

# Parental Involvement and its Effects on the Academic Performance of Students with Hearing Impairments in Mandaue City

Jaclyn G. Mangubat, Jaypee A. Baylosis, Miel D. Guinocor, Janine Joy Tenerife-Cañete,  
Lilibeth C. Pinili, Reylan G. Capuno  
Cebu Technological University Main – Campus

**Abstract:** The research establishes the effect of parental involvement on the academic performance of hearing-impaired students in Mandaue City. The study employed a descriptive correlational research design and collected data from 34 parents and guardians of students who enroll at Mandaue City Central Special Education School. The study examined ways in which parents support their children through activities like parenting, communicating, volunteering, learning at-home, decision making, and collaborating with community. It also examined the issues they face—i.e., psychological problems, financial problems, health problems, and social problems.

The findings indicate that the majority of parents, particularly mothers between 30 and 49 years, are much involved in the children's learning. Even where such parents are undergoing financial difficulties as well as other personal challenges, they remain engaged in the education of their children. Surprisingly, no noticeable linkage was found between how involved the parents were and the difficulties they are facing in raising their children.

The research indicates that although parents also encounter genuine and often demanding issues, these do not necessarily negate the possibility of them being actively engaged in the child's education. To further support these families, the research suggests an action plan comprising education workshops, peer support, and more robust collaboration between schools and communities. Finally, the study focuses on parents' resilience and significance to continue playing an active part in the learning process of their children.

**Keywords:** Students with hearing impairments, parental involvement, academic performance, children's education, problem encountered, descriptive-correlational, Mandaue City, Cebu Philippines.

## CHAPTER 1

### THE PROBLEM AND ITS SCOPE

#### INTRODUCTION

##### Rationale of the Study

Raising a hearing-impaired child presents unique challenges, demanding significant adjustments in communication and support strategies. Parents often face emotional hurdles, grappling with initial diagnosis and the long-term implications for their child's development. Accessing appropriate educational resources and therapies can be a significant struggle, often involving navigating complex bureaucratic systems and financial constraints. The social integration of hearing-impaired children may also be difficult, requiring proactive efforts from parents to foster inclusivity and understanding amongst peers and community members. Ultimately, the journey requires immense

patience, resilience, and a strong support network to ensure the child's overall well-being and success.

In recent years, there has been increased awareness of the deaf community in both international and Philippine settings. Children's academic success depends on their parents' involvement in their education. Nicastrì and colleagues (2021) found that a supportive family environment is crucial for the language development of deaf children using cochlear implants. Families who received training showed significantly greater improvements in both family interaction quality and the children's language skills, with these benefits lasting for at least three years.

A study by Davids et al. (2020) examined the challenges experienced by parents of hearing-impaired children within a South African context. It was found out that the teamwork between parents and health practitioners have an important impact within South Africa in creating a support program to parents raising children with hearing impairments. Another study by Ambrose et al. (2020) delved into the crucial role of parental beliefs and self-efficacy in supporting the development of young children with hearing loss. The finding revealed a significant correlation between parental beliefs and self-efficacy and their actions in promoting their child's auditory access and spoken language development. This highlighted the importance of addressing parental beliefs and confidence in their abilities to effectively address their children's hearing and communication needs.

According to Nailand, et al (2023) found that parents have valuable insights into factors that affect persistent hearing aid usage in young children. Parents expressed their experiences, highlighting the emotional challenges of the initial period after a hearing loss diagnosis, the importance of family support, and the need to build understanding and connections within their social circles about hearing loss and hearing aid use. Drawing on these ideas, the authors propose pragmatic strategies for enhancing therapeutic practice. This approach prioritizes family involvement, offering solutions for hearing aid challenges and promoting family and community support. However, an often-overlooked factor contributing to the educational challenges was the role of parental involvement. In many cases, parents of deaf children might lack sufficient access to the resources or information necessary for effectively supporting their children's education. The lack of proper guidance could hinder their ability to champion their child's needs within the educational system, complicating the child's access to essential support for success. As primary caregivers of both typical and atypical children have received limited focus regarding their roles in Inclusive Education (IE), and there is scant understanding of the significant challenges they encounter while participating in their children's education (Sianturi et al., 2022).

This study aimed to contribute deeper insights into the parental involvement in the academic performance of their offsprings. By doing so, it aimed to empower parents with the tools and knowledge they needed to foster a supportive learning environment, both at home and in collaboration with schools. It also could inform policies and programs designed to improve the education of deaf students and could potentially lead to a more inclusive education system that addresses the needs of all learners, most particularly those who are deaf or hard-of-hearing.

To address this concern, an action plan was developed to engage and enhance parental involvement in supporting the academic performance of students with hearing impairments in Mandaue City Central Special Education School. The plan directly responded to identified gaps in parental knowledge, skills, and resources, providing a structured approach to increase awareness, build capacity, foster community, and improve communication between parents, educators, and support services. By implementing this plan, the researcher aimed to significantly improve the educational outcomes and overall well-being of these students, creating a more inclusive and supportive learning environment.

### **Theoretical Background**

This study was anchored on the Ecological Systems Theory, Process of Parenting Model, and Pillar Theory that explained the effective parental involvement methodologies that could engage with

their deaf children education. Legal bases were Republic Act No. 7277, Republic Act No. 11650, Republic Act No. 10410, Republic Act No. 10533 and Republic Act No. 11106. Bronfenbrenner’s work highlighted the profound impact of a child’s environment and social interactions on their development, demonstrating how interconnected systems like family, school, and community shape a child’s growth. It highlighted how parental involvement interacted with these systems to influence academic performance of their child. It also suggested the crucial role of parent-child relationship in a child’s development. Moreover, the stability and quality of a child’s relationship, particularly in their close surroundings, are vital for healthy growth. Numerous schools and early childhood programs now emphasize family involvement in children’s learning, using methods like parent-teacher meetings, family workshops, and home visits (Epstein, 2011). Applying Bronfenbrenner’s Ecological Systems Theory has significantly advanced our comprehension of the multifaceted influences on child development. His focus on the interplay between children and the environment offers valuable perspectives into how experiences influence cognitive, social, and emotional development.

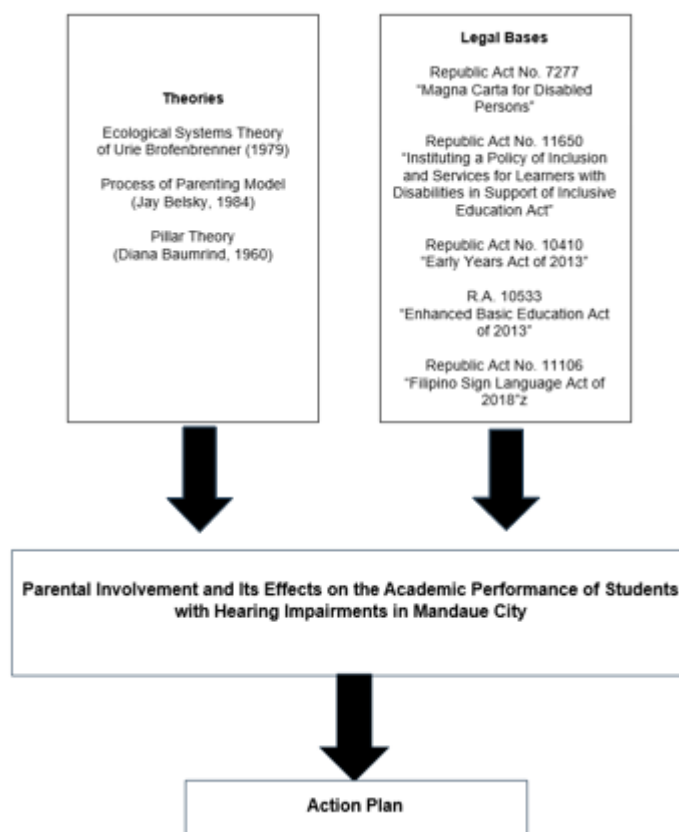


Figure 1. Theoretical/Conceptual Framework of the Study

Based on Belsky’s Process of Parenting Model (1984), parents establish inherent roles in their children’s daily care. Expanding on this, Tabaran and Shaw (2018) highlighted the multifaceted nature of parenting influenced by parental attributes (personality, education, well-being), social context (marital quality, employment, social support), and child characteristics (temperament, age, gender). This model offers a broad understanding of the factors shaping parenting practices.

Baumrind’s Pillar Theory (1960) discussed how the parenting style employed to significantly influence a child’s future achievements in education, social interactions, and their own parenting relationships. Baumrind theorized that children's actions could be linked to the particular parenting style they underwent at home, specifically in ways they interact with their children. There were four parenting styles: authoritative, authoritarian, permissive/indulgent and later Macoby and Martin introduced the uninvolved/neglectful style. Parenting approaches significantly impact child development. Authoritative parenting, balancing involvement with allowing constructive mistakes, fosters happy, capable children. Authoritarian parenting, characterized by strict rules and obedience,

produces potentially proficient but less happy children. Permissive parenting, lacking boundaries and discipline, often results in children struggling with self-regulation. Finally, uninvolved parenting, marked by neglect, led to children with low self-esteem and competence. The consequences of each style emphasized the important impact parents have on their children's well-being and success.

In conclusion, different children need different parenting styles, and neurodiversity children might need different parenting approaches than neurotypical children; not one size fits all. As kids grow, parent-child connections ought to evolve naturally to meet developmental shifts. Parent-child dynamics that fail to adjust to a child's capabilities can result in increased conflict between parents and children, ultimately diminishing the quality of their relationship.

The Department of Education (DepEd) highlights that school stakeholders are people or entities not directly engaged in the school's routine activities but are very interested in partnering with or aiding the school to tackle issues, and enhance performance, including parents.

Republic Act No. 7277 or "Magna Carta for Disabled Persons" stipulated that the government must guarantee that individuals with exceptional needs receive quality education and sufficient chances to enhance their skills. It also specified that individuals with disabilities' unique needs should be taken into account when developing educational initiatives, student support systems, or learning interventions. Educational institutions were urged to offer additional services, including qualified interpreters or other efficient ways of providing learning resources tailored for d/Deaf learners. This legislation also provided that individuals with disabilities have the right to receive educational support in both public and private educational institutions.

Republic Act No. 11650, titled "Instituting a Policy of Inclusion and Services for Learners with Disabilities in Support of Inclusive Education Act" embraced the social model of disability, acknowledging the entitlement of every citizen, as well as students with disabilities, fair, inclusive and quality education, along with the necessity of ensuring that education is accessible to everyone for the fulfillment of this entitlement. This policy brief aimed to provide insights into the present situation of Deaf education in the country and suggest proposals for consideration in developing the IRR of the law, particularly regarding reading Deaf education.

Republic Act No. 10410 "Early Years Act of 2013" and Republic Act No. 10533 "Enhanced Basic Education Act of 2013" are existing laws that have officially acknowledged FSL as a visual language of the d/Deaf. The implementation of Republic Act No. 11106 "Filipino Sign Language Act of 2018", officially announces that FSL as an official national language of the Filipino community, mandates the Department of Education (DepEd), Commission on Higher Education (CHED), Technical Education and Skills Development Authority (TESDA), and all pertinent government agencies engaged in education for the d/Deaf to utilize FSL as the primary medium of instruction in educational settings for the d/Deaf. The IRR of the mentioned law offers further direction on the necessities and requirements of the d/Deaf students. Nonetheless, incorporating FSL into formal education for the d/Deaf has shown to be difficult due to the scarcity of FSL interpreters and signing teachers nationwide, especially in rural and remote schools.

