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Keywords: parents, representations, deafness and psychological suffering.

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Social Representations of Deafness and Psychological Suffering in Parents of Deaf Children

Sébastien Yougbare [α], Kouami Adansikou [σ] & Zinsou Selom Degboe [ρ]

Abstract- The core problematic of the present study is the relationship between the deaf child and the hearing parents. The objectives of the study are to describe the social representations of deafness and psychological suffering among parents of deaf children, and to establish the link between their suffering and these social representations. It is a cross-sectional study conducted from August 15, 2011 to January 16, 2012 in the ENT department (Oto-Rhino Laryngology) of the CHU (Teaching hospital) Sylvanus Olympio and at the school for the deaf EPHATA in Lomé. A sample of 127 participants was obtained using the all-comers method. The data were collected using the semi-structured interview. The results show that the psychological suffering of parents of deaf children is presented on three spheres: the painful experience of communication between the hearing parents and the deaf child, whose concern about the deprivation of their child's oral communication is more noted at 74.80%.; the parents' experience of the child's disability is more marked by anxiety about the child's future (74.02%) and relationship difficulties (44.88% of the parents), with 44.88% of parents saying that they are or think they are being made fun of by the people around them. On the other hand, 63.78% of parents consider deafness as an act of witchcraft and 29.92% of them have an organic conception of deafness. Overall, we can say that deafness is a handicap that shakes not only the psychological system of the individual affected by this disorder, but also that of their parents. Thus, further studies will be necessary to explore other aspects, especially the effect of deafness on early mother-child interactions, on inter-sibling relationships, etc.

Keywords: parents, representations, deafness and psychological suffering.

I. Introduction

Having a child is like a journey that never goes as planned. This is arguably even more true for healthy, able-bodied parents who give birth to a child with a disability. WHO (1988) definition of disability is based on three main concepts: deficiency, inability and disadvantage. The United Nations' umbrella health institution specifies that deficiency is "any loss of substance or alteration of a psychological, physiological or anatomical function or structure" (WHO, 2011). This clarification on the deficiency concept leads us to quote deafness which is any decrease in hearing acuity, regardless of its degree of severity as being a deficiency. The possible causes are numerous: hereditary ear disease, bacterial or viral infection, intoxication, sound trauma, otitis, etc.

Thus, in the case of deafness, the inability is audio-vocal communication (to varying degrees) and the social disadvantage can vary; we will quote as examples: access to culture and insertion into the professional world. Perceived as a communication disability, deafness constitutes an emblematic figure of otherness that challenges society in its capacity to welcome, listen to and understand the difference. The pejorative representations (Jodelet, 1984) of deafness are observable in the ordinary use of language. Thus, a commonplace expression such as "dialogue of the deaf" reminds us that in the social imagination, deafness is synonym of failure, overwhelming conflict and non-communication. This expression implies the dubious idea that deaf people cannot dialogue. This negative connotation has very old origins. It is not indifferent that in classical Greek, the term logos means both reason and speech. The ancient definition of man as an "animal endowed with *logos*" places *de facto* the deaf-mute in a situation of radical otherness. Numerous testimonies of deaf people and their families show that the difficulty in mastering a language explains in large part this psychological ill-being (Gueydan, 2015).

The inability to acquire a language in a natural and spontaneous way in order to communicate leads to multiple difficulties for deaf children, which can cause psychological suffering (Millet, 2001). A study by the "Deafness" subgroup of the "Disability and School Inclusion" working group of the Scientific Council of the French Ministry of National Education revealed that on the perceptions and behaviours related to the health of deaf people, nearly half of the deaf people interviewed said they were in psychological distress, three times more than in the general population (UNISDA, 2011).

As for suicide attempts, they concern 13.9% of the deaf compared to 5.5% of the average French people.

These difficulties do not spare hearing parents with a deaf child. Indeed, the majority of deaf children are born to hearing parents. These parents find themselves projected into a world they know nothing about, that of deafness. However, one may wonder whether learning that our child is deaf is as easy as learning that our travel destination has been changed. As human beings, we react according to the

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representations we make of our environment (Dethorre, 1997). According to her, "deafness sends back to the speaker the sensation of an absence, a partial emptiness in him-/herself, comparable to the loss of one of their parts (speech and by extension, language) leading to a significant narcissistic suffering."

