The Impact of Parental Involvement on the Selfesteem of Adolescents with Hearing Impairment in Cameroon

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Abstract: The study sought to investigate the impact of parental involvement (PI) on the self-esteem of adolescents with hearing impairment (HI) in Cameroon by examining how parenting, as a form of PI affects the self-esteem of adolescents with HI. The research design used was the explanatory sequential mixedmethods design. Quantitative data based on the dependent and independent variables were collected from the adolescents with HI using a questionnaire. The first part of the questionnaire testing PI was prepared using the Likert scale, while the second part was done by adapting the Rosenberg Self-Esteem Scale to measure self-esteem in adolescents with HI. The population constituted two groups of respondents; parents of adolescents with HI and adolescents with HI found in 4 selected regions of Cameroon. The purposive sampling and Snow-ball sampling techniques were used to select the sample size. Theoretical underpinnings to inform and support the issues relating to the named variables were offered by the Theories of Attachment by John Bowlby (1907 - 1990) and Mediated Mutual Reciprocity by Tchombe (2017). The data collected from the questionnaire were analyzed quantitatively using The Pearson Product Moment Correlation analysis. Qualitative data from in-depth interviews were analyzed descriptively. The findings from the analyses revealed that, as PI in parenting increases, the development of self-esteem of adolescents with HI also increases. From the findings, we conclude that parenting significantly affects the selfesteem enhancement of adolescents with HI in Cameroon. We recommend among other things, that education stakeholders and policy makers should inform policy on the discoveries relating to the parenting challenges faced by adolescents with HI.

Keywords: parental involvement, parenting, adolescent, hearing impairment and self-esteem

I. INTRODUCTION

The World Health Organization (WHO) (2013) articulates that HI is the most prevalent sensory disability increasing globally. According to Adib-hajbaghery and Rezaei-Shahsavarloo (2015), this disability affects persons of all age groups, especially adolescents who may end up with difficulties in handling issues of self-esteem. Lincoln, Augustine, Zano and Muranda (2014) report on some misconceptions that hinder PI in the education of children with HI. They assume that educating these children is the sole responsibility of specialists. Contrarily, the education of adolescents with or without disabilities should be the joint effort of parents and teachers (Lincoln et al.; 2014). Santrock (2004) offers a guide to our understanding of some constructs of PI like authoritarian parenting, which demands that adolescents should meet up their standards for work and whatever they do. Also, the permissive/laissez-faire parenting style is divided into two; the permissive indifferent parenting style and the permissive indulgent parenting style. All in all, any parenting style should strive to make the adolescent offspring successful and happy. Thus, Faisal Al-maamari (2016) holds that high levels of PI as a strong form of social support in various domains, especially for those with HI are often associated with educational and psychological benefits, for better social adjustment. This may help in overcoming peculiar challenges thus, enhancing self-esteem in adolescents with HI.

Background to the Study

The importance of PI cannot be overemphasized (Baumrind, 1968) as quoted in Kopko (2007). He sheds light on some forms of parenting and their significance. Firstly, Authoritative/Democratic parenting is said to support parental participation and set behavioural boundaries while allowing psychological exploration. An authoritative parent directs the child's activities in a rational, issue-oriented manner, encouraging verbal give and take. Next, Attachment parenting is a style of caring for and interfering with children's lives to ensure their safety and security. Adolescents tend to take on contrary behaviour of not caring about others. This may lead to impulsive behaviours and problems with self-regulation as well as self-esteem development. Lastly, in the Combination parenting style, two different parenting styles are used (Chan & Chan, 2005). The significance is that the parents discuss and create a set of rules and a discipline plan agreed upon, which they enforce irrespective of their chosen style (Kopko, 2007). Usually, Parenting is guided by parental regard (PR); positive, conditional and conditional positive regard (PCPR) and how it motivates the adolescent with HI; enhancing a healthy sense of autonomy and self-esteem.

