

Research Paper

## Parenting Stress in Families with Hearing Impaired Children in New Delhi: Implications for Counseling

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### ABSTRACT

The objective of this study was to investigate the level of parenting stress in families with hearing impaired children based on gender and location of parents. Descriptive research design was adopted in the study and a sample size of 120 parents who met the inclusion criteria for the study was purposively selected from the special schools in New Delhi. Parenting stress questionnaire was used for data collection while descriptive statistics of mean, standard deviation and t-test was used to analyze the data collected in the study. Findings revealed that parenting stress level of families with hearing impaired children is high and do not significantly differ based on gender and home location. In view of the findings, the researchers concluded that parents should be given adequate educational, vocational and personal-social counseling to enable them provide adequate support to their hearing impaired children.

**Keywords:** *Parenting Stress, Families with Hearing Impaired Children, Implications for Counseling*

Hearing impairment also known as hearing loss, refers to the partial or complete inability to hear sounds in one or both ears. It can occur at birth congenital or be acquired later in life due to illness, injury, or environmental factors such a prolonged exposure to loud noise. The degree of hearing loss can range from mild to profound and it can significantly impact an individual's ability to communicate, learn and interact socially. Despite advancements in technology and awareness, families of children with hearing impairment often face emotional, financial and social challenges. Understanding the nature of hearing impairment is the first step towards creating a more inclusive and supportive environment for affected individuals and their families.

Parenting stress comprises a complicated and persistent series of challenges faced by individuals while parenting, and it involves adapting to the demands of the job. As hearing loss is not a visible handicap, hearing parents who give birth to a deaf child are often unaware of the child's hearing loss. Hearing loss if undetected and untreated can result in the delay of speech, language, and communication skills. The diagnosis of deafness in a child often leads to a crisis in the life of the parents. The psychological reaction to this diagnosis typically includes feelings of grief, helplessness, guilt and anger, given the central role of

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hearing to human communication, a sense of isolation within the parent-child dynamic is inevitable (Nancy & Mellon, 2009). A parent adjusting to a child's diagnosis of hearing loss commonly ascends through a series of emotional stages. Stein and Jabaley (1981) described three stages of parental responses to the diagnosis of hearing handicap in their child: (1) an initial expression of anger toward the professionals who diagnosed the deafness in their child; (2) subsequent expressions of anger toward the child as they find it increasingly difficult to deny the existence of the hearing loss; and finally (3) the acceptance of the hearing impaired child by the parents, which marks the transition from sadness and anger to the development of adaptation and coping behaviors.

### *Objective*

The objective of this study was to investigate the level of parenting stress in families with hearing impaired children based on gender and location of parents.

## **METHODOLOGY**

### *Sample*

This study adopted a descriptive design. A sample of 120 parents was voluntarily and purposively selected to participate in this study. The study was carried out in two special schools in New Delhi, due to the large number of children found with hearing impairment.

### *Tool used*

Parenting Stress Questionnaire, developed by the researchers was used for data collection in the study. The instrument had 20 items that measure the level of parenting stress experienced by parents of hearing impaired children. The instrument had five clusters that measures psychological, emotional, financial, physical and social stresses with a four likert scale response format of strongly agreed (4 points) to strongly disagreed (1 point).

### *Method of Data Analysis*

Descriptive statistics of mean, standard deviation and t-test was used to analyze the data collected in the study. The results of data analysis for Table 1 were interpreted using real limit of numbers as follows: very high extent (3.50-4.00), high extent (2.50-3.49), low extent (1.50-2.49), very low extent (0.50-1.49). The decision rule for testing the hypotheses was to reject null hypothesis if the exact probability value (p-value) is less than the 'a priori' probability value (that is, 0.05); otherwise the hypotheses were not to be rejected.

### *Procedure*

The present study was conducted to examine parenting stress in families with hearing impaired children in New Delhi and explore its implications for counseling interventions. A total of 120 parents of children with hearing impaired were selected as participants. These parents were drawn from two special schools catering to hearing impaired children in New Delhi region.

Prior to data collection, necessary permissions were obtained from the head of the selected special schools. Participants and the nature of the study and informed consent was obtained. Inclusion criteria required that participants be primary caregivers of children formally diagnosed with hearing impairment and enrolled in a special school. Participants completed the measures individually in a quiet setting provided by the school. The administration of the tool was carried out in the presence of the researcher ensuring that any doubts or difficulties encountered by the participants could be addressed immediately. On average it took 30-40

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minutes for each participant to complete the questionnaires. Confidentiality and anonymity of the participants was strictly maintained throughout the research process.

### RESULT AND ANALYSIS

*Table 1: Mean and Standard Deviation showing Parenting Stresses in Families with Hearing Impaired Children*

Stresses	Mean	SD	Extent
Psychological stress	4.32	0.09	VH
Emotional stress	3.34	0.67	H
Financial stress	3.32	0.37	H
Physical stress	3.56	0.49	VH
Social stress	2.67	0.87	H

Table 1 shows five categories of parenting stress in families with hearing impaired children. It is observed that psychological stress and physical stress have very high extent while emotional and financial stress have high extent.

