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COUNSELLING TECHNIQUE FOR MANAGING PARENTS' PSYCHOLOGICAL DISORDERED OCCASIONED BY THE BIRTH OF A CONGENITALLY HEARING IMPAIRED CHILD

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Abstract

Man has been given the divine command to be fruitful and multiply and fill the earth. In the process of obeying this order at times the end result is the birth of a child with hearing loss which causes psychological disorder or emotional mahadjustment to the parents, who in most cases, would have been expecting and preparing for a normal child. This paper examines this occurrence from the cognitive point of view and concludes that Rational Emotive Behavioural Therapy (REBT) could be used to handle such an occurrence. Stages of REBT are described and their implications discussed.

Introduction

Counselling is a professional assistance rendered by a trained counsellor to help an individual or group of individuals resolve conflict or problem, as as of life. It provides answers to questions like: what shall I do? Is there any hope for me again? What can I become in the future? (Olawale, 2000). The assistance rendered to an individual, it must be clearly stated, is not limited to able-bodied men and women but also to people with special needs otherwise known as the handicapped or the disabled.

The category of people classified to be in need of special attention include the mentally retarded, the hearing impaired, the visually impaired, the learning disabled, the crippled, the neurologically impaired, and the emotionally disturbed. They are a special set of people and thereby different from others. Special attention would be required in order for them to cope and function effectively in the society. They have diverse needs which could be handled by different professionals. In terms of counselling need, a professionally trained counsellor would be in the best position to cater for this.

However, it must be noted that the type of professional counselling assistance to be rendered in most cases would be ineffective if significant persons like their parents, guardian, teachers, siblings, etc are not incorporated. On the basis of this, this paper therefore discusses one of the

category, of people with special needs. The hearing impaired and examines how counselling technique could be used by professional counsellors to make parents of the hearing impaired children adjust to the reality of having them.

The Meaning and Classification of Hearing Impaired

This term, hearing impaired, is an umbrella term used for people who have mild or serious problem with their sense of hearing. From a professional point of view, hearing impaired individuals could be classified into two broad categories. These are:

- 1. The deaf and
- 2. The hard-of-hearing

A number of definitions have been offered in an attempt to demarcate the difference between the deaf and the hard-of-hearing. For instance, while a deaf person is one whose hearing is disabled to an extent (usually 70dB ISO or greater) that precludes the understanding of speech through the ear alone, with or without the use of hearing aid in the submission of Moores (1987), the quotation below reflects who a deaf child is in Berg (1976) conception:

The deaf child typically has profound or total loss of auditory sensitivity and very little or no auditory, perception. Under the most ideal listening and hearing aid conditions, he either does not hear the speech signal or perceives so little of it that audition may not serve as the primary sensory modality for the acquisition of spoken language or for the monitoring of speech (p. 5)

On the other hand, a hard-of-hearing child is one whose hearing is disabled to an extent (usually 35-69dB ISO) that makes difficult but does not preclude, the understanding of speech through the ear alone, without or with a hearing aid (Moores, 1987). It has also been defined as a class of hearing impaired whether permanent or fluctuating, which adversely affects a child's educational performance but which is not included under the definition of deaf (U.S. Department of Health, Education and Welfare (1977) in Hardman, et al, 1987).

Types of Hearing Impaired

The time or period when hearing loss occurs has been used to identify types of hearing impairment. Two major types which include congenital and adventitious hearing impairment have been identified.

Congenital hearing impairment occurs when a child is born with abnormal hearing ability. That is, the child is born deaf or hard-of-hearing. On the other-hand, adventitious hearing impairment occurs when a child who is born with normal hearing ability suddenly or gradually becomes deaf or hard-of-hearing due to heredity, diseases, accident etc.

The period when adventitious impairment occurs has been categorised into two. When sudden loss of hearing occurs at critical period of language development i.e. before the third birthday it is referred to as prelingual deafness while loss of hearing ability at childhood or adulthood period is regarded to be post-lingual deafness.

Parental Reactions to the Birth of a Child with Congenital Hearing Impairment

Parents face a number of crisis period in their attempt to rear up children. Mackeith (1973) identified some of these to include:

- When the parents learn that their child is handicapped.
- When the child begins receiving services.
- When the child leaves home to school.
- When the aging parents can no longer care for their child.

