

Deaf Identity Development: An Analysis through Glickman's Deaf Identity Theory and Bronfenbrenner's Bioecological Theory*

Sağır Kimlik Gelişimi: Glickman'ın Sağır Kimlik Teorisi ve Bronfenbrenner'in Biyoekolojik Kuramı Üzerinden Bir İnceleme

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Abstract

This article aims to analyze the development of deaf identity through the integration of Glickman's deaf identity theory and Bronfenbrenner's bioecological systems theory. It examines the influence of multiple factors, including parental hearing status, modes of communication, educational settings, and societal attitudes, in shaping deaf identity. The study emphasizes the pervasive impact of social structures, particularly the dominance of medical perspective on deafness, which affect individual experiences, institutional policies, and broader sociocultural norms. By drawing on these theoretical frameworks, this study examines the dynamic and continuously evolving process of deaf identity, shaped by interactions within the microsystem, mesosystem, exosystem, macrosystem, and chronosystem. Furthermore, it explores the extent to which early-life experiences within various ecological systems contribute to long term identity development and self-perception. The prevailing medical model of deafness, which is reinforced across ecological layers, perpetuates a cycle that

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constrains identity development by influencing individual experiences at all levels, from family to education, and fosters cultural attitudes that hinder inclusive identity formation. In conclusion, the point of disruption for this cycle lies in the formulation of equitable policies that would facilitate the shift from the dominant medical model to a cultural model, the promotion of bilingual acquisition, and the implementation of inclusive, deaf culturally informed, and human rights-based regulations across all ecological systems.

Keywords: deaf identity, deaf culture, Bronfenbrenner, hearing parents, deaf community

Öz

Bu çalışma, sağır kimlik gelişimini Glickman'ın sağır kimlik teorisi ve Bronfenbrenner'ın biyoeolojik sistemler kuramı çerçevesinde incelemeyi amaçlamaktadır. Bu bağlamda, işiten ebeveynlerin işitme durumu, iletişim türü, eğitim ortamları ve toplumsal yapılar gibi sağır kimliğini şekillendiren çeşitli etmenlerin etkisine odaklanılmaktadır. Çalışma, özellikle sağır bireyleri çevreleyen sosyal yapılarda medikal bakış açısının baskın olmasının; bireysel deneyimler, toplumsal politikalar ve daha geniş sosyokültürel normlar üzerindeki etkisini vurgulamaktadır. Bu teoriler doğrultusunda, sağır kimliğinin dinamik ve sürekli değişen bir yapı olduğu ve mikrosistem, mezosistem, egzosistem, makrosistem ve kronosistem düzeylerindeki deneyim ve etkileşimler yoluyla biçimlendiği ele alınmaktadır. Mikrosistemde erken yaşta edinilen deneyimlerin ve dış sistemlerde bunları pekiştiren yaşantıların, bireyin sağır kimliği ve öz algısı üzerinde uzun vadeli bir etkisi olduğu görülmektedir. Sağır olmayı çoğunlukla medikal bir sorun olarak gören baskın anlayış, aileden eğitime kadar her düzeyde bireysel deneyimleri etkileyerek kimlik gelişimini kısıtlayan bir döngüyü sürdürmektedir. Sonuç olarak, bu döngünün kırılma noktası, makro sistemdeki baskın medikal modelin kültürel modele geçişini etkileyecek olan eşit ve adil politikaların düzenlenmesi, çift dil ediniminin desteklenmesi ve tüm ekolojik sistemlerde kapsayıcı, sağır kültür temelli bilgilendirici ve insan haklarına dayalı düzenlemelerin gerçekleştirilmesiyle mümkün olacağı anlaşılmaktadır.

Anahtar Kelimeler: sağır kimlik, sağır kültür, Bronfenbrenner, işiten ebeveynler, sağır toplum