*Table 2: T-test Analysis of Difference in Parenting Stress in Families with hearing Impairment based on gender*

Gender	N	Mean	SD	T	Sig.	Decision
Male	60	2.56	0.80	8.13	.000	Rejected
Female	60	3.96	0.21			

From Table 2, the null hypothesis that parenting stress in families with hearing impairment does not differ based on gender was rejected since the exact probability value of 0.000 is less than the 'a priori' probability value of 0.05.

*Table 3: Parenting stress in families with hearing impaired children based on location*

Location	N	X	SD	T	Sig.	Decision
Urban	52	3.58	0.30.	0.56	.094	Not
Rural	68	3.67	0.56			Rejected

From Table 3, the null hypothesis that parenting stress in families with hearing impairment does not differ based on location was not rejected since the exact probability value of 0.094 is greater than the 'a priori' probability value of 0.05.

### DISCUSSION

The findings of the study show that parenting stress in families with hearing impaired children include psychological stress, physical stress, emotional stress, social stress and financial stress. These findings are in accordance with the study done by (Dhanshree at al., 2022), in which they studied stress among parents of children with hearing loss and how they deal with it: A Systematic Review. The present systematic review was performed to compile the existing literature pertaining to parental stress in parents of children with hearing loss and coping strategies. The databases searched include Pub Med/Medline, Scopus, Cochrane Library and Cumulative Index to Nursing, and Allied Health Literature. The systematic review was designed and performed using the preferred reporting items for systematic reviews and meta-analyses statement guidelines. The screening for studies was performed independently by two researchers. Methodological quality appraisal was done

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using the mixed methods appraisal tool. Twenty-eight studies were identified and included in the present review, which discussed the stress factors and coping mechanism associated with having child with hearing loss reported by parents. The factors leading to stress were thematically classified into parent/family-related factors, child-related factors, and professionals/service-related factors. The coping strategies were thematically classified into improved support systems and better professional resources. The present systematic review was an attempt at exploring the various stress causing factors among parents of children with hearing loss. The various coping strategies would help in better planning services for these parents and helping to lessen the stress.

In addition, the findings of the study support Joanna (2011), on parenting a deaf child how hearing parents cope with the stress of having deaf children. Parents of deaf or hard of hearing (D/HH) children experience greater parenting stress than parents of typically developing children. Studies of the stress experienced by these parents, and their methods of coping with it, give different results depending on the medical intervention used – cochlear implant or hearing aid. This study addresses the ways by which parents handle the stress of adapting to their child's deafness. It asks whether their styles of coping with stressful situations – task oriented, emotion oriented or avoidance – change after diagnosis is made. Another issue was whether medical intervention, e.g. cochlear implantation in prelingually deaf children, relates to a certain style of coping with stress, and whether the parents' satisfaction with the decision to implant related to their behavior in stressful situations. The research is based on a questionnaire containing demographic information about the parents (age, sex, education), their satisfaction with the decision on cochlear implantation, and information about the child. A Polish version of Coping Inventory for Stressful Situations (CISS) was used. The results show that mothers and fathers of D/HH children differ in the intensity of their emotion-oriented and avoidance styles and that in stressful situations mothers use these styles significantly more often than fathers. Parents of D/HH children using cochlear implants do not differ from those using hearing aids in terms of stress coping styles. These insights offer practical suggestions of ways to psychologically help parents of deaf children, enabling them to cope better with their parenting a deaf child.

In addition, Alexander et al., (2010), in a study evaluated predictors of both general and context specific parenting stress in a cross sectional sample of hearing parents of young deaf and hearing children. This study evaluates predictors of both general and context-specific parenting stress in a cross-sectional sample of hearing parents of young deaf and hearing children. Participants were 181 children who were deaf and 92 children with normal hearing. Perceived parenting stress was measured using both general and context-specific measures. Predictors of parenting stress included parent-reported and observed child behavior problems and language delays. After controlling for maternal education and family income, parents of deaf children reported more context-specific but not general parenting stress than parents of hearing children. Both parent-reported and observed behavior problems were higher in the deaf group compared to the hearing group. Children's hearing status related to child behavior problems by way of oral language delays. Furthermore, hearing status related to parenting stress by way of language delays and child behavior difficulties. Context-specific measures of parenting stress reflect unique challenges of this population. Both language delays and child behavior problems are associated with increased parenting stress. Identification of specific stressors related to parenting a deaf child helps to inform the development of early interventions.

## CONCLUSION

The findings of the study implies that every family with hearing impaired children should have at least a counselor who will be responsible for providing psychological, social and emotional support to the parents. The counselor can design a system in which financial and physical supports will be provided to the parent of the hearing impaired children. Moreover, there is need for family counseling to be upheld by parents and government in order to promote the livelihood of individuals at the family level. In addition, counselors are expected to be providing educational, vocational and personal-social information to parents of hearing impaired children. For instance, the parents should be informed about how to secure formal education for their hearing impaired children, as well as how to ensure that their hearing impaired children are exposed to available job opportunities.

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### **Conflict of Interest**

The author declared no conflict of interest.

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