

## “A study of the effect of parent-child relationship on mental health of hearing impaired and visually impaired adolescent”

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**ABSTRACT:** The present study has been carried out to see and be aware of the effect of parent-child relationship on mental health of hearing impaired and visually impaired adolescents. The study has been carried out on a sample of 100 adolescent (i.e. 50 hearing impaired and 50 visually impaired) who are pursuing their education in special schools for hearing impaired and visually impaired which is affiliated to the Board of Secondary Education, Assam (SEBA) and Central Board of Secondary Education (CBSE) and is located in Kamrup (metro), Assam. For the purpose of collecting data, Parent Child Relationship Scale (by Dr. Nalini Rao) and Mental Health Battery (by Arun Kumar Singh and Alpana Sen Gupta) have been used. The scales have been used to find out the parent child relationship with regards to mental health and so an effort has been made to understand the crucial role played by parent child relationship of an adolescent and its impact on their mental health.

**KEYWORDS:** Adolescence, Parent-Child Relationship, Mental Health, Hearing Impairment, Visual Impairment

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### I. INTRODUCTION

The word adolescence is Latin in origin and is derived from the verb *adolescere*, which means “to grow into adulthood”. It is a midway stage of physical and psychological human development that usually occur during the period from puberty to adulthood. World Health Organisation (WHO) identifies adolescence as the period in human growth and development that occurs after childhood and before adulthood, from ages 10 to 19. Adolescents are exposed to many stressful life experiences like feeling of frustration, fear, conflict with parents, poor decision making skills, poor problem solving ability, anger, sadness, guilt, loneliness, academic failure, lack of time management skills, etc. Adolescents believe they can take their own decisions and the decisions which are given by their parents they think it is against their wishes and they do not like to follow those instructions given to them by their parents. So sometime due to this clash occur between adolescent and their parents. G. Stanley Hall (1904) described adolescence as a period of storm and stress. He used this term because he viewed adolescence as a period of inevitable commotion that takes place during the transition from childhood to adulthood. Three main sets of storm and stress described by Hall are: conflict with parents, mood disruption and risky behaviour. Erikson (1950) described adolescence as the period during which individuals must establish a sense of personal identity and avoid the dangers of role diffusion and identity confusion.

Parent-child relationship refers to the unique and enduring bond between a parent and his or her child. It comprises of amalgamation of behaviours, feelings, emotions and expectations that are unique in every parent and their child. Positive parent-child relationship helps children learn how safe and secure they are in the world, how much they are loved by others, who love them etc. In order for a parent-child relationship to be healthy, the child must have parents who are affectionate, reliable, and available, must be able to show their warmth, and who set proper rules and regulations. The child should also feel safe with their parents. Children with healthy parent-child relationship learn how to behave properly and make healthy relationships in their life. They also know how to develop skills for coping with difficult situations. Parent-child relationships are central to psychological development and several studies have shown that suboptimal parenting is an important risk factor for psychological disorder in clinical and representative community samples (Blatt & Homann, 1992; Enns, Cox, & Clara, 2002). The demandingness or control dimension reflects the extent to which the parent demands and monitors standards for their child's conduct (Baumrind, 1991). The concept of parental control has been further distinguished as behavioural and psychological forms of control (Barber, 1996).

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps decide how we handle different situations of our life. It is vital at every stage of life, from childhood and adolescence through adulthood. According to the World Health Organization (WHO), mental health is “a state of well-being in which the individual realizes his or her own abilities, can cope with the

normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community". Dr Mark Komrad (2012) asserts that "mental health problems affect all segments of society, regardless of age, gender, education, or ethnicity". Mental health is the basis for thinking, communication, learning and self-esteem. Mental health is also essential for relationships, personal and emotional well-being. Good mental health is when we are able to work and study to our full potential, cope with day-to-day life stresses, be involved in our community, and live our life in a free and satisfying way.

Hearing impairment is a partial or total failure to hear. The official definition of a hearing impairment by the Individuals with Disabilities Education Act (IDEA) is "an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but is not included under the definition of 'deafness.'" If a person has hearing loss above 90 decibels, then the person is usually considered to be a deaf person. In such cases, both oral and manual (sign language) communication are used for the children with hearing impairments.

