



## *Community Stigma in Lampung Province Towards Individuals with Hearing Impairments*

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### Abstract

This study aims to investigate the stigma experienced by individuals with hearing impairments in Lampung Province. Employing a descriptive quantitative method with a survey approach, the research involved 400 respondents, whose sample size was determined using the Slovin formula. Cluster random sampling was utilized to select participants from five regencies and two cities within Lampung Province, namely the regencies of South Lampung, East Lampung, West Lampung, North Lampung, and Central Lampung, as well as the cities of Bandar Lampung and Metro. The research instrument was an attitude questionnaire comprising 58 statement items, measured on a 4-point Likert scale. These items included both favorable and unfavorable statements, structured around Link and Phelan's five dimensions of stigma. Validity and reliability tests were conducted using SPSS version 25.0. Validity results indicated a correlation value of  $r$  more than 0.30 for all items, and the reliability coefficient was 0.736. The findings reveal that the majority of respondents (253 individuals, or 63 percent) exhibited a Category 2 (moderate) level of stigma towards individuals with hearing impairments. Conversely, 81 respondents (20 percent) were in Category 1 (low), and 66 respondents (17 percent) were in Category 3 (high). This study recommends the development of continuous education and public socialization programs that target stigma reduction, promote inclusive communication practices, and encourage community engagement. Such efforts are expected to foster a more inclusive and empathetic social environment for individuals with hearing impairments in Lampung Province.

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## INTRODUCTION

In the current era of globalization, issues of diversity and social inclusion have become paramount concerns. One significant challenge that persists is stigma, defined as a negative label or adverse perception assigned by society to certain individuals or groups, including those with hearing impairments. This stigma often manifests as discrimination, exclusion, and unfair treatment, ultimately impeding various aspects of their lives.

Conceptually, stigma is a complex social phenomenon with profound impacts on those who experience it. According to Goffman as cited in Santoso (2016), stigma is a physical mark or specific attribute considered unusual and demeaning by society. Stigma can encompass physical disabilities, illnesses, or characteristics deemed "abnormal." Goffman categorizes stigma into three types, the first is abominations of the body, which refers to physical disabilities such as deafness, lameness, and blindness. The

second type is blemishes of individual character, referring to character flaws such as alcoholism and homosexuality. The third is tribal stigma, which is associated with ethnicity, religion, or nationality.

Individuals with hearing impairments fall under the category of "abominations of the body." The stigma they face not only influences societal perceptions but also impacts their self-perception, potentially leading to reduced self-confidence and social isolation.

Furthermore, Van Brakel WH, as cited in Ardiyani & Muljohardjono (2019) identifies six interrelated types of stigma. The first is public stigma, which refers to negative societal reactions such as rejection and exclusion. The second is structural stigma, characterized by discriminatory policies or practices within institutions such as schools or government bodies. The third type is self-stigma, where individuals internalize negative societal views, leading to low self-worth. The fourth is felt or perceived stigma, describing an individual's anticipation of being discriminated against. The fifth is experienced stigma, which refers to the actual discriminatory actions a person encounters. Lastly, label avoidance involves efforts by individuals to avoid being socially labeled, often by withdrawing from social situations.

Stigma towards individuals with hearing impairments is also influenced by factors such as knowledge, perceptions, education level, age, and gender (Amaliah et al., 2024). Inadequate or inaccurate information about hearing impairments often fosters misconceptions for example, the belief that such individuals are inherently less capable or unable to communicate effectively. These misperceptions can result in excessive expressions of pity or even social avoidance. In contrast, higher educational attainment and greater knowledge have been consistently associated with more

positive and inclusive attitudes. This is supported by the findings of Wang et al. (2021), who demonstrated that public attitudes toward persons with disabilities are significantly influenced by educational background, disability-related knowledge, and the frequency and quality of interpersonal contact. Their review underscores the importance of informed exposure and structured education in shaping inclusive societal perceptions, including those directed at individuals with hearing impairments.