To improve academic success of hearing-impaired students with the involvement of parents, a plan addresses the lack of parental knowledge, skills, and resources. This plan would increase awareness, build parental capacity, foster community, and improve communication among parents, educators, and support services. The goal was to improve educational outcomes and well-being for these students, creating an all-inclusive learning environment.

## **THE PROBLEM**

### **Statement of the Problem**

This study examined the extent of parental involvement among families of these deaf students and its effects on their academic performance. As foundation for the suggested action plan.

This study sought to answer the following questions:

1. What is the profile of the respondents in terms of:
  - 1.1. age and gender;
  - 1.2. relationship to the child;
  - 1.3. age of deaf child;
  - 1.4. primary mode of communication used at home;
  - 1.5. employment status; and
  - 1.6. household income?
2. As perceived by the respondents, what is the level of parental involvement in terms of:
  - 2.1. parenting activities;
  - 2.2. communicating activities;
  - 2.3. volunteering activities;
  - 2.4. learning at-home activities;
  - 2.5. decision making; and
  - 2.6. collaborating with community?
3. According to the respondents, what is the extent of the problems they encounter in rearing their children who are deaf, in terms of:
  - 3.1. psychological problems;
  - 3.2. financial problems;
  - 3.3. health problems; and
  - 3.4. social problems?
4. Is there a significant correlation between parental involvement and the problems encounter in rearing deaf children?
5. Based on the findings of the study, what action plan can be crafted?

### **Statement of the Null Hypothesis**

Based on the objectives of the study, the null hypothesis was tested at

0.05 level of significance:

Ho1: There was no significant relationship between parental involvement and the problems encounter in rearing deaf children.

### **Significance of the Study**

This study highly benefited the Department of Education (DepEd), school administrators, inclusive education teachers, learners, parents, LGU, researchers, and future researchers.

**Department of Education.** This study had major implications for the Department of Education (DepEd) because it has underscored the essential influence that parental participation on the academic success of students with hearing impairments—a group that was frequently underrepresented in mainstream educational settings. By focusing in Mandaue City, the study gave unique insights that could help shape more inclusive and effective education policies.

**School Administrators.** This study was extremely relevant to school administrators because it emphasized the importance of family involvement in enhancing academic achievement for students with hearing impairments. By focusing on the particular circumstances of Mandaue City, it presented practical recommendations for administrators to improve school policies and practices.

**SPED Teachers.** This study was extremely useful to SPED (Special Education) teachers because it demonstrated how parental participation significantly influenced the academic progress of students with hearing impairments. By focusing on real-world experiences and data from Mandaue City, it offered practical and localized insights that instructors might use in their classrooms.

**HI Learners.** This study was relevant for learners with hearing impairments since it focused on how their parents' engagement and support might help them thrive academically. It drew attention to their specific needs and demonstrated that they were not alone on their educational journey.

**Parents.** This study was extremely significant for parents considering it emphasized the crucial part they have played in their children's academic performance with hearing impairments. It served as a reminder that parents' interest, support, and active participation in their children's education could have a huge impact.

**Local Government Unit (LGU).** This study was extremely relevant to Mandaue City's Local Government Unit (LGU) since it provided data-driven insights that could help guide local initiatives to encourage inclusive education and improve academic performance for children with hearing impairments. It underlined the importance of family engagement, which the LGU might foster through community-based activities and partnerships.

**Researcher.** This study was valuable to researchers, particularly those in education, special education, and disability studies, because it added to the growing body of knowledge on the relationship between parental involvement and the academic performance of learners with hearing impairments in a localized context.

**Future Researchers.** This study served as a useful reference material for future researchers interested in examining the connection between parental engagement and learning experiences of students with hearing disabilities. It contributed to the academic foundation upon which more advanced, broader, or comparative studies could be built.

## **RESEARCH METHODOLOGY**

This part reiterated the research methodology and procedures. This section also covered the study's scope, population and sample, sampling technique and sample size, statistical data treatment, and ethical considerations.

### **Design**

This study used a descriptive correlational approach for analysis and presentation. It aimed to describe the correlation between the parental involvement and the problems parents encountered in rearing their children who are deaf. The researcher collected and analyzed all the needed data through a survey questionnaire. The respondents also gave their honest responses on the problems they had encountered in rearing towards their deaf children. The data gathered served as the basis in describing the correlation of the respondents' parental involvement and the problems they had encountered. Thus, the collected and analyzed data tried to check if there was a link between them.

### **Flow of the Study**

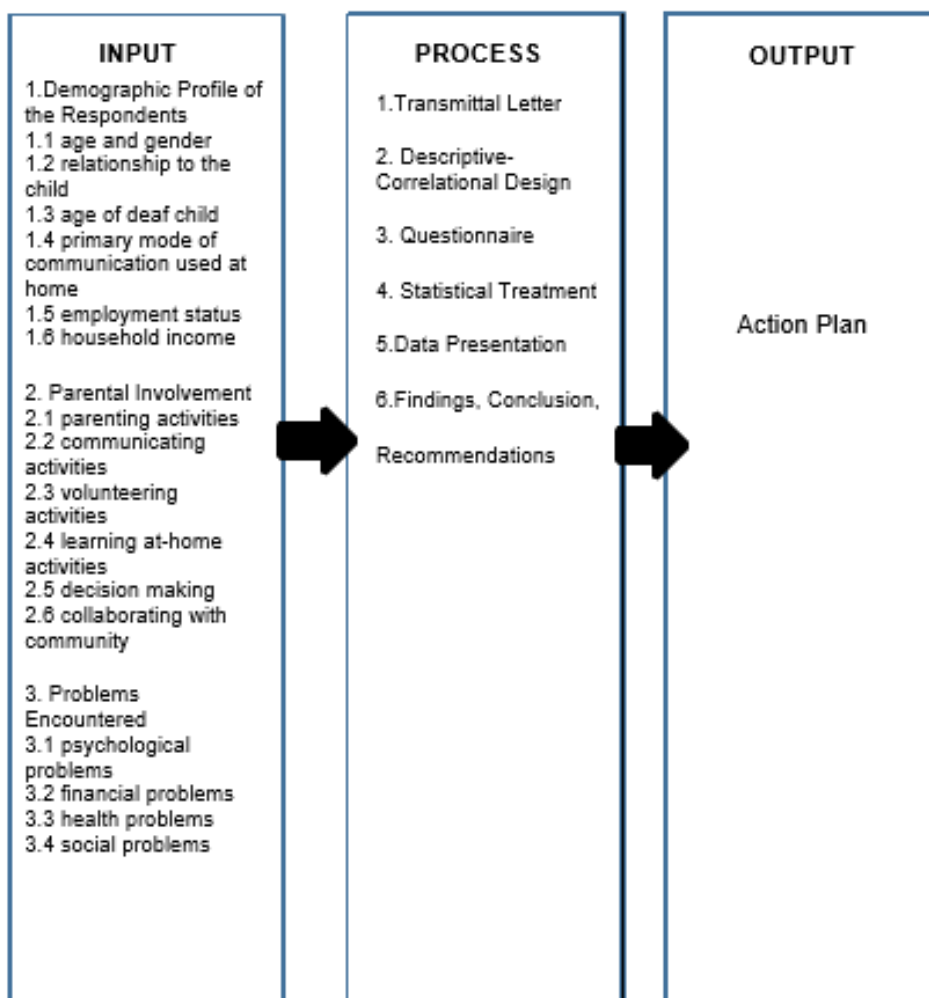
This study desired to discover the parent's involvement that impacted on their deaf children's academic performance. The Input-Process-Output (IPO) model was followed to successfully perform this research, as seen in Figure 2.

**Input.** This phase focused on gathering essential data on the respondents, such as their demographic profiles, the level of their parental involvement, and the difficulties they faced in parenting their deaf children. Furthermore, it sought to investigate the important connections between these characteristics in order to better understand how one affected the others.

**Process.** In this stage, a descriptive correlational approach was used to collect and scrutinize the necessary data. This involved sending out transmittal letters to the different SDS of the different schools, gathering of data through various means, and performing statistical analysis and

interpretation. This step was crucial for transforming raw data into meaningful insights that could inform decision-making.

**Output.** The final phase was the creation of an action plan based on the analyzed data. The action plan aimed to address the identified problems the respondents had encountered in rearing towards their deaf children in order to support their academic performance.



**Figure 2.** The Flow of the Study

### Environment

This study took place at Mandaue City Central Special Education School, Mandaue City, Cebu. The researcher chose this location for convenience, as it is near her workplace. Additionally, the location was deemed appropriate for the study because the school allowed for data collection on parental involvement and its relationship with the academic performance of deaf students.

Mandaue Special Education started in 1970 under the umbrella of Mandaue City Central School. It had only one class for learners with Intellectual disabilities (ID) known as mental retardation. In the academic year 2016-2017, the program was opened in the first roll out of the Senior High School K to 12 Program Nationwide. The Mandaue SPED Center High School -Senior High School opened its program in June 2016. It offered TVL track in HE and IA, with specializations in Cookery and Carpentry. There were 14 students who were officially enrolled during that time. There were 5 hearing impairment students and 9 Intellectually Disability students. The school nowadays, has a population range of almost 500. In school year 2024-2025, there were 37 students enrolled in hearing impairment (HI) from Grade 7 to 10. While there were 47 students enrolled in intellectual disability (ID) from Grade 7 to 10.



Figure 3. Location Map of the Research Environment

### Respondents

The study used random sampling for selecting the respondents were the parents of hearing-impaired students of Mandaue City Central Special Education School, Mandaue City, Cebu in Mandaue City Division.

Table 1. Distribution of Respondents

Mandaue City Central SPED School	Frequency	%
Mother	19	55.88
Father	5	14.71
Guardian	6	17.65
Sister	3	8.82
Brother	1	2.94
<b>Total</b>	<b>34</b>	<b>100.00</b>

## **Instruments**

In determining the respondents' demographic profile, parental involvement, and problems encountered in rearing towards their deaf children, the researcher utilized standardized questionnaires that underwent validation and reliability tests by the research adviser and panel members; it relied on an extensive literature analysis aimed at collecting data and insights about knowledge, and institutional resources preferred by the respondents. The questionnaires consist of three parts: Part I described the demographic profile of the respondents in terms of: age, gender, relationship to child, age of child, primary mode of communication used at home, occupation, and household income. Part II dealt with parental involvement. The questionnaire was composed of 40 items that were answerable by 4-strongly agree; 3-agree; 2-disagree; and 1-strongly disagree. Part III was composed of 27 questions on the problems that parents encountered in rearing their children that were answerable by 4-strongly agree; 3-agree; 2-disagree; and 1-strongly disagree. To make sure that the standard items were used correctly and that the right citations were followed, discussions were held with the adviser and experts.

## **Data Gathering Procedure**

**Preliminary Stage:** Transmittal letter (Appendix A) was presented to the School Principal of Mandaue City Central Special Education School seeking approval to conduct the study. In the letter, the study was explained and its purpose as well. The researcher patiently waited and made follow-ups to ensure that the transmittal letter would be approved prior to the conduct of the study. The researcher also obtained consent from the respondents before the conduct of the study.

**Data Gathering Stage:** Both the respondents and the school head formally consented the conduct of this study. To safeguard the privacy of the information collected from the respondents, the data gathered were used solely for this study. The confidentiality of the data collected about parental involvement and its impact on the academic performance of their children with hearing impairments was assured to the respondents. The honest responses of the respondents in the survey questionnaire replies were utilized.

**Post Data Gathering Stage:** After all the needed data were gathered, treatment, analyzation, and interpretation of these data were done with the help of a professional. Results and findings were presented in tabular form and interpretation of data were summarized and presented.

## **Statistical Treatment**

All data collected were summarized, analyzed, and treated with the proper statistical tests needed through the guidance and supervision of an expert. The researcher computed the weighted mean, frequency count, percentages, standard deviation, and Pearson's r test.

