

Maltreatment among Deaf, their Non-Disabled Siblings and Hearing Children: Prevalence and Prevention

BUSHRA AKRAM*

Department of Psychology
University of Gujrat, Gujrat
Pakistan

SAMEERA SHAFIQ

Department of Psychology
University of Gujrat, Gujrat
Pakistan

Abstract:

The present study was conducted to explore the prevalence as well as to compare the levels of maltreatment among deaf, their non-disabled siblings and hearing counterparts in District Gujrat, Pakistan. For this purpose the three groups were compared on three components of maltreatment that are physical abuse, emotional abuse, social abuse and neglect. An indigenous scale was developed on the basis of literature review and presented to experts of relevant field of knowledge for content validity. The modified scale was administered on 155 hearing and 30 deaf children in pilot testing. The internal consistency of both sample were .96 and .95 respectively. A few items were rephrased as a result of pilot study and the final instruments were administered on 410 deaf their 161 non-disabled siblings and 510 hearing children in field study. Hearing students were selected by simple random technique and deaf were recruited conveniently from the schools of Gujrat, Kharian, Jhelum, and Gujranwala. The statistical analysis of data showed that deaf children were more physically, emotionally and socially abused than their non disabled siblings as well as their hearing counterparts. Further 227 parents & 24 teachers of deaf as well as 301 parents & 24 teachers of hearing participants also gave their opinion on Child Maltreatment Scale. The

* Corresponding author: bushra.akram@uog.edu.pk

deaf participants are perceived to be more physically, emotionally and socially abused by their parents and teachers as compared to their hearing counterparts. A child maltreatment prevention plan validated by experts was recommended at the end.

Key words: Deaf, Maltreatment, Prevention

Introduction

We all know that children cannot fulfill their physical, social, educational and emotional needs by themselves. They are highly dependent on the adults. This dependency makes them vulnerable to different forms of victimization, which is abuse or maltreatment of someone whose ability to protect himself / herself is limited. Maltreatment can take many forms including acts experienced by the majority of children such as corporal punishment, sibling violence, and peer assault, as well as acts experienced by a significant minority, such as physical abuse (Finkelhor & Dzuiba-Leatherman 1994). Marginalized children are more at risk to be maltreated. Deaf and hard-of-hearing children are neglected, abused and otherwise maltreated at a rate 25 percent greater than their hearing counterparts (Rochester 2010).

According to Abdelaziz (2012),

Deafness is defined as a degree of impairment such that a person is unable to understand speech even in the presence of amplification. Hearing loss exists when there is diminished sensitivity to the sounds normally heard. The terms hearing impairment or hard of hearing are usually reserved for people who have relative insensitivity to sound in the speech frequencies. They hear only on a specific frequency and certain magnitude of voice. There are four levels of hearing loss: mild moderate, severe and profound. In profound deafness, even the loudest sounds produced by an audiometer (an instrument used to measure hearing by producing pure tone sounds through a range of frequencies) may not be detected (602).

The people with hearing loss are deficient in one sense only and not on other mental abilities. They are often called as deaf and dumb (mute), hearing impaired and deaf. However the terms deaf and dumb are not appreciated by the deaf community. Deaf is a cultural term and is used by deaf people.

In the present study, the child maltreatment will be measured with the help of a scale comprised of four basic categories namely physical abuse, neglect, emotional abuse, and social abuse. According to Mash and Wolfe (2002) physical abuse included beating, shaking, kicking, and biting the child which may result in severe injuries. 19% of all reported cases of child abuse are physical in nature, and are the most visible form of maltreatment (National Exchange Club Foundation 2013). Children with hearing loss are between 2 (Sullivan & Knutson 1998) and 4 times (Sullivan & Knutson 2000) more likely to endure physical abuse compared to children without disabilities.

Neglect is comprised of three forms namely: 1) physical neglect, which results in delayed hospital visit; 2) educational neglect, which involves failing to enroll a child in school at appropriate age; 3) emotional Neglect, which included not paying attention to the child's needs of love and affection. It is the most prevalent form of maltreatment in the United States (American Humane Association 2006). As a type of maltreatment, neglect is understood to refer to the failure by the caregiver to provide needed, age-appropriate care although financially able to do so or offered financial or other means to do so (McDonald et al. 2005). Therefore in the present study the neglect is characterized by the absence of basic human needs such as food, health care, safety, or overall appropriate parental care.

