

Original Article

Parental anxiety and quality of life in children with blindness in Ababasire institution

Khosrow Tavakol, Manijeh Dehi**, Homayon Naji*, Mahmood Nasiri**

Abstract

BACKGROUND: Nowadays, quality of life is one of the important aspects in programming and giving service to disabled people and blindness is one of the most important and common kinds of physical handicaps. COS parents have a great role in a child's life, their psychological status can affect their disabled children's quality of life. Anxiety is the most common psychological disorder in parents of disabled children. The goal of this research was to determine relation between parental anxiety and blind children's quality of life in Ababasire institution, Isfahan, in both emotional and social dimensions.

METHODS: This was a correlative study and its subjects were selected with census method; 94 blind child and their parents were selected. Data gathering was done with two questionnaires. The standard one was "Hamilton Anxious Questionnaire". The other one was "Quality of life" that measures two domains including emotional and social. Validity and reliability was assessed with content validity and test-re-test method, respectively (0.89). Data was analyzed using SPSS, and statistical tests including the Kendall's tau b.

RESULTS: There were significant correlative between parental anxiety and blind children's quality of life in both emotional and social domains ($p < 0.01$). Quality of life significantly decreased with increased level of parental anxiety.

DISCUSSION: In respect to above results, upgrading mental health and reducing anxiety in parents of blind children is really necessary and some effective actions must be done about this.

KEY WORDS: Parental anxiety; quality of life; blind, emotional domain, social domain.

IJNMR 2008; 13(4): 141-144

Parent's duty is to take care of children and train them as good as possible. However, the child is a member of family, even if he/she is blind. Disabled child and parents have reciprocal effect on each other.¹

However, one of the most common and important group of handicaps, are blinds. International health organization, on the international day of blindness, in 2002, announced that about 45 million blinds live in the world. Every 5 minute, one person becomes blind in the

world.² Rapidly increasing their population, the importance of blinds welfare becomes obvious.³

Werth says: "there is an obstacle between blind parents and blind children's relationship. If the child's blindness effects the relation between parents and them, difficulties of how to adjust the child's needs and behaviors arise for parents, and this increase parent's anxiety.⁴ To have a blind child, reaching his/her puberty and adolescence, is a stressing and anxious experience for a family.⁵ At last, some of the

* MSc, Department of Health Nursing, School of Nursing & Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

**MSc, Department of Health Nursing, School of Nursing & Midwifery, Tabriz University of Medical Sciences, Maragheh, Iran.

*** MSc, Department of Operating Room Nursing, School of Nursing & Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

**** MSc, Department of Psychiatric Nursing, School of Nursing & Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

Correspondence to: Manijeh Dehi MSC.

E-mail: manigehdehister@gmail.com

Research Article of Isfahan University of Medical Sciences, No:

parents adjust themselves to the situation, while others, continuously experience different kind of stresses; they frequently experience being shocked. Parents of a disabled child see differences between them and other children in every period of his/her life, and consequently feel mental pressure and anxiety.⁶ Also, when they watch their child's growing, they feel more anxious and think who will take care of their disabled child after their death.⁷

In other hand, parent's important role in a child's life can affect their quality of life. Nowadays, as the population of disable people increases -especially blind ones- their quality of life has become of great importance which caused scientific and medical considerations to be concentrated on their quality of life in last decays.⁸

The blind child's parents have a very important role in their social condition, and their condition deeply affects the child's life, so that negative effects of parents' anxiety, directly affect the child's social skills. Hence it can influence their quality of life.⁹

Parents' behaviors have lots of effects on disabled child's brothers and sisters' behaviors. On the other hand, brothers and sisters can support their disabled brother or sister and we can assume they have a very important role in helping to increase emotional and social activities and life quality of their disabled brother or sister.¹⁰

Parents, which have mental problems such as stress and anxiety, can't do their duty well, and this leads to destruction and decrease of child's social activities, and causes emotional and social problems for the child.¹¹

Because there is no survey to show the effects of parental anxiety on the life of a disabled person, this research is done to warn specialists, experts and programmers and guide or support families through health and supporting organizations.

The goal of this research is to determine the relation between parental anxiety and quality of life in children with blindness in Ababasire institution, Isfahan, in both emotional and social dimensions.

