

Saudi Arabian Deaf Mothers' Raising Deaf and Hearing Children

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Abstract

A mother's hearing status can influence her motherhood experience, particularly when the mother is Deaf, and the children are Deaf or hearing. The study aims to describe and interpret the Deaf mothers' experience raising Deaf and hearing children. The study employed a narrative research design with three Saudi Arabia Deaf mothers of Deaf and hearing children. Data were analyzed using Clandinin and Connelly's (2000) three-dimensional narrative inquiry approach and content analysis. Seven themes emerged in their narratives: desire for a Deaf child, hearing child speech and language development, family support in raising the children, navigating the hearing community, role modeling and resilience, parenting style, and audism. The findings revealed implications that cut across disciplines, including Deaf studies, disability studies, gender studies, and speech and hearing sciences.

Keywords: deaf, disability, mothers, narrative study, transformative

Having a disability as a parent can present a unique experience when raising children (Amaya & Tomasini, 2014; Farber, 2000; Feizi et al., 2014; Kobosko, 2011; Kocher, 1994; Konrad, 2006; Mercerat & Sañas, 2020). Sometimes, both the parent and the child have a disability, making the parent's attitude and experience with their child with a disability different from that of a parent without a disability with a child with a disability (Farber, 2000; Kocher, 1994; Mercerat & Sañas, 2020). Additionally, some parents with disabilities depend on others in the family and community to support raising children (Poon & Zaidman-Zait, 2013).

According to the WHO (2021), over 5% of the world's population has hearing loss. Previous research shows that 90-95% of individuals with hearing loss have hearing parents (Caselli et al., 2021; Farhana & Malak, 2015; Geeslin, 2007; Kobosko, 2011; Mitchell & Kartchmer, 2005). Most studies focus on deaf parents of deaf children (Meadow et al., 1983), hearing parents of deaf children and, very few, deaf parents with hearing children (Ahlert & Greeff, 2012; Zaborniak-Sobczak & Perenc, 2017). The critical issue in the parent-child dynamic and relationship, when there is a difference in hearing status, is unshared language and culture, which affect parent-child attachment, communication, stress, and anxiety in both the child and parent (Meadow et al., 1983; Myers et al., 2010; Poon & Zaidman-Zait, 2013).

Deaf parents with Deaf children share the same language, culture, and experiences (Antia et al., 2020; Meadow et al., 1983) and are actively involved in their children's lives, including education (Geeslin, 2007; Szarkowski & Brice, 2016). Research shows that Deaf parents are language models to their Deaf children, resulting in early language access and acquisition (Filax & Taylor, 2019). Deaf children with Deaf parents grow up in a signing home environment and mostly attend schools using American Sign Language (ASL) alongside written English (Baker & van den Bogaerde, 2016). These Deaf children have early access to sign language, impacting their language and literacy skills (Andrew et al., 2014; Scott & Hoffmeister, 2017; Singleton et al., 2004; Strong & Prinz, 1997).

Ninety percent of Deaf parents have hearing children and may experience cultural, linguistic, and social differences that impact their interactions (Caselli et al., 2021; Malik & Jabeen, 2016; Searls, 2019). The hearing children of Deaf parents are raised in unique, extraordinary family settings in which they are exposed to and interact with two differing cultural, social, and linguistic systems (Gould & Dodd, 2014). This makes them bilingual/bimodal and bicultural, and these children become members of the Deaf community despite being hearing (Hofmann & Chilla, 2015; Moroe & de Andrade, 2018). The two differing cultural, social, and linguistic systems can impact how parents support their children's language, social, and emotional development (Banda & Nakstad, 2021; Humphries et al., 2012; Masaka, 2018; Searls, 2019; Singleton & Tittle, 2000). Additionally, some Deaf parents experience communication challenges that may affect their involvement in their hearing children's education (Banda & Nakstad, 2021; Myers et al., 2010). Also, due to early access to sign language, some hearing children become interpreters for their parents (Buchino, 1993; Banda & Nakstad, 2021; Moroe & de Andrade, 2018; Zaborniak-Sobczak & Perenc, 2017) although previous literature argues against using hearing children to interpret for their Deaf parents (Hadjikakou et al., 2009; Moroe & de Andrade, 2018).

