Development of Personal and Social Identity in Immigrant Deaf Adolescents

Marialuisa Gennari, Giancarlo Tamanza, Ilaria Montanari

Abstract—Identity development in adolescence is characterized by many risks and challenges, and becomes even more complex by the situation of migration and deafness. In particular, the condition of the second generation of migrant adolescents involves the comparison between the family context in which everybody speaks a language and deals with a specific culture (usually parents' and relatives' original culture), the social context (school, peer groups, sports groups), where a foreign language is spoken and a new culture is faced, and finally in the context of the "deaf" world. It is a dialectic involving unsolved differences that have to be treated in a discontinuous process, which will give complex outcomes and chances depending on the process of elaboration of the themes of growth and development, culture and deafness. This paper aims to underline the problems and opportunities for each issue which immigrant deaf adolescents must deal with. In particular, it will highlight the importance of a multifactorial approach for the analysis of personal resources (both intra-psychic and relational); the level of integration of the family of origin in the migration context; the elaboration of the migration event, and finally, the tractability of the condition of deafness. Some psycho-educational support objectives will be also highlighted for the identity development of deaf immigrant adolescents, with particular emphasis on the construction of the adolescents' useful abilities to decode complex emotions, to develop self-esteem and to get critical thoughts about the inevitable attempts to build their identity. Remarkably, and of importance, the construction of flexible settings which support adolescents in a supple, "decentralized" way in order to avoid the regressive defenses that do not allow for the development of an authentic self.

Keywords—Immigrant deaf adolescents, identity development, personal and social challenges, psycho-educational support.

I. INTRODUCTION

THE identity construction process for adolescents involves a continuous dialogue and exchange with people, places, values and contexts. It is the result of a relational process of knowledge construction, where information is selected, there is a mediation between choices and an identity path is chosen. This process sees the adolescent as a first-person protagonist of their behaviors and attitudes that reveal the specificity and quality of exchange between the adolescent and the world in which it is inserted.

This paper discusses how being an immigrant and deaf adolescent can significantly influence the identity construction process for adolescents. Deafness and immigration makes this process more complex, as it prevents the adolescent from being able to count on a shared base with most of their peers.

A first aspect to consider is the challenge of the dialectic encounter with "the Other", where Other means everything and everyone outside the subject (i.e. school, friends and relations in general). There is a significant dialectic flow in any identity construction path and in a particular way this is the case for immigrant and deaf adolescents.

The deaf adolescent is in fact primarily confronted and influenced by his relationship with the hearing world and this relationship is adversarial for several reasons:

1) From a purely communicative point of view, deaf adolescents have major difficulties developing good knowledge of verbal languages; therefore building relationships with hearing adolescents involves considerable effort and a significant amount of motivation, self-confidence and self-esteem.

2) Deafness therefore involves a feeling of strangeness with respect to the hearing world, as deaf adolescents often feel excluded and isolated - deafness is often considered a deficit and this is experienced as discrimination.

Adolescents feel similarly excluded and isolated because they feel culturally estranged due to the loss of original reference values that accompanied their childhood [1]. Immigrant adolescents, similar to deaf adolescents, have difficulties with the local language and therefore, similarly have to expend considerable effort in learning and using the local language, especially in its symbolic and cultural meanings [2], [3]. Therefore, being a deaf adolescent immigrant is to experience a very pronounced linguistic impediment. These adolescents often experience an amplified feeling of strangeness that makes it difficult to negotiate their individual identity with the plurality of the surrounding world. Identity construction can therefore be tiring and difficult and requires a continuous dialogue that due to their deafness and recent migration is quite inhibited. It should be noted that the results of this process, necessary and inevitable for the deaf immigrant adolescent's growth, is not obvious – since there are numerous variables and possible outcomes, as well as many challenges that we will now briefly describe.

II. DEAFNESS AND ADOLESCENT CULTURES

Reference [4] argues that deafness represents an opportunity to have a real cultural reference point - which has been defined deaf-hood. Skelton and Valentine argue that the expression of deafness is often associated with people identifying themselves as being deaf and choosing to live in

M. Gennari, Senior Researcher in Clinical Psychology at Catholic University of Milan, Italy (phone: 0039 030 24061; e-mail: marialuisa.gennari@unicatt.it).

