

2013

Understanding the role of grandparents and its factors in early intervention with parents and children with hearing loss

Abigail L. Brimhall

Washington University School of Medicine in St. Louis

Follow this and additional works at: http://digitalcommons.wustl.edu/pacs_capstones

Recommended Citation

Brimhall, Abigail L., "Understanding the role of grandparents and its factors in early intervention with parents and children with hearing loss" (2013). *Independent Studies and Capstones*. Paper 665. Program in Audiology and Communication Sciences, Washington University School of Medicine.
http://digitalcommons.wustl.edu/pacs_capstones/665

This Thesis is brought to you for free and open access by the Program in Audiology and Communication Sciences at Digital Commons@Becker. It has been accepted for inclusion in Independent Studies and Capstones by an authorized administrator of Digital Commons@Becker. For more information, please contact engeszer@wustl.edu.

**UNDERSTANDING THE ROLE OF GRANDPARENTS AND ITS
FACTORS IN EARLY INTERVENTION WITH PARENTS AND
CHILDREN WITH HEARING LOSS**

by

Abigail Lee Brimhall

**An Independent Study
submitted in partial fulfillment of the
requirements for the degree of:**

Master of Science in Deaf Education

**Washington University School of Medicine
Program in Audiology and Communication Sciences**

May 17, 2013

Approved by:

Karen Stein, M.S. CED, LSLIS, Cert. AVEd., Independent Study Advisor

Abstract: This literature review analyzes the potential benefits and role of grandparent involvement in early intervention in families of children with hearing loss. The study addresses the need for professionals in the field of deaf education to provide support; resources and strategies to facilitate the involvement of grandparents while continuing additional research to better define the role of grandparent involvement in early intervention within the field of deaf education.

Acknowledgement

I would like to thank my advisor, Karen Stein, for her constant assistance and guidance throughout the development of my Independent Study Project. Without her support, dedication, and knowledge, the success of this literature review paper would not be where it is now.

Table of Contents

Acknowledgements.....i

Introduction.....1

Grandparent–Parent and Grandparent–Grandchild Relationship.....4

Grandparents as a Source of Support.....9

Support to Grandparents.....13

Conclusion.....19

References.....23

Introduction

The role of the family in the early intervention process is widely accepted as crucial to the child's success. Given that, it is important to understand the changing family dynamics of the times, in order to provide the most effective services. There is ever-increasing diversity in today's society, with a wide range of ethnicity and family structures in every geographic region of the United States. Wendy Mitchell (2004) best explains the impact of this diversity in the vast array of family dynamics in today's world:

Key elements of society are no longer viewed as static but rather fluid and multi-dimensional. The family mirrors many of these changes and simultaneously raises many questions concerning, as Silva & Smart (1990) note: 'what the family is' and 'what the family ought to be'. Key influences in these debates include: demographic changes, such as the ageing population, fall in birth rate, increasing rates of divorce and reconstituted families and ethnic and cultural diversity. (2004)

With the current changes in today's society, expectations and roles in every family network are changing. Understanding the impact of this dynamic allows us to take advantage of the larger family system by involving a more comprehensive approach to supporting the family, thus leading to more positive outcomes for this child. Considering Mitchell's statement above from the *Research Review: The role of grandparents in intergenerational support for families with disabled children: a review of the literature*, we can see that the fluid nature of the family impacts the approach and service delivery early interventionists provide when collaborating with families, specifically families of children with disabilities. This is of significance as we professionals develop and shape the way early intervention providers deliver service to families of children with disabilities or hearing loss.

The extended family can be conceptualized as a system of mutual assistance, support, and resources. It is important to focus on the changes in dynamics and relationships that occur when the entry of a child with a disability disrupts the system's balance. (Morton, 2000)

Morton describes a family system model as a ‘fluid system’ in which the entry of a child with disabilities impacts the behavior of the family as a whole network. (2000) The impact of a child with disabilities in a family is complex and it is imperative for professionals to understand. Greater understanding of this issue can help professionals adjust early intervention services in a way that can be as positive as possible and will yield the best results for the new fluid family unit.

