

МРНТИ 15.41.49

10.51889/1728-7847.2023.1.74.019

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PSYCHOLOGICAL FEATURES OF PARENT-CHILD RELATIONSHIPS IN FAMILIES WITH DEAF PARENTS AND HEARING CHILDREN

Abstract

This article reviews the psychological features of parent-child relationships in families with deaf parents and hearing children.

There is a specific upbringing concept and socialization in families with deaf parents and hearing children. Language and communication are the main means of socialization, education, and upbringing. When the communication between parents and children is broken, both the relationship and the educational process are reduced.

The primary aim of the research is to identify psychological features of parent-child relationships in families with deaf parents and hearing children using secondary research methods.

The results of secondary research show that any hearing child of deaf parents has a communication disorder with their parents. They demonstrate a high need for emotionally positive contact with their deaf parents.

Keywords: deaf parents, hearing children, communication, upbringing, family.

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ЕСТУ ҚАБІЛЕТІ ШЕКТЕУЛІ АТА-АНАЛАР МЕН ОЛАРДЫҢ ЕСТИТІН БАЛАЛАРЫ АРАСЫНДАҒЫ ҚАРЫМ-ҚАТЫНАС ҚҰРАЛДАРЫНЫҢ ПСИХОЛОГИЯЛЫҚ ЕРЕКШЕЛІКТЕРІ

Аңдатпа

Мақалада есту мүмкіндігі шектеулі ата-аналар мен олардың еститін балалары арасындағы қарым-қатынас құралдарының психологиялық ерекшеліктері қарастырылған.

Есту қабілеті шектеулі отбасыларда еститін балаларды тәрбиелеу мен әлеуметтендірудің өзіндік концепциялары бар. Тіл мен қарым-қатынас әлеуметтенудің, оқыту мен тәрбиелеудің негізгі құралы болып табылады. Ата-ана мен бала арасындағы байланыс үзілгенде, олардың арасындағы қарым-қатынасқа әсер етіп, отбасындағы тәрбие үрдісіне нұқсан келеді.

Зерттеудің негізгі мақсаты екіншілік зерттеу әдістері арқылы есту қабілеті шектеулі ата-аналар мен олардың еститін балалары арасындағы қарым-қатынас құралдарының психологиялық ерекшеліктері анықтау.

Анықталған екіншілік зерттеу нәтижелері бойынша есту қабілеті нашар ата-аналардың кез келген еститін баласының ата-анасымен қарым-қатынасының бұзылуы бар екенін көрсетеді. Олар есту қабілеті шектеулі ата-аналарымен эмоционалды оң қарым-қатынасқа деген жоғары қажеттілікті көрсетеді.

Түйін сөздер: есту қабілеті шектеулі ата-аналар, еститү қабілеті қалыпты балалар, қарым-қатынас, білім, отбасы.

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ПСИХОЛОГИЧЕСКИЕ ОСОБЕННОСТИ ДЕТСКО-РОДИТЕЛЬСКИХ ОТНОШЕНИЙ В СЕМЬЯХ С ГЛУХИМИ РОДИТЕЛЯМИ И СЛЫШАЩИМИ ДЕТЬМИ

Аннотация

В статье рассматриваются психологические особенности детско-родительских отношений в семьях с глухими родителями и слышащими детьми.

В семьях с глухими родителями и слышащими детьми существуют определенные концепции воспитания и социализации. Язык и общение являются основными средствами социализации, обучения и воспитания. Когда связь между родителями и детьми нарушается, детско-родительские отношения и воспитательный процесс в семье редуцируются.

Основной целью исследования является выявление психологических особенностей детско-родительских отношений в семьях с глухими родителями и слышащими детьми с помощью вторичных методов исследования.

Результаты вторичного исследования показывают, что любой слышащий ребенок глухих родителей имеет расстройство общения с родителями. Они демонстрируют высокую потребность в эмоционально положительном контакте со своими глухими родителями.

Ключевые слова: глухие родители, слышащие дети, общение, воспитание, семья.

Introduction.

In modern foreign science, there are two main concepts of deafness: biological-medical and socio-cultural. The biological-medical concept is based on the premise that hearing impairment is a biological pathology. This requires professional intervention - habilitation, and rehabilitation. This will enable the deaf person to meet "hearing standards" to the maximum extent possible. The main studies that are carried out within the framework of biological and medical concepts are related to hearing and oral speech. The essence of the sociocultural concept: deafness is a human condition, not a pathology. Deaf people do not need a system of habilitation, or rehabilitation. Deafness unites people into a special cultural and linguistic minority, which develops its own subculture, its own sign language, etc.

