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ATTITUDE AS A FACTOR OF LIFESTYLE FORMATION IN PEOPLE WITH SPECIAL NEEDS

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The article deals with the problem of an attitude as a factor of lifestyle formation in people with special needs. The results obtained allow us to ascertain the presence of psychological mismatch between self-concept of a person with special needs, and his interpretation of the requirement imposed on him by society. As a rule, it is more fixed in women: expectations of society women turning into their own regulations. Men have attitude toward self related to values, aimed at preserving their own individuality: primarily health and focus on the immediate satisfaction of vital needs. Identified gender differences in relation to self, can act as one of the internal factors of the lifestyle in people with special needs.

Key words: lifestyle, self-attitude, people with special needs.

У статті розглядається проблема самовідношення особистості як чинник формування способу життя осіб з особливими потребами. Отримані результати дозволяють констатувати наявність психологічного розузгодження між Я-концепцією особи з особливими потребами і її трактуванням вимог, що пред'являються суспільством. Як правило, воно більш виражене у жінок: чекання суспільства жінки перетворюють на свої власні норми. У чоловіків відношення до власної особи пов'язане з цінностями, направлені на збереження власної індивідуальності: перш за все здоров'я і задоволення вітальних потреб. Виявлені гендерні відмінності відносно власної особистості можуть виступати як один з внутрішніх чинників формування способу життя осіб з особливими потребами.

Ключові слова: спосіб життя, самовідношення, особи з особливими потребами.

В статье рассматривается проблема самоотношения личности как фактора формирования образа жизни лиц с особыми потребностями. Полученные результаты позволяют констатировать наличие психологического рассогласования между Я-концепцией личности с особыми потребностями и ее трактовкой требований, предъявляемых обществом. Как правило, оно более выражено у женщин: ожидания общества женщины превращают в свои собственные нормы. У мужчин отношение к собственной личности связано с ценностями, направленными на сохранение собственной индивидуальности: прежде всего здоровье и удовлетворение витальных потребностей. Выявленные гендерные различия в отношении собственной личности могут выступать в качестве одного из внутренних факторов формирования образа жизни лиц с особыми потребностями.

Ключевые слова: образ жизни, самоотношение, лица с особыми потребностями.

Among many urgent problems, the solution is concentrated in modern psychology, psychological analysis highlighted personal activity of people with special needs. In this case we are talking about the people who are in difficult circumstances.

Difficult life circumstances are circumstances that objectively violate the normal functioning of a person, the consequences of which he can not overcome on his own (disability, partial loss of motor activity due to old age or health, loneliness, abandonment, homelessness, lack of housing or employment, violence, neglect and negative relationships in families, low income, psychological or mental disorder, natural disaster, accident, etc.).

Due to N. Kryvokon's point of view, the main features of critical circumstances of people with disabilities are as follows: they break the rhythm of everyday life; include social and psychological problems (as some kind of contradiction), is psychologically traumatic; they can be identified by both objective and subjective aspects; they call for change necessity and through temporality provide for these changes; require social adaptation of personality; have a negative outlook on further development and life of an individual [1].

In our country, the quality of life of persons with disabilities and limited opportunities, as a rule are below the rest of the population, due to the following: 1) failure in our society, humanity and compassion towards people with special needs; 2) inability underdevelopment and social infrastructure of cities and rural areas, taking into account basic needs of disabled persons; 3) low level of financial security and social services, their lack of flexibility; 4) poor quality or lack of means and devices needed for service, movement and work of disabled; 5) the existence of significant difficulties in obtaining high-quality vocational education, especially higher education in meeting spiritual needs [3].

On the other hand, there is an information barrier separating the society from the disabled, persons with disabilities find much harder to present their views and positions to convey to make other people understand their needs and interests. Therefore, there can be distorted views about the needs of disabled people, especially their identity. Based on these false beliefs and prejudices arising phobia that hinders communication between the disabled and society [3]. The emotional barrier is also a two-way, it can consist of unproductive emotional reactions of others about the disabled - curiosity, mockery, discomfort, guilt, hypercare, fear and so on and frustrative emotions of a disabled, self-pity, resentment in the regard to others, waiting for hypercare desire to blame someone for his defect, the desire for isolation and so on. Such a range makes difficult social contacts in the relationship of a disabled and his social environment. Both an individual with disabilities, and his closest surrounding show desperate need for emotional background of their relationship to be normalized. Finally, the integrated nature of a communicative barrier caused by the accumulation of all these action restrictions distort of the identity of a person.