According to Link & Phelan, as cited in Andersen et al. (2022), stigma consists of several interrelated dimensions. The first is labeling, where individuals are assigned negative labels by society. The second dimension is stereotyping, which involves attaching generalized beliefs to those who are labeled. The third is separation, referring to the social distinction between "us" and "them," which fosters exclusion. The fourth is emotional reactions, which include various emotional responses from both the stigmatizer and the stigmatized, such as fear, anger, or shame. The fifth dimension is discrimination, Demeaning treatment due to membership in a particular group. These dimensions elucidate how stigma is formed and its widespread impact on the lives of individuals with hearing impairments.

Individuals with hearing impairments are defined as those experiencing hearing loss, whether deaf or hard of hearing, which creates barriers in language, communication, social, and emotional development (Hernawati et al., 2020). Hearing impairments can be caused by prenatal (before birth), natal (at birth), or postnatal (after birth) factors (Muyassaroh, 2017)

Research by the Indonesian Association of Otolaryngologists and Head and Neck Surgeons (PERHATI-KL) indicates that social stigma is a primary challenge in addressing hearing

impairment. Data show that while 41% of the public holds a positive attitude towards hearing impairments, 10.2% exhibit a negative attitude, highlighting a gap in societal acceptance (Anastasia, 2023). A previous study by Karuniasih et al. (2017) "A Phenomenological Review of Social Stigmatization of Deaf Individuals," conducted in Denpasar, Bali, had limitations as it focused solely on the experiences of three adolescents with hearing impairments. Although it provided an in-depth perspective, it did not describe the views of the general public or the broader factors influencing stigma formation.

Lampung Province is a region in Indonesia characterized by high social diversity and a significant population of people with disabilities, particularly in Badan Pusat Statistik Kota Bandar Lampung (2024) indicate 2,275 individuals with disabilities across various districts in Bandar Lampung City, including those with hearing impairments. The diverse geographical conditions and information access gaps between urban and rural areas also contribute to the formation of societal stigma. A study involving six non-special education students at Muhammadiyah University of Lampung revealed the presence of stigma in the form of excessive pity and communication difficulties, often leading to avoidance of interaction, another manifestation of stigma.

Given these factors, the diverse geographical conditions and information gaps significantly influence the formation of stigma in society. To date, no quantitative study has specifically examined the general public's stigma toward individuals with hearing impairments in Lampung Province. Existing studies in Indonesia, such as those conducted in Bali and other regions, have primarily adopted qualitative approaches or focused on limited samples within specific subgroups, thereby not

representing the broader public perception. This research addresses that gap by employing a descriptive quantitative design with a large, representative sample from multiple regencies and cities in Lampung Province. Using Link and Phelan's five stigma dimensions, the study provides a comprehensive and measurable overview of societal perceptions, serving as a foundation for targeted awareness initiatives and the fostering of an inclusive society.

## RESEARCH METHODS

This study employed a descriptive quantitative research method with a survey approach. This method provides a quantitative or numerical description of trends, attitudes, or opinions within a population by studying a sample (Creswell & Creswell, 2018). Data collection involved distributing a questionnaire via Google Form to the community in Lampung Province.

The research population comprised the entire population of Lampung Province within the productive age range (15–59 years). Cluster random sampling was used to select a sample from seven districts in Lampung Province (Bandar Lampung, South Lampung, East Lampung, West Lampung, North Lampung, Central Lampung, and Metro). The Slovin formula was applied to determine the sample size, with a population of 6,228,310 people (Badan Pusat Statistik Provinsi Lampung, 2025) and a 5% (0.05) margin of error, resulting in a sample size of 400 respondents.

The questionnaire, serving as the data collection tool, consisted of two parts. The first part gathered demographic data, including age, gender, highest level of education, occupation, residence, and experience of meeting or interacting with individuals with hearing impairments. The second part comprised attitude assessment statements designed to

evaluate societal stigma towards individuals with hearing impairments, utilizing the five-dimensional stigma indicators proposed by Link & Phelan as cited in Andersen et al. (2022).

