
COUNSELING NEEDS OF HEARING DISABLED SPOUSES AND ITS RELATIONSHIP WITH THEIR PSYCHOLOGICAL ADAPTATION.

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ABSTRACT

The current study aimed at identifying the counseling needs for hearing disabled spouses and its relationship with their psychological adaptation. A correlational descriptive method was used. The study population consisted of 30 hearing disabled husband/ wife affiliated with the deaf society in Marka for the year 2016/2017. The Counseling Needs Questionnaire was developed. Results indicate that the counseling needs of spouses with hearing disability were medium. In addition, results show that the level of psychological adaptation was medium on all aspects and that there was a significant negative correlation between aspects of psychological adaptation and counseling needs. Results also indicate significant differences in the needs for family counseling in favor of wives more than their husbands. Furthermore, results reveal that there are differences in the level of psychological adaptation in favor of females on all aspects except for the social aspect. Researchers recommend conducting further research about counseling needs and its relationship with mental health for spouses with hearing disability.

Keywords: *Spouses with hearing disability; counseling needs; psychological adjustment.*

Conflict of interest:

In accordance with your journal policy and our ethical obligation as researchers, we are reporting that we have not receive any funding sources supporting this work from any organization, and are not consultant to any organization . We have disclosed this to you to be sure that no potential conflict of interest can be reported by us.

Introduction

Persons with hearing disabilities facing many problems Some of them related to the nature of disability and other relate to surrounding environmental factors. They are among those who deviate in one form or another in the hearing ability compared with their hearing peers(Tambs, 2004). Hallahan & Kauffman (1991) confirms that more negative consequences of hearing disability are salient in language development specially spoken language. Thus the hearing disabled person will suffer a clear delay in verbal development.

The degree of this delay is clear when the disability is severe and occurs early in life. This is congruent with Wynand (1994) who showed that persons with hearing disability suffer hard problems such as: communication difficulties, dependence, low self esteem and other forms of mal-adaptation. Which make it necessary to acknowledge these problems and intervene to eliminate negative feelings and provide feeling of security. Providing therapy for this category is on

e of the difficult operations due to language loss and the lack of cognitive experience that participate in their interaction and communication with others.

Alshaks (1992) mentioned that depriving the person with hearing disability from the hearing sense in addition to negative attitudes toward him make him more vulnerable to many problems where he must struggle to overcome them with his hearing peers who do not understand his circumstances and disability or those who are unable to communicate with him successfully. This leads him to limit his ambition to avoid failure.

In a study by Qarioty (2005) results found that persons with hearing disability are more vulnerable to psychological stress, anxiety and low self esteem. In addition, they are more exposed to anger attacks because of the difficulties they encounter in expressing their feelings. Thus, they express anger and frustration nervously and show larger tendency to physical aggression. Hanafy (2007) found that persons with hearing disability suffer many problems according to the hearing disabled check list as perceived by teachers trained by the researcher. These problems are: social problems, problems connected to aggressive behavior and mood tumbling, mental processes problems, achievement and academic skills problems and finally anti social problems which are more clear in older stages of life. In addition, there are differences in these problems according to the degree of hearing loss.

It is widely believe that hearing loss may have negative consequences on individuals including: depression, un-satisfaction with life and low level of well being. Hearing loss may also lead to difficulty in communication between spouses if one suffers from hearing disability as it minimizes the quantity and quality of communication among them(Armero, 2001). Looking at the importance of communication among married couples, hearing loss for the wife or husband may affect this relationship negatively. Even if the hearing loss was classified as mild, problems in communication occur through misunderstanding and reduction in emotional and intimate conversations and flirting. Spouses also add other difficulties caused by

hearing loss during television watching, hearing the radio, when answering the telephone or when interpreting other people's conversation. This communication with the spouse is the caregiver's responsibility in order to offer possible services for people with hearing disability(Wallhagen, Strawbridge, Shema, & Kaplan, 2004).