**Weighted mean.** This is used to calculate an average when the values being averaged have different levels of importance or frequency.

**Frequency count.** This is used to show how often a specific value or category appears in a data set.

**Percentage.** This provides a standardized way of expressing proportions or comparisons, making data easier to understand and communicate relative data.

**Standard deviation.** This is used to measure how much individual data points deviate from the mean of a dataset.

**Pearson's r test (also called the Pearson correlation coefficient).** This is a statistical method used to measure the strength and direction of a linear relationship between two continuous variables.

In this study, it was used to analyze and summarized the relationship between parental involvement and the problems encountered by respondents in rearing towards their deaf children.

## **Ethical Considerations**

In conducting the study, the researcher secured that the privacy of the respondents was respected and honored. Prior to answering the survey questions, the researched instructed the respondents to

fill out the consent form. The purpose of the consent form was that the participants were given sufficient information about the study by the researcher, allowing them to grasp the benefits of their involvement. Furthermore, this provide respondents the assurance that any data gathered and obtained from them was solely available to authorized personnel.

By removing data fabrication or falsification, this study carried ethical significance for tackling and advancing the quest for knowledge and truth. The individuals involved in this study were well-informed about the goal, duration, and procedure of the study in order to prevent such risks. The respondents completed control over whether or not you want to take part in this study. If the respondents choose not to engage in the study, they would not be coerced into doing so. Respondents had the option to leave the study for any reason. Respondents were not under any obligation to continue. If participants decline or leave the study, there won't be any negative effects. The researcher followed ethical research considerations throughout the survey processes. The identities and sensitive information of every respondent were safeguarded by the researchers.

### **Scoring Procedure**

The collected data from the respondents were assigned weights between one to four, with one being the least and four the most on scale. The verbal equivalents of the numerical scores are presented in the subsequent scale.

To measure the responses on parental involvement, the following categories, parameters, and interpretation were used.

This table below shows a scale for interpreting parameter values. A weight of 4 (parameters 3.26-4.00) indicates the parameters are always involved; a weight of 3 (parameters 2.51-3.25) means sometimes involved; 2 (parameters 1.76-2.50) means rarely involved; and 1 (parameters 1.00-1.75) means never involved.

<b>Weight</b>	<b>Parameters</b>	<b>Verbal Interpretation</b>
4	3.26-4.00	Always Involve
3	2.51-3.25	Sometimes Involve
2	1.76-2.50	Rarely Involve
1	1.00-1.75	Never Involve

- **Always Involve (3.26-4.00):** This indicates a very high level of involvement. Parents or guardians are consistently engaged in activities. Their participation is considered essential and expected at all times.
- **Sometimes Involve (2.51-3.25):** This reflects a moderate level of involvement. Parents or guardians are engaged occasionally or when deemed necessary. Their input is valued by not consistently required.
- **Rarely Involve (1.76- 2.50):** This suggests a low level of involvement. Parents or guardians are seldom included in activities. Their participation may occur under specific circumstances but is generally infrequent.
- **Never Involve (1.00-1.75):** This denotes no involvement. Parents or guardians are excluded from activities, and their participation is neither considered nor expected.

To measure the responses on the problems that parents encounter in rearing their children who are deaf, the following categories, parameters, and interpretation were used.

This table below shows a scale for interpreting parameter values. A weight of 4 (parameters 3.26-4.00) indicates the parameters are always encounter; a weight of 3 (parameters 2.51-3.25) means sometimes encounter; 2 (parameters 1.76-2.50) means rarely encounter; and 1 (parameters 1.00-1.75) means never encounter.

Weight	Parameters	Verbal Interpretation
4	3.26-4.00	Always Encounter
3	2.51-3.25	Sometimes Encounter
2	1.76-2.50	Rarely Encounter
1	1.00-1.75	Never Encounter

- **Always Encounter (3.26-4.00):** This indicates that the parents or guardians encounter the situation very frequently or consistently.
- **Sometimes Encounter (2.51-3.25):** This suggests occasional exposure; the experience is present but not consistent for parents or guardians.
- **Rarely Encounter (1.76-2.50):** This reflects infrequent exposure; parents or guardians seldom experience the situation.
- **Never Encounter (1.00-1.75):** This denotes no exposure; parents or guardians do not experience the situation at all.

## DEFINITION OF TERMS

To comprehend and value this study, the subsequent terms were defined operationally.

**Action Plan.** A proposed strategy or course of action. A detailed outline of the specific steps, resources, and timelines needed to achieve the research objectives.

**Atypical Children.** Children who might be delayed in reaching developmental milestones or exhibit behaviors that are unusual or out of line with what's expected for their age.

**Bureaucratic Systems.** A government uses a structured management system with clear lines of authority and defined roles to handle its daily operations.

**Foster Inclusivity.** Actively promoting and creating environments where the learners feel welcome, respected, and valued, regardless of their background or identity inside the classroom.

**Hearing Impairment.** A partial or total inability to hear, which can affect communication, socialization, and learning processes.

**Inclusive Education (IE).** Educating all children, regardless of their individual needs or circumstances, within the same learning environment. This includes children with disabilities, those from diverse backgrounds, and those with additional learning needs.

**IRR of the law.** The Implementing Rules and Regulations (IRR) are guidelines, procedures, and established standards that cover all the mandated functions and duties of the Philippine Competition Commission

**Microsystem.** A system that encompasses a child's immediate environment like family, neighborhood and school that has a direct impact on their development.

**Neurodiversity.** A way to think about how everyone has different brains and behaviors.

**Neurotypical.** An informal term used to describe to someone whose cognitive abilities are deemed normal or standard by societal norms.

**Parent-child relationships.** A child's cognitive, social, and emotional growth depends on having parents who are caring, attentive, and helpful.

**Parental Involvement.** Parent's active involvement and participation in their children's education, including communicating with educators, participating school events, and fostering learning at home.

**Primary Caregivers.** The individual who bears the main responsibility for caring for someone who needs assistance, whether due to illness, disability, aging, or other factors. This person is often a family member but can also be a trained professional or another individual.

**Self-efficacy.** An individual’s confidence in their capacity to effectively execute a particular task or achieve a particular objective.

**Social Integration.** Including students with disabilities in general education settings with their non-disabled peers, fostering a sense of belonging and acceptance.

**Typical Children.** Children whose development generally aligns with established developmental milestones and patterns for their age.

**CHAPTER 2**

**PRESENTATION, ANALYSIS AND INTERPRETATION OF DATA**

This chapter provided the interpretations and analyses of the data collected from the study defining the characteristics of the respondents in terms of their age, gender, relationship to the child, age of deaf child, primary mode of communication used at home, employment status, and household income. This also assessed the parent’s involvement in terms of: parenting activities, communicating activities, volunteering activities, learning at-home activities, decision-making, and collaborating with community. Additionally, this section examined the extent of the problems they have encountered in rearing their children who are deaf, in terms of: psychological problems; financial problems; health problems; and social problems. Furthermore, the significant relationship of the parental involvement and the problems parents encountered in rearing their children who are deaf. Based on the respondents’ feedback to the survey questionnaires, the results and findings are presented and discussed as follows:

**PROFILE OF THE RESPONDENTS**

This section showed the profile of the respondents in terms of their age, gender, relationship to the child, age of deaf child, primary mode of communication used at home, employment status and monthly household income.

**Age and Gender**

Age and gender are considered as important factors that must be identified in this research, as they might aid in interpreting the study’s findings. The data collected are depicted in Table 2 below.

**Table 2. Age and Gender of the Respondents**

Age (in years)	Female		Male		Total	
	f	%	f	%	f	%
60 and above	3	8.82	0	0.00	3	8.82
50-59	2	5.88	2	5.88	4	11.76
40-49	9	26.47	3	8.82	12	35.29
30-39	9	26.47	2	5.88	11	32.35
20-29	4	11.76	0	0.00	4	11.76
<b>Total</b>	<b>27</b>	<b>79.41</b>	<b>8</b>	<b>23.53</b>	<b>34</b>	<b>100.00</b>

Table 2 provided an overview of the age and gender distribution of the respondents. The majority of the respondents are between 40 and 49 years of age (35.29%), followed by those between 30 and 39 years (32.35%). Together, these two age groups represent over 67% of the total respondents, indicating a concentration of respondents in the middle-aged categories. The next most significant group is the 50-59 age category, which accounts for 11.76% of the total respondents. The 60 and above age group has a very low representation, with only 3 respondents, representing 8.82% of the total. The 20-29 age group also has a relatively low representation, with 4 respondents, making up 11.76% of the total. A substantial gender imbalance is observed in the data, with 79.41% of the respondents being female (27 females), while only 23.53% are male (8 males). The age group with the highest representation of female respondents is the 40-49 age range, where 9 females (26.47%) were included. In conclusion, the data suggests a gender imbalance, with a higher number of female respondents, particularly in the 30-49 age categories, while male representation is sparse, especially in the older age groups.

This gender and age pattern reflects findings from previous studies that indicate higher female participation in community-based or survey research. For instance, Del Rosario and Resurreccion (2020) observed that women, especially in their mid-30s to late 40s, are more likely to engage in community health and education initiatives in the Philippines. Similarly, Alampay et al. (2019) found that middle-aged Filipino women often serve as key informants due to their roles in households and communities, making them more available and willing to participate in surveys and research.

### **Respondent’s Relationship to the Child**

The relationship of the respondents to their children is viewed as a significant variable that must be established in this study, potentially aiding in the interpretation of the findings. Data gathered are presented in Table 3 below.

**Table 3. Respondents’ Relationship to the Child**

Relationship to the child	f	%
Mother	19	55.88
Father	5	14.71
Guardian	6	17.65
Sister	3	8.82
Brother	1	2.94
<b>Total</b>	<b>34</b>	<b>100.00</b>

Table 3 presented that the largest group of respondents is the mothers, who make up 55.88% of the total. This suggests that the majority of the parental involvement in the study is provided by mothers. The total number of respondents is 34, with the majority (about 56%) being mothers, followed by guardians (17.65%). Table 3 highlights that in the context of children with hearing impairments, mothers are the most frequent respondents, indicating their primary role in the child’s academic life and support. Bono et al. (2016) included time spent with the mother as a factor when seeking determinants of early childhood development and child success. They found that maternal time is one crucial factor in a child’s success, particularly early maternal time on the development of their cognitive skills. They also discovered that the impact diminishes as the child gets older. Moreover, Del Boca et al. (2017) concentrated on mothers regarding maternal work and child outcomes. They discovered that the impact of maternal employment is unclear.

### **Age of Deaf Child**

The children’s ages of the respondents are also considered as a significant variable that must be determined in this study which might assist in elucidating the study’s findings. The information collected is shown in Table 4 below.

**Table 4**  
**Age of Deaf Child**

Age (in years)	f	%
18 and above	11	32.35
13-17	11	32.35
9-12	8	23.53
5-8	4	11.76
<b>Total</b>	<b>34</b>	<b>100.00</b>

Table 4 showed that eleven children (32.35%) fall into the 18 and above age group. This represented the largest category in the table. The data showed that the respondents’ children are spread across a wide age range, with the largest groups being those aged 18 and above and 13-17

years old. This suggested that the study includes a diverse set of parents, with children in different stages of their educational journey, from adolescence to early adulthood. The fact that both the 18+ and 13-17 age groups make up the majority of the respondents' children (64.70%) indicates a strong focus on adolescent and older children in this study, likely reflecting ongoing parental involvement in education during these critical periods. In summary, Table 4 revealed that a significant portion of the respondents' children are in the adolescent age groups (13-17 and 18 and above), suggesting that the study likely involves parents who are engaged in supporting their children through critical stages of academic and social development. These age groups may face unique challenges and opportunities in terms of educational involvement, especially for children with hearing impairments, where continued advocacy, specialized support, and resources are essential for academic success. The presence of younger children (5-8 and 9-12 years old) also highlights the importance of early educational intervention and ongoing parental engagement. According to Sanderson & Stout (2025) found that parental awareness of adult disability services is crucial during the transition from school-based to adult services. Their study revealed that older child age was a strong predictor of increased parental awareness, emphasizing the importance of parental input in transition planning for young adults with disabilities. Pew Research Center (2024) conducted a comprehensive study on the relationship between parents and their young adult children aged 18 to 34. The ongoing role of parents in helping young adults navigate higher education, career decisions, and social development.

