

## CORRELATION BETWEEN PARENTING STYLES AND SOCIAL COMMUNICATION IN CHILDREN WITH HEARING IMPAIRED

Samia Sharif, Aleena Irum, Hafsa Noreen, Hajra Masood, Hina Sameeullah

Department of Speech and Language Pathology (RCRAHS), Riphah International University, Pakistan

### Correspondence:

**Aleena Irum**

Senior Lecturer

Department of Speech and

Language Pathology

(RCRAHS), Riphah

International University

Email:

[aleenairum@gmail.com](mailto:aleenairum@gmail.com)

DOI: 10.38106/LMRJ.2024.6.3-07

Received: 28.06.2024

Accepted: 20.08.2024

Published: 30.09.2024

### ABSTRACT:

This study aimed to find the correlation between parenting style and social communication in children with hearing impairment. In this correlational study Minnesota Social skills checklist for Deaf/ hard of Hearing children and Parenting Style Questionnaire was used. Through convenient sampling technique data was collected from the parents of hearing impaired children aged between 5 to 15 years. Study was conducted over a period of 6 months (July 2023 to January 2024) at Riphah International University. Sample size was  $n=377$  calculated by using online sample size calculator. The results of the study showed a strong, significant correlation between parenting style and social communication. In conclusion the three parenting styles analyzed, authoritative parenting has a positive effect on social communication skills, whereas authoritarian and permissive parenting styles have a negative effect.

**Keywords:** Hearing impaired children, deaf, hard of hearing, parenting style, social communication

### INTRODUCTION

Hearing is the sense which allows us to hear sounds, interact with our environment, communicate with others and enhance our knowledge. As a human being hearing is the important sense. Without this sense person is hearing impaired. Hearing impairment and deafness are two different categories in which the individual need special education and other programs related to special needs. Hearing impairment is defined according by IDEA as it is an impairment in which it is permanently or partially affect child's education and performance. Deafness is a degree of loss that is severe or permanent in which the child is impaired in language and speech (1).

The concepts of hearing impairment and deafness, as well as their significance in education and special programs is relatively new. Deafness typically denotes a more severe degree of hearing loss. It often implies a significant or permanent hearing loss to the point where the individual may have difficulty to understanding spoken language and may rely on alternative forms of communication, such as sign language or cochlear implants. Deafness can profoundly affect a child's academic capability (2). One of the key building blocks for the development of language is through to the hearing. In human beings the frequency of hearing is 20 to 20,000 Hz and the intensity is 0 dB to 120 dB. In 0 dB there is no sound, but the unimpaired human ear can hear the softest sound while some people hear down -5 or -10 dB. The threshold of pain is represented when the sound is 90dB and 116 dB is uncomfortably louder sound. The human ear cannot hear all frequencies equally, the sensitivity of hearing is around 3,000 Hz (3). The first step in devising additional test procedures and coordinating clinical or potentially audiological interventions is to define hearing loss according to nature, degree and configuration. Hearing impairment is divided into three categories (a) sensorineural hearing loss (b) conductive hearing loss (c) mixed hearing loss

Sensorineural hearing loss: this is occurring when inner ear or hearing nerve (vestibulocochlear nerve CN VIII) become damaged. In the cochlea some of hair cells are damaged. It is most common type of hearing loss(4) .

Conductive hearing loss occurs when outer or middle ear cannot carry sound waves in the inner ear. Sound waves blocked by earwax or a foreign object located in ear canal and in the middle ear space filled with fluid, infection, abnormal bone growth or damage of eardrum (5). Mixed hearing loss demonstrates combination of both sensorineural and conductive(6).

---

The other aspect of the study was parenting style, which is defined as the parent's attitudes and behaviors towards their children and the emotional and psychological climate and behaviors are expressed by parents. Parenting style is one of the most important to develop the child's behavior, and effect the child lifestyle, in both positive and negative way. Parenting style can affect child's self-esteem and physical health. Parenting style also helps to support healthy growth and development because the way parents interact with children and how they discipline them. In parenting style cultural background has major impact on child development (7).