G. Tamanza is Associated Professor in Clinical Psichology at Catholic University of Milan, Italy (e-mail: giancarlo.tamanza@unicatt.it).

Ilaria Montanari is Psychologist and Family Mediator, PhD, lecturer in Clinical Psychology at Catholic University of Brescia, (e-mail: ilaria.montanari@unicatt.it).

World Academy of Science, Engineering and Technology
International Journal of Humanities and Social Sciences
Vol:10, No:6, 2016

groups who experience the same condition – often referred to as a selected or chosen family. This enables the creation of groups and social relationships with hearing people and reveals the deaf adolescent self-exclusion behaviors. This phenomenon allows deaf adolescents to feel understood, share difficulties and resources allowing them to feel secure and close with other deaf persons, thus helping the adolescent construct their identity. The value of language signs in the deaf world is just one example of how a linguistic instrument suddenly becomes foundational and indispensable for one's identity.

It is important to note that the construction of a deaf adolescent's identity is influenced by both the exclusion and marginalization signals produced by the social context in which deaf adolescents are engaged in and also by the action of the same active adolescents who often prefer being with other deaf people, rather than dealing with other hearing people. It is indisputable that such an identity construction process involves significant risks for personal growth and the development of identity, as this sort of social engagement includes marginalization issues, fewer resources and less confrontation with the hearing world. This process therefore leads to either partial exclusion or complete self-exclusion from their family and their school – resulting in relational impoverishment and an increased incidence of psychopathological disorders.

Sometimes deaf adolescents prefer to identify themselves with the hearing world. This aspect in literature is called "identity of the hearing world." Besides the obvious advantages in terms of access to opportunities and relational resources, this identity outcome is not without its problems; chief among them is the risk of avoiding and/or denying their deafness. This path can lead to a "forced normalization" in the sense that the adolescent is forced to cope with deafness in terms of performance and unrealistic expectations, which does not include deafness as a constitutive element of the deaf person. Such a growth mode exposes the deaf adolescent to feelings of insecurity, potential denial of parts of the self and increased vulnerability in their social relations [5].

The more complicated outcome, but decidedly more effective to those who live with deafness, is undoubtedly represented by the paradigm go-between [6], [7], which provides for the possibility for the deaf adolescent to identify with the deaf and hearing world according to the situation By integrating both cultures, the deaf adolescent can recognize partially, but authentically in each of them. This process of continuous negotiation and evaluation, where a deaf adolescent assumes a dynamic process influenced by events and the contexts in which they are situated, allowing one to figure out each time which of the two cultures offer more resources and possibilities.

It is important to highlight that in order for this process to happen it is essential that it can be shared and supported by all of the adolescent's reference cultures – i.e., communities of origin, school and the family.

III. THE ADOLESCENT DEAFNESS AND THE INCREASED COMPLEXITY OF MIGRATION

References [1] and [8] highlight how, for immigration, the construction process of an adolescent's identity can fail and is often problematic. Indeed, the identity development of a deaf immigrant adolescent necessarily involves effort to adapt, integrate, and identify with the host culture, and, at the same time actions that are necessary to consolidate their deaf identity.

Unfortunately, deafness identity development is not expected in many immigrant cultures and therefore this process, at least partially, devalues the original culture of the immigrant deaf adolescent. In fact, migration forces the adolescent to face the complex task of constructing their identity outside of what has been familiar to them [8]. All this means that the adolescent may not be supported for the development of their identity from the original reference culture, which for years was the origin of the identity construction through shared values and meanings in the family and in the surrounding context [9]. It therefore outlines for the adolescent a condition of loneliness and lack of guidance and reference points regarding three main aspects in coping with the adolescent identity construction phase, where they need to confront being deaf within a hearing culture, and finally, the integration process with the host environment.

