STRESS AND STRESS COPING STRATEGIES AMONG STUDENTS WITH DISABILITIES AT COLLEGE OF TECHNOLOGY EDUCATION

Ficus Gyasi University of Education, Winneba College of Technology Education Department of Interdisciplinary Studies ficusmy@hotmail.com

Kofi Asiamah Yeboah University of Education, Winneba College of Technology Education Department of Interdisciplinary Studies asiamahkofi@yahoo.com

Abstract

Students with disability accessing tertiary education worldwide continue to experience various degrees of stress. To understand this phenomenon from the Ghanaian perspective, we have undertaken this study to investigate stress and stress coping strategies among students with disability at College of Technology Education, Kumasi-Ghana. The study adopted a descriptive phenomenology on eighteen (18) participants. The data was collected using semi-structured interview guide and analyzed using thematic technique. The results identified three sources of stress, namely: fear of examination, discrimination and incompatible infrastructure. The coping strategies adopted by the students with disabilities were self-determination, dependence on God, and support from relatives and peers. This paper makes two valuable recommendations that the university authorities institute policies that would ensure a disability friendly campus and to make guidance and counselling services accessible to students with disabilities to support them to address their counselling needs.

Key words: Coping, Disability, Strategy, Stress, Ghana

Introduction

Tertiary education has become one of the key issues to the economic, political and social development and competitiveness of the increasing global knowledge society. The benefit of accessing and completing tertiary education worldwide is not new. Historically, Rudolph, (1962:6) said when the Puritans founded Harvard College in 1636, the purpose of higher education was to produce "a learned clergy and a lettered people" and to develop learners to



work towards improving the conditions of society at large (Dewey, 1916). Dewey, (2008:139) in the 19th century emphasized higher education's role in sustaining human life as he proclaimed that "Democracy must be born anew each generation and education is its midwife". In his opinion, through higher education, knowledge would equip ordinary citizens to share in a common life, help themselves as well as society (Ramley, 2014).

In Ghana, for example, tertiary education is held in high esteem because it is believed that those who have access to higher education usually are gainfully employed. This intend increase the individual's material standards of living, reduced poverty, and improves the overall well-being of the population; as well eliminate the psychological implications of unemployment. According to (Osei & Awunyo 2012) workers with a degree certificate produce more than half of the Ghanaian annual economic value in terms of income tax. Similarly, Hout (2012) argued that individuals who complete higher education are twice as likely to earn more money, live healthier lives, and contribute to the socio-economic and well-being of society. Consequently, (Delbanco, 2012) posit completing a degree programme is a catalyst for the economic health of the nation and that going to university is good for the economic competitiveness of society. Given the well-established financial and career benefits of a tertiary education, it is plausible to suggest that a motivator for entry into and completion of tertiary education is access to such economic and social benefits (e.g., reduced crime rates, increased charitable giving, higher salaries and work benefits, improved health, advanced knowledge) (Zaback, Carlson, & Crellin, 2012).

Notwithstanding the numerous benefits of accessing and completing tertiary education, education as a whole is associated with stress. Stress has become an essential topic in academic circles. Many researchers in the field of behavioural science have carried out extensive study on stress among students and its effects and concluded that the field needed more attention (Agolla, 2009; Chen, 2017; Lazarus, 1993). Stress is a person-situation interaction, one that is dependent on the subjective cognitive judgment that arises from the interplay between the person and the environment (Dickerson, 2008; Doumit, Huijer& Kelley 2010; Jani 2009). It is the sum of the physical, mental, and emotional strains or tensions on a person (Chen, 2017). Lazarus (2006) add that feeling of stress in humans is as a result of interactions between persons and their environment that are perceived as straining or exceeding their adaptive capacities and threatening their well-being. The element of perception indicated that human stress responses reflect differences in personality as well as differences in physical strength or health. In addition, a situation may become a stressor based on the evaluation of the situation either as a harm, loss threat or a challenge, then the person experiences stress (Lazarus and Folkman 1984)

Although stress is a common element in the lives of every individual, regardless of race or cultural background (Garret, 2001), sufficient literature has shown that tertiary students with disability possess a cluster of unique set of stressors which can affect their daily experiences (Garret, 2001). Undoubtedly stress has become the number one reported impediment to academic performance of students with disability in Ghana (Gyasi & Hayford, 2017). It is important to note that stress has both positive and negative impact on human beings. With students, some level of stress can be beneficial a times, producing a boost that provides the drive and energy to help them attain academic success (Dickerson 2008). Notwithstanding, an extreme amount of stress can adversely affect the efficient functioning of the human body and the academic life of the individual (Anderson, 1998), and these can be short term or long term (Lupien, Maheu, Tu, Fiocco, & Schramek, 2007).

