

System of Attitudes in Parents of Young People Having Sensory Disorders

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ABSTRACT

The objective of the research was to identify the system of attitudes in parents of young people having sensory disorders. The survey covered parents of children aged 17 and older having hearing disorders, visual disorders, and no sensory disorders. The parents' system of attitudes united the attitude of the parents to themselves, to the child and the child's sensory disorder, to family and family values. The complex of techniques used included the multi-purpose three-factor semantic differential by C.E. Osgood (1964), parents' attitude questionnaire by A.Ya. Varga and V.V. Stolin (1988), and E.Ya. Didenko's (2013) questionnaire form. In conditions of parents and young people living together, it is peculiar to all parents to accept their children and to be able to interact with them as well as to control the organization of their life and activity. Experiencing anxiety and dissatisfaction of life, diverse personal change, understanding the communication barriers of their children and recognizing the value of their future are characteristic for parents of young people having sensory disorders. This creates conditions for symbiotic relationships and infantilization of the young people. The structure of parents' attitudes in case of the children's sensory disorders is distinguished by a high integration of significance of one's own "I", of the value of one's own activity and openness.

KEYWORDS

Hearing disorders, visual disorders, parents, family, system of attitudes, integration

ARTICLE HISTORY

Received 21 February 2016
Revised 30 March 2016
Accepted 22 May 2016

Introduction

According to the data of the Ministry of Labour and Social Protection of the Russian Federation (2016), currently, Russia counts 12,8 million of the disabled people, with some 4,4 percent of them being children. One of the relevant social, economic and demographical problems of the modern Russian society becomes inclusion of children having health limitations (HL) into the society.

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Socialization is the process of a human individual learning patterns of behavior, psychological attitudes, social norms and values, knowledge, and skills enabling the individual to successfully function in the society; human development during learning and reproducing the communication culture occurs with the individual interacting with random, relatively directed and intentionally created conditions of life at all age stages. An important part in the process of socialization of a child is played first and foremost by the child's micro-society.

Birth of a child having health limitations is accompanied by a chronic stress which all family members develop (Semago, 1992; Semago & Semago, 2000; Bogdanova, 2002; Guslova, 2011; Ainsworth et al., 1978, Ainsworth, 1989). In families bringing up children who have intellectual or movement disorders or the emotional-volitional sphere ones, the family relations and atmosphere gain a pathological character, the contacts of parents and children get complicated and the style of upbringing gets distorted (Vasilyuk, 1984; Mamaychuk & Chaves, 1992; Izvol'skaya, 2012; Isaev, 2004; Piskun, 2015).

With regard to this, the parents themselves experience serious emotional shocks, catastrophes of meanings, which is accompanied by transformation of the entire system of attitudes (Plapinger & Kretschmer, 1991). First of all the change touches on the attitude to oneself, to the child suffering a condition, as well as to the family and family values (Markovskaya, 2007; Shipitsyna, 2009; Tkacheva, 2014). It is evident that parents of children having health limitations need psychological counseling. The efficiency of counseling is much determined by understanding the part played by the kind of the child's disorder in organization of family life and the system of parents' attitudes (Levchenko & Tkacheva, 2008). Experts estimate that currently there are over 190 thousand hearing impaired people and about 230 thousand sight-disabled ones in Russia. Due to this, it is important to study the particularities of attitudes system in parents bringing up children who have sensory disorders.

Literature Review

Recently, family has been increasingly viewed as a unique system the key part in which is played by children-to-parents relations (Watzlawick, Beavin & Jackson, 2000; Bowlby, 1982). Children-to-parents relations are formed under the influence of many social and cultural and psychological factors (Turnbull et al., 2015). In families of children having health limitations, they first of all depend on the parents' attitude to the sick children (Didenko, 2013; Tkacheva, 2014; Shipitsyna, 2009; Plapinger & Kretschmer, 1991). In such families, the style of upbringing, the family atmosphere are also determined by the self-conception of parents. Self-conception determines the relevance and variability of social activity of an individual and motivates behavior and communication. A positive self-conception determines the confidence in one's opportunities, independence, vigor, optimism, provides one with readiness to risk. A negative self-conception is a source of communication and self-fulfillment difficulties and the main cause of boredom and depression.