In detail, we are faced with a process that presents:

1) Inaccessibility to values, meanings and learned patterns and experiences in childhood in the context of their origin, resulting in a loss of social and cultural resources that drive socialization and identity construction – where this can even be more relevant for deaf adolescents [1];

2) The exclusion from immigrant communities that often use avoidance strategies when emerging conflicts related to deafness, and in particular on issues related to gender and generational identity (two main topics addressed often in adolescence). Likewise, the spiritual and religious values that provide different meanings of life, including those related to deafness, are often closed to deaf adolescent immigrants because for many cultures of origin, inclusion devices, such as communication signs, were not developed [10], [8].

3) Inaccessibility of coping patterns of migration social context, since immigrant families tend to limit the contact of their children and the host culture, to prevent their children from losing their culture of origin and building too much of a Western identity [1].

4) Previous research shows that in a foreign country, deaf adolescents experience problems related to superficial relationships and exchange opportunities. In particular, the difficulties are due to poor vocabulary skills and even more inadequate comprehension skills, both within the family/home communities, and within the relationships in their immigrant context. This situation involves a significant risk of loneliness and alienation for the deaf adolescent and immigrant [8], with possible major occurrences of problematic and psychopathological behaviors. Among the consequences of this situation,

World Academy of Science, Engineering and Technology
International Journal of Humanities and Social Sciences
Vol:10, No:6, 2016

already in itself is very problematic, is found the increased risk of discrimination and racism with which the adolescent often has to deal [1].

IV. Psychopathological Factors in Deaf Adolescent Identity Construction

It is important to highlight some psychopathological risks inherent in the identity development process for deaf immigrant adolescents when that process is not stabile. In fact, research has shown that between 15% and 50% deaf adolescents have a psychopathology illness [11]. Psychopathological issues for these adolescents have been found to be more frequent with certain physiological factors, such as the gravity and origin of the hearing loss, but also contextual elements, such as whether their parents are deaf or not, or the commitment required from the school attended [12].

Psychopathological, dysfunctional and problematic areas for deaf adolescents

1) Psychopathological issues have been found to be more frequent when there are other impairments, such as neurological problems, cognitive deficit areas and other physical handicaps [13];
2) Have difficulty in understanding social contextual rules and find it difficult to differentiate contextual differences [14]. The impact of these comprehension deficits on coping skills is a particularly relevant case when the adolescent is an immigrant;
3) Have difficulty using logical connections between concepts and categories [15], [16], and therefore they have a risk of developing only visual-perceptual communication issues that allows for their understanding of the factual and concrete, and thereby penalizing their understanding of the abstract and the symbolic-semantic [17], [18];
4) Have problems with impulsivity and are more likely to have problems with externalization [19];
5) Be suspicious and have distrustful behaviors, which are typical of ethnic minorities [9];
6) Have problems in decoding complex emotions [20]-[22]
7) Have self-esteem issues [23], [24];
8) Given the above mentioned research, the relevance of decoding complex emotions and developing a stable self-esteem in identity construction issues for deaf and migrant adolescents, the last two problematic areas are discussed more thoroughly below.

V. Decoding Complex Emotions

The ability to decode complex emotions forms the basis for the development of one's identity and social well-being [25], [26]. It can be defined as the ability to encode multiple factors that trigger a multiple set of emotion. While decoding simple situations that elicit single or multiple conflicting emotions, research indicates that the skills necessary to do so by hearing and deaf adolescents are very similar; in complex situations (more than one eliciting factor and/or more than one emotion);

deaf adolescents seem less competent than hearing adolescents. This shows to be more true when the difference between the emotions is nuanced [21], [22].

This indicates erroneous emotional self-regulation that favors:

1) Inadequate coping and inappropriate responses to situations and contexts;
2) Interactive attitudes that are not very constructive and frequently inappropriate to the situation resulting in greater hostility in reaction behaviors to interpersonal stress [27];
3) Simplistic and rigid thoughts due to partial emotional coding [19].

In general terms, these dynamics affect the quality and depth of the social relations of deaf adolescents, who are often superficial and hostile, as well as having experiences that are oriented towards depressive feelings [28]. Previous research demonstrates that for deaf adolescents, the development of emotional decoding competences are in fact not stressed and stimulated by parents, or Social Services because these people are generally not hearing impaired and do not include the deep individual needs of the deaf adolescents. It would appear that deaf adolescents are not helped in deepening their emotional reading of the facts and events, and receive little feedback during development to refine the semantic, rather than visual decoding.