It is on record that significant amount of stress affects learning leading to low academic performance among students (Lupien, Maheu, Tu, Fiocco, & Schramek, 2007). The condition may lead to adverse health effects (Guglielmi&Tatrow1998; Bruno & Frey, 2006), such as high blood pressure, coronary heart disease, weight gain or loss, heart attack, (Bruno & Frey, 2006; Wu, Li, Wang, Wang, &Huangyuan, 2006). In addition, it can result in frequent and severe headaches, chest pain, muscle aches (Bruno & Frey, 2006) personal and relationship problems (Hughes, 2006). In severe cases the phenomenon may lead to reduced students' self-esteem, mental illness, depression, and suicide (Baca-Garcia, Parra, Perez-Rodriguez, Sastre, Torres, Saiz-Ruiz, de Leon, 2007; Pryjmachuk& Richards, 2007). Despite the dire consequences of stress experienced by students with disabilities in tertiary institutions in Ghana, the population of students with disabilities in some public universities in Ghana has witnessed a steady increase over the last decade.

Education for Persons with disabilities in Ghana

Before 2015, the education system in Ghana based on segregation. At the Basic school level pupils with disabilities were separated and educated in special schools. Basic school in this context refers to kindergarten, primary and junior high school. Unlike the basic schools, at the secondary and tertiary levels however, students with disabilities have been educated in an inclusive environment (Gyasi & Hayford, 2017; Hayford, 2013). Interestingly, none of the integrated institutions has introduced the necessary adaptations to their facilities, environments and curricula to enhance the participation of students with disabilities (Gyasi & Hayford, 2017, Hayford, 2008; Subbey & Avoke, 2008).

The concern at the university level is not different. Ghanaian universities have remained inaccessible and restrictive learning environments for individuals with disabilities. Some researchers in Ghana have noted that the most critical of all barriers to education are negative attitudes and prejudice (Subbey & Avoke, 2008). Negative attitudes and prejudice persistently affect people's perceptions about individuals with disabilities, which subsequently pose serious barrier to their social and education inclusion (Agbenyega, 2005; Avoke, 2002; Oliver-Commey, 2001; Aubbey & Avoke, 2008). Notwithstanding Ghana adopted the inclusive education paradigm in 2015, very little is done to provide requisite adaptations to facilities, environments, and curricula to enhance the participation of students with disabilities in educational institutions and, in particular, the universities in the country. Surprisingly, the universities continue to implement their own operational guidelines, which are not guided by the national policy to ensure uniformity, consistency and effectiveness (Hayford & Asare, 2011). In the circumstance,



students with disabilities continue to experience many challenges as they learn in the mainstream educational institutions in the country.

The Context of the Study

The phenomenon under study was a typical one, which could be conducted at any of the eight traditional public universities in Ghana but College of Technology Education, Kumasi; a satellite campus of University of Education, Winneba (UEW) was selected as the research site. UEW is one of the public universities in Ghana and over the years have admitted and trained persons with disabilities in various degree programmes. Apart from that, the university continues to increase the in-take of disabled students and currently seems to have the highest number of disabled students pursuing degree programmes. It's worth noting, most of the infrastructures at the College were built several years ago before the passage of disability law in Ghana. Although the college management is making modest effort to provide a disability friendly university environment, not much has been done.

Objective of the study

This phenomenological study was therefore conducted to explore the factors that expose students with disability at the University of Education, Winneba and coping strategies these students can adopt to enhance their participation in academic and social activities in the university. Particularly, the study sets out to describe the causes of stress among students with disabilities; examine the influence of stress on the students' academic and social life; analyse students' stress coping strategies and make recommendations for improvement.

The following research questions guided the study:

- 1. What are the sources of stress for students with disability at the University of Education, Winneba?
- 2. What stress coping mechanisms can students with disability at the University of Education, Winneba adopt to enhance their participation in the social and academic life on campus?

Theoretical Framework

As you might have experience yourself at times, the transition from one level of academic ladder to another involves changes that can be quiet stressful. Yet, just when you figure out the challenges in the school environment and develop an effective system to succeed in the midst of the challenges, it graduates after a few years to another level. Now, you must master a whole different set of rules and behaviours in order to succeed in the new school environment. Stress can become most intense in an attempt to adjust and cope in the new environment.

This study was grounded on the transactional model of stress. The transactional model of stress was develop by psychologist Richard Lazarus(1991). The theory shed light on the mechanisms

through which changes in a person's life and environment can result to either subjective stress or a source of euphoria. The theory places great emphasis on the importance of what Lazarus called 'cognitive appraisal' in the stress response. This means that stress is the result of a transaction between an external event and an internal event, the mediator between the two is the cognitive appraisal or interpretation of the event as stressful or not.