There are four types of parenting styles based on responsiveness and demandingness (8).

**Authoritative parenting style:** It is characterized by responsiveness and demandingness which is on higher priority. In this parenting style parents do not provide any kind of support and warmth, but they have defined rule and discipline (9).

**Authoritarian parenting style:** It is characterized by the responsiveness are low but demandingness is high. In this style parents are used to control and make harsh punishment and allow verbal give and take by seldom provide(10).

**Permissive parenting style:** This style tends to warm, nurturing and having no expectation. Parents impose limited rules, communication remain open, and their children are allowed to figure out things by themselves (11).

**Neglectful parenting style:** It is characterized by the low/less in both responsiveness and demandingness (12).

Parenting style is greatly influenced by social communication. Communication is a two-way process which include the interaction with peers, family, relatives, teachers, and other people. Social communication behavior includes understanding, use of facial expression, eye contact, gestures and body language (13). A research conducted by Dr Kausar Parveen and Maria Mustafa in 2013 regarding the role of parenting style in social communication with hearing impaired children, which showed that parenting style can indeed have a significant impact on the development and social communication of children, including those with hearing impairments. Current study also used a parenting style questionnaire to assess the parenting styles of the parents. The questionnaire likely helped categorize parents into different parenting styles, such as authoritative, authoritarian, permissive, or neglectful. These parenting styles can influence how parents interact with and support their children, including those with special needs. The importance of family dynamics and attitudes in the context of raising a hearing-impaired child. If family members view the birth of a child with special needs as an undesirable change in their lives, it can lead to added stress and challenges within the family unit. This stress may increase the risk of a crisis response from the family (14).

Family therapy can be a valuable resource in such situations. It can help parents and other family members navigate the challenges and emotions that come with raising a hearing-impaired child. By providing support, guidance, and strategies for effective communication and parenting, family therapy can empower parents to be more effective change agents and caregivers for their children. Overall, research in this area helps us understand the complex interplay between parenting styles, family dynamics, and the social communication development of hearing-impaired children (15).

Diana Baumrind is a well-known psychologist who has contributed to the study of parenting styles and child development. The summarized key elements of Baumrind's approach to effective parenting include: Scaffolding of children's competence: This refers to parents providing support and guidance to help children develop their skills and competencies. It also includes fostering social competence through shared activities and conversations, where parents actively engage with their children to enhance their abilities (16).

The Parental Acceptance-Rejection Theory (PART) was indeed formulated by Ronald P. Rohner in 1980. This theory focuses on the impact of parental acceptance or rejection on a child's development, encompassing cognitive, emotional, and behavioral aspects. It provides insights into how a child's upbringing, particularly the way they are treated by their parents, can have far-reaching consequences throughout their lives. Theoretical foundation: The Parental Acceptance Rejection Theory is a socialization that seeks to explain and predict how parental acceptance or rejection influences various aspects of a child's development. It is grounded in the belief that the parent-child relationship plays a critical role in shaping a child's personality and behavior (17).

Parenting a deaf or hard of hearing (d/hh) child indeed comes with its own set of challenges, and it is important to recognize and address the unique aspects of raising a child with hearing differences. Parents of d/hh children may

---

face uncertainties and difficulties due to the lack of a well-established model or societal norms to follow. Here are some considerations for parents raising a d/hh child (18).

Early intervention is crucial for a d/hh child's development. Engaging with professionals such as audiologists, speech therapists, and educators who specialize in working with deaf and hard of hearing children. Learning about communication options, including sign language, speech therapy, and assistive technologies. Making informed decisions based on your child's needs and preferences (19).

