

**How to Cite:**

Tripathi, A., & Saranya, T. S. (2022). Issues and challenges of adults with hearing disability: A mixed-method study to compare the deaf and non-deaf adults on social adjustment. *International Journal of Health Sciences*, 6(S3), 5032–5039. <https://doi.org/10.53730/ijhs.v6nS3.7005>

# **Issues and challenges of adults with hearing disability: A mixed-method study to compare the deaf and non-deaf adults on social adjustment**

**Arushi Tripathi**

MA Clinical Psychology, Lovely Professional University

**Dr. Saranya T. S.**

Assistant professor Psychology, Lovely Professional University

**Abstract**--The study was undertaken to apprehend the distinction between adults with hearingability and adults withouthearing ability on social adjustment. Social adjustment is a critical component of adjustment that permits a man or woman to stay in concord with society and social structures. The study attempts to deal with the problems of the listening to disabled in phrases of social adjustment and spot whether or not obstacles in communique have an effect on the adjustment amongst them. To gain the reason of the have a look at, the researcher focused on 60 adults with listening capacity and 60 adults without listening capacity using a random sampling technique. Data that changed acquired the use of demographic sheets and Bell's Adjustment stock found out that there's a widespread distinction between the hearing disabled adults and non-disabled adults in phrases of social adjustment ( $p < .00$ ). and there's a want for intervention amongst deaf adults to enhance their social adjustment. The researchers tried to accumulate the facts the use of the interview technique from the bodily disabled people to attain facts concerning their barriers to communique and social adjustment through the use of signal language.

**Keywords**--hearing disability, social adjustment, communication.

## **Introduction**

Time when we reach adulthood, our process of maturation is completed. Height and weight may increase slightly. Middle adulthood is considered for a slow and gradual reduction in body development which leads to old age. Adjustment

generally starts from 18-19 years. Physical and intellectual maturity has been attained. Which last from the 40s to the 60s. During this time, many physical and psychological changes occur. Erik-Erikson has developed the eight stages of psychological development (adulthood) in which he talks about intimacy vs. isolation. During this stage, an adult person craves relationships, and intimacy formation with other people. During this stage, we begin to share ourselves more intimately with others (Dr. Saul McLeod, 2018). Loneliness is comparatively high in these years because they give more importance to love. Successful completion of this stage can lead to a happy relationship and the virtue of love. Avoidance and rejection in intimacy and love relationships can result in isolation, or sometimes depression. He believed that personal identity is very essential in intimate relationships. A physically challenged person suffers from the impairment/deformity in physical or mental capability to nature foul play or an unfortunate accident. Blindness, deafness, or numbness may occur by birth or by other incidents. It is a part of being human. 15% of the total population in the world is currently facing disability (Disability, World Health Organization).

Disability is not about any physical condition but how it impacts our daily life. Physically challenged people are the most exceptional group in the world. They have poorer health outcomes, lower education achievements, less economic participation, and higher rates of poverty than people without disabilities. Everyone has temporarily or permanently experienced a disability at some point in their life. The difference between handicapped and disabled is that the disabled person is unable to function in the environment. Out of the various disabilities, hearing impairment is one of the commonly known disabilities. Deaf means an individual who is unable to hear and mute means they are not able to speak as well, being deaf and mute is like living with silence. These people have their sign language and can use various signs for communicating. They are completely relying on this language. These people have their separate institutions for learning/education. Each country has its sign language and its meaning (Purva & Vaishali, 2015). Where they can easily interact with other students and can boost their confidence for future benefits. Society has made separate workplaces for them where they meet the same people as them so; they can easily communicate and work properly.

About 90% of the children born to deaf parents can hear. These children are supposed to interact with two different cultural, social, and linguistic systems of the society i.e., the culture and language of the deaf community and the culture and language of the hearing community (Preston, 1995). Sign language is a natural language that the deaf community uses for communication. It includes various gestures made with hand, eye, arms, head, face, etc. each gesture has a meaning. Genetics plays an important role in the life of a deaf child. If both the parents are deaf then, there will be a higher chance of having a deaf child. Genetic deafness is mostly caused by genetic mutation during the period of fetal development. About 20-25% of hearing loss is caused due to environmental causes such as maternal infection during the period of pregnancy, and complications at the time of birth. (Sirjan and Shraddha, 2020) reveals that during birth neonatal septicemia, prematurity, low birth weight, consanguinity, and birth asphyxia are the most common risk for deafness in children. Sometimes, some

medicines are prescribed to the mother during pregnancy that can cause hearing loss in the fetus.