Some studies use "care giving burned out form " to explain negative effects on spouses with hearing disability and communication problems. Care giving that can be provided for people with hearing disability can represent a pressure source for the spouse affecting psychological well being and mental health (Ask, Krog, & Tambs, 2009

There are limited amount of studies that searched the relationship between hearing loss and mental health and well being for spouses(Scarinci, Worrall, & Hickson, 2008). Most studies used qualitative research that describes the life of those who live with hearing disabled spouse. Studies analyzed the relationship between hearing loss and partner's physical, psychological, and social well-being after 5 years of marriage. Hearing loss increases the likelihood of subsequent poorer physical, mental and social well-being for partners. Negative impacts of wives' hearing loss on their husbands' wellbeing were stronger than the effects of husbands' hearing loss. Research indicates that early diagnosis and treatment of hearing loss significantly promote the wellbeing of individuals with hearing disability and their spouses (Hallberg & Barrenas, 1993)

Conducting interviews in such studies were a hard mission and results revealed a number of emotional problems for spouses including: anger, feelings of guilt, sadness, depression, tension, shame, social isolation and anxiety. Many researchers concluded that living with hard of hearing people affect mental health of the spouse(Piercy & Piercy, 2002).

Anderson and Noble (2005) conducted a study to examine the link between partners' attributions about behaviors of their children with hearing loss and overall relationship satisfaction. Forty-three hearing-impaired males and 23 hearing-impaired females together with their partners participated in this study. Results indicated that the extent to which behaviors typically associate with hearing disability were attributed to personal causes and responsibilities and was correlated with relationship satisfaction. Female partners made attributions that highlighted unpleasant implications of behavior. Relationship satisfaction was lower for partners. Implications for rehabilitation counseling were also discussed.

In their literature review, Héту, Jones & Getty (1993) pointed out that hearing disability strongly affect intimate relationships due to the lack of communication. Effects of progressive hearing loss and the coping process used by were quoted from the symbolic interaction theory. This review provided a summary about the effects of hearing disability on couples. Specific needs have been identified for each partner in terms of information, support and communication facilitation.

Further research integrated theoretical perspectives; communication theory and methodology of quality in order to enhance understanding about the effects of hearing loss of older couples and support refine interventions to enhance quality of life.

Family counseling is considered a part of services provided for people with hearing disability, and the first defensive line to prevent hearing disability in its various levels. The effectiveness of prevention programs depends on family's measures and efforts in addition to the level to which it benefits from those programs offered by agencies in the society. Since family is considered to be a basic source of problems for people with hearing disability, thus offering programs for their families participate in reducing problems that may disable their education in mainstreaming programs.

Study problem:

Despite the many studies that addressed hearing disabled persons, nevertheless, it focused on students with hearing disability in study levels and neglected family counseling directed toward hearing disabled spouses. Due to the importance of this subject in order to stabilize the marriage of persons with hearing disability and its consequences on psychological adjustment and family life later on. Thus, this study is important to shed the light on spouses with disabilities and counseling services directed for them and its relations with their psychological adjustment.

Study Questions:

- What is the need for family counseling for spouses with hearing disability?
- What is the level of psychological adjustment for spouses with hearing disability?
- Is there a correlational relationship between the need for family counseling and psychological adjustment for spouses with hearing disability?
- Are there significant differences at significant level ($\alpha - 0.05$) in the need for family counseling for spouses with hearing disability related to gender (Husband/wife)?
- Are there significant differences at significant level ($\alpha - 0.05$) in psychological adjustment for spouses with hearing disability related to gender (Husband/wife)?

Study importance:

The subject of this study is important as it is related to a fundamental category of the society which is spouses with hearing disability and negative psychological and social consequences that may minimize their adjustment thus requiring intervention to offer family counseling for them.

Up to the researcher's knowledge, the current study is a leading study among research handling the category of spouses with hearing disability and the counseling services offered for them in Jordan, and the Arab world.

On the other hand, this study is considered a start for new research and studies about counseling services for spouses with hearing disability. Furthermore, we can benefit from the results of this study in highlighting the necessity of providing family counseling in centers specialized for hearing disabled spouses.

The subject of this study is not restricted to disability; rather it is a whole society cause.

Study objectives:

- Screening for family counseling services for spouses with hearing disability.
- Identifying the level of psychological adjustment for spouses with hearing disability.
- Examining the relation between family counseling services and psychological adjustment for spouses with hearing disability.
- Screening for differences in family counseling services for spouses with hearing disability related to gender (husband/ wife).
- Screening for differences in psychological adjustment for spouses with hearing disability related to gender (husband/ wife).