According to the theory, in order for the stress response to be evoked, there are two separate but related cognitive events. They are primary appraisal and secondary appraisal. The primary appraisal process identifies the nature of the environmental demand on a person (student) or the relationship between the event and student's personal goals. The initial perception of the event can be plotted along a continuum, depending on the extent to which the situation is viewed as dangerous or benign (Lazarus 2006). This means that the demand of university education on students may be considered by student with disability as a dangerous or manageable depends on the individual student's interpretation. The secondary appraisal on the other focuses the adequacy of resources of the individual to deal with the challenge. This means secondary appraisal involves the individual assessment of his / her resources (internal and external) to mitigate with the challenge confronting him or her.

For instance, in the university's students hand book, (UEW) all students (those with or without disability) are expected to attend lectures (environmental demand) to qualify to write the semester exams and subsequent graduate with a degree certificate (goal). A student with physical disability may view moving from his /her hall as benign or less stressful if he/she has very reliable means of transport (electronic wheel chair).But to another student without a reliable means transport, may consider the situation as stressful.

In conclusion, this study focuses on the stress and coping mechanism adopted by students with disability. Based on the transactional theory of stress, students with disability at the university may experience various levels of stress which is dependent on their perception on the demands on a university student and the resources they have to deal with the challenge. Therefore the levels of stress experienced by a student with disability in the University of Education, Winneba may vary from student to student.

Sources stressors students with disabilities

Students with disabilities in several inclusive schools at any level are confronted with conditions that exposed them to stress (Henderson & Bryan, 2004). Those pursuing a university education may face increases in stress in trying to circumvent the barriers existing on the university campuses (Holloway 2001; Stecker, 2004; Soorenian, 2013). Scholars have revealed that the cause of stress among students with disabilities is more of institutional.

According to Brown & Ralph, 1999; Simons, Aysan, Thompson, Hamarat, & Steele 2002, students with disability at university are faced with three main institutional stressors that affect their daily life. First, inaccessible physical structures such as lecture halls, library, and

halls of residence possess stress to students with disability (Opini, 2012, Author's, 2017). Secondly, the nature of the teaching approaches used, the kind of learning materials available and the academic assessment procedures used in the university increases stress among students with disability (Holloway 2001). Thirdly, social, stress in people with disability result from interactions between persons with disabilities and students without disability, lecturers and administrators (Awino & Agolla, 2008; Author's, 2017; Ramakuela & Maluleke, 2011). Therefore, to preserve psychological well-being of the students with disability and encourage their higher academic achievements, it is critical for these students to be able to effectively deal with the stress associated with academic work and social life at university (Jani, 2009).

A study on the incidence of stress among persons with disabilities at the University of Education, Winneba, and the pacesetter in the provision of university education to persons with disabilities was significant because the findings provided empirical data on stressor and stress coping strategies to person with disabilities in the university. Besides, the findings have the potential of assisting the counselling service unit of the university to structure their programme to the need of all students with disabilities. The study could be replicated in other universities across the country to improve access to all persons

Stress Coping Strategies

Stress is a very real problem in the lives of people today. It affects the lives of every individual and comes in various forms. To be frank, it is general knowledge that high stress levels can be a sign of future health problems in individuals (McEwen & Gianaros, 2010). When people get stressed out they tend to turn to various strategies to ease the pressure on their minds and bodies. One of such strategy is mindfulness-based stress coping strategy. Mindfulness strategy is now receiving increasing attention, not only for those who wish to prevent debilitating anxiety but also those who wish to treat serious illnesses such as cancer (Smith, Richardson, Hoffman, & Pilkington, 2005), chronic pain (Kabat-Zinn, 2003), and depression (Segal, Williams, & Teasdale, 2013). Such mindfulness techniques have even been shown to be effective in helping health professional's deal with the stress associated with their work (Shapiro, Astin, Bishop, & Cordova, 2005). It's worth noting, there is nothing simpler than meditation, and nothing more difficult, "Meditation is not about trying to get anywhere else. It is about allowing yourself to be exactly where you are, and as you are, and for the world to be exactly as it is in this moment as well" (Kabat-Zinn, 2005:61). Apart from visual imagination, which involves closing of the eyes and seeing objects in their imagination (Chen, 2017), there is also a walking meditation (Hanh, 2005). According to Hanh (2005) you really can meditate while you are walking. This is not intended, however, to get you where you want to go, and get your meditation session in at the same time. In fact, the intention is not to "go" anywhere at all (Hanh, 2005).