The parents' realizing the fact of giving birth to a child having disorders, including the hearing or eyesight ones, leads to chronic stress (Semago, 1992; Semago & Semago, 2000; Bogdanova, 2002; Guslova, 2011). The emotional stress and social difficulties affect the parents' self-conception. It should be noted that the system of attitudes in parents living together with the young people who



have hearing or eyesight disorders and continuing to bring them up is only studied in fragments (Kirschbaum & Ereemeeva, 2000). In order to render the efficient psychological assistance to families with children having sensory disorders, a special research into the system of attitudes in parents bringing up young people who have sensory disorders is necessary (Minuchin & Fishman, 2004).

In the authors' viewpoint, the parents' system of attitudes reflects the attitude of parents to themselves, to their children, to their sensory disorders and development, to difficulties of their social interaction, and to family values. Moreover, the attitude of parents to themselves and to children is associated with feelings of the parents evoked by giving birth to a sick child, personal change occurring in them, the ability to use social, intrafamily and personality resources for overcoming the negative feelings. Based on the scientific data and their own practical experience, the authors suggested that in conditions of parents and the young people living together, the kind of sensory disorder of the latter transforms the content and structure of the parents' attitude to themselves and to the children.

Research Methods

The survey covered 90 families with parents living together with children aged $17,6 \pm 1,3$ who had various sensory capacities. The age of the children allows categorizing them conventionally as the young people. In 30 families, young people having hearing disorders (sensorineural hearing loss of grade III-IV) were brought up. In these families, 46 parents having intact hearing were surveyed, among them 16 fathers and 30 mothers, the average age being $40,4 \pm 6,8$ years old. In 30 families, the young people having visual disorders (various disorders of eyesight at vis. 0,05-0,2) were brought up. The survey involved 50 parents having intact eyesight, of them 20 fathers and 30 mothers aged on average $39,3 \pm 5,1$. The survey also included 30 families bringing up young people who had no sensory disorders. 40 parents were surveyed, among them 12 fathers and 28 mothers, their average age being $39,7 \pm 5,1$ years old. The study was conducted in Saint-Petersburg for three years from 2013 to 2015.

Due to the parents' closeness, before the study, a special preliminary talk was given by a psychologist for the parents. The talk was aimed at creating trusting relations, informing the parents about the particularities of development of children having hearing or visual disorders at various age stages. The parents' readiness to participate in the survey was determined and their friendliness towards the psychologist was identified. Moreover, social and psychological problems were revealed which the parents would face the most frequently during social interaction. The survey itself was conducted individually or in small groups of 2-4 people. During testing, the parents showed a high control of their behavior while also strictly observing the psychologist's instructions. The parents clearly needed understanding, support, empathy and somebody else's interest in their problems. In some parents, shyness and awkwardness were noticed and tension was felt.

When selecting the techniques for the research, the authors intended to get the information which would reveal the system of parents' attitudes to the fullest extent. Their reliability and validity were taken into account, as well as the scale of approval for solving the problems of special (correctional)

psychology. The following tools were used in the study: questionnaire form "Coping with difficulties" developed by E.Ya. Didenko (2013) for analyzing the difficulties of interpersonal interaction of parents with the children having hearing or visual disorders as well as the ways of coping with them; the multi-purpose three-factor semantic differential of C.E. Osgood (1964) as adapted by V.F. Petrenko (2005) for studying the subjective attitudes of parents to themselves, to the children and their conditions, to their family and family values; A.Ya. Varga & V.V. Stolin's (1988) questionnaire of the parents' attitude for finding out the parents' attitude to the children.

Methods of statistical analysis were used for revealing the reliability of the results and relationship of the empirical research indices. In order to compare two samples according to an attribute measured by a metric scale for measuring the average values, Student's t-test was used. Pearson r-correlation coefficient was used for finding out the extent of connection of two variables.

Results and Discussion

The results of the study have shown that in case of parents living together with young people the parents' systems of attitudes possess both common and particular features. The common features are peculiar to parents of all groups surveyed and do not depend on the sensory disorders of the young people while the particular features are associated with the young people's sensory disorders.