The sign language of the deaf is a complex peculiar system, a language "very richly developed", in which it is quite possible to express various abstract concepts, etc.; gestural speech "is genuine speech in all the richness of its functional significance", i.e. according to Vygotsky, not only a means of interpersonal communication of the deaf but also "a means of internal communication of the child himself". It is necessary to interact the initial form (gestural speech) with the ideal form (verbal speech), the result of which is verbal-gestural bilingualism.

The study of the communication processes of deaf and hard-of-hearing people, as well as their receipt of information, is relevant for modern Kazakhstani society since these processes determine the extent to which deaf and hard-of-hearing people can participate in public life. Despite the growing attention of society to the problems of people with disabilities, issues related to the use of social services by deaf and hard-of-hearing people rarely become the subject of research due to a number of reasons - the specifics of the deaf community (isolation, use of sign language, features of self-identification of deaf and hard of hearing people), methodological difficulties (lack of statistics and, as a result, of the general population, as well as the lack of a ready-made and universal methodological basis for working with the deaf community and its individual representatives).

It is very important to note that the studied social group is heterogeneous and complex in many respects, including from the point of view of language as the main means of social communication: in addition to the native language, it uses sign language, which, according to researchers, is a complete and complex linguistic system.

So, the role of the family is great in children's upbringing. Because the basic patterns of child development are the same as for hearing children, and for children with hearing impairments, the main

task of education becomes ensuring the mental development of the child, the formation of its personal basis, laying in the child the basic concepts of patterns the functioning of society, life, values, ethics and morality.

Family issues have always been at the centre of the attention of all specialists. A significant number of works are devoted to the study of various psychological aspects of the quality of family relations, including the educational function of the family, and the influence of individual family factors on the formation of children`s personal qualities. The full-fledged younger generation`s upbringing, the development of morality, and responsibilities are important issues of all times. In this regard, in theory, and practice, the question of the psychological support of parent-child relationships, which is based on the development of the psychological culture of parents, is increasingly being raised. An insufficient level of development of psychological culture among parents leads to difficulties in their communication with children, especially at any childhood age.

The family as the closest social environment of the child is one of the most important factors in his mental and intellectual development. In the family, the child receives the first ideas about the world, the laws of the functioning of society, and the accepted ways of behaviour. This paper focuses on the family systems theory, which assumes a family is understood best by examining the family as one whole system. This one system is a complex, deeply connected changing collection of parts, subsystems, and family members, where each member has a known purpose or function [1]. Family systems theory (Kerr and Bowen, 1988) is a theory of human behaviour that defines the family unit as a complex social system, in which members interact to influence each other`s behaviour [2].

On the other hand, extant research based on the theory that underlines the deafness of one family member, in an auditory-dependent environment, may require a more flexible family power structure. Professionals assessing deaf-parented families should be sensitive to the special adaptive needs required for the healthy functioning of the family. Also, there are few studies on this family scenario, but some research shows that deaf parents have above-average parenting success and today deaf parents are very aware of the danger of depending too much on their children [3].

Materials and discussions.

Such scientists as A.S. Makarenko, V.A. Sukhomlinsky, A.I. Herzen, P.F. Kapterev, P.F. Lesgaft, S.T. Shatsky, K.D. Ushinsky, E.A. Flerina and others, studied the role of the family in the child`s upbringing and believed that family education is a mandatory component of social relations and social learning [3].

The family is the most important and significant social institution, which is responsible for the process of personality formation and its entry into society. It is known that the family is the bearer of many functions such as educational, reproductive, recreational, economic and others. But education is more important since the first socialization of the individual occurs in the family and it forms the personality. If the children grow up in a special institution and do not receive a proper responsive environment, then their success is much lower than the children who grow up in the family. Family with its value orientations, features of interpersonal relations, everything way of life and lifestyle directly or indirectly, to a greater or lesser extent, not only affects the shaping of the personality of the children but also prepares the children for their future life. Raising normally developing children is a complex process, and if children are born with developmental deviations, then the importance of the family doubles, the family must give the children everything essential for their successful development.

This is especially important for children with deaf parents, as the development of hearing and speech function will be effective if it starts in childhood, from 6-8 months. Parents must master special methods and techniques of communication, speech training, as well as various technologies for early mental development.

According to world statistics provided by the World Federation of the Deaf, the number of deaf people is about 70 million, which is approximately 0.1% of the population. Moreover, it is noted that the number of people with hearing loss reaches about 10% of the world`s population [4].