Sullivan and Knutson (1998) reported that neglect accounts for over 68% of all maltreatment of children with communication disorders. These authors also found that children with communication disorders and children with

hearing loss were much more likely to experience longer episodes of neglect when compared to children who had no disability (Sullivan & Knutson 1998). One study found the rate of maltreatment of children with hearing loss to be 2.3 times higher (Sullivan and Knutson 2000).

Emotional abuse referred to the use of verbal threats and put-downs behaviors (Mash & Wolfe 2002). Several studies have investigated whether different types of impairment are variously associated with different forms of abuse. Morris (1999) found that disabled children were more likely to be referred and / or registered for emotional abuse and neglect than nondisabled children. Social abuse referred to the fact that deaf children are excluded from participation in different social settings of family and school. It also included communication abuse if parents do not use a child's preferred sign language and do not facilitate them in the development of their communication skills.

The present study will not focus on the sexual abuse because children with hearing impairments do not have appropriate sign language for sexual connotations and in order to make these concepts understandable for them one has to physically touch them which seems to be difficult in Pakistani culture.

Hershkowitz, Lamb and Horowitz (2007) conducted research on the victimization of children with disabilities. They found that the children with disabilities (CWDs) are more likely to be victims of child abuse but may have more difficulty than their typically developing (TD) peers reporting their experiences. Furthermore, they examined the characteristics of abuse reported by CWDs based on forensic statements made by 40430 alleged abuse victims, 11% categorized as children with minor disabilities, and 1.2% categorized as children with severe disabilities. Proportionally more of the CWDs than of the TD children were allegedly victims of sexual rather than physical abuse. CWDs failed to disclose abuse and delayed disclosure

more often than TD suspected victims. CWDs were more likely than TD children to be abused by parent figures and to experience physical abuse resulting in body injury or serious sexual offenses, including those involving penetration, repeated abuse, use of force, and threats.

After adjusting for demographic and socioeconomic factors, a history of abuse or neglect was associated with the disorders like anxiety, mood and substance abuse conditions. The strongest associations were with post-traumatic stress disorder (PTSD) and obsessive-compulsive disorder (Scot, Smith & Ellis 2010). A survey among a sample of middle school children in Karachi concluded that 88.7% school going were physically and / or verbally abused by teachers and parents. Slapping was the most common and it was most resorted to by mothers. Other forms were hitting with shoes, pushing and shoving, use of stick and neck gripping and choking (Looking at Public Health and Human Rights in South Asia n.d.).

Hearing impairment causes psychological and social difficulties because it interferes with a person's ability to communicate effectively. Communication plays an essential role in maintaining relationships and the quality of life, and hearing loss deprives not only the individual, but also family and friends, of easy communication. Repeated instances of unheard or incorrectly heard communications are frustrating for the individual and everyone he converses with and may cause all those involved to initiate conversation less frequently. When these frustrating situations occur over prolonged periods, family relationships can be severely strained.

Hearing impairment also limits access to information that is normally available through personal communication, television, radio, and telephone. The birth of deaf child in a family can be a cause of traumatic emotionally draining experience (Moore 2001). The majority of the deaf children have hearing parents who have little experience of dealing with the deafness as a phenomenon. The family members have to

adjust to the needs of a child with a disability therefore changes in their roles may be necessary. For example, fathers and siblings may be asked to accept greater caretaking responsibility. Seligman (1991) and others (e.g. Quittner, Glueckauf & Jackson 1990; Wilker 1986) who have sought to understand the impact of disability on a family have noted that the stress experienced by families with disabled children is chronic, rather than acute. The deficient development is due to different ways of communication between a deaf and hard of hearing child and his parents. Some descriptive statistics about the population of children with hearing loss shed light on these children's lives. Research conducted by the Gallaudet Research Institute (2003) found that during a typical school year nearly 90% of all children who were deaf or hard of hearing had parents with no hearing loss (as cited in National Child Traumatic Stress Network (NCTSN) 2004). This research also concluded that although half of the students were using some type of signed communication method, over 70% of all parents did not use signs regularly (Gallaudet Research Institute 2003 as cited in NCTSN 2004). This inconsistency between parent and child communication methods may be at the heart of the breakdowns in communication that could lead to maltreatment by a parent or allows maltreatment by someone else to continue because parents do not understand their child's attempts to communicate what is happening to them. Turnbull and Turnbull (1997) found that parents may neglect or over protect their deaf children because of their own stress which may be a cause of their children's poor social skills. Meadow (1980) as well as Meadow and Schlesinger (1971) found that the overprotection on the part of the parents may impede the social development of their deaf children. According to Crow (1984) overprotecting and neglecting behavior of parents is a form of emotional abuse. He described that emotional abuse in the absence of physical damage is difficult to document but its effects can be equally crippling. According to Hein (2005)