Relying on the psychoanalytical theories and some works of psychologists, Diderot (2004) got to the conclusion that there is no psychology of the deaf nor psychopathology of the deaf. The deafness disability is, however, particular since it is not seen. And yet, a trauma without wound, without visibility can prove to be all the more pathogenic that there is no narcissistic overinvestment of the suffering organ. But because of their organic damage and what this causes as a sideration and possible trauma in the family of the deaf, as well as the way in which the disability will be managed by the medical and educational teams of the family, all this generates for the deaf, a psychological potentiality or a borderline potentiality by building a false self which may break down with time. In a work of psychoanalytical family therapy engaged with a family, Dorey (2002) found that the inaugural and generally traumatic announcement of deafness provokes an experience of break in the experience of relational continuity; it staggers the emergence of a gap opening up to the establishment of intersubjective relations and initiates a defensive return to the concrete character of the undifferentiated link.

Guillon (2011) found that certain social representations of deaf children's parents, on all issues concerning deafness, remain. Indeed, she could see, for example, that sign language was still considered by some parents as a barrier language, but also as a "divine" language.

In a study conducted in Burkina Faso, Bourcheix (2009) highlighted the representation of deafness, communication and integration of the deaf. The anthropological approach allowed him to get to social, psychological and cultural results of deaf people in their daily life. Deaf children are considered genius children; the parents present their child as a victim of God's will, meningitis or a congenital disease. Deafness is caused by a spell cast against the family or a curse, by witchcraft, which is in fact a warning, the punishment of the surrounding against the parents. He noted the reactions of fear, the feeling of rejection from society, the fear of the future of their child. This anthropological conception of deafness supports the conception of misfortune logic described by Sow (1971) in the African dynamic psychology. Parents of deaf children face stressors unknown to parents without children with a disability or chronic illness (Jutras *et al*. 2005). Beyond the formal diagnosis of deafness (Marschark, 1996), communication stress is emphasized by parents (Greenberg *et al*., 1997). Throughout their lives, they will be subject to distressing experiences: rejection of their child by peers, difficulty for the child to participate in sports or social activities, intense parental supervision, financial costs, lack of time and energy for themselves and their families (Henggeler *et al*., 1990).

This booming literature on the representation of deafness on family relationships and observations of parents' attitudes at EPHATA, a care school for deaf children, motivated us to conduct this study. These attitudes can be broken down into attitudes of abandonment and overprotection. Indeed, some parents leave their very young child at school without asking for news, without a sign from them during a whole term or even a school year. On the other hand, others are determined to do what is best for their child, by keeping appointments and coming early to pick their child up. This study examines the factors that may explain, in a general way, the psychological suffering of hearing parents of deaf children.

Thus, the objectives of the study are to describe the social representations of deafness and psychological suffering among parents of deaf children, to establish the link between their suffering and these social representations.

II. Method

a) Study framework

This was a prospective, cross-sectional study conducted in the ENT (Ear, Nose and Throat) department of the Sylvanus Olympio Teaching Hospital and at the school for the deaf (EPHATA) of the Assemblies of God Church in Lomé. The ENT Department is located in the north-east of the Sylvanus Olympio Teaching Hospital in Lomé. The latter is the most important hospital in Togo in terms of health. It receives an average of seventeen thousand visits per year. It is public with social character. It is located in the west of Lomé in the Tokoin district on the plateau. It is limited in the south by the Tokoin registry office, in the north by the Tokoin Seminary post office, in the east by the hospital pharmacy and in the west by the Alpha school. The ENT department receives annually, according to reports available at the secretariat of the department, 72675 patients.

The EPHATA school is located in Djidjolé district of Lomé, along the street opposite the gendarmerie of the said district. The EPHATA school is a specialized confessional school. It focuses on the education of deaf children in sign languages. The education provided is based on the national program of primary education. Some of the deaf children are also accommodated in the school. The school provides classes for deaf children according to the national curriculum of Togo. Parents of deaf children also come to learn sign languages in order to better communicate with their child. At the said school, speech therapy sessions are also conducted.