Vygotsky emphasized the role of social interaction in cognitive development. According to his theory, learning and cognitive development are deeply connected to social and cultural activities. He believed that children can achieve higher levels of understanding and skill acquisition when they engage in activities with more skilled peers or adults. In the example provided about solving a puzzle, where the unaided attempt represented the child's independent level. The ZPD (zone of proximal) is the range of tasks that the child cannot do alone but can do with assistance. By interacting with a more skillful peer or adult who provides guidance and clues, the child can operate within their ZPD and gradually internalize the knowledge or skills. This cooperative learning process is a fundamental aspect of Vygotsky's educational philosophy. In Vygotsky's view, the social and cultural context plays a crucial role in shaping an individual's cognitive development (20). This study was aimed to evaluate influence of parenting style on communication of children with deafness or hearing disabilities.

### **Material/Subjects/Patients and methods**

The duration of this cross-sectional study was 6 months. The sample size was 377 calculated by online sample size calculator by keeping 95% confidence level and 5% margin of error(21) . Sample population includes parents of the children in the age range of 5 to 15 years who were taking speech session. Hearing impaired children were at Mild, Moderate, Severe and Profound level. However, Parents who have children with other disabilities were not included.

Parenting style questionnaire: This tool was used for parents to identify the unique parenting style which can be categorized into Authoritarian, Authoritative and Permissive style. A total of 30 item questionnaire was created by Robinson, Mandlco, Olsen, and Heart and used in this study.

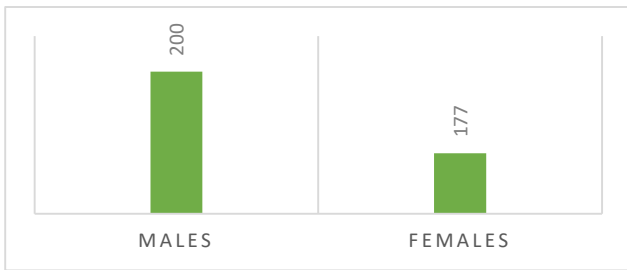
Minnesota social skill checklist for deaf/hard of hearing: This tool was used for development of self-concept/self-esteem, social interactions/friendship skills, and pragmatics is crucial for learners who are deaf or hard of hearing. The Parenting quiz questionnaire and Minnesota social skill checklist for deaf/hard of hearing were used for data collection. Data collected after taking consent from participants' declaration by Riphah international university Lahore, Pakistan. Once the approvals were granted, data was collected by special institute and clinics. Consent form were filled by individuals who meet the inclusion criteria.

Data analyzed using standard Statistical Package for Social Sciences (SPSS version 21.0) statistical software in which correlation was calculated using Pearson Product-moment correlation.

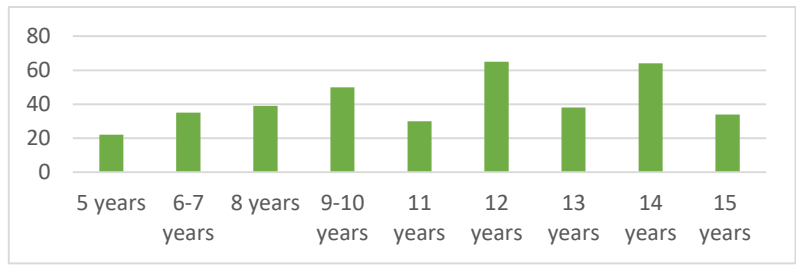
### **Results:**

A total of 377 children with hearing disabilities were included in the study, out of which 200 were males and 177 were females (Figure 1) age ranged between 5 to 15 years with median age of 12 years (Figure 2). Majority of families had 1 child with hearing disability (Figure 3). The duration of deafness was between 1 to 10 years (Figure 4), conductive hearing loss was most frequently seen (Figure 5), while majority had moderate hearing loss (Figure 6), Majority used hearing aid (Figure 7) with unilate4ral fitted device (Figure 8).