emotional abuse is like brain washing in that it systematically wears away the victim's self-confidence, sense of self worth, trust in his own perception, and self concept. He further reported that emotional abuse cuts to the very core of a person creating scars that may be far deeper and more lasting than physical ones. Its victims can become so convinced that they are worthless and thus stay in abusive situations because they believe they have nowhere else to go. Their ultimate fear is of being all alone. Sinnot and Jones (2005) reported a history of sexual, psychological and drug abuse among deaf children.

In Pakistan, the parents try to discipline the children and in doing so may use coercion, abusive language and force. They are not aware of the fact that the children feel humiliation and neglect. Individuals with disabilities are regarded as unfortunate ones by the parents who cannot perform their roles correctly or effectively. According to Miles and Hossain (1999) many parents and relatives take their children with disabilities as an economic burden and they think that their birth is the result of the family sins. Further the parents, teachers and other relatives consider the children with hearing loss deficient in cognitive functioning therefore they cannot be useful and independent citizens (Batool & Shabaz 2008).

Existing studies have mentioned that parents perceive their children with hearing impairment as unable to contribute to the society in a positive way and this belief may lead towards the development of child maltreatment, which is harmful for children's personality growth and capacity building. Further, it could result in low self-esteem, and lack of confidence which may result in adjustment problems and healthy development of relationships with others. They may suffer from some psychiatric or physical disorders and are prone to delinquent inclinations. In Pakistan the children without disabilities in their early years, are victims of malnutrition, poverty, child labor, early marriage, gender discrimination, poor health and educational facilities (Kamran 2004 & Anwar 2009). In the

overall development of a child especially the communication and language skills are badly affected due to hearing loss. No one can deny the importance of these skills in developing relationships and communicative interactions with significant others.

According to Lobato, Kao, and Plante (2006), usually, children spend more time with their siblings in their lifetime than their parents. They further reported that the diagnosis of a disability can inversely affect the siblings. Literature review also indicated that parents transfer many of their responsibilities of deaf children to their siblings. The siblings share the responsibilities of taking care of their sister or brother with hearing loss thus their own relationships with the other family members and friends will be impaired. In this way the hearing loss of their brothers or sisters may affect their lives. The study will also find the perception of the siblings if they perceive themselves as maltreated. The perception of parents as well as teachers of deaf and hearing students was also recorded to know if they are maltreated.

Significance of the Study

Our greatest social, religious and moral responsibility is to protect our children from maltreatment and abuse. Abuse and neglect during childhood appear to be associated with increased rates of mood, anxiety and substance use disorders among young adults (Scot, Smith & Ellis 2010). Maltreated children of today can never be patriotic, positive and useful citizens of tomorrow. There are some international / national laws that are applicable to the abuse of children in Pakistan. Unfortunately their implications are limited. The study will draw the attention of stakeholders and policy makers to take steps for the prevention of child maltreatment. The study not only will indicate the field based prevalence of child maltreatment among three groups but it will also give a valid preventive plan.

Research Objectives:

The objectives of the present study are to:

1. Identify the prevalence of child maltreatment (physical, social, emotional and neglect) among institutionalized (school going) deaf children.
2. Comparatively analyze the prevalence between deaf and hearing children.
3. Compare maltreatment among deaf, their non-disabled siblings and hearing children.
4. Know the perceptions of parents and teachers regarding child maltreatment among deaf and hearing children.
5. Devise the recommendation for prevention of child maltreatment.

However, the major **hypothesis** of the study derived is:

- There is a significant difference in the levels of physical abuse, emotional abuse, social abuse and neglect between deaf, their siblings and hearing participants.

Methodology

It was a survey with cross sectional design. A comparative research as well as an exploratory study to see the prevalence and to compare the level of maltreatment among three groups.