Geniş Özet

Giriş

Bireyin içinde bulunduğu sosyal çevre, sosyal kimliği şekillendirmede ve benlik algısını inşa etmede önemli bir rol oynamaktadır (Easterbrooks vd., 2012). Sağır bireylerin kimlik gelişimi ise özellikle işiten ailelerde büyüdüklerinde daha karmaşık ve çok katmanlı bir süreç haline gelmektedir (Leigh vd., 2018). Glickman (1996), sağır bireylerin kimlik gelişimini açıklayan dört aşamalı bir model sunmuştur. İlk aşama olan “kültürel olarak işiten” evresinde, işitme kaybını daha geç yaşta deneyimleyen bireyler bulunmaktadır. “Marjinal kimlik” olarak tanımlanan ikinci aşama, işiten aileye sahip olan sağır çocukların, işiten bireylerden farklı olduklarını algılamaya ve ait oldukları yeri sorgulamayı başladıkları evredir. Üçüncü aşama olan “kültürel olarak sağır” evresinde, bireyin işiten kültürü reddedip sağır kimliğini ve kültürünü çok güçlü bir biçimde sahiplendiği görülmektedir (Padden ve Humphries, 2005). Dördüncü ve son aşama olan “çift kültürlü kimlik” ise bireyin hem sağır hem işiten kültürü kabul etmesi ve her iki kültüre de saygı duyarak iletişimde olması ile karakterizedir (Chapman ve Dammeyer, 2016). Bu çalışma, sağır kimlik gelişimini Glickman'ın sağır kimlik teorisi ve Bronfenbrenner'ın biyoeolojik sistemler kuramı çerçevesinde incelemeyi amaçlamaktadır.

Sağır Bir Çocuğun Mikrosistemi: Ailedeki Yabancı

Sağır bir çocuğun mikrosistemi, erken çocukluk döneminde sosyal gelişimin temel dinamiklerini oluşturan ilk etkileşimsel çevreyi temsil etmektedir (Hall, 2017). Ancak sağır çocukların yaklaşık %95'i işiten ebeveynlere doğmakta ve bu ebeveynlerin büyük çoğunluğu sağırlıkla ilgili yeterli bilgi ve farkındalığa sahip olmamaktadır (Holcomb, 2013; NIDCD, 2016). Genellikle ebeveynlerin ilk olarak çocuklarının işitmeme durumlarını inkâr etme eğiliminde olmakta ve çözüm arayışlarını medikal müdahalelerle sınırlı tutmaktadırlar (Mauldin, 2016). Bu bağlamda sağır çocuklar, erken yaşta işitsel uyarılardan ve dolayısıyla sosyal etkileşimden mahrum kalmaktadır. Bu durum, duygusal ve sosyal gelişim açısından birçok sorunu beraberinde getirmektedir (Marschark, 2007).

İşiten bir ailede büyüyen sağır çocuklar, erken yaşta sağır kültürüyle tanışmadıkları durumlarda sağır kimlik oluşumu sekteye uğramaktadır (Glickman, 1996). Bu durum, Glickman'ın "marjinal kimlik" evresiyle örtüşmekte ve sağır birey kendini ne işiten ne de sağır topluluğa ait hissetmektedir (Leigh vd., 2018). Bu kimlik belirsizliği, eğitim ve istihdam alanlarında da benzer biçimde devam eder. Kaynaştırma eğitim ortamlarında, akranları tarafından dışlanmaları ve öğrenme ortamlarının erişilebilir olmaması sebebiyle hem sosyal hem akademik anlamda gelişimleri sekteye uğramaktadır (Batten vd., 2014). Yetişkinlik döneminde ise iletişim engelleri, ayrımcılık ve eşit olmayan terfi olanakları, sağır bireylerin iş yaşamına etkin biçimde katılımını zorlaştırmaktadır (Komesaroff, 2004; Terzi ve Uyanık, 2023)

Mezosistem: İşiten ve Sağır Kültür Arasında

Mezosistem, bireyin yer aldığı farklı mikrosistemler arasındaki etkileşim ve ilişkiler olarak ifade edilmektedir (Bronfenbrenner, 1979). Ebeveynlerin çocuklarının işitmediğini öğrendikten sonraki süreçte, işiten ebeveynler ile sağlık personelleri arasındaki etkileşimler mezosisteme örnek olarak gösterilebilir (Humphries vd., 2016). Medikal bir bilgilendirme ile karşılaşan ebeveynler, çocuğun işiten topluma entegre olması için koklear implant ve konuşma terapisi gibi müdahalelere yönlendirilmektedir (Humphries vd., 2016). Bununla birlikte, işaret dilinin sözel konuşma gelişimini engellediği inancı ile ebeveynler işaret diline karşı önyargı geliştirmektedirler (Hall, 2017).

Egzosistemin Etkisi: Dolaylı mı, Doğrudan mı?