Communication disorder, one of the most serious social problems of a disabled, and is the result of physical limitations and emotional protective isolation, and loss of a working group, and usual shortage of information.

Dedicated barriers interaction of society and persons with special needs lead to formation of a certain lifestyle.

Lifestyle in the context of our study, we define as really practiced norm of human behavior, the way of their daily activities in different spheres of existence (work, leisure, lifestyle, etc.) [4].

Achievement of the objectives set by people depends just on the range of ways of everyday activities. We believe that interfering with everyday tasks and solving them successfully (i.e. removing from the range of the necessary ways) a person feels comfortable in both intra- and in interpsychological aspects. Interpsychological aspect of particular significance gets in the lives of people with special needs. On intrapsychological, intrapersonal, level the ways of their solutions of life problems are normative and subjectively justified. Faced with the «objective» in the face of the society, such as social institutions, i.e. interpsychological level, a person is going through a kind of dissonance between their individual evolved modes of behavior and norms and expectations of society. That is, the situation which has arisen out of the ordinary «life» takes the character of complex, problematic situation: the existing solutions to be ineffective, and the new has not yet formed. On an emotional level, the individual is experiencing stress, the output of which is covered in a dyad «escape-attack», i.e. a person «goes» at the organismal level of existence [2].

Qualitative characteristics of the newly found way to solve the problem situation (biological, such as aggression, which has a protective character, or socially-acceptable) form depends on the formed self-concept of an individual

The object of our study: a person with special needs.

Subject: interconnection of selfattitude and psychological well-being of persons with disabilities.

Objective: To explore the features of the relationship of oneself and psychological well-being of women and men with disabilities.

The following methods are used:

- 1) Test - Questionnaire «oneself» (V.V. Stolin and S.R.Pantelyeyev);
- 2) Scale subjective welfare (Fetiskin N.P., Kozlov V.V., Manuilov H.M.);
- 3) Method of personal differential.

The study involved 50 people with disabilities aged 25 to 35 (25 men and 25 women) who are in difficult circumstances and are registered in social service centers.

Let us consider the results of studies obtained by us. Both women and men sufficiently appreciate the self, aware of being carriers of socially desirable characteristics. At the same time, this figure is significantly higher ($r < 0,001$) (the use of «Personal differential» technique) in the group of women.

Table 1

The average of the methodology «personal differential» in a group of men and women with disabilities

Group	Factors		
	Evaluation	Activity	Power
I	12,7	4,1	6,2
II	8,0	5,0	4,5
Figures of Differences	0,001		

Low rates on a factor of «activity» in both groups suggest a low intrinsic activity, initiative in relations with others for persons with special needs. They are more focused on themselves, their feelings and not always willing to share them with others. Also there are not enough expressed, both in men and women, figures on a factor of «The Power». That is, it can be argued that they are more dependent on external circumstances and the surrounding evaluations, and are therefore not always able to stick to their own line of conduct.

Investigation of the features of the self of persons with special needs (test - questionnaire «self-relation» (V.V. Stolin and S.R.Panteleev) showed similar results: women are significantly higher self assessed, they are characterized with a positive attitude to their emotional level, substantive undifferentiated perception of self. that is, it can be argued that women have more faith in their own strength, power, energy, the ability to control their own lives.

Table 2

Percent expression of self-relation, women and men with disabilities.

group	S	I	II	III	rate								
					IV	1	2	3	4	5	6	7	
%	1	80,0	58,67	58,00	39,67	71,33	47,67	32,00	70,67	60,33	60,67	54,67	68,67
%	2	69,33	58,67	58,00	27,33	71,33	47,67	32,00	70,67	38,33	43,33	54,67	68,66
Figures of differences		0,01	-	-	0,05	-	-	-	-	0,01	0,01	-	-

Notes: Scale S - integral sense «for» or «against»; Scale I - self-esteem; II- autosympathy scale; Scale III - positive attitude expectations of others; scale IV –self-interest; Scale 1 - self-confidence; Scale 2 – relationship to other; Scale 3 - self-acceptance; Scale 4 – self-managing; Scale 5 - self-incrimination; Scale 6 – self-interest; 7 scale - self-understanding.

