>
<td>2,00</td>
<td>0</td>
<td>0,00</td>
<td>0</td>
<td>0,00</td>
<td>49</td>
<td>98,00</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>12</td>
<td>24,00</td>
<td>12</td>
<td>24,00</td>
<td>3</td>
<td>6,00</td>
<td>23</td>
<td>46,00</td>
</tr>
</tbody>
</table>

χ² = 33,69; df=3; p<0,001;

In the sample of young people with disabilities skills related to transport such as: managing traffic and knowledge of traffic rules, car maintenance, procedures for acquiring the right to transport, the procedure for obtaining a driver's license. Results obtained by applying the chi-squared test table7 show that there is a statistically significant difference between the existence of disability and level of efficiency in performing a skill related to transport of passengers.

<table>
<thead>
<tr>
<th>Group of respondents</th>
<th>TRANSPORTATION</th>
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<tbody>
<tr>
<td></td>
<td>Primary</td>
<td>Central</td>
<td>Advanced</td>
<td>Exceptionally</td>
<td>Total</td>
<td>f</td>
<td>%</td>
<td>f</td>
</tr>
<tr>
<td>Persons without disabilities</td>
<td>0</td>
<td>0,00</td>
<td>0</td>
<td>0,00</td>
<td>1</td>
<td>2,00</td>
<td>49</td>
<td>98,00</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>11</td>
<td>22,00</td>
<td>17</td>
<td>34,00</td>
<td>3</td>
<td>6,00</td>
<td>19</td>
<td>38,00</td>
</tr>
</tbody>
</table>

χ² = 42,23; df=3; p<0,001;
Disabilities (19). In the study of differences of people with and without disabilities came up with results by worse assess control over the spending of their own money in comparison to young people without field of activities of daily living (care about money) came to the data where young persons with disabilities, as well as their efficiency and productivity (Arsenović and Pantelić, 2014). The research in the more. All mentioned above implies the need for the development of social skills in young people with interpersonal relationships with colleagues and superiors, listening to instructions, accepting criticism and of communication skills leads to disagreements and misunderstandings; inadequate relationship with colleagues leads to isolation, making it difficult to cooperate in the performance of their tasks, and affects the quality and efficiency of the completion of some work. Certain social skills (social rules) are directly related to work performance, such as: compliance with the working hours, compliance with time for a break, good interpersonal relationships with colleagues and superiors, listening to instructions, accepting criticism and more. All mentioned above implies the need for the development of social skills in young people with disabilities, as well as their efficiency and productivity (Arsenović and Pantelić, 2014). The research in the field of activities of daily living (care about money) came to the data where young persons with disabilities worse assess control over the spending of their own money in comparison to young people without disabilities (19). In the study of differences of people with and without disabilities came up with results by territory “health” that the promotion of health and treatment options for people with disabilities represent
an existential necessity bearing in mind that some types of disabilities have a negative impact on the overall health of people with disabilities compared to persons without disabilities. The main obstacles to improved health status of persons with disabilities, according to the respondents, poor financial status of persons with disabilities (60.8%), low health education of persons with disabilities (38.2%) and the impossibility of adequate treatment in accordance with health insurance (39.7%) (Hušić-Duzić, 2016).

Conclusion

Based on the research results there is a following conclusion: The results obtained in this study show that there is a significant statistical difference between young people with and without disabilities in all tested variables life skills such as: managing money, feeding skills, hygiene, taking care of health, household management, culture of living, transport. Based on the results obtained, for young people with disabilities it is recommended to start the rehabilitation program and training on developing and adopting life skills at early age in order to increase the feeling of success and safety and to create conditions for safe success in the further education and quality of their lives. Education and rehabilitation programs designed for young people with disabilities should be designed so that the exercise of basic and instrumental skills of children and young people with disabilities. The integration of young people with disabilities in social life at all levels. Provide appropriate support to children and young people with disabilities at all levels of education with a view to the adoption of better academic and personal skills necessary for independence and employment.

REFERENCES