Sample & Sampling Technique

According to 1998 census report of Pakistan 2.5 % of the total population are the persons with different disabilities while 8.5% of them are deaf individuals (National Policy for Persons with Disabilities 2002). But the mentioned data is of deaf individuals of all age range whereas for this study the school students from 8 to 16 years were to be selected. Therefore schools were approached to collect information about the actual population of children with hearing loss of this age. Total 500 deaf participants were approached conveniently whereas 410

participants could fill the scales. Purposive Sampling was used to select the schools of hearing children because only those schools were selected that were located near the schools of deaf students. A total 600 hearing participants were selected by simple random sampling technique, however 510 could fill the instrument. Further the parents of 410 deaf and 510 hearing students were requested to give their opinion on child maltreatment scale. Only 227 parents of deaf and 301 of hearing children gave their opinion. The non -disabled siblings 161 of the deaf participants were also included. To know the perception of teachers on child maltreatment 43 of hearing and 24 of deaf students were also included.

Measurements

Five point Likert Scales were developed on the basis of literature review and were used to assess the perceptions of physical, social, and emotional abuse of deaf, their non disabled siblings and hearing participants as well as of their parents and teachers. The scales were used with modifications according to the needs of the population. The internal consistency of the scales were 0.98 (deaf participants), 0.93 (siblings), 0.93 (hearing participant), 0.85 (parents of hearing children), 0.77 (parents of deaf children), 0.93 (teachers of deaf participants), and 0.79 (teachers of hearing participants respectively. The scales were presented to 3 relevant PhD experts to estimate the content validity.

Results

In order to answer the questions the data was entered in SPSS and appropriate statistical tests were administered. Data did not meet the assumptions for parametric analysis therefore Non-Parametric procedures were applied.

The primary research questions of the present study were:

1. What is the prevalence of maltreatment of deaf, their

- non-disabled siblings and hearing students?
2. Is there any difference between the level of maltreatment of deaf, their non disabled siblings and hearing participants?
 3. Are the deaf and hearing participants perceived differently by their parents on maltreatment scale?
 4. Are the deaf and hearing participants perceived differently by their teachers on maltreatment scale?

The question no 1 was answered by computing the three ranges of maltreatment (mild, moderate, severe) on the basis of severity and then by calculating the frequencies and percentages.

Level of Severity	Deaf Children		Hearing		Siblings of Deaf children	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Mild	97	23.7	104	20.4	16	9.9
moderate	278	67.8	401	78.6	143	88.8
Severe	35	8.5	0	0	2	1.2
Total	410	100.0	505	99.8	161	100

Table 1- Prevalence of maltreatment in three groups according to the level of severity

Above table shows that 67.8 % deaf children are moderately maltreated, 8.57% are severely maltreated and 23.7 % are at the mild level whereas 20.4% hearing participants are mildly maltreated and 78.6 % are moderately maltreated. The 88.8% siblings of deaf children are moderately maltreated, 9.9% are mildly maltreated and only 1.2% are severely maltreated.

Q-2 .Is there any difference in the level of maltreatment among three groups of participants (deaf, their normal siblings and hearing)?

Analysis of variance, Kruskal Wallis, was administered to know the difference in the level of maltreatment of three groups (See Table 2).

Variables	Hearing level	N	Mean Rank	ChiSquare	p-value
Physical maltreatment	Hearing	510	431.00	125.00	.000***
	Deaf	410	658.40		
	Siblings	161	589.72		
	Total	1081			
Emotional maltreatment	Hearing	510	443.25	100.16	.000***
	Deaf	410	609.12		
	Siblings	161	677.19		
	Total	1081			
Neglect & Social maltreatment	Hearing	510	554.51	68.05	.000***
	Deaf	410	595.57		
	Siblings	161	359.25		
	Total	1081			
Total maltreatment	Hearing	510	466.82	58.59	.000***
	Deaf	410	623.80		
	Siblings	161	565.13		
	Total	1081			

Table 2- Analysis of variance of children maltreatment on the basis of hearing ability
 $p < .0001$ ***

Table 2 shows that the hearing ability plays a significant role in physical (Chi- Square, 125; $p = .000$), emotional (Chi- Square, 100.16; $p = .000$), and neglect and social (Chi- Square, 68.05; $p = .000$) maltreatment among children. Mean Rank shows that the deaf children face higher level of physical, emotional maltreatment and neglect and social maltreatment than their non disabled siblings as well as their hearing counterparts. On the other hand the non disabled siblings of deaf children are more maltreated than hearing participants. The hypothesis of the study is accepted.

Q.3. Are the deaf and hearing participants perceived differently on child maltreatment scale by their parents?