Despite limited studies from the Kingdom of Saudi Arabia, previous research showed that 1.4% of Saudi Arabia's population comprises D/HH children (Alyami et al., 2016). In Saudi Arabia, the major cause of deafness is genetic due to culture and religious practices that allow intermarriages within the family (Banda & Nakstad, 2021; Humphries et al., 2012). Most of these Deaf children attend mainstream schools due to the few schools designed for D/HH children (Alqahtani, 2017). Although Mohammad (2020) reported that the quality of life of the Deaf was not affected by their hearing loss, educational level, mode of communication, and school attendance, he noticed that Deaf women reported a higher quality of life than Deaf men. The current study focuses on Deaf women who are mothers raising both Deaf and hearing children.

Theoretical framework

The current study adopted a transformative paradigm to examine and propose social justice changes that would positively influence the lives of Saudi Arabian Deaf mothers. The Deaf mothers are members of a marginalized Deaf community vulnerable to oppression from a majority-hearing society. A transformative paradigm provides the lens to examine a society's

power dynamics, injustices, and inequalities and suggests possible social justice actions (Jackson et al., 2018; Mertens, 2017). Two theories that guided the research to embrace the transformative paradigm are the deaf critical theory (Gertz, 2003) and intersectionality theory (Crenshaw, 1989).

The deaf critical theory, like the predecessor critical race theory, focused on racism; the Deaf critical theory focused on audism. Audism is a form of oppression directed towards deaf people by individuals who believe that the ability to hear makes one superior to those with hearing loss (Dirksen & Bauman, 2004). Hence, Deaf critical theory facilitates the understanding of Saudi Deaf mothers' shared stories as experiential epistemology critical in understanding, analyzing, and interpreting their experiences with audism.

The second theory, the intersectionality theory, focuses on how the intersections of individual identities, including social class, gender, religion, sexual orientation, skin color, and race, result in oppression (Crenshaw, 1989; Skyer, 2021). In the current study, the Deaf mothers present a case of intersecting identities comprising social class, gender, religion, disability, and geographical location-Middle East.

Methods

The study presents the experiences and narratives of three Saudi Arabian Deaf mothers raising deaf and hearing children in the same homestead. The interviews conducted in Saudi sign language and transcribed and translated into English followed a narrative inquiry grounded on Connelly & Clandinin's (2006) three dimensions of narrative structure: temporality, sociality, and place. Temporality focuses on the time frame in which the events in their stories occurred, including pregnancy, birth, children's early years, and school age. Sociality addressed the Deaf mothers' feelings and interactions with family, children's school, and community. Finally, place examined the context in which the experience occurred. Following the re-storying using the three dimensions of narrative structure, the content analysis identified the emerging themes from the data.

Sampling Procedures

The two sampling procedures used to identify and recruit the three Saudi Deaf mothers included purposive and snowballing. Purposive sampling helped to identify and select participants with rich, in-depth information about the study (Creswell & Plano Clark, 2017). The inclusionary criteria included:

- Above 18 years of age
- Born and raised in Saudi Arabia
- Deaf mothers
- Deaf mothers who have Deaf and hearing children

Due to the challenge of finding participants who met the criteria, the researchers used a snowballing sampling procedure in which the participants helped to identify and contact more participants.

Study participants

The three mothers are Sara, Amal, and Khadija (their names are pseudonyms to protect their identity). All three Deaf mothers had Deaf mothers themselves. Table 1 presents the demographic information of the mothers.

Table 1

Demographic information

Demographic characteristics	Sara	Amal	Khadija
Age	Early 30s	Early 40s	Late 30s
Marital status	Married early 20s and now divorced	Married in her 30s	Married early 20s
Husband hearing status	Hearing uses Saudi Arabian Sign Language (SASL)	Deaf	Deaf
Educational level	High school	High school	High school
Children	Three sons, two deaf and one hearing.	Five children. Deaf: daughter (12 yrs) and son (8 yrs), Hearing: son (11 yrs) daughter (6yrs) Undiagnosed 7month son	Two children, a deaf son aged 16 years and a hearing girl aged 11
Home language	SASL Spoke Arabic	SASL	SASL Spoke Arabic
Deaf family members	Mother and grandmother	Mother, grandmother, and other relatives Mother died at age 9 and raised by Deaf relatives	Mother Deaf

Research Question

The central question that guided the narrative study was, "What are the experiences of Deaf mothers raising Deaf and hearing children in Saudi Arabia?"

