



Effectiveness of Encouragement Training in Alleviating Depression among Mothers of Children with Hearing Impairment

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Abstract

Mothers of children with hearing impairment are highly vulnerable to psychological problems such as anxiety and depression. This study was done to assess depression in mothers of hearing impaired children and the effectiveness of encouragement training in alleviating depression in them. This study is an experimental, pre-test and post-test design with a control group. The population of this research consists of mothers of children with hearing impairment in Tehran city. Using random sampling, 40 mothers of children with hearing loss who were enrolled in the Centre, and scored 19 to 29 points (moderate depression to severe depression) in the Beck Depression Inventory, were selected randomly from Tehran rehabilitation centers and assigned randomly into two groups: 20 in the experimental group and 20 in the control group. The experimental group was given 10 sessions of group encouragement training (two sessions of 90 minutes a week). Symptoms of depression in both groups were evaluated before (pre-test) and after (post-test) of the intervention program. Research data were analyzed using covariance analysis method. Findings of the study indicated that group encouragement training program reduced the symptoms of depression in the experimental group more significantly ($p > .01$) than in the control group. Effectiveness of group encouragement training program in alleviating mother's depression needs more theoretical and practical implications. Therefore, it is necessary that in rehabilitation programs for children with hearing impairment, attention needs to be given to address the emotional dimensions of the family and the maternal psychological status, besides the usual services provided.

Keywords: Encouragement training, Mothers of children with hearing impaired, Depression.



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Contents

1. Introduction	54
2. Method	55
3. Results	55
4. Conclusion.....	56
5. Acknowledgment.....	56
References	56

1. Introduction

One of the most superior senses of human being is hearing. The privation of hearing sense does not mean that the person is just unable to hear the sounds. However, it can lead to failures to attain beneficial and hopeful experiences in an individual's social life (Hallahan *et al.*, 2012). Hearing loss is a common injury at birth. According to the statistics from centers for diseases control and prevention in the United States of America, one to three percent of 1000 newborn infants have a hearing loss (Tayebi Ramin *et al.*, 2014). Early childhood years are a golden period for learning and education of children with impaired hearing. This is the time when they can learn efficacious social skills and education. Any neglect in the early starting of rehabilitation and intervention program can cause irreversible damages to the future skills of children with impaired hearing (Alpiner and MC Carthy, 2002). If they missed the chances presented in the early years, the children will face difficulties to having a successful life (Curtin *et al.*, 2014). The mother is the greatest teacher and coach during this time. The mother plays a significant role in the success of child (Dumont *et al.*, 2012).

However, the diagnosis of less hearing child has different outcomes on the family, especially on the mother. Despite recent clinical advances, less hearing children face many medical and psychological aspects, an issue which seems to be a challenging one (Tayebi Ramin *et al.*, 2014). The ability of the mother to adapt to a child with impaired hearing is a major cause that can change the child's life in different ways. For the mothers of children who have higher trust and confidence in childhood compatibility and adaptive emotional years, their children have shown an improvement in their education. The less hearing children to pass the emotional childhood, their parents will need to accept them as less hearing children (Hintermair, 2006). In the early years, helping the family of impaired hearing children was not in the domain of physicians. Besides, access to experts to coach impaired hearing children was almost impossible. However, a major problem that faces parents of impaired hearing children was the child's loss of hearing and ways to improve the child's language skills (Chu, 2009).

Depression is the main cause of disability or impotence (Sinnott *et al.*, 2014) and it is a prevalent disease throughout the world (Stoyanova, 2014). International statistics shows that 121 million people have depression disorders (WHO, 2011). Therefore, it has become an epidemic like a universal disease (Murray *et al.*, 2012). Women are found experiencing from depression more than men (Stoyanova, 2014). The children of depressed mothers will face a variety of problems such as retardation in language competence, social and cognitive development. Therefore, especially when the children are younger, the mother is more vulnerable to depression (Campbell, 2010).

The parents of impaired children have a higher risk of mental health (Van Driessche *et al.*, 2014). Though many of the mothers are able to deal with the problem, in general, mothers who have a physical disorder, depression, stress, anxiety, and less self-confidence, may experience loneliness and may have a problem with their communication (Khamis, 2007). However, the mothers of impaired hearing children may face other problems as well. Studies have indicated that impaired hearing children are lower in some contexts compared with hearing children. In addition, more than 40% of hearing impaired children are accompanied with other disabilities as well Marschark *et al.* (2011). For example, in 2010, Dammeyer found that in the psycho-sociological aspects, children with impaired hearing are lower than others. This is because mothers with depression are a potential risk for their children (Goodman, 2014).