### ***Instrument Validity and Reliability Test Using SPSS Application***

The validity and reliability of the research instrument were tested using SPSS (Statistical Product and Service

Solutions) version 25.0 for Windows. Validity test results showed that the correlation values for all items were  $r > 0.30$ , indicating validity. The reliability test yielded a value of 0.736. Out of 58 attitude statement items, which included both favorable and unfavorable statements on a 4-point Likert scale, 41 items were deemed valid and reliable. Invalid statement items were discarded.

**Table 1.** Instrument Lattice

Indicator	No. Item		Number of Valid
	Valid	Invalid	
Labelling	1, 2, 4, 6, 7, 8, 9, 10	3, 5	8
Stereotype	12, 13, 14, 15, 16, 17, 19, 20, 21, 22	11, 18	10
Separation	23, 25, 26, 27, 29, 31, 32	24, 28, 30	7
Emotional Reaction	33, 35, 37, 38, 39, 40, 41, 42, 43, 44	34, 36	10
Discrimination	47, 50, 52, 54, 55, 58	45, 46, 48, 49, 51, 53, 56, 57	6
<b>Total valid items</b>			<b>41</b>

### ***Analysis of Stigma Categorization***

Analysis of Stigma Categorization  
Analysis of respondents' perception or attitude scores was conducted through a categorization process to facilitate quantitative data interpretation. This

categorization was based on a normal distribution formula using the mean (M) and standard deviation (SD) of the obtained data. Respondents' scores were classified into low, moderate, and high categories based on the categorization criteria proposed by Azwar (2020).

**Table 2.** Categorization analysis

Categorization	Interval Categorization
Low	$X < M - SD$
Moderate	$M - SD < X < M + SD$
High	$M + SD < X$

In this study, the categorization analysis classified the level of stigma in Lampung Province towards individuals with hearing impairments. A numerical coding system was used: Category 1 for Low, Category 2 for moderate, and Category 3 for moderate. This coding system allowed for more systematic statistical analysis and facilitated the

quantitative interpretation of research results.

## **RESULTS**

### ***Respondent Characteristics***

This study was conducted from April to May 2025, involving 400 respondents.

**Table 3.** Respondents by Gender

Gender	Frequency	Percentage
Male	182	46%
Female	218	55%
<b>Total</b>	<b>400</b>	<b>100%</b>

**Table 4.** Respondents by Age Group

Age Group	Frequency	Percentage
15-19	35	9%
20-24	127	32%
25-29	42	11%
30-34	33	8%
35-39	47	12%
40-44	31	8%
45-49	31	8%
50-54	28	7%
55-59	26	7%
<b>Total</b>	<b>400</b>	<b>100%</b>

Based on Table 3 and Table 4, the majority of respondents were women (218 people, 55%). The largest age group was 20-24 years (127 people, 32%).

**Table 5.** Respondents by Education Level

Education Level	Frequency	Percentage
Elementary	21	5%
Junior High	24	6%
Senior High	155	39%
Diploma	32	8%
Undergraduate	137	34%
Master's	25	6%
Doctorate	6	2%
<b>Total</b>	<b>400</b>	<b>100%</b>

Regarding educational background on Tabel 5, most respondents were high school/vocational school graduates (155 people, 39%) or university graduates (137 people, 34%).

**Table 6.** Respondents by Occupation

Occupation	Frequency	Percentage
Civil Servant	41	10%
Private Employee	75	19%
Entrepreneur	59	15%
Student	111	28%
Housewife	44	11%
Farmer/Fisherman	33	8%
Others	37	9%
<b>Total</b>	<b>400</b>	<b>100%</b>

Based on Table 6, the predominant occupation was students/college students (111 people, 28%).