Egzosistem, bireyi doğrudan etkilemeyen ancak gelişim süreci üzerinde dolaylı etkiler yaratan sistemleri kapsamaktadır (Bronfenbrenner, 1979). Sosyal medya, politikalar ve kurumlar, bireyin içinde bulunduğu mikrosistemleri dolaylı yoldan şekillendiren yapılar arasında yer almaktadır. Bu yapılar, ailelerin sağır çocuklarına ilişkin karar alma süreçlerinde belirleyici bir rol oynamaktadır (Day, 2010). Oralist temelli politikalar, işaret dilinin yasaklanmasına ve erişilebilir olmayan eğitim ortamlarına, düşük akademik başarıya ve dolayısıyla sınırlı istihdam olanaklarına neden olmuştur (Beckner ve Helme, 2018; Holcomb, 2013; Tsach ve Most, 2016). Medya temsillerinde ve toplumsal yapıda sağırlığa yönelik olumsuz tutumlar ve ayrımcılık, sağır bireylerin izolasyonunu artırmaktadır (Gill ve Schlund-Vials, 2014).

Makrosistem: Medikal Modelin Toplumsal Egemenliği

Makrosistem, bireyin yaşamını şekillendiren kültürel, hukuki, toplumsal ve eğitsel değerleri kapsamaktadır (Bronfenbrenner, 1979). Bu değerler, toplumda baskın olan perspektif ile yapılanmakta ve toplumun sağır bireylere tutum ve davranışlarını belirlemektedir (İlkbaşaran ve Taşçı, 2012; Terry, 2023). Medikal modele göre sağırlık, tedavi edilmesi gereken biyolojik bir eksiklik. Bu bakış açısı, işitme cihazı, koklear implant ve konuşma terapisi gibi müdahalelere odaklanmaktadır (Canadian Association of the Deaf, 2015). Buna karşın kültürel model, sağırlığı bir engel değil, dilsel ve kültürel bir çeşitlilik olarak ele almaktadır (Padden ve Humphries, 2005). Sağır bireyleri, işaret dili etrafında buluşan bir azınlık topluluğunun üyeleri olarak tanımlamaktadır (Corker, 1996).

Kronosistem: Sağır Kültürün Tarihsel Yolculuğu

Kronosistem, tarihsel olaylara bağlı olarak zaman içinde sistemlerde meydana gelen değişimleri ifade etmektedir. 1880 yılında gerçekleşen Milano Konferansı'nın sonrası oralist yaklaşım hâkim olması, işaret dili sağır okullarında dahi yasaklanması ve sağır kültürün uzun yıllar boyunca bastırıldığı görülmektedir (Moore, 2010; Kemaloğlu ve Kemaloğlu, 2012). Ancak 1988 yılında ABD'deki Gallaudet Üniversitesi'nde başlayan "Deaf President Now!" hareketi, sağır bireylerin hak mücadelesinde bir dönüm noktası olmuş, işaret dilinin tanınması ve kullanımı açısından önemli ilerlemeler sağlanmıştır (Holcomb, 2013; Sacks, 2009). Türkiye'de de benzer olarak uzun yıllar yalnızca konuşma eğitimi teşvik edilmiş ve TİD kullanımı yasaklanmıştır (Arık, 2013). Ancak 2005 yılında 5378 sayılı Engelliler Kanunu ile Türk İşaret Dili (TİD) resmi olarak tanındığı görülmektedir (Kubuş vd., 2016).

Sonuç

Sonuç olarak, sağır kimlik gelişimi; bireyin içinde bulunduğu aile ortamı, eğitim sistemi ve toplumsal politikalarla doğrudan ilişkilidir. Bu kararlar toplumda hâkim olan bakış açısına göre şekillenmektedir. Medikal modelde, sağır bireyler bir "eksiklik" üzerinden tanımlanırken, bu yaklaşım kimlik oluşumunu bastırmakta ve bireyin sosyal, duygusal gelişimini olumsuz yönde etkileyebilmektedir. Buna karşın kültürel modelde, sağır bireyler bir kültürün parçası olarak görülmekte, işaret diliyle erken yaşta tanışmakta ve sağır kimlik gelişimini sağlıklı bir şekilde geliştirme olanağı bulmaktadırlar. Bu döngünün kırılması; yalnızca bireyin çabasıyla değil, aynı zamanda sosyal ve toplumsal yapının dönüştürülmesiyle mümkündür. Kültürel perspektifle eşit, erişilebilir ve kapsayıcı ortamların oluşturulması, toplumsal normların yarattığı bariyerlerin ortadan kaldırılmasına ve sağır bireylerin sağlıklı bir kimlik gelişim süreci yaşamasına olanak sağlayacaktır.