Secondly, Koenig (2009) explains that "healthy normative" religious beliefs and spiritual practices are associated with better coping with stress and less depression, suicide, anxiety, and



substance abuse. He also points out that in the emotionally vulnerable, people resort to religious beliefs and doctrines to reinforce neurotic tendencies, through prayers to eliminate fears or guilt, and restrict negative thoughts. Besides, religious beliefs provide a sense of meaning and purpose during difficult life circumstances that assists with psychological integration; they usually promote a positive world view that is optimistic and hopeful; they provide role models in sacred writings that facilitate acceptance of suffering; they give people a sense of indirect control over circumstances, reducing the need for personal control; and they offer a community of support, both human and divine, to help reduce isolation and loneliness (Sheler, 2004, Szegedy-Maszak, 2004) . Unlike many other coping resources, religion is available to anyone at any time, regardless of financial, social, physical, or mental circumstances.

People also manage their stress with music. Music is an art of sound that expresses ideas and emotions in significant forms through the elements of rhythm, melody, harmony, and color (Alpert, 2010). It has been a part of mankind for thousands of years. Throughout time it has been used for religious, societal, and cultural purposes. In the management of emotional and psychological conditions, music was used to both increase nervous system activity in the body, as well as relax it (Iwanaga, Kobayashi, Kawasaki, 2004; Jeppe 2006). Commonly, the type of music thought to relax people was sedative music; sedative music entails anything considered soft, romantic, soothing or an individual's personal choice of music. In contrast, it was thought that music used to stimulate nervous active response was loud, fast, disruptive, or "explosive." However, studies have shown that individuals receive a more relaxing effect from music that they individually prefer. (Iwanaga, Kobayashi, Kawasaki, 2004). It has been shown that music, which has a relaxing effect, reduces heart rate. This heart rate reduction is more prominent in people as they become more exposed to that particular type of music or song (Iwanaga, Kobayashi, Kawasaki, 2004). Music, however, has been shown to have a strong relaxation effect regardless of the type when exposure to that type of music is repeated; "differences between sedative and excitative music narrowed through repetitive exposure" (Iwanaga, Kobayashi, Kawasaki, 2004). This means that while music can have both excitatory and relaxing effects, it can be used as a relaxing agent regardless of the type. Music is a universal relaxation tool for the human body that just requires repetition regardless of the type of music. However, this doesn't change the fact that individually preferred music will have a faster and stronger initial relaxation effect upon a person.

In addition, people resort to regular physical exercises to deal with their stress condition. There are several positive effects of physical exercise on stress management. In the biological adaptations hypothesis, it is theorized that increased physical functioning and more efficient metabolism improve all the systems of the body including those that regulate mood (Jackson, Morrow, Hill, & Dishman, 2004). These adaptations include increament in body warming, brain blood flow, and endorphins; a more efficient regulation of pituitary-adrenal stress hormones; and changes in the autonomic nervous system, brain noradrenalin, and brain serotonin. These exercise-induced biochemical enhanced recovery time from stress and more healthy behaviour such as healthy eating habits during stressful times (Gerber & Pushse, 2009). Also, psychosocial

hypothesis (Ekeland, Heian, & Hagen, 2005; Fox, 2000), proposes that exercise alters the perceptions that people have about themselves and their abilities. Once you become adept at tolerating the discomfort, as well as demonstrating the self-discipline involved in dedicating yourself to the activity, this can improve your confidence in a host of other areas. This enhanced self-confidence and self-esteem will have a positive influence on your ability to manage stress and thus maintain good health. The good news is that it doesn't take a lot of exercise to make a difference in your life, especially in terms of stress control. In a series of studies on the effects of jogging or brisk walking on depression, it was found that regular exercises can sometimes work as effectively as antidepressant drugs (Servan-Schreiber, 2004). Furthermore, those who had begun walking or running were much more likely to sustain the improvement over those who had been taking drugs alone. It doesn't seem to matter which exercise you choose; the important thing is to make exercise a regular habit—a structure that is non-negotiable.

Methodology

Phenomenological study aimed at uncovering the lived-experiences of people. Phenomenology lends itself to 'naturalistic generalisation', not 'scientific generalisation', as a survey does (Denzin & Lincoln 1994; Finlay, 2011). As earlier noted, the aim of conducting this study was to provide a better understanding of the phenomenon under investigation at the University of Education, Winneba in Ghana. Nevertheless, because the phenomenon was a typical one (Denscombe, 2003), there is the possibility for readers to transfer the outcomes to their individual contexts, if they identify commonalities between their contexts and that of this particular study.

A sample of 18 undergraduate students with disabilities was purposively selected by the researchers through maximum variation sampling technique. A maximum variation sample was constructed by identifying key dimensions of variations and then finding cases that vary from each other as much as possible. The researchers employed maximum variation sampling to ensure fair representation of participants with various characteristics in the study (List, 2004; Speziale& Carpenter, 2007). As stated earlier, the technique allowed for fair representation of participants from three disability categories (visual impairment, hearing impairment and physical disability), at three different levels (100, 200, & 300) and gender. The level refers to the year group, 100 is the first year, 200 is the second year and 300 is the third year, respectively. The use of maximum variation sampling allows for the generalization of findings to the study population (List, 2004).

