

Exploring the Levels of Identity Crisis among Adolescents with Hearing Impairment in Punjab, Pakistan

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Abstract

Identity crisis means uncertainty and ambiguity in a person's definition of self and his or her being, and it prevents him or her from having an integrated character. This research attempted to explore the levels of identity crisis among adolescents with hearing impairment based on demographic variables. The study was descriptive in nature, and a survey method was used to collect data. The population of the study was hearing-impaired adolescents studying in government special education institutions Faisalabad Division of Punjab Province. A sample N=338 hearing-impaired students was selected through a cluster sampling technique. The respondents' age group was 15 to 19 years and the response rate of respondents was 76%. Data was collected through the Identity Crisis Questionnaire (ICQ) developed by Suheri & Sabbah (2014). ANOVA and t-test were used to analyze the identity crisis of hearing-impaired adolescents on the basis of different demographic variables. It was explored that majority (48.5%) of hearing-impaired adolescents having high level of identity crisis. It was found that no significant difference was found among the levels of identity crisis among hearing-impaired adolescents based on their age, number of siblings, mother's education, mother's occupation, and family type. It was also found that a significant difference was found among the level of identity crisis among hearing-impaired adolescents based on different districts, parents' socioeconomic status, level of hearing loss, their birth order, father's education, father's occupation, their gender, and living area.

INTRODUCTION

Adolescence is a critical phase of life characterized by significant physical, emotional, and social changes (Best & Ban, 2021). During this period, individuals face numerous challenges as they navigate their identities and try to establish a sense of self (Erikson, 1968). For adolescents with hearing impairment, these

challenges can be even more pronounced due to the unique difficulties they face in communication, social interaction, and self-expression (Kerongo, 2020). Identity crisis, a state of confusion and uncertainty about one's identity, can be a particularly significant issue for these individuals.

Research has shown that adolescents with hearing impairment often experience higher levels of identity crisis compared to their hearing peers (Smolen & Paul, 2023). This can be attributed to various factors, including social isolation, stigma, and limited access to role models and support systems (Chen, 2021). Furthermore, the lack of accessible mental health services and support can exacerbate these issues, leading to increased stress, anxiety, and depression (Lee et al., 2021). A study by Warner-Czyz et al. (2018) found that adolescents with hearing impairment reported lower self-esteem and more difficulties with social relationships compared to their hearing peers.

Given the significance of identity crisis among adolescents with hearing impairment, it is essential to explore the levels of identity crisis experienced by this population. This study aims to investigate the levels of identity crisis among adolescents with hearing impairment and identify the factors that contribute to these experiences. By understanding the complexities of identity crisis in this population, we can develop targeted interventions and support systems to promote positive identity development and improve mental health outcomes. Recent studies have highlighted the importance of culturally sensitive and accessible mental health services for individuals with hearing impairment (Warner-Czyz et al., 2018).

Adolescence is a crucial period in life, characterized by major emotional, physical and social development. During this time, people struggle with identity, self-definition, and belonging (Erikson, 1968). Communication hurdles, social isolation, and labeling

can all compound

the difficulties for adolescents with hearing impairment (Glickman, 2013). Identity crisis, defined by uncertainty and ambiguity in one's self-definition, can have serious consequences for wellbeing, mental health and prospects (Suheri & Sabbah, 2014).

Approximately 3.4% of the whole population is hearing-impaired in Pakistan (Pakistan Bureau of Statistics, 2017), which is a large proportion of the population, and it's a dire need to understand the different experiences of hearing-impaired adolescents. Hearing-impaired individuals often face different barriers in employment, education, and other social participation (Miles, 2003). Self-identity plays a vital role in the adolescents for their better survival in society, whether adolescents are normal or special (Soren et al., 2014). Several studies explored that the majority of hearing-impaired children are suffering with an identity crisis (Brunnberg, 2010). In Pakistan, no study was conducted to explore the prevalence of identity crisis among hearing-impaired children.

The purpose of the study was to find out the prevalence of identity crisis among hearing-impaired adolescents who were studying in government special education institutions of the Faisalabad division and compare the level of identity crisis on the basis of different demographic variables.

