



## To study the level of life satisfaction in the mothers of children with hearing and visual impairment

### KEYWORDS

Hearing Impairment, Visual Impairment & Life Satisfaction.

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### ABSTRACT

**Objective-** The aim of the present study is to study the level of life satisfaction in the mothers of children with hearing and visual impairment. Hearing impairment is the inability of an individual to hear sounds adequately. Visual impairment is a term experts use to describe any kind of vision loss, whether it's someone who cannot see at all or someone who has partial vision loss. Life satisfaction is a complex term and is sometimes used interchangeably with the emotion of happiness, but they are indeed two separate concepts. **Methodology-** The sample size consisted of mothers of 30 hearing and 30 visually impaired children from Jabalpur. The study was conducted at Jabalpur in Madhya Pradesh. The samples were selected by purposive sampling method. The tools used for assessing the variables are Sociodemographic, self made consent form and Life Satisfaction Scale (LSS, Singh and Joseph, 1992). **Result & Conclusion:-** The life satisfaction of mothers of hearing and visually impaired children. In hearing impaired the percentage of mothers' life satisfaction was average in 46.7% and low in 53.3%. In visually impaired the percentage of mother's life satisfaction was average in 36.7% and low in 63.3%.

### INTRODUCTION

An estimated 10% of the world's population experiences some form of disability or impairment (WHO Action Plan, 2006-2011). The term 'Disability' has many different meanings; the **Global Burden of Disease (GBD)** however, uses the term disability to refer to loss of health, where health is conceptualized in terms of functioning capacity in a set of health domains such as mobility, cognition, hearing and vision (WHO, 2004). Deafness is a condition wherein the ability to detect certain frequencies of sound is completely or partially impaired. When applied to humans, the term hearing impaired is rejected by the deaf culture movement, where the terms deaf and hard-of-hearing are preferred. Hearing impairment is the inability of an individual to hear sounds adequately. This may be due to improper development, damage or disease to any part of the hearing mechanism.

Visual impairment is a term experts use to describe any kind of vision loss, whether it's someone who cannot see at all or someone who has partial vision loss. The American Foundation for the Blind (Salvin, 2010) estimates that 10 million people in the United States are visually impaired. As per Indian Census an estimated 2.8% of Indian Population is having some or other form of disability. Whereas studies conducted by various organizations show that an estimated 5 to 7% population is disabled (NSSO-2001 estimation & Sarva Shiksha Abhiyan Mission 2006-07 estimation).

One of the dimension of subjective well-being is life satisfaction (Compton, 2005; Diener, 1984; Diener, Suh, Lucas, & Smith, 1999; Kim-Prieto et al., 2005). "life Satisfaction is conceptualized as a cognitive, global appraisal that people make when considering their contentment with their life as a whole or in regard to specific domains of life such as family, environment, friends, and self" (Suldo & Huebner, 2006, p.180).

### Reviews of Literature:-

Hopton et al., (1993) declared that the more anxiety people have, the less satisfied they are, whereas Roberts et al., (1983) did not have any observations about a meaningful relationship between satisfaction and depression checklist. Much consideration was given to finding some relationship between the patients, satisfaction and their anxiety level and finally the influence of these two variables has been determined.

Study by Sandler et al., (1995) indicated that greater support from an adult child to the caregiver resulted in greater satisfaction and less burden. It revealed that parents' positive appraisal of their relationship with the target child was significantly predicted by their

perceived care giving burden, but not by their child's psychiatric status (Pickett et al., 1997).

Davies (1998) explored that the parental encouragement and educational development were found positively correlated. Parental encouragement was found to have a pervasive influence on the educational development of high-development group, regardless of gender, district and urban rural variations.

Burton & Parker (2004); Ibbotson et al (2004) and Sheila et al (2010), believed that the patients, satisfaction is related to their psychological anxiety level, but they believed more studies were needed to prove this attitude.

Plant and Sanders (2007) reported that "Difficulty of care-giving tasks, difficult child behavior during care-giving tasks, and level of child disability are the primary factors which contribute to parent stress."

This study was developed by Seyyedeh et al., (2011). The process of opinion polling and satisfaction assessment is based on the aim of changing the relationship between receiver and provider of services from a limited, obligatory linear form into unlimited arbitrary reticular formation (Stallard, 1996). Donabedian says (1995), "The patient's satisfaction is one of the most focal parts of health condition in society".

