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The Role of Hope In Adjustment to Acquired Hearing Loss

A thesis presented in fulfilment of the requirements for the degree of the Doctor of Philosophy in Health Science.

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Abstract

This study investigates the extent and nature of the relationship between individual and disability characteristics (age, sex, degree of hearing loss, age at onset of hearing loss, time since onset of hearing loss, use of technology, and use of services), and adjustment to acquired hearing loss, and the role hope has in that relationship. A sample of 114 adults with hearing loss who had accessed hearing therapy services participated in the study. It was hypothesised that hope would interact with the individual and disability characteristics and therefore function as a moderating variable. The second hypothesis was that hope may be related to individual and disability characteristics as well as adjustment but actually provides the only significant pathway to adjustment; more simply, hope may be a mediator of adjustment.

The results indicate that the degree of loss was the only statistically significant individual and disability characteristic related to adjustment. The trait of hope did not produce an interaction effect of statistical significance in the moderation model. However, the study does provide support for the hypothesis that the trait of hope serves is a mechanism by which the degree of loss affects adjustment. Hearing loss affects hope which in turn affects adjustment. In other words, hope was found to act as a mediating variable. The extent of this mediating role was substantial as hope was found to account for 45% of the relationship between the degree of loss and adjustment. Additionally, the study found that self-efficacy and personal meaning may influence hope and despair dimensions in different ways. The perception of one's ability to influence events is a major contributor to hopefulness while the construction of meaning appears to be related to lower levels of despair.

Current research in the area of positive psychology indicates that individual

traits are modifiable and therefore hope finding, hope bonding, hope enhancement, and hope reminding can instil and increase hope. The implication of these findings is that hearing rehabilitation programmes need to consider the role of hope in intervention strategies.

The study suggests possibilities for future research including the investigation of more complex mediational chains, refining individual and disability variables, and assessing the effect of hope-focussed intervention strategies.

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This project has been reviewed and approved by the Human Ethics

Committee, Massey University Human Ethics Committee, PN Protocol 01/29. It was also endorsed by the National Foundation for the Deaf (NFD) (see Appendix 1).

Ethical considerations of the New Zealand Psychological Society Code of Ethics

(1986) were observed.

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Abbreviations

AD Acceptance of Disability Scale

ADHS Adult Dispositional Hope Scale

AHD Assistive hearing device

AVL Adaptation to Age-related Vision Loss

BAD Beliefs About Deafness Scale

BDI Beck Depression Inventory

CCS Children's Coping Strategies Checklist

CDI Child Depression Inventory

CHS Children's Hope Scale

CI Cochlear implant

CMAS-R Revised Children's Manifest Anxiety Scale

CMP Code Muller Protocols

CPHI Communication Profile for the Hearing Impaired

CSI Coping Strategy Indicator

dB Decibels

DS Despair score on the NAS

DSHS Domain Specific Hope Scale

FAD Family Assessment Device

FIM Functional Independence Measure

GHQ-12 General Health Questionnaire (short form)
GHQ-60 General Health Questionnaire (long form)

GIS Goal Instability Scale

GPH Global personal hopefulness on the NAS

HADR Hospital Anxiety and Depression Rating Scale.

HHIA Hearing Handicap Inventory for Adults

HOPES Hunter Opinions and Personal Expectations Scale

HPI Handicap Problems Inventory

HS Hope score on the NAS
HSL Hearing Services Limited

ICF WHO International Classification of Functioning, Disability

and Health

IDD Inventory to Diagnose Depression

LIFE Living Independently For Everyone (LIFE) Trust

MMPI Minnesota Multiphasic Personality Inventory

NAS Nottingham Adjustment Scale

NFD National Foundation for the Deaf

NHS Nowotny Hope Scale

NZ New Zealand

NZSL New Zealand Sign Language

PAI Psychosocial Adjustment to Illness Scale

PDS Posttraumatic Diagnostic Scale

PST Psychosocial transition

PTS Post Traumatic Stress disorder

SAC Self Assessment of Communication

SAD Social Anxiety and Distress Scale

SCI Spinal Cord Injury

SIP Sickness Impact Profile

SOC Sense of Coherence

SPI Structured Pain Interview

US United States of America

WHO World Health Organisation

Glossary of Terms

Adjustment

Adjustment to a disability is the process of establishing or restoring a sense of equilibrium that involves a person changing values that enlarge the significance of those aspects of life not closed to the person; that shifts the relative importance of some values; that contains the effects of disability, and that transforms comparative values to asset values. (See chapter 3).

Congenitally deaf

This may be a description of a person who is born with no hearing or substantially reduced hearing (see deaf below).

Deaf

This term represents the cultural and language identification of the Deaf community. It is therefore possible that people could be "deaf" but not identify as "Deaf". Conversely, people with no restrictions on their ability to hear (those who are not deaf) may identify with the Deaf community and claim to be Deaf (e.g. children of Deaf parents, Sign Language users).

deaf

This refers to the audiological status of a person who has no hearing or substantially reduced hearing rather than the cultural and language status that is concomitant with Deaf.

Hearing impairment

Individuals who have a degree of hearing may be born with, or subsequently acquire, some restriction on that ability. Those who have a congenital hearing impairment do not experience a loss of hearing but may experience social and communication restrictions in a similar manner to those who acquire a hearing impairment. Alternatively, those with a congenital hearing impairment may identify themselves as Deaf and participate in society in those terms. People with a mild hearing impairment may accommodate that in their lives and function with little or no restriction in their ability to operate in an oral/aural context.

Hearing loss

People who have experienced the ability to hear (and function in an oral/aural environment) may undergo a decline in that ability. The extent of the loss may vary from mild to profound (in which case the person may become deaf). The reactions of those affected to the loss of hearing (of any degree) can range from the inconsequential to the significant and negative. The role of hope in adjustment to hearing loss is the focus of this study.

Hope

The trait of hope is the tendency of an individual to subjectively assess what is desired for the future as probable or so important as to constrain belief and behaviour and to be grounded upon the possibility of realistic attainment of the desired future. (See chapter 4).

Optimism

Optimism is the disposition to explain events in terms of positive affect so that the individual is distanced from failure. (See chapter 4).

Post lingually deaf

This refers to a person who becomes deaf after acquiring oral/aural language competence.

Schemas

Assumptions of how the world is that can substantially influence the beliefs and behaviours of people.