Childhood events and accidents can also cause hearing impairment to the person. Genetics plays a very important role in the practice of medicine. One of the studies reveals that genetics plays a very crucial role in deafness and hearing loss (Simon, Xi, & Xue, 2012). Another study reveals that genetic deafness is caused due to mutations and can lead to a different inheritance (Walter, 2003). Being deaf an individual also affects them psychologically during their development, it depends on how their families treat them. Avoidance during childhood, comparison between their child and other children, aggression can result in childhood depression in them. The lifestyle of deaf and mute children is quite difficult as compared to non-deaf. They are very sensitive. Their parents have to communicate in different languages with them. Communication is very essential for the deaf population part of their life (Barnett & Steven, 2002).

Deafness in a family has affected the various areas of family life. It impacts the family life and domains of family-like the quality of life, family interaction, family resources, parenting, and support of the family system (Carla & Ann, 2004). The social difficulty is one of the major problems in deaf people. People do not understand what they are saying whenever deaf people try to communicate with others. They are slow talkers, through visual stimulus they try to read lip movement and sign language and they try to understand or analyze what other people are saying. This leads to miscommunication. The problems of deaf adults have been ignored to a great extent. They have lost all usable hearing. Social workers need to be more understanding of deaf people's problems (Helen, 2008). Job interviews are very much stressful for deaf people. Most of the time they feel completely ignored during the interview. (Pamela, 2001) reveals that deaf people experience unemployment to a greater extent and have less education than non-deaf people. Telephone communication is nearly impossible without an interpreter. The feeling of isolation makes them feel depressed and anxious (Disability Experts of Florida, 2018). They always have a "jumpy" feeling, because they are more comfortable when no one is sneaking up on them from behind.

The Indian government has made many schemes and projects for deaf people, but due to a lack of awareness, they failed to claim the benefits from the government. Social communication is referred to verbal and non-verbal and social interaction skills with others. It involves facial expression, eye contact, and bodily gestures. Social adjustment is when an individual engages in social work, and accepts the social behavior and social environment. Social communication plays a vital role in social adjustment. A person who lacks social communication will not adjust to society, which means social communication should be there when individuals engage with others and society. (Bibi, 2010) reveals that social adjustment will be high if the level of self-concept is high and vice-versa. The study aimed to examine the level of social adjustment and self-concept among handicapped people. Another study reveals that special needs children have a low level of social adjustment as compared to visually impaired children (Jameel, Nabeel & Batool, 2019).

### **Research objectives**

- To understand the demographic details of deaf adults.
- To examine the difference in terms of social adjustment among deaf and non-deaf adults
- To understand the issues and challenges of deaf people related to communication

### **Research hypothesis**

There will be a significant difference between deaf and non-deaf adults on the level of social adjustment.

### **Methodology**

#### **Participants**

The sample comprised 60 physically challenged and 60 non-physically challenged adults across India, aged between 20 to 50 years. The sample was recruited through different associations (CODA, Uttar Pradesh Federation of the Deaf).

#### **Inclusion criteria**

The inclusive criteria were as follows:

- Adults with Indian nationality
- Adults between the age group of 20-50 years,
- People who understand Sign language, Hindi, and English

#### **Instruments**

Bell's Adjustment Inventory (BAI): Bell's adjustment inventory for adults is a self-report of the individual's life and adjustment as they have been experienced by him or her. It tries to obtain more realistic information from the individual concerning what one thinks and feels about family relationships; one's friends' acquaintances outside the home; how aggressive the person is; how much trust he can have in people around him; how well he has come to play the roles that the society expects of him. The inventory has 140 questions under six categories. The Adult Form is a 140-item inventory of personality traits to obtain a better understanding of the examinee. It has 3 options which are "yes", "no" and "?". It provides information on traits related to the Home, Health, Social, Emotional, and Occupational factors. The reliability for home adjustment is 0.91, health adjustment is 0.81, social adjustment is 0.88, emotional adjustment is 0.91 and occupational adjustment is 0.85. The Inventory has been validated in two ways: First, the items for each of the sections in the Inventory were selected in terms of the degree to which they differentiated between the upper and lower fifteen percent of the individuals in a distribution of scores second, the results of the various sections of the inventory were checked during interviews with four hundred college students over two years.

