CLASSIFICATION OF LIFE SKILLS: INTELLECTUALLY DISABLED CHILDREN

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Abstract

Children with intellectual disability are commonly described as being “clumsy” and with poor motor coordination, difficulty in both fine and gross movements and motor planning. The combination of cognitive and long-standing sensory-motor deficits generally causes a variable degree of upper limb disability, which impairs even common activities of daily living, such as grasping small objects or the hand-finger movements. In addition, these patients tend to have a greater prevalence of physical decline compared to the aged general population, especially in terms of motor speed and accuracy of purposeful movements (Hilgenkamp, Reis, R. Wijck, and Evenhuis, 2012).

Key Words: Life Skills, Intellectual Disability, Generic, Specific

The types of psychosocial skills that have been discussed are usually considered to be universally relevant and applicable to all individuals (implicitly taken as independent of social and cultural contexts) to enable them to deal with the challenges they face, and to participate fully and productively in society. They are considered generic and empowering in their own right.

A number of other areas of study that may have been absent from formal schooling but have been recognized as important have become associated with life skills in educational interventions, including, for example, citizenship, personal health, human rights and equality. Knowledge in these areas can also be considered as universally applicable to both developed and developing countries and to all social classes and cultures.

In short it appears that life skills can be divided into two main types, namely:

(1) **Generic Life Skills (GLS)**, and
(2) **Specific Life Skills (SLS)**.

Each type of skill can be divided into several sub skills. Generic life skills consist of personal skills and social skills. Personal skills include proficiency in understanding oneself (self awareness skills) and thinking skills. Proficiency to know ourselves basically is an appreciation of us as an independent person, as a member of society and citizens, as well as to realize and appreciate the strength and limitation that can be used as an asset in improving ourselves as individuals that are beneficial to the environment. Proficiency thinking skills include the skills to identify and find the information, process, and make decisions, and solve problems creatively. The social skills include communication skills and proficiency in collaboration (collaboration skills).

<table>
<thead>
<tr>
<th>LIFE SKILLS</th>
<th>Generic Life Skills</th>
<th>Personal Skill</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Social Skill</td>
<td></td>
</tr>
<tr>
<td>Specific Life Skills</td>
<td>Academic Skill</td>
<td>Vocational Skill</td>
</tr>
</tbody>
</table>

These are the positive behavior for the intellectually disabled children that have to or need to be trained for successful personal and social living. All the intellectually disabled children show deficits in some skill behavior. This means that they perform poorly on certain tasks which normal children of their own age can do easily. Intellectually disabled child can do or cannot do particular tasks, depends on various factors such as severity of intellectually disability, opportunity provided for training, associated conditions (Peshawaria & Venkatesan, 1992). The various skill behaviors can be broadly classified into the following domains (Peshawaria & Venkatesan, 1994):
1. **Personal Skill**

   **Motor activities:** Climbs up and down stairs, runs, skips, jumps, rides a bicycle, unscrews a bottle lid, pours liquid from one container to another without spilling, etc.

   **Activities of daily living:**
   a. Eating, drinks from cup or glass, eats with own hands, mixes rice on own, etc.
   b. Toileting: Indicates toilet needs, washes self after toilet use, etc.
   c. Brushing: Brushes teeth, spits paste, rinses mouth, etc.
   d. Bathing: Pours water on self, washes face, applies soap, etc.
   e. Dressing: Undresses on own, puts on shirt, buttons, unbuttons, etc.
   f. Grooming: Applies powder, combs hair, clips nails, etc.

2. **Academic Skill**

   **Language:** This includes,
   a. Receptive language: Points to pictures in a book, arranges pictures after listening to a story.
   b. Expressive language: Uses two word phrases, names common objects in use.

   **Reading and writing:** Reads sight scribbles with pencil or writes address, etc. words, and reads own name, chalk, writes own name.

   **Number and time:** Rote counts fill five, counts five objects meaningfully, adds single digit numbers, names or identifies numbers on the clock; names, identifies day, date and months of year.

3. **Social Skill**

   **Domestic and social work:** Washes utensils, dries clothes, greets guests with a 'Namaste', says 'thank you' or 'please'.

4. **Vocational**

   **Prevocational, Vocational and money:** Does simple embroidery work, uses screw driver, recognizes values of coins, adds or transacts money.

Children with intellectual disability are commonly described as being “clumsy” and with poor motor coordination, difficulty in both fine and gross movements and motor planning. The combination of cognitive and long-standing sensory-motor deficits generally causes a variable degree of upper limb disability, which impairs even common activities of daily living, such as grasping small objects or the hand-finger movements. In addition, these patients tend to have a greater prevalence of physical decline compared to the aged general population, especially in terms of motor speed and accuracy of purposeful movements (Hilgenkamp, Reis, R. Wijck, and Evenhuis, 2012).

Students with disabilities are at risk for diminished social skills. As a result of this deficit, their ability to successfully navigate their personal and educational environments may be negatively impacted. Social skills are those skills or behaviors that are perceived and positively reinforced by others as socially acceptable and then therefore lead to the avoidance of socially awkward situations (Johns, Crowley, & Guetzloe, 2005). It has been suggested that while an academic disability in the classroom may not be evident on the playground, difficulties with social skills impact a student wherever they may go (Snider & Battalio, 2011).

According to Johns et al (2005), teaching social skills can involve various instructional methods.

1. Direct instruction identifies a specific student, a particular skill, and then instruction is delivered, progress is monitored, and opportunities are provided to use that skill across various environments.
2. Another strategy for teaching social skills is taking advantage of the teachable moment where a socially awkward moment is addressed with immediate feedback in a constructive manner.
3. A third strategy is for the teacher to model appropriate social skills for the students, and to check for understanding.
4. A fourth strategy suggested is recognizing or acknowledging when a student displays appropriate social skills and providing positive feedback.
5. A fifth strategy is to have students participate in group projects that emphasize working together on social skills such as giving and receiving a compliment, and how to express thankfulness. Additionally, instruction in conflict resolution will benefit students as they interact in a social world.

The rationale for social skills training is predicated on its importance for academic and vocational success as well as long-term adjustment (Vaughn, 1985). Social skill deficits may occur either because a skill has not been learned or thus cannot be performed, or because a competing deficit (e.g., anxiety) inhibits the acquisition or performance of a particular social skill. To promote more effective social functioning, a number of structured social skill training programs have been developed.