Objective of the study

The objectives of the study were:

To explore the level of identity crisis among hearing-impaired adolescents studying in government special education institutions, Punjab, Pakistan.

2. To find out the factors that affect the level of identity crisis among hearing-impaired adolescents studying in government special education institutions, Punjab, Pakistan.

METHODOLOGY

Research Design

The study was descriptive in nature, and a survey method was used to collect data

Population and Sample

The population of the study was hearing-impaired adolescents studying in government special education institutions in the Faisalabad Division of Punjab Province. The total population size was 446, but the response was received from 338 respondents, which was 76% response rate. A sample N=338

hearing-impaired

adolescents (n=197 boys and n=141 girls) was selected through cluster sampling technique. The respondents' age group was 15 to 19 years.

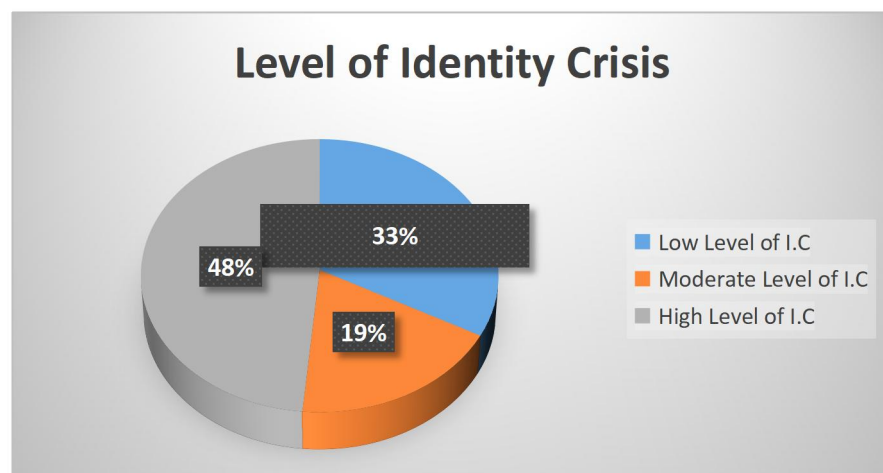
Research Instrument

The Identity Crisis Questionnaire (ICQ), developed by Suheri & Sabbah (2014), was used to collect the data from respondents. The questionnaire (ICQ) is a 05-point Likert scale, having thirty-three items and four constructs. The scale was translated into the Urdu language and validated by five field experts. Pilot testing was also done at the government special education center in Jhang, and the Cronbach Alpha reliability was 0.845. The cut point scores of the tool were: total mean score < 1.66 shows a low level of identity crisis, total mean score between 1.67 to 2.33 shows a moderate level of identity crisis, and total mean score > 2.34 shows a high level of identity crisis.

RESULTS

Figure 1

Level of Identity Crisis among Hearing Impaired Adolescents



The above figure indicates that the majority of the respondents (48%) were with a high level of identity crises, (19%) were with a moderate level of identity

crisis and 33% hearing hearing-impaired adolescents had a low level of identity crisis.

Table 1

Frequency distribution of respondents based on the living district

Description	Frequency	Percentage	Mean
Jhang	81	24.0	3.2301
Chiniot	29	8.6	3.7200
Toba Tek Singh	64	18.9	3.7107
Faisalabad	164	48.5	3.8938
Total	338	100.0	

The above-mentioned table indicates that the majority of respondents belonged to district Faisalabad, and the least respondents belonged to district Chiniot. The mean value of the table indicated that those hearing-

impaired adolescents who reside in Faisalabad district have a higher level of identity crisis, and those who reside in Jhang district have a lower level of identity crisis.

Table 2

Comparison of the level of identity crisis of hearing-impaired adolescents with their living districts

	df	Mean Square	F	Sig
Between Groups	3	8707.577	20.395	.000
Within Groups	334	426.945		
Total	337			

The above table indicates that the significance value is ($<.05$), which means there is a highly significant difference found among the levels of identity crisis of hearing-impaired adolescents based on different

districts. It is also indicated that different districts can affect the level of identity crisis of adolescents with hearing impairment.