As evidenced by Morton (2000), current research reveals that the best model of service delivery in early intervention is a family-centered approach with a strong parent counseling component. Taking advantage of the larger family network and providing comprehensive family support leads to a more successful and optimistic outcome for the child with a disability(ies). Most early intervention programs delivering services, including all communication modes, encourage families of children with hearing loss to be involved in early intervention on an ongoing basis, and with a focus on a family-centered approach. This focus on family, including education and counseling of both parents, is highly emphasized when working with children with hearing loss. Parent educators play an important role in the development of children with hearing loss and the education of their families as a whole; they are an integral part of the success of early intervention. In regards to the family dynamics of today’s society, Morton states, “[s]uch societal changes as the increased occurrence of single-parent and two-income families have led to the creation of new roles and expectations for grandparents” (2000). In *Beyond Parent Education: The Impact of Extended Family Dynamics in Deaf Education*, Morton (2000) reports that when a child with hearing loss enters the family system, that system can be impacted; the roles of each family member change, including the roles and expectations of

grandparents and the significance of this change should be recognized. Looking beyond the small family system of parent and siblings for assistance and support, grandparents can be extremely beneficial to the family unit as a whole when a child with hearing loss arrives in the family. However, there is currently a lack of resources available when focusing on the grandparents' involvement and their role in the early intervention process. This lack of focus is particularly noticeable when addressing the initial diagnosis and throughout the early stages of the intervention journey. Conversely, there is an abundance of research and resources on the role of grandparents in early intervention for children diagnosed with a range of other disabilities including autism spectrum disorders, learning disabilities, and developmental delays. Significant research on the grandparents' role in the early intervention process within a family facing hearing loss has not been adequately addressed in the field of deaf education. However, it seems likely that with the appropriate resources and education, grandparents of children with hearing loss can also play a significant role in the family support system and have a valuable impact on the early intervention process for their grandchild.

In light of what is known about the changing family dynamics of today's society, early interventionists need to search beyond the immediate family network, and involve grandparents within the family's system for early intervention when working with a child that has hearing loss. The purposes of the literature review study is to address in depth indicating factors related to the grandparents' role in early intervention; develop strategies and resources; and recognize needs for professionals working with families and grandparents. With the limited amount of evidence-based practice research currently available, professionals working with extended families of children with hearing loss can learn from the other areas of disability to increase grandparent involvement and better assist families in their journey. In an effort to apply this information to

the children with hearing loss, I focused my study on three related areas: Grandparent–Parent and Grandparent–Grandchild Relationships; Grandparents as Sources of Support; and Importance of Providing Support for Grandparents. Future implications for further research, for private/public educational settings, and pre–service and in–service professional training programs will also be addressed.

Grandparent–Parent and Grandparent–Grandchild Relationships

There are countless variables that impact the relationships between the grandparent and parent, and between the grandparent and grandchild. It is essential to understand the significance of this subject, “...the family system is defined as the ‘social system that nurtures individuals and governs the interrelationships that occur in the individual’s environment’” (McNee, Jackson, 2012). An intergenerational relationship is defined as a relationship occurring between one generation and another, i.e. between parents and grandparents, or between grandparent and grandchildren. Morton (2000) goes on to describe a family network as a ‘fluid system’; when one individual’s environment is impacted, the entire family ‘fluid system’ is affected. A great amount of effort is needed to comprehend the significance of how intergenerational relationships affect a typical functioning family network, one where you do not find a family member that has a special need. The significance of this subject becomes even more important when we are viewing it with respect to a child with hearing loss within the family unit. The positive influence of a deeper understanding by professionals of intergenerational relationships within families with children with disabilities is worth our time and effort, specifically with respect to the grandparent–parent and grandparent–grandchild relationships.