In the situation of immigration, the decoding of complex emotions is even more problematic. In fact, the emotional range is strongly influenced by cultural variables which, in a specific and original ways, reference meanings that help one understand events, including the emotional aspects which characterize situations. Therefore, for adolescent immigrants, the development of emotional competencies is complicated by the fact that the reference cultures are more than one and often in contradiction with each other regarding the emotional meanings of events.

VI. Esteem and Deafness

Any inhibition and problems linked to the development of the self in adolescence involves self-esteem problems, as we know that self-esteem impacts harmonious identity construction. For a long time research has highlighted the connection between low self-esteem and mental health problems [24]: self-esteem was considered a predictor of depression [29] and anxiety [30], and more generally of emotional problems that prevent effective coping. For this reason, in the presence of low levels of self-esteem, these adolescents have difficulties in protecting themselves, and have in setting realistic, actionable goals [5], as well as in abandoning dysfunctional strategies [31].

One of the most frequent mechanisms underlying low self-esteem in deaf adolescents is the over-estimation of self-social acceptance, and in general, the presence of imperceptive mechanisms about the social context evaluation. In particular, previous research has found that the possible rejection/acceptance of peer groups influence the deaf adolescent's self-esteem, especially when the acceptance/

World Academy of Science, Engineering and Technology
International Journal of Humanities and Social Sciences
Vol:10, No:6, 2016

rejection is discrepant with the social self-perception of the self [32], [33].

Another aspect that impacts the deaf adolescent's self-esteem is the acceptance of the problems associated with deafness by their valued hearing world (family, significant adults and peers). In particular, there is a direct association between self-esteem and support offered by the adolescent family in achieving independence [34]. Furthermore, a directly proportional relationship between the adolescent's self-esteem and adult support for their structuring of their identity, where deafness is considered integral part; so it is very valuable when the family can support "becoming deaf" [35].

Different outcomes with respect to self-esteem emerge depending on whether the deaf adolescent choses to confront their self with hearing or deaf peer groups, or the adoption of behavioral modes that belong to the deaf culture or deaf. As discussed earlier, choosing between the deaf and hearing culture involves risks and resources, but relative to self-esteem, when the adolescent identifies with the hearing world, they are more likely to experience frustration, perceptions of failure and therefore low self-esteem. This is especially true in adolescents with implants or with reduced hearing, for which it is easier to choose to confront and model themselves after the hearing world – in fact, it is precisely in such situations that the adolescent experiences more psychological difficulties related to self-esteem and self-development [36], [37].

VII. The Family and Social Services as a Mediation Device

Previous research demonstrates that significant adults who relate to the deaf and immigrant adolescent can be major assets, but also elements of further conflicts and problems. In general, the ways in which the family [8] and Social Services [38]-[40] address immigration and deafness have a particular impact on the development of adolescent immigrants. In fact, 95% of deaf children are born into hearing families and this impacts adolescent development [11]. Similarly, for adolescents growing up in a foreign context, reference adults have a significant role in mediating between the adolescent and the challenges that identity development sets [41].

When the family and/or Social Services put in place an excessive sense of protection, dysfunctional effects on identity development of deaf and immigrant adolescent are found [5]. Previous research demonstrates that expectations for deaf adolescents are lower and more limited, and these obviously affect and determine the skills and competences solicited to deaf adolescents [42].

Another attitude encountered in the adult world relating to deafness and adolescent immigration is the denial of complex challenges. Reference [43] states that the expectations of normal-typical development transitions are often unchanged, regardless of the adolescent's specific characteristics or capacities. Even the ability to compare and negotiate that has been implemented by the family and Social Services, and the skills of the adults with regard to adaptation and acceptance of diversity posed by migration and deafness, facilitate a positive prognosis for the construction of social identity in adolescence [1], [44].