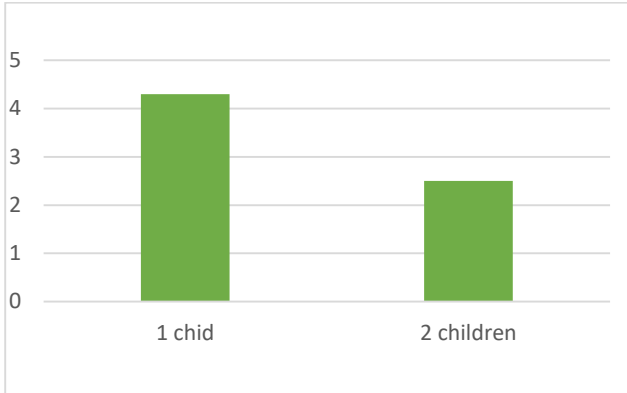
Correlational analysis showed that there was a statistically significant positive correlation ( $p$ -value=0.001) between Authoritative Parenting Style and Effective Social Communication, suggesting that higher levels of authoritative parenting are associated with better social communication skills in the sample population. There was a statistically significant negative correlation (-0.348) between Authoritarian Parenting Style and Effective Social Communication ( $p$ -value 0.001), suggesting that higher levels of authoritarian parenting are associated with poorer social communication skills in the sample population. There was a statistically significant negative correlation (-0.264) between Permissive Parenting Style and Effective Social Communication, suggesting that higher levels of permissive parenting are associated with poorer social communication skills in the sample population. A summary is given in Table 1.



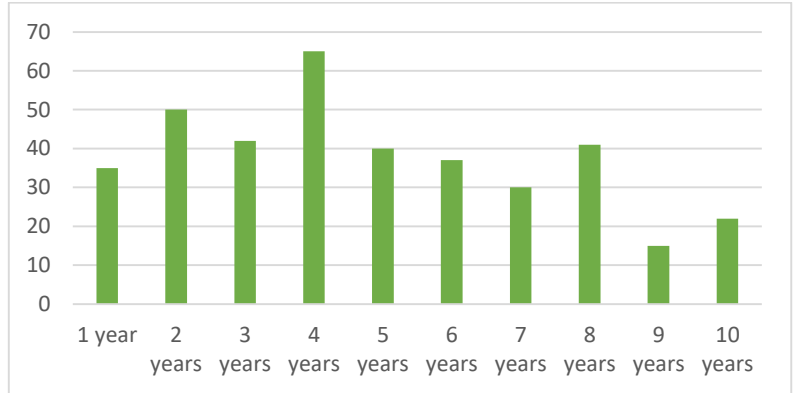
**Figure 1. Gender distribution of the samples included in the study**



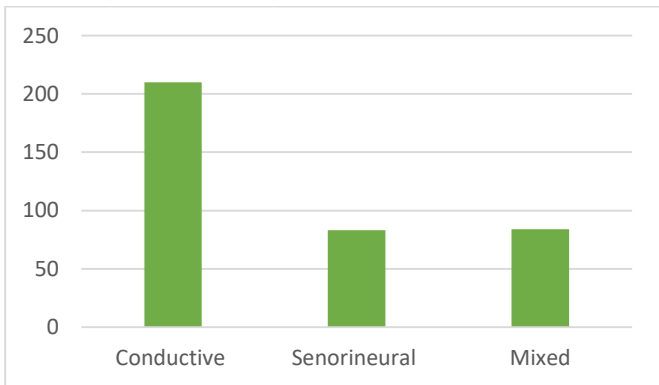
**Figure 2. Age distribution if the children with deafness or hearing disabilities included in the study**