The mothers of impaired children will experience more depression than mothers of normal children for different reasons. First, more than 90% of hearing impaired children is born from families who are unfamiliar with such a situation and they may have never seen a child with impaired hearing in their families before. Faced with these realities, parents will experience a feeling of loneliness and will need to look for a place which can help them. Consequently, they understand that they need to increase their awareness, and thus, immediately they decide to find the best solution for their children to fulfill their needs, and provide support for their education. Besides, hearing impaired children create difficulties for their mothers because of their deficiency in language skills (Hintermair, 2006). Second, their parents will be limited in their social network because of the presence of a hearing impaired child in the family environment, and hence, their social support will reduce. Previous studies have reported that social support is recognized as an affective factor for mental health of mothers of hearing impaired children (Pipp-Siegel *et al.*, 2002). Third, previous studies have shown that hearing impaired children have less mental health than normal children (Fellinger *et al.*, 2008; 2009); (Kvam *et al.*, 2007). Therefore, the parents of these children should think about reducing the psychological problems of their children on top of their impaired hearing problem. All these challenges and communicative problems of hearing impaired children contribute to the cause more issues for the mothers of impaired hearing children in contrast to mothers of hearing who face less physical health condition. The promising point is that previous studies have reported that early intermediation will reduce the domain of children issues.

In decade of 1970, researchers paid attention to training and counseling of parents with special children. During those times, it was important to develop intermediation programs and to study the direct effects on cognitive-emotional development of special children. Several studies have revealed the efficiency of these counseling programs. Parents who participated in intermediation and counseling programs had a more adaptive ability with current situations in the long term. They also had closer relationship with their children and positive attitude toward the disability of their children. Furthermore, they had better emotional relationships with their children (Khamis, 2007); (Shechtman and Gilat, 2005).

To reduce the depression, many methods have been suggested, one of which is encouragement. Encouragement is a diagnosis, acceptance and transformation of internal beliefs to an individual. One who is able to give encouragement and Adler treatment considers it as a determiner of the aspect of development and human growth; people consider it as giving hope and encouragement to others to cooperate. Nystrom (2014); Bahlmann and Dinter (2001) defined encouragement as a means of understanding that even though there is a negative and positive points in an individual, the perception of him- or herself make an outstanding difference in his approach toward life. In other words, encouragement is not to deny or to oppress a negative aspect in life, but to pay attention to the positive and the negative; and studying the choice of positive issues and having awareness about what we do in a way that is beneficial to our life.

Losensi and Dinkmer defined the encouragement as a process of facilitating the development of innate capacity and sense of braveness to do a positive action (Nystrom, 2014). Encouragement is a message such as “I have trust in you,” “I respect you,” “Your effort is worthy and admirable,” and “I am with you and beside you”. Witenko (2014) carried out a study to evaluate the effect of encouragement on educational improvement in a high school in Southern California and found that the students who received encouragement performed higher than those who took no notice to their encouragement. Nystrom (2014) conducted a study about using encouragement to help the families having a person with Alzheimer in the family, and with the aim of giving hope to them. The study suggested that encouragement can have positive effect on families who have a person with Alzheimer. It also helped them to attain self-concept and self-worthiness, while reducing their feeling of isolation and improving their social communication.

The relationship between depression of mothers and their children’s social skills (DeRose et al., 2014) and issues regarding social skills of children with impaired hearing, gave importance to depression experience faced by mothers of children with impaired hearing. Hence, the present study was conducted to measure the level of depression among mothers of children with hearing impairment and the role of encouragement in the remedy of depression faced by these mothers.

2. Method

Both control group and experimental group were evaluated. The measurement was administrated by a pre-test before encouragement training and encouragement was administrated by a post-test after the encouragement training. The experimental group and control group were selected and assigned randomly into two groups: 20 in the experimental group and 20 in the control group. Prior to commencing the study, ethical clearance was given to participants and they were assured that their information will be classified as secret information, and they have authority to leave research at any level. At the end of research, applicants of control group had 5 sessions of group inter-mediation.

The experimental group was given 10 sessions of group encouragement training (two sessions of 90 minutes a week). Content of 10 training sessions were derived from encouragement training sessions of Shonaker Salimi Bajestani and Asali Talkoui (2013). In the first session, the concept of encouragement had been explained by leader and behaviors that were caused to encouragement had been taught to participants. Participant had been discussed about behaviors while observed themselves and explored what they like to know about him/her, their family and their life. In the second session, goal-oriented and concept of human behavior had been taught. In the third session, members must accept that human being is incomplete creature and they never blame someone for its fault. In the fourth session, they learnt loving thought and encouragement. In the fifth session, they focused on the effect of backbite (negative talking behind the others) on relationships, unity and integrity. The sixth session was for creating positive relations and self-encouragement. The seventh session was for describing and expansion of sixth session by practicing on internal conversation and encouragement identical statement. The eighth session was a survey for our role in difficult situations. The ninth session was for review of our images and personal definition of love. Tenth session was for relaxation exercise and state encouraging sentences such as if others are able to do, so you can do it, try several times, finally you attain the achievement. The failure is bridge for success. Also participants practiced 10 encouraging skills from Shonaker approach during the sessions. This 10 skills are include: amendable, inspiring the faith and trust, exploring strength point in individuals, emphasis on strength point of others, accepting fault, motivating responsibility, notice to special interest of others, modeling, constancy support and considering people as a unique person.