Visual impairment is the functional and momentary loss at external or tissue level, which primarily causes due to ocular, general diseases, and injuries. Visual impairment can lead to visual disability depending upon the degree of impairment and community reaction. Students with visual impairments have unique educational needs and to meet their unique needs, students have specialized services, books and materials usually in Braille.

### **Rationale Of The Study-**

When we are able to understand the parent child relationship and mental health of hearing impaired and visually impaired adolescent then we will be able to investigate whether there exist any differences among them and if there is some difference it will help to identify the extent of the difference. It will also give an idea about the mental status of the hearing impaired and visually impaired adolescent. In order to improve the mental health of hearing impaired and visually impaired adolescent, it is important to find out the relationship between parent child relationship and mental health of these adolescents.

### **Significance Of The Study-**

Hearing and visually impairment affects many aspects of life, with many psychological issues and difficulties. It is seen that hearing or visually impaired adolescents face much more difficulties than their peers with normal hearing in terms of their educational and social development. Due to this, their psychopathologies are impacted, sometimes in negative ways. The findings of the research work will be helpful for the planners associated with education, school counselors, professionals and people working in rehabilitations of the special children. It will give an insight to the parents, teachers, head of the institutions, administrators about the effect of parent child relationship of hearing impaired and visually impaired adolescent on their mental health.

### **Operational Definition-**

- Adolescent- In this study it refers to hearing and visually impaired adolescent between the age 10-19 years
- Parent-child relationship- In this study it is the relationship of visually impaired adolescent and hearing impaired adolescent with their parents
- Mental health- In this study it is the mental health of visually impaired adolescent and hearing impaired adolescent.
- Hearing impairment-Adolescents with all types of hearing impairment taken admission in special schools Kamrup (Metro) district were included in the study.
- Visual impairment- Adolescent with all types of visual impairment taken admission in special schools in Kamrup (Metro) district were included in the study
- Special schools –It refers to selected special schools for visually and hearing impaired adolescents located in Kamrup (Metro) district

### **Objectives Of The Study-**

- To assess the difference of the parent-child relationship of hearing and visually impaired adolescents
- To assess the difference of the mental health of hearing and visually impaired adolescents
- To find out the relationship between parent-child relationship and mental health of visually and hearing impaired adolescents
- To find out the relationship between parent-child relationship and mental health of total hearing and visually impaired adolescents

### **Hypotheses-**

- There will be significant difference in the parent-child relationship in hearing and visually impaired adolescents

- There will be significant difference between hearing and visually impaired adolescents in regards to mental health
- There will be significant relationship between mental health and parent-child relationship of visually impaired adolescents
- There will be significant relationship between mental health and parent-child relationship of hearing impaired adolescents
- There will be significant relationship between mental health and parent-child relationship of total visually and hearing impaired adolescents

## **II. METHODOLOGY**

- Type of research- Correlational research was used in the study
- Variables-The following are the variables-  
Independent variable- Parent child relationship  
Dependent variable- Mental health
- Sample-The sample size was 100 (50 hearing impaired and 50 visually impaired adolescents) and it was collected from different special schools of Kamrup (Metro) district, Assam for visual and hearing impaired adolescents between the age group 10-19 years.
- Inclusion Criteria
  - Adolescents (male-female) of 10-19 years of their chronological age
  - Adolescents pursuing their education
  - Adolescents enrolled in regular mode of education from C.B.S.E and S.E.B.A board
  - Adolescents from Kamrup (Metro) district
- Exclusion Criteria-
  - Adolescents enrolled in regular mode of education from I.C.S.E board
- Sampling technique- Purposive sampling technique was used in the study
- Tools-
  1. Parent-Child Relationship Scale by Dr.NaliniRao. It contains 100 items categorized into ten dimensions namely-protecting, symbolic punishment, rejecting, object punishment, demanding, indifferent, symbolic reward, loving, object reward and neglecting.
  2. Mental Health Battery by Arun Kumar Singh, Ph.D and AlpanaSen Gupta, Ph.D. It has six indices- emotional stability, over-all adjustment, autonomy, security-insecurity, self-concept and intelligence.
- Procedure-Initially permission was taken from the authority of the school for data collection. Then the researcher was allowed a particular date and students were also informed about it. Likewise, on the particular date, the researcher collected the data using the appropriate tools. At first, necessary instructions were given to the students and informed consent was obtained from the participants. When all the questions were answered, the participants were offered thanks for their co-operation.
- Statistical technique-The data was analysed by using mean, standard deviation, t-test and person's coefficient of correlation

