

# A LINE ON LIFE

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***"Please, I can do it myself!" \****

**David A. Gershaw, Ph.D.**

When we care about people, and especially when they have disabilities, most of us want to help and protect them. This is more likely to occur with children. An example is a 13-year-old client of neuropsychologist Wendy B. Marlow, PhD, a private practitioner in Seattle. Her mother was still dressing her at 13 years of age. The daughter did have disabilities. However, her disabilities were a language disorder and general slowness. Her mother's reasoning was that it was faster than letting her daughter dress herself. Marlow believes that unneeded help like this can foster feelings of inferiority.

*"Children know when you're limiting their opportunities and internalize that notion of incompetence. Children with disabilities need to look at themselves as people who can do, not people who cannot do."*

Another view comes from David Allen Wolfe, PhD, professor of psychology and psychiatry at the University of Western Ontario. Children with *any* problems tend to blame themselves, but those with disabilities may overstate this blame. Parents and others play a crucial role in the way children view themselves. Wolfe believes their self-esteem can be destroyed by suggesting that their disability is their fault.

*"Unless children get a clear message from someone that their disability is not their fault, they will view themselves negatively."*

Schools can affect these children adversely by not responding to their needs. This could involve factors like placing them in classes that are below their ability levels or not having ramps available for children in wheelchairs.

Disabled children can be negatively affected by the reaction of their peers. If rejected by peers who only notice their impairments, disabled children may develop unhealthy coping strategies. They may withdraw, become aggressive, or engage in deviant behaviors.

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**Too often we emphasize what people cannot do,  
rather than what they can do.**

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Parents, teachers and others can focus on the strengths of each child, even though it is easier to emphasize their weaknesses. Suppose a child has a learning disability that keeps him/her from reading well. Depending on the child's abilities, adults can encourage development of skills in sports, music or other academic areas, like math. If children can feel competent in one area of their lives, this feeling can spread to other areas.

As teenagers, handicapped children face additional challenges. Adolescence is normally a stressful period. In addition, handicapped children are often isolated and in pain. During a time of development when looks seem so important, their body deviates greatly from the ideal promoted by our culture.

Kay Harris Kriegsman, PhD, is the co-author of *Taking Charge: Teens Talk About Life and Physical Disability* (Woodbine Press, 1991). She believes there are four basic ways to deal with these problems and foster healthy self-esteem.

- Teach children to relate to other people by emphasizing similarities rather than differences.
- Give them responsibilities, so they can become more competent.
- Give them the freedom to engage the same activities that other children experience.
- Allow them to take some risks, in spite of the threat that is perceived by the adults in their lives.

As a parent (and grandparent) myself, I can recognize the desire to keep our children safe. Whether disabled or not, children need to learn how to do things for themselves. If they do not learn, it leaves them open to greater risks in the future, when we are no longer here to protect them. When learning – or relearning – to walk, children will fall. If we always carry our children, they will not have the pain and injuries from falling, but they will never walk on their own. They can never be aware of their capabilities, unless they can test their own limits. All of us learn from our mistakes. If we are not allowed to make mistakes, we may never learn.

At the other end of the life span, the same lesson applies. As we become elderly, various infirmities develop. Fearing that our beloved oldsters may come to harm, we may do many things for them that they are still capable of doing for themselves. That sends the message that they are no longer competent, so they are more likely to quit trying. Wouldn't it be better to continue to emphasize their capabilities too? Whether others are children or adults – able bodied or handicapped – it helps to yield their request when they say, "*Please, I can do it myself!*"

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\* Adapted from Rebecca Clay's "Adults, peers need help coping with a child's disability," [\*The APA Monitor\*](#), June, 1997, page 35.