Findings and Discussion

Seven themes emerged that described the experience of Saudi Deaf mothers raising Deaf and hearing children in the same homestead.

Theme 1: Desire for a Deaf child:

Being Deaf, all three mothers, at one point in their pregnancy, desired their unborn child to be Deaf so they could have a shared language and culture. For instance, Amal shared the birth of her first three children. Amal shared that,

I prayed during pregnancy that my children would be Deaf. I was very happy when my daughter was diagnosed at two months as Deaf and became deaf because I knew that my daughter and I could easily communicate with sign language as a shared language and communication. During the second pregnancy, I hoped my son would be deaf so he could share in the Deaf family's culture and likeness, but he was hearing, and I was just as happy as can be for a healthy child. The third baby, a son, was born Deaf, and my family was happy again that there was another deaf boy in the family.

Similarly, Sara shared that,

When I was first pregnant, I prayed to God that my child would be deaf so that the generation of deafness would continue. Deafness would be welcomed, and communication would be easy. I knew I could chat and communicate with my child in my language if it was deaf. Having strong deaf connections is so important, and that was my dream. My first boy was born hearing. Even though there was some disappointment in him not being deaf, I was so happy to have a healthy son. Five months after birth, my son's hearing diagnosis confirmed him as Deaf!

Khadija also shared,

I wished and prayed my child would be deaf because deaf culture is strong, and I knew that having a deaf child would be, in essence, having a child that is the same as me, and this is something I looked forward to. I longed for my baby to be deaf like me, although I would love a hearing child as a blessing too.

Theme 2: Hearing Child Speech Development

All three Deaf mothers shared their concerns about having a hearing child and how they could support the child in developing language and speech. Sara's husband was hearing, and she expected him to support the child in speech development, but after the divorce and the husband left, she had concerns about her hearing son's speech. She shared that:

While my husband was away, I was concerned with the hearing child's speech challenges. I did not know how to teach my hearing son to speak, so, at age six, my son was still not talking as expected. Unfortunately, family support from hearing members was not forthcoming. After receiving continuous reports about my hearing son's speech and language problems, I decided to seek the assistance of a private language tutor to support his speech and language development.

The other two mothers were married to Deaf husbands. They were equally concerned about their hearing children's speech development but hoped their hearing family members would step in to support their children in speech development. Amal shared that,

I knew my son could learn sign language from me, my husband, and his sister. I assumed he would learn to speak from his father's family, who are hearing. My hearing in-laws live near us.

Unfortunately, Amal dependence on her family failed her when the doctors misdiagnosed one of her children as Deaf while the child was hearing, and none of the hearing family members noticed and shared with her; hence, the child suffered speech and spoken language delays. Amal shared that.

At birth, the doctor told me that my daughter was deaf...at age two, the doctor...found that she was hearing. She was now behind on learning and needs to catch up on her auditory listening and speaking skills....

Khadija shared how her hearing daughter, the only hearing member in the family, experienced speech problems. Khadija sought the help of her hearing sister to practice speaking with her daughter. Khadija said,

I noticed my daughter's speech problem when her daughter was three years old, and the problem persisted till the daughter was 4th grade. My sister helped to teach her words and sentences. They used the Quran to read and pronounce words well.

Theme 3: Family Support in Raising the Children.

In Saudi Arabia, the Arabic religion and culture consider family support vital. All three mothers received various forms of support from hearing and Deaf family members. In particular, all Deaf mothers shared how they expected their hearing family members to support their hearing children in developing language and speech. For example, Sara, while talking about her family support, shared how her Deaf mother and hearing sister supported her. Speaking about her mother, she said,

My mother stayed with us and supported me in raising the children while my husband and I went to work. When I divorced my husband, my mother continued to stay with me and assisted in raising the children. She used SASL and helped my children develop language and communication skills in SASL. She also taught my children Arabic culture, religion, and responsibility. She also assisted in disciplining the children.

Talking about her sister, Sara said,

Whenever I need an interpreter, I always request help from my older sister, who knows SASL. I feel much more comfortable because she knows and understands what I am saying.

