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A Review of the Relationship Between the Needs of Mothers Who Have Hearing Impairment Children and Their State-Trait Anxiety Levels¹

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This descriptive research was carried out to identify the relationship between the needs of those mothers who have hearing impairment children and their state/trait anxiety levels. Significant positive relationships were found between the mothers' state anxiety level and the overall FNS score, the subscales of Need for Information, Help Explaining to Others, Community Services, Financial Assistance and Family Functioning and also significant positive relationship were found between the trait anxiety level and the overall FNS score, the subscales of Need for Information, Need for Support, Help Explaining to Others Community Services, Financial Assistance and Family Functioning.

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HEARING LOSS IS the most frequent sensory failure affecting more than 250 million people throughout the world (Mathers, Smith, & Concha, 2010). According to the Survey of Disabled in Turkey (2002), the ratio of the population with disabilities to the total population is 12.29% (http://www.eyh.gov.tr/tr/8245/Turkiye-Engelliler-Arastirmasi-Temel-Gostergeleri#tr_ozurluler_aras). The results of the "Survey for Problems and Expectations of Disabled" (2010) carried out by the Statistics Institute of Turkey (SIT) revealed that the ratio of hearing disability in the 0–6 age group was 9.6% (<http://www.tuik.gov.tr>).

World Health Organization (WHO) defines hearing loss as a complete loss of hearing ability in a single ear or in both ears. WHO classifies hearing impairments as mild (26–40 dBHL), moderate (41–60 dBHL), severe (61–80 dBHL) and significant (81 dBHL and over) hearing loss (Mathers et al., 2010).

Having a child with a disability affects the family life significantly (Özşenol et al., 2003). Families expect a

healthy child. However, if the child has a disability, the expectations will change. In addition to the pressures and tensions encountered by them, almost all parents with disabled children also have many stresses and sources of anxiety due to the special problems and needs of their children (Doğan, 2010). Parents with typical children have the responsibility of satisfying the needs of their children and providing an appropriate environment for their healthy growth and development. However, parents of children with disabilities have additional responsibilities such as teaching their child the skills that are necessary for daily living. These responsibilities call for additional needs from the parents (Yücel, Derim, & Çelik, 2008).

Especially for parents with no family history of hearing loss, the diagnosis comes unexpectedly and at a time when they are fully engaged in bonding with their newborn. They are easily overwhelmed by grief, a need for making decisions concerning communication mode or cochlear implantation and uncertainty and helplessness in the face of an unexpected situation for which they are not prepared. Consequently, parents often lack confidence in child rearing and may express irritations in their behavior and communication towards their child. This in turn can influence their intuitive and child-oriented parental behavioral repertoire. These mostly unconscious set of behaviors easily arise when parents are confronted

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with unexpected conditions like illness or special needs of the child (Reichmuth, Embacher, Matulat, am Zehnhoff-Dinnesen, & Glanemann, 2013).

Yücel et al. (2008) have reported in their study conducted on families of children with hearing impairment in Turkey that 78% of parents involved in this study indicated that they suffered from inadequacy in helping their family accept hearing loss. These parents were definitely in great need of active information for both creating an alternative educational-care and psychosocial support. Parents of hearing impaired children usually feel swamped and unqualified managing their child's rehabilitative process in a beneficial manner. This anxiety in their own abilities is often exhibited as affliction (Yücel et al., 2008). Presence of a child with hearing impairment causes all family members to experience stress. This situation reduces the quality of life within the family and increases the burden inflicted upon them (Gilbey, 2010). Parents of children with hearing impairment have more stress and stress-related anxiety and depression symptoms (Doğan, 2010). Anxiety is accepted as one of the basic emotions of human beings. All humans feel some anxiety when faced with situations they think is dangerous. This type of anxiety caused by dangerous conditions forms a temporary anxiety based on the current state. This is known as "state anxiety". Some always live in a state of anxiety. They are generally unhappy. This type of anxiety does not directly depend on dangers from outside but is rather more intrinsic. The individual feels anxiety when he or she feels that his or her characteristic values are under threat or when he or she feels that his or her current state is stressful. This is known as "trait anxiety" (Öner & Le Compte, 1985).

Nurses who work with children with disability and their families either at a hospital or in social health services have important roles for giving care to the family and the child. The determination of the needs of families with children with hearing impairment along with nursing approaches taken to fulfill these needs are important to decrease physical, emotional and social problems along with stress and anxiety levels of the parents.

Since studies related to children with hearing impairment and their families are relatively limited in number in our country (Doğan, 2010) and based on the aforementioned information, the objective of this study has been set as examining the relationship between the needs of mothers with hearing impaired children and their state and trait anxiety levels. To this end, the following questions were tried to be answered:

- Are the needs of mothers affected by their socio-demographic properties?
- Do the socio-demographic properties of mothers affect their anxiety levels?
- What are the need and anxiety levels of mothers?
- Is there a relationship between the need levels of mothers and their anxiety levels?

Method

Participants

The study was carried out on mothers of students attending a school for children with hearing impairment located in Gaziantep between February and April 2012. There are a total of 156 children at the elementary and secondary education sections of this school. Twenty-one of these children are boarding students since they do not have a family. The parents of the 135 students who live with their families were informed about the study via a telephone call. Eighty-seven families accepted to take part in the study. The mothers who accepted to participate in the study were called in to the school for further briefing after which a face-to-face survey was conducted on mothers who accepted to participate.

Inclusion criteria for parents of children with hearing impairment were to have no problems with communication as well as agreement to participate in the study. Exclusion criterion of the study was to be mothers of children who have disabilities other than hearing. All measurements used in this study are answered by the mothers of children because only mothers are coming to school.

Design

A descriptive, cross-sectional design was used to explore the relationships between family needs and anxiety level of mothers of children with hearing impairment.

Tools and Materials

A "family description form" containing 13 questions for obtaining socio-demographic data of the families and their children which was prepared by the investigators in line with literature, the "Trait-State Anxiety Inventory" developed by Spielberg et al. in 1964 and adapted to Turkish by Öner and Le Compte (1985) and the "Family Needs Survey" (FNS) which was developed by Bailey and Simeonsson (1988) and whose translation, validity and reliability works were carried out by Akçamete and Kargın (1996), Yücel et al. (2008) were used in the study as data acquisition tools.

Family Needs Survey (FNS)

The FNS developed by Bailey and Simeonsson (1988) the validity and reliability works of which were carried out by Akçamete and Kargın (1996), Yücel et al. (2008) consist of two sections:

Section I: In this section, there are 35 items grouped in six subgroups to enable parents to become aware of their needs. The first group includes 7 items for

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