**Aim-** To study the level of life satisfaction in the mothers of children with hearing and visual impairment.

**Hypothesis -** There will be significant differences in the level of life satisfaction in the mothers of children with hearing and visual impairment.

### Methodology

#### SAMPLE:

The sample size consisted of mothers of 30 hearing and 30 visually impaired children from Jabalpur. The study was conducted at Jabalpur in Madhya Pradesh. The samples were selected by purposive sampling method.

#### INCLUSION CRITERIA:

- Mothers of hearing/ visually impaired children below 18 years of age
- Those consenting and cooperating for the study

#### EXCLUSION CRITERIA:

- Mothers of children with multiple disabilities.]
- Mother having any physical or psychiatric problem.

**TOOL USED:**

**1. Socio – demographic data sheet**

A self made semi-structured socio-demographic data sheet especially designed for the study was used to collect information regarding child's age, sex, education, birth order, number of siblings, domicile, type of family, nature of delivery, complications during birth, postnatal complications, milestones development, childhood trauma and other clinical details.

**2. Life Satisfaction Scale (LSS, Singh and Joseph, 1992)**

The life satisfaction scale is used to measure the life satisfaction of the mothers, fathers and employees which include their all around activity. Life satisfaction refers to a person's general happiness; freedom from tension, interest in life etc. Life satisfaction has typically been measured using one-or-two item scales. Life satisfaction scale is based on the dimensions such as taking pleasure in everyday activities, considering life meaningful, holding a positive self-image, having a happy and optimistic outlook and feeling success in achieving goals. These dimensions can be referred to as "current" life satisfaction (Neugarten et al., 1968). The scale consists of 35 items, each item is to be rated on the five-point scale. The scoring of this scale – (1) for always, (2) often, (3) sometimes, (4) seldom and (5) never. The test-retest reliability computed after a lapse of 8 weeks turned out to be 0.91. The coefficient of correlation was found to be 0.83.

**Consent Form:**

A self made form explaining about the purpose and consent for participation in the study.

**PROCEDURE:**

In the beginning of research work authorities of the special school were contact. After the permission data was collected. After collecting addresses of hearing and visually impaired children from special schools data of the study was collected through personal contact with their mothers at home. Mothers of hearing and visually impaired children were contacted and their consent was taken for the study. After developing a good rapport mothers firstly socio-demographic and clinical details were collected. The life satisfaction scale was then administered to measure how much satisfied they were in life. Data obtained were analyzed using the Statistical Package for the Social Sciences, (SPSS) version 11.

**RESULTS**

**TABLE 1 - Showing the mean age of children with hearing and visually impairment and their mothers**

VARIABLE	GROUPS				t-VALUE	
	HEARING IMPAIRED		VISUALLY IMPAIRED			
	M	SD	M	SD		
AGE	CHILD AGE	13.2000	2.83330	12.2000	3.75454	1.164
	MOTHER AGE	39.5667	5.33488	40.3000	6.56611	0.475

Table 1 represents the mean age of children with hearing and visually impaired and their mothers. The both group mean age of hearing impaired children was 13.2 years and that of visually impaired children group was 12.2 years. The mean age of mothers of hearing impaired children was 39.56 years and that of visually impaired children mothers was 40.3 years. Both groups did not differ significantly with respect to their age. This supports the facts that both groups matched with respect to age.

**Table 2 (a) – Socio-demographic profiles of hearing and visually impairment children**

VARIABLES		HEARING IMPAIRED		VISUALLY IMPAIRED		CHI-SQUARE RE <sup>χ²</sup>
		F	%	f	%	
SEX	MALE	19	63.3	19	63.0	.000**
	FEMALE	11	36.7	11	36.7	
EDUCATION	NO FORMAL EDUCATION	1	3.3	6	20.0	4.501
	I-VIII CLASS	25	83.3	19	63.3	
	IX-XII CLASS	4	13.3	5	16.7	
NO. OF SIBLINGS	1	0	0	2	6.7	15.766**
	2	8	26.7	1	3.3	
	3	12	40.0	8	26.7	
	4	8	26.7	7	23.3	
	5	2	6.7	9	30.0	
	6	0	0	3	10.0	
AREAS OF DELAYED MILESTONES	MOTOR	0	0	30	100	60.000**
	LANGUAGE	30	100	0	0	
COMORBID PHYSICAL ILLNESS	YES	8	26.7	0	0	9.231*
	NO	22	73.3	30	100	