Methods

Present study was a correlative study, which accomplished in 2006, in Isfahan Ababasire educational institute. Target population was the blind children in primary and guidance school of Ababasire institute and their parents. The sampling was statistical. So that 94 blind child and their parents had not experienced any high anxiety accident during last two weeks, were selected for study. Not having physical or mental diseases or physical deficiencies in families, not having other kind of disabilities along with blindness, blind child's ability to answer the questionnaire and not living in Ababasire dormitory, were criteria for this research. Information about this research collected by two questionnaires, the first one was "Hamilton Anxious Questionnaire", which determines the anxiety rate as a standard tool and frequently used in different researches, so its' scientific importance is clear. This test includes 31 questions. Classification criteria for the questions are: doesn't exist, scarcity, average, considerable and very much, which was classified from 0 to 4. So for positive feeling, it is from left to right, and for negative feelings, from right to left. Hence anxiety divided to 4 grades: light anxiety, medium anxiety, severe anxiety, and very severe anxiety. Using this test for the study, it calculated how anxious the parents are.

And the other one was "blind's quality of life" questionnaire prepared by "VQOL Core Items" or "IVI". This questionnaire prepared in Royal Victorian Eye and Ear Hospital (RVEEV), in 2000.¹ It included base questions of "VQOL" questionnaire, by Frost et al. Validity and reliability was assessed with content validity and test-re-test method, respectively (0.89) This questionnaire has 20 questions include emotional (12 questions) and social (8 question) dimensions. Classification criteria for the questions are: never, seldom, sometimes, most of times, all the time. It's classified from 0 to 4. So for positive questions, it is from right to left, and for negative questions, from left to right. Hence, quality of life divided to 4 groups: undesirable, relatively desirable, desirable, and completely desirable.

To do this survey, after getting necessary authorization and going to Ababasire institute to explain the goals of the research to the managers, the researcher explained his goals to the parents of blind children in a meeting and asked for their cooperation.

Then by complete counting and considering the readiness of under research units, and being accepted or not, the researcher asked each blind kid all the questions clearly, and completed the questionnaire about blind's quality of life. He trained boys and girls unit's consultants to be a questioner, and they completed the Anxious Questionnaire by meeting the parents.

For analyzing data they made an average grade from average points of a child's father and a child's mother, and then calculated average points of parent's anxiety. "Kendall's tau b" statistical test via SPSS software used for analyzing data and making conclusions.

Results

The research shows that average age of mothers was 35.18 (± 5.51), fathers' was 40 (± 6.22), and blinds' was 11 (± 2.5).

60.6% of blinds were boy, and 39.3% girl. 12.8% was completely blind, 38/3% almost completely blind, 28.7% severe blind, 13.9% severe semi blind, 6.3% average semi blind.

Average points of parents anxiety was 1.95 ± 0.68 . 22 (23.9%) parents had light anxiety, 56 (59.6%) medium anxiety, 14 (14.9%) severe anxiety, and 2 (2.1%) very severe anxiety.

In emotional aspect of blind child's quality of life, findings shows that great abundance is related to desirable quality of life (59.5%) and less abundance related to undesirable quality of life (1%). And in social aspect, great abundance is

related to relatively desirable quality of life (41.5%) and less abundance related to undesirable quality of life (3.2%) (Table1).

Discussion

The research's results show that there is a meaningful relation between parent's anxiety and blind's quality of life in both emotional and social aspects. There are other studies show effects of parent's anxiety on emotional and social quality of life in disable children too. Relatively, Murphy (2006) says in his study that parents have a disabled child, especially blind, have more duties than other parents. This duty includes efforts to increase child's social skills learning and prevention of child's emotional and social problems. Parents which have mental problems such as anxiety and stress cannot do their duty well enough and this causes decreases in child's social activities, and makes emotional problems in child.¹¹

Results of Howe (2006) research show that communicational problems of disabled child cause mental problems (such as stress, anxiety, and fear) in parents. Parent's mental problems would cause emotional and safety problems in disabled child.⁴

Results of Witt et al (2003) research show that there is a relation between family's potential stressors (family member's mental problems, mother's unhealthiness) and psychosocial condition of disabled child at school.⁸ Disabled children whose mother has anxiety problems, psychosocially operate worse than children with normal mothers.