Data was collected through face-to-face session with semi structured interview guide and analysed with thematic approach. The researchers adopted 'horizontalization', which is based on the Gestalt-Phenomenological perspective that emphasizes the assumption that all parts of a description "*are related to each other and that one cannot understand the relationship between the parts unless one goes through the entire description at least once*" (Giorgi, 1989: 48), in the analysis of data from the participants, transcribed data from each participant was read through in



order to get a sense of what was said, the researchers made notes and codes in the margins to identify potentially relevant indicators of students' experiences.

RESULTS

Three broad themes were extracted from the data from the participants: Sources of Stress and coping strategies.

Sources of Stress

Three sub-themes were extracted from the data from the participants on the sources of stressors fear of withdrawal from the university, discrimination from colleagues without disability and feeling of self-pity for oneself.

Fear of withdrawal from the university

The predominant source of stress among students with disability at the university was the fear of withdrawal from the university. According to the data, the fear was due to the nature of learning materials available to students on the campus. It emerged that most of the teaching and learning materials available to students at the university do not meet the need of every student especially those with some disabilities. All students compete to study with similar teaching and learning material in order to meet the academic standard of the university, this expose most students with disability to stress. Specifically, the participants with visual impairment vehemently complained about lack of brailed handouts, textbooks, charts and maps. The hearing impaired participants added that inadequate sign language interpreters and note takers were their sources fear but to the physically challenged, inaccessible lecture halls was their concern. Besides, the teaching materials used by some lecturers, such as using of diagrams, charts or maps to teach increasingly expose some of the participants to stress. Some of the comments from visually impaired participants were:

...all my handouts and textbooks are in print because of this, I always depend on my sighted friends to read to listen and record. Sometimes during exam time, I find it very difficult to get a colleague to read what we were asked to read for exams. This disturbed me a lot because of the university law if you fail two or three courses you can be withdrawn"

"I become very frustrated any time I go for lectures and most of the teaching was done with diagrams, charts or maps. This is because I cannot see, I am always disadvantaged. My recorder cannot take the voice of the tutor".

Furthermore, the unfriendly nature of some of buildings on the campus to most of the students with disability, poses challenges to their studies and therefore exposed them to stress because of their fear of being redrawn. With the nature of the buildings, some of the high buildings were without elevators or ramps for students in wheels to easily access. Some of these disability

unfriendly buildings include lecture halls/theatres, library, other buildings which have direct impact on the studies of students. Students using wheelchair and crutches, are carried by their colleagues to enable them access some of these buildings. As a result of the inconveniences, some students with disability did not use such disability unfriendly buildings. For example, a Participant using wheel chair indicated...' *I do not go to the library because is better for me not to go than to face the embarrassment of being carried to the room*'.

Discrimination from colleagues without disability

Another prominent theme was discrimination against students with a disability which was equally experienced by more than half (11) of the 18 participants. The discrimination was in regards to both in academic and social life on the campus. In their academic life on campus, some of the participants revealed that their 'abled' course mates did not want them to join their study group and in times of doing group assignments; it was difficult to be accepted in a group.

"...even though I wished to be part of at least one of the discussion groups in my class, none of them was ready to accept me. As if that is enough, I find it difficult to get a group to join. In most cases, I do such assignments alone. Some of my course mates would openly tell you, we do not want any disabled person in our group. (Female visually impaired-3)

With regards to social life, most of the participants were of the view that some social activities such as sports and games, departmental association get-to-gather, music and dance, hall week celebration were planned with little or no consideration for students with disability. These to some of the participants prevented them from participating, although they wished to, as indicated by participant1 1 (hearing impaired) '...I hardly hear of social programmes on campus. If you go there too, there is no provision of interpreter so it is difficult to participate.

Feeling of self-pity for oneself

Participants' feeling of self-pity for oneself was another theme that emerged. Seven (7) of the 18 participants indicated they normally felt bad and self-pity, because of their inability to cope with day-to-day campus life.

"Sometimes, I felt very bad and pity myself for coming to school. Virtually every day I am challenged with the barrier of the other. I find it difficult to move any place without someone directing me. If I do not fall into the gutter, I will hear people shouting, hey! Hey!! 'Blind person' you will fall in gutter, besides, I have to be begging people to read handouts for me to record. In fact, sometimes I felt very bad." Participant 4 (visually impaired)

"... For how long will I continue to be carried like a baby on the back of people in order to attend lectures or visit the library? Why can't I access these places independently? Who even asked me to come to university? Why can't I move freely like my colleagues? When I think about all this, I felt very bad." Participant 10 (student in a wheelchair)

Coping strategies adopted by students with disabilities

When asked how they coped with these stress and continued to be students of the university, participants indicated a number of coping strategies. The data revealed that all the participants used more than one coping strategy. Sixteen (16) out of 18 participants indicated they coped with their stressors through faith in God; fourteen (14) of them have coped through self-determination to attain a degree, while ten (10) of the participants coped through the support of relatives and peers.