**Table 2 (b) Socio-demographic profile of hearing and visually impaired children mothers**

VARIABLES		HEARING IMPAIRED		VISUAL IMPAIRED		CHI-SQUARE
MOTHER'S EDUCATION	NO FORMAL EDUCATION	0	0.0	6	20	
	I-VIII CLASS	3	10	8	26.7	
	IX-XII CLASS	17	56.7	9	30.0	
	DEGREE	10	33.3	7	23.3	
MOTHER'S OCCUPATION	HOUSE-WIFE	19	63.3	14	46.7	5.313
	SERVICE	5	16.7	13	43.3	
	BUSINESS	6	20.0	3	10.0	
MARITAL STATUS	MARRIED	29	96.7	18	60.0	12.019**
	WIDOW	1	3.3	8	26.7	
	DIVORCE	0	0.0	4	13.3	
RELIGION	HINDU	27	90.0	28	93.3	2.352
	MUSLIM	1	3.3	2	6.7	
	SIKH	2	6.7	0	0.0	
SOCIO-ECONOMIC STATUS	HIGH	6	20.0	3	10.0	2.029
	MIDDLE	18	60.0	17	56.7	
	LOW	6	20.0	10	33.3	

\*p<.05 level and \*\*p<.01 level

The table 2 presents the comparison of demographic characteristics of hearing and visually impaired children and their mothers. In hearing impaired groups and visually impaired group majority were males, i.e., 63.3% & 63.0 respectively. There was a significant difference in terms of sex of both the sample groups. In education area, majority of the hearing impaired and visual impaired children were educated up to I-VIII standard (83.3% & 63.3% respectively). With respect to mothers' education majority of them were educated up to IX-XII standard i.e., 56.7% of hearing impaired children's mothers' and 30% of visual impairment children's mothers'. Significant difference was found between mothers' education of both the groups. Both the groups also differed significantly in terms of the number of siblings (p<0.01), areas of delayed milestones development (p<0.01), comorbid physical illness (p<0.01) and mothers' marital status. Majority of the sample groups were hindu (i.e., 90% of hearing impaired and 93% of visual impaired) & were from middle socio-economic status (60% of hearing impaired and 56.7% of visual impaired).

**TABLE 3 – Showing life satisfaction of mother's of hearing and visually impaired children**

LIFE SATISFACTION SCALE	GROUPS				$\chi^2$
	HEARING IMPAIRED		VISUAL IMPAIRED		
	F	%	f	%	
AVERAGE	14	46.7	11	36.7	.432
LOW	16	53.3	19	63.3	

The table 3 presents the life satisfaction of mothers of hearing and visually impaired children. In hearing impaired the percentage of mothers' life satisfaction was average in 46.7% and low in 53.3%. In visually impaired the percentage of mother's life satisfaction was average in 36.7% and low in 63.3%.

#### Discussion & conclusion:-

The aim of the present study was to assess the life satisfaction, stress and impact of disability among the mothers of children with hearing and visual impairment by using life satisfaction scale developed by (Singh and Joseph, 1992), parental stress scale developed by (Berry and Jones 1995) and disability impact scale developed by (NIMH-DIS, 2003). For this purpose group of hearing impaired children mothers were compared with visually impaired children's mothers. The two groups were matched on the basis of children's age and mother's age. The mothers of children with multiple disabilities and more than one child with disability were excluded. The two groups were compared on the basis of their demographic profile including child's sex, child's education, mother education, no. of siblings, areas of delayed milestone development, comorbid physical illness, mother occupation, marital status, religion and socio – economic status.

The mean age of hearing impaired children was 13.20 years with the standard deviation of 2.833 and in visually impaired children their mean age was 12.20 years with the standard deviation of 3.754. The mean age of hearing impaired children's mothers was 39.56 years with the standard deviation of 5.33 and in visually impaired children's mothers mean age was 40.3 years with the standard deviation of 6.566. Both the groups did not differ significantly with respect to their ages. This supports the fact that both the groups were matched with respect to age.

In table 2(a), a significant difference in the area of children's sex may be due to the higher number of males (63.7%), in both the groups and depending on the availability at that time.

In table 2(a), majority of the children in hearing impaired and visual impaired (83.3% and 63.3% respectively) were educated up to 8<sup>th</sup> standard. 20% of visual impaired children didn't have any formal education, which may be due to the nature of the condition from which they were suffering, however 16.7% of visual impaired were educated up to 12<sup>th</sup> standard. There was no significant difference found in this area.