**III. DISCUSSION**  
**TABLE 1**

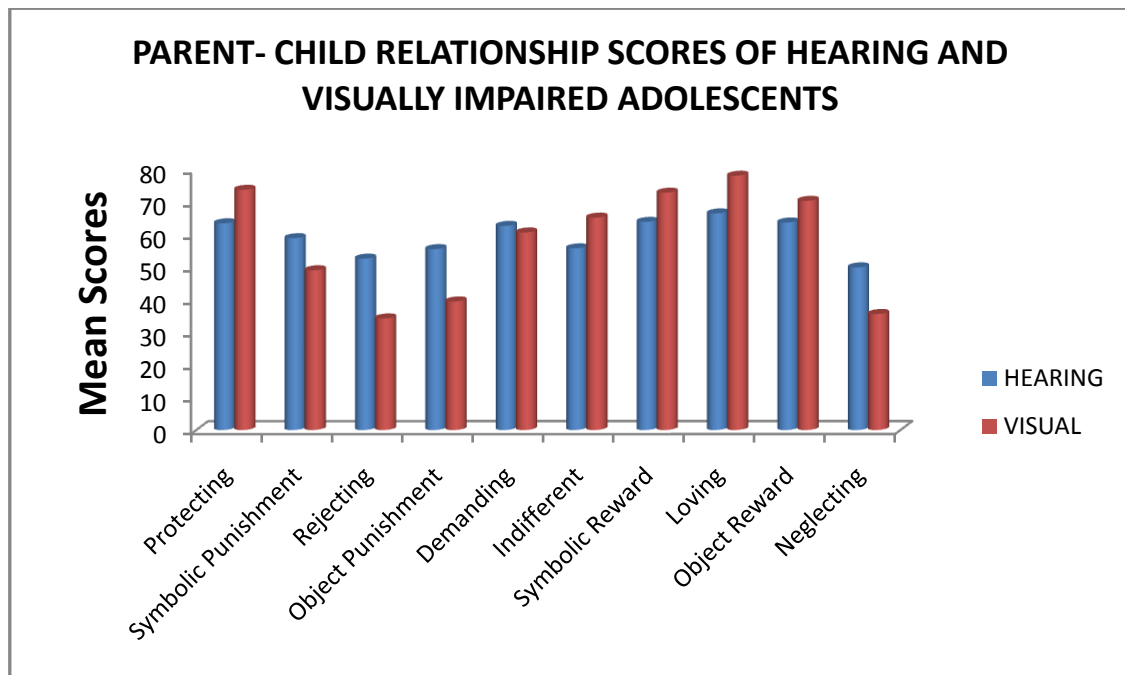
Table showing the Mean, standard deviation and 't'-value of parent-child relationship scores of hearing impaired and visually impaired adolescents

Impaired	N	Mean	Std. Deviation	t	df	Sig. (2-tailed)	Mean Difference	Remarks	
Protecting	Hearing	50	63.54	8.765	-6.010	98	.000	-10.300	**
	Visual	50	73.84	8.367					
Symbolic Punishment	Hearing	50	58.96	7.168	5.122	98	.000	9.860	**
	Visual	50	49.10	11.573					
Rejecting	Hearing	50	52.68	12.951	8.549	98	.000	18.380	**
	Visual	50	34.30	7.962					
Object Punishment	Hearing	50	55.60	9.891	6.645	98	.000	16.080	**
	Visual	50	39.52	13.962					
Demanding	Hearing	50	62.74	8.762	1.148	98	.254	2.020	Ns
	Visual	50	60.72	8.827					
Indifferent	Hearing	50	55.84	8.092	-3.357	98	.001	-9.440	**
	Visual	50	65.28	18.166					
Symbolic Reward	Hearing	50	62.98	10.025	-4.037	98	.000	-9.960	**
	Visual	50	72.94	14.276					
Loving	Hearing	50	66.58	8.408	-5.382	98	.000	-11.580	**
	Visual	50	78.16	12.679					
Object Reward	Hearing	50	63.78	7.563	-4.030	98	.000	-6.660	**
	Visual	50	70.44	8.908					
Neglecting	Hearing	50	49.98	12.260	6.186	98	.000	14.320	**
	Visual	50	35.66	10.845					
Total Parent Child Relationship	Hearing	50	592.68	41.811	1.691	98	.094	12.720	Ns
	Visual	50	579.96	32.871					