Terminology:

Theoretical and procedural definitions:

- Hearing disability:

It is defined as a deviation in hearing that limits the individual's ability to communicate auditory – verbally. Hearing disability depends on the mild, moderate and severe hearing loss (Qaruty,2005).

- Spouses with hearing disability:

They are defined as husbands and wives that respond to the counseling services scale and psychological adjustment scale and that are affiliated to a deaf society in Marka (N =150).

- Psychological adjustment: a group of reactions that the individual adjust his psychological construct or behavior accordingly to respond to limited surrounding conditions or new experience (Redwan, 2007).

It is operationally defined as the degree obtained by spouses with hearing disability affiliated to the Jordanian deaf society / Notheren Marka in the year 2016 on scales applied in this study.

Study limitations:

- Sample: the study sample is limited to spouses with hearing disability affiliated to the Jordanian deaf society, 2016.
- Study tools: the extent to which psychometric characteristics (Validity and stability) are available in the study tools and the extent to which the answers of respondent are valid.
- Generalization: the possibility to generalize results of the current study on similar societies.

Methodology

The researchers used the correlative descriptive approach, which is in line with purposes of the study through studying the phenomenon in reality and express it quantitatively and study the relation between two variables.

Study population and sample

The population consisted of all spouses with hearing disability affiliated in Jordanian deaf society / Notheren Marka for the year 2016.

Study tools

The study tool was constructed after returning to previous research (Lambi & Morning, 2001; Hanafy, 2007). According to the Minuchin's constructive family therapy theory, the study tool in its final version consists of (42) item distributed in the following areas:

1. The need for family counseling related to the relationship between spouses in the family
2. The need for family counseling related to the relationship between parents and children in the family.
3. The need for family counseling related to relationships within the family and supportive communities.

Spouses respond to a five likert scale where strongly agree scores (5), agree scores (4), uncertain (3), do not agree (2) and strongly do not agree (1).

The total score range between (42-210), higher score indicate more need for family counseling.

The need for family counseling for spouses with hearing disability Scale:

The initial version of the scale that consisted of (35) items was presented to ten referees from specialists in counseling and special education holding a PhD at the University of Jordan, the Hashemite University, and Arabic Amman University to measure validity using their notes about the appropriateness, clarity and accuracy of language for items. Referees' notes were discussed including their suggestions to rephrase some items. Items were modified according to the agreement of eight referees or more. Thus seven items were added and the tool in its final version consisted of 42 items, answered by spouses with hearing disability according to a scale of five likert scores: strongly agree with a score of (5), agree (4), uncertain (3), do not agree (2) and strongly do not agree (1). The total score ranges between (42-210) and high scores indicate bigger need for family counseling by families with disability.

Stability of the scale was measured using the internal consistency method using Cronbach's alpha where the coefficient for the relationship between spouses reached (0.85) , (0.82) for the relationship between parents and their children, (0.79) for the relationship within the family and supportive communities and for the total scale (0.80). This was convenient for the purpose of this current study.

Psychological adjustment scale:

The researchers developed the psychological adjustment scale, which consists of (40) items including four dimensions: personal, emotional, family and, social

The initial version of the scale consisting of (40) items was presented to ten referees from specialists in counseling and special education holding a PhD at the University of Jordan, the Hashemite University, and Arabic Amman University to measure validity using their notes about the appropriateness, clarity and accuracy of language for items. Referees' notes were discussed including their suggestions to rephrase some

items. Items were modified according to the agreement of eight referees or more. No items were added or omitted, thus the scale's items remained (40) answered by husbands and wives with hearing disability according to a scale of five likert scores: strongly agree with a score of (5), agree (4), uncertain (3), do not agree (2) and strongly do not agree (1). The total score ranges between (42-210) and high scores indicate bigger need for family counseling by families with disability.

Stability of the scale was measured using the internal consistency method using Cronbach's alpha where the coefficient for personal adjustment was (0.83), (0.85) for emotional adjustment, (0.78) for social adjustment and (0.80) for family adjustment. This was convenient with the purpose of this study.