**Table 7.** Respondents by Residence

City/Regency	Frequency	Percentage
Bandar Lampung	79	20%
South Lampung	73	18%
North Lampung	43	11%
East Lampung	75	19%
West Lampung	20	5%
Central Lampung	99	25%
Metro	11	3%
<b>Total</b>	<b>400</b>	<b>100%</b>

The distribution of respondents' places of residence showed that the majority resided in Central Lampung (99 people, 25%), followed by East Lampung (75 people, 19%), Bandar Lampung (79

people, 20%), South Lampung (73 people, 18%), North Lampung (43 people, 11%), West Lampung (20 people, 5%), and Metro (11 people, 3%).

**Table 8.** Respondents Who Have Met Individuals With Hearing Impairments

Experience Meeting Deaf Individuals	Frequency	Percentage
Yes	368	92%
No	32	8%
<b>Total</b>	<b>400</b>	<b>100%</b>

**Table 9.** Respondents Who Have Interacted With Individuals With Hearing Impairments

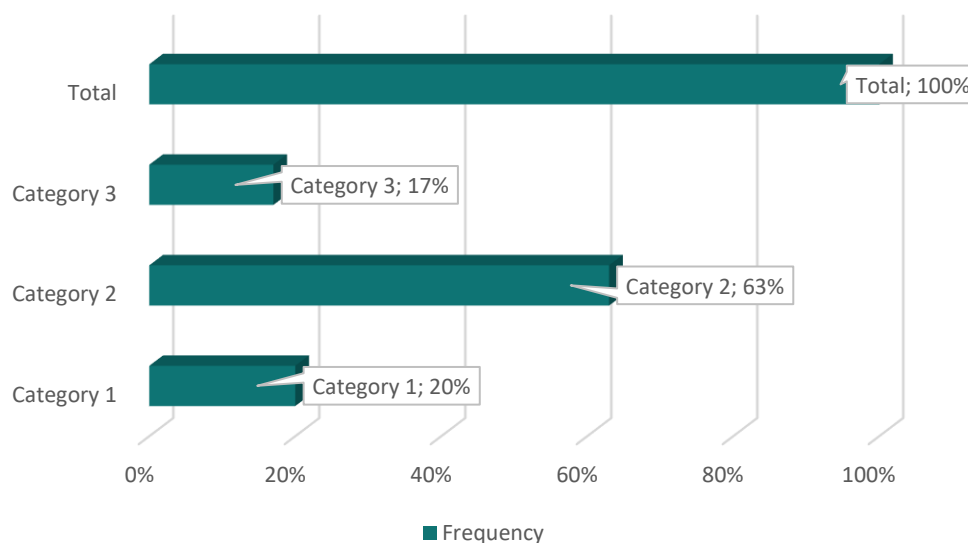
Experience Meeting Deaf Individuals	Frequency	Percentage
Yes	338	85%
No	62	16%
<b>Total</b>	<b>400</b>	<b>100%</b>

Regarding interactions with individuals with hearing impairments (deaf), 368 respondents (92%) reported having met deaf individuals in person, while 32 respondents (8%) had not. Additionally, 338 respondents (85%) stated that they had known and interacted with deaf individuals, while 62 respondents (16%) had never had such an experience.

### ***Society's Categorization of Individuals with Hearing Impairments***

Based on data from 400 respondents, the majority of the community (253 respondents, or 63%) fell into Category 2 regarding stigma towards individuals with hearing impairments. Meanwhile, 81 respondents (20%) were in Category 1, and 66 respondents (17%) were in Category 3. This indicates that while the stigma towards individuals with hearing impairments in Lampung Province is not overly concerning, continuous efforts are still needed to enhance understanding and social acceptance to foster an inclusive society.