Table 3

Frequency distribution of respondents based on their gender and living area

Gender	f	Percentage	Living Area	f	Percentage
Male	197	58.3	Rural	108	32.0
Female	141	41.7	Urban	230	68.0
Total	338	100.0	Total	338	100.0

The above table explains that the majority of the respondents were male and most of the respondents were living in urban areas.

Table 4

Comparison of the level of identity crisis of hearing-impaired adolescents with their gender

Status	N	Mean	Df	t	Sig
Male	197	118.8731	338	-2.682	.008
Female	141	125.4326			

The above table indicates that the significance value is ($<.05$), which means there is a significant difference found among the levels of identity crisis of hearing-impaired adolescents based on their gender. It is also indicated that the gender (male, female) of hearing-

impaired adolescents can affect their level of identity crisis. The above table also indicates that females have a higher level of identity crisis compared with male hearing-impaired adolescents.

Table 5

Comparison of the level of identity crisis of hearing-impaired adolescents with their living area

Status	N	Mean	Df	t	Sig
Rural	108	113.8519	336	-4.490	.000
Urban	230	125.2522			

The above table indicates that the significance value is ($<.05$), which means there is a significant difference found among the levels of identity crisis of hearing-impaired adolescents based on their living area. It is also indicated that the living area (rural, urban) of

hearing-impaired adolescents can affect their level of identity crisis. The above table also indicates that hearing-impaired adolescents residing in urban areas have a higher level of identity crisis compared with hearing-impaired adolescents living in rural areas.

Table 6

Frequency distribution of respondents based on their family type and number of siblings

No of Siblings	f	Percentage	Family Type	f	Percentage
1 to 2	47	13.9	Nuclear Family	137	40.5
3 to 4	164	48.5	Joint Family	201	59.5
5 to 6	127	37.6			
Total	338	100.0	Total	338	100.0

The above table indicates that majority of the respondents had 3 to 4 siblings and also majority of respondents had resided in joint family system.

Table 7

Frequency distribution of respondents based on their birth order

Description	Frequency	Percentage	Mean
1st Child	103	30.5	3.5558
2nd to 3rd	179	53.0	3.8197
4th to 5th	50	14.8	3.5667
Last Child	6	1.8	2.8788
Total	338	100.0	

The above table shows that the majority of the respondents had 2nd to 3rd birth order, and the participation was very low of respondents had the last position in their birth order. The mean value of the table indicated that Hearing-impaired adolescents

whose birth order was 2nd to 3rd have a higher level of identity crisis, and those hearing-impaired adolescents who were the last birth order number have a lower level of identity crisis.

Table 8

Comparison of the level of identity crisis of hearing-impaired adolescents with their birth order

	Df	Mean Square	F	Sig
Between Groups	3	3473.432	7.329	.000
Within Groups	334	473.959		
Total	337			

The above table indicates that the significance value is ($<.05$), which means there is a highly significant difference found among the levels of identity crisis of hearing-impaired adolescents based on their birth

order. It is also indicated that the birth order of hearing-impaired adolescents can affect their level of identity crisis.

Table 9

Frequency distribution of respondents based on their parent's education

Father Education	f	Percentage	Mean	Mother Education	f	Percentage
Illiterate	56	16.6	3.9091	Illiterate	123	36.4
Under Matric	150	44.4	3.7499	Under Matric	133	39.3
Matric to Intermediate	73	21.6	3.5322	Matric to Intermediate	65	19.2
Bachelor to Master	53	15.7	3.5620	Bachelor to Master	17	5.0
Above Master	6	1.8	2.9242	Above Master	0	0
Total	338	100.0		Total	338	100.0

The above table shows that the majority of fathers and mothers of respondents were under matric, and the participation was very low of respondents who had their father above maters degree and their mother had bachelor's to master's qualification. The mean value of

the table indicated that those hearing-impaired adolescents whose fathers were illiterate have a higher level of identity crisis, and those whose fathers' qualifications were above a master's degree have a lower level of identity crisis.