Procedures

- The researchers developed the study tools after referring to previous research then validity and stability were investigated.
- Official consents were taken from the Jordanian deaf association to cooperate in conducting this study.
- The study tools were applied on spouses with hearing disability affiliated to the deaf association and (150) closed questionnaires were distributed to be returned sealed.
- Data was collected and entered by the computer to conduct proper statistical analysis using SPSS to conclude results and write appropriate recommendations.

Results

The current study aimed at identifying the counseling needs of spouses with hearing disability and its relationship with their psychological adaptation. Following are the results related to answering the study questions.

The first question: What are the counseling needs for spouses with hearing disability?

Table (1) Means and standard deviations for counseling needs of spouses with hearing disability

	Means	Standard deviation	level	Rank
Relationship between parents and children in the family	3.38	.485	Medium	1
Relationships inside the family and supportive societies	3.32	.498	Medium	2
Relation between husbands in the family	3.31	.502	Medium	3
Family counseling in a whole	3.35	.453	Medium	

Table (1) shows that means ranged between (3.31-3.38), where the relationship between parents and children in the family came first with the highest mean (3.38), while the relationship between spouses in the family came last with an average of (3.31), and the mean of family counseling services as a whole was (3.35).

The second questions: What is the level of psychological adjustment for spouses with hearing disability?

Table (2) Means and standard deviations for the level of psychological adjustment for spouses with hearing disability

Dimension	Mean	Standard deviation	Level	Rank
The social dimension	3.34	.585	medium	1
The personal dimension	3.30	.670	medium	2
The family dimension	3.28	.772	Medium	3
The emotional dimension	2.98	.349	medium	4
Psychological adaptation as a whole	3.23	.469		

Table (2) indicates that means ranged between (2.98- 3.34), the social dimension came first with the highest average (3.34), while the emotional dimension came last with an average of (2.98). The average of psychological adaptation as a whole was (3.23).

The third question: Is there a correlational relationship between the need for family counseling and psychological adjustment for spouses with hearing disability?

Table (3) the relationship between counseling needs and adjustment for hearing disabled

		The Personal dimension	The emotional dimension	Family dimension	Social dimension	Psychological adaptation
The relationship between spouses in the family	Pearson correlation Sig. (2-tailed) N	-.450(**) .000 60	-.302 (*) .019 60	-.474 (**) .000 60	-.372 (**) .003 60	-.558 (**) .000 60
The relationship between parents and children in the family	Pearson correlation Sig. (2-tailed) N	-.271 (*) .036 60	-.553 (**) .000 60	-.192 .142 60	.011 .932 60	-.302 (*) .019 60
Relationships within the family and supportive societies	Pearson correlation Sig. (2-tailed) N	-.308 (*) .017 60	-.191 .143 60	-.317 (*) .014 60	-.082 .532 60	-.350 (**) .006 60
Family counseling services as a whole	Pearson correlation Sig. (2-tailed) N	-.363 (**) .004 60	-.436 (**) .001 60	-.330 (**) .010 60	-.111 .398 60	-.417 (**) .001 60

** Correlation is significant at the 0.01 level (2-tailed).

*Correlation is significant at the 0.05 level (2- tailed).

Table (3) indicates a negative significant relationship between psychological adaptation with its dimensions and family counseling services with its dimensions except for the social dimension and the relationship between parents and children in the family, the relationship within family and supportive societies in addition to family counseling as a whole and the emotional dimension.

The fourth question: Are there significant differences at significant level ($\alpha = 0.05$) in the need for family counseling for spouses with hearing disability related to gender (Husband/wife)?