**Figure 1.** Categorization Results

### ***Stigma Labeling Against Individuals with Hearing Impairments***

Labeling is a significant factor shaping the stigma experienced by individuals. This often occurs when society assigns negative labels, stamps, or nicknames to those considered different or non-conforming to social norms. Individuals with hearing impairments are

frequently targets of such societal stigma. The measurement of stigma from a labeling perspective, according to Link and Phelan, as cited in Andersen & Folker, (2022), includes the assignment of negative labels by society, where such individuals are often perceived as unable to communicate effectively and deemed less capable, thereby reinforcing negative stigma.

**Table 10.** Frequency Distribution of Stigma Labeling Categorization

Category	Frequency	Percentage (%)
Category 1 ( $x < 19,45$ )	72	18
Category 2 ( $19,45 \leq x < 26,63$ )	259	65
Category 3 ( $x > 26,63$ )	69	17
<b>Total</b>	<b>400</b>	<b>100</b>

The categorization results show that the majority of respondents (65%) fall into Category 2 in terms of labeling. This indicates that while negative stigma still persist, there is also a growing awareness that individuals with hearing impairments deserve acceptance and equal treatment. Labels such as “difficult to communicate with” or “hard to understand” often appear in society, even without an intention to demean. This suggests that

although attitudes are gradually shifting toward greater inclusivity, the public remains in a transitional phase that requires education and increased interaction to reduce unconscious tendencies toward negative labeling.

### ***Stereotypes About Individuals with Hearing Impairments***

A common stereotype attached to individuals with hearing impairments is

the assumption that they are "incapable" of performing jobs and are entirely dependent on others. However, societal

attitudes towards individuals with hearing impairments are becoming increasingly inclusive.

**Table 11.** Frequency Distribution of Stereotype Categorization

Category	Frequency	Percentage (%)
Category 1 ( $x < 29,40$ )	205	51%
Category 2 ( $19,45 \leq x < 33,48$ )	126	32%
Category 3 ( $x > 33,48$ )	69	17%
<b>Total</b>	<b>400</b>	<b>100</b>

Based on the categorization results on Table 11, 51% of respondents were in Category 1 regarding stereotypes, 32% in Category 2, and 17% in Category 3. This composition indicates that most people are beginning to adopt a more open and inclusive view of individuals with hearing impairments. This positive attitude is reflected in support for statements emphasizing the social, emotional, and cognitive abilities of deaf individuals.

However, the presence of respondents in Categories 2 and 3 suggests that stereotypes still persist in some circles. Some members of society still view hearing impairments as the

primary barrier to interaction and understanding. Therefore, while the tendency towards acceptance and understanding is greater than those maintaining negative views, educational efforts and increased awareness remain necessary to ensure that inclusive attitudes become more widespread and equitable.

### ***Social Separation in Everyday Life***

The tendency towards social separation of individuals with hearing impairments can still be observed in everyday interactions, as indicated by the following categorization data.

**Table 12.** Frequency Distribution of Categorization of Social Separation in Daily Life

Category	Frequency	Percentage (%)
Category 1 ( $x < 24,02$ )	72	18%
Category 2 ( $24,02 \leq x < 32,95$ )	256	64%
Category 3 ( $x > 32,95$ )	74	19%
<b>Total</b>	<b>400</b>	<b>100</b>

Based on the results of the separation categorization on Table 12, 64% of respondents were in Category 2, 18% in Category 1, and 19% in Category 3. These results indicate that most people are still in a middle ground, neither completely rejecting nor fully supporting the aspect of separation or social segregation. Therefore, efforts to promote more open and equitable interaction are

still very much needed to ensure that individuals with hearing impairments can be fully accepted in social environments.

### ***Public Emotional Reactions to Individuals with Hearing Impairments***

Emotional reactions are spontaneous responses that arise when someone encounters a particular situation, including when interacting with



individuals who have hearing impairments (deafness). These responses can range from feelings of comfort, awkwardness, and uncertainty to empathy, all of which are greatly influenced by a person's experience,

knowledge, and perception of the condition. Emotional reactions play a crucial role in determining how well someone can accept, understand, and adapt when interacting with individuals with hearing impairments.