How is an intergenerational relationship impacted when a family member is diagnosed with a disability? For the purpose of this paper, I will speak specifically of those families

affected by hearing loss. There is much to do and process when a diagnosis is first received. It is known that the news of a diagnosis can disrupt the flow of the family function system. Vadasy (1987) reports that typical grandparents view their grandchildren as securing their family future, but when the grandchild has a disability the perception is that their family future is at risk. Anytime we feel our future is at risk, a rollercoaster ride of emotions is to be expected. During this emotional time of beginning early intervention services, family support is greatly needed. However, often grandparent support toward parents is lacking as they themselves try to cope with the changing perspective. There is little research investigating the issues of intergenerational relationships between grandparents and parents, in general, even though it is recognized as significant. The quality of the grandparent-parent relationship directly impacts the level of support grandparents contribute. (Mirfin-Veitch, Bray, Watson, 1997) “While the membership characteristics of families of individuals with disabilities have been studied, little has been done to investigate the relationship of these [grandparent-parent relationships] attributing to either successful or unsuccessful family interaction” (Seligman & Darling 1989 – page 305).

William L. Nybo et al. expresses interesting concrete information in the exploratory study, *Grandparents' Role in Family Systems with a Deaf Child* regarding how grandparents can contribute support to parents and to a grandchild with hearing loss. This qualitative study explored the role of grandparents in the family system. Specifically, the grandparent role was examined in six family systems across three-generation triads: grandparents, parents, and grandchildren with hearing loss, in North Dakota. The study's purpose was to provide insight into personal and interpersonal functioning of extended family systems with a family member who is deaf or hard of hearing, and to provide a basis for future

quantitative research. Both a survey and in-person interviews were conducted. The children in the study ranged in age from 15 months to 20 years, with a mean average of 8.3 years of age.

The grandparents were in the range of 55 to 64 years of age. Upon analyzing the results, Nybo et al. (1998) located a contributing factor to the level of grandparental support within the family system of these families: the quality of the parent–grandparent relationship existing before the birth or diagnoses of a grandchild with hearing loss. In addressing this factor, ‘the quality of the grandparent–parent relationship’ greatly depends on the type of relationship that existed prior to the news of the diagnosis. If grandparents and parents recognize and face adjustment issues, it can greatly enhance the quality of the grandparents’ ability to provide support. The introduction of a grandchild who is deaf or hard of hearing appears to have a strong effect on the extended family system, but typically the family responses were consistent with the quality of preexisting relationships.

Nybo et al. shared an additional factor in their study that affects the quality of grandparent–parent relationship: ‘extreme geographical distance’ between grandparents and parents. Nybo et al. (1998) report:

The two grandparents with the least prior information about deafness and the greatest geographic distance between themselves and their deaf grandchild had greater face to face adjustment difficulties when they eventually had their first encounter with the child. Interestingly, both of these grandparents denied having adjustment issues, that both of their children observed their parents as initially uncomfortable and confused or tentative around their grandchild. (2000).

This additional factor of distance related to adjustment difficulties is reinforced by a study by Vernon and Wallrabenstein (1984), denial was a universal first reaction to trauma in family systems. Failure to manage the trauma situation resulted in later adjustment problems. Families with weak intrafamilial communication tended to have difficulties in understanding the current needs of the family. That being said, the quality of the existing grandparent–parent relationship

prior to the initial diagnosis of the grandchild with hearing loss and the nature of the adjustment period, and where extreme geographic distance is a factor during the initial diagnosis process, directly influence the positive nature of the grandparent–grandchild relationship, and consequently reduces the potential positive benefits of grandparent support.

There is a need for further research to address the development of grandparent–grandchild relationships in order to identify critical periods or issues in the relationship which may be facilitated by information. In addition, qualitative and quantitative aspects of relationships with grandparents are associated with positive grandchild adjustment, and this should be investigated. Hastings explains there are critical time periods for grandparent–grandchild relationships and research can support these critical issues, and he states, “...the development of grandparent–grandchild relationships in order to identify critical periods or issues when grandparents may require additional support or information.” (1997). When grandparents lack understanding and fear of the unknown sets in, they are less able to provide the much needed love and support that help develop natural communication with their grandchildren. This research would facilitate early interventionists in providing supporting resources and knowledge to families; increasing quality services for the family system and allowing relationships to grow as they would in a family without a disability.