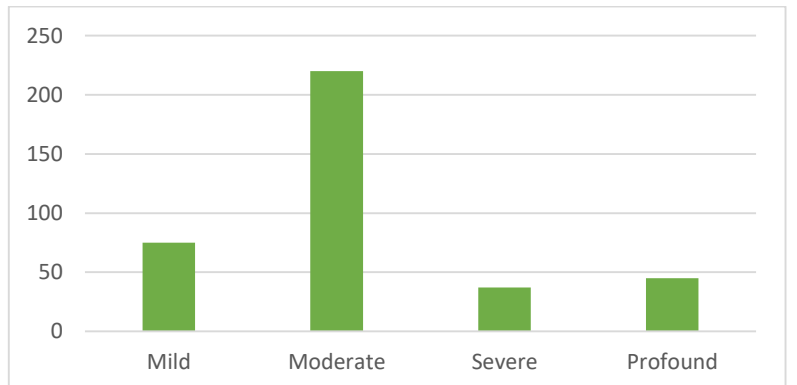
**Figure 3. Pattern of number of children with hearing disability in the family**



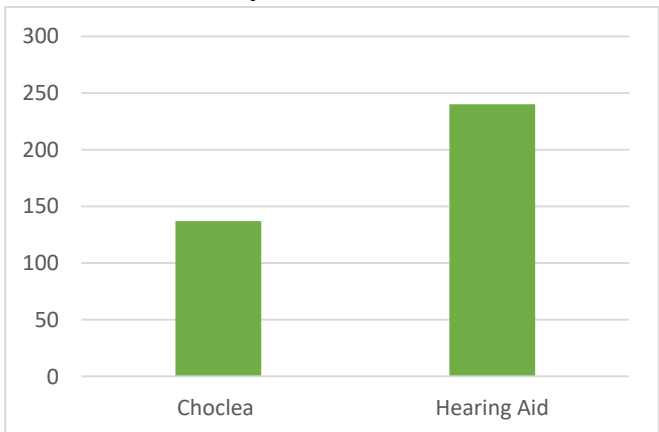
**Figure 4. number of years with hearing loss**



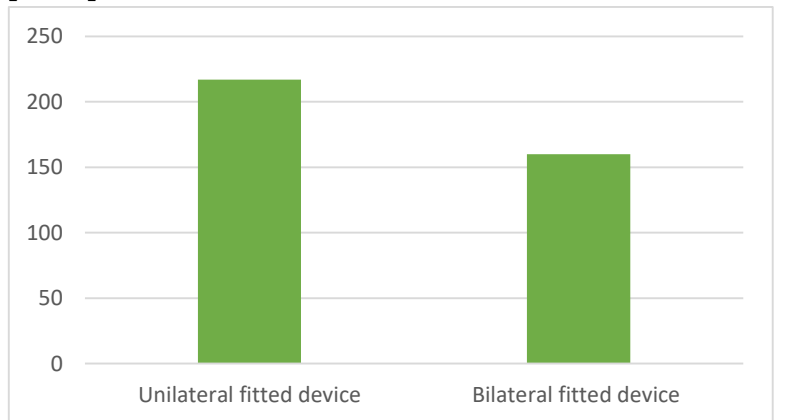
**Figure 5. Pattern of type of hearing loss in children included in the study**



**Figure 6. Pattern of severity of hearing loss in children participants**



**Figure 7. Type of hearing aid used in the participants of the study**



**Figure 8. Pattern of use of fitted device in the participants of the study**

**Table 1. Correlations between different parenting styles and social communication skills (ESSC).**

Parenting styles	Pearson correlation	Significance ( 2-tailed)	N= no of participants	Description
<b>Authoritative (APS)</b>	0.228**	0.001	209	Positive and significant correlation (Pearson $r = 0.228$ , $P < 0.01$ )
<b>Authoritarian (ATPS)</b>	-0.348**	<0.001	100	Negative and significant correlation (Pearson $r = -0.348$ , $P < 0.01$ )
<b>Permissive (PPS)</b>	-0.264**	<0.001	67	Negative and significant correlation (Pearson $r = -0.264$ , $P < 0.01$ )

## DISCUSSION:

The aim of the study was to find the correlation between parenting style and social communication with hearing impaired children. It is very crucial and important to know about the family environment when it comes to identification of the problems of children with hearing impaired in different aspect of mental, physical, social and cognitive problem. Perhaps many of the issues are related to children with HI and their parents. It is important to note that family is the first and most unique social institute and positive relationship within the family. The role of children with hearing impairment in the parenting style and social communication is very important (22).