Introduction

The social environment in which a person is situated plays a vital role in shaping their social identity and has a significant impact on their self-perception (Easterbrooks et al., 2012). Studies suggest that deaf individuals raised in hearing families often experience a more profound sense of identity confusion during their developmental journey (Leigh et al., 2018). The identity development

of a deaf child born to hearing parents varies based on multiple dynamic factors (Carter, 2015). These include, but are not limited to, age of hearing loss, hearing status of parents, the presence of deaf members in the family, mode of communication in the family, and the type of educational setting (Andersson ve Lyngbäck, 2021). These elements influence life experiences during the developmental period and contribute to different perspectives on deafness. Therefore, deaf identity formation is a dynamic and evolving process, resulting in diverse developmental experiences (Bone, 2019).

Glickman (1996) formulated a theory of deaf identity development based on psychological processes. This theory emphasizes the interactions between deaf individuals and both hearing and deaf communities, describing the transition from the hearing society, where they are born and raised to the deaf community. The first stage, *culturally hearing*, is observed in those who lose their hearing later in life rather than being a stage. The second stage, *marginal identity*, occurs when deaf children from hearing families begin to question their sense of belonging, realizing that differences between themselves and the hearing environment create a sense of misalignment. Before this stage, they lack a clear sense of identity, growing up in an environment that does not view deafness as cultural diversity (Leigh et al., 2018). In the third stage, *immersion*, individuals reject hearing culture and fully embrace deaf identity, often idealizing deaf culture while expressing resentment and anger toward hearing society (Padden & Humphries, 2005). They view sign language as superior to spoken language and oppose cochlear implants and oralist approaches, seeing them as threats to deaf culture (Padden & Humphries, 2005). The final stage, *bicultural identity*, reflects a balanced integration of both deaf and hearing cultures, where individuals embrace their deaf identity while comfortably navigating both worlds, valuing and respecting both sign and spoken languages equally (Chapman & Dammeyer, 2016). Glickman's theory highlights the psychological and social complexities of deaf identity development, emphasizing the role of various social settings throughout a child's growth. However, understanding identity formation requires a broader perspective that considers the multiple social systems influencing development (Clark et al., 2019). This development is summarized in Figure 1, which visually represents the four stages outlined in Glickman's Deaf Identity Development Model (Glickman, 1996).

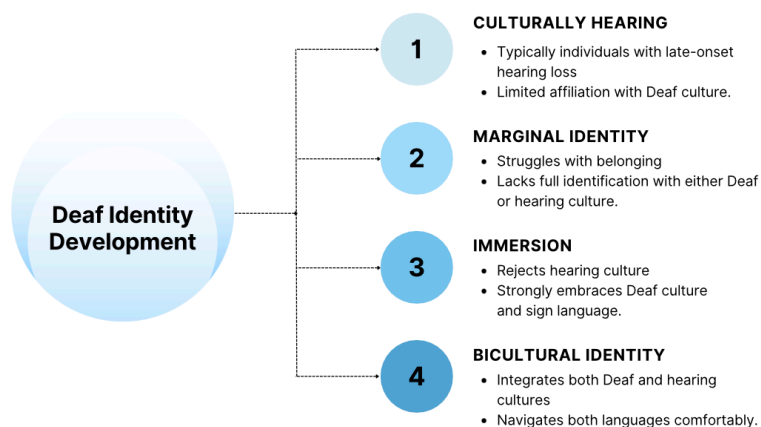


Figure 1. Stages of Deaf Identity Development according to Glickman's theory

The purpose of this article is to examine deaf identity development through the integration of Glickman's (1996) Deaf Identity Development Model and Bronfenbrenner's (1979) Bioecological Systems Theory. Glickman's model is applied for its direct relevance to deaf identity formation, offering insight into the psychological processes and identity shifts that deaf individuals experience while navigating both Deaf and hearing cultures. Bronfenbrenner's theory enhances this approach by providing a broader lens through which to analyze how multiple interconnected social systems shape human development over time. This study aims to explore how interactions within all layers of the ecological system contribute to the formation of deaf identity. It emphasizes the powerful role of social experiences not only in shaping self-perception but also in reinforcing or challenging discrimination across structural levels. It considers the evolving role of deaf individuals and advocacy groups in influencing cultural perceptions and supporting the development of more inclusive identity frameworks. To illustrate the theoretical framework underpinning this analysis, Figure 2 presents an adaptation of Bronfenbrenner's Bioecological Model, reflecting the developmental and contextual factors that shape deaf identity.