## Procedure

The sample was collected by following a purposive sampling and random sampling method. All participants were physically challenged and non-physically challenged adults and all those who were invited to take part agreed to do. They were told about the purpose, nature, and purpose of the study. Permission was taken from the participants and was assured that the collected information from them will be kept confidential. Bell's Adjustment Inventory (BAI) was given to the participants. The questionnaire was administered as per the instructions given in the manual. The participants were told to respond to their own choice. The participants were asked to respond to all the items on the scale without skipping any item in the questionnaire. The queries of the participants, if any, were properly clarified. The collected data were statistically analyzed by mean, standard deviation, correlation, and regression analysis to collect the association of dependent, independent variables and to find out whether social communication is affecting the social adjustment, using the Statistical Package for Social Sciences (SPSS). Conclusions and implications were made based on the collected results.

## Results

The results section is divided into two sections quantitative and qualitative. Quantitative results were yielded from one-way ANOVA and descriptive statistics. Case studies were conducted to probe more about the problems of people without listening capacity and the findings were incorporated in the results section.

### Section I: Quantitative results and discussion

Table 1  
Shows the demographical details of the study population (N=120)

Variables	N	Percentage
Age		
20-35	66	54.5
35-50	54	44.5
Gender		
Male	51	42.14
Female	69	57.80
Occupation		
Working	31	25.61
Non-working	89	73.55
Listening capacity		
Yes	60	50
No	60	50

The table shows that there is almost an equal distribution of the population in terms of age and gender and listening capacity. The table also shows that almost 74% of the respondents are non-working.

Table 2  
Compares the adults with listening capacity and without listening capacity on social adjustment using One-way ANOVA

Variables	Mean	Standard Deviation	df	f-value	Level of significance
With listening capacity	14.22	5.39	1	177.473	.00**
Without listening capacity	.74	.439			

The table shows that adults with listening capacity have the highest mean on social adjustment, which shows that they have greater social adjustment and the difference between individuals with listening capacity and without listening capacity is highly significant at .00 level of significance which leads to accepting the hypothesis “*there will be a significant difference between deaf and non-deaf adults on the level of social adjustment*”.

### Discussion on quantitative findings

The study shows that adults without listening capacity have more social adjustment problems than adults with listening capacity ( $p < .00$ ). The social adjustment problems in deaf people were widely understood by many researchers by giving emphasis on social anxiety, loneliness, and isolation. Lu, Tian, Yu, Feng, Hong, and Yu, (2015) conducted a study to see the effect of gender on social anxiety and found that deaf people irrespective of gender have social anxiety issues. Ye et al., (2016), conducted a study to see the attachment, loneliness, and social anxiety among deaf adolescents. They revealed that peer attachment and maternal involvement mediate the problems of social anxiety and loneliness among adolescents with hearing disabilities. The major reason for social adjustment issues among people with hearing disabilities maybe the stigma, prejudice, and negative attitudes of society toward deaf people. This can have a significant impact on their self-esteem and self-confidence and it can make them vulnerable to social anxiety and social adjustment problems.

### Qualitative Studies using Case Studies

The following case studies illustrate the problems of deaf adults in the society:

- *Case study I: (cursing their deafness: Experience of a middle-aged deaf woman)*  
Case ‘A’ is a member of the Bareilly district. She is 49 years old deaf and a housewife. She completed her high school in Delhi. She belongs to the Agra district. She lives with her husband and daughter. Her husband is in service and her daughter is in Punjab for studies and visited her once in 2-3 months. Because of deafness she faced issues in transportation and met with an accident, which caused a shoulder rupture. But now she doesn’t prefer to go outside alone. That accident sometimes haunts her to go outside alone. She

*thinks that if she goes outside another accident will happen. She sometimes cursed herself for being deaf.*

- *Case study II:(negatives attitude of people towards them: Experience of middle-aged deaf man)*