Table 10

Comparison of the level of identity crisis of hearing-impaired adolescents with their father's education

	Df	Mean Square	F	Sig
Between Groups	4	2565.368	5.391	.000
Within Groups	333	475.859		
Total	337			

The above table indicates that the significance value is ($<.05$), which means there is a highly significant difference found among the levels of identity crisis of hearing-impaired adolescents based on their father's

education. It is also indicated that the father's education of hearing-impaired adolescents can affect the level of identity crisis of adolescents with hearing impairment.

Table 11

Frequency distribution of respondents based on their father's and mother's occupation

Father Occupation	f	Percentage	Mean	Mother Occupation	f	Percentage
Laborer	122	36.1	3.7198	House Mother	261	77.2
Businessman	133	39.3	3.7482	Laborer	34	10.1
Govt. Job	31	9.2	3.3128	Govt. Job	11	3.3
Private Job	34	10.1	3.5856	Private Job	18	5.3
Died	18	5.3	3.8131	Died	14	4.1
Total	338	100.0		Total	338	100.0

The above table shows that the majority of fathers of respondents were businessmen and mothers of the respondents had a housewife profession. The mean value of the table indicated that those hearing-

impaired adolescents whose fathers died have a higher level of identity crisis, and those whose fathers were doing a government job have a lower level of identity crisis.

Table 12

Comparison of the level of identity crisis of hearing-impaired adolescents with their fathers' occupation

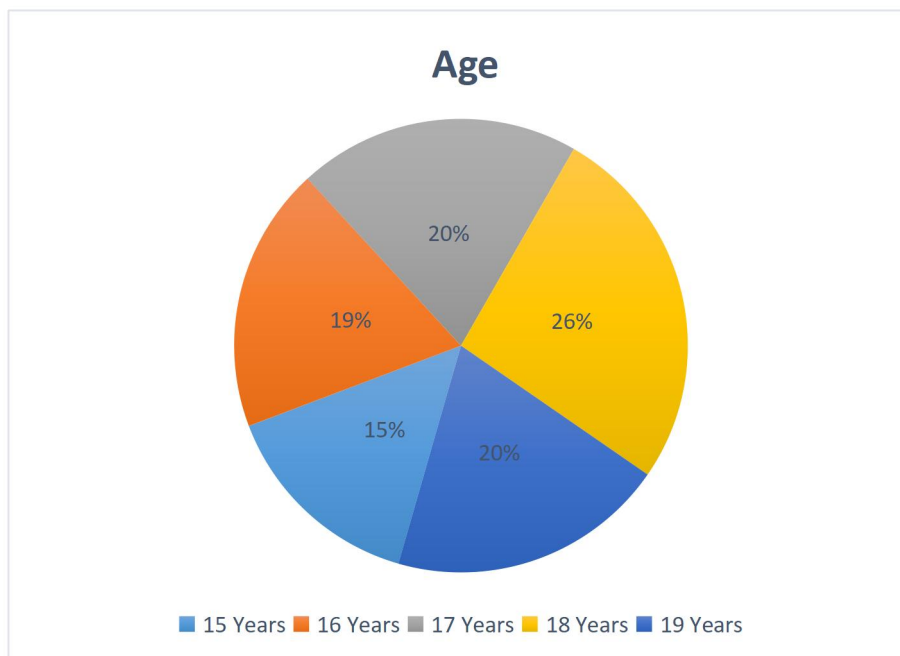
	Df	Mean Square	F	Sig
Between Groups	4	1526.188	3.125	.015
Within Groups	333	488.341		
Total	337			

The above table indicates that the significance value is ($<.05$), which means there is a significant difference found among the levels of identity crisis of hearing-impaired adolescents based on their fathers'

occupation. It is also indicated that the father's occupation of hearing-impaired adolescents can affect the level of identity crisis of adolescents with hearing impairment.