In terms of self-esteem, William (1890), as quoted in Leary and Baumeister (2000), is repeatedly referred to as the creator of the self-esteem movement. Self-esteem can be conceptualized as a global regard that a person has for him or herself as an individual classified under High and Low selfesteem. High self-esteem entails appreciating oneself and acknowledging self-worth, self-control and competence; with a corresponding positive attitude (Brendgen, 2002). On the other hand, Low self-esteem may ensue from a discrepancy between a person's expectations and his or her perception of adequacy. Self-esteem is manifested through constructs like an individual's Self-Image, the Ideal self, Objective selfawareness and Internal and external locus of control. As selfesteem has gained more attention, more specific types like explicit, implicit, optimal and global self-esteem have been defined. Explicit self-esteem entails being expressed, conscious, and verbal (Bosson, A., Brown, R., Zeigler-Hill, T., & Swann, U. 2003). Also, implicit self-esteem is described as automatic and non-verbal while, global self-esteem is the evaluative component of self-concept. So, issues of selfesteem enhancement may ensue if there is a discrepancy between a person's expectations and his or her perception of adequacy. To Bolger and Patterson (2001), constructs like self-efficacy, internal locus of control and self-compassion can promote healthy functioning and resilience in the face of life stressors like self-esteem development especially among adolescents with HI.

Factually, self-esteem ratings in children/adolescents can be influenced by chronologic age. This is evident when developmental transitions during adolescence can yield both external physical changes and internal social-emotional changes, which influence psychosocial domains such as selfesteem (Landy, 2009). Equally, Tambs (2004) elucidates that children with HI may develop lower self-esteem than hearing peers due to differences in temperaments and physical appearance. Thus, adolescent temperament and other factors like age at identification or intervention and Communication abilities may be associated with such characteristics as attention, frustration and shyness. Self-esteem can be improved by identifying causes of low esteem, providing emotional and social approval; helping to improve achievement and lastly, developing children's coping skills. Generally, issues of adolescence have been of great significance since the early 90s. Hall (1844-1924), as quoted in Landy (2009), is the first psychologist to advance the psychology of adolescence in its own right and to propose the use of scientific methods to study adolescents. To him, the period begins at puberty; between 10 or 14 years (early adolescence) and ends (between 22 years to 25 years of age) with late adolescence. Adolescence is also a time at which decisions need to be made about the future. During this crises period, adolescents with HI suffer more from depression than their hearing peers (Landy, 2009). Erikson (1963) posits that by 13 years, children become concerned with acceptance by peers and independence from parents in the quest to develop a sense of self in the identity versus confusion stage, which may touch on issues of self-esteem.

Hearing forms one of the most valuable human assets, which portrays that man is normal. Meanwhile, HI is regarded by The Individuals with Disabilities Education Act (IDEA), formerly the Education of the Handicapped Act reauthorized in 1997, as a generic term describing a wide range of hearing losses including deafness. Thus, HI, whether permanent or fluctuating adverselv affects a child's educational performance as well as self-esteem enhancement and may frustrate all attempts in the acquisition of both cognitive and social skills. Ljubicic, Santa and Sonja (2017) state that the term "HI" or "hearing loss" means loss of function of varying intensity to all parts of the ear and the auditory pathway. This dysfunction comes with further drops in self-esteem, especially among adolescents with HI. Two main types of HI are conductive and sensori-neural hearing loss (Offei, 2011). Conductive hearing loss results from an obstruction of sound waves moving from the outer ear to the inner ear, while Sensori-neural hearing loss occurs when the nerve fibers that receive the sound stimulus are destroyed. Also, mixed hearing loss results from a dysfunction of the cerebral cortex. To Offei (2011), the degree of hearing loss is measured using units called decibels (dB), while the pitch is measured in hertz (Hz). Hearing ability ranges between 250 to 8000 Hz encompassing the speech frequencies from 10dBs to120 dBs. Measured together, decibels and hertz tell the degree of hearing loss, in which one has in each ear; classified under Mild; Moderate, Severe and profound hearing loss.

Statement of the Problem

Self-esteem (self-image, ideal self, objective self-awareness, self-reliance/autonomy and internal locus of control), selfcompassion and self-efficacy serve as the pillars of a healthy self-concept. In the face of a child-maltreatment and/or neglect by parents or peers as well as the inability to acquire cognitive, linguistic and social skills common with adolescents with HI, each of these self-constructs may be of help. It may either serve to protect the child by motivating them to make the right choices and to seek help or to promote resilience against the devastating effects of maltreatment or neglect. Ideally speaking, the available social support system like genuine parenting ought to help the children, particularly adolescents with HI, to be able to genuinely handle social concerns like issues of self-esteem. Yet, quite often, exclusionary practices like segregation, discrimination and prejudice against those with HI are still noted to come from some parents who ought to serve as a strong social support system for adolescents with HI. Also, some traditional beliefs, customs and attitudes of different ethnic groups in Cameroon still have the potential to negatively influence the education of persons with special educational needs including those with HI. This prejudice is likely to result in despair, shame, frustration, guilt and a strong desire to commit assault or suicide, thereby, negatively affecting the enhancement of selfesteem. To emphasize, literature proves that adolescents with hearing impairment may experience many more physical, psychological and social changes (Seyedeh-Zeynab, Guita, Movallali & Mousavi, 2017). Therefore, they are vulnerable to greater challenges as their skills in communication and access to information, especially the information regarding their social world are limited. It is against this backdrop that this study sets out to investigate ways in which PI in parenting affects the self-esteem of adolescents with HI in Cameroon.