Faith in God

The first and major coping strategy according the data was the dependence on divine intervention from the Almighty God. Participants who utilized the above coping strategy described it in a number of ways as follows:

"....without God, there is absolutely nothing I can do. I have entrusted everything to his hands through prayers and have faith in him. He renewed my strength on a daily basis. In him alone I trust. He is keeping me all this while". (Participant 1)

"I am able to cope because of God. The Lord is my strength and everything. He has never forsaken me in any situation. I pray on daily basis for strength and guidance and he has been so good to me. Without him I am nobody." (Participant 4)

"I am passing through these challenges; the only thing that keeps me going is prayer. I have left everything in God's hands and allowed him to do with me whatever he wanted to. This faith had made me to accept the situation the way it is and I currently have an inner joy in the Lord.(Participant 16)

Theme two: Self-determination to attain a degree

Another coping strategy that emerged was self-determination to attain a degree.

"I am also determined to have a degree. Although sometimes it is not easy, I have vowed never to give up. No matter what, I must also be a graduate. After all, I have qualified from senior high



school where the story was not much different. It is not by accident that I got admission and have been among the best students in my class now. I cannot imagine how excited I will be on my graduation day." (Participant 3)

"The challenges of this school are very frustrating, but I cannot compare it to a degree certificate that awaits me. The joy that I will receive a degree certificate at the end of these challenges alone sometimes makes me forget about the existence any challenge. Also, though I cannot see, I am in the final year. Even people who have their two eyes in good condition were dismissed in the first year, others too in the second year, because of poor academic performance. I have come to this far, and I strongly believe what is left is just a small thing." (Participant 12)

Support from relatives and peers

Ten out of eighteen (18) students with disabilities coped with their stress due to the support they get from relatives and friends.

"... Without the support of my relatives and friends, I would not have come to this far. Sometimes I get frustrated and almost give up but through their encouragement, I get relieved. On campus, I have a friend who has been helpful to me." (Participant 14)

"I have been coping because of my friend and a course-mate. He has been so good to me in all aspects of life on this campus. When I am down, he encourages me, guide me to move around, as well read handouts and textbooks for me to record. His commitment to me has been my source of inspiration." (Participant 4)

Discussion

Students with disabilities in several inclusive schools at any level are confronted with conditions that exposed them stress (Henderson & Bryan, 2004). Those pursuing a university education are faced with increase stress in trying to circumvent the barriers in the university campuses (Holloway 2001; Stecker, 2004; Opini, 2012; Soorenian, 2013). Stress in people with disability results from interactions between persons and their environment that are perceived as straining or exceeding their adaptive capacities and threatening their well-being. University education is such a stressful experience. Although moderate stress seems to facilitate performance, excessive stress can become debilitating (Selye, 1983). In the present study, apart from finding out how participants coped with stress, the sources of this stress in the university environment were also explored.

Students with disabilities were faced with numerous institutional stressors that affected their daily life (Brown and Ralph, 1999; Simons et al., 2002; Lo, 2002). These institutional level

stressors included physical structures (lecture halls, library) social life, inadequate resources to perform academic work, attitudes of non-disabled peers, lecturers and administrators' attitude towards students with disability as well as financial difficulties experienced by the students (Erkutlu& Chafra, 2006; Awino& Agolla, 2008; Ramakuela& Maluleke, 2011). In the present study three themes emerged as the sources of stress for students with disabilities at the Kumasi Campus. The most expressed one was the fear of being withdrawn from the university, as revealed by 15 out of 18 participants. Most of the participants pointed to their difficulties in accessing the learning materials available to all students, teaching methods of some lecturers and unfriendly nature of some learning facilities which exposed them to stress in their attempt to compete with their colleagues with no disability for the same university standard.

Closely related to the fear of being withdrawn from the university was discrimination against students with disabilities on campus. Eleven (11) of the participants revealed they experienced various degrees of discrimination from their colleagues. The participants indicated that in the quest to fully participate in both academic and social activities on the campus, most of their colleagues without disability reject them in their groups. Besides the discrimination, another theme that emerged regarding students with disabilities' sources of stress was the feeling of self-pity for oneself. Seven (7) out of eighteen (18) participants indicated they were feeling extremely bad and pity themselves to had come to the school as a result of the daily difficulties they experienced. Participants made their primary appraisals of these conditions at the Winneba Kumasi Campus as a challenge, harm and threat to their lives and effective academic experience. In order for these students to preserve their psychological well-being and encourage their professional achievements, Koko (1980) and Hughes (2006) were of the view that it is critical for students to proceed to secondary appraisal, which enables them to adapt various coping strategies to meaningfully adapt to the situation.