Figure 2. Adaptation of Bronfenbrenner's Bioecological Model to Deaf Identity Development (adapted from Bronfenbrenner, 1979)

Microsystem of a Deaf Child: Outsiders of Family

This system is particularly influential in early childhood, as it provides the first socialization experiences and establishes the foundation for future relationships (Hall, 2017). For a deaf individual, the nature of this social layer can be either supportive or challenging, depending on their interactions

with both deaf and hearing people (Clark et al., 2019). Studies indicate that 95% of deaf children are born into hearing families, majority of them lack prior knowledge about deafness (Holcomb, 2013; NIDCD, 2016). Hearing parents often struggle to make sense of and adapt to having a deaf child, and usually their initial reaction is denial of the child's hearing loss (Sciarrino et al., 2018). As parents deal with their uncertainty, their focus tends to shift toward medical solutions and many parents prohibit their child from learning it and limit their access to any fully accessible language (Mauldin, 2016).

Beyond linguistic challenges, emotional and social consequences of lack of social interaction within family emerge (Bone, 2019). Deaf children, unable to fully understand family discussions or express their emotions, frequently experience anger, anxiety, and helplessness (Corker, 1996; Meek, 2020). For many deaf children, instead of being a space of warmth and safety, the home environment could be a place of stress and alienation, where deaf children feel like outsiders in their own family (Marschark, 2007). As a result, they gradually withdraw from family interactions, leading to emotional detachment and a weakened sense of belonging and identity (Holcomb, 2013).

Deaf children raised in hearing families without exposure to deaf culture are more likely face challenges in developing a clear understanding of their deaf identity. This contribute to a sense of being "different" or "abnormal" within their immediate environment instead of developing a positive deaf identity, (Holcomb, 2013), particularly if they were not exposed to deaf culture and sign language early on (Glickman, 1996). The experiences of deaf children raised in hearing families demonstrate that non-inclusive microsystem leads to identity struggles, in the marginal stage of deaf identity development theory. Without accessible communication and cultural affirmation, deaf children have difficulties to integrate into either the hearing or deaf world, resulting in a fractured sense of identity and persistent emotional distress (Leigh et al., 2018).

Beyond Hearing Family

As deaf individuals transition from their family microsystem to the wider hearing society, they are face with not only the challenges caused by communication barriers that began in childhood but also the negative attitudes and discriminatory behaviors of the hearing society (Bone, 2019). These challenges are particularly evident in mainstream education if parents do not prefer deaf schools. They feel difference in depth and realize not fitting in the hearing norms which increase feelings of marginalization (Bain et al., 2004; Young, 2016). Since hearing peers may have limited understanding of deafness, they often ignore or exclude their deaf classmates (Tsach & Most, 2016). Additionally, inaccessible learning environments and inadequate teachers about deaf education bring about lower academic achievement and deaf children face the facts of inequality in the hearing-dominated education system (Batten et al., 2014; Skelton & Valentine, 2003).

Employment and workplaces present another challenge for deaf individuals. In Glickman's (1996) model, deaf individuals who lack access to deaf spaces or communities may internalize the hearing world's perception of deafness as a limitation. Audism, which is a form of discrimination based on the assumption that deaf individuals are less capable, can deeply affect their lives by limiting access to meaningful career opportunities and making it harder for them to grow professionally (Beckner

& Helme, 2018). Even when deaf individuals are hired, they face higher dismissal rates, workplace discrimination, and limited career advancement due to communication barriers (Komesaroff, 2004; Terzi & Uyanık, 2023). The lack of accessibility in professional settings prevents deaf employees from fully participating in meetings, social interactions, and career development opportunities, reinforcing their exclusion (Punch et al., 2007). The failure of microsystem to provide accessible communication and inclusion, prevents deaf individuals from fully participating in society (Clark & Daggett, 2015).

Mesosystem: Between Hearing and Deaf Culture

The system that involves interactions among different microsystems is defined as the mesosystem (Bronfenbrenner, 1979). For a deaf child, the mesosystem includes the interactions between their hearing parents and healthcare professionals after the parents learn about their child's deafness (Humphries et al., 2016). During this process, parents are introduced to the medical perspective, which influences their decisions and actions (Snoddon, 2020). Under the impacts of healthcare professionals, parents who seek to "fix" their deaf child often turn to cochlear implants and speech therapy to integrate them into the hearing world (Humphries et al., 2016). Additionally, when hearing families receive information based only the medical perspective, parents often develop biases against sign language, believing that it prevents speech development (Hall, 2017). These interactions lead to linguistic deprivation when deaf children do not acquire a language during early childhood.