So, according to the results of semantic differential evaluation, parents of both young people having sensory disorders and of normally developing young people pointed out confidence of themselves, independence, self-sufficiency (the distinctions in the "strength" index are statistically insignificant). The presence of a sensory disorder in young people conditions a more pronounced passivity, closeness in communication of parents as compared with ones who have normally developed children (the differences in the "activity" index are statistically significant at $p \leq 0,001$). The negative self-esteem of parents is added up to by pathologies of eyesight of the young people (the distinctions in the "evaluation" index are statistically significant at $p \leq 0,001$).

Giving birth to children having sensory disorders and bringing them up, living together with them not only touch on self-conception but also cause personal change in all family members, parents first of all. According to answers to the questionnaire form, the parents specify a rather wide range of personal change occurring to them for the years of upbringing of their children having sensory disorders. In themselves they watch not only positive but negative change of various intensity too. So, the parents mention increase of the following personal attributes: strength of "I", responsibility, tolerance, reason, attentiveness. The most frequently pointed out by the parents are the increase of "I" strength and responsibility as the personal traits. With regard to this, parents of the young people having hearing disorders tend to mark positive change more often than ones of the young people who have visual disorders.

Alongside with positive change, parents of the young people having hearing and visual disorders notice in themselves the development of personal traits that generate communication barriers, in particular, apprehension. They also point at irritability as a sign of tiredness and low resistance to stress. The trend of negative personal traits enhancing was marked slightly less frequently in



parents of the young people having hearing disorders, rather than in parents of those having visual disorders.

The parents participating in the survey mention that the upbringing of young people having sensory disorders is accompanied by various feelings. With regard to this, negative feelings prevail that accompany them throughout the long adaptation period to not only psychological and physiological particularities of the children, but also to the specific character of the society accepting the health limitations children. The most frequently experienced is anxiety, although parents of the young people having hearing disorders feel anxious less often than ones of the young people having visual disorders: 74,4% and 93,3%, respectively. The hearing disorders, just like visual ones, provoke the impossibility of full-fledged communication in the family, which forms the parents' anxiety. However, as the parents themselves say, visual disorders in children create more causes for feeling anxious as they make the parents keep thinking about the children organizing themselves independently when moving about in the street, in an education institution and in daily life. Such fixation of consciousness distracts one from solving the professional tasks and those associated with organization of the daily family life.

Dissatisfaction undermining the feeling of happiness occupies a large place in the range of parents' feelings. The feeling of dissatisfaction occurs in 38,5% of parents of the young people having hearing disorders and in 53,3% of parents of the young people having visual disorders. Tiredness of permanent problems is less frequently felt by parents of adolescents having hearing disorders (20,5%) than those of the young people with visual disorders (46,7%).

Meanwhile, some feelings occur in both groups of parents with approximately the same frequency. For instance, the lack of confidence in their upbringing is registered by 43,6% of parents of the young people having hearing disorders and 40,0% of parents of the young people having visual disorders; lack of self-fulfillment – by 30,8% of parents of the young people with hearing disorders and by 26,7% – with visual disorders; disappointment – by 15,4% of parents of the young people having hearing disorders and by 10,0% of parents of the young people with visual disorders. It can be supposed that regardless of the kind of the young people's sensory disorder, their parents tend to feel their own low value and lack of potential for self-fulfillment.

Time and experience of prolonged interaction of parents with their children form an original attitude to the children's conditions. Although acceptance of their children and interaction with them combined with controlling the organization of their life is characteristic for all parents, they believe sensory disorders to affect all spheres of life and limit the self-fulfillment and socialization of the young people. From the parents' viewpoint, the difficulties of development in the young people are associated with the communicative behavior first of all. Young people having hearing and visual disorders, as their parents think, have difficulties in interpersonal communication, including speech barriers, misunderstanding the interlocutor and negative attitude to them. Among the personal traits preventing the young people from the full-fledged communication, the parents stress egoism, petulance, fixation on the value of their own "I". A negative part in communication of the young people having sensory disorders is played by uneasiness which the parents tend to observe. However, it is communication difficulties of their children that the

parents of the young people having hearing disorders differentiate in a keener way while the spatial orientation difficulties and ones of organization of personal hygiene, dependency are rather singled out by those of the young people having visual disorders, which is natural given such development disorders.