### **Respondents' Primary Mode of Communication Used at Home**

The primary mode of communication used at home is an important variable which must be identified in this study that might help in clarifying the study's findings. The data gathered are displayed in Table 5 below.

**Table 5**  
**Primary Mode of Communication Used at Home**

Mode of Communication	f	%
Sign Language	14	41.18
Spoken Language	5	14.71
Both	14	41.18
No Response	1	2.94
<b>Total</b>	<b>34</b>	<b>100.00</b>

Table 5 provided data on the primary mode of communication used at home by the respondents when interacting with their child. Fourteen respondents (41.18%) primarily use sign language as their mode of communication. Five respondents (14.71%) communicate with their child using spoken language. This group may include parents or caregivers who rely on verbal communication, possibly because the child has some residual hearing or uses hearing aids, cochlear implants, or other assistive technologies that make spoken language more accessible. Another 14 respondents (41.18%) use both sign language and spoken language. This represents a flexible approach to communication, incorporating both verbal and visual forms. Bilingual communication (sign language and spoken language) is often a highly effective strategy for children with hearing impairments, as it enables them to access a broader range of communication methods and better engage in both the deaf and hearing communities. Only 1 respondent (2.94%) reported no response regarding their mode of communication. This suggests that the overwhelming majority of respondents are consciously aware of and actively use a form of communication with their child. The small percentage of "no response" may be due to the respondent not being sure of their preferred mode or a lack of clarity in how they communicate with their child. The use of both languages (spoken and sign language) by nearly half of the respondents highlights the adaptability

and importance of a multimodal communication approach in helping children with hearing impairments navigate both their educational and social worlds.

Table 5 illustrated that the predominant modes of communication used by respondents are sign language and a combination of sign language and spoken language, each accounting for 41.18% of responses. This suggests that sign language is an essential tool for the majority of respondents in supporting communication with their children with hearing impairments. Many deaf children are born to hearing parents who lack any prior understanding of a sign language. There are many benefits to hearing parents learning American Sign Language (ASL) for their deaf children, which is a fully accessible language for sighted deaf children. Families who learn sign language with their deaf child report increased communication between the deaf child and their family, Calderon (2000); Oyserman and de Geus (2021). Walker et al. (2010) explained that despite the fact that parental involvement in the educational process has a significant influence on the system as a whole, there are a number of challenges blocking its widespread adoption. It is essential for family and friends of deaf or hard of hearing children to learn sign language in order to enhance their ability to communicate with them.

### **Respondents' Employment Status**

The respondents' employment status is also regarded as an essential variable that needs to be identified in this study which might help in explaining the results of the study. The data gathered are displayed in Table 6 below.

**Table 6**  
**Employment Status**

Status	f	%
Employed	14	41.18
Self-employed	4	11.76
Unemployed	13	38.24
Others	3	8.82
<b>Total</b>	<b>34</b>	<b>100.00</b>

Table 6 provided data on the employment status of the respondents, categorizing them into: employed, self-employed, unemployed, and others. Fourteen respondents (41.18%) are employed. This is the largest group in the table, suggesting that a significant portion of the respondents has formal jobs, which may provide them with a steady income and access to resources that can support their child's education, especially for children with hearing impairments. Four respondents (11.76%) are self-employed. This group might have more flexible working hours compared to those who are employed in traditional jobs. Self-employed parents may have the ability to balance work with caregiving responsibilities, potentially offering them more time to support their child's educational needs. Thirteen respondents (38.24%) are unemployed, which represents a significant portion of the group. Unemployment may present financial challenges, which could impact the resources available for the child's education or care. This group may face more economic hardships in providing specialized care or education for children with hearing impairments. Three respondents (8.82%) fall into the "Others" category, which could include a range of occupations not captured by the previous categories. This may involve part-time or irregular work, caregiving roles, or other unique employment situations.

The data showed a relatively balanced distribution of respondents across different employment statuses, with a significant portion being employed (41.18%), a smaller portion self-employed (11.76%), and almost as many unemployed (38.24%). This suggests a mix of economic situations among the respondents, with some parents having greater financial stability (employed) and others potentially facing challenges (unemployed). Table 6 highlights a diverse set of employment statuses

among the respondents. While the largest group of respondents is employed (41.18%), there is also a substantial proportion that is unemployed (38.24%). A smaller group is self-employed (11.76%) or engaged in other forms of work (8.82%). The overall diversity in occupation underscores the varying socio-economic contexts in which these families are supporting their children’s academic success.

According to Labarca and Reyes (2021), parents—particularly mothers—of children with disabilities in the Philippines often reduce working hours or stop working altogether to become full-time caregivers, contributing to higher unemployment rates among this group. De Jesus and Tamayo (2022) reported that nearly 70% of mothers caring for children with developmental delays experienced long-term disruptions in employment, citing the lack of accessible support services and inclusive workplace policies. This aligns with the findings of Labarca and Reyes (2021) and reinforces the trend that caregiving disproportionately affects mothers. Meanwhile, Alvarez and Gomez (2023) explored the effects of caregiving in rural Filipino communities, where the absence of government-provided respite care further limited parents' ability to maintain employment.

### **Respondents’ Household Income**

The respondents’ household income is also regarded as a significant variable that needs to be determined in this study which could help in understanding the results of the study. Data gathered are shown in Table 7.

**Table 7**  
**Respondents' Household Income**

Monthly Income	f	%
50,001 or more	1	2.94
40,001-50,000	0	0.00
30,001-40,000	0	0.00
20,001-30,000	4	11.76
10,001-20,000	5	14.71
5,001-10,000	8	23.53
500-5000	7	20.59
less than 500	3	8.82
No Response	6	17.65
<b>Total</b>	<b>34</b>	<b>100.00</b>

Table 7 provided a breakdown of the respondents' household monthly income, categorized into various income brackets. Only 1 respondent (2.94%) reported a monthly income of 50,001 or more. This indicates that a very small portion of the respondents belong to a high-income bracket, suggesting that the majority of the respondents may face financial constraints when it comes to supporting their child’s education and other needs. No respondent (0.00%) fall into the income brackets of 40,001-50,000 and 30,001-40,000. Four respondents (11.76%) reported a monthly income in the range of 20,001-30,000. This is a moderate-income group, where families may have some flexibility in managing daily expenses and potentially affording some extra services or resources for their children. Five respondents (14.71%) fall into the 10,001-20,000-income bracket. Eight respondents (23.53%) fall into the 5,001-10,000-income range, which is one of the larger groups. This bracket represents families who are likely to face significant financial constraints, making it difficult to afford additional educational resources, therapies, or accommodations that a child with hearing impairments may require. Seven respondents (20.59%) reported a monthly income of 500-5,000, which is a low-income range. Three respondents (8.82%) have a monthly income of less than 500. Six respondents (17.65%) did not provide any information about their monthly income. The majority of the respondents (over 60%) fall within lower income brackets, specifically in the ranges of 500-5,000 and 5,001-10,000. Table 7 showed that the majority of

respondents come from households with relatively low monthly incomes, with a significant proportion earning between 500-5,000 or 5,001-10,000.

Families experiencing poverty frequently approach decision-making in ways that differ significantly from families with greater financial and social resources (Sheeshy-Skeffington & Rea, 2017); their logical choices may seem irrational to professionals lacking personal experience with low-income living. Choices affecting early childhood can be challenging for any family, especially for those with limited financial resources. However, access to information and the capacity to make prompt decisions are essential in influencing results regarding the success of one or more languages (Ching et al., 2017).

### **LEVEL OF PARENTAL INVOLVEMENT**

This section outlined the parents’ involvement in terms: parenting activities, communicating activities, volunteering activities, learning at-home activities, decision-making and collaborating with community.

#### **Parenting Activities**

Parenting Activities are a crucial aspect of this study. These activities refer to the actions, behaviors, and engagement strategies that parents undertake to support their child's education and overall well-being, particularly in the context of children with hearing impairments. Data gathered are shown in Table 8 below.

**Table 8**  
**Level of Parents' Involvement in terms of Parenting Activities**

S/N	Indicators	WM	SD	Verbal Description
1	I monitor the way my child/ children spends his/her time outside of school.	3.44	0.75	Highly Involved
2	As a parent, I make available/provide learning resource materials such as pens, pencils, Braille and sign language books, calculators, and others	3.62	0.49	Highly Involved
3	As a parent, I make available/provide learning resource materials such as pens, pencils, Braille and sign language books, calculators, and others	3.62	0.49	Highly Involved
4	I strictly monitor my child's/ children's relationship with his/her peer groups reasonably.	3.47	0.61	Highly Involved
5	I send my child/children to school clean and well-fed.	3.76	0.43	Highly Involved
6	I keep a regular morning and bedtime schedule for my child	3.62	0.55	Highly Involved
7	I maintain clear rules at home that my child should obey.	3.68	0.59	Highly Involved
8	As a parent, I establish age and grade-appropriate home conditions that support my child's learning	3.59	0.56	Highly Involved
9	I limit my child's/ children's TV watching at home.	3.29	0.80	Highly Involved
<b>Aggregate Mean</b>		<b>3.57</b>		
<b>Aggregate Standard Deviation</b>			<b>0.59</b>	<b>Highly Involved</b>

**Legend:** 3.25-4.00-Highly Involved ; 2.50-3.24- Involved ; 1.75-2.49- Less Involved ; 1.00-1.74- Not Involved

Table 8 presented the level of parental involvement in various parenting activities. Based on the indicators provided, all activities fall within the Highly Involved category, as they all have mean scores (WM) above 3.25. Parents are highly involved in monitoring how their child spends time outside of school, with a mean score of 3.44, indicating that they actively ensure their child engages in productive activities beyond academics. The relatively high standard deviation (0.75) suggests some variability in how consistently parents monitor their child’s activities outside school, with some parents perhaps more attentive than others. Overall, the table suggests that parents in this study are highly involved in their child’s education and personal development. They engage in a variety of activities such as monitoring their child’s time outside of school, providing learning

materials, ensuring the child is well-prepared for school, maintaining a structured home environment, and limiting distractions like TV watching. In an online website *Aussie Deaf Kids, Parenting Deaf Kids with Additional Needs* (2025) said that parenting a deaf child with additional needs is similar and different to parenting any other child. When differences arise, challenges typically follow, making support and guidance from fellow parents extremely valuable. Therefore, parental involvement in their children's activities is essential in supporting them.

### Communicating Activities

Communicating activities play a crucial role in determining how effectively parents support their children's education, particularly for students with hearing impairments. It is an important variable in explaining the results of this study. Table 9 showed the data gathered.