For a deaf child raised in a hearing family and surrounded by hearing society, the first encounter with deaf culture signifies an interaction between the microsystems of both the hearing and deaf worlds (Holcomb, 2013). While maintaining contact with their hearing environment, they simultaneously take steps into the deaf community, experiencing an intersection of different microsystems (Breivik, 2005). In other words, this can be explained as microsystem interactions that differ from the experiences of deaf children with deaf parents or hearing children with hearing parents (Atherton, 2009).

For many deaf individuals, encountering deaf culture represents a critical turning point in breaking free from this cycle of marginalization (Knoors, 2016). Those who grow up in hearing settings often have limited or no access to sign language and deaf culture, so their first connection to deaf culture becomes a profound experience (Pfister, 2017). This often occurs when they attend deaf schools or meet deaf individuals who use sign language, marking a pivotal moment in their identity development (Breivik, 2005). As their experiences of exclusion and loneliness accumulate within the hearing society (DeClerck, 2007), their introduction to deaf culture creates intense need for communication and connection, increasing their curiosity about sign language and deaf culture (Lambez et al., 2020; Marschark et al., 2017). On one hand, the deaf child, experiencing a lack of communication, feels a strong desire to learn sign language. On the other hand, they are influenced by the thoughts and attitudes shaped by their hearing family and societal microsystem (Hauser et al., 2010). In this context, after encountering the deaf community, the child may feel even more conflicted and uncertain when questioning their own identity (Glickman, 1996).

Being part of deaf culture goes beyond simply learning a language; it also means forming deep social relationships, sharing knowledge, and developing a sense of belonging (Breivik, 2005). Within different microsystems, peer relationships and social environments play a crucial role in reinforcing self-identity (Uchida et al., 2015). While deaf individuals are often perceived as incomplete or defective within the hearing world due to ableist perspectives, their microsystem shifts when they experience unconditional acceptance and respect within deaf communities (Holcomb, 2013; Leigh et al., 2022). The most important factor of this shifting is their shared language, which facilitates meaningful interactions and mutual understanding (Holcomb, 2013; Siegrist, 2019). Over time, many deaf individuals begin to adapt deaf culture as an integral part of their identity, transitioning into Glickman's third stage, known as "Culturally Deaf" (Glickman, 1996). At this stage, they fully embrace deafness as a cultural and linguistic identity rather than a disability, reflecting the transformative impact of an inclusive microsystem on their self-perception (Chapman & Dammeyer, 2017). They perceive their deafness as a source of pride and tend to reject the solutions imposed by the hearing world. This rejection can manifest in resisting cochlear implants, oral communication, and medical interventions that prioritize assimilation over cultural identity (Holcomb, 2013). Additionally, some deaf individuals view deafness as a superior identity, criticize the term "hearing impaired," and identify themselves as "Deaf" (capitalized) in a way that affirms their linguistic and cultural identity (Beckner & Helme, 2018).

Exosystem: Indirect or Direct Impact on Deaf?

Bronfenbrenner (1979) defines the exosystem as a system that does not directly affect an individual but plays an indirect role in their development. Social network, media, policies, and institutions are examples of systems that influence a person's microsystems without directly influence on them. However, when examined within the context of the exosystem, the developmental experiences of a hearing individual and a deaf individual differ significantly (Cue, 2020). These influences do not merely have an indirect impact; rather, they exert a much greater effect on the overall life experiences of a deaf person (Day, 2010).

As explained through the micro and mesosystems, medical policies play a crucial role in shaping a family's decision-making process regarding their deaf child (Day, 2010). Following a hearing screening, families are often provided with information solely focused on "treatment", and «fixing» the condition (Werfel et al., 2024). This highlights the dominant influence of healthcare policies within the family microsystem (Werfel et al., 2024). Another microsystem, the school environment, also plays a significant role in shaping a deaf child's development, where educational policies often have negative effects (Terry, 2023). Throughout deaf history, the lack of sign language integration in education and the absence of bilingual education contribute to cognitive delays (Hall et al., 2017). In line with audisim policies, the long-term prohibition of sign language, coupled with insufficient education in deaf schools, has led to low academic achievement, ultimately reducing employment opportunities for deaf individuals (Beckner & Helme, 2018; Holcomb, 2013; Tsach & Most, 2016).