Variables	Parents of	(n)	Mean Rank	U-value	z-value	p-value
Emotional Maltreatment	Hearing	301	187.58	1.11	-2.93	.0001***
	Deaf	227	365.85			
Child neglect & social Maltreatment	Hearing	301	167.43	4.94	-16.84	.0001***
	Deaf	227	393.00			
Physical Maltreatment	Hearing	301	247.65	2.90	-2.93	.003**
	Deaf	227	286.85			
Total child Maltreatment	Hearing	301	163.28	3835	-17.45	.0001***
	Deaf	227	397.11			

Table 3- Mean and U-value of deaf and hearing participants on the basis of parents perception on child maltreatment scale

***p< .0001, **p<.01, *p< .05

Table 3 shows significant difference in the perception of the parents of deaf and hearing participants on child maltreatment scale i) Emotional maltreatment of hearing (\bar{x} = 187.58) and deaf (\bar{x} =365.85) participants; $U(526) = 1.11$, $z = -2.93$, $p < .05$), ii)Physical maltreatment for hearing (\bar{x} = 247.65) and deaf (\bar{x} = 286.85) participants; $U(526) = -2.90$, $z = -2.93$, $p < .05$), iii) Total child maltreatment of hearing (\bar{x} = 163.28 and deaf (\bar{x} = 397.11) participants; $U(526) = 3835$, $z = -17.45$, $p < .001$) and on Child neglect and social maltreatment for parents of hearing (\bar{x} = 167.43) and deaf (\bar{x} = 393) participants; $U(526) = 4.94$, $z = -16.84$, $p < .001$.

Q. 4. Are deaf and hearing participants perceived differently by their teachers on maltreatment scale?

Variables	Teachers	(n)	Mean Rank	U-value	z-value	P
Emotional Maltreatment	Hearing	43	22.38	16.50	-6.56	.0001***
	Deaf	24	54.81			
Child neglect &	Hearing	43	26.56	196	-4.23	.0001***

social Maltreatment	Deaf	24	47.33			
Physical Maltreatment	Hearing	43	23.19	51.00	-6.12	.0001***
	Deaf	24	53.38			
Total child Maltreatment	Hearing	43	24.24	96.50	-5.49	.0001***
	Deaf	24	51.48			

Table 4-Mean and U-value of deaf and hearing participants on the basis of teachers perception on child maltreatment scale

***p< .001 *p< .05

There is a significant difference in the perception of teachers that their hearing and deaf students are maltreated by teachers as shown by values in Table 4.i) Emotional maltreatment for teachers of hearing ($x' = 22.38$) and deaf ($x' = 54.81$) participants ; $U(65) = 16.5$, $z = -6.56$ $p < .0001$), ii) Child neglect & social maltreatment for deaf ($x' = 47.33$) and hearing participants ($x' = 26.56$); $U(65) = 196$, $z = -4.23$, $p < .05$), iii) Physical maltreatment for deaf ($x' = 53.38$) and hearing ($x' = 23.19$) participants; $U(65) = 51$, $z = -6.12$, $p < .0001$), and iv) Total child maltreatment for hearing ($x' = 24.24$) and deaf ($x' = 51.48$) participants; $U(65) = 96.50$, $z = -5.49$, $p < .0001$).

Discussion

Table 1 & 2 showed that deaf children are more physically abused and neglected than their siblings and hearing counterparts. However the non-disabled siblings of deaf participants are more maltreated than the hearing children. Hearing loss is the main cause of poor language skills and thus plays a significant role in impaired relationship of deaf children with their parents, siblings, relatives and friends. The main reason is communication gap that does not let deaf children understand the emotions and wishes of others and vice versa. Previous studies also indicated that poor communication of deaf children may worsen the relationship and their interaction with

outer world and this may lead towards maltreatment. This result is also supported by the previous researches that indicated that deaf children are at higher risk of physical and emotional abuse (Sullivan & Knutson 1998; Rochester 2010). They are neglected or overly protected by their significant others. Their needs are not fulfilled by parents at times completely or partially and they are taken as a burden. This was revealed by the results that the educational, social and emotional needs of the majority of deaf participants are not being met. The reason may be the parental stress that they face with the birth of child with hearing loss (Iftikhar & Yasmeen 2009). The financial and social stressors change the relationships of family members. The social and emotional life of the parents may be affected negatively because hearing parents of deaf children feel difficulty in accepting and dealing with the unique communication needs of their deaf children. Majority of the parents cannot adjust their expectations according to the actual abilities of deaf children. Therefore they feel frustration and depression that may lead to child maltreatment. The parents may neglect the needs of their children. This study also indicated that not only the deaf children perceive themselves as maltreated but their parents and teachers perceive the deaf children more maltreated as compared to the parents and teachers of hearing children.