Research objective

The main goal of the work was to investigate the impact of PI on the self-esteem of adolescents with HI. Specifically, the objective was to find out ways in which parenting, as a form of PI, affects the self-esteem enhancement of adolescents with HI in Cameroon.

Research hypotheses

Two hypotheses were formulated to guide the investigation; these were the null and alternative hypotheses as follows:

- Ho1: Parenting does not significantly affect the selfesteem enhancement of adolescents with HI in Cameroon.
- Ha1: Parenting significantly affects the self-esteem of adolescents with HI in Cameroon

II. LITERATURE REVIEW

Conceptually, to shed some light on PI, Baumrind (2000) identifies three parenting styles; authoritative, permissive and authoritarian parenting styles, which may influence selfesteem development by adolescents with HI as they interact with parents. This concept of Parenting constitutes a form of child-rearing, which takes various dimensions. To Chang (2005), it is a process of helping families with child-rearing. It entails establishing parenting styles that may translate to a cordial relationship with the child at home to improve levels of self-esteem. Generally, the parenting style used by parents may be determined by the parent's cultural heritage. To explain, Chang (2005) uses the primary cultural difference between Caucasian Americans and Asian American culture, which is the concept of independence versus interdependence. While Caucasian American society embraces independence and emphasizes self-expression, Asian American society emphasizes interdependence, group solidarity, social hierarchy and personal humility. Thus, children (adolescents with HI inclusive) are expected to obey and respect authority and learn good moral character; attitudes, which may reinforce their ability to enhance self-esteem.

Dyson (2010) opines that PI is enhanced through Parental regard, which is the reaction of parents, in the provision of required feedback. Parental regard, as a construct under parenting, looks at parental positive regard, (PPR), parental conditional regard (PCR), and Parental conditional positive regard (PCPR) and how it motivates the adolescent with HI. To Assor (2004), PPR is the perceptions of parents' affection and appreciation depending on the child's attainment of parentally valued outcomes. Thus, PR requires love or affection; being nice or agreeable with others. Meanwhile, PCR is a control-oriented attitude that might lead to negative behavioural outcomes such as controlled motivation, controlled behaviour and internalization (Soenens & Vansteenkiste, 2010). Hence, successes recorded in this perspective may, in a way, improve self-esteem enhancement, especially among adolescents with HI. Thus, PCPR is either autonomous (intrinsic) or controlled (extrinsic). Meanwhile,

in controlled motivation, the individual's behaviour is shaped by external pressures with the individual feeling coerced to display certain behaviours (Budak, 2000). Thus, parental perspective taking and acknowledging children's feelings allows the children to communicate with and feel close to the parents when enacting the parents' expectations and thus touching on issues of self-esteem.

In the context of Cameroon, Nsamenang (2000) observes that parenting always occurs in a specific ecoculture, defined by geography, history and the sociocultural system. He further articulates that parenting styles in Cameroonian families vary depending on whether the family is a nuclear, polygamous or single parent. A typical Cameroonian father exerts considerable influence and wields enormous control over family resources and all that happens within the family. These cultural guide-lines portrayed by Nsamenang (2000) could serve as a yard stick to determine the nature of PI with Cameroonian parents as they come in to assist in the education/general upbringing of their children with or without disabilities. Thus, the eight main types of parenting seen above; attachment, permissive, authoritarian, authoritative, helicopter, uninvolved and combination parenting styles proposed by Kopko (2007) can influence adolescent selfesteem enhancement. These will be articulated with the view of finding out how PI in parenting informs on issues of selfesteem enhancement by adolescents with HI in Cameroon.

Empirically, Selolo (2018) investigates factors that affect PI in the education of their children at the primary school level, in Bahananwa circuit, Blouberg Municipality. The mixed research approach and purposive sampling are used to target 28 School Governing Body (SGB) members; 3 principals, 15 parents and 10 educators. A semi-structured questionnaire is used to collect data from the SGB members from the sampled schools as well as observation sheets to collect more information on the PI. Here, PI is found to be the active and significant involvement of the parent in all aspects, where a parent is interacting with the child for guidance and support. The findings are consistent with those of the present work, as it also made use of the mixed-methods research design and purposive sampling technique.