The medical perspective and oralism in education, which dominate hearing culture, gradually deepen the negative experiences of deaf individuals in the hearing world (Dammayer et al., 2019). In both media and society, negative attitudes and discrimination toward deafness further contribute to the isolation of deaf individuals (Gill ve Schlund-Vials, 2014; Kelly & Gaustad, 2007). As a result, deaf children often experience significant delays in being introduced to deaf culture, which is crucial for their identity development (Pudans-smith et al., 2019). This delay has a long-term and damaging impact, making identity formation more challenging (Cawthon & Garberoglio, 2017). This exclusion and discrimination are largely shaped by factors within the exosystem, such as educational policies, media portrayals, and societal norms, which influence how deaf identity is perceived and developed (Wolsey et al., 2016). As a result, many deaf individuals find themselves distancing from hearing culture and transitioning into deaf culture, often as a response to the systemic barriers and exclusion they experience (Clark & Daggett, 2015).

Macrosystem: Dominance of Medical Model on Societal Norms

Bronfenbrenner's (1979) macrosystem encompasses cultural, legal, social, and educational values, which shape how society interacts with deaf individuals. Attitudes toward deafness are shaped by dominant societal norms, influencing how deaf individuals experience the world (İlkbaşaran & Taşçı, 2012; Terry, 2023). These experiences are primarily framed by two contrasting perspectives: the medical model of disability and the cultural model of deafness (Skelton & Valentine, 2003). The perspective adopted by parents and caregivers plays a critical role in a deaf child's identity development, shaping their access to language, education, and social inclusion (Marschark, 2007). This decision has far-reaching consequences, influencing not only personal development but also societal structures, policies, and cultural attitudes (Carter, 2015).

The medical model defines deafness as a biological deficiency by conceptualizing it as a condition that requires treatment and intervention through hearing aids, cochlear implants, and speech therapy (Canadian Association of the Deaf, 2015; Skelton & Valentine, 2003). Within this framework, the term 'hearing impaired' is used instead of 'deaf' to frame hearing ability as a functional term, aligning with the dominant hearing perspective. Following diagnosis, intervention efforts primarily focus on oral language acquisition, aiming to integrate deaf individuals into the hearing world (Ladd, 2005; Day et al., 2017). This model is institutionally dominant, often discouraging the use of sign language and reinforcing oralist approaches, which can result in language deprivation, academic struggles, and social isolation (Hall et al., 2017; Wolsey et al., 2017).

In contrast, the cultural model recognizes deafness as a form of diversity rather than a disability (Padden & Humphries, 2005; du Feu & Chovaz, 2014). It positions deaf individuals as members of a linguistic and cultural minority, where sign language is essential for identity formation and communication (Ladd, 2003; Leigh, 2009). This perspective distinguishes between "Deaf" (capitalized) which refers to individuals who actively identify with deaf culture and "deaf" (lowercase), which describes the audiological condition (Corker, 1996; Young & Hunt, 2011). It demonstrates that deaf community shares a common language, experiences, and cultural identity,

with sign language playing a fundamental role in cultural transmission and social cohesion (Padden & Humphries, 2005; du Feu & Chovaz, 2014).

Stereotypes in the hearing world often lead to the misrepresentation of deafness as a disability rather than as a linguistic and cultural identity (Beckner & Helme, 2018). Terms like deaf and dumb perpetuate misconceptions (Mousley & Chaudoir, 2018), while assumptions about lower intelligence contribute to feelings of being undervalued (Bauman, 2004). Societal attitudes embedded in the macrosystem give rise to inequalities in educational policies, media representation, and institutional accessibility for deaf individuals (Bone, 2019; Byatt et al., 2021; Ma et al., 2022).

The cultural model of deafness is widely accepted within the deaf community but remains overlooked in mainstream society. Understanding how broader social structures influence these perceptions is essential for developing policies that promote bilingual education, improve access to sign language, and recognize deaf identity as a valued part of cultural diversity (De Meulder; 2016). Increased awareness and institutional support are essential for addressing misconceptions about deafness and eliminating barriers to inclusion (Foss, 2014; Hall et al., 2019). Advancing sign language education and fostering culturally inclusive initiatives can contribute to a more inclusive and equitable society for deaf individuals (Green et al., 2025; Young, 2016).

Chronosystem: History of Deaf Culture

The chronosystem refers to the changes in systems over time due to historical events and their impact on both the systems themselves and, consequently, the individual. When evaluating the historical progression of deaf culture, a significant turning point was the Milan Conference of 1880, driven by the oralist approach, led to the long-term prohibition of sign language in deaf schools and integrated education settings (Moore, 2010; Kemaloğlu & Kemaloğlu, 2012). As a result of this prohibition, the norms of the hearing society became more dominant, while deaf culture was systematically suppressed. However, in 1988, a pivotal moment in deaf rights advocacy emerged at Gallaudet University in the United States, where most students were deaf and hard of hearing. The “Deaf President Now!” movement played a crucial role in advancing the recognition of sign language, ultimately leading to its acceptance and freedom of use over time (Holcomb, 2013; Sacks, 2009).