**Table 9**  
Level of Parents' Involvement in terms of Communicating Activities

S/N	Indicators	WM	SD	Verbal Description
1	I follow up on messages which the teacher sends me about my children or the school.	3.50	0.71	Highly Involved
2	I talk to my child's teacher about the classroom rules and regulations.	3.38	0.74	Highly Involved
3	I talk with my child's teachers or principals about disciplinary problems at school.	3.50	0.56	Highly Involved
4	I attend conferences with the teachers to talk about my child's learning.	3.32	0.68	Highly Involved
5	I have a regular schedule of useful notices, memos, phone calls, and other communications.	3.12	0.84	Involved
6	I talk to my child's/children's teacher about his/her daily school routine and class schedule.	3.35	0.69	Highly Involved
7	I attend sign language, Braille, life skill, and other related training sessions organized by the school.	2.94	0.74	Involved
8	I involve myself in an organized, ongoing, and timely way in the planning, review, and improvement of programs for my child's learning.	3.24	0.74	Involved
9	I ask the teachers about my child's strengths & weaknesses and talents.	3.41	0.66	Highly Involved
10	I contact the teachers and principals to get information concerning my child's learning at school regularly.	3.26	0.79	Highly Involved
<b>Aggregate Mean</b>		<b>3.30</b>		
<b>Aggregate Standard Deviation</b>			<b>0.72</b>	<b>Highly Involved</b>

Table 9 presented the level of parental involvement in various communication activities with respect to their children's education. Parents report being highly involved in following up on messages from teachers about their child or the school, with a mean score of 3.50. This shows that parents are actively engaged in maintaining communication with the school, ensuring they are aware of important updates. The standard deviation (0.71) indicates moderate variation in how consistently parents follow up on these communications. With a mean of 3.12, this indicates that while parents are generally engaged, the consistency of communication may vary slightly. The higher standard deviation (0.84) suggests that some parents may experience more regular communication than others. Parents are highly involved in discussing their child's daily school routine and class schedule with their teachers, as indicated by a mean of 3.35. Parents are highly involved in regularly contacting teachers and principals to get information about their child's learning at school, as indicated by a mean of 3.26. The higher standard deviation (0.79) suggests that while most parents engage in regular contact, the frequency of this contact may vary across families. Overall, the table illustrates that parents are generally highly involved in communicating with their child's teachers and school, especially in areas directly related to their child's learning and well-being. Lau et al. (2021) told that it is within parents' grasp to aid their special-needs children in realizing their full potential, evolving into competent, independent, and self-satisfying individuals,

and living meaningful lives. If their parents maintain an open channel of communication with them, their children may develop self-awareness, proactive behaviour, goal planning, and emotional coping methods.

### Volunteering Activities

Volunteering Activities are key aspects of parental involvement, offering a range of benefits to students, parents, and the school community. Volunteering in school activities and supporting educational programs for children with hearing impairments can significantly enhance academic outcomes and create a more inclusive environment. Data gathered are presented in Table 10.

**Table 10**  
**Level of Parents' Involvement in terms of Volunteering Activities**

S/N	Indicators	WM	SD	Verbal Description
1	I participate in fundraising activities voluntarily.	2.97	0.80	Involved
2	I volunteer for my children's classroom (in a classroom, materials preparation, etc.).	3.15	0.78	Involved
3	I initiate contact with the teachers concerning my children's learning voluntarily.	3.26	0.71	Highly Involved
4	I attend extracurricular activities, assemblies, celebrations, and other events voluntarily.	3.26	0.75	Highly Involved
5	I talk to teachers to create flexible volunteering and school events schedules.	3.26	0.62	Highly Involved
6	I take my child to the library and to other places which help in educating him/her with my initiation.	3.12	0.77	Involved
<b>Aggregate Mean</b>		<b>3.17</b>		
<b>Aggregate Standard Deviation</b>		<b>0.74</b>		<b>Involved</b>

Table 10 examined the level of parental involvement in volunteering activities that support their child's educational experience. Parents report being involved in fundraising activities with a mean score of 2.97. This indicates that while parents do participate in fundraising efforts, the level of participation may not be as high as in other volunteering activities. The standard deviation (0.80) suggests there is moderate variability, with some parents more actively engaged in these activities than others. Parents report being highly involved in initiating contact with teachers concerning their children's learning, with a mean score of 3.26. The standard deviation of 0.71 suggests moderate variation in how often parents take this proactive step. Parents show high involvement in attending extracurricular activities, assemblies, celebrations, and other school events, with a mean score of 3.26. The standard deviation (0.75) indicates some variability in participation, though most parents are actively involved. Parents are highly involved in discussions with teachers to create flexible schedules for volunteering and school events, as indicated by a mean of 3.26. The lower standard deviation (0.62) suggests that there is less variation in this activity, with most parents actively engaging in these conversations with teachers. Overall, the data suggests that parental involvement in volunteering activities is significant and contributes positively to the educational experience of students with hearing impairments. Parents are most highly involved in initiating contact with teachers, attending extracurricular activities, and discussing volunteering schedules. Santos and Marcelo (2021) found that active parental participation, particularly in low-income Filipino households, significantly reduces behavioral issues such as disruptive play and enhances classroom engagement. In a similar vein, Wang and Li (2023) emphasized that consistent parental engagement—through monitoring schoolwork, communicating with teachers, and providing emotional support—fosters a stronger sense of academic self-efficacy among students, which in turn boosts their motivation and performance.

### Learning at-Home Activities

Learning-at-home activities are critical as they portray a significant role in reinforcing and complementing what students learn at school. Data gathered are projected in Table 11.

**Table 11**  
**Level of Parents' Involvement in terms of Learning at-Home Activities**

S/N	Indicators	WM	SD	Verbal Description
1	I look over and express concern for my children's school work which they bring home.	3.29	0.87	Highly Involved
2	I try to help and monitor my children in a positive way with homework and other activities at home	3.50	0.71	Highly Involved
3	I talk to my child about his/her learning at home.	3.50	0.66	Highly Involved
4	I support my child in curriculum-related activities and in setting goals at home.	3.47	0.66	Highly Involved
5	I bring home learning materials for my child (tapes, videos, books).	3.26	0.79	Highly Involved
6	I read with my children on a daily basis at home.	3.12	0.91	Involved
<b>Aggregate Mean</b>		<b>3.36</b>		
<b>Aggregate Standard Deviation</b>			<b>0.77</b>	<b>Highly Involved</b>

Table 11 gave an overview on the level of parental involvement in learning-at-home activities with their children. With a mean of 3.50, parents are highly involved in helping and positively monitoring their children's homework and other activities at home. The standard deviation (0.71) indicates moderate variability, but the overall involvement in this activity is notably high, suggesting that most parents prioritize supporting their children's homework completion. The mean score of 3.50 shows that parents are highly involved in discussing learning at home with their children. The relatively low standard deviation (0.66) suggests consistent involvement in this activity among most parents. Overall, the data from Table 11 shows that parents are highly involved in various learning-at-home activities, which are crucial for supporting their child's educational success. Reyes and Salcedo (2021) emphasized that when parents actively support their children's interests and educational goals, particularly those with disabilities, children tend to develop stronger self-confidence and greater adaptability in academic environments. Nakamura et al. (2022) found that children with H.I. show improved language acquisition and social skills when their families are consistently engaged in both formal education and home-based learning interventions.

### Decision Making

Decision-making is vital for influencing the academic and personal growth of students with hearing impairments. Data gathered presented in Table 12.

**Table 12**  
**Level of Parents' Involvement in terms of Decision Making**

S/N	Indicators	WM	SD	Verbal Description
1	I engaged in deciding matters relating to the discipline of my children.	3.56	0.66	Highly Involved
2	I participate in revising the school curricula, individual education plan (IEP), and other activities to support my child's learning.	3.06	0.81	Involved
3	I attend and decide on organized family-school associations at my children's school (e.g., PTA and IEP meetings).	3.29	0.76	Highly Involved
4	I Involved in decision making in school regarding development projects, fees, and teacher employment/firing.	3.29	0.72	Highly Involved
5	I have clear information on all school policies, programs, reforms, and transitions for the decision making process.	3.29	0.80	Highly Involved
<b>Aggregate Mean</b>		<b>3.30</b>		
<b>Aggregate Standard Deviation</b>			<b>0.75</b>	<b>Highly Involved</b>

Table 12 presented the level of parental involvement in decision-making activities concerning their child's education, specifically focusing on matters related to discipline, school policies, individual education plans (IEP), and family-school associations. Parents were highly involved in decisions relating to their child's discipline, with a mean score of 3.56. The relatively low standard deviation (0.66) indicates that parents are generally consistent in their involvement with this aspect of decision-making, reflecting a shared concern for ensuring that their child develops positive behavior and academic focus. Parents show a good level of involvement in revising school curricula, the individual education plan (IEP), and other learning activities with a mean of 3.06. This level of involvement indicates that parents actively participate in decisions that shape the educational pathway of their children, ensuring that their child's specific needs are addressed. The standard deviation (0.81) reflects moderate variability, meaning that while many parents engage in these decisions, the frequency or depth of involvement may differ across respondents. With a mean of 3.29, parents report being highly involved in attending and contributing to decisions made during family-school association meetings such as PTA and IEP meetings. The standard deviation of 0.76 indicates that while most parents are involved in these meetings, there is some variation in terms of how often they attend or participate. Parents are also highly involved in decisions related to school development projects, school fees, and teacher-related issues, with a mean of 3.29. The standard deviation of 0.72 suggests moderate variation, with some parents being more engaged in these decisions than others. Parents report being highly involved in understanding and making decisions based on clear information about school policies, programs, reforms, and transitions, with a mean of 3.29. The standard deviation of 0.80 reflects moderate variability, suggesting that while many parents are well-informed and actively involved, others may have less access to this information or choose not to engage as deeply. Aftab, et.al, (2022) The involvement and support of parents is critical for the academic success of children who have a hearing impairment. It is common knowledge that a significant amount of participation from parents is necessary for academic achievement.

### Collaborating with Community

Working with the community is crucial in aiding the academic and personal growth of students who have hearing impairments. Data gathered are presented in Table 13.

**Table 13**  
**Level of Parents' Involvement in terms of Collaborating with community**

S/N	Indicators	WM	SD	Verbal Description
1	I meet with other parents at school and discuss issues or concerns about the school and children's learning.	3.29	0.84	Highly Involved
2	I speak up for the school in my community.	2.97	0.90	Involved
3	I serve in identifying and integrating community resources to improve schools, strengthen families, and assist students to succeed.	3.12	0.84	Involved
4	I Participate in income-generating activities in collaboration with other stakeholders.	3.18	0.83	Involved
5	I participate in community and family social activities at my child's school (e.g., sports games, plays, festivals).	3.32	0.68	Highly Involved
<b>Aggregate Mean</b>		<b>3.18</b>		
<b>Aggregate Standard Deviation</b>			<b>0.82</b>	<b>Involved</b>

Table 13 presented the level of parental involvement in activities related to collaborating with the community to support the education of children with hearing impairments. Parents report a moderate level of involvement (WM = 2.97) in advocating for the school within their community. The SD of 0.90 reflects a higher degree of variability, suggesting that some parents are more vocal in advocating for their school than others. With a WM of 3.32, parents are highly involved at their child's school in participating in community and family social activities. The SD of 0.68 indicates a relatively consistent level of involvement across parents, suggesting that these activities are well-

attended and appreciated by the parent community. Table 13 highlighted that parents of children with hearing impairments show moderate involvement in community collaboration efforts. The activities listed in the table indicate that parents actively engage in discussions about their children's learning, support their schools, and participate in social and income-generating activities. While there is a high level of engagement in some areas, there is also some variability in how consistently parents participate in these community-based initiatives. This collaboration is crucial for creating a supportive environment for the academic success of students with hearing impairments, as it strengthens the ties between families, schools, and the broader community.

**Summary on the Level of Parents’ Involvement**

The table presented a summary of the parents’ involvement in terms: parenting activities, communicating activities, volunteering activities, learning at-home activities, decision making, and collaborating with the community.