An interesting perspective regarding the impact of grandparenting identity and role on the grandparent–grandchild relationship, in the research, *‘My grandchild has a disability’: Impact on grandparenting identity, roles, and relationships* suggests that, from a theoretical standpoint, “...a grandchild’s disability does not impede or significantly alter the development of grandparenting identity or styles.” (Woodbridge et al., 2011) This relevant piece of information

supports that grandparenting style and identity does not need to evolve when a grandchild with hearing loss emerges into the family system.

In summary, given the fact that family system is the social system that supports individuals and manages the interrelationships that occur in the individual's environment, it is essential for professionals to understand the factors involved in intergenerational relationships. When a new family member enters a family system, each intergenerational relationship is affected. This means, there is a range of emotions that may occur, adjustment periods that arise, and a journey towards acceptance of the new reality. Addressing these issues without delay helps to prevent additional potential issues from hindering the family relationships. There is much evidence that the effects of the grandparent-parent and grandparent-grandchild relationship needs to be further explored and the factors identified need to be used to shape the implementation of the early intervention services.

It is not in question whether the positive support of an additional family group, namely grandparents, is beneficial, but the question remains how they can be educated and supported in order to best support the family system when a child with hearing loss is present. In summary, the two main factors affecting the grandparent-parent-grandchild (with hearing loss) triad are the quality of the grandparent-parent relationship prior to the diagnosis of hearing loss and the geographical distance. Geographical distance between grandparents, parents and grandchildren can impede the adjustment period and increase the discomfort of having a grandchild with hearing loss., In the Hastings study, "...two thirds of the same grandparents believed their initial role after learning about their grandchild's disability was to support the parents " (Hastings, 1997) It is important to understand the contributing reasons impacting the relationship between grandparents, parents and grandchildren so they may be studied and support added to early

intervention services. For that reason, having early interventionists be a part of **this process** greatly contributes to the quality of this family support system. A healthy grandparent–grandchild relationship can only add tremendous needed support and benefits to the grandchild with hearing loss and his or her overall development.

Understanding the basic knowledge of intergenerational relationships is essential in early intervention when working with parents, grandparents, and grandchildren with hearing loss. This can lead to enhanced early intervention services in today’s society of highly dynamic families with diverse backgrounds.

Grandparents as Sources of Support

The family system is much more complex than it appears at first glance, and Mueller & Elder (2003) take a close look at the complexities of the family with a strong focus on the grandparent relationship. “ Relationships among family members are embedded within larger family systems and are often contingent upon relationships with other family members.” Mueller & Elder’s research evaluated a holistic perspective on relationships between grandparents and grandchildren with or without hearing loss. Interestingly in this study, Mueller & Elder identified profiles of behaviors between grandparents and grandchildren and examined the social factors that foster patterns of grandparent-grandchild relationships. One influencing factor was their own experiences and personal relationship with their own grandparents as well as their relationship with their adult children. Grandparents and grandchildren can play a significant social role in each others’ lives extending beyond mere contact. Grandparents also are a significant role model in shaping the type of relationships developed among family members within a larger family structure. Mueller & Elder found, “Family relationships are not structured merely by demographic factors, nor can they be understood dyadically without taking the larger

family context and relationship history into account. Proximity, age, and number of grandchildren describe an opportunity structure for interaction between the generations, but it is a structure that does not ensure that the potential will be realized.” (2003) Furthermore, “relationships that are more multidimensional (vs. lacking one or more dimensions) are likely to result in greater intimacy and involvement between grandparents and grandchildren.” (Mueller & Elder 2003)