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b) Data Collection and Analysis Procedures

This cross-sectional research is qualitative in nature. The participants in the study are the hearing parents of children between the ages of 3 and 10 years who have been diagnosed with deafness. They were recruited using the *ad'hoc* method. This resulted in a sample of 127 parents with a female/male sex ratio of 17.17. These participants were subjected to a semi-directed interview guide that was validated beforehand by a group of four clinical psychologists. The study was conducted in accordance with the basic rules of ethics relating to information, anonymity, confidentiality and verbal informed consent of the participants in strict compliance with the Declaration of Helsinki according to which no intervention likely to alter the dignity, integrity and right to privacy of the respondents should be used. Content analysis in its logico-semantics form was used to exploit the data from the interviews. Statistical tests such as the chi-square (χ^2) and the contingency coefficient (*C*), which are relationship indices that can provide information on the existence and intensity of relationships between qualitative variables, were used.

III. Results

a) Socio-demographic data

The age of the participants is between 24 and 55 years with a mean of 39 years and a standard deviation of 1.95 and a sex ratio of 17.14. Single people represent 15.75% (n = 02), married people represent 85.04% (n = 108), against 13.39% of divorced people (n = 17). Among them, 33.86% (n = 43) are illiterate, 42.52% (n = 54) have a basic level of study, followed by 22.05% (n = 28) of secondary school and 2 participants have been able to do higher study or 01.57% of the sample. In terms of religious affiliation, 53.54% were practicing traditional African religions; 33.07% (n =42) were Christians and 15.75% (n =20) were Muslims.

b) Study variables

i. *Degree of deafness*

The data show that the sample is composed of 40.16% (n = 51) of subjects whose children suffer from profound deafness, 31.49% (n = 40) of children with severe deafness, followed by 24.40% (n = 31) whose children have moderate deafness. Parents whose offspring are mildly deaf represent only 3.94% of the participants, i.e. (n = 05).

ii. *Representations of deafness*

For social representation of deafness variable, the hearing parents who think that deafness is an act of witchcraft predominate with 63.78%, followed by those who think that they are subject to persecution with 52.76%; those who explain it by an organic conception are at 29.92% and those who associate it with a divine will represent 27.56%. Some of them (14.17%) are convinced that they are undergoing a divine punishment and 11.81% assume that it is a curse. It should be noted that two or three representations can exist in the same parent of a deaf child.

iii. *Painful experience of parent-deaf child communication*

The painful experience of communication between hearing parents and deaf children can be summarized as 74.80% of worries about the deprivation of oral communication, 59.05% of worries about the limitation of oral communication, 35.43% of discomfort with gestural communication and 18.89% of difficulty in understanding the child's requests.

iv. *Relational difficulties*

With regard to relational difficulties due to the deafness of their child, the frequency of the items in this variable of the study is as follows: 44.88% of the parents feel that they are teased by their family and friends, 25.98% admit to conflicts about the child within the couple, 23.62% say that they are rejected by their family and friends and in 14.17% of the cases, deafness was mentioned as the source of divorce between the parents.

v. *Experiencing the child's disability*

The hearing parents experience the child's disability in terms of: anxiety about the child's future (74.02%); feelings of powerlessness (70.87%); shame (68.50%); pity (66.14%); narcissistic injury (54.33%); devaluation (44.88%), guilt (41.73%) and insecurity (08.66%). A significant proportion of these parents, 18.90%, deny the diagnosis.

Correlation between painful communication experience, relationship difficulties, parent-child disability experience and degree of deafness

- Painful experience of communication and degree of deafness

Table 1: Relationship between painful communication experience and degree of deafness

Painful communication experience	Degree of deafness			
	Deep	Severe	Average	Low
Worry about Deprivation of oral communication	29 (22.83%)	40 (31.50%)	25 (19.69 %)	01 (0.79%)
Worry about the limitation of of oral communication	33 (25.98%)	22 (17.33%)	15 (11.81%)	05 (3.94%)

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Discomfort with gestural communication	02 (1.57%)	09 (7.08%)	30 (23.62%)	04 (3.14%)
Difficulty in understanding the child's requests	08 (6.30%)	10 (7.84%)	04 (3.15%)	02 (1.57%)
$\chi^2_{cor} = 42.53 > \chi^2_{lu} = 16.91$	$C = 0.38$	ddl= 09	DS ($p < .05$)	

The results in Table 1 show that the difference in χ^2 is significantly positive at .05 threshold, which confirms the existence of a medium intensity relationship ($C = 0.39$) between the painful experience of parent-child communication and the degree of their child's deafness.