Beyond the above described that help the family and Social Services become a real support for the identity development process for adolescents, the challenges and risks that adults must process concerning the paradoxes inherent in the complexity of the problem they are facing. The relationship between adults and deaf adolescent immigrants is constituted in a share of estrangement and misunderstanding which applies to both the hearing/deaf relationships (e.g., the deaf adolescent with hearing parents), immigrant/native (e.g., school/adolescent relationship), but also the adult/adolescent relationship. These are potentially conflicting relationships that require an open and friendly position on both sides establishing the relationship.

Another aspect to consider is the inappropriateness of understanding behaviors, or a solution taken by the adolescent at any given time, as an indicator of success or failure of identity transition. Identity development proceeds via non-linear stages, where regressions and even abrupt changes of position are considered necessary and are functional for healthy development. It is relevant to consider that normalizing, legitimizing and forcing may constitute a serious risk for adolescent identity development, as an adolescent's behavior is neither static nor definitive. Testing, being dynamic and instable are the characteristics that adults should consider necessary for the success of the social identity construction process in adolescence. This dynamic therefore requires a long-term perspective and the ability to connect past and present, as well as the search for a future path.

VIII. The Decentralized Accompaniment

The complexity of the identity development process for deaf adolescent immigrants requires that people and Social Services support this process. The first problem is to define who is responsible for the care and facilitation of the adolescent development process. It is quite clear that the family is insufficient, since Social Services, the school and other environments are significantly involved in some challenges that the family, in fact, is not involved with. The peer group is a very important as well, although hardly manageable and predictable. The social identity construction process, therefore, involves multiple stakeholders and is connected to the reciprocal interactions that develop between deaf adolescents and the different contexts in which they live.

Another challenge is the care/support process that should be put into action. One can talk about decentralized accompaniment in the sense of a dialectic and facilitative presence that allows one to test and treat the multiplicity of risks and resources that distinguish the identity development process. It requires process competence rather than content competence, because many deaf and immigrant adolescent problems are precluded to the adults who deal with them. The theme of foreignness characterizes the totality of the relationships between adults and the deaf adolescent immigrant relationship. Parents are often hearing, teachers and educators are often hearing and natives, the Social Services

World Academy of Science, Engineering and Technology
International Journal of Humanities and Social Sciences
Vol:10, No:6, 2016

and the context are representative and characterized by a culture identity which is that of the host country and not that of the deaf adolescent immigrant.

Adults who interact with these adolescents should ask and gain knowledge of what it means to be both deaf, as well as an immigrant, and not only about the content (medical perspective, cultural, social), but also in relation to resources and risks which characterize these experiences. This awareness is reflected in rethinking the philosophy of the Social Services with which answers are offered to adolescents, as well as the purpose for which one activates and defines actions and pose accompanying objectives. Because of the characteristics of the situation, building supportive relationships with deaf adolescent immigrants requires one to avoid the logic of standardization, as well as that of forced inclusion, or compensation objectives, as well as creating separate isolated enclaves.

The process of care requires an idiosyncratic perspective, in which all participants' contributions must be legitimized in a logic of assistance integration and plural participation. No accompanying path will help the deaf adolescent immigrant to develop a stable identity, if each culture (family, school, Social Services and adolescent itself) are not spelled out and legitimate.

