



Parental stress among parents of toddlers with moderate hearing loss



Evelien Dirks^{a,b,*}, Noëlle Uilenburg^a, Carolien Rieffe^{b,a}

^a Dutch Foundation for the Deaf and Hard of Hearing Child, Amsterdam, The Netherlands

^b Department of Developmental Psychology, Leiden University, The Netherlands

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ABSTRACT

Background: The purpose of this study was to examine parental stress in parents of toddlers with moderate hearing loss compared to hearing controls. Furthermore, the associations between parental stress and child- and parent-related factors such as language, social-emotional functioning and social support were examined.

Design: The study sample consisted of 30 toddlers with moderate hearing loss and 30 hearing children (mean age 27.4 months). The two groups were compared using the Nijmegen Parenting Stress Index (NPSI) and parent-reports to rate the amount of social support and the children's social-emotional functioning. Receptive and expressive language tests were administered to the children to examine their language ability.

Results: Parents of toddlers with moderate hearing loss reported comparable levels of parental stress to parents of hearing children. Individual differences in parental stress were related to child- and parent-related factors. Poorer social-emotional functioning and language ability of the child were related to higher stress levels in parents. Parents who experienced less social support reported higher stress levels.

Conclusions: Parents of toddlers with moderate hearing loss experience no more parental stress than parents of hearing children on average. Given parental stress was found to be related to poorer child functioning, early interventionists should be aware of signs of elevated stress levels in parents.

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What this paper adds

This paper addresses the amount of parental stress reported by parents of toddlers with moderate hearing loss. Parental stress has been linked to negative child outcomes in deaf and hard of hearing children. However, previous studies have rarely investigated parental stress in a well-defined sample of children with moderate hearing loss. The present study shows that parents of toddlers with moderate hearing loss did not report more parental stress than parents of hearing toddlers on average. More parental stress was related to poorer child's social-emotional functioning, poorer language ability and less social support. These findings indicate that early interventionists should be aware of elevated stress levels in parents.

* Corresponding author at: Research and Development, Dutch Foundation for the Deaf and Hard of Hearing Child, Lutmastraat 167, 1073 GX Amsterdam, The Netherlands.

E-mail address: edirks@nsdsk.nl (E. Dirks).

1. Introduction

The diagnosis of hearing loss in a child can often result in parents feeling distressed, uncertain, and grieving (Kurtzer-White & Luterman, 2003). Parents are faced with a number of new challenges and stressors, such as changes in daily routines (e.g., being aware of background noise, eye contact), communication modes, and decisions about possible hearing aids. Indeed, parents of children with disabilities report more parental stress in general than parents of children without disabilities (Britner, Morog, Pianta, & Marvin, 2003; Davis & Carter, 2008). This is a concerning fact, given that parental stress has been linked to negative child functioning in typically developing children and in children with hearing loss (HL) (Baker et al., 2003; Crnic, Gaze, & Hoffman, 2005; Hintermair, 2006; Pipp-Siegel, Sedey, & Yoshinaga-Itano, 2002)

Children with moderate hearing loss (MHL; here defined as those with better-ear pure-tone averages (PTAs) of 40–70 dB HL) speak relatively well and hear more sounds than their deaf peers (Stelmachowicz, Pittman, Hoover, Lewis, & Moeller, 2004). Despite these advantages, children with MHL show language and social-emotional difficulties, just like their deaf peers (Davis, Elfenbein, Schum, & Bentler, 1986; Koehlinger, Van Horne, & Moeller, 2013). It has been argued that the impact of hearing loss on the functioning of children with MHL is frequently underestimated (Moeller, 2007). Most research on parental stress has focused on parents with deaf children, and not on the MHL population in particular. To fill this gap, the main aim of this study was to examine the extent to which parents with a child with MHL experience parental stress compared to parents with hearing children. Further, associations between parental stress and child- and parent-related factors like language, social-emotional functioning and social support were examined.

1.1. Children with moderate hearing loss

Children with MHL are unlikely to have the same auditory experience as hearing children (Wolfe et al., 2011). It is hard for children with MHL to understand speech in an environment with a noisy background, such as the playground, school or day care setting (Blaiser, 2010; Crandell & Smaldino, 2000). In most cases, hearing aids help these children to improve their hearing of sounds and speech, which in turn supports the development of more intelligible speech (Ambrose et al., 2014; Stelmachowicz et al., 2004; Tomblin, Oleson, Ambrose, Walker, & Moeller, 2014; Wolfe et al., 2015). Despite these hearing aids, not all words and sounds are heard clearly, and this can negatively impact their speech and language development (Stelmachowicz, Pittman, Hoover, & Lewis, 2001). Recent studies show that the performance of many early-identified children with MHL resembles the performance of their hearing peers, or at least within one standard deviation on norm-referenced measures (Fulcher, Purcell, Baker, & Munro, 2012; Stika et al., 2015; Tomblin et al., 2014). The results of other studies indicate that children with MHL lag behind their hearing peers in specific domains of language development (Hammer & Coene, 2016; Koehlinger et al., 2013; Moeller et al., 2010).

Children with MHL do respond to voices and sound, although inconsistently. This inconsistency is confusing for parents and may evoke parental stress (Kurtzer-White & Luterman, 2003). The fact that children with MHL can hear many sounds and speak relatively well might, counter-intuitively, be disadvantageous to the social-emotional development of children with MHL. People have higher expectations of their abilities compared to their peers with a more severe hearing loss (Moeller, 2007). Several studies have examined the effect of the degree of hearing loss on children's social-emotional functioning and found no association (Hintermair, 2007; Kouwenberg, Rieffe, Theunissen, & de Rooij, 2012; Theunissen et al., 2012, 2011; Wolters, Knoors, Cillessen, & Verhoeven, 2014). Both children with MHL and children with more severe hearing loss were found to be more at risk for developing emotional problems, peer problems, anxious/depressed symptoms, and hyperactive behavior than their hearing counterparts. These studies focused on school-aged children who did not benefit from early intervention. Similarly, Stika et al. (2015) examined the social-emotional functioning of 12–18 month old hard of hearing children who did benefit from early intervention. Their results indicated no differences between hard of hearing children and their hearing peers in social-emotional functioning at this young age and no effect of the degree of HL on social-emotional functioning. However, Fulcher et al. (2012) reported that the degree of hearing loss had a significant effect on language development in children with HL. Their results showed that children with MHL at three, four and five years of age performed less well on speech measures than children with severe to profound HL. The researchers argued that the less frequent intervention sessions and inconsistent hearing aid use in children with MHL could attribute to the differences with children with severe and profound HL.

Taken together, the (inconsistent) findings in the literature underscore the importance of conducting more specific research on children with MHL. In the current study, the focus is on parental stress among parents of young children with MHL, since parental stress has been linked to different aspects of child development.

1.2. Parental stress

Stress is a state of mental or emotional strain or tension resulting from adverse or demanding circumstances (Pipp-Siegel et al., 2002). Parental stress has been defined as “the aversive psychological reaction to the demands of being a parent” (Deater-Deckard, 1998, p. 315). Both factors inherent to the child and factors inherent to the parent can evoke parental stress (Abidin, 1983). As high levels of parental stress have been linked to negative parent and child outcomes, it is desirable that parental stress should be maintained within the normal range (Baker et al., 2003; Crnic et al., 2005; Hintermair, 2006; Pipp-Siegel et al., 2002).

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