From the parents' point of view, the pathology of children's sensory development creates a number of difficulties for themselves. This study has shown that the most difficult time span for the parents was that of placing the children into an education institution. It is associated with passing various examinations, including the psychological, medical and pedagogical commission, and is related with thoughts about the children studying at a special school. The time of establishing the diagnosis to the children can be considered to be not less important for them. The feelings of parents of the young people having hearing disorders and of those having visual disorders at that time were determined by the unexpected character of the situation which entailed the feeling of fear and the condition of confusion – "what shall we do?", "who shall we go to?", "how can we treat our child?". A less marked impact was left by the feelings of the puberty age time in spite of some conflicts with the children occurring. As for adaptation of the children at a preschool education institution, it was almost painless for their parents.

The parents' turning to social and personality resources is considered to be an important index of adaptation to the family situation formed. The questionnaire survey conducted by the authors shows that the majority of parents – 11-60% of those of the young people having hearing disorders and 10-50% of parents young people having visual disorders – got assistance and support from society in a difficult life span. The social resources for them were the following: specialists of healthcare and education institutions, information systems, as well as relatives and friends. Only a small part of parents of the young people having hearing (13%) or visual (16%) disorders used the personality resources for coping with the heavy burden. As the personality resources, the parents – first of all mothers – mentioned their own "I". The rejection of assistance on the part of the immediate environment and official institutions expressed by the phrase "nobody helped" was considered as positioning of self-sufficiency in overcoming a difficult life situation.

While experiencing various difficult life family situations associated with hearing or visual disorders of the children and creating their own attitude to the pathologies, the parents also formed their attitude to the children. The results obtained by the authors point at the common attributes of the parents' attitude to the young people in all the three groups. Parents tend to perceive their children living together with them as lacking self-confidence, dependent and lacking the initiative. At the same time, they accept their growing children, they are clearly interested in their business and they try to control them strictly.

The existence of sensory disorders in the young people is accompanied by symbiotic relationships in the family that are manifested in the parents' feeling as an entity with the children and seeking to satisfy all their needs and to guard of all difficulties and troubles in life. The index of symbiotic relationships in families of the young people having hearing disorders ($4,57 \pm 1,59$ points) and visual disorders ($4,64 \pm 1,64$ points) is statistically more expressed than in families of normally developing young people ($3,90 \pm 1,45$ points). The table below



shows the results of studying the styles of parental attitude to children using the technique of Varga-Stolin.

Table 1. Parents' attitude to the young people having sensory disorders

Indices	Parents of young people						p for the groups compa- red
	having hearing disorders, (n=46) A		having visual disorders, (n=50) B		normally developing, (n=40) C		
	M	δ	M	δ	M	δ	
Acceptance / rejection	10,48	2,61	10,06	2,88	9,50	2,27	—
Cooperation	7,89	1,16	7,42	1,14	7,68	1,16	—
Symbiosis	4,57	1,59	4,64	1,64	3,90	1,45	B; C* A; C*
Authoritarian hypersocia- lization	4,61	1,47	4,54	1,865	4,33	1,655	
Infanti-lization	2,63	1,27	2,62	1,43	2,10	0,90	B; C* A; C*

Legend: M - the average value, δ - standard deviation; * - $p \leq 0,05$; ** - $p < 0,001$;

A - parents of the young people having hearing disorders; B - parents of the young people having visual disorders; C - parents of normally developing young people. Source: compiled by Svetlana T. Posokhova & Elena Ya. Didenko.

Despite the children's growing up, the parents seek to infantilize them. They ascribe to the children personal and social incapacity. The parents see their children to be younger than they actually are, do not trust them and they are annoyed by their unsuccessfulness and inefficiency. Due to this, the parents try to guard the children from life difficulties and control their actions strictly. With regard to this, infantilization of the children is more noticeable in families upbringing the young people having sensory disorders. The index of infantilization in families with young people having hearing disorders is $2,63 \pm 1,27$ points and that in ones with young people having visual disorders is $2,62 \pm 1,43$ points, while in families of normally developing young people, the index is $2,10 \pm 0,9$ points (the distinctions between the groups of parents of young people having sensory disorders and the parents of normally developing young people are statistically valid at $p \leq 0,05$ and $p \leq 0,001$).