Significant level is at \*P<0.05, \*\* P<0.01, NS = Not significant

From table 1 it was observed that hearing impaired and visual impaired adolescents differ significantly at 0.01 level of significance in all the dimensions of parent child relationship except in the dimension of demanding. Thus, the hypothesis "There will be significant difference in the parent-child relationship of hearing and visually impaired adolescents" is accepted except for the dimension of demanding.

Graphical representation 1



**Fig 1:** Graphical representation of mean of parent-child relationship scores of hearing impaired and visually impaired adolescents

**TABLE 2**

Table showing the mean, standard deviation and 't'-value of mental health scores of hearing impaired and visually impaired adolescents

Impaired	N	Mean	Std. Deviation	t	df	Sig.(2 tailed value)	P	Mean Difference	Remarks
Mental Health									
Hearing	50	69.10	8.011	-5.969	98	.000		-8.740	**
Visual	50	77.84	6.560						

Significant level is at \*P<0.05,\*\* P<0.01, NS = Not significant

From table 2 it was found that the mean of visually impaired adolescents which was (M=77.84) was high as compared to the mean of hearing impaired adolescents (M=69.10). The standard deviation in case of visually impaired adolescents was 6.560 and in case of hearing impaired adolescents it was 8.011. The "t" value obtained is -5.969 (P=0.000) which is significant at 0.01 level. Therefore, the hypothesis "There will be significant difference between hearing and visually impaired adolescents in regards to mental health" is accepted.

Graphical representation 2

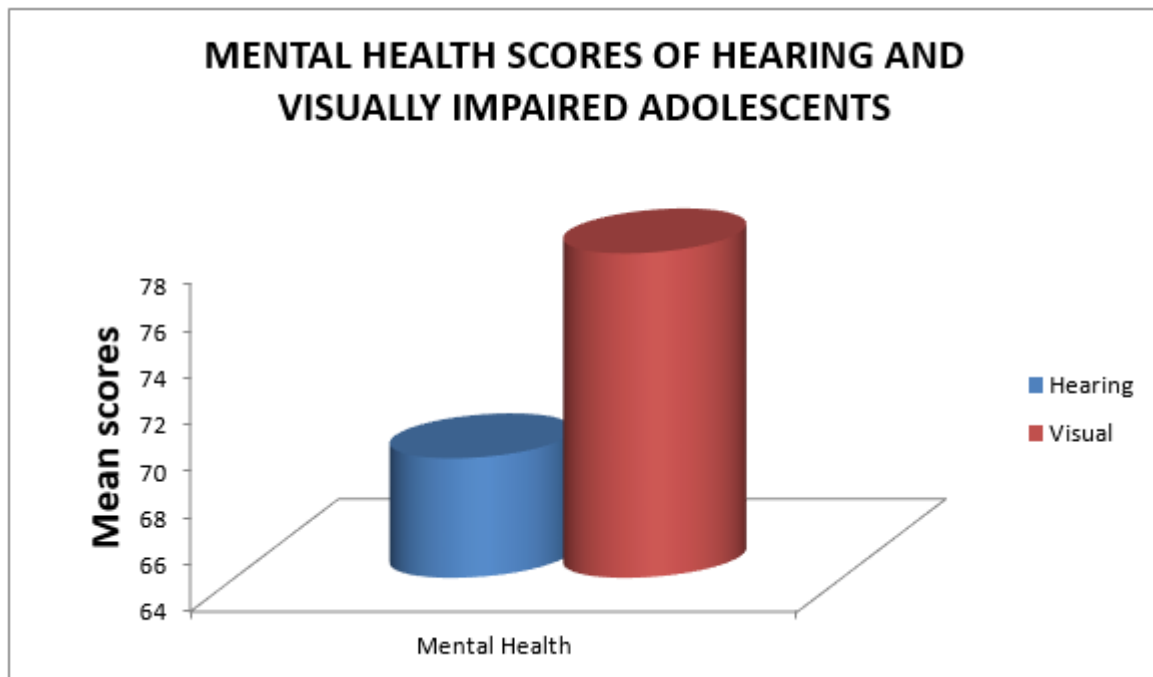


Fig 2: Graphical representation of mean value of mental health scores of hearing impaired and visually impaired adolescents

