Summary of The Study

* Introduction

The issue of disability has its social and economic dimensions that affects passively on different communities. Disability is considered to be overload not only on the disabled but his family and community as well. So we have to work according to principles and aspects that organize our orientations. Normal life is a right for every handicapped and he can amuse his life too and live good life; the disabled alike with others has abilities and potentials in his own which we can invest so that we could help him on condition that providing him with social and psychological services to be a prosaically person on our community like typically developing peers.

One of the most important fields that gained attention today is serving special students in general and hearing impaired especially either on search or education. Every person depends greatly on his senses in dealing with environment where he lives. Hearing impairment lead to suffering of social and behavioral problems and had to be overcome and handled well through the existing strategies of treatment that may help in developing potentials and abilities of hearing impaired and their families to understand the world around them through enhancing social acceptance and training and therapy programs such as behavioral cognitive therapy.

Hearing impairment implies delayed on social development as it limit hearing impaired persons from participating and interacting with others, social integration, which affects badly on their social adaptability and alleviating their social skills which matter for their life in community, besides emotional problems. These limitations on communication with others lead in addition to wrong family rearing to dependence and social immaturity. Almost hearing

impaired children less social maturity compared to typically developing children, they can be depicted to ignore the feelings of others and egocentrism.

Hearing impaired person affects badly than deaf by his disability and more sufferer as the deaf lost his ability to hear completely and inability to hear others so he can accept his position in his community and family as a deaf, but hearing impaired can be more anxious and depressed than the deaf as he tries to adjust, include and meet his needs in his larger community and family as abnormal one, and with his inability to communicate with those around him he may appreciate loneliness and isolation best also he may lose his identity and not recognize his roles in the community.

Hearing is the main way for communicating information to human brain through which brain develop and form his personality. Hearing impairment if early can affect socially and psychologically on the person. According to behavioral cognitive therapy we should identify wrong and passive thoughts that threat hearing impaired adolescent and modifying it to rational and positive ones and correcting learning defaults through training on social skills that enable him to prosaically behavior.

Behavioral cognitive therapy is regarded to be relative newly strategy of therapy works on integrating between cognitive therapy with its various techniques and behavior management with its techniques, and dealing with different disorders through threefold perspective: cognitively, emotionally, and behaviorally. This way of therapy depend on dialectic convincing learning and showing the difference between distorted thoughts and no relational thoughts that affects badly on his different functions.

Through field supervision for up graduate study students (hearing impairment) at Benha University in ALAMAL School for deaf; working with the adolescent deaf and using surveys for parents, teachers, peers and others who are around them its indicated that deaf adolescents refuse participate with their peers in life situations and different social activities, in addition to feeling disabled as a result of hearing impairment, they also suffer from immaturity socially appeared in refusing social relations which affect passively on their perceived social acceptance related to social maladaptive behaviors. this may relate to losing the key communication way on their social development and relate to their wrong thoughts of themselves.

Many research and literature confirmed the problem of the current study since perceived social acceptance – from family, normal peers, teachers, and others – play a vital role in forming self-concept in deaf adolescents; it affects also on everyone with or without disability. Foster (1985) showed that deaf are less interactive with their family compared with typically normal and interactive in schools with their peers; they included in the community through deaf clubs which they restore to so that they could broke through the scaffolding bridge of social isolation.

Hopper (1988) indicated that the level of social acceptance is lower in deaf. Ali Hanafi (1996) showed that deaf or hard of hearing perceived social acceptance less than their peers in general. The current study confirmed this result.

Human disability affects not only him but also his relations with others and may lead to avoiding the larger community; egocentrism; and perceived social acceptance less than normal if so he needs training and counseling to overcome his social and psychological difficulties and to adapt well socially and psychologically through modifying deaf

adolescents irrational thoughts to rational ones and develop social skills. Little research dealt with improving social acceptance in hard of hearing according to the author knowledge. So the author prepared and designed therapy program-based on behavioral and cognitive therapy to improve social acceptance in hard of hearing especially in the current policy of mainstreaming disabled with typically developing students.

<u>The problem of the current study</u> can be identified in the following question:

To what extent behavioral and cognitive therapy can improve social acceptance in hard of hearing adolescents?

- * The aims
- Try to produce a theoretical framework more exclusive for behavioral and cognitive therapy.
- Produce a detailed therapy program for behavioral and cognitive therapy, can be used in improving social acceptance and other psychological problems.
- Improve social acceptance (self or others perceived acceptance) in hard of hearing adolescents through using some techniques of behavioral and cognitive therapy like: discussion, conversation, self-monitoring, self-discourse, modeling, role playing, turn converse, developing thought awareness, reinforcement, and assignments...etc

1- HEARING IMPAIRED

He is the person who has some imp permanent or temporarily hearing impairment that affects passively on his ability to perceive and produce speech through communication

^{*}Terms of Study

with others the matter which affect his social development. This impairment may stand against passing knowledge through his ear wit or without hearing aids.

2- SOCIAL ACCEPTANCE

perceived social acceptance can be defined as what the person perceive of love and acceptance from his family members, normal peers, teachers, others who are around him in the community which may lead to accepting himself and achieve personal and social adaptation.

3- CIGNITIVE - BEHAVIORAL THERAPY

It is one of the most modern therapy trends interested in cognitive strategy for psychological disorders. This therapy aims to convince the person of his irrationalized thoughts, expectations, his wrong words of himself that showed his inability to adapt well in order to modify distorted cognitive areas and replacing it with more suitable ways for thinking to bring cognitive, behavioral, and emotional changes in the client.

* Limitations of Study

The current study limited with the sample, tools, and static processing styles used to confirm the accuracy of its hypothesis.

a) Sample of Study

12 one experimental group of hard of hearing adolescents sufferer of the low level of social acceptance aged 12-17 years participated in the current study from ALAMAl School for deaf and hard of hearing in BENHA at KALUBIA governorate. The sample divided into two groups:

- The first group: male hard of hearing adolescents (n: 6)

- The second group: Female hard of hearing adolescents (n: 6)
 b) Tools of Study
- 1- Primary gathering information form (the author made)
- 2- Perceived social acceptance scale for hard of hearing (the author made)
- 3- cognitive-behavioral therapy program (the author made)
- c) Used Statical Styles
- 1 -Simple Analysis of Variance.
- 2- Compound covariance analyses for factor design(2X2).
- 3-Tokey test.
- 4- "T" test.
- 5- Nonparametric static (Mann-Whitney test; Wilcoxon test).
- * Results of Study:
- 1- There is a significant statistically difference, in level 0,01, between the two means of degrees of the post and pre test of social acceptance, in hearing Impaired adolescents, in favor of the post test scores ,that supports the '' first hypothese''.
- 2- There is no significant statistically difference between the two means of degrees of males and females, on social "acceptance, that don't support the second hypothese".
- 3- There are No signific and statistical differences between the two means of degrees of Study's Groups, on social acceptance, that Caused by Interaction between the two Variables of Therapy and type of sex, that don't Support the' Third hypothese'.
- 4- There is no significant statistically difference, between the two means of degrees of the post and follow-up test on social acceptance in hearing Impaired adolescents, that supports the "Fourth hypothese".