Moreover the siblings share the parents' responsibilities of taking care of their deaf brother or sister. Siblings may feel embarrassment of having a deaf brother and sister as his/her disability is obvious to their friends. Grossman (1972) found that siblings of children with disabilities may have negative feelings of shame, guilt, embarrassment and anger. They may have the feeling of having lost their own childhood because they had to assume responsibilities at an early age. However he also reported the positive consequences of disability like patience, acceptance and dealing with diversity in siblings.

Meyer and Vadasy (1994) listed common complaints of

siblings when they have a brother or sister with a communication disorder. Siblings cite a lack of “information about their brother or sister’s condition and that they experience extra child-care and household responsibilities, differential treatment, embarrassment, isolation from their peers, and disruptions in family activities due to their brother or sister’s special needs”. Parents may transfer their stress of having a deaf child to the other members of family therefore the negative feelings and concerns in siblings may arise. They felt as being neglected and their needs are unmet and unfulfilled. The results of this study showed that non disabled siblings of deaf children are overly burdened and they perceived themselves as physically, emotionally abused and neglected because of the disability of their brother or sister. Qurat-ul-Ain, Yaqub and Akram (2011) found that 92% of non disabled siblings have to fulfill the responsibilities of their deaf brother or sister and 56% of them feel depression due to the hearing loss. The researchers further reported that 80% siblings help their deaf brother and towards their children with disabilities the experiences of non disabled siblings with their deaf brothers and sisters may also be positive.

It is notable that not only deaf and their siblings perceived them as maltreated but the hearing children also mentioned that they are physically and emotionally abused. These results are aligned with previous studies (Malik 2010). The results indicated that not only deaf, their non-disabled siblings and hearing participants revealed that they are maltreated but the deaf participants are perceived more maltreated by their parents and teachers as compared to the parents and teachers of hearing children.

Recommended Plan

The following plan is given on the basis of descriptive as well as inferential analysis.

- The study indicated that not only deaf children and their siblings perceive themselves as having been maltreated but the majority of hearing children are also moderately maltreated. Therefore a study may be carried on to focus only on the hearing children with a representative sample to know the facts of maltreatment.
- A further in-depth study is needed to explore the demographic correlates, other reasons and factors of child maltreatment in deaf, their non disabled siblings as well as their hearing counterparts. This should include parents, teachers, policy makers, multidisciplinary team, school principals and other relevant persons besides children.
- Further study should be done on the reliability and validity of the measures used in the present study.
- The policymakers should not only formulate the policies but it is the responsibility of government to implement them. In recent days the government took steps to make schools friendly and corporal punishment was condemned but the students are, in spite of that, the victim of harassment and physical punishment. Even the presence of a stick in the hands of a teacher is enough to emotionally harass the students. In order to strengthen some desirable behavior negative reinforcement may work.
- There is a severe shortage of speech therapists in the schools for deaf children. There is a need to make a policy under which every fresh speech therapist has to work for a year in any government school for deaf children and he should not be allowed to indulge private practice during the morning timings.
- The government should produce speech therapists keeping in view the ratio of deaf students in schools.
- Similarly the government should try to produce more audiologists who can assess the right level of hearing

loss as well as can suggest appropriate hearing aid. The majority of the schools have no audiologist. Therefore in these schools teachers with no professional training are assessing the hearing loss and suggesting the hearing aids. Consequently in majority of the cases the suggested hearing aids fail to help deaf children in developing their communication skills. These hearing aids are in fact the source of distortion and pain for the students. School must have a liaison with hospital where qualified audiologist can assess the hearing of children.

- There should be a rule of every school of deaf children not to admit a child without the hearing assessment by an authenticated audiologist in the absence of an audiologist in school. The students should be provided appropriate hearing aids according to this assessment. The parents should be trained how to wear and clean these hearing aids. Schools can arrange training program in this regard.
- The government should help deserving students in obtaining the hearing aids or other assistive technology or school can arrange from PTA (Parents Teachers Association) fund.
- The parents should get the hearing assessment of their new born babies so that the affected child may have early intervention.
- There should be a trained psychologist and social worker in every school for the counseling of teachers, parents, deaf children and their siblings.
- In the schools majority of teachers are reluctant to use sign language. The school management encourages teachers to use total communication while teaching. Otherwise a sign interpreter should be provided in every school.
- The school management and teachers should encourage

parents to visit them to discuss the child performance or any other problem relevant to deaf child.