**Table 13.** Frequency Distribution of Categorization of Public Emotional Reactions

Category	Frequency	Percentage (%)
Category 1 ( $x < 17,55$ )	72	18%
Category 2 ( $17,55 \leq x < 24,38$ )	262	66%
Category 3 ( $x > 24,38$ )	66	17%
<b>Total</b>	<b>400</b>	<b>100</b>

The results of the categorization of emotional reactions show that the majority of respondents (64%) fall into Category 2, while Categories 1 and 3 are relatively balanced (18% and 19%, respectively). This indicates that, in general, respondents are quite adaptive, meaning they are able to adjust and respond flexibly to situations when interacting with deaf individuals. Category 2 also signifies acceptance, where respondents do not react extremely, either too low or too high, but tend to be in the middle, feeling comfortable, patient, and confident in their interactions. However, a

small portion of respondents still show very low or very high emotional involvement.

### ***Societal Discrimination Against Individuals with Hearing Impairments***

The final indicator of stigma, which measures the stigma imposed by society on individuals with hearing impairments, is discrimination. The measurement of discrimination aspects, according to Link and Phelan (as cited in Andersen & Folker, 2022), includes different or negative treatment such as exclusion, maintaining distance, verbal abuse, and expulsion.

**Table 13.** Frequency Distribution of Categorization of Community Discrimination Against Individuals with Hearing Impairments

Category	Frequency	Percentage (%)
Category 1 ( $x < 13,40$ )	70	18%
Category 2 ( $13,40 \leq x < 19,99$ )	251	63%
Category 3 ( $x > 19,99$ )	79	20%
<b>Total</b>	<b>400</b>	<b>100</b>

Category 2, encompassing 63% of respondents, indicates that public attitudes towards individuals with hearing impairments are still in a transitional stage. This means that most people are beginning to show acceptance and no longer openly discriminate against

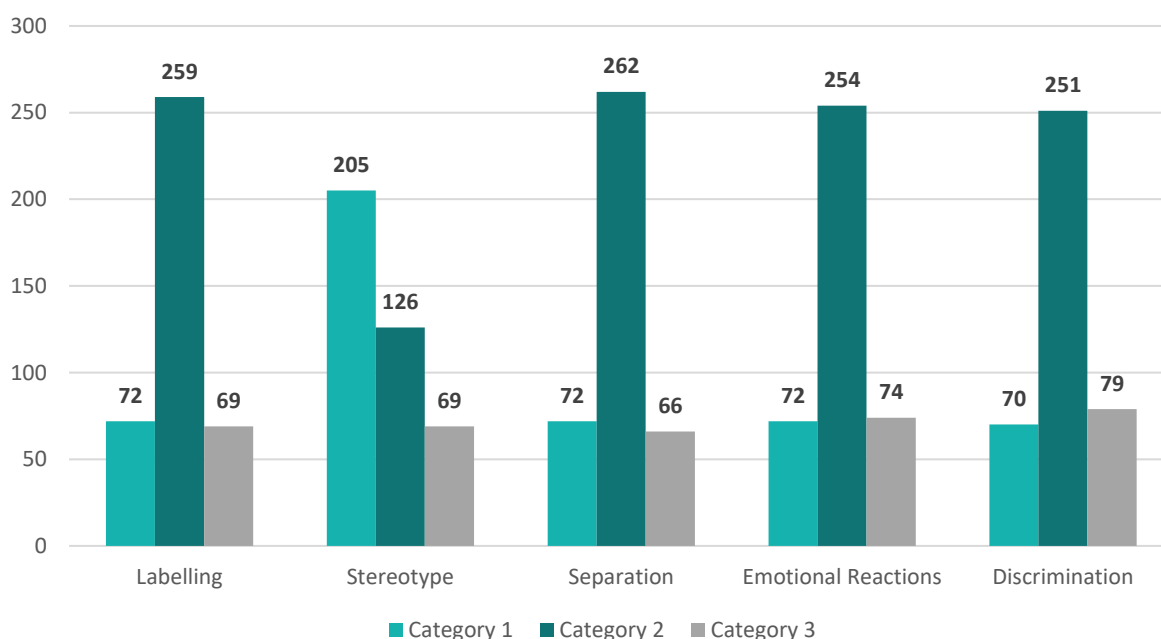
or reject individuals with hearing impairments in social life. However, this acceptance is not yet completely uniform. There are still groups in society that unconsciously or subtly apply different treatment or limit opportunities for