Sara's sentiments on family support echoed the other two mothers, Khadija and Amal's views of the family.

Theme 4: Navigating the Hearing Community

The Deaf mothers expressed that their challenges were mainly with the environment. All the mothers felt no challenges when inside their homes. However, due to communication access, they experienced challenges outside their homes, where they needed an interpreter. They

expressed fear, anxiety, loneliness, and being left out when interacting in a dominant hearing space. They often resort to gesturing or writing to communicate. Sara shared that,

When I take my car to the mechanic, I use gestures and get the point across as best as possible. I always quickly let that hearing person know they need to look at me and that I will use my hands to communicate. I am bold and direct. In the rare cases where the gesturing does not work, I resort to writing.

Sara shared that sometimes, she had to use family members as interpreters to assist her in navigating the hearing world. Sara experienced challenges and had to be patient and guide the family members on how best to interpret because they were not trained interpreters. She remembers her interaction in a dominant hearing court system when she sought child custody following a divorce. Her sister helped interpret for her. She was frustrated with the communication and court proceedings, as she shared,

When my husband and I divorced, he took my two sons away. I decided to seek legal assistance. My sister was hesitant because of the advanced language used in the court and her limited SASL skills. After convincing her, she accompanied me to court... I realized that she was not fully interpreting for me and deleted some. So, I told her to come back again and interpret exactly what I am saying and stop refusing. She admitted that she had omitted some things information because she perceived it as unimportant or embarrassing. I had to educate my sister on the importance of voicing everything I signed. My sister returned to court and shared all the information I had presented to the court. With a clearer understanding of the situation, the court granted me custody of my children after three years of separation.

Also, Amal shared her experience at the prenatal clinic where all the service providers, doctors, and nurses were hearing.

I had complications with the baby's position in the womb and had to depend on her hearing sister to interpret from when I was two months pregnant till the birth of my child.

Additionally, Khadija shared how she navigated the dominant hearing environment of the hearing school system that her two hearing children attended. She said,

Due to a lack of interpreters in the hearing schools, I had to communicate with the staff through writing, which took time and effort.

All three mothers expressed how navigating the hearing environment could be frustrating and almost make them give up, but they had to encourage themselves for the sake of their children.

Theme 5: Role Modeling and Resilience

Having Deaf mothers as role models is instrumental in helping Deaf children develop a culture of resiliency (Alyami et al., 2016; Alzahrani, 2020). Deaf mothers in the current study demonstrated strong willpower and did not quit when experiencing challenges—they expressed how having Deaf mothers acted as role models and helped them develop resiliency.

Sarah shared that,

In my family, there are three Deaf mothers my mother, grandmother, and cousin. I watched them raise both hearing and deaf children. Having experienced Deaf mothers in the family visiting my home and even my Deaf mother living with us at one time helped me to find ways to handle my fears, worries, and anxiety concerning the security of my children at home and outside the home. I welcomed motherhood with open expectations of the child's hearing status and already modeled skills.

Amal also shared,

My mother and grandmother are deaf as well. Having my first Deaf child made me see my child the same way my mother and grandmother viewed me. Having a Deaf mother close by helped me to handle my motherhood experience better.

Finally, Khadija shared that genetic deafness runs in the family, and so not only was her mother deaf but several members of the family are Deaf. She shared,

I saw members of my family who are Deaf raise Deaf and hearing children. My Deaf mother did the same, so I have much experience as a Deaf mother raising a Deaf or a hearing child.

Hence, we can see that all three mothers had unique first-hand experiences raising a Deaf and hearing child from Deaf members of their family who lived with them, which does not always happen to most Deaf mothers from hearing families.

Theme 6: Parenting Style

All three mothers expressed that their role as mothers in Saudi Arabia was to be responsible for raising children based on Arabic religion and culture. As mothers, they instilled societal values that led to appropriate social behavior and prepared their children for an independent life through learning skills and knowledge through education. To do so, the mothers shared their parenting styles depending on the circumstances. The dominant parenting style reported by the three Deaf was the authoritative parenting style.

Sara shared an example of employing the authoritative style in a situation where no child wanted to admit to breaking an iPad. She said,

I sat them down and explained the importance of honesty and that it pays to be honest. I wanted to model what it meant to be honest, and I said, if you are honest and admit to breaking the iPad, I will buy you a new iPad and give it to you. Of course, the guilty child honored up.