When the parents are made to identify the fact that their child is handicapped or disabled there are predictable reactions from them some of which have been empirically confirmed. These include shock, hurt, disbelief, despair, disappointment, ambivalence, anger, frustration, guilt, denial, fear, withdrawal, and rejection. Specifically, the parents of the hearing impaired child's reactions include shock, anxiety, anger, depression, guilt, resentment, vulnerability, overprotection, confusion, panic and denial (Lutterman, 1987).

Garguilo (1985) classified parental reactions to the birth of a handicapped child into three major stages of primary, secondary and tertiary phases. The primary phase comprises of shock, denial, grief, and depression. The secondary phase includes period of ambivalence, guilt, anger, shame, and embarrassment. The tertiary phase which completed the phases comprise of bargaining, adaptation and reorganization, acceptance and adjustment.

The above parental reactions to the birth of a child with handicapping conditions constitute psychological disorder or emotional disorder which in effect affect their normal functioning level to themselves, the child and the entire society. Morgan, et al (1986) define psychological disorder as patterns of abnormal behaviour, emotions or thought that significantly interfere with an individuals adaptation to important life demands and often cause distress in the individual or in others.

Origin of Psychological Disorder

From the cognitive point of view, the psychological disorder or emotional maladjustment being experienced by parents occasioned by the birth of a child with congenital hearing impairment is as a result of cognitive perception to the occurrence and the information process strategy of the parents. The premise on which this is based is that how an individual responds or reacts to occurrence in life is a function of how s/he interprets the event. In other words, cognitive psychotherapists identify illogical thoughts, irrational ideas, beliefs and information processing as the root cause of behavioural disorders, self – defeating responses, psychological disorders, emotional maladjustment occasioned by an unexpected occurrence like the birth of a child with hearing impairment. One of the counselling techniques for managing the psychological or emotional disorder occasioned by the birth of a child with hearing impairment is Rational Emotive Behaviour Therapy.

Rational Emotive Behaviour Therapy

Rational emotive behaviour therapy is one of the treatment techniques that has been used to overcome maladaptive behaviours. The therapy was propanded by Albert Ellis. The original name given to the theory was Rational Therapy before it was changed to Rational Emotive Therapy (RET). Presently the theory is known as Rational Emotive Behaviour Therapy (REBT). The justification for the change in the name according to the propander of the therapy was to reflect the fact that the therapy has always been cognitive, emotive and behavioural. In his words, Ellis (1995) observed that:

RET is ... a misleading name because it omits the highly behavioural aspect that rational emotive therapy had favoured right from the start ...

RET has always been one of the most behaviourally oriented of the cognitive behavioural therapies ...

It is more behavioural than the procedures of other leading cognitive – behavioural therapies. RET has really always been rational – emotive behavioural therapy (REBT) p. 86 – 89.

The premise on which the development of REBT is based is on the fact that human beings are not disturbed by what happen to them they are disturbed by their perception of what happened to them. REBT, therefore, in the submission of Gordon and Dryden (1996) deals primarily with:

Disturbed human coaluntions, emotions and behaviours and is highly rational and scientific, it uses rationality and science in the service of harrans in an attempt to enable them to live and be happy (p. 104)

Development of Rational and Irrational Belief Systems

Rational Emotive Behaviour Therapy uses ABC principle to explain how rational and irrational beliefs are acquired. A is believed to be the activating experience i.e. the occurrence in one's life like the birth of a child with hearing impairment. B is the perception or attitude of the individual to such an occurrence while C is the consequence of B. B which is the perception or reaction to A may either be rational (rB) or irrational (iB). If rational (rB), C, the consequence would be psychological adjustment or emotional stability which is attained but if irrational (iB), C, the consequence would be the psychological disorder or emotional maladjustment or disturbance. In other words, A causes C not B, but B determines C. This explanation is diagrammatically represented below:

In order to illustrate this ABC principle using the parents of the child hearing impairment as a case study. The activating experience or occurrence (A) would be the-birth of a child with hearing impairment after the high expectation of a normal child. The cognitive perception or reaction to this occurrence may be rational (rB) or irrational (iB). If parents adopt rational belief system (rB) they would wish that the birth of a child with hearing impairment did not occur but at the same time would accept the occurrence in good faith and make move to adjust themselves to the demands of the child. They would also reason that expecting everything to always work in their ways may be frustrating, disappointing, and anxiety proped. With these rational thoughts, the consequence predictably would be psychological or emotional adjustment Ci.