- Relational difficulties and degree of deafness

Table 2: Link between relationship difficulties and degree of deafness

Relational difficulties	Degree of deafness			
	Deep	Severe	Average	Low
Laughter from surrounding	31 (24.41 %)	13 (10.24 %)	10 (7.84 %)	03 (2.36 %)
Conflicts within the couple	05 (3.94 %)	07 (5.51 %)	20 (15.75 %)	01 (0.79 %)
Rejection from the surroundings	05 (3.94 %)	18 (14.17 %)	05 (3.94 %)	02 (1.57 %)
Divorce	10 (7.84 %)	02 (1.57 %)	04 (3.15 %)	01 (0.79 %)
$\chi^2_{cor} = 37.51 > \chi^2_{lu} = 16.91$	$C = 0.46$	ddl = 09	DS ($p < .05$)	

The results of this table allow us to conclude that there is a significant relationship ($\chi^2_{cal} = 37.51 > \chi^2_{lu} = 16.91$) and average ($C = 0.46$) at .05 threshold between the relationship difficulties of hearing parents and the degree of their child's deafness.

- Child's experience of disability and degree of deafness

Table 3: Relationship between the child's disability experience and degree of deafness

Experiencing the child's disability	Degree of deafness			
	Deep	Severe	Average	Low
Anxiety about the child's future	30 (23.62 %)	35 (27.56 %)	24 (18.90 %)	05 (3.94 %)
Feeling of powerlessness	32 (25.20 %)	29 (22.83 %)	26 (20.47 %)	03 (2.36 %)
Shame	29 (22.83 %)	25 (19.69 %)	31 (24.41 %)	02 (1.57 %)
Pity	24 (18.90 %)	45 (35.43 %)	14 (11.02 %)	01 (0.79 %)
Narcissistic injury	19 (14.96 %)	20 (15.75 %)	25 (19.69 %)	05 (3.94 %)
Feeling of devaluation	20 (15.75 %)	18 (14.17 %)	15 (11.81 %)	04 (3.15 %)
Guilt	17 (13.39 %)	16 (12.60 %)	18 (14.17 %)	02 (1.57 %)
Fits of weeping	09 (7.10 %)	11 (8.66 %)	06 (4.72 %)	02 (1.57 %)
Denial of diagnosis	02 (1.57 %)	05 (3.94 %)	14 (11.02 %)	03 (2.36 %)
Feeling of insecurity	01 (0.79 %)	03 (2.36 %)	04 (3.14 %)	03 (2.36 %)
$\chi^2_{cor} = 40.60 > \chi^2lu = 40.11$	$C = 0.25$	ddl = 27	DS = .05	

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The results in Table 3 show that $\chi^2_{cal} = 40.60 > \chi^2_{lu} = 40.11$ at .05 threshold; the relationship is significant. In addition, the contingency coefficient ($C = .25$) suggests that there is a moderate relationship between the emotional experiences of hearing parents and the degree of deafness.

Correlation between the painful experience of communication, relational difficulties, the child's disability experience and the hearing parents' representation of deafness

- Painful experience of parent-deaf child communication and parents' representation of deafness

Table 4: Relationship between painful experiences of parent-deaf child communication and parents' representation of deafness

Hearing parent representations	Painful experience of parent-deaf child communication			
	Concern/limitation of oral communication	Concern/deprivation of oral communication	Discomfort with gestural communication	Difficulty in understanding
Act of witchcraft	31 (24.41 %)	26 (20.47 %)	15 (11.81 %)	09 (7.08 %)
Persecution	24 (18.90 %)	31 (24.41 %)	11 (8.66 %)	01 (0.79 %)
Divine Will	04 (3.15 %)	22 (17.32 %)	05 (3.94 %)	04 (3.15 %)
Curse	05 (3.94 %)	04 (3.14 %)	03 (2.36 %)	03 (2.36 %)
Organic conception	10 (7.84 %)	16 (12.60 %)	07 (5.51 %)	05 (3.94 %)
Punishment	01 (0.79 %)	08 (6.30 %)	04 (3.14 %)	05 (3.94 %)
$\chi^2_{cor} = 22.76 < \chi^2_{lu} = 24.99$ $C = 0.28$ ddl = 15 DNS ($p = .05$)				

The results in Table 4 show that at the threshold $p = .05$, $\chi^2_{cal} = 22.76 < \chi^2_{lu} = 24.99$, the link is not significant. This confirms that there is no link between the painful experience of parent-deaf child communication and their representations of the additional deafness.