According to the data as of September 22, 2022, out of 19,666,840 people, about 707,980 people with disabilities, including in group 3 - 294,625 people (272,371 adults, 22,254 children) are classified as hearing impaired or not hearing at all and this category of citizens in the republic exceeds 1.5% of the total population. At the moment, there is no clear, reliable information on the number of those who have created families and are actively manifesting themselves in society, since audiology assistance, legal protection, and state and social support for the population belonging to this category in the country are not yet sufficiently developed [5].

More than 200,000 people in Kazakhstan have impaired hearing and related disabilities. Approximately 5,000 reside in Almaty and many in Shymkent, although only about 500 adults and children with hearing problems live in Astana.

For our country where more than 200,000 deaf people live, the problem of development and social inclusion in society is still urgent [5].

Among the factors causing a complete or partial loss of auditory function, there are genetic, determining congenital malformations of the hearing organs; exposure to adverse conditions in the prenatal, natal, and postnatal period; chronic infections and diseases of the child at an early age; the use of pharmacological drugs that have an ototoxic effect. According to the World Health Organization (WHO), genetic factors and other known factors account for about 40% of cases of hearing loss in childhood. At the same time, approximately 10% are congenital hearing impairments in children of deaf parents [6]. However, it is not uncommon for children born to deaf parents to be hearing.

The mental and language development of hearing children of deaf parents (CODAs) has long been a topic of research for scholars. These children develop speech and language in an atypical linguistic environment. Research must determine whether this environment is detrimental to the child's development as they may lack important language cues and information. In the present study, the author reviews the top journal publications on social, linguistic, and disability studies to understand the present status and future direction of research on social support for hearing children of deaf parents and their experience. Also, finds that many established fields of psychological, phonological, and social studies and related journals have accepted CODA as a cultural phenomenon and a legitimate area of research. So, CODA is an organization developed by and for the hearing children of deaf adults was referred to when searching for the hearing child/deaf adult dyad. So, J. Singleton, M. Tittle, studying the historical aspects of the formation of the deaf community in the USA, characterize in detail that the American Society of the Deaf (The American DEAF-WORLD) has been developing for about two centuries and is based on the experience of specific conditions for experiencing deafness [7]. In the research of Ginger Bianca Pizer, B.A.; M.A. it is noted that as adults, those CODAs who are bimodal bilinguals can combine their languages creatively in interaction with other bilinguals. In addition to the possibility of codeswitching that bilinguals in spoken languages have, the different modalities of CODAs' two languages allow them to produce elements of both simultaneously, producing code-blends [7].

Many researchers have discussed the status of deafness as a culture shared by a community. Under this view, hearing ability is a less central definer of Deaf cultural membership than sign language ability and knowledge of cultural norms. The outsiders' view of deafness, under which identification as "deaf" depends on hearing ability, contrasts with the insiders' view of deafness as a culture. Despite the differences between these views, both set up a dichotomy between Hearing and Deaf, such that being one means not being the other. Thus, the status of CODAs—hearing people growing up in deaf families—is unclear. Singleton and Tittle (2000) presented this ambiguity by stating both that "Deaf parents are essentially raising 'foreign' children" (p. 227) and that these children are "bicultural and bilingual members of the Deaf community" (p. 228). Both Preston (1994) and Bull (1998) described significant variation and uncertainty in CODAs' cultural affiliations, with identities that shift across time and situations: "We are neither deaf nor hearing. We are both deaf and hearing" (Preston 1994, 236). With English symbolically linked to the Hearing world and ASL to the Deaf world, family language choices can both create and reflect family members' cultural affiliations. Under the cultural view of deafness, CODAs are potential members of the Deaf community, in that they are potential native signers

who may be socialized into Deaf culture. However, because many do not in fact become fluent signers, this potential community membership is often unrealized [8].

In the works of Zinovieva Ludmila Vasilievna and Mokhonko Daria Andreevna on “communication specificity within the “deaf parents – hearing children” dyad they give the specifics of the model of family relations which are determined especially of emotional and communicative interaction in the dyad “hearing child - deaf parent”. Along with difficulties in accepting the deafness of parents by children, deaf parents, in turn, may face emotional and psychological problems associated with feelings of low value, helplessness, and guilt for the forced need to use the child’s auditory abilities for their purposes [9].

First model. Deaf parents have a fairly authoritarian model of upbringing, are purposeful, and do not allow hearing children to use auditory opportunities as opposed to the interests of the family. In the process of interaction with parents, the children mastered dactyl and gestural speech at a high level. Deaf parents ensure the familiarization and optimal inclusion of the hearing child in the society of the deaf, at the same time, the hearing children act as the main link that ensures contact and adaptation of deaf parents in the society of the hearing majority. This model allows the family to function optimally in the context of different social groups.