TABLE 3

Table showing the correlation between mental health and parent-child relationship of hearing impaired adolescents (N=50)

	Mean	SD	Pearson r
Total Parent child relationship	579.96	32.871	.041
Protecting	73.84	8.367	.005
Symbolic Punishment	49.10	11.573	-.117
Rejecting	34.30	7.962	-.130
Object Punishment	39.52	13.962	-.147
Demanding	60.72	8.827	.147
Indifferent	65.28	18.166	.201
Symbolic Reward	72.94	14.276	.094
Loving	78.16	12.679	.096
Object Reward	70.44	8.908	-.126
Neglecting	35.66	10.845	-.059

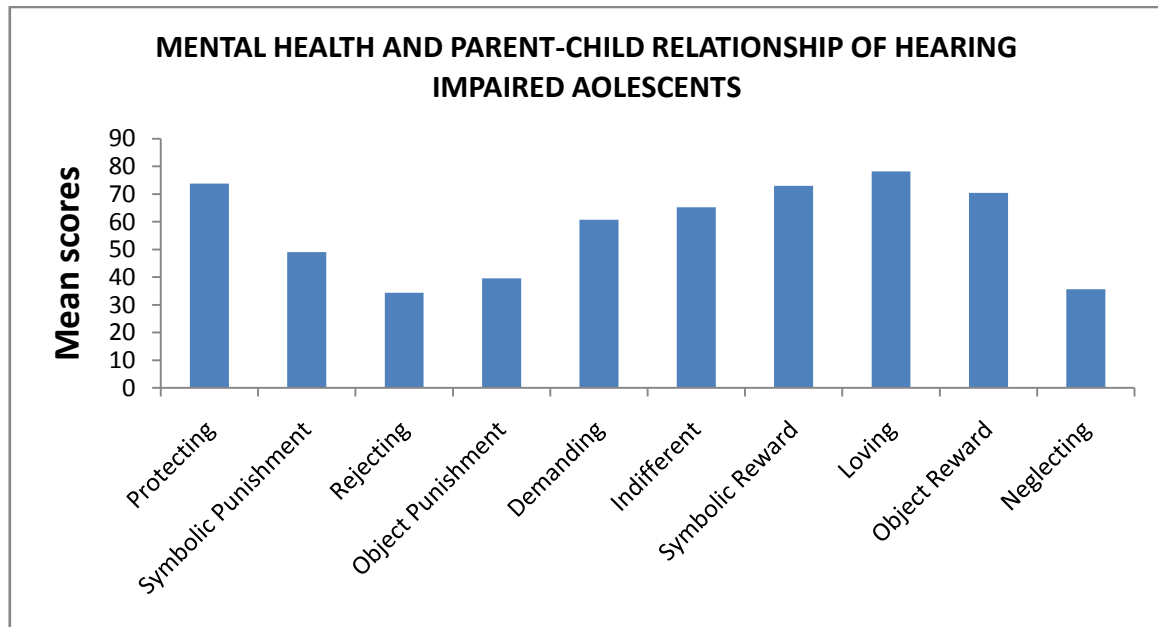
\*\* Correlation is significant at the 0.01 level (2-tailed).

\* Correlation is significant at the 0.05 level (2-tailed).

From table 3 it was found that there is no significant correlation between mental health and the dimensions of parent child relationship. The dimensions of parent-child relationship are positively correlated with mental

health except the dimension of symbolic punishment, rejecting, object punishment, object reward and neglecting. Therefore, the hypothesis “There will be significant relationship between mental health and parent-child relationship of hearing impaired adolescents” is rejected.