III. METHODOLOGY

This study made use of the sequential explanatory mixedmethods research design, which entails collecting and analyzing first, quantitative and then qualitative data in two consecutive phases within the study (Creswell, 2003). Theoretical underpinnings to inform and support the issues relating to the named variables were offered by the Evolutional Theory of Attachment of Bowlby (1907-1990) and the Theory of Mediated Mutual Reciprocity (MMR) of Tchombe, (2017). Firstly, according to Bowlby's theory, every child has an innate (inborn) need to attach to one main attachment figure; a practice identified as monotropy. So, short-term separation from an attachment figure leads to distress and detachment. The theory is significant in the light of the present study in that, it establishes the internal working model showing relationships with others being trustworthy and with self as valuable and interactive with others, features, which guide the child's future; touching on issues of selfesteem. Secondly, Tchombe, (2017), portrays a new paradigm shift in theorizing, which views development from the child's perspective rather than the adult's perspective. Mediated Mutual Reciprocity (MMR) considers the cultural setting, harbouring a significant adult and the growing child who has to propose cognitive, affective, social and psychomotor inputs to the adult and lastly, both share responsive connections in MMR. Significantly, in the light of the present study, adolescents with HI, can be closely guided by the knowledge proposed by this theory to improve issues of self-esteem.

Population of the study

The population of this study was drowned from the South West, North West, West and Littoral Regions of Cameroon. Statistically, the number of both adolescents with HI and their parents found in the selected divisions was as follows; eighteen (18) adolescents with HI and twenty (20) parents in the Fako (20) adolescents with HI and thirty-one (31) parents in Mezam, seventeen (17) adolescents with HI and twenty-four (24) parents in the Mifi and finally fifteen (15) adolescents with HI and nineteen (19) parents in the Mungo. The target population stood at 174 respondents: seventy (70) adolescents with HI and 104 parents. The accessible population was 119 respondents; (72) parents and forty-seven (47) adolescents with HI. The sample population stood at ninety-six (96); forty-seven (47) adolescents with HI and forty-nine (49) parents.

IV. DATA COLLECTION, SAMPLE AND SAMPLING TECHNIQUES

The instruments used for data collection were a questionnaire: for adolescents with HI and an interview guide for parents of sampled adolescents with HI from the selected divisions. The Data collected were analyzed both quantitatively and qualitatively. Quantitatively, the initial findings reported on the first section of the questionnaire based on the independent variable were correlated with findings on the second part of the questionnaire adapted from the Rosenberg Self-esteem Standardized Test, based on the dependent variable (selfesteem). Secondly, responses from an in-depth interview administered to parents of adolescents with HI were analyzed qualitatively and the results were used to support the quantitative findings from the correlation. Significantly, both gave more dependable results. The sample population stood at ninety-six (96) respondents; forty-seven (47) adolescents with HI and forty-nine (49) parents; purposively sampled using the Snowball Sampling technique.

Data analysis

The scores of the independent variable were got from the responses elicited from the eight-point Likert scale questionnaire items, which measured PI in parenting. The scores of the dependent variable (self-esteem) were got from the 10-point Likert scale questionnaire items that were

adopted from Rosenberg's scale. The statistical analysis technique used was the Pearson Product Moment Correlation analysis.

The correlation coefficient formula used is;

$$\Gamma_{xy} = \frac{n\sum xy - \sum x\sum y}{\sqrt{[n\sum x^2 - (\sum x)^2][n\sum y^2 - (\sum y)^2]}}$$

Where x is the independent variable, y is the dependent variable and Γ_{xy} is the correlation coefficient for x and y. The result of the analysis is presented in Table 1 below.