- The school management should guide parents, teachers, deaf children and community members in dealing with the needs of deafness through seminars and group discussions. Further these programs can spread awareness about the physical, emotional and social abuse and neglect.
- Education, Special Education Departments of government, NGOs, Media should play their role in creating awareness among parents, relatives and community members that their deaf children perceive themselves as being maltreated. The parents should accept the deafness of their child as a different way of functioning and not an impairment or mental deficiency. They should not take it as a pathology or a disease. They should treat their children with hearing loss as their non-disabled children. They are not useless. They have equal rights to be properly educated and protected. They should be given due love and respect. They should not be called as deaf and dumb. Dumb means duffer and children with deafness are not dumb. It is better to call them deaf or children with hearing loss.
- Moreover the above mentioned agents should create awareness about the children's rights in the light of UN Convention on Human Rights and Convention on The Rights of Persons with Disabilities (CRPD). Pakistan ratified the convention in December 1990. Moreover Pakistan also ratified Convention on the Rights of Persons with Disabilities (CRPD) in 2011.
- The parents should check their deaf children's school diaries daily. They should help them in their school homework and also visit their schools.
- The parents should accept the hearing loss of their children positively. This may help siblings to perceive

deafness positively too. Parents and siblings help the deaf child collaboratively. The siblings should not be forced to take responsibilities of deaf children.

- The schools should be equipped with visual aids in training and educating the deaf children
- Educated parents commit less child maltreatment therefore government should take serious steps to provide education for all.
- At the end it is recommended that the government should take steps to mainstream deaf children in regular schools where the hearing loss will be viewed as a different way of living. The siblings, peers, friends and community members will accept deafness as a phenomenon. They all learn sign language. The hearing aids, sign language and deafness itself will be no more a source of embarrassment and difference but would be a part of the culture where deaf persons and their siblings will not feel rejected, neglected and isolated. The deaf children will not be unheard.

Acknowledgements

The study has been funded by Higher Education Commission as a Start-up Research Grant to the First Author.

BIBLIOGRAPHY:

- _____. *Looking at Public Health and Human Rights in South Asia*. (n.d). Online May, 30, 2012, Retrieved from www.visionpakistan.org/Assets/reports/chilldabuse.htm
- Abdelaziz, E. Y. 2012. *Textbook of clinical pediatrics* (2 ed.). Berlin: Springer. p. 602.
- American Humane Association. 2006. *Child abuse and neglect prevention*: retrieved from www.americanhumane.org
- Anwar, Q. 2009. *International problems of street children*:

- Retrieved on September, 10, 2013 from www.thfpak.webs.com.
- Batool, B. S., & Shabaz, S., F. 2008. *A study of the perceptions of the teachers of HIC about the capabilities of HIC*: Unpublished Master's Thesis; Department of Special Education; University of Punjab, Lahore.
- Crow, J. 1984. "Awareness and recognition." In *Child abuse and neglect*, edited by E. L. Erickson, A. McCevey, & D. Colvei, 56-63. Florida Learning.
- Finkelhor & Dzuiba-Leatherman. 1994. "Children victims of violence: A national survey." *Pediatrics* 94 (4)
- Grossman, F. K. 1972. *Brothers and sisters of retarded children*. Syracuse: Syracuse University Press.
- Hershkowitz, I., Horowitz, D., Lamb, M.E. 2007. "Victimization of children with disabilities." *American Journal of Orthopsychiatry* 77(4): 629-635.
- Hein, S. 2005. *Emotional intelligence tests*: Retrieved on February 2, 2012 from <http://eqi.org/index.htm>.
- Iftikhar, S., & Yasmeen, M. 2009. *A study of stress experience by the parents of HIC*: Unpublished Master's Thesis; Department of special education; University of Punjab, Lahore.
- Kamran, M. 2004. *Pakistan: Condition of Pakistani children the worst in South Asia*. <http://acr.hrschool.org/mainfile.php/0174/297/>.
- Lobato, D., Kao, B., & Plante, W. 2005. "Latino sibling knowledge and adjustment to chronic disability." *Journal of Family Psychology* 19: 625-632.
- Mash, E. J., & Wolfe, D. A. 2002. *Abnormal child psychology*. Belmont, CA: Wadsworth Group.
- Mcdonald, Shusternan, Hollinshead, Fluke, Yuan. 2005. *Alternative response to child maltreatment: Findings from NCANDS, U.S.*, Department of Health and Human Services: Office of the Assistant Secretary for Planning and Evaluation.