Amal shared that she uses dialogues to solve problems even with her hearing children. Since all her children know SASL, she used SASL to converse with her children to understand the problem before acting. She gave this example concerning her hearing child's refusal to go to school.

One day I woke up my hearing son to go to school. He refused to get up, and I asked him what the matter was. We talked. He said that his teacher slapped him in school... I contacted the school's president and explained to him what my son had said... Everything

was resolved. Now, my son is happy because I communicated to the president on his behalf.

Khadija shared a similar situation with her hearing daughter.

My hearing daughter has had difficulty speaking from a young age... One time, I recall that I woke up my daughter to go to school, and she refused. I sat to talk with her to know why. She said that she was being bullied because she had difficulty speaking... I encouraged my daughter and told her to ignore all people and, no matter what, be strong and have patience, and she will be successful. My daughter has improved her speech skills, and things are going well.

From the three Deaf mothers' narratives, they preferred an authoritative parenting style, which, although it focused more on dialogue, provides their children an opportunity to express themselves, maintains reasonable rules that are carried out by the mothers being warm towards children, and allows them to be very responsive to the needs of the child.

Theme 7: Audism

Audism was a significant theme in the research as it was prevalent in the experiences of deaf mothers. Although the three participants did not report experiences of audism in their families, they had community challenges. Previous research reported experiences prevalent in the community (Alyami et al., 2016). The most common form of audism shared by the mothers was in the community refusing to accept them as Deaf and SASL users who needed communication access. Providing interpreters to the Deaf mothers was presented as critical for the mothers to be included in the community activities. Also, the mothers needed interpreters to access services for their children, like schools and hospitals. According to the three mothers, experiences of audism were prevalent because Saudi Arabia lacks sufficient services for deaf parents, like interpreters and licensed professionals, to facilitate communication in public spaces. Khadija shared the need for sign language interpreters at the doctor's office. She said,

When I go to the doctor, an interpreter is not requested because they are not readily available.

Amal shared the same concerning interpreters,

I do not request interpreters when I go to visit my children's doctor, hearing schools, or other places because it is too difficult to get one.

Similarly, Khadija said,

I depend on myself to write to a doctor, and sometimes I rely on my sister to interpret for me when she is available.

Besides the lack of interpreters, which all three mothers experienced, there were also instances in which the Deaf mothers experienced direct audism. For example, Sara said she experienced it whenever her hearing husband accompanied her. In these situations, hearing people who had interacted with her before would ignore her in the presence of her husband. When her husband was present, the hearing people would act as if they could not understand a

Deaf person. Khadija said audism occurred in how hearing people view Deaf mothers as people who should stay home and do house chores like cleaning jobs instead of being employed.

Discussion

Most pregnant women have positive expectations and desires concerning their children, which later can impact their interaction with the child. Most mothers attend prenatal clinics because they want to know about everything, particularly the health of the baby they are carrying (Oyen & Aune, 2016). Research shows that most pregnant mothers hold various beliefs, expectations, and experiences of their motherhood and its different stages (Adalia et al., 2021). Most hearing mothers who find out their children are Deaf after birth go through mixed feelings that include worry, grief, shock, anxiety, guilt, and helplessness (Ebrahimi et al., 2015; Flaherty, 2015; Kurtzer-White & Luterman, 2003; Jackson et al., 2008; Zaidman-Zait, 2016). The findings from the current study in which all the mothers are Deaf presented a different experience because all three mothers desired to have a Deaf child who shared their language and culture. It is important to remember that it is a unique case to find Deaf mothers who also have Deaf children because only 10% of Deaf parents have Deaf children (Geeslin, 2000; Kobosko, 2011; Poon & Zaidman-Zait, 2013).