The research conducted by the authors shows the significance of the kind of sensory disorder in the system of the child's evaluation on the part of parents. In particular, visual disorders are accompanied by the parents lowering the overall evaluation of the children, of their activity and openness while not always realizing this fact (the distinctions between the groups of parents of young

people having sensory disorders and the parents of normally developing young people are statistically valid at $p \leq 0,05$ and $p \leq 0,001$).

Many parents of the young people having sensory disorders, though realizing the difficulties of development of their children, did not make peace with the fact that they were sick i.e. with the children's having health limitations. Most probably, such a standpoint reflects the turning on of psychological defenses and is more frequent among the parents of young people having hearing disorders – 85% – rather than among the parents of ones having visual disorders – 60%. During the talk, the parents of young people having hearing disorders mentioned the absence of pathology in their children. They referred to the fact that insufficient work of the acoustic analyzer is not an obstacle for independent organization of life activity and professional fulfillment. The parents were sure that high positions and achievements in science cannot be reached by their children but that they can provide for an independent living for themselves. From their point of view, a hearing disorder does not limit life opportunities of man although it does hinder the perception of diversity of the world around them. As for the parents of young people having visual disorders, they shared such an opinion less frequently.

A part of the parents acknowledging the health limitations in their children believe a hearing or visual disorder to be a serious limitation for a full-fledged fulfillment in life. For them, a sensory pathology prevents people from getting a higher education, achieving a decent material provision in the future due to permanent dependence on parents, permanent medical supervision and that of social services.

The study has shown marked distinctions in the parents' ideas about the future of their growing up children. The distinctions are first of all related with parents of the young people having sensory disorders and with parents of the normally developing young people. In particular, parents of the young people having sensory disorders see their children as more passive and closed, less attractive and independent, more dependent on the opinion and assistance of others in the future as compared to parents of the normally developing young people (the distinctions are statistically valid at $p \leq 0,05$ and $p \leq 0,001$). It should be stressed that the specific character of the sensory disorder influences the parents' ideas about the future of their children yet to a smaller extent than the very fact of having a condition. The distinctions between parents of the young people having sensory disorders and those of the normally developing young people are more significant than the distinctions from parents of experimental groups.

In spite of difficulties that parents have to overcome while interacting with the young people having hearing or visual disorders, they still estimate their prospects as high. 60,9% of parents of the young people having hearing disorders estimate the future of their children and their life success high. As for upbringing of the young people having visual disorders, fewer parents think so – 38,0%. It can be supposed that the parents' orientation towards positive prospects for their children having sensory disorders is much conditioned by their defense expectations. A positive estimation of the future occurs the most frequently in the control group of parents – 85,0%.

Parents of the young people having hearing or visual disorders reconsider the entire system of values, including the family ones. Such family values as



family, love, and destiny are considered to be the main ones in overcoming the existential crisis. The value of destiny acquires a special meaning in the families of the children having development disorders. Destiny is viewed from the standpoint of a total of all events and circumstances subjectively perceived by a personality as predetermined and influencing all sides of being. Destiny is recognized as one of the key and universal categories of the human culture describing the fundamental relationships of man and the world. It is believed that the category "destiny" reflects the centuries-old experience of the humanity in comprehending freedom and necessity. Using the category, people try to determine the key forces that drive not only the world order but also organize the life of a certain person. Among many characteristics ascribed to destiny, the crucial position is occupied by its independence from the human will. It is this that gives destiny the meaning of an impersonal verdict.

According to the results of this research, the attitude of parents bringing up young people who have various sensory capacities to family values has got common and peculiar traits. To common features, the similar moderate significance of destiny and love belongs. For parents of the young people having sensory disorders, a more passive stance towards destiny is characteristic rather than for the parents of normally developing young people. Destiny is perceived by them as something unattractive, uncontrollable and unchangeable. Family seems to them to lack self-sufficiency, to obey the will of the case and circumstances, and to have no movement, activity, openness. Meanwhile, the parents of the young people having hearing disorders believe their family to be more active and open rather than those of the young people having visual disorders do.