**Table 14**  
**Summary on the Level of Parents’ Involvement**

Components	WM	SD	Verbal Description
Parenting Activities	3.57	0.59	Highly Involved
Communicating Activities	3.30	0.72	Highly Involved
Volunteering Activities	3.17	0.74	Involved
Learning at-Home Activities	3.36	0.77	Highly Involved
Decision Making	3.30	0.75	Highly Involved
Collaborating with Community	3.18	0.82	Involved
<b>Grand Mean</b>	<b>3.31</b>		
<b>Grand Standard Deviation</b>		<b>0.73</b>	<b>Highly Involved</b>

Table 14 summarized parents' overall involvement in key areas of their children's education, particularly for those with hearing impairments. The highest level of involvement is seen in parenting activities (WM = 3.57), indicating that parents are consistently engaged in supporting their child's well-being and development at home. High involvement is also noted in learning-at-home (WM = 3.36), communication (WM = 3.30), and decision-making activities (WM = 3.30), reflecting strong parental support in academic guidance, school engagement, and collaborative decision-making. Volunteering (WM = 3.17) and community collaboration (WM = 3.18) are rated slightly lower, suggesting moderate participation in school events and advocacy efforts. Standard deviations across categories indicate moderate variability, meaning that while many parents are actively involved, the degree of engagement differs among individuals. Overall, the findings highlight that parents play a crucial and multi-faceted role in the education of children with hearing impairments, particularly within the home and in communication with schools.

In conclusion, Table 14 showed that parental engagement in the education of children with hearing impairments in Mandaue City is generally high across most components. The overall findings suggest that parents are deeply committed to their child’s academic success and well-being, with relatively consistent involvement in most activities. Mendoza and Arriola (2021) emphasized that Filipino parents who are actively engaged in their child’s therapy, home learning, and school partnerships help accelerate language acquisition and social integration.

**EXTENT OF THE PROBLEMS ENCOUNTERED IN REARING DEAF CHILDREN**

This section gave the interpretation of gathered data on the problems the respondents have encountered in rearing their deaf children in terms of: psychological problems, financial problems, health problems, and social problems.

## Psychological Problems

Psychological problems faced by the parents can take part in a outstanding role in shaping their engagement in their children's education and overall well-being. The table below shows the psychological problems the respondents have encountered in rearing their deaf children.

**Table 15**  
Extent of Problems Encountered by the Respondents in Rearing their Child in terms of Psychological Problems

S/N	Indicators	WM	SD	Verbal Description
1	Perceptions about my child's disability	2.76	1.13	Often
2	I felt lonely	2.12	0.84	Sometimes
3	I become aggressive after the birth of my child	2.12	1.09	Sometimes
4	My life changed after having a special child	2.74	1.19	Often
5	I develop a habit of crying easily	2.47	1.11	Sometimes
6	I feel the burden of life	2.12	1.09	Sometimes
7	I have difficulty controlling my emotion after the birth of my child	2.18	1.03	Sometimes
8	I feel anxious and stressed.	2.35	1.04	Sometimes
9	I get fatigued easily	2.26	1.11	Sometimes
<b>Aggregate Mean</b>		<b>2.35</b>		
<b>Aggregate Standard Deviation</b>		<b>1.07</b>		<b>Sometimes</b>

Legend: 3.25-4.00-Always; 2.50-3.24-Often; 1.75-2.49-Sometimes; 1.00-1.74-Never

Table 15 highlighted the psychological challenges faced by parents in raising children with hearing impairments. The most frequent issue reported is difficulty in accepting and understanding their child's condition (WM = 2.76), indicating that many parents often experience emotional distress, such as confusion, sadness, or concern about the future. Significant life changes due to their child's condition are also commonly felt (WM = 2.74). Other psychological issues, including loneliness, aggression, emotional vulnerability, stress, anxiety, and fatigue, are generally experienced sometimes, with mean scores ranging from 2.12 to 2.47. These findings suggest that while parents occasionally struggle with emotional regulation and the burdens of caregiving, the overall experience is marked by periodic psychological strain rather than constant distress. The results underscore the need for emotional support systems and mental health resources tailored to parents of children with hearing impairments.

In a recent study conducted by Ahmad et.al., (2024), on the *Level of Psychological Problems Among the Parents of Deaf Children*, it was discovered that this research highlights the widespread psychological difficulties faced by parents of deaf children, showing that anxiety is the most frequently reported issue, followed by stress and depression. These results highlight the necessity of delivering extensive assistance and resources specifically designed to meet the varied emotional requirements of parents experiencing the distinct path of raising a deaf child. Recognizing and tackling these obstacles allow professionals and support systems to significantly contribute to enhancing the psychological health and resilience of these parents, thereby nurturing better family relationships and improving the overall quality of life for both parents and their children.

## Financial Problems

Financial problems faced by parents are critical aspects to understand the challenges they encounter while raising a child with hearing impairments. Financial difficulties can significantly impact the ability of parents to provide adequate resources, support, and opportunities for their children's education. Table 16 below shows the data gathered

**Table 16**  
Extent of Problems Encountered by the Respondents in Rearing their Child in terms of Financial Problems

S/N	Indicators	WM	SD	Verbal Description
1	I have limited source of income	2.94	1.01	Often
2	My income is insufficient for our needs	2.88	1.04	Often
3	I need help from any financial institutions	2.94	0.95	Often
4	I have financial problems because of caring my child	2.56	1.13	Often
5	I need to cut down expenses	2.59	1.02	Often
6	I am anxious about not meeting the needs of my child	2.76	1.07	Often
<b>Aggregate Mean</b>		<b>2.78</b>		
<b>Aggregate Standard Deviation</b>			<b>1.04</b>	<b>Often</b>

Table 16 highlighted the significant financial challenges faced by parents raising children with hearing impairments. The data shows that many parents often experience limited income (WM = 2.94) and insufficient resources (WM = 2.88) to meet their family's basic needs, which hinders their ability to provide specialized support for their children. A substantial number of respondents report a need for financial assistance (WM = 2.94), reflecting reliance on external support to manage caregiving expenses. Specific financial burdens related to the child's care (WM = 2.56) and the need to cut down on household expenses (WM = 2.59) further demonstrate how caregiving impacts family budgets. Additionally, many parents report anxiety about meeting their child's needs (WM = 2.76), underscoring the emotional toll of financial stress. Overall, the findings reveal that financial strain is a recurring and impactful issue that affects both the economic stability and emotional well-being of families with children who have hearing impairments.

Ramirez and Torres (2021) found that parents with higher educational attainment are more likely to access, understand, and utilize audiological and rehabilitation services for their children, leading to improved outcomes in speech and language development. Similarly, Lee and Gonzales (2022) reported that families with limited financial resources often struggle to meet the specialized needs of deaf children, highlighting the importance of accessible community-based support and educational programs tailored to diverse socioeconomic backgrounds.

### Health Problems

Health problems faced by parents are a critical factor in their ability to effectively support and engage in their child's education. Parents' health issues can impose emotional, physical, and financial strains that may affect their involvement in their child's academic life, particularly for families raising children with hearing impairments who require additional care and resources. Table 17 below shows the data gathered.

**Table 17**  
Extent of Problems Encountered by the Respondents in Rearing their Child in terms of Health Problems

S/N	Indicators	WM	SD	Verbal Description
1	I encounter health problems	2.53	1.13	Often
2	I rely on medicines for my health issues	2.35	1.15	Sometimes
3	I take anti-depressant and anti-anxiety drugs	1.74	0.86	Never
4	I have sleeping disorder	1.82	0.97	Sometimes
<b>Aggregate Mean</b>		<b>2.11</b>		
<b>Aggregate Standard Deviation</b>			<b>1.03</b>	<b>Sometimes</b>

Table 17 outlined the health challenges faced by parents raising children with hearing impairments, highlighting both physical and emotional strain. Many parents report frequent health problems (WM = 2.53), suggesting that caregiving responsibilities often take a toll on their well-being. Some parents occasionally rely on medication (WM = 2.35) to manage these health issues, though the use of anti-depressants and anti-anxiety drugs is generally low (WM = 1.74), indicating that most do not rely on prescription mental health treatments. Sleep disturbances are experienced sometimes (WM = 1.82), pointing to occasional disruptions likely caused by stress and caregiving demands. Overall, while severe mental health issues are not widely reported, the data reflects that parents do face moderate and recurring health challenges related to the physical and emotional demands of raising a child with hearing impairments.

In an online article titled, *Stress among Parents of Children with Hearing Loss and How They Deal with It* (2023) revealed that parents of disabled children experience elevated and chronic stress levels. Increased stress levels have been observed in parents of children who face physical, mental, and psychological challenges, along with developmental concerns. Responses to a situation differ from person to person, as do their strategies for coping. Parents of children with hearing loss frequently feel inadequate in managing their child’s needs, as they struggle to meet his or her communication requirements. They rely heavily on healthcare professionals for their assistance and direction.

### Social Problems

Social problems faced by parents portray a significant role in shaping their capacity to be actively engaged in the education of their children. These social challenges can exacerbate the difficulties parents already face in raising a child with hearing impairments and further limit their capacity to support their child’s academic progress. Table 18 below presented the data gathered.

**Table 18**  
**Extent of Problems Encountered by the Respondents in Rearing their Child in terms of Social Problems**

S/N	Indicators	WM	SD	Verbal Description
1	My child affects my social relationship	1.88	1.07	Sometimes
2	I have limited time for leisure activities	2.35	1.18	Sometimes
3	The child affects our marital relationship	2.15	1.10	Sometimes
4	I rarely attend to social gathering	2.59	0.99	Often
5	I do not like to visit people	2.15	1.05	Sometimes
6	I do not like the company of others	1.88	0.91	Sometimes
7	I am not comfortable with large number of people	2.06	0.98	Sometimes
8	I need to cut down my social circle	2.18	1.03	Sometimes
<b>Aggregate Mean</b>		<b>2.15</b>		
<b>Aggregate Standard Deviation</b>			<b>1.04</b>	<b>Sometimes</b>

Table 18 revealed that parents of children with hearing impairments face moderate social challenges, primarily due to the demands of caregiving. While most parents report that their child’s condition does not significantly affect their social relationships (WM = 1.88), some experience occasional difficulties maintaining connections with friends and family. A more common issue is reduced participation in social gatherings (WM = 2.59), as many parents struggle to find time for social activities. Overall, these challenges are sometimes experienced, reflecting the emotional and practical strain of caregiving, social isolation, and limited opportunities for leisure or relationship-building. A study of Dikec et al. (2023) on *Experiences of Hearing Parents of Children with Hearing Loss: A Qualitative Study* revealed that some parents confined themselves from society after learning their child’s diagnosis. Given these findings, it is important to provide parents with support

systems that help them maintain their social connections and participate in community activities. Programs that address emotional well-being, provide social outlets, and encourage positive relationships could help alleviate some of these social challenges.

**Summary on the Extent of Problems Encountered by the Respondents in Rearing Their Child**

Table 19 below presented the summary of problems the respondents have encountered in rearing their children who are deaf, in terms of: psychological problems, financial problems, health problems, and social problems.