3. Results

The statistical method were used in this study are descriptive statistic consisting of Mean, Standard Deviation and inferential statistic consisting paired t-test and covariance test analysis. Table 1 shows the results of depression score before t-test and after t-test in impaired hearing children’s mothers that was a significant difference ($p < .001$). This means that encouragement training has a significant effect on mother’s depression reduction. The hypothesis evaluation was done by analysis of covariance test.

Table-1. Depression and posttest scores of the experimental group

Indicator Group		Mean	Standard Deviation	t	Significance level
	Pre-test	11.08	4.76	.468	.001**
	Post-test	2.6	1.81		

** $p < .001$

Table-2. The analysis results of covariance after posttest omitting the effect of pre-test between 2 groups

Sources of variation	Sum of squares	Degrees of freedom	Mean square	f ratio	Significance level
Groups(Independent Variable)	647.15	1	647.15	37.95	.001
Error variance (Intragroup)	630.89	38	17.05		
Total	10309	39			

The results (as shown in Table 2), indicate that the value of calculated f (37) with degree of freedom 1, was bigger than f in the table (7.35), so research hypothesis confirmed with 99% confidence. This means, encouragement training has positive effect on reduction of depression in mothers of impaired hearing children.

4. Conclusion

Less hearing is a condition that limits the ability of a child to oral communication. Because of this reason, depression becomes a common phenomenon that occurs among parents of children with less hearing. The results of this study indicated that probability of mothers of children with impaired hearing experiencing depression is higher than that of their fathers. This problem faced by the mother leads the child to be less successful in his or her mental and linguistic skills development (Prakash *et al.*, 2013). Researchers also mentioned that if the mother is appropriately supported and attention given to her as well, she will have a deeper emotional contact with her hearing impaired child (Sipal and Sayin, 2013). The present study was designed to determine the effect of encouragement training on reducing the depression faced by the mothers of hearing impaired children. The findings of the present study are consistent with those of Prakash *et al.* (2013) who found the same results in their study with 50 participants. Prakash and colleagues evaluated 50 mothers of cochlear implant children with high two-sided impaired hearing problem. The study aimed to determine and compare the level of stress and depression experienced by the mothers of children who used earphones. They found that the stress level and depression was high in both groups. This is in contrast to the results of other studies which found that level of stress and depression experienced by mothers of children who used earphone were higher.

This finding corroborates the finding by Sipal and Sayin (2013) who surveyed 103 mothers of less hearing children on the aspect of the depression levels and effect of social support. They found that one of the causes of high depression is having a less hearing child. This study confirms that social support is associated with reduction of depression level. Skarsater *et al.* (2003) studied the role of expertise encouragement and inventiveness in reducing the depression of 12 people. Their findings support the idea that encouragement and inventiveness reduce patients' mental pressure and help them recover their health condition, and thus give meaning to their life. Encouragement helps people to retain their present social network or to organize a new network.

Although the finding of the present study supported those of previous research, a number of important limitations need to be considered. First, further tests were not conducted, and second, evaluation of long term effect of encouragement was not conducted. Therefore, it is recommended that further research be undertaken in these areas. Regarding advances in equipment and diagnosis programs, early diagnosis of hearing impaired children, the attention on psychological health condition of less hearing child, the essential role of parents in any kind of intermediation programs for development of disabled children, the need to conduct counseling and treatment programs (individually or in groups) for their parents should be considered. In fact, parents who participated in counseling and intermediation programs can adapt better to their condition in the long term. In addition, they have a closer relationship with their hearing impaired child. Besides, they also have positive attitude toward their child's disability (Bar low *et al.*, 2006); (Berge *et al.*, 2006). The parents' psychological health condition has an effect on their expectation on their hearing impaired child, as well as their social vicissitude, emotions, cognitive and behavior of the children and the quality of their attachment (How, 2006); (O'Neil *et al.*, 2004).

Therefore, the adoption of effective and efficient treatment methods and organizing training workshops appropriately designed can avoid failures. These designs can be presented to parents, especially mothers of hearing impaired children. These programs can create awareness in the families facing similar problems and experiences, and facilitate the acceptance of disabled children and subsequently improve their mental health. Finally, the findings of this study have a number of important implications that can benefit future practice in clinical, training and educational cooperators.

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