- Relational difficulties and representations of deafness

Table 5: Link between relational difficulties and representations of deafness

Representations of deafness	Relational difficulties			
	Laughter from surroundings	Conflicts within the couple	Rejection from the surroundings	Divorce
Act of witchcraft	25 (19.69 %)	28 (22.04 %)	17 (13.39 %)	11 (8.66 %)
Persecution	31 (24.41 %)	11 (8.66 %)	24 (18.90 %)	01 (0.79 %)
Divine Will	20 (15.75 %)	04 (3.14 %)	07 (5.51 %)	05 (3.94 %)
Curse	04 (3.14 %)	03 (2.36 %)	04 (3.14 %)	03 (2.36 %)
Organic conception	07 (5.51 %)	16 (12.60 %)	10 (7.84 %)	02 (3.15 %)
Punishment	08 (6.30 %)	01 (0.79 %)	05 (3.94 %)	04 (3.14 %)
$\chi^2_{cor} = 31.30 > \chi^2lu = 24.99$ $C = 0.33$ ddl =15 DS ($p < .05$)				

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The results in Table 5 show that $\chi^2_{cal} = 31.31 > \chi^2_{lu} = 24.99$ at the threshold $p = .05$. The link is therefore significantly positive and of average intensity ($C = 0.33$) at this threshold. We conclude that there is a link between the representations of deafness and relational difficulties.

- The child's experience of disability and representations of deafness

Table 6: Relationship between representations of deafness and emotional experience

Experience of the child's disability	Representations of deafness					
	Act of witchcraft	Persecution	Divine Will	Curse	Organic conception	Punishment
Anxiety about the child's future	07 (5.51 %)	25 (18.69 %)	04 (3.14 %)	01 (0.79 %)	12 (9.45 %)	02 (3.15 %)
Pity	12 (9.45 %)	05 (3.94 %)	08 (6.30 %)	01 (0.79 %)	01 (0.79 %)	02 (3.15 %)
Shame	06 (4.72 %)	10 (7.84 %)	01 (0.79 %)	09 (7.10 %)	06 (4.72 %)	11 (8.66 %)
Guilt	05 (3.94 %)	10 (7.84 %)	02 (3.15 %)	02 (3.15 %)	06 (4.72 %)	01 (0.79 %)
Narcissistic injury	15 (11.81 %)	02 (3.15 %)	10 (7.84 %)	03 (2.36 %)	01 (0.79 %)	03 (2.36 %)
Denial of diagnosis	10 (7.84 %)	15 (11.81 %)	01 (0.79 %)	02 (3.15 %)	02 (3.15 %)	02 (3.15 %)
Powerless	12 (9.45 %)	01 (0.79 %)	05 (3.94 %)	01 (0.79 %)	10 (7.84 %)	01 (0.79 %)
Insecurity	03 (2.36 %)	06 (4.72 %)	04 (3.14 %)	01 (0.79 %)	01 (0.79 %)	01 (0.79 %)
Devaluation	12 (9.45 %)	02 (3.15 %)	02 (3.15 %)	02 (3.15 %)	02 (3.15 %)	(3.14 %)
Fits of weeping	05 (3.94 %)	01 (0.79 %)	02 (3.15 %)	02 (3.15 %)	01 (0.79 %)	02 (3.15 %)
$\chi^2_{cor} = 98.28 > \chi^2_{lu} = 61.65$	$C = 0.49$	ddl = 45	DS ($p < .05$)			

The results in the table above show that $\chi^2_{cal} = 98.28 > \chi^2_{lu} = 61.65$ au $p = .05$. The relationship is therefore significant at this threshold. Moreover, the calculated contingency coefficient $C = 0.49$. This suggests that there is an average relationship between the representations made by the hearing parents of deafness and their experience of the child's disability.