This evidence-based research gives basis to the idea that utilizing grandparents as a source of support for parents and grandchildren with hearing loss can be highly beneficial. Sara Green, in *Grandma’s Hands” Parental Perceptions of the Importance of Grandparents as Secondary Caregivers in Families of Children with Disabilities*, reported on her study which was designed:

To examine the relationship between participation of grandparents in the routine caregiving tasks required of parents of children with disabilities and parental feelings of well being in the face of demands of those tasks. Specifically, it addresses the prevalence of weekly participation by grandparents and its impact on parental ability to both maintain a positive emotional outlook and avoid physical exhaustion. (Green 2001)

This research study evaluates the maternal parents’ perspective on the value of grandparent support as compared to outside support, i.e. paid babysitters, friends, and neighbors. Out of 151 caregivers contacted, 110 participated in the study and completed questionnaires. 91 out of 110 were parents of children in treatment for disabilities; 81 of the 91 of these parents were mothers and 10 were fathers. The average age of the child was just under 5 years of age. Green conducted two components of the study: a quantitative component and a qualitative component. For the quantitative component, Green had the participants complete surveys which addressed three aspects: Sources of Routine Assistance with Caregiving Tasks; Parental Well-being; and Parent and Child Characteristics Correlated with Grandparent Participation in Caregiving. For

qualitative measures Green conducted interactive interviews. Of 25 interested mothers, 7 were selected based on specific criteria. Disabilities of the children included cerebral palsy, Down syndrome, autism, and one child born without a disability, who later had a stroke in early childhood. The age of the children ranged from preschool to high school. Regarding the level of assistance the mothers received from the grandparents, results were as follows. Two mothers reported receiving weekly assistance with routine caregiving tasks from grandparent(s) at the time of the interview; three others were not currently receiving help, but had received weekly assistance from grandparents previously. Two mothers reported never having received assistance from grandparent(s) with routine caregiving tasks. In addition, Green looked at distance between the four families, at least one of the child's grandparents lived within 30 minutes of their grandchild. In three families, all grandparents lived a great distance from the child with disability and his/her family.

Green's study reported compelling findings. The quantitative information examined, clearly indicated that "while help from non-grandparental sources outside of the nuclear family did not have a positive impact on well being, and in fact was associated with lower levels of well-being, assistance from grandparents was related to the parent's ability to maintain a positive outlook and avoid physical exhaustion." (2001) Where grandparent help was absent, even if other help was available, the parental feelings of well-beings was lower than where grandparents served as a source of routine assistance. In the view of the mothers interviewed, grandparent participation on a regular basis provided grandparents with an opportunity to really know and understand the grandchild and the nature of his/her disability. It created a unique comfort level for both parent and grandparent. This positive finding is stated best by Green, "a greater level of comfort with the child in turn enhanced the grandparent's ability to appreciate the child as a

member of the extended family and to treat him/her as they would any other grandchild. “ (Green 2001) If there is a presence of “acceptance and ordinary treatment by grandparents, it facilitates parents seeing their parenting role in a more ‘normalized’ and ordinary intergenerational context which increases overall feelings of well-being.” (Green 2001)

In *Beyond Parent Education: The Impact of Extended Family Dynamics in Deaf Education*, Morton (2000) conducted a qualitatively informal survey study to examine the support experienced by hearing parents with deaf/hearing-impaired children. The informal survey was conducted at a monthly parent meeting. Ten hearing parents, 8 mothers and 2 fathers, participated in the study. (One deaf mother with three deaf children was eliminated from the study to maintain consistency.) The survey included three questions:

1. At the time of the diagnosis of your first deaf child, how supportive was your mother? Father? Mother-in-law? Father-in-law?
2. Today, how supportive is your mother? Father? Mother-in-law? Father-in-law?
3. Has your relationship changed with family members since the birth/diagnosis of your deaf child?