REFERENCES

[1] Ahmad W. I. U., Darr, A., Jones L., and Nisar, G., (1998), Deafness and ethnicity, Services, Policy and Politics, Bristol: Policy Press.
[2] Lawson S., Sachdev I., Identity, Language Use, and Attitudes: Some Sylheti-Bangladeshi Data from London, *UK Journal of Language and Social Psychology*, 2004, 23: 49-69.
[3] Jean S. Phinney J. S., Romero I., Nava M., Huang D., The Role of Language, Parents, and Peers in EthnicIdentity Among Adolescents in Immigrant Families, *Journal of Youth and Adolescence*, 2001, 30, No. 2,
[4] Skelton, T, & Valentine, G. (2003). "It feels like being deaf is normal": An exploration into the complexities of defining D/deafness and young D/deaf people's identities. *Canadian Geographer*, 47(4), 451-466.
[5] Valentine, G., & Skelton, T. (2007). Re-defining 'norms': D/deaf young people's transitions to independence. *The Sociological Review*, 55(1), 104-123.
[6] Cole, S. H., &Edelmann, R. J. (1991). Identity patterns and self- and teacher-perceptions of problems for deaf adolescents: A research note. *Child Psychology & Psychiatry & Allied Disciplines*, 32(7), 1159-1165.
[7] Hardy, J. (2010). The development of a sense of identity in deaf adolescents in mainstream schools. *Educational and Child Psychology*, 27(2), 58-67.
[8] Atkin, K., Ahmad, W. I. U., & Jones, L. (2002). Young south Asian deaf people and their families: Negotiating relationships and identities. *Sociology of Health and Illness*, 24(1), 21-45.
[9] Murphy, J., & Dodd, B. (2010). A diagnostic challenge: Language difficulties and hearing impairment in a secondary-school student from a non-english-speaking background. *Child Language Teaching and Therapy*, 26(3), 207-220.
[10] Modood T, Beishon S., and Virdee S., (1994) Changing ethnic identities, London: Policy Studies Institute.
[11] Hindley, P. A., Hill, P. D., McGuigan, S., & Kitson, N. (1994). Psychiatric disorder in deaf and hearing impaired children and young people: A prevalence study. *Journal of Child Psychology and Psychiatry and Allied Disciplines*, 35(5), 917.
[12] Dammeyer, J. (2009). Congenitally deafblind children and cochlear implants: Effects on communication. *Journal of Deaf Studies and Deaf Education*, 14(2), 278-88.
[13] van Gent, T., Goedhart, A. W., Hindley, P. A., & Treffers, P. D. A. (2007). Prevalence and correlates of psychopathology in a sample of deaf adolescents. *Journal of Child Psychology and Psychiatry*, 48(9), 950-958.
[14] Rachford, D., & Furth, H. G. (1986). Understanding friendship and social rules in deaf andhearing adolescents. *Journal of Applied Developmental Psychology*, 7, 391- 402.
[15] Marschark M., Everhart V.S., (1999). Problem solving by deaf and hearing children: twenty questions, *Deafness and education international*, 1, 63-79.
[16] Marschark M., Convertino C., McEvoy C., Masteller A., (2004), organization and use of mental lexicon by deaf and hearing individuals, *American annals of the deaf*, 149(1), 51-61.
[17] Wang J. (2000). Study of natural sign language and conventional sign language. *Chinese journal of special education*, 39, 33-39.
[18] Huang B. (2002). On deaf individuals special point, *China disabled*, 9, 54-55.
[19] Cole P. M., Michel M. K., Teti L. O. The development of emotion regulation and dysregulation: A clinical perspective. In: Fox NA, editor. *Monographs of the Society for Research in Child Development*. Serial No. 240 ed. Vol. 59. Chicago, IL: University of Chicago Press; 1994. pp. 73–100.
[20] Vostanis P., Hayes M., Du Feu M., J. Warren J., 1997, Detection of behavioural and emotional problems in deaf children and adolescents: comparison of two rating scales, *Child: Care, Health and Development*, 23, 3, 233–246.
[21] Rieffe, C., Terwogt, M. M., &Smit, C. (2003). Deaf children on the causes of emotions. *Educational Psychology*, 23(2), 159-168.
[22] Rieffe, C. (2012). Awareness and regulation of emotions in deaf children. *British Journal of Developmental Psychology*, 30(4), 477-492.
[23] Baumeister, R. F., Campbell, J. D., Krueger, J. I., & Vohs, K. D. (2003). Does high self-esteem cause better performance, interpersonal success, happiness, or healthier lifestyles? *Psychological Science in the Public Interest*, 4(1), 1-44.
[24] Harter, S. (2006). Self-processes and developmental psychopathology. Developmental psychopathology, vol 1: Theory and method (2nd ed.). (pp. 370-418) John Wiley & Sons Inc, Hoboken, NJ.
[25] Wright, M., Banerjee, R., Hoek, W., Rieffe, C., &Novin, S. (2010). Depression and social anxiety in children: Differential links with coping strategies. *Journal of Abnormal Child Psychology*, 38(3), 405-419.
[26] Mavroveli, S., Petrides, K. V., Rieffe, C., & Bakker, F. (2008). Trait emotional intelligence, psychological well-being, and peer-rated social competence in adolescence, Peter Lang Publishing, New York, NY. 2009.
[27] Rieffe, C., Oosterveld, P., Miers, A. C., Terwogt, M. M., & Ly, V. (2008). Emotion awareness and internalising symptoms in children and adolescents: The emotion awareness questionnaire revised. *Personality and Individual Differences*, 45(8), 756-761.
[28] Theunissen, S. C. P. M.; Soede, W.; Briaire, J. J.; Frijns, J.H.M.; et al. Depression in hearing-impaired children. *International Journal of Pediatric Otorhinolaryngology*, 75. 10 (2011): 1313-1317. Elsevier Ireland Ltd
[29] Orth U, Robins RW, Roberts BW. Low self-esteem prospectively predicts depression in adolescence and young adulthood. *Journal of child psychology and psychiatry*, 2008,95(3):695-708.
[30] Trzesniewski KH1, Donnellan MB, Moffitt TE, Robins RW, Poulton R, Caspi A., Low self-esteem during adolescence predicts poor health, criminal behavior, and limited economic prospects during adulthood. *Dev Psychol*. 2006;42(2):381-90.
[31] Watkins ER., Constructive and unconstructive repetitive thought. *Psychological Bulletin*, 2008, 134(2):163-206.
[32] David CF, Kistner JA., Do positive self-perceptions have a "dark side"? Examination of the link between perceptual bias and aggression. *Journal of Abnormal Child Psychology*. 2000. 28(4):327-37.
[33] van Gent, T., Goedhart, A. W., Knoors, H. E., Westenberg, M. P., &Treffers, P. D. (2012). Self-concept and ego development in deaf adolescents: A comparative study. *Journal of Deaf Studies and Deaf Education*, 17(3), 333-351.
[34] Wallace C., Kovatcheva, S. (1998) Youth in Society: The Construction and Deconstruction of Youth in East and West Europe, Macmillan, Basingstoke.
[35] Ladd, P. 2003. Understanding Deaf Culture: In Search of Deafhood. Clevedon: Multilingual Matters.
[36] Jambor E., Elliott M., Self-esteem and Coping Strategies among Deaf Student. *Journal of Deaf Studies and Deaf Education*, 2005, 10(1): 63-81.
[37] Polat F, Factors Affecting Psychosocial Adjustment of Deaf Students. Journal of Deaf Studies and Deaf Education, 2003,8(3):325-339.