A study conducted in 2015 that shows children with hearing impairment significantly shows impairment in social communication(21) so awareness among parents regarding parenting styles is important to improve the social communication skills for children with hearing impairment.

By looking the mean and standard deviation of mother's scores in parenting style. It obtains a relatively clear picture about the social communication and parenting style. Current study with 377 participants use the social communication checklist and parenting style questionnaire. The questionnaire applied for data collection to analyze the correlation between parenting style and social communication with HI children. The age range of children was 5 to 15 years. About 75 were mild hearing loss, 220 were moderate, 25 were severe and 45 were profound. Securely attached individuals develop the positive early environment fosters the development of secure attachment, which has implications for emotional regulation and social interactions throughout life. Securely attachment individual is related to the Authoritative Parenting Style which have positive relationship with mental health and social development (23).

Insecure attachment patterns, which can result from inconsistent or emotionally unresponsive care giving, have been associated with negative outcomes in various areas of a person's life, including their self-perception, behavior, and mental health. Insecure attachment shows misbehavior towards their peers. Insecure attachment patterns are related to the Authoritarian Parenting Style (24).

Permissive parents are characterized by being nurturing and accepting but tend to be low in demandingness and structure. This parenting style impact on children like lack of structure and guidance, independence without guidance, lack of responsibilities, lower cognitive development and behavioral problem (25).

Minnesota social skill checklist for deaf/hard of hearing tools and strategies to address the development of self-concept/self-esteem, social interactions/friendship skills, and pragmatics is crucial for learners who are deaf or hard of hearing. These areas are vital for overall social and emotional well-being. This tool is based on the unique needs and preferences of each student. Creating an inclusive and supportive learning environment can significantly contribute to the development of these essential skills for learners who are deaf or hard of hearing (26).



---

The South African study conducted in 2011. It indicates that children with hearing impairment who actively participate in community and extracurricular activities have positive social interactions. This implies that involvement in such activities can contribute to the development of constructive social skills in children with hearing impairment (27).

In another research the role of children within the family is highlighted, particularly in terms of parental communication. The communication patterns between parents and children play a crucial role in shaping the social and psychological behavior of the children. Consistent and supportive communication is deemed important for fostering appropriate social and psychological development in children. This perspective aligns with broader sociological and psychological theories that emphasize the impact of family dynamics on individual development and societal outcomes. Positive family interactions and effective communication are seen as foundational elements that contribute to the overall health and functionality of both the family unit and, by extension, the larger society. Understanding the role of family in shaping behavior and well-being is crucial for developing interventions, policies, and support systems that promote positive family environments. It acknowledges the interconnections of individual, family, and societal health (28).

### **CONCLUSION:**

Parenting styles play significant role in developing of social communication skills. The three parenting styles analyzed, authoritative parenting has a positive effect on social communication skills, whereas authoritarian and permissive parenting styles have a negative effect.

**Acknowledgement:** None

**Disclaimer:** All authors contributed to review this article and agreed to send it to Laiquat Medical Research Journal. Current study is the part of Master's thesis project.