Table: 1. Pearson Product Moment Correlation Analysis of the Impact of Parental involvement in Parenting on the Development of Self-esteem of Adolescents with Hearing Impairment in Cameroon (N=47)

Variable	$\sum X$	$\sum X^2$			
	$\sum Y$	$\sum Y^2$	∑XY	Γ_{xy}	p-value
Parental nvolvement in parenting (X)	919	18479	21671	0.432**	0.002
development of self- esteem (Y)	1095	26223			

p*<0.05; df=45; critical Γ_{xy} =0.288

From the result of this analysis, the null hypothesis was rejected and the alternative hypothesis was retained. Thus, as the PI in parenting increased, self-esteem development by adolescents with HI in Cameroon also increased. Hence, PI in parenting significantly affects the development of self-esteem of adolescents with HI in Cameroon. From the in-depth interviews with parents, some reports supported the initial quantitative findings. To support the initial quantitative findings under this construct, the views of parents on P1A1 and 2 portrayed that 30 out of 49 parents agreed that they tried to improve their children's welfare through healthcare provision and some special care due to their HI. Meanwhile, 10 out of 49 parents reported set-backs faced due to lack of information regarding healthcare provision to those with HI. From birth, they had never met any audiologist (as they were reported to be scarce) to present their children. Yet, they had hardly neglected their parental role over the adolescents with HI; steps that boosted self-esteem enhancement.

V. PRESENTATION AND DISCUSSION OF FINDINGS

The finding here provides answers to the main objective of the work, which is to find out ways in which PI affects the selfesteem of adolescents with HI and the extent to which parenting affects the self-esteem of adolescents with HI in Cameroon. Firstly, the result of the statistical analysis revealed that as the PI in parenting increased, the development of self-esteem of adolescents with HI in Cameroon also increased. Thus, the null hypothesis was rejected and the alternative hypothesis was retained. Secondly, from in-debt interviews, parents reported that they had hardly neglected their parental role over the adolescents with HI; an act, which has always boosted self-esteem enhancement. So, as parental role improved, self-esteem enhancement by adolescents with HI also improved. This revelation still supports the above quantitative finding, which states that as the PI in parenting increased, the development of self-esteem of adolescents with HI in Cameroon also increased. Anat Zaidman-Zait and Brenda Poon (2013) supported the above finding in a piece of work entitled "Family Support Needs of Preadolescents and Adolescents with deafness or HoH." The overall findings revealed that parents of school-aged children with a range of hearing losses continued to have pressing concerns regarding various aspects of raising children at home - particularly adolescents with HI. This finding is consistent with what the current study discovered; that as parenting increased, the development of self-esteem of adolescents with HI in Cameroon also increased. The finding was further supported by The Evolutional Theory of Attachment by John Bowlby (1907 - 1990), which says that if the child is securely attached before crossing the first two years of his/her life, he/she is significantly prepared to face the world of tomorrow. This ascertains that the parents are dependable, such that as the PI in parenting increases, the development of self-esteem of adolescents with HI also increases. Equally, the finding was also supported by the Theory of Tchombe, (2017), which views development from the child's perspective. To this effect, there must be a cultural setting with a significant adult and an environmental growing child. The child proposes cognitive, affective, social and psychomotor inputs to the adult and both responsively connect in mediated mutual reciprocity. Significantly, where adolescents with HI share responsive connections through parenting, they would feel that they too belong to that family and this would, in turn, enhance their self-esteem. All views were found to be consistent with the fact that as the PI in parenting increases, the development of self-esteem of adolescents with HI also increases.

VI. CONCLUSION AND RECOMMENDATIONS

This work set out to investigate the impact of parenting as a form of PI on the self-esteem of adolescents with HI in Cameroon. From the analysis, it was discovered that as PI in parenting increased, the development of self-esteem of adolescents with HI also increased. Thus PI in parenting significantly affects the development of self-esteem of adolescents with HI in Cameroon. Based on these findings, we among other things, recommend that Education stakeholders and policy makers should inform policy on the discoveries relating to parenting and the challenges faced by adolescents with HI. They should standardize the non-conventional Cameroonian signs and institute the teaching of ASL or the standardized form to parents. They should inform policy to review aspects of the legislature that deal with genuine parenting styles- improving welfare through healthcare (training audiologists) provision due to their HI. Finally, parents should motivate them and supply all their health needs; accept their abnormality and accommodate them, just as they do with their normal children.

REFERENCES

[1] Adib-Hajbaghery, G., & Rezaei-Shahsavarloo, F. (2015). Nursing students' knowledge and performance in communicating with

patients with hearing impairment. Japan Journal of Nursing Science (JJNS), 12(2), 135-144.