Figure 2

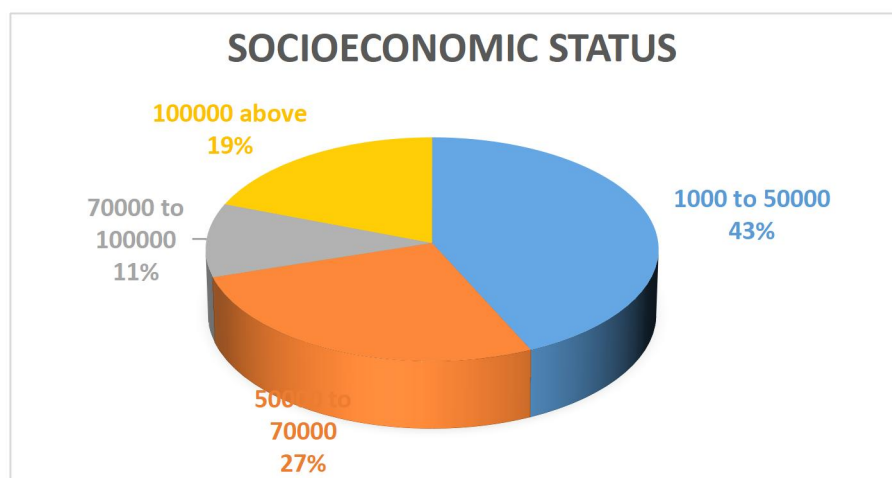
Frequency distribution of respondents based on their age



The above figure shows that the majority of the respondents age were 18 years and the participation of respondents having aged 15 years was lowest.

Figure 3

Frequency distribution of respondents based on the socioeconomic status of their parents



The above figure shows that the majority of the parents of respondents earned a monthly income up to fifty thousand, and those who earned 70k to 100k monthly, their participation was lowest.

Table 13

Comparison of the Mean Values of Socioeconomic Status

Variable	Mean			
	< 50k	50k to 70k	70k to 100k	100k >
Socio-Economic Status	3.7073	3.6630	3.3005	3.8793

The above table indicates that those hearing-impaired adolescents whose guardians' monthly income was above 100k have a higher level of identity crisis, and

those whose guardians' monthly income was 70k to 100k have a lower level of identity crisis.

Table 14

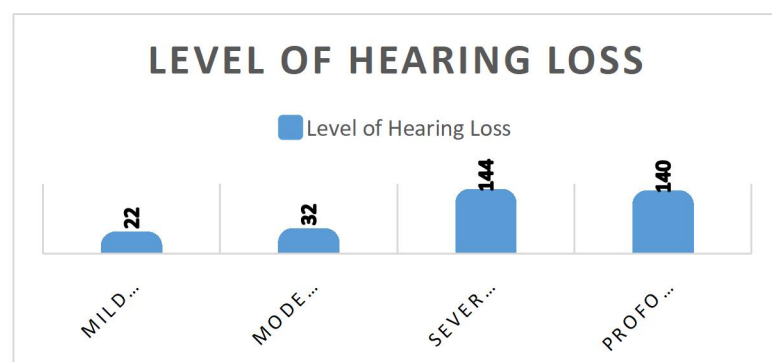
Comparison of the level of identity crisis of hearing-impaired adolescents with their parents' socioeconomic status

	Df	Mean Square	F	Sig
Between Groups	3	2864.723	5.975	.001
Within Groups	334	479.426		
Total	337			

The above table indicates that the significance value is ($<.05$), which means there is a highly significant difference found among the levels of identity crisis of hearing-impaired adolescents based on the

socioeconomic status of their parents. It is also indicated that the socioeconomic status of parents can affect the level of identity crisis of adolescents with hearing impairment.

Figure 4

Frequency distribution of respondents based on their level of hearing loss

The above figure indicates that the majority of the respondents had severe hearing loss, and the participation of respondents having a mild level of hearing loss was lowest.

Table 15

Comparison of the Mean Values of level of hearing loss

Variable	Mean			
	Mild Hearing Loss	Moderate Hearing Loss	Severe Hearing Loss	Profound Hearing Loss
Level of hearing loss	2.7590	3.6061	3.6014	3.9348

Hearing-impaired adolescents with a profound level of hearing loss have a higher level of identity crisis, and

hearing-impaired adolescents with a mild level of hearing loss have a lower level of identity crisis.