IV. Interpretations

A child in general and more particularly an African child is a trigger for upheavals in the group from which he or she was born. By his/her arrival, the gives his/her parents new status as father and mother. The child's presence is thought of in the continuity of a lineage to which he/she must participate in one way or another in their recognition in the social landscape.

Before his/her birth, the parents project on their child something of the image that one has of oneself, that one hopes to achieve or they expect from the child a true restoration of themselves. This image of the constructed child, idealizes itself in the conscience of the parents. Having the desire that their child be the fulfillment of their dreams, they give themselves, especially the mothers, to a whole series of manifestations which can be manifestations of the type of this construction in time, or to other elements, a meaning insofar as by looking at the child, they hallucinate these desires. However, the announcement of the deafness compromises all their desires (fantasies). The parents see a part of themselves removed.

Referring to the psychoanalytical or psychodynamic theory of Freud, more precisely of his second topical, the "Overself" is the internalization of the law, the moral conscience; it says what is good and what is bad. It is also the ideal of the "Ego", the model of the character to become. Indeed, the hearing parents of a deaf child live in a society, in a social group where cultural norms have been internalized. This integration of cultural norms leads them to define a normality in relation to themselves. That is to say, they consider themselves as a model and it becomes difficult to find reference points when faced with others who are considered different. In order to enter into a true relationship, one in which we do not deal with a body but with a person, the other person must exist for me

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and I must recognize his or her otherness. And the other side of this recognized otherness is the identity, the possibility of recognizing oneself in the other and of recognizing the other as similar to oneself despite this difference.

The announcement of the children's deafness puts the hearing parents in a situation of frustration linked to the image they make of the deafness of the deaf child in relation to the values and the sociocultural standards. This frustration leads to a conflict between the different instances of the psyche, a conflict between the "Ego", the "Overself" in relation to the "Reality". For Freud (1988), the "id" is the pole of impulsive representatives where the instinctual desires are located. This conflict also results between the "id" and the "reality". The ideal so much wanted by the parents which is the request of the unconscious (id), is confronted with the "Reality" which is the deafness (disability) present in the child. To find oneself in front of a handicapped child is to enter into the dissatisfaction of one's desire as a father or mother. The deaf child does not represent the ideal so much wanted, which is for them a narcissistic attack.

In fact, mothers expect behaviours from their children that do not happen, they expect a reaction when they speak, when they pronounce the name of their child, etc. The non-answer of the child causes frustration to the mother. To accept the deaf child as similar to oneself is to accept deafness with all its consequences. To reject deafness as a difference is to reject the child who is, in fact, a continuity of one's own body or image. The experience of the child's disability collected in this study is in fact the observable manifestations of these conflicts in the parents. Faced with this situation, the psyche is unable to carry out its usual task, which is to integrate the elements of the external world. To fight against this conflict, the psyche adopts as a defense mechanism the denial of the reality; this is expressed in the hearing parents by the refusal of the deafness diagnosis. When we meet a person with a disability, we recognize a distortion, which is not part of the representations that we have constructed for ourselves (in the Overself). These representations distort, clash with their representations of the normal and the real. When parents are told that their child is deaf, they find themselves "speechless". Faced with a child who cannot hear, they no longer know how to communicate. They often give up speaking, because they are no longer heard, and they see no reason to continue using it. They then lose their own speech towards their deaf child, not knowing how to address the one they believe to be locked in silence. This explains the painful experience of parent-deaf child communication.

The socio-cultural representations that parents make of their child's deafness are in fact one of the defense mechanisms of their intrapsychic conflict, which is nothing more than a projection outside of denial.

Andolfi, Angelo, Penghi and Nicolo (1987) consider the family as a system in perpetual change, whose evolution is determined by its capacity to abandon stability and then recover it by reorganizing itself. Usually or naturally, the arrival of a child in a family is the source of this change or disorganization. The presence of the child in the family generates a problem; the presence of a handicapped child accentuates this disorganization, and weakens the family system even more. This conflict testifies to the relational difficulties of hearing parents of a deaf child (rejection from the surroundings, conflicts within the couple...). The arrival of a child in general, and that of a disabled child in particular, is considered from the point of view of this theory as extrinsic sources of change in the family equilibrium. Faced with this situation (the child's disability), the hearing parents of a deaf child become rigid. This situation creates the psychological suffering that these parents experience. In doing so, the families do not put into practice their property of dynamism to maintain their equilibrium that underlines this theory of family psychopathology. The psychological suffering of these parents is only a radical refusal to any new experience on their part. They neglect this property in the face of the child's handicap (the child's deafness) within their family.