World Academy of Science, Engineering and Technology
International Journal of Humanities and Social Sciences
Vol:10, No:6, 2016

[38] Jackson C, Traub R. J, Turnbull A. P., Parents' Experiences with Childhood Deafness Implications for Family-Centered Services, *Communication Disorders Quarterly*, 2008, 29, 2, 82-98.

[39] Lane H., Constructions of Deafness, *Disability & Society*, 1995, 10, 2, 171-190.

[40] Cole, E., &Akamatsu, C. T. (2000). Meeting the psychoeducational needs of deaf immigrant and refugee children. Canadian Journal of School Psychology, 16(1), 1.

[41] Cigoli V., Gennari M., Mediare tra culture e generazioni,. La funzione della coppia genitoriale immigrata, in La Migrazione come evento familiare; *Studi interdisciplinari sulla famiglia XXIII*, Vita e pensiero, Milano, 2008, pp.123-148.

[42] Gregory S., Sheldon L., Bishop J., 1995, Deaf Young People and Their Families: Developing Understanding, Cambridge: Cambridge University Press.

[43] McDowell L. (2002) Transition to work: masculine identities, youth inequality and labour market change, *Gender, place and culture*, 9,39-59.

[44] Katbamna S., Bhakya P and parker G., (2000), Perceptions of caregiving relationship in South Asian Communities. In Ahmad W. I. U. eds., Ethnicity, disabilities and Chronic Illness: Buckingham: Open University Press.