- Meadow, K. P., & Schlesinger, H. S. 1971. "The prevalence of behavioral problems in a population of deaf school children." *American Annals of the Deaf* 116: 346-348.
- Meadow, K. 1980. *Deafness and child development*. Berkeley: University of California Press.
- Meadow, K. P., Greenberg, M. T, Erting, C, & Carmichael, H.. 1981. "Interactions of deaf mothers and deaf pre-school children: Comparisons with three other groups of deaf and hearing dyads." *American Annals of the Deaf* 126: 454-468.
- Meyer, D. J., & Vadasy, P. R. 1994. *Sib Shops: Workshops for siblings of children with special needs*. Baltimore, MD: Paul H. Brookes.
- Moore, D. F. 2001. *Educating the deaf*. Boston; Houghton Mifflin.
- Morris, A. 1999. *Uncovering 'Maternal Alienation: a further dimension of violence against women*. Department of Social Inquiry. Adelaide, University of Adelaide: 127.
- Miles, M., & Hossain, F. 1999. "Rights and disabilities in educational provisions in Pakistan and Bangladesh: roots, rhetoric, reality." In *Human rights and education: cross cultural perspectives*, edited by Armstrong, Felicity & Barton, Len, 67-86. Buckingham: Open University Press.
- National Policy for Persons with Disabilities*. 2002. Islamabad Government of Pakistan Ministry of Health, Special Education and Social Welfare.
- National Exchange Club Foundation. 2013. *About child abuse*: Retrieved from <https://parentchildabuse.com/content/about-child-abuse>
- National Child Traumatic Stress Network. 2004. "Facts on traumatic stress and children with developmental disabilities." Retrieved on June 2013 from www.netsnet.org/netsn_assets/pdfs/reports/traumatic_stress_developmental_disabilities_final.pdf

- Quittner, A., Glueckauf, R. & Jackson, D. 1990. "Chronic parenting stress: Moderating versus mediating effects of social support." *Journal of personality and social psychology* 59: 1266-1278.
- Qurat-ul- Ain, Yaqub & Akram. 2011. *The impact of hearing impairment on social behavior of hearing siblings*. Unpublished Master's Thesis. University of Management & Technology, Lahore.
- Rochester, N.Y. 2010. *Deaf children at higher risk of abuse*. Downloaded from <http://www.sciencedaily.com/releases/2011/01/110118154733.htm>.
- Seligman, M. 1991. "Family system and beyond: conceptual issues." In *The family with a handicapped child*, edited by M. Slegman, 27-53. Boston, M. A: Allyn & Bacon
- Scot, K. M., Smith, R. D., & Ellis, P. M. 2010. "Prospectively ascertained child maltreatment and its association with DSM- IV mental disorders in young adults." *Arch Gen psychiatry* 67(7): 712-719.
- Sinnot, C. L., & Jones, T. W. 2005. "Characteristics of the population of deaf and hard of hearing students with emotional disturbance in Illinois." *American Annals of the Deaf* 150(3): 269-272.
- Sullivan, P.M., & Knutson, J.F. 1998. "The association between child maltreatment and disabilities in a hospital-based epidemiological study." *Child Abuse & Neglect* 22: 271-288.
- Sullivan, P.M., & Knutson, J.F. 2000. "Maltreatment and disabilities: A population-based epidemiological study." *Child Abuse & Neglect* 24(10): 1257-1273.
- Turnbull, A., & Turnbull, H. R. 1997. *Families, professionals and exceptionality: A special partnership* (3rd ed.). Uppersaddle River, NJ: Merrill.
- Wilker, L. 1986. "Family stress theory and research on families of children with mental retardation." In *Families of*

handicapped persons: research, programs, and policy issues, edited by J. Gallagher & P. Vietze, 167-195. Baltimore MD: Paul H. Brooks.

Wallbott, H., G., & Seithe, W. 1993. "Sensitivity of persons with hearing impairment to visual emotional expression compensation or deficit?" *European Journal of Social Psychology* 23(2): 185-193.