In term of education of mothers, it was seen that majority of mothers of hearing impaired children were educated up to IX-XII standard (56.7%), whereas 30% mothers of visual impaired children were educated till IX-XII standard. A trend was found that mothers of hearing impaired children were more educated than mothers of visual impaired children. No single mother was illiterate in hearing impaired group. Reason for the significant difference in this specific area may be that mother's who are highly educated, they know the information about the disability and they know their facility and other things related with their disabled children. And those mother who are not much educated or no formal education they did not know any type of facility for their impaired children.

Further significant differences were seen in the number of siblings of the hearing and visually impaired children at .01 levels on the basis of 1 to 6 siblings. In hearing impaired children 26.7% had 2 siblings,

40.0% had 3 siblings, 26.7% had 4 siblings and 6.7% had 5 siblings. Similarly in visually impaired children 6.7% had 1 sibling, 3.3% had 2 siblings, 26.7% had 3 siblings, 23.3% had 4 siblings, 30.0% had 5 siblings and 10.0 % had 6 siblings. The finding of Kristen E. Bolomey (2002), suggest the presence of brother or sister with the disability is considered to be stressful, and there are many positive affects both on the disabled and non-disabled.

A significant difference was seen in area of delayed milestones development of hearing impaired and visual impaired at .01 levels on the basis of two areas motor and language. In hearing impaired 100% children had delayed language development as compared to visually impaired children. Similarly 100% of visually impaired children had delayed motor development. The finding of hearing and visually impairment is a low-incidence disability, occurring in 1.5 per 1000 live births in developed countries (Oxford Radcliffe Hospital, 1995). However, young children with visually impairment are a very heterogeneous group in terms of the type and severity of visually impairment.

The most salient fact of deafness is that it renders spoken language inaccessible in the normal fashion. Thus, and the fact that over 90% of deaf children are born to hearing parents (Moore, 2001; Marschark, Lang, & Albertini, 2002), has far reaching implications for many aspects of development including language acquisition, familial and social relationships and access to information and education.

Poor vision may decrease the child's ability to explore in the important first twelve months of development. This may mean that it takes longer for a child to crawl or walk (South Africa). Visually impaired children are better in language than motor skills as they are aware of one's gestures, posters, looks by sound or touch (South Africa). Studies of children with developmental disabilities have found that 48% to 75% of them also have significant visually impairments (Maino et al., 1990).

The significant difference was seen in comorbid physical illness of hearing impaired and visually impaired at .01 levels on the basis of two statements 'yes' response and in 'no' response. In hearing impairment 26.7% in 'yes' response on the statement and 73.3% in 'no' statement. In visually impairment 100% in 'no' response on the statement. The findings of Hill-Briggs et al 2007 stated that individuals whose hearing loss occurs prior to approximately 18 months of age function significantly differently than those whose deafness occurs following the development of language (Braden, 1994; Marschark and Clark, 1993; Meadow, 1980).

Further with regards to variable of demographic the significant difference was found in marital status of mothers at .01 levels. The 96.7% of hearing impaired children mothers was married, 3.3% was widow. As compared to visual impaired children mothers there were 60.0% was married and 26.7% was found to be widow and 13.3% was divorced. The findings of this study in marital status of mother's of hearing impaired and visual impaired children were highly significant in married status because of both parents mother and father are adjust and they are accept child disability. But those mothers who are widow and they had suffer so many problems like financial, child care in a proper way i.e. their treatment time to time, study, hygiene etc. And those parents who are live separated because they are not accept the child disability.

While dealing with the life satisfaction table of mothers of both the groups no significant difference was found. The findings of Vijesh and Sukumaran (2007) for any parent of a disabled child, the most stress producing factor is the child's dependence for daily living activities. Once the child attains independence in these activities, the dependence on the mother is reduced, and naturally it will reduce the stress level. This gives an important point in managing the disabled child, where the emphasis has to be on attaining independence in daily activities.

**LIMITATION AND FUTURE DIRECTION****LIMITATIONS**

- 1) Sample size taken was small.
- 2) Only mothers of hearing and visually impairment children were considered.
- 3) The sample had been taken from one place only.
- 4) Only hearing and visual impaired children without any other impairments.
- 5) Other physically and mentally handicapped children were not taken.

**FUTURE DIRECTION**

- 1) Sample can be increased for the generalization of result.
- 2) Sample can be taken from both parents' mother and father.
- 3) In future study other physically disabled children also are taken for comparison.

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