With regard to the participants coping strategies, three themes again emerged. Most prominent among them was faith and dependence on God for strength. Sixteen (16) out of eighteen (18) participants adopted these coping strategies. This, according to the participants, enable them acquire supernatural strength and joy from God on a daily basis through the reading of his holy word and prayer. In support Baldacchino and Draper (2001) asserted that spirituality which involves having good relationship with God and depending on him is a coping strategy which helps individuals to cope with their predicament. Furthermore, self determination was another theme with regard to participants coping mechanisms. Fourteen (14) out of eighteen (18) participants added that they make use of these coping strategies to cope with stress. Participants expressed that regardless of their challenges, they were determined to successfully complete and receive a university degree. The desire of being awarded with degree and the prestige associated with it seems to be intrinsically motivating some of the participants to cope with their stress. In view of this Cudjoe (2006:41) added that "self-affirmation challenges conventional wisdom" that disability is inability or disabled people are different. Field, Sarver and Shaw (2003) argue that

self-determination is a central organising concept in evaluating post-secondary programmes for students with disabilities. Besides having faith in and dependence on God and self determination, another theme that emerged on the coping strategies was the support from relatives and peers. In all, ten out of 18 participants also were coping with their stress due to the support they received from their relatives and colleague students. This support, according to the participants, includes financial, encouragements and support in their day-to-day activities as students. This finding is similar to what Hasler (2003) reported that peer support as a means of receiving encouragement and guidance from other disabled and non- disabled persons, acts as a facilitating impact of peer support in helping disabled people as a group to combat negative social attitudes as well as developing their self-belief as individuals. It is worthy to note that none of the participants adopted only one coping strategy in coping with their stress, but rather, some depended on the three strategies identified and others used two of them. The dependence on two or more coping strategies was an effort to achieve coping flexibility (Lewis et al., 2004)

Conclusion and Recommendation

It was evident in this study that students with disability at University of Education, Winneba experiences stress as students from various sources. Three sources were identified, namely; fear of being withdrawn from the university, discrimination from students without disability and feeling of self pity. Most participants appraised the sources as harm, danger and challenge which have negatively impacted them and as such, the need to adopt strategies in order to cope. In this study, participants used both emotion-focused coping mechanisms through; faith and dependence on God, support from relatives and peers, and problem-focused as in selfdetermination to attain a degree certificate.

Based on the findings, it was recommended that the university management should institute policies that will ensure disability friendly campus, guidance and counselling services should be easily accessible to these students, as well as intensive education of students and staff on issues of disability.

References

- Anderson, N.B. (1998). Levels of Analysis in Health Science: A Framework for integrating Socio behavioural and Biomedical Research. Annals of the New York Academy of Sciences, Vol. 840, pp563 - 576
- Awino, J.O. &Agolla, J.E. (2008). A quest for sustainable quality assurance measurement for universities: case of study of the University of Botswana, Educ. Res. Rev. 3 (6): 213-218.
- Baldacchino, D. & Draper, P. (2001). Spiritual coping strategies: A review of the nursing research literature. *Journal of Advanced Nursing*, *34*(6), 833-841.



- Bruno, L. C.& Frey, R.J. (2006). Stress reduction. (stress management methods) (Medical condition overview). *Gale Encyclopedia of Medicine*.
- Brown, M. & Ralph, S. (1999). Using the DYSA programme to reduce stress and anxiety in firstyear university students. *Pastoral Care in Education*, 17(3), 8-14.
- Baum, A. (1990). Stress, Intrusive Imagery, and Chronic Distress. *Health Psychology, vol.6 pp.* 653-675.
- Creswell, J. W. (2005). *Educational Research: planning, conducting and evaluating quantitative and qualitative Research*, New Jersey, Pearson Education.
- Dickerson, K. L. (2008). *Stress and self-efficacy of special education and general education student teachers during and after the student teaching internship*. Ph.D. thesis. Office of Graduate Studies of Texas A&M University.
- Doumit, Huijer& Kelley (2010). Coping with breast cancer: Phenomenological Study *Journal Cancer Nursing*.33 (2): 33-39.
- ErkutluH.V. & Chafra, J. (2006).*Relationship between leadership power bases and job stress of subordinates: example from boutique hotels*, Manage. Res. News 29(5): 285-297.
- Field, S., Sarver, M. & Shaw, S. (2003). Self-determination: A key to success in postsecondary education for students with learning disabilities. *Remedial and Special Education*, 24(6), 339-349
- Finlay, L. (2011). *Phenomenology for Therapists: Researching the lived world*. UK: A John Wiley & Sons, Ltd., Publication.
- Folkman, S., Lazarus, R.S., Dunkel-Scheter, C., (1986). Dynamics of a stressful encounter: Cognitive appraisal, Coping and encounter outcomes. *J. Pers. Soc. Psychol.* 50:992-1003.
- Fuller, M., Bradley, A., &Healey, M. (2004). Incorporating disabled students within an inclusive higher education environment. *Disability & Society*, 19(5), 455-468.
- Garret, J.B. (2001). Gender differences in college related stress. Undergraduate Journal of Psychology, 14
- Gugliemi, R. S., &Tatrow, K. (1998). Occupational stress, burnout, and health in teachers: A methodological and theoretical analysis. *Review of Educational Research*, 68(1), 61-99.