Graphical representation 3



**Fig 3:** Graphical representation of correlations between mental health and parent child relationship of hearing impaired adolescents

**TABLE 4**

Table shows the correlation between mental health and parent-child relationship of visually impaired adolescents (N=50)

	MEAN	SD	Pearson r
Total Parent-Child Relationship	592.68	41.811	.348*
Protecting	63.54	8.765	-.003
Symbolic Punishment	58.96	7.168	.189
Rejecting	52.68	12.951	.373**
Object Punishment	55.60	9.891	.248
Demanding	62.74	8.762	.098
Indifferent	55.84	8.092	.232
Symbolic Reward	62.98	10.025	-0.99
Loving	66.58	8.408	-.151
Object Reward	63.78	7.563	-.108
Neglecting	49.98	12.260	.514**

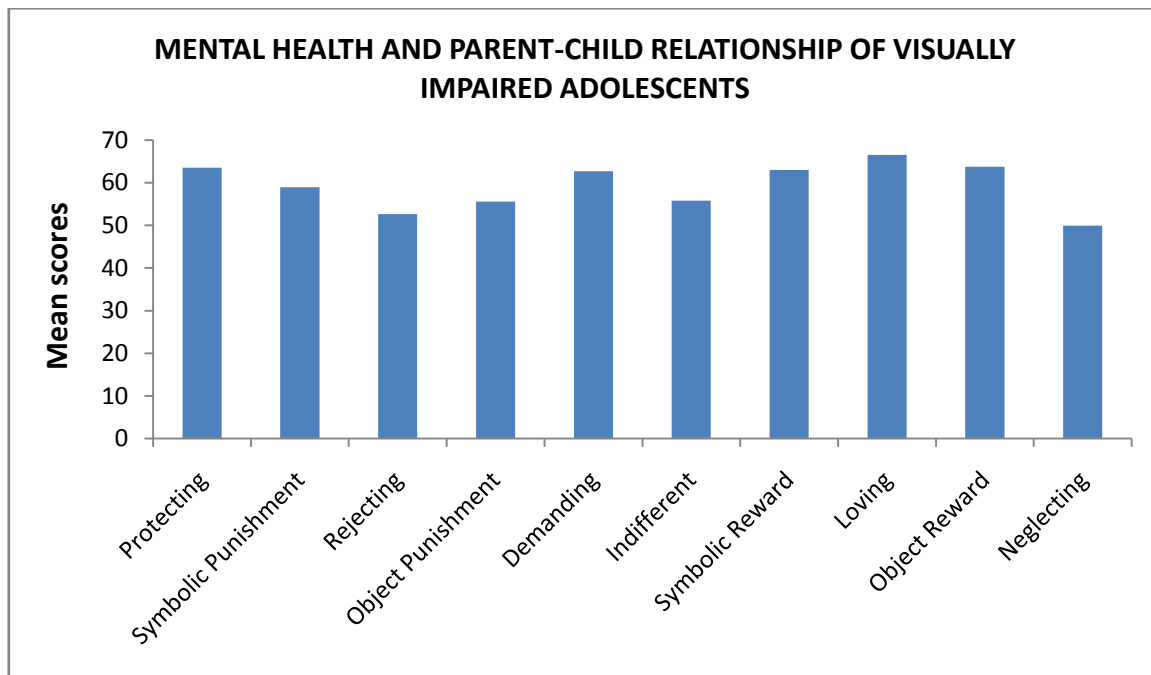
\*\* Correlation is significant at the 0.01 level (2-tailed).

\* Correlation is significant at the 0.05 level (2-tailed).

From table 4 it was found that the relationship between mental health and rejecting ( $r=.373$ ) and neglecting ( $r=.514$ ) is positively correlated which is significant at 0.01 level. The dimensions of parent-child relationship are positively correlated with mental health except the dimension of protecting, symbolic reward, loving and object reward. Therefore, the hypothesis "There will be significant relationship between mental health and parent child relationship of visually impaired adolescents" is accepted only for the dimension rejecting and neglecting.