- [2] Anat, Z., & Brenda, P. (2013). Family support needs as perceived by parents of preadolescents and adolescents who are deaf or hard of hearing. Deafness and Education International 13(3), 1-12.
- [3] Assor, A., & Deci, E. (2004). Child custody evaluation practices: A 20-year follow-up. Family Court Review, 49(3), 618-628.
- [4] Baumrind, Y. (1968). Parenting styles, involvement of parents in school activities and adolescent academic achievement. Procedia-Social and Behavioral Sciences, 128(22), 288-293.
- [5] Bolger, R., & Patterson, E. (2001). Developmental pathways from child maltreatment to peer rejection. Child Development, 72(2), 549-568.
- [6] Bosson, A., Brown, R., Zeigler-Hill, T., & Swann, U. (2003). Selfenhancement tendencies among people with high explicit selfesteem. The moderating role of implicit self-esteem. Self and Identity, 2,169-187.
- [7] Bowlby, J. (1907-1990). The theory of attachment; attachment and loss, attachment. Basic Books
- [8] Brendgen, M. (2002). Assessing aggressive and depressed children's social relations with classmates and friends: A matter of perspective. Journal of Abnormal Child Psychology, 30, 609–624.
- [9] Budak, E. (2000). Determining attitudes and anxiety levels of students in need of protection towards mathematics course. Procedia-Social and Behavioral Sciences, 186, 269-273.
- [10] Chan, D., & Chan, E. (2005). Impact of perceived leadership styles on work outcomes: Case of building professionals. The Journal of Construction Engineering and Management, 131(4), 423-422.
- [11] Chang, M. (2005). Applying self-regulated learning strategies in a web-based instruction - An investigation of motivation perception. Computer Assisted Language Learning, 18(3), 217-230.
- [12] Creswell, J. W., Plano, V. L., Clark, M., Gutmann., & Hanson, W. (2003). Advanced mixed-methods research designs. In A.Tashakkori & C. Teddie (Eds.), A Handbook on mixed methods in the behavioural and social sciences (pp.69-110). Sage Publications.
- [13] Dyson, T. (2010). Population and development: The demographic transition. Zed Books.
- [14] Erikson, E. (1963). Theory of psychosocial development and career development. Journal of Vocational Behaviour, 10(3), 261-269.
- [15] Faisal, A. (2016). Programme identity in academia: The case of one EAP unit in the Arabian Gulf. Arab World English Journal (AWEJ), 7 (3), 67-90.
- [16] Kopko, K. (2007). Parenting styles and adolescents. Journal Review, 20, 2011-2022.
- [17] Landy, S. (2009). Pathways to competence: Encouraging healthy social and emotional development in young children (2nd Ed.). Paul H. Brookes Publishing.
- [18] Leary, M. R., & Baumeister, R. F. (2000). The nature and function of self-esteem: Sociometer theory. In M. P. Zanna (Ed.), Advances in experimental social psychology, (pp. 1–62). Academic Press.
- [19] Lincoln, H., & Augustine, Z. M. (2014). A study into the involvement of parents in literacy development programmes for deaf learners. Novelty Journal, 1(2), 33-46.
- [20] Ljubicic, M., Santa, Z., & Sonja, S. (2017). Communication between Nurses and DEAF people in Health Institutions. ISE Research Institute, 5, 958-965.
- [21] Nsamenang, B. (2010b). Issues in and challenges to professionalism in Africa's cultural settings. Contemporary Issues in Early Childhood, 11(1), 20–28. https://doi.org/10.2304/ciec.2010.11.1.20.
- [22] Offei, Y., & Achiampong (2011). Children with hearing impairment: Special needs education perspectives and insights (Unpublished Paper).
- [23] Santrock, J. W. (2004). Educational psychology (2nd Ed.). McGraw-Hill.
- [24] Schore, A. (2000). Attachment and the regulation. McGraw-Hill.
- [25] Selolo, R. E. (2018). Factors influencing parent involvement in the education of children at primary School level in Bahananwa circuit

in Bloubert Municipality Limpopo Province. http://ulspace.ul.ac.za>handle.

- [26] Soenens, M., & Vansteenkiste, G. (2010). A theoretical upgrade of the concept of parental psychological control. Developmental Review, 30, 74–99.
- [27] Tambs, K. (2004). Moderate effects of hearing loss on mental health and subjective well-being: Results from the nordtrondelag hearing loss study. Psychosomatic Medicine, 66 (5), 776-82.
- [28] Tchombe, T. (2017). Mediated mutual reciprocity for engaging children and youths towards sustainable Development. Retrieved April 2, 2021, from DOI: 10.1007/978-3-319-58008-1-7
- [29] William, J. (1890). The principles of psychology. Henry Holt and Company.
- [30] World Health Organization, (2013). Multi-country assessment of national capacity to provide hearing care.