**Table 19**  
Summary on the Extent of Problems Encountered by the Respondents in Rearing their Child

Components	WM	SD	Verbal Description
Psychological Problems	2.35	1.07	Sometimes
Financial Problems	2.78	1.04	Often
Health Problems	2.11	1.03	Sometimes
Social Problems	2.15	1.04	Sometimes
<b>Grand Mean</b>	<b>2.35</b>		
<b>Grand Standard Deviation</b>		<b>1.05</b>	<b>Sometimes</b>

Table 19 summarized the various challenges faced by parents raising children with hearing impairments, categorized into psychological, financial, health, and social problems. Psychological problems (WM = 2.35) are encountered "sometimes," with parents experiencing issues like anxiety, emotional stress, and loneliness, though these challenges are not frequent for all parents. Financial problems (WM = 2.78) are more frequent, categorized as "often." Parents face significant financial strain due to the costs of medical care, specialized materials, and other needs related to their child's condition. Health problems (WM = 2.11) occur "sometimes," with parents dealing with physical exhaustion and emotional stress, but these issues are not widespread. Social problems (WM = 2.15) are also experienced "sometimes," with parents struggling with limited social interactions and difficulty attending social events due to caregiving responsibilities. The overall grand mean of 2.35 suggests that while these challenges are present, they are not uniformly severe for all parents. The findings highlight the need for targeted support in financial assistance, psychological counseling, and social integration to improve the well-being of parents and enhance their ability to support their children's education.

**SIGNIFICANT CORRELATION BETWEEN PARENTAL INVOLVEMENT AND THE PROBLEMS ENCOUNTER IN REARING DEAF CHILDREN**

This part examined whether family stability has a significant relationship with the academic outcomes of deaf learners, specifically focusing on parental involvement and the challenges that parents face in raising their children with hearing impairments. Table 20 below showed the data gathered.

**Table 20. Test of Relationship Between Parental Involvement and the Problems Encounter in Rearing Deaf Children**

Variables	r-value	Strength of Correlation	p-value	Decision	Remarks
Parental Involvement and Problems Encountered	0.155	Negligible Positive	0.382	Do not reject Ho	Not Significant
*significant at p<0.05 (two-tailed)					

The table presented the results of a test of the relationship between family stability and the academic outcomes of students, specifically focusing on parental involvement and the problems encountered by the parents. The variables examined include parental involvement and the various

challenges parents face in raising their children, such as psychological, financial, health, and social problems. The r-value (correlation coefficient) of 0.155 indicates a negligible positive correlation between parental involvement and the problems encountered by the parents. This proposes that there was a very weak positive relationship between the extent of parental involvement and the problems the parents face. As the level of involvement increases, the problems faced by the parents seem to increase very slightly, though the relationship is weak. The p-value is 0.382, which is greater than the significance level of 0.05 ( $p < 0.05$ ). Since p-value exceeds the threshold for significance, the null hypothesis ( $H_0$ ) cannot be rejected. Since the result is not statistically significant ( $p > 0.05$ ), we conclude that there was no significant relationship between parental involvement and the problems encountered by the parents in relation to the academic outcomes of their children with hearing impairments. The analysis suggests that while parental involvement and the challenges parents face may show some relationship, the relationship is weak and statistically insignificant, meaning that these factors do not appear to significantly affect the academic performance of children with hearing impairments in the context of this study. Mohamed, R. (2022) A study published in the Journal of Educational and Health Sciences explored university students' perspectives on the impact of family stability on academic achievement. The findings indicated that factors such as the quality of the parental relationship, parental education level, family size, and economic status significantly affect students' academic performance.

### **CHAPTER 3**

#### **SUMMARY, FINDINGS, CONCLUSION AND RECOMMENDATION**

This chapter outlined the summary, findings and conclusion of the study. This also encloses the recommendations which are based on the results and findings which sought to find out the parental involvement among families of these deaf students and its effects on their academic performance.

#### **SUMMARY**

This research aimed to assess the respondents' demographic profile, extent of parental involvement, and challenges parents encountered in raising their deaf children, serving as a basis for a proposed action plan. Data were collected through a structured survey questionnaire, which sought to identify both the level of parental involvement and the specific problems parents have faced in rearing their deaf children. These insights helped provide a deeper understanding of their involvement. The collected data were analyzed using appropriate statistical methods, including frequency count, percentage, weighted mean, standard deviation, and Pearson's r test. Furthermore, a test was conducted to identify the significance of the relationship between parental involvement and the problems experienced by the respondents in raising their deaf children.

#### **FINDINGS**

Based on the results of the data that were gathered and treated statistically, the following findings were drawn.

The study reveals that most of the respondents are mothers aged 30–49, highlighting their central role in the care and educational support of their deaf children. The majority of these children are adolescents or young adults, indicating continued parental involvement during critical developmental stages. Communication is primarily through sign language or a combination of sign and spoken language, underscoring the importance of multimodal strategies for effective learning and social integration. Respondents' occupational data show a mix of employment statuses, with many facing financial difficulties. Most come from low-income households, emphasizing economic barriers to accessing specialized services for children with hearing impairments. These findings highlight the crucial influence of maternal involvement, the need for accessible communication tools, and the significant impact of socio-economic status on educational outcomes. The research further stresses the importance of maternal time and decision-making, particularly in low-income contexts where limited resources can shape long-term developmental opportunities.

The study reveals that parents of children with hearing impairments demonstrate a high level of involvement across various domains of their child's education. Most respondents, primarily mothers aged 30–49, actively participate in activities pertaining to the following: parenting, volunteering, learning at-home, decision-making and community collaboration. Parental engagement is particularly strong in areas such as monitoring children's routines, helping with homework, maintaining regular communication with teachers, attending school events, and participating in decision-making processes like IEP and PTA meetings. While overall engagement is high, variability in standard deviations indicates differing levels of consistency among parents. Financial constraints and socio-economic challenges are notable barriers, yet many parents still make significant efforts to support their child's academic and social development. The study emphasizes that maternal involvement, effective communication, and community collaboration are essential for fostering positive educational outcomes for children with hearing impairments, especially in low-income contexts.

There are problems encountered by the parents of children with hearing impairments, grouped into psychological, financial, health, and social categories. Psychological issues, such as anxiety and emotional stress, are experienced occasionally, while financial difficulties are the most frequent, reflecting the burden of caregiving expenses. Health and social challenges occur sometimes, with parents reporting fatigue, stress, and reduced social engagement. The overall average score indicates that while these challenges are present, their intensity varies across families. These results point to the importance of providing targeted financial aid, mental health support, and opportunities for social inclusion to better assist parents in caring for and supporting their children.

The results show a negligible positive correlation between parental involvement and the problems encountered by parents, suggesting that as involvement slightly increases, so do the challenges, though very weakly. The result is not statistically significant. This means there is no meaningful relationship between the level of parental involvement and the problems parents face with regards to their children's academic performance.

## **CONCLUSION**

Based on the findings of the study, there is no significant relationship between parental involvement and the problems that parents encounter in rearing their children who are deaf. Overall, the study concludes that the problems the respondents have encountered in rearing their deaf children do not significantly impact the academic outcomes of students with hearing impairments.

## **RECOMMENDATIONS**

The research recommends the action plan to address the challenges faced by parents of children with hearing impairments. It is designed to enhance their psychological well-being by providing readily accessible resources for managing stress and anxiety related to parenting a child with unique needs. It also aims to alleviate the significant financial burden often associated with raising a child with a hearing impairment, by actively connecting parents with available financial assistance programs and resources. Furthermore, this also promotes the physical and mental health of parents through educational initiatives focused on healthy lifestyle choices, including nutrition, sleep hygiene, and time management. Finally, a key component of the plan focuses on fostering social inclusion and reducing feelings of isolation by creating opportunities for parents to connect with each other and build supportive communities. The ultimate goal is to create a supportive and empowering environment that enables parents to thrive while raising their children.

## **CHAPTER 4**

### **OUTPUT OF THE STUDY**

This chapter indicated the proposed action plan which aimed to tackle the issues parents have experienced in rearing their children who are deaf.

## **ACTION PLAN**

### **Rationale**

Parenting a child with a hearing impairment presents unique and multifaceted challenges that go beyond the typical experiences of raising a child. These challenges encompass psychological, financial, health, and social dimensions, each of which can significantly affect a parent's well-being and, in turn, the developmental and educational outcomes of the child.

Psychologically, many parents struggle with accepting their child's diagnosis, often experiencing grief, anxiety, emotional exhaustion, and uncertainty about the future. The process of adapting to a child's hearing loss may involve coping with feelings of guilt, denial, or inadequacy, especially in the absence of professional guidance and emotional support. These emotional struggles are exacerbated by the constant need to make critical decisions regarding interventions, therapies, and educational placements.

Financial stress is another prominent issue, as raising a child with hearing impairment typically requires access to specialized services, assistive devices such as hearing aids or cochlear implants, and additional educational resources. These expenses can pose a substantial burden, particularly for low-income families. In many cases, the lack of access to government support or insurance coverage further intensifies financial difficulties.

Health-wise, caregivers often report physical and mental fatigue resulting from the demands of caregiving, leading to stress-related illnesses, sleep disturbances, and burnout. Constantly managing appointments, therapies, and communication barriers can be overwhelming and affect the physical and emotional health of parents, especially when support systems are lacking.

Social challenges also arise, as many parents experience reduced social engagement and strained relationships with family and friends due to stigma or the time-consuming nature of caregiving. Some parents may withdraw from social activities, leading to feelings of isolation and loneliness. These social limitations can also impact the family's ability to integrate into community life and access inclusive services.

As parents faced a lot of problems in rearing towards their deaf children, a proposed action plan was crafted to assist them in overcoming these problems. This action plan is made especially for the respondents of this study to scaffold them in their battle of eradicating or overcoming the problems in rearing towards their deaf children.

### **Objectives**

With the execution of this action plan, it is anticipated that the following objectives will be achieved:

- Assists the parents in overcoming the problems they have encountered in rearing towards their deaf children.
- Equips the parents with techniques and strategies on how to cope up with the problems they have encountered.
- Facilitates parents' improvement psychologically, financially, health-wise, and socially.
- Provides parents some trainings and seminars to overcome challenges and problems.

### **Scheme of Implementation**

To guarantee that the proposed action plan would be known to all of the parents of the Mandaue City Central Special Education School, it is intended that this proposed action plan will be introduced to the school principal, teachers and parents of the said school. Copies of the proposed action plan are set to be given to the mentioned people before the implementation. Evaluation will follow to assess the said action plan's effectiveness.