Assel et al (2002) showed negative effects of parent's anxiety indirectly transfers to child's social activity.⁹

Table 1. Descriptive statistics of blind's quality of life in emotional and social domains.

Quality of life	undesirable		relatively desirable		desirable		completely desirable				SD \pm mean
	number	percent	number	Percent	number	percent	number	percent	number	percent	
Emotional domain	1	1%	21	22.3%	56	59.9%	16	17.02%	94	100%	62.0 \pm 2.9
Social domain	3	3.2%	39	41.5%	44	42.5%	12	12.8%	94	100%	2.6 \pm 2.6

It is supposed that cultural and religious affairs have an influence on the scores that parents and blind kids are gained, since religion and culture can be a cause or an obstacle in the way of health behaviours. Culture includes the solutions to social affairs. So, people have different attitudes toward their problems according to their culture. Religion, beliefs and one's values are a part of their religious culture.

In spite of this fact, the results of this survey showed that although Iranian families have a different culture and religion from other societies, increase in parental anxiety causes decrease in blind children's quality of life. So we need some policies to reduce the anxiety in these families.

The results of this research offer the Abasire educational institution to execute educational classes by consultants for the parents, to learn them how to reduce anxiety, concord with problems, and protect their mental health, and justify the importance of compatibility with problems and reducing stress to

increase the blind child's abilities and make him move toward an independent life. Periodic group consulting meetings should establish with presence of blinds' parents, counselors, and institute's head. During these meetings, parents should talk about their problems, feeling, experiences, and improvements in their child's life and get necessary information about their child's common problems.

It is offered to Behzisti organization to establish consulting centres besides centers for accepting blind and disabled children, to consult parents about problems due to child's disability and other problems that may cause anxiety, simultaneously with accepting disabled child. Disabled child's family must be easily in touch with dedicated supporting groups that support disabled child's family and try to solve the problems that can cause anxiety.

The researchers declare that they had no conflict of interest in this study and it was done under the research ethics.

References

1. Sohrabizadeh Honarmand M. Contrasting and comparing of training children with intellectual disable, and parents who have normal daughters and sons in age 5–6. Research Institute Exceptional Children; 2000. Available from URL: <http://www.riec.ac.ir>. [in Persian].
2. Karimi Dermani H. Rehabilitation of exceptional group. 1st ed. Tehran: Gostare Publishing; 2002. p. 40. [in Persian].
3. Dehestani Ardakani A. Depression in blinds. Research Institute Exceptional Children; 2004. Available from URL: <http://www.riec.ac.ir>. [in Persian].
4. Howe D. Disabled children, parent- child interaction and attachment. Child and family social work 2006; 11(2): 95-106.
5. Cohen MA. Impact of a handicapped child on the family. [cited 82 June 8]. Available from URL: <http://www.yale.edu>.
6. Zahedi F. The effect of education and consulting on reducing the stress of parents of intellectual disable children. Research Institute Exceptional Children. Available from URL: <http://www.riec.ac.ir>. [in Persian].
7. Liewellyn G, Gething L, Kendig H, Cant R. Adult sons and daughters with a disability. In: Liewellyn G, Gething L, Kendig H, Cant R. Invisible Carers: Facing an Uncertain Future. Sydney: University of Sydney; 2003. Available from URL: http://www.afsrc.org/care/completed/sons_daughters.php.
8. Witt WP, Riley AW, Coiro MJ. Child hood functional status, family stressors and psychosocial adjustment among school-aged children with disabilities in the United States. Arch Pediatr Adolesc Med 2003; 157(7): 687-95.
9. Assel MA, Landry SH, Swank PR Steelman L, Miller-Loncar C, Smith KE. How so mothers' childrearing histories, stress and parenting affect children's behavioral outcomes? , Journal of child care, health and development; 2002; 28(5): 359-68.
10. Alizadeh H. Effect of disabled child on family. Research Institute Exceptional Children; 2001. Available from URL: <http://www.riec.ac.ir>. [in Persian].
11. Murphy NA, Christian B, Caplin DA, Young PC. The health of caregivers for children with disabilities: caregiver perspectives. Child Care Health Dev 2007; 33(2): 180-7.