The determination of “support” came from the respondents’ evaluation of their own parents and in-laws. Morton found that 8/10 respondents reported that their mother had been supportive at the time of diagnoses while 7/10 father’s were reported as supportive. There were 5/10 mothers in-law reported as supportive at the time of diagnosis in comparison to 4/10 fathers in-law that had been supportive. At the time of the interview, 8/10 mothers and 7/10 fathers were identified as supportive. And finally, 7/10 mothers in-law and 6/10 fathers in-law were identified as supportive at the time of the interviews. Since diagnoses 6/10 felt their relationships with their parents and in-laws had not changed. Although, 3/10 felt their relationships had

changed in a positive direction. And, 1/10 felt their relationship had changed in a negative direction. Based on the qualitative data, Morton concludes:

Results show as an indicator that when early parental involvement and the inclusion of grandparents and other extended-family members in the educational program of the deaf child are encouraged, it yields significant benefits. It can bring families together and provide a solid emotional base for the growth and development of the whole deaf child. (2000)

In conclusion, utilizing grandparents as a source of support can yield significant benefits. It can bring families together while providing a broader foundation for the growth and development of the child with hearing loss. When there is grandparent support there is increased comfort with the disability in the family system. We find in the research presented that early intervention can be better accomplished with the addition of the grandparents; their inclusion adds significant benefits for both the child and the family structure.

Support for Grandparents

Grandparents can be a positive influence in a family 'fluid system' (Morton, 2010). Wendy Mitchell's study (2007), *Research review: the role of grandparents in intergenerational support for families with disabled children: a review of the literature* reinforces the benefits of support from grandparents, "...the studies that exist demonstrate that grandparents' support, both practical (providing respite care and domestic help) and emotional (non-judgmental advice, a 'listening ear'), are generally valued" (Hornby & Ashworth 1994; Mirfin-veitch et al. 1996, 1997; Baranowski & Schilmoeller 1999; Findler 2000). Grandparents can provide both practical and emotional support to families whether or not they have a grandchild with disabilities. Interestingly, when Mitchell reviewed other research studies he summarized, "Research with grandparents of non-disabled children has demonstrated that grandparents themselves have support needs. Providing support [to

families] can be stressful and demanding “(Dench et al. 1999; Ferguson et al. 2004). This piece of information is rarely addressed, but relevant when acknowledging that grandparents who are involved with their grandchildren need support for their physical and psychological well-being as do parents.

Before further discussion of the support needs of grandparents, it is necessary to address both the concept of ‘grandparent role’ and ‘grandparent identity’ (Woodbridge et al. 2011). *‘My grandchild has a disability’: Impact on grandparenting identity, roles and relationships* conducted by Woodbridge et al. (2011) examines to what degree having a grandchild with a disability influences grandparents’ sense of identity and how the enactment of the grandparent role might change aligned with the changing sense of identity.

Approximately half believed the experience of disability had not changed their [grandparent’s] relationship with their grandchild, but described, having to lower their expectations about ‘the depth and type of relationship possible with their grandchild’ ...and that the extra needs of their grandchild with a disability conflicted with their desire to treat all their grandchildren equally and had negatively impacted on that relationship.

Woodbridge et al. conducted a qualitative study in addition to the literature review component of the study. They utilized an in-person interview method to gather data. They interviewed 22 grandparents (5 men and 17 women) who had a grandchild diagnosed with a disability. Eighteen of the grandparents had 1 grandchild with a disability, and 4 of the grandparents had 2 grandchildren with disabilities. The age range of the grandparents was 55 to 75 years of age. All of the grandparents interviewed lived within 30 km of their families in Australia (3 in rural areas, 6 in coastal communities, and 13 in urban areas). In addition, all of the grandparents interviewed were maternal grandparents, the majority were married and retired and had significant prior professional experience working with

children with disabilities in their pre-retirement occupations, (teachers/teachers' aides (10), registered nurses (4), and aged/disability support workers (2)) prior to their grandchild's diagnosis. At the time of the study, the grandchildren were all under the age of 17 years. In the interviews, grandparents defined the nature of their grandchildren's disabilities as moderate