Table (4) the differences in counseling needs and psychological adjustment related to gender

	gender	N	Means	Standard deviation	T	df	Sig. (2-tailed)
Relationship between spouses in the family	Male	30	3.15	.263	-2.504	58	.015
	Female	30	3.46	.628			
Relationship between parents and children in the family	Male	30	3.24	.452	-2.350	58	.022
	Female	30	3.53	.482			
Relationships within family and supportive societies	Male	30	3.14	.397	-2.966	58	.004
	Female	30	3.49	.530			
Family counseling services as a whole	Male	30	3.18	.330	-3.030	58	.004
	Female	30	3.51	.501			
The person dimension	Male	30	3.56	.512	3.143	58	.003
	Female	30	3.05	.719			
The emotional dimension	Male	30	2.88	.278	-2.302	58	.025
	Female	30	3.08	.387			
The family dimension	Male	30	3.67	.440	4.460	58	.000
	Female	30	2.90	.841			
The social dimension	Male	30	3.30	.411	-.504	58	.616
	Female	30	3.38	.724			
Psychological adaptation as a whole	Male	30	3.37	.320	2.477	58	.016
	Female	30	3.08	.549			

Table (4) indicates the following:

- There are significant differences ($\alpha = 0.05$) attributed to the effect of gender in all family counseling services dimensions and in family counseling services as a whole in favor of females.
- There are significant differences ($\alpha = 0.05$) attributed to the effect of gender in all dimensions of psychological adaptation and in psychological adaptation as a whole except for the social dimension in favor of females.

Discussion

The need for family counseling for couples with hearing disability had a medium degree and the relationships between parents and their children came first while the relationship between spouses inside the family dimension came last.

This result may be due to the loss in an important sense for communicating with others especially family for couples with hearing disability. Particularly that the marriage relationship requires spending a joyful time together and discussing family issues including responsibilities and duties toward its members and the surrounding society. This is asserted by Cart (2006) regarding the effect of verbal and nonverbal communication between spouses, which make life happier, more stable and more mentally healthy. In addition, the nature of relationship between spouses is affected in case of hearing disabled couples because of the hearing loss so it will lead to continues misunderstanding, decrease in intimate and emotional talk and humor. Hearing loss minimizes the quantity and quality of communication between spouses which requires family counseling services (Ask, Krog & Tambs, 2009).

As for the psychological adjustment, it was medium in this study in all dimensions. The social dimension came first and the emotional dimension came last. This result can be attributed to the effects of hearing loss including having emotional problems between couples in the form of grief, anger, guilt, anxiety and stress which affect mental health for spouses. Being subjected to these problems weakens their communication and raises the tension in their relationship which affects their psychological adjustment and makes them vulnerable to depression, life un-satisfaction and low level of luxury. This is also confirmed by Ask, Krog & Tambs, 2009; Qaryouty, 2005; Hanafy, 2007).

Results indicate a significant negative relationship between all dimensions of psychological adjustment and all dimensions of the need for family counseling. We can say that the volume of emotional problems couples with hearing disability has because of their hearing loss that occurred in any life stage including grief, anger, guilt, anxiety, stress, social isolation and tension concur with the result of (Ask, Krog & Tambs, 2009). Family counseling cannot be found in deaf special care facilities where concentration is given to communication teaching (sign language and alphabet letters) rather than specialized counseling sessions to meet their emotional and psychological problems.

There were significant differences in the need for family counseling for females more than males. This can be due to the fact that wives are more likely to communicate with their children and others because they spend more time at home meeting the needs of children and family. Furthermore, wives have more responsibilities such as children raising and providing family requirements inside and sometimes outside the house. Moreover, being unable to do whatever she desires may cause more problems and difficulties due to her hearing loss leading to a misunderstanding of what she says or wants from her children or husband, or she may be misunderstood by others. This is congruent with Anderson & Noble (2005) result.

There were also differences in the level of all psychological adjustment dimensions in favor of females except for the social dimension. This might be caused by the abilities of wives to endure family pressures and to overrun difficulties related to her children and family. In addition, wives can organize her time, manage the house and meet family requirements. They also have plenty of time to spend with family as an unemployed housewife, giving her a bigger opportunity to arrange her priorities and manage the affairs of her family. This result corresponds with Wallhagen's and Strawbridge's (2004) results.

Recommendations

1. Conducting more research and studies related to families of spouses with hearing disability, organizing training courses to meet their needs and to reduce their stress.
2. Conducting research and studies that include training counseling programs for the families of spouses including parents and children to deal with disabled individual, meeting the needs of their families specially wives in order to reduce stress faced by those wives.
3. Conducting research about providing family counseling services for disabled individuals.

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