Graphical representation 4



**Fig 4:** Graphical representation of correlations between mental health and parent-child relationship of visually impaired adolescents

**TABLE 5**

Table showing the correlation between mental health and parent-child relationship of total sample of visually impaired and hearing impaired adolescents (N=50)

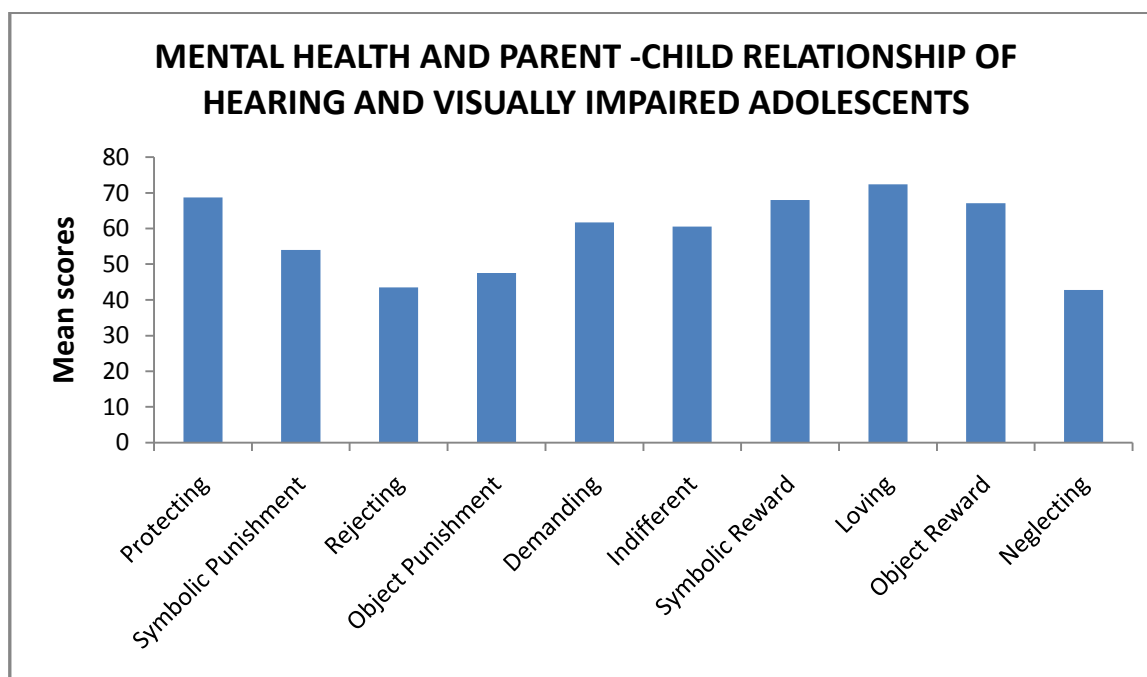
	Mean	SD	Pearson r
Total Parent-Child Relationship	586.32	37.960	.105
Protecting	68.69	9.973	.268**
Symbolic Punishment	54.03	10.783	-.227*
Rejecting	43.49	14.132	-.206*
Object Punishment	47.56	14.499	-.263**
Demanding	61.73	8.809	.042
Indifferent	60.56	14.773	.319**
Symbolic Reward	67.96	13.254	.199*
Loving	72.37	12.183	.236*
Object Reward	67.11	8.876	.104
Neglecting	42.82	13.579	-.076

\*\* Correlation is significant at the 0.01 level (2-tailed).

\* Correlation is significant at the 0.05 level (2-tailed).

From table 5 it was found that the relationship between mental health and the dimensions protecting ( $r=.268$ ), object punishment ( $r=-.263$ ) and indifferent( $r=.319$ ) shows significant relationship at 0.01 level. The relationship between mental health and the dimensions symbolic punishment ( $r=-.227$ ), rejecting ( $r=-.206$ ), symbolic Reward ( $r=.199$ ) and loving ( $r=.236$ ) shows significant relationship at 0.05 level. The dimensions of parent child relationship are positively correlated with mental health except the dimension of symbolic punishment, rejecting, object punishment and neglecting. Therefore, the hypothesis “There will be significant relationship between mental health and parent-child relationship of total sample of hearing and visually impaired adolescents” is accepted except for the dimension demanding, object reward and neglecting”.

Graphical representation 5



**Fig 5:** Graphical representation of correlations between mental health and parent-child relationship of total sample of and hearing and visually impaired adolescents

#### IV. DISCUSSION OF THE RESULTS

From table 1 it is seen that hearing impaired and visually impaired adolescents differ significantly in all the dimensions of parent-child relationship except in the dimension of demanding. It means that demanding has no significance between mental health and parent-child relationship in hearing and visually impaired adolescent.