On the other Land, if the parents are to adopt the irrational belief system (iB) they would be dejected, depressed and unable to function effectively with their normal life activities. They would perceive the activating experience or the birth of a child with hearing impairment (A) as something that they do not deserve, something terrible that cannot be coped

with and all time embarrassing occurrence. All these and other negative thoughts are classified to be irrational ways of thinking which disturbs the psychological or emotional stability of the parents. Unlike parents who adopted rational belief system, they would be unable to adjust because of their negative internalized sentences or self defeating verbalization which has negative effects on their emotions leading to psychological trauma or emotional disorder (Cii).

In conclusion therefore, the psychological disorder or emotional maladjustment (Cii) being experienced by parents of the child with hearing impairment is not as a result of the birth of the child (A) per se but parental self-verbalization or illogical thoughts and beliefs about the birth and irrational interpretation of circumstances surrounding the birth of the child (iB).

REBT Management Technique

A lot would have been done psychologically and physically to prepare for the coming of a new child. The birth of an infant with hearing impairment, deaf or hard-of-hearing, would have a profound influence on the entire family particularly if the parents are not deformed physically and if it is their first experience of bearing a deformed child. Therapeutic and psychological assistance would be needed to overcome this situation (Gesinde, 1996). A professionally trained counsellor could make use of REBT management technique explained below to assist parents who are psychologically disturbed as a result of giving birth to a child with hearing impairment. The overlapping stages of this treatment technique include:

a. Establishing Relationship

The first stage is to build a solid foundation for the relationship between the clients and the counsellor. The counsellor in this initial stage is emphatic, supportive and caring to the parents of the child with hearing impairment. Nolan and Tucker (1988) opined that the relationship between the counsellor and parents and children should be that of partnership. In their words:

The relationship between the members of the family and those who guide and counsel them needs to be one of partnerships. In terms of meeting of minds to share problems and to work together to achieve appropriate solutions. So we believe that the counsellor needs to have an emphatic rather than a sympathetic attitude – to feel with you rather than for you. (p. 99)

The counsellor utilizes the act of being supportive, emphatic, caring to build positive self – confidence in clients and also to understand their internal frame of reference.

b. Identification Stage

This is a stage wherein the counsellor identifies two major things. First of all the counsellor should identify the phase into which parents reaction could be classified. That is, whether it is primary, secondary or tertiary phase. Secondly, the counsellor should identify the irrational or illogical beliefs, values, attitudes and philosophies of the client. This would include taboos, insinuations, falsehood, myths, and superstitions beliefs about the hearing impaired.

c. Disputation Stage

The counsellor or therapist explains as clearly as practicable why identified illogical beliefs, thoughts, taboos, myths etc about the hearing impaired are so. The relationship or the interdependence of the illogical or irrational beliefs, etc and their psychological disorder is made known to them. That is, how these irrational beliefs are responsible for their psychological trauma or emotional disorder.

d. Substitution Stage

After disputing and debunking these irrational beliefs about the hearing impaired children at the third stage the counsellor moves a step further to substitute these irrational beliefs, ideas, attitudes, values with rational philosophical outlook to events and circumstances about the hearing impaired. He educates and restructures the cognitive thinking parterre of the parents. He encourages and reinforces appropriate behaviour.

The counsellor also provides educational, social personal and vocational information to the parents of the hearing impaired child. Parents are made to identify the strengths or assets of their child as well as deficiencies and how they would be manipulated to bring positive results. Available job opportunities, community based programmes, rehabilitation centres, special education schools, scholarship opportunities for the hearing impaired and many other related information needed for the upliftment of the child are made known.

Effects of REBT on Parents' Psychological Disorders

The application of REBT to the psychological disorders or emotional disturbance being experienced by parents of a child with hearing impairment would enable:

- Parents concerned to function effectively in other areas of their life e.g. work place, family, religious activities etc. This is because it has been observed that once an individual is psychologically disturbed or emotionally disordered in an aspect of life style, hardly could such an individual function at the maximum level in other areas. In other words, such an occurrence would have negative or telting effects on other areas of life.
- Parents to participate fully in meeting the special needs of the child educationally, socially, psychologically, religiously etc.
- Parents to view life occurrences positively thereby attaining psychological adjustment or emotional stability.
- Parents to examine their lives critically and take personal responsibilities for their actions and inactions.

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