They also demonstrate significantly higher rate of their ability to manage their own behavior than men ($p < 0,01$) and a low level of adaptation in society, acting more on the basis of their own beliefs and values, than the subject of social norms and group pressure. However, the ability to control and direct their lives leads to the fact that all the responsibility women assume, and tend to blame themselves for their mistakes and failures. This is confirmed by a more pronounced performance on a scale of “self-incrimination” in the group of women.

A little unexpected for us were the results obtained on the scale of “Waiting for a positive attitude from the other” and “Attitude of others”: in the group of men and a group of women with special needs: indicators of mild (27, 33 and 39, 67, respectively,). Those. both men and women with special needs, believe that others, on the one hand - not always treat them well, and on the other - are not sure that they could be of interest to others. Here we are faced with some of the contradictions in the personality of persons with special needs: high self-assessment and the inability of others to see and appreciate all the depth of their personalities. Although women, after all, to a greater extent than men, are hoping for a positive attitude to them from their surrounding ($p < 0,05$).

Also, the importance of the social environment for women is confirmed by the results of subjective well-being research: in women, this figure is significantly higher ($p < 0,01$). That is, women are still more focused on the support of society and have certain expectations of people around them.

Table 3

The average of the method “Scale of subjective well-being” in a group of men and women with disabilities.

rate	General score	1	2	3	4	5	6
1 group	552	11.3	9.9	8.6	9.8	6	6.6
2 group	551,9	11.8	10.4	8.4	8.7	6.4	6.2

Note 1 - tension and sensitivity; 2 - signs that accompany the basic psycho-emotional symptoms; 3 - mood changes; 4 - the importance of the social environment; 5 - self care; 6 - satisfaction with daily activities.

The overall subjective well-being in the groups studied had an average severity and does not differ in groups of men and women. You can tell that both women and men with special needs are not satisfied with their lives, have a high level of anxiety and low level of adaptation in society, they have a dominate level of negative emotions in their life there is practically no experience of happiness. In the group of men identified high rates of scale “symptoms that accompany the psycho-emotional symptoms,” i.e., it can be argued that men are quite tense and more anxious than women.

Correlation analysis showed that in the group of women with special needs, there is an inverse relationship to such indicators as the activity factor (method of “Personal differential”) and the scale of “The importance of the social environment” (method of “subjective well-being”) (-0.411 ; $r < 0.01$). That is, women with increased intrinsic activity decreases the importance of social environment. Thus, we can assume that they are trying to solve problems on their own, relying on their own strength and, to a lesser extent, guided by the opinions of others.

In the group of men with special needs correlation analysis showed positive relationship between the following parameters: evaluation factor and self-assessment of health (0.406 ; $r < 0,05$) and evaluation factor and the degree of satisfaction of daily activities (0.409 ; $r < 0,05$). Thus, in men rating their personalities, primarily associated with the self-assessment of their health and the subjective satisfaction of everyday life. Keeping in mind that the study was conducted in a group where health is a debilitating factor, and everyday life is complicated by problems with the movement, the lower estimation of self in men compared to women becomes clear.

The results obtained allow us to ascertain the presence of psychological “mismatch” between self-concept of a person with special needs, and their interpretation of the requirement imposed on them by society (so-called “social desirability”). And, as a rule, it is more fixed in women. We can assume that the woman, being by nature more labile, trying to coordinate her activity with social approval. And then, to determine psychological content of the “social approval”, i.e. expectations of society, women interiorize them, turning them into their own regulations. Men have the attitude toward the self related to values, aimed at preserving their own individuality: primarily health and focus on the immediate satisfaction of vital needs.

Identified gender differences in relation to self in persons with special needs, can act as one of the internal factors of the definition and building of strategy of behavior strategy in society. Another thing is whether society is willing to take into account these gender differences? The answer to this question is the prospect of further research.

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