The Saudi Arabian Deaf mothers, despite their initial desire to have a Deaf child, embraced their hearing children and demonstrated equal maternal love, attachment, and interaction with all their children irrespective of their hearing status. These findings concur with past studies on attachment and interaction between deaf mothers and their Deaf children (Antia et al., 2020; Farhana & Malak, 2015; Meadow-Orlans et al., 1983). Also, reports of Deaf mothers with hearing children show the uniqueness of how Deaf mothers raise their children bilingual and bicultural, and hearing children are not left out in the home interaction (Gould & Dodd, 2014; Hofmann & Chilla, 2015; Humphries et al., 2012; Leigh et al., 2004; Moroe & de Andrade, 2018). On the other hand, the current findings on how Deaf mothers embraced their hearing children are different from what research demonstrates how hearing parents embrace, develop attachment, and interact with their Deaf children due to the stress following the hearing loss diagnosis (Gilliver et al., 2013; Jackson et al., 2010; Szarkowski & Brice, 2016).

Additionally, Saudi Deaf mothers expressed that they had a responsibility to train their children to grow an understanding of the Arabic culture and Islamic religion and demonstrate acceptable behavior and moral responsibilities. In training their hearing and Deaf children, the three mothers exhibited equality across all children in three of the four main parenting styles, including authoritative, authoritarian, indulgent, and indifferent (Sarwar, 2016; Wibowo et al., 2017). The three mothers did not express any stress in behavior management and training of either their Deaf or children because communication access through the shared Arabic sign language enabled their parents to carry out their parenting roles. The current findings echo research in America in which Deaf mothers supported both their hearing and Deaf children to develop lifetime skills, literacy skills, and self-advocacy (Berke, 2013; Souza, 2010). The case of deaf mothers is different from that of hearing parents raising Deaf children who, due to

communication challenges, experience stress in performing their parenting roles with their Deaf children (Lederberg & Golbach, 2002; Tamis-LeMonda et al., 2002; Zaidman-Zait & Most, 2005).

A major concern that the three mothers raised was the concern of speech and spoken language development for their hearing children. The Deaf mothers reported that their children's speech and spoken language lagged compared to their hearing peers. There are mixed findings that focus on the speech and language development of young Children of Deaf Adults (CODA), with some indicating possible delays while others indicate normal development equivalent to their hearing peers (Brackenbury. et al., 2006; Moroe & de Andrade, 2018; Murphy & Slorach, 1983; Prinz & Prinz, 1981; Rienzi, 1990; Sachs et al., 1981; Schiff-Myers & Ventry, 1976; Singleton & Tittle, 2000). Hence, there is a need to continue the research of CODA and identify interventions to support CODA to access comprehensible language input in both sign language and spoken language. Some Deaf mothers experience challenges supporting their hearing children to develop spoken language and other aspects of the hearing culture (Moroe & de Andrade, 2018). Existing research proposes that family members and schools support hearing children of deaf parents (Krige, 2010; Myers et al., 2010).

Finally, Audism *is* an oppressive and discriminatory action in which the hearing individual dominates Deaf individuals by exercising their power to hear (Bauman, 2004, 2018). Addressing Audism in society demands creating awareness of Deaf culture and Deaf identity and addressing the status of sign language and sign language users in society, including hearing signers (Wilkins & Hehir, 2008; Wilkson, 2019). The three mothers' narratives indicated a need to continue sensitizing the community about Deaf people and the need for programs that offer sign language to increase the number of sign language interpreters and the spread of SASL by increasing the number of SASL users. Like racism, which requires recognition and dismantling of the barriers of existing white privilege, with Audism, there is a need to recognize that hearing privilege exists. If not addressed, it is a barrier for Deaf people to maximize their potential in society. One way to address hearing privilege, as shown in the current study, is to recognize the heterogeneous nature of Deaf individuals and provide communication access and other accommodations without assuming that all community members receive information or communicate similarly.

Limitation

The current study included three mothers, which indicates a small sample size. Additionally, the three mothers have Deaf mothers; hence, it is important to examine Deaf mothers whose mothers are hearing. Lastly, the study focuses on only mothers, so there is a need for future research that examines the experiences of Deaf fathers with hearing children.

Conclusion

The field of Deaf education and Deaf studies tends to focus on Deaf children's language and literacy development and the experiences of hearing parents raising Deaf children. Unfortunately, the field has not taken a similar interest in CODA's language and literacy

development and the experiences of Deaf parents raising hearing children. Taking into cognizance that only 10% of Deaf parents have Deaf children, it implies that the majority of Deaf parents have hearing children. Identifying CODA as bimodal, bilingual, and bicultural, it is important to explore their language and literacy needs and specific early childhood interventions to ensure no language or literacy gaps.

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