individuals with hearing impairments to develop.

With 18% of respondents in Category 1, it is evident that some members of society are already truly inclusive and do not exhibit discriminatory attitudes. Conversely, 20% of respondents in Category 3 indicate that exclusive attitudes and the potential for real discrimination against individuals with hearing impairments still exist

### ***Comparison of the Distribution Frequency of 5 Dimensions of Stigma***

The measurement of stigma in this study utilizes five dimensions of stigma developed by Link and Phelan (as cited in Andersen & Folker, 2022): Labeling, Stereotyping, Separation, Emotional Reactions, and Discrimination, all of which contribute to shaping perceptions of the phenomenon of stigma.



**Figure 2.** Results of Stigma Dimension Categorization

Based on Figure 2, an interesting comparison of the five indicators of the stigma dimension can be observed. Four indicators (Labeling, Separation, Emotional Reaction, and Discrimination) show respondents' answers predominantly in Category 2, with a range of 251-262 respondents. Meanwhile, the Stereotype dimension is dominated by Category 1 results, with 205 respondents. This indicates that people in Lampung Province generally hold a more inclusive view and acceptance of individuals with hearing impairments. However, there are still treatments that do not fully reflect inclusiveness in social practices, such as daily interactions and treatment of individuals with hearing impairments.

### **DISCUSSION**

Stigma is a label, characteristic, or negative view of complex social phenomena directed towards individuals or groups considered different. This study examines community stigma in Lampung Province towards individuals with hearing impairments. The research results from 400 respondents showed that the community's stigma in Lampung Province towards individuals with hearing impairments was predominantly in Category 2. This aligns with the majority of respondents' answers falling into Category 2 across various dimensions of stigma. This suggests that while a negative stigma Category 3 still exists, there is an emerging public awareness of the

importance of inclusion and social acceptance of individuals with hearing impairments.

Negative labeling of individuals with hearing impairments remains a significant issue in society. People often label those with hearing impairments as unable to communicate effectively or as different from other individuals. However, the results of this study indicate a shift, where some people are beginning to recognize that individuals with hearing impairments are equal to others and possess the ability to communicate in various ways, including sign language. While the finger alphabet is internationally patented, sign language varies by country (Nofiaturrehman, 2018). This demonstrates a growing public awareness of inclusion, supported by research (Rahmah & Janah, 2024), which states that the use of sign language is considered effective in supporting individuals with hearing impairments to socialize in an inclusive social environment.

Stereotypes attached to individuals with hearing impairments often relate to assumptions about their limited cognitive and social abilities. However, the findings of this study indicate a positive change, with society beginning to recognize and show a more inclusive view. This contradicts the common stereotype of individuals with hearing loss as "incapable," "lacking independence," and dependent on others. Nevertheless, social interactions between individuals with hearing loss and society reflect the complexity of social inclusion. This points to a subtle separation that society often does not realize occurs indirectly through the inability to communicate adequately or the perception that individuals with hearing impairments are more comfortable interacting with others who also have hearing impairments. Research by Meyer et al. (2025) reinforces this finding, with around a quarter of respondents choosing not to disclose their

hearing loss to anyone in any situation due to concerns about stigma, suggesting that unconscious social segregation remains a global challenge in creating inclusive societies.