*Case 'B' is a member of Almora district's brahman community. He is 36 years old deaf and ITI pass out. He lives with his mother, wife, and 2 sons. His mother is bedridden. His father died due to a road accident. He was an above-average student in the school. He applied for a job in a reputed company but due to his hearing problem, he wasn't selected. They show a negative attitude towards him and ignored his ability to do such kind of work. Now he is working as a laborer in an agricultural field. His financial condition is not so good and society is taking him lightly in terms of work.*

### **Discussion on qualitative findings**

There are fundamental subthemes derived from the 2case research that had been integrated below the qualitative analysis. They are:

- **Self-blaming or low self-esteem:** Self-blaming or cursing oneself for disabilities is not unusual among human beings with disabilities. Schulz and Decker, (1985) carried out a look at human beings with disabilities and observed that self-blaming is noticeably normal amongst them. They will be predisposed to characteristic the poor occasions which are going on in their lifestyles to their incapacity and this self-blaming and poor mindset closer to themselves makes them at risk of despair and loneliness.
- **Negative attitudes and Prejudice within the society:** Even after the projects from the Government to make certain the identical participation of disabled human beings in each area, they may be at risk of prejudice and discrimination on many grounds. Equity measures in employment regions for deaf human beings are nonetheless not possible in lots of regions just like the coaching profession, jobs in MNCs, and numerous authorities' sectors (Woodcock, Rohan, & Campbell, 2007).

### **Conclusion**

Despite many felony measures and fairness regulations applied through governmental groups and NGOs, the hassle of discrimination and terrible mindset closer to the deaf stays in the center of regarding the sphere of academics, employment, and social life. Media and social engineers have to be conscious of the troubles of disabled humans with a good deal greater sensitivity and responsibility, particularly with regard to discrimination, unemployment, identification crisis, academic troubles and terrible attitudes.

### **References**

- Barnett & Steven, M.D. (2002). Communication with Deaf and Hard-of-hearing People A Guide for Medical Education. Journal of the Association of American Medical Colleges, 77(7), 694-700.
- Bibi I., (2010), self-concept and social adjustment among physically handicapped persons, Research Gate.

- Carla W.J. & Ann T., 2004, Impact of Deafness on Family Life: A Review of the Literature, Sage Journals, 24(1), 15-24.
- Disability: World Health Organization, WHO.
- Helen S.L., 2008, between worlds the problems of deafened adults, Taylor Francis Online, 5(3), 253-265.
- Jameel T., Nabeel T., and Batool H., (2019), a comparative study of social adjustment among special needs children, ResearchGate, 3(2).
- Lu, A., Tian, H., Yu, Y., Feng, Y., Hong, X., & Yu, Z. (2015). Peer attachment and social anxiety: Gender as a moderator across deaf and hearing adolescents. *Social Behavior and Personality: an international journal*, 43(2), 231-239.
- McLeod S., (2018), Erik Erikson's stage of psychological development, Simply Psychology.
- Pamela L., 2001, communication barriers for deaf employees: needs assessment and problem-solving strategies, IOS Press Content Library, 14(1), 51-59.
- Preston, P. (1995). Mother father deaf: the heritage of difference. *Social science & medicine*, 40(11), 1461-1467.
- Purva C. & Vaishali K., 2016, Indian Sign language translator using gesture recognition algorithm, IEEE Xplore.
- Schulz, R., & Decker, S. (1985). Long-term adjustment to physical disability: the role of social support, perceived control, and self-blame. *Journal of personality and social psychology*, 48(5), 1162.
- Simon A., Xi L., Xue L., 2012, genetics of hearing and deafness, American Association of Anatomy, 295(11), 1812-1829.
- Sirjan S. & Shraddha J., (2020), factors associated with deaf mutism in children attending the special school of rural central India: a survey, US National Library of Medicine National Institutes of Health, 9(7), 3256-3263.
- Walter E., 2003, The Genetics of Deafness, Wiley Online Library, 9(2), 109-119.
- Woodcock, K., Rohan, M. J., & Campbell, L. (2007). Equitable representation of deaf people in mainstream academia: Why not?. *Higher Education*, 53(3), 359-379.
- Ye, J., Peng, A., Lu, A., Tian, H., Hong, X., Yi, H., ... & Wang, W. (2016). Attachment, loneliness, and social anxiety: A comparison of deaf and hearing Chinese adolescents. *Social Behavior and Personality: an international journal*, 44(6), 1033-1042.