Second model. The hearing children of adolescence show unpleasant attitudes towards deaf parents, expressing this in the form of dominant and manipulative behaviour. The children are ashamed of the deafness of their parents, which prevents them from appearing at school and at parent meetings, insisting on the presence of hearing relatives, in particular grandmothers, who, as a rule, occupy an authoritative position in the family [9].

Outstanding psychologist of the XX century Vygotsky L.S. emphasizes that the family is for the child himself the first and most frequent social situation in which the conditions for the restructuring of hereditary experience in the process of family forms. G.S. Abramova identifies three types of collaboration between children and adults. The first type is situational: an adult with such cooperation as would create an artificial barrier to the possible development of the child, limiting the scope of interaction with him. The second type is operational. This type of cooperation focuses not only on the current, but also on the potential personal capabilities of the child, but the adult takes all the initiative in this interaction takes over. The author called the third type of cooperation “valuable” when children and adults represent the highest value one for the other [9].

The need to study parent-child relationships in the context of family is relevant, probably since the formation of the family as a social unit and the establishment of triangulation relationships as a healthy mother-father-child relationship in a complete family.

Research results. On the base of the research results it is known that in the course of interaction with other people, mental development occurs, socialization of the child, and the assimilation of a certain system of values, and norms of national and universal culture. Traditionally, the family is considered the main institution of education. Family can act as both a positive and a negative factor in upbringing. On formation, the personality of the child is also influenced by the general atmosphere of the family: forms and methods of interaction between adults and the children who dominate it. The quality of a mother’s speech to her child has traditionally been considered by speech pathologists, educators, and psychologists to have significant positive or negative implications for the children’s speech and language development.

Hearing children of deaf parents are familiar with adults who pity their parents’ deafness and treat their parents. These children tend to be extremely astute in their ability to assess how others perceive their parents. They are often tired of explaining what it’s like to have deaf parents, tired of people who think “it’s neat” that they can sign, and tired of being different [10].

Studying all the above-mentioned issues, we can differentiate that four major issues are key in the relationship between hearing children and their deaf parents: interpreting, communication, feelings towards parents, and role reversal, as they relate to individual counselling of the hearing child of a deaf parent. It is very important that on the base of the secondary research, it is noted that Hearing children of

deaf parents generally express a positive feeling about their parents. The counsellor should never assume that the relationship is “problematic” because of the hearing status of the parent. The degree to which the children are positive or negative towards their parents may depend more on the chronological age of the children and on the children’s support system than on the parent’s deafness and the children’s ability to hear [11].

Also, deaf parents raising a hearing child may experience the following problems:

1. Proper care of the child, and the ability to assess his psychological and physical condition. Deaf parents may be completely unresponsive to the needs of a hearing child: cry; squeak screams; screams; coughs, etc. Also, there may be difficulties in understanding the child. Parents may misjudge many reactions of the child, but it can also be a psychological discomfort. Usually, the parents judge the state of the child, taking into account: the movements of the child; facial expressions, which in their minds can talk about being hungry, sick, etc.; gestures; behaviour, etc. It happens that parents are too suspicious, and in vain take care of the child, falsely identifying any need. In order to solve the above-mentioned problems the following recommendations are given by researchers:

a) to overcome these difficulties it is necessary that the child is in the field of vision of the deaf parents.

b) it is important for parents to know the age norms of the child’s development. Knowing them will make it much easier to track down the state of the child, and the level of his emotional, physical and intellectual development.

c) it is also necessary to constantly consult with specialists in early development and with children’s doctors. These specialists will help track the degree of physical, intellectual and psychological development of the child and, in case of identified violations, give any recommendations to parents [12].

2. Formation of speech development, the process of communication between parents and a child. Communication is one of the important conditions of human socialization is the ability to communicate in society. normal for a child At an early age, communication with parents is a source of full development. However, a neurotypical child, being surrounded by parents with hearing impairments, cannot learn oral speech, since in most cases deaf people are dumb, and if they have not lost completely the ability to speak, then their speech is tongue-tied and unintelligible [13].

Difficulties in mutual understanding arise due to the lack of comprehensive communication between parents and children. Deaf parents of a hearing child have fewer opportunities to organize their child receiving verbal information since they do not have a wide variety of options for a comprehensive study of the environment [14]. In this case, it is recommended to invite people who speak oral speech into the family. It can be relatives; friends; familiar; correctional teachers; classmates, etc. It is extremely important that the family was engaged in the development of the child, and conducted not only training sessions but also cultural evenings, and meetings.