## BIBLIOGRAPHY

1. Abad, J. M., & Ventura, R. C. (2021). Strengthening parental roles in school-community partnerships in urban public schools. *Philippine Journal of Community Education*, 9(1), 44–58.
2. Aftab, M. J., Ashfaq, M., & Ali, H. H. (2022). Exploring the Role of Parents for Supporting the Children with Hearing Impairment in Education. *Human Nature Journal of Social Sciences*, 3(3), 457–469. <https://doi.org/10.71016/hnjss/xremwh49>
3. Ahmad, S., Saeed, B., Mehboob, M., Badar, S. A., Ali, B., Manzoor, H., & Aneeb, F. (2024). Level Of Psychological Problems Among The Parents Of Deaf Children. *Migration Letters*, 21(S3), 1809–1815. <https://migrationletters.com/index.php/ml/article/view/10383>
4. Alampay, E. A., Angeles, M. A. L., & Ong, G. G. (2019). *Participation of women in community development initiatives in the Philippines*. *Philippine Journal of Development*, 46(1), 25–46.
5. Alampay, L. P., & Garcia, J. T. (2023). *Gendered caregiving and parental stress among families of children with developmental delays in the Philippines*. *Philippine Journal of Psychology*, 56(2), 89–107.
6. Alvarez, R. S., & Gomez, P. R. (2023). Caregiving in rural spaces: The lived experiences of parents of children with disabilities in the Philippines. *Philippine Journal of Social Work and Development*, 19(1), 23–39.
7. Alvez, R. M., & Domingo, S. V. (2021). Economic impacts of raising children with developmental disabilities in Metro Manila. *Philippine Journal of Health and Social Policy*, 4(2), 51–64.
8. Ambrose, S. E., Appenzeller, M., & DesJardin, J. L. (2020). Evaluating Self-Efficacy in Parents of Children with Hearing Loss. *The Hearing Journal*, 73(9), 35, 36. <https://doi.org/10.1097>
9. Amponsah, M. O., Milledzi, E. Y., Ampofo, E. T., & Gyambrah, M. (2018). Relationship between parental involvement and academic performance of senior high school students: The case of Ashanti Mampong Municipality of Ghana. *American Journal of Educational Research*, 6(1), 1-8. DOI:10.12691/education-6-1-1
10. Belandres, J., & CRUZ, A. D. (2024). Involvement of Indigenous Parents in Inclusive Education (IE) Practices. *Social Science and Humanities Journal (SSHJ)*, 8(09), 4898-4915. <https://doi.org/10.18535>
11. Brodie, K. (2024). Urie Bronfenbrenner: Ecological Systems Theory and the Bioecological Model. *Early Years TV*. <https://bit.ly/4hoAYq4>
12. Calderon, R., & Greenberg, M. T. (2003). *Stress and coping in hearing mothers of children with hearing loss: Factors affecting mother and child adjustment*. *American Annals of the Deaf*.
13. Comendador, Ma. (2023). The Effects of The Government-Owned and Controlled Corporation (GOCC) Home Financing On The Quality Of Life Of Housing Loan Borrowers. *Business and Economics in Developing Countries*. 1. 91-96. 10.26480/bedc.02.2023.91.96. [https://www.researchgate.net/publication/242772176\\_](https://www.researchgate.net/publication/242772176_)
14. Davids, R., Roman, N., & Schenck, C. (2021). The challenges experienced by parents when parenting a child with hearing loss within a South African context. *Journal of Family Social Work*, 24(1), 60–78. <https://doi.org/10.1080/10522158.2020.1852639>
15. De Jesus, M. L., & Tamayo, C. D. (2022). Employment disruptions and coping mechanisms of mothers of children with developmental disabilities in urban Metro Manila. *Asian Journal of Disability Studies*, 3(2), 45–58.

16. Della Porta, S. L., Sukmantari, P., Howe, N., Farhat, F., & Ross, H. S. (2022). Naturalistic Parent Teaching in the Home Environment During Early Childhood. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.810400>
17. Del Rosario, A. A., & Resurreccion, A. B. (2020). *Gender roles in local governance and community engagement*. *Journal of Southeast Asian Studies*, 28(2), 89–102.
18. Del Rosario, M. T., & Lim, S. V. (2022). Parent-teacher-community collaboration in Philippine basic education: Effects on student behavior and achievement. *Asia-Pacific Education Review*, 23(2), 211–229.
19. Dıkeç, G., Türk, E., Esin Yüksel, Kübra Çelebi, & Meltem Özdemir. (2023). Experiences of Hearing Parents of Children with Hearing Loss: A Qualitative Study. *Children (Basel)*, 10(7), 1129–1129. <https://doi.org/10.3390>
20. Erbası, E., Scarinci, N., Hickson, L., & Ching, T. Y. C. (2018). Parental Involvement in the Care and Intervention of Children with Hearing Loss. *International Journal of Audiology*, 57(SUP2), S15–S26. <https://doi.org/10.1080>
21. Ferrer, J. (2024). *The unspoken truth deafness around the world*. <https://bit.ly/4e1NER1>
22. Gedfie, M., Getahun, D.A., Negassa, D. (2020). Parent’s Involvement in the Education of their Children with Disabilities in Primary Schools of Bahir Dar City, Ethiopia: Voices of Parents. *International Journal of Special Education*, 35(1), 55-66
23. Gül Dıkeç, Türk, E., Esin Yüksel, Kübra Çelebi, & Meltem Özdemir. (2023). Experiences of Hearing Parents of Children with Hearing Loss: A Qualitative Study. *Children (Basel)*, 10(7), 1129–1129. <https://doi.org/10.3390/children10071129>
24. Gunjawate, D. R., Ravi, R., & Driscoll, C. (2022). Stress among Parents of Children with Hearing Loss and How They Deal with It: A Systematic Review. *International Archives of Otorhinolaryngology*, 27(1). <https://doi.org/10.1055/s-0042-1743273>
25. Hassan, M. R., & Lim, S. Y. (2021). Poverty, disability, and access: Barriers to early intervention in Southeast Asia. *Journal of Child and Family Studies*, 30(5), 1157–1170.
26. Humphries, T., Kushalnagar, P., Mathur, G., Napoli, D. J., Rathmann, C., & Smith, S. (2019). Support for parents of deaf children: Common questions and informed, evidence-based answers. *International Journal of Pediatric Otorhinolaryngology*, 118(118), 134–142. <https://doi.org/10.1016>
27. Kantova, K. (2024). Parental involvement and education Outcomes of Their Children. *Applied Economics*, 56(48), 1–16. <https://doi.org/10.1080>
28. Labarca, A. R., & Reyes, M. J. (2021). *Employment challenges of parents caring for children with disabilities in Metro Manila*. *Philippine Journal of Labor and Social Policy*, 19(2), 55–72.
29. Lee, R. A., & Gonzales, H. M. (2022). Educational inequality and parental support for children with hearing impairments. *Journal of Inclusive Education Research*, 9(2), 65–78.
30. Lederberg, A. R., & Golbach, T. (2002). *Parenting Stress and Social Support in Hearing Mothers of Deaf and Hearing Children: A Longitudinal Study*. *Journal of Deaf Studies and Deaf Education*. <https://pubmed.ncbi.nlm.nih.gov/15451869/>
31. Li, Jia & Zhang, Xiaohong & Ye, Fei & Cheng, Xiaolin & Yu, Liping. (2024). Factors affecting parental role adaptation in parents of preterm infants after discharge: a cross-sectional study. *Frontiers in Psychology*. 15. 10.3389/fpsyg.2024.1396042. <https://bit.ly/4ejwVZL>
32. Meadow-Orlans, K. P. (1995). *Sources of stress for parents with young deaf and hearing children*. *American Annals of the Deaf*, 140(4), 352–357.

33. Mendoza, L. R., & Arriola, J. A. (2021). Parental roles in supporting deaf children's language and literacy development in the Philippines. *Journal of Special Education and Developmental Studies*, 6(1), 55–67.
34. Mohamed, R. (2022). *The impact of family stability on academic achievement*. Journal of Educational Studies and Humanities. <https://doi.org/10.21608>
35. Muraco, J. A., Ruiz, W., Laff, R., Thompson, R., & Lang, D. (2020, May 18). *Baumrind's Parenting Styles*. Pressbooks. <https://iastate.pressbooks.pub>
36. Nailand, L., Munro, N., & Purcell, A. (2023). What Are Parents' Experiences With Their Child's Hearing Aid Use in the First 5 Years? *Ear & Hearing, Publish Ahead of Print*(36706068). <https://doi.org/10.1097>
37. National Deaf Children's Society. (2024, July 30). *Parenting tips for deaf children with additional needs / Aussie Deaf Kids*. Aussie Deaf Kids. <https://www.aussiedeafkids.org.au>
38. Nazanin Eyalati, Jafari, Z., Ashayeri, H., Salehi, M., & Kamali, M. (2025). Effects of Parental Education Level and Economic Status on the Needs of Families of Hearing-Impaired Children in the Aural Rehabilitation Program. *Iranian Journal of Otorhinolaryngology*, 25(70), 41. <https://pmc.ncbi.nlm.nih.gov/articles/PMC3846243/>
39. Nakamura, H., Tanaka, M., & Suzuki, Y. (2022). Family support and language development among deaf and hard-of-hearing children. *International Journal of Disability, Development and Education*, 69(4), 387–403.
40. Nicastrì, M., Giallini, I., Ruoppolo, G., Prosperini, L., Marco, de V., Lauriello, M., Rea, M., Traisci, G., & Mancini, P. (2021). Parent Training and Communication Empowerment of Children with Cochlear Implant. *Journal of Early Intervention*, 43(2), 117–134. <https://eric.ed.gov/?id=EJ1293815>
41. Nguyen, H. T., Lim, Y. J., & Sari, R. N. (2022). Social support and parental stress among caregivers of children with disabilities in Southeast Asia. *Asian Journal of Disability Studies*, 9(3), 77–92.
42. O'Neill, R., Bowie, J., Foulkes, H., Cameron, A., Meara, R., & Camedda, D. (2019). *Telling it like it is: families living on a low income with deaf children*. <https://www.ssc.education.ed.ac.uk>
43. Pizarro, A.L., Mendoza, A., Lo, R. , & Atty. Guiao, C.T. (2023). What Inclusive Education Means for d/Deaf Learners in the Philippines: Considerations in Designing a Deaf-Inclusive Education Model. *Oscar M. Lopez Center for Climate Change Adaptation and Disaster Risk Management Foundation, Inc.* <https://www.preventionweb.net>
44. Pontecorvo, E., Mitchiner, J., & Lieberman, A. M. (2024). Hearing parents as sign language learners: describing and evaluating the ASL skills of parents learning ASL with their deaf children. *Journal of Multilingual and Multicultural Development*, 1–18. <https://doi.org/10.1080>
45. Project, B., & Project, B. (2024, January 25). *Improving Deaf Education in the Philippines*. BORGEM. <https://www.borgenmagazine.com>
46. Ramirez, L. C., & Torres, A. M. (2021). Parental education and engagement in aural rehabilitation for children with hearing disabilities. *Philippine Journal of Special Education*, 3(1), 22–36.
47. Rehman, J. (2019). Problems Faced by Parents of Differently Abled Children in District Anantnag, Kashmir. *Asian Review of Social Sciences*, 8(2), 66-70. <https://doi.org/10.51983>
48. Reyes, M. G., & Salcedo, R. J. (2021). Parental involvement and learner outcomes among children with hearing disabilities in inclusive classrooms. *Philippine Journal of Special Education*, 29(2), 41–55.

49. Santos, R. J., & Marcelo, M. P. (2021). Parental involvement and behavioral outcomes among elementary learners in urban poor communities. *Philippine Journal of Education and Child Development*, 27(1), 22–34.
50. Sapungan, G. M., & Sapungan, R. M. (2014, April). *Parental Involvement in Child's Education: Importance, Barriers and Benefits*. ResearchGate. [https://www.researchgate.net/publication/283539737\\_Parental\\_Involvement\\_in\\_Child](https://www.researchgate.net/publication/283539737_Parental_Involvement_in_Child)
51. SCHILD. (2012). *Caregiver stress: A neglected aspect of the support system for families of children with disabilities*. *International Journal of Special Education*, 27(3), 40–49.
52. Simply Psychology. (2024, January 17). *Bronfenbrenner's Ecological Systems Theory*. <https://www.simplypsychology.org/bronfenbrenner.html>
53. Velasco, G. E., Cruz, M. J., & Alvarez, D. C. (2022). *Primary caregiving stressors among mothers of children with speech and language disorders: Insights from the Visayas region*. *Philippine Journal of Speech-Language Pathology*, 3(1), 45–61.
54. Wang, Y., & Li, T. (2023). Academic self-efficacy and parental engagement in post-pandemic schooling. *Journal of Educational Psychology and Development*, 38(2), 90–108.
55. Watkins, S., Pittman, P., & Walden, B. (1998). *The deaf child in the family and at school: Essays in honor of Kathryn P. Meadow-Orlans*. Lawrence Erlbaum Associates.
56. Whitaker, M. C. (2018). The Hoover-Dempsey and Sandler Model of the Parent Involvement Process. *Wiley Online Library*, 419–443. <https://doi.org/10.1002>
57. Young, A., Dixon-Woods, M., Findlay, M., & Heney, D. (2005). *Parenting a child with a disability: The role of social support*. *Child: Care, Health and Development*, 31(1), 65–73