Table 16

Comparison of the level of identity crisis of hearing-impaired adolescents with their level of hearing loss

	Df	Mean Square	F	Sig
Between Groups	3	10458.335	25.432	.000
Within Groups	334	411.220		
Total	337			

The above table indicates that the significance value is ($<.05$), which means there is a highly significant difference found among the levels of identity crisis of hearing-impaired adolescents based on their level of hearing loss. It is also indicated that the level of hearing loss can affect their identity crisis.

Findings and Conclusion

This study aimed to explore the levels of identity crisis among adolescents with hearing impairment in the Faisalabad Division of Punjab Province, Pakistan. By employing a descriptive survey method and utilizing

the Identity Crisis Questionnaire (ICQ) developed by Suheri and Sabbah (2014), data were gathered from 338 hearing-impaired students aged 15 to 19 years. The analysis of the data through ANOVA and t-tests revealed a nuanced picture of how various demographic variables are associated with the experience of identity crisis among this vulnerable group.

The findings indicated that certain demographic variables, namely, age, number of siblings, mother's education, mother's occupation, and family type did

not significantly affect the levels of identity crisis. This suggests that these factors may not play a pivotal role in shaping the self-concept or identity development of hearing-impaired adolescents, at least within the studied population.

However, other variables such as district, parents' socioeconomic status, level of hearing loss, birth order, father's education, father's occupation, gender, and area of residence were found to have a significant impact on the identity crisis experienced by these adolescents. These results underscore the complexity of identity formation among hearing-impaired individuals and highlight the importance of environmental, social, and economic contexts in shaping their psychological and emotional development.

Discussion

The findings of this study highlight a critical psychological issue faced by adolescents with hearing impairment: identity crisis. Erikson (1968) conceptualized identity crisis as a central developmental task during adolescence, emphasizing the role of social and environmental factors in shaping a coherent sense of self. The present study's finding—that 48.5% of hearing-impaired adolescents experienced a high level of identity crisis—is alarming and supports previous research suggesting that adolescents with disabilities are more vulnerable to identity confusion due to communication barriers, social exclusion, and limited access to peer interactions (El-Asam et al., 2023).

Interestingly, no significant difference in identity crisis was found based on age, number of siblings, mother's education and occupation, or family type. This aligns with the findings of (Torres et al., 2017), who suggested that identity development is influenced more by psychosocial and contextual factors than by static demographic variables. However, the significant differences found in identity crisis levels across gender, living area, districts, birth order, parental socioeconomic status, father's education and occupation, and level of hearing loss suggest a more nuanced influence of environmental and socio-cultural conditions.

The gender-based difference indicates that male and female adolescents may experience identity development differently, potentially due to culturally constructed gender roles and expectations. Moreover, the influence of district and living area highlights the disparities in access to educational and social support services, which are crucial for identity formation in adolescents with hearing impairment (Most et al., 2012). The level of hearing loss also significantly impacts identity, as more profound impairments often lead to greater communication challenges and social isolation, which in turn affect self-concept (Privado et al., 2019).

The fact that father's education and occupation showed a significant relationship with identity crisis, while mother's did not, may reflect traditional family dynamics in Pakistani society, where the father's role often dominates in determining family status and

opportunities (Ali et al., 2011). This cultural context could influence how adolescents perceive themselves and their place in society.

Recommendations

In light of the findings, it becomes evident that targeted psychosocial support and context-specific interventions are essential for mitigating identity-related challenges in this population. Educational policymakers, special educators, counselors, and families must consider these influential variables when designing inclusive educational programs and mental health services. Further research is recommended to explore causal relationships and develop comprehensive identity-support frameworks tailored to

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- adolescents with hearing impairment in diverse cultural and socio-economic settings.
- In conclusion, the study emphasizes the importance of recognizing the diverse factors that contribute to identity crisis in hearing-impaired adolescents. Interventions must address not only the hearing impairment itself but also the broader social, cultural, and economic contexts. Efforts should include inclusive education practices, targeted counselling services, and community awareness programs to promote positive identity development in this vulnerable population.
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