In order to grow up a child with a developed level of verbal communication it is necessary to use different variations of technical means and use all kinds of services, which would allow bringing the child’s speech to the desired level of development: visiting a kindergarten; including classes with a speech therapist in the child’s mode; use educational games, including sensory and sensorimotor game aids that allow you to use all analyzers at the same time.

3. Problems of a psychological nature, due to the emotional disorder of the child. Such difficulties may arise from forcing the child to be an interpreter for their deaf parents, in connection with which the child is immersed in the problems of adults, which is unacceptable for the normal psychological development of a person. There is a process that can be described as “early adulthood” In this case, the boundaries between the child and the adult disappear. The child feels themselves “on an equal footing” with their parent. In this case, parents often lose authority in the eyes of their parents. child.

Sign language is acquired spontaneously in the family, just as those who hear learn their native language. But there are families in which parents categorically refuse to communicate through gestures due to embarrassment or the desire not to advertise their defect, thereby instilling in the child that being

inaudible shameful, bad and detrimental. In this regard, the child begins to be ashamed of his parents, it is very difficult to endure.

5. Inadequate attitude of children towards deaf parents. For the most part, in families of this type, the dominant role of education is occupied by hearing relatives, often grandparents, who have a great influence on the life of the child. As a result, the role of parents goes to a secondary plan, they lose authority in the eyes of their children.

In this regard, it can be stated that there is an urgent need to organize assistance for deaf parents in the upbringing of a hearing child at an early age. Early care is a combination of a system of social support, health protection and special education [12]. The functioning early care system today offers an extensive range of long-term family-oriented services provided by a team of specialists of various profiles. An essential condition of the early care system is the early inclusion of parents of a child with disabilities in development into a correctional and developmental process. In the early care system, parents are responsible for the result of working with the child, since he plays a key role. Providing the necessary assistance to parents at the early stages of a child's development largely prevents the development of the above problems making it possible to correct and compensate for existing deviations, and achieve higher cognitive, emotional and social development of hearing children raised in a family of hearing parents. The creation of an auditory–speech environment for a hearing child raised by hearing-deaf parents is an important condition. At an early age, the attention of speakers is especially important for children with preserved hearing. Children listen to speech and thus learn to speak. It is important to enrich the speech and auditory spheres of the child, placing him in situations rich in communication, be it a trip to the park, a store, a picnic, a nature reserve, etc. It is useful to give sounding toys, pay attention to different sounds, and encourage cases of onomatopoeia. It is very important that the child sees and contacts hearing people as often as possible: goes for a walk, shopping, and also studied in kindergarten, and boarding school, because it is very important that he was surrounded by a sound speech during the sensitive period of the development of the second signalling system. It is especially necessary to ensure that the child is visited by hearing people at home, and it is not necessary that they are relatives, it is enough that the child has friendly relations with these people.

Psychological, pedagogical and speech therapy assistance to a child is aimed at preventing and resolving problems in development, learning, and behaviour, creating conditions for the development of a child's personality, self-improvement and self-realization.

Conclusion.

In conclusion, we can conclude that the specifics of the communicative interaction of a hearing child of a deaf parent is determined by the conditions of full-fledged communication of such a family and the willingness to share the norms and values of both hearing and deaf communities. Hearing children of deaf parents, being brought up in special conditions, at the early stages master two languages: sound and national sign. Deaf parents should not abuse their child as an interpreter to provide contact with a hearing society, giving him an inappropriate role in the context of the family as a mediator and decision-maker of the family. Families of this type are recommended to be included in the National Society of the Deaf, whose activities are aimed at accompanying and supporting a social group of people with hearing impairment.

Deaf parents need constant consultation with specialists who will:

- monitor the child's development and learning outcomes;
- will be able to identify difficult areas of work for parents;
- give the necessary advice on correctional and pedagogical work with a child at home.

The psychologist works with the child in the direction of forming the skills of constructive interaction, the development of cognitive processes, intuition, and confidence; corrects anxiety states, not success. If possible, it prevents problems by timely identifying and eliminating the causes that give rise to them, and provides preventive prevention of various kinds of negative phenomena (moral, physical, social, etc.), and behavioural deviations. Children with speech disorders are engaged with a speech therapist teacher. The main tasks of a speech therapist teacher are to organize work on the

diagnosis of the level of development of speech activity and the implementation of individually oriented development programs taking into account the structure of the speech defect [15].

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