Similarly, Turkish Sign Language (TSL) remained prohibited for an extended period in Turkey, with speech training being the only method encouraged for deaf children (Arık, 2013). However, with the emergence of linguistic research on TSL in the early 2000s (Arık, 2016) and growing awareness within the deaf community, a significant milestone was reached in 2005 when Article 15 of Law No. 5378 on the Rights of Persons with Disabilities officially recognized TSL as a language (Kubuş et al., 2016). This recognition marked a turning point for deaf culture in Turkey, laying the foundation for the first policies related to TSL (Kemaloğlu, 2014). Following its official recognition, efforts to enhance accessibility for deaf individuals increased. In 2012, the Information and Communication Technologies Authority issued a report advocating for the inclusion of subtitles and TSL interpretation in television broadcasts and the provision of interpretation services for deaf

individuals using TSL (Kemaloğlu & Kemaloğlu, 2012; Kemaloğlu, 2014). After 2012, some TV channels, news programs, and television series began incorporating TSL interpretation in their online broadcasts (Doğan, 2021; Kemaloğlu, 2014).

Conclusion: Breaking the Cycle

In this article, deaf identity development is examined based on Bronfenbrenner's (1979) and Glickman's (1996) theories. Both theories converge on the idea that decisions made early in a deaf child's life have a profound and lasting impact on their development. Hearing norms in the macro layer have impact on thoughts and position of inner circles of ecology. The dominant perspective on deafness, often rooted in a medical framework, permeates and extends from macro to micro by shaping not only parental choices but also institutional policies and societal attitudes. This overarching view influences every stage and aspect of a deaf child's life, strengthening the notion that their identity development occurs under the shadow of prevailing societal perceptions. Understanding the far-reaching effects of the macrosystem's influence on inner systems highlights how deaf identity formation is deeply intertwined with broader cultural, educational, and legal frameworks. While attitudes toward deafness are first learned within the family, they are largely shaped by the dominance of societal norms that dictate expectations for communication, education, and integration. This structure influences all stages of a deaf child's life, positioning their identity formation within a cycle of societal perceptions. It sustains a system where larger societal forces shape individual experiences, and these experiences, in turn, reaffirm dominant cultural attitudes about deafness.

Breaking this cycle requires transforming the developmental environments that shape deaf children's experiences. Deaf child's developmental process is shaped not only by interactions with caregivers but also by access to language and societal attitudes toward deafness. Within Bronfenbrenner's framework, the availability of accessible communication in the microsystem such as sign language exposure at home and in early education, can have profound effects on later social and emotional well-being. Additionally, the attitudes and policies at the exosystem and the importance of inclusive and supportive developmental contexts at macrosystem levels, including community support for deaf identity and legal recognition of sign languages, further shape their developmental outcomes. Early exposure to nurturing environments that foster communication, and belonging is essential in establishing a strong sense of self and identity development. These foundational experiences influence how deaf children engage with the world and identify themselves in social context. Interrupting the cycle of exclusion and shifting culturally focused interventions can foster more inclusive and supportive environments, enabling deaf individuals to overcome restrictive societal norms and develop a strong, self-determined identity.

Limitations of the Study

This study is theoretical in scope and does not include empirical data, which naturally limits its ability to fully capture the complexity and diversity of lived experiences within the Deaf community. While Glickman's Deaf Identity Development Model and Bronfenbrenner's Bioecological Systems

Theory offer valuable conceptual tools for understanding how deaf identity is shaped across individual and systemic levels, they do not encompass the full complexity of identity development as it intersects with other dimensions such as gender, race, ethnicity, class, and additional disabilities. These intersectional layers can significantly influence how deaf individuals experience themselves and the world around them and may lead to identity paths that differ from what is outlined in more generalized theoretical models. Moreover, the cultural and policy contexts referenced in this study are specific and may not reflect the full diversity of Deaf communities globally. Deaf culture is shaped by distinct histories, languages, and societal attitudes, which means that identity development may unfold differently across regions. Engaging with personal narratives and community perspectives can provide valuable insights into how deaf identity is shaped across diverse social and cultural contexts.

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