**Conflict of interest:** None

**Funding disclosure:** None to declare

### **REFERENCES:**

1. Elzouki AY, Harfi HA, Nazer H, Oh W, Stapleton F, Whitley RJ. Textbook of clinical pediatrics: Springer Science & Business Media; 2011.
2. Garfunkel LC, Kaczorowski J, Christy C. Pediatric clinical advisor E-book: instant diagnosis and treatment: Elsevier Health Sciences; 2007.
3. Standardization IOF. Acoustics: Statistical Distribution of Hearing Thresholds as a Function of Age (ISO 7029: 2000): ISO; 1991.
4. Weber PC, Klein AJJMCoNA. Hearing loss. 1999;83(1):125-37.
5. Cruickshanks KJ, Tweed TS, Wiley TL, Klein BE, Klein R, Chappell R, et al. The 5-year incidence and progression of hearing loss: the epidemiology of hearing loss study. 2003;129(10):1041-6.
6. Verhaegen VJ, Mulder JJ, Cremers CW, Snik AFJO, Neurotology. Application of active middle ear implants in patients with severe mixed hearing loss. 2012;33(3):297-301.
7. Darling N. Parenting Style and Its Correlates. ERIC Digest. 1999.
8. McCoby E, JHocp. Socialization in the context of the family: Parent-child interaction. 1983;4:1-101.
9. Baumrind DJTjoea. The influence of parenting style on adolescent competence and substance use. 1991;11(1):56-95.
10. Mandara JJCc, review fp. The typological approach in child and family psychology: A review of theory, methods, and research. 2003;6:129-46.
11. Leeman RF, Patoock-Peckham JA, Hoff RA, Krishnan-Sarin S, Steinberg MA, Rugle LJ, et al. Perceived parental permissiveness toward gambling and risky behaviors in adolescents. 2014;3(2):115-23.
12. Carpendale J, Lewis C. How children develop social understanding: Blackwell Publishing; 2006.
13. Grice HP. Logic and conversation. Speech acts: Brill; 1975. p. 41-58.
14. Perveen K, Mustafa MJIIJoCRB. The Role of Teachers and Parents in the Social Development of Children with Hearing Impairment and Transforming them as a Potential Being of Society. 2013;4(12):960-75.

- 
15. Abednego M, Plangan EJKJoH. A Survey of the Availability of Counselling Services for the Social Adjustment Needs of Children with Hearing Impairment. 2019;4(3):185-91.
  16. Baumrind DJCd. Effects of authoritative parental control on child behavior. 1966:887-907.
  17. Rohner RPJBSR. Worldwide tests of parental acceptance-rejection theory: An overview. 1980;15(1):1-21.
  18. Meadow KP, Dyssegaard BJIjorr. Social-emotional adjustment of deaf students. Teachers' ratings of deaf children: An American-Danish comparison. 1983;6(3):345-8.
  19. Calderon R, Bargones J, Sidman SJAAotD. Characteristics of hearing families and their young deaf and hard of hearing children: Early intervention follow-up. 1998:347-62.
  20. Myftiu JJEJoSSE, Articles R. Vygotsky Theory on Social Interaction and its Influence on the Development of Pre-School Children. 2015;2.
  21. Mumtaz N, Saqulain G, Babur MNJEMHJ. Hearing impairment and its impact on children and parents in Pakistan. 2023;29(1):33-9.
  22. Keigher BK. Perceived influences of communication styles between hearing parents and their children with hearing impairments: Texas Woman's University; 2007.
  23. Simmons BL, Gooty J, Nelson DL, Little LMJJoOBTIJol, Occupational, Psychology O, Behavior. Secure attachment: Implications for hope, trust, burnout, and performance. 2009;30(2):233-47.
  24. Baer JC, Martinez CDJJor, psychology i. Child maltreatment and insecure attachment: A meta-analysis. 2006;24(3):187-97.
  25. Hubbs-Tait L, Kennedy TS, Page MC, Topham GL, Harrist AWJJotAda. Parental feeding practices predict authoritative, authoritarian, and permissive parenting styles. 2008;108(7):1154-61.
  26. Antia SD, Kreimeyer KHJVR. Social interaction and acceptance of deaf or hard-of-hearing children and their peers: a comparison of social-skills and familiarity-based interventions. 1996;98(4).
  27. Antia SD, Jones P, Luckner J, Kreimeyer KH, Reed SJEc. Social outcomes of students who are deaf and hard of hearing in general education classrooms. 2011;77(4):489-504.
  28. Movallali G, Poorseyed SRJJoSS, Studies H. Attachment styles and perceived parenting styles: A comparison of hearing impaired adolescents and normal adolescents. 2015;1(3):7-12.