From table 2 it was seen that the mean score of visually impaired adolescents was ( $M=77.84$ ) high as compared to the mean score of hearing impaired adolescents ( $M=69.10$ ). The reason for this perhaps because visually impaired cannot see so the issues in the environment do not affect them much but hearing impaired adolescents can see those issues so it might affect their mental health. Visually impaired and hearing impaired students differ significantly on security insecurity component of mental health battery (N A Nadeem, Javeed Ahmad Pujuan and Nadia Zahoor,2013).Wallis, Musselman, and MacKay (2004) used the Youth Self Report (YSR) of the ASEBA (Achenbach &Rescorla, 2001) and reported 54% of students with hearing loss experiencing a mental health problem.

From table 3 it was found that there is no significant correlation between mental health and the dimensions of parent-child relationship. The dimensions of parent child relationship are positively correlated with mental health except the dimension of symbolic punishment, rejecting, object punishment, object reward and neglecting. This means there is no significant relationship between mental health and parent-child relationship of hearing impaired adolescent

From table 4 it was seen that the relationship between mental health and rejecting ( $r=.373$ ) and neglecting ( $r=.514$ ) is positively correlated which is significant at 0.01 level. The dimensions of parent child

relationship are positively correlated with mental health except the dimension of protecting, symbolic reward, loving and object reward. In families where parents lose their temper, reject their child if their behaviour is not pleasant, give symbolic expression of appreciation and deliberately carelessly treat their child will affect their mental health in a negative way.

From table 5 it was found that the relationship between mental health and the dimensions protecting ( $r=.268$ ), object punishment ( $r=-.263$ ) and indifferent( $r=.319$ ) shows significant relationship at 0.01 level. The relationship between mental health and the dimensions symbolic punishment ( $r=-.227$ ), rejecting ( $r=-.206$ ), symbolic Reward ( $r=.199$ ) and loving ( $r=.236$ ) shows significant relationship at 0.05 level. The dimensions of parent child relationship are positively correlated with mental health except the dimension of symbolic punishment, rejecting, object punishment and neglecting. Parents who might not be able to give symbolic expression of appreciation for emotional and psychological security, reject their child if their behaviour is not pleasant, parents show annoyance to their child or neglect their children can affect their mental health in a negative way. However, if parents can express in their behaviour that they are ready to protect their children from situations which are perceived to be hostile or harmful, do not show their annoyance physically and do not express unconcerned behaviour will affect the child in a positive way.

## V. FINDINGS

- There is significant difference in the parent-child relationship in hearing and visually impaired adolescent except for the dimension of demanding.
- There is significant difference between hearing and visually impaired adolescent in regards to mental health.
- There is no significant relationship between mental health and parent child relationship of hearing impaired adolescent.
- There is significant relationship between mental health and parent-child relationship of visually impaired adolescent only for the dimension rejecting and neglecting of parent child relationship scale.
- There is significant relationship between mental health and parent-child relationship of total sample of hearing and visually impaired adolescents.
- There is no significant relationship between mental health and parent-child relationship of total sample of hearing and visually impaired adolescents for the dimension demanding object reward and neglecting.

## VI. CONCLUSION

In order to improve the mental health of adolescent, it is important to identify the relationship of parent child relationship which might facilitate the mental health of their children. It is important for parents to give them such type of environment which will lead to a positive mental health so that they can adjust themselves in today's society by overcoming the hurdles laid before them in their life. A person who has good mental health, also have good emotional and social wellbeing and the capability to cope with change and challenges. In families where parents lose their temper, reject their child if their behaviour is not pleasant, give symbolic expression of appreciation and deliberately carelessly treat their child will affect their mental health in a negative way. Parents who might not be able to give symbolic expression of appreciation for emotional and psychological security, reject their child if their behaviour is not pleasant, parents show annoyance to their child or neglect their children can affect their mental health in a negative way. However, if parents can express in their behaviour that they are ready to protect their children from situations which are perceived to be hostile or harmful, do not show their annoyance physically and do not express unconcerned behaviour will affect the child in a positive way.

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