The following step to prove the authors' hypothesis consisted in revealing the structure of the parents' attitude. The use of paired correlation analysis allows determining the common and peculiar attributes of the structural organization of the parental attitude. The analysis of interrelations shows first of all a high integration of the attitudes system in parents of the young people having sensory disorders. In the attitudes system of parents of the young people having hearing disorders, the index reflecting the attitude of parents to themselves as to a self-sufficient and independent personality has the highest integration. The more self-sufficiency and independence the parents see in themselves, the more significant the attractiveness and value of children and such family values as family, destiny, love are. However, the reverse relation has been borne in mind too: a high importance of children and family values is coupled with self-sufficiency and independence of the parents.

It should be noted that in the group of parents of the young people having hearing disorders, the index of attractiveness and value of love, the index of attractiveness and value of one's own "I", as well as the index of significance of the child's condition have a high integration. The said indices do not correlate between each other. In spite of this, it can be supposed that the value of their own "I" for the parents, the value of children and value of love structure the entire system of the parents' attitudes. In fact, within the system of the parents' attitudes, the expression of these indices is coupled with the indices of attractiveness, value, self-sufficiency and independence of the children, both at present and in the future. With regard to this, it should be highlighted that the integrating part in structuring the parent's system of attitudes is played by love

as a value. The more significant love is, the more active, open the family and the children are; and vice versa, the more active and open the family and the children are, the more significant love is. In particular, the higher the significance of a child's condition is, the higher the value of destiny is in all its manifestations. Proceeding from the results of correlation analysis, it can be supposed that within the structure of attitudes of parents of the young people having hearing disorders the indices reflecting the meaning of one's own "I" play the dominant part.

Similarly to parents of the young people with hearing disorders, in the attitudes system of parents of the young people having visual disorders, the index of value of one's own "I" has the highest capacity for integration. The more pronounced the value of one's own "I" is, the more significant the values of family, destiny, and love are for the parents. The attractiveness, value, self-sufficiency and independence of the children are also important for them.

Unlike parents of the young people having hearing disorders, in the group of parents of the young people having visual disorders, the value and attractiveness of the future of children plays a great part. It is associated with such family values as activity, attractiveness, value of destiny and activity and successfulness of the children in the future. The pronounced inclusion of the value of destiny into the attitudes system draws the attention to itself, which can be related to the passive standpoint towards the children and removing a large share of responsibility from oneself.

When analyzing the correlation Pleiades, a smaller quantity of statistically valid correlation was found in the group of parents of normally developing young people, which reflects the flexibility of the parents' attitudes. Moreover, in this structure it is difficult to find the prevailing attributes. Yet the indices of family values – family, destiny and activity, openness of children – are distinguished by a high importance and mutual conditionality.

Conclusion

The results obtained allow making the following conclusions.

In conditions of the parents and young people living together, the systems of parents' attitude in families with young people having sensory disorders and ones with normally developing young people have the common and peculiar features. The ability of parents to accept their children and to interact with them combined with a strict control of organization of their life activity belongs to the common attributes. The structure of the parent attitudes system is determined by the relations of the parents' attitude to themselves, to the growing children and to family as values.

For parents of young people having sensory disorders, the feelings of anxiety and dissatisfaction with life situation, diverse personal change, understanding the communication barriers of their children and recognizing the value of their future are characteristic. This creates conditions for symbiotic relationships and infantilization of the young people. The structure of parents attitudes in case of the children's sensory disorders is distinguished by a high integration of significance of one's own "I", of the value of one's own activity and openness.

To the parents of young people having hearing disorders, the orientation to positive personal change taking place within years of interaction with their



children, to the value of their family, and to understanding their communication difficulties is peculiar. The structure of parents' attitudes is strictly organized and is conditioned by the significance of one's own "I" for the parents, by the value of the child and love.

To parents young people having visual disorders, it is peculiar to focus their attention on their own negative personal change and unattractiveness of their children, to ascribe to them difficulties in spatial orientation and organization of personal hygiene. Within the structure of the parents' system of attitudes, the dominant part is played by a positive significance of the future of their grown up children that is associated with understanding destiny as a family value.

A positive orientation to their own activity and openness, significance of family, as well as to the significance of their children and their future is characteristic of the parents of normally developing young people. The structure of the system of parents' attitudes is determined by the significance of their own destiny, family, as well as realizing the activity and openness of the children.

Disclosure statement

No potential conflict of interest was reported by the authors.

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