The disease in Africans has an autonomous existence, independently of the organism that supports it and that it attacks from outside. In order for the attack or aggression to reach the individual, the aggressor must be closer, i.e. have a blood link with the ego. In Sow's (1971) theory of Black African psychopathology, the African personality is the individual (Ego) and the poles or axes that link them. Pathogenesis is the conflict between the ego and one of its three founding poles, which are the vertical pole, the horizontal pole and the Bio-Lineage Existence (BLE).

We can say that the socio-cultural representations of the hearing parents of this study are external manifestations of the conflicts between the parents' egos and the different axes that link them. The vertical axis constitutes the supreme being, the founding ancestor. The BLE is the bio-lineage essence. (H) horizontal axis is the extended society. The ideas of bewitchment, punishment linked to a transgression, are emanations of the conflict between the horizontal axis (extended society) and the Ego. The horizontal axis defines all the relational configurations within the community; in particular, the place of each person in relation to all, but also and more generally, the rules, institutions, relations and social practices, as well as the relationship to the world and to nature. Bewitchment is a process through which the sick individual perceives themselves as a victim of another initiated individual

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who has cast a curse on them. The hearing parents in this study perceive their deaf child as a victim of a curse from a relative. The act of witchcraft is a manifestation of the conflict between the Ego and the BLE. Witchcraft is a process through which the individual perceives the loss or diminution of his or her vital state due to the evil action of another individual who is a witch. The fact that these hearing parents see the total or partial loss of their child's ear leads them to attribute their child's illness to the act of witchcraft.

V. Discussions

The results of the present study show that hearing parents experience feelings of fear, helplessness, devaluation, insecurity and guilt in relation to their child's disability. These results corroborate those of William *et al.* (2003) who showed that some siblings of children with disabilities experience negative emotions such as anxiety and depression because siblings are part of the family or act as parents at times. In contrast, the present study did not find antisocial behavior or delinquent acts among hearing parents as reported by William *et al*. (2003). It should also be noted that the aspect of narcissistic suffering was also found by Dethorre (1997). The results of the present study on the representation of deafness coincide to a large extent with those of Bourcheix (2009), who also found as representations of the parents, the divine will, organic conception, curse, witchcraft, punishment. Likewise, the aspects concerning psychological suffering in terms of reactions were found, namely fear of the future, feelings of rejection, fear.

Our results, concerning the experience of the child's disability such as the fits of weeping, the refusal of the diagnosis and the guilt, were also found by Touma (2007) in his study on the factors influencing parental reactions in relation to deaf children. However, to explain these reactions, Touma (op. cit.) relied on factors such as fear of the unknown, ignorance, lack of information, the negative gaze of the surroundings, and fear of judgment, whereas in the present study, the parents' reactions are explained by the degree of children's deafness and the parents' representations.

Furthermore, the results of the present study do not corroborate those of Guillon (2011) despite the fact that she took into account the social representations of hearing parents of deaf children and tried to see the relationships between these parents and their child. This can be explained by the specificity of indicators of the subjects' representations in our study.

VI. Conclusion

The objectives of this research are to describe the sufferings of parents and to assess the link between the degree of child's deafness and the psychological sufferings of his/her parents on the one hand and the hearing parents' representations of deafness on the other hand. The psychological sufferings that are summarized on three levels: experience of the child's disability, relational difficulties, painful experience of the parent-deaf child communication. Among the factors to which we have linked the suffering of the subjects of our study, are the hearing parents' representations of the deaf children's deafness, which include the act of witchcraft, persecution, organic conception, divine will, punishment and curse.

We reviewed, without pretending to be exhaustive, the psychological sufferings that some parents of deaf children undergo. In this problematic of the psychic shaking of which the close relations and the disabled persons are the object, the present study, whose subjects are the hearing parents of deaf child, could not answer other questions which can exist. Thus, it would be preferable that other studies be envisaged to explore certain aspects that were not taken into account in this research, among others the representations of these parents towards their deaf child, the attitude of hearing parents towards their deaf child.

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