- Hasler, F. (2003). Philosophy of independent living. Available at http://www.independentliving.org/docs6/hasler2003.
- Henderson, G. & Bryan, W. V. (2004). *Psychosocial aspects of disability* (3rd ed.). Springfield, IL: Charles C. Thomas.
- Holloway, S. (2001). The experience of higher education from the perspective of disabled students. *Disability and Society*, *16*(4), 597–615.
- Hughes, J. C. (2006). Teacher stress, teacher efficacy, and standardized testing: A study of New York City public school teachers. *Dissertation Abstracts International*, 67(03), (UMI No. 3210270).
- Jani, J. M. (2009). A Comparative Analysis of Stress and Management Problems (With Reference to Gujarat State), thesis PhD, Saurashtra University.http://etheses.saurashtra university.edu/id/eprint/111.
- Kamarudin. R, Aris. A & Ibrahim. N. A. (2009). Stress and academic performance: a study among pre-science students in uitmnegeri Sembilan. Conference on scientific social research.
- Lewis,L.S., Heitkemper, M.C., Dirksen,S.R, O'Brien,G.P., &Bucher, L. (2007).*Medical-Surgical Nursing: Assessment and Management of Clinical Problems*. St Louis. Mosby-Elsevier.
- Li, J., &Lambert.V. A., (2007).Coping strategies and predictors of general wellbeing in women with breast cancer in the People's Republic of China *J. Nurs. Health Sci.* 9(3):199-204.
- List, D. (2004).Maximum variation sampling for surveys and consensus groups. *Adelaide: Audience Dialogue*. Available at www.audiencedialogue.org/maxvar.html.
- Lupien, S. J., Maheu, F., Tu, M., Fiocco, A., &Schramek, T.E. (2007). The effects of stress and stress hormones on human cognition: Implications for the field of brain and cognition. *Brain and Cognition*, 65, 209-237.
- Lazarus R.S., & Folkman S (1984). Stress, Appraisal and Coping. New York: Springer.
- Opini, B. (2012). *Experiences of Women students with disabilities in Kenyan Universities*. Nsemia Inc. Publishers.
- Oxford Dictionary English to English -2002.Oxford Press.
- Oxford Dictionary English to English and Latin 2005.Oxford Press



- Ramakuela, N.J. & Maluleke, T.X. (2011). Students' views regarding the social and learning environment of disabled students at University of Venda, South Africa. *African Journal for Physical, Health Education, Recreation and Dance,* 2(1): 285-294.
- Ross,S.E., Neibling, B.C., &Hecket, T.M. (1999). Sources of stress among college students. College Student Journal, 33(2), 312-317.
- Schmidt, P. (2009). Colleges seek key to success of Black men in the classroom. Education Digest: Essential Readings Condensed for Quick Review, v74 n7 p4-9.(EJ857667).
- Simons, C., Aysan, F., Thompson, D., Hamarat, E. &Steele, D. (2002). Coping resource availability and level of perceived stress as predictors of life satisfaction in cohort of Turkish college students. *College Student Journal*, 36(1), 129-141.
- Soorenian, A. (2005). An Investigation into the Impact of Disability Arts on Disabled Community At Large. School of Sociology and Social Policy. University of Leeds.
- Stecker, T. (2004). Well-being in an academic environment. *Medical Education*, 38(5), 465-478.
- Tung, H.H., Hunter, A, &Wei JC (2008). Anxiety and Quality of life after coronary artery bypass graft surgery. J. Adv. Nurs. 61(6):651-663
- Vitaliano, P.,& Russo, J.C., (1985). The ways of coping Checklist. Revision and Psychometric properties. *Multivariate Behav. Res.* 20:2-36.
- Wu, S., Li, J., Wang, M., Wang, Z. &Huangyuan, L. (2006). Short communication: Intervention on occupational stress among teachers in the middle schools in China. *Stress and Health*, 22, 329-336.
- Zakowski, S.G., Hall, M.H. Klein, L.C. & Baum, A. (2001). Appraised control, coping, and stress in a community sample: A test of the goodness-of-fit hypothesis. *Annals of Behavioral Medicine*, 23, 158-165.