This form of subtle and often unconscious social separation is also highlighted in a study conducted by Hakim & Zahra (2024) in Malang City. The researchers found that limited access to sign language, along with low self-esteem, was significantly associated with difficulties in social adaptation among Deaf individuals. Their study emphasized that access to sign language serves as a critical factor in promoting social participation and reducing public stigma. These findings underscore the importance of inclusive communication strategies as a foundation for enhancing adaptive capacities and fostering greater societal acceptance of individuals with hearing impairments.

On the dimension of emotional reactions, the stigma of people in Lampung Province towards individuals with hearing impairments is in Category 2. People show more patient, comfortable, and confident emotional reactions when interacting with individuals with hearing impairments. Although some individuals still exhibit emotional involvement in Category 3, this does not significantly affect the quality of social interactions.

This is further supported by the relatively optimistic results on the discrimination dimension, which also show a Category 2 categorization. This indicates that people no longer openly discriminate, exhibiting a reduced tendency to differentiate against individuals with hearing impairments and accepting their presence in social life. This research aligns with Law No. 8 of 2016 concerning persons with disabilities, which emphasizes equality of rights and opportunities for individuals with hearing impairments, thereby discouraging limitations on their opportunities.

The multidimensional nature of stigma toward individuals with hearing impairments is not unique to a specific region. A scoping review by Liu et al. (2025) analyzed 70 studies across various age groups and communication modalities and found that stigma manifests in multiple forms, including self-stigma, public stigma, and courtesy stigma. These forms of stigma often lead to delayed help-seeking behavior, reluctance to use assistive devices, reduced self-esteem, and social withdrawal. Importantly, the study emphasized that stigma affects not only individuals but also their families and social environments. These findings reinforce the conclusion that continuous education, inclusive communication strategies, and policy interventions are essential in addressing stigma and promoting social inclusion for individuals with hearing impairments.

Mikhailova et al. (2020) found that the level of stigmatization among deaf and hard-of-hearing students was significantly influenced by the degree of hearing loss, age of onset, learning environment, and individual psychological characteristics. Their study emphasized that even within inclusive educational contexts, stigma may persist unless supported by adequate psychosocial interventions and adaptive learning conditions. These findings reinforce the notion that fostering genuine inclusion requires not only public awareness but also structural support across educational, social, and psychological domains to fully empower individuals with hearing impairments.

Overall, these findings illustrate that the stigma towards individuals with hearing impairments in Lampung Province is categorized as 2, indicating a period of transition towards a more inclusive society. The dominance of Category 2 across various dimensions of stigma shows that people in Lampung Province no longer exhibit very high stigma, but also not yet fully low stigma.

This condition necessitates continuous education and awareness socialization programs to further change the stigma in some communities in Lampung Province towards individuals with hearing impairments, ultimately creating a truly inclusive social environment.

## CONCLUSIONS AND SUGGESTIONS

This study found that community stigma toward individuals with hearing impairments in Lampung Province varied across the five stigma dimensions, with most dimensions predominantly in the moderate category (Category 2) and one dimension falling into the low category (Category 1). This variation indicates a general shift toward more inclusive perceptions. The findings also suggest that sustained, direct interaction with individuals with hearing impairments can substantially contribute to shifting public attitudes in a more positive and accepting direction.

Addressing this issue requires coordinated efforts. Government bodies should implement public awareness programs on hearing impairment conducted across the province, incorporate sign language training into public service programs, and strengthen policies that safeguard inclusivity. Educational institutions are encouraged to provide mandatory training on disability awareness and inclusive teaching practices for educators at all levels, in collaboration with special education experts. Social organizations can support change by organizing regular community activities such as inclusive cultural, vocational, and recreational events that foster meaningful engagement between the public and individuals with hearing impairments.

Future research should focus on understanding stigma within specific social groups, such as youth, educators, and religious leaders, as well as on evaluating the effectiveness of current

inclusion programs. These insights will help refine targeted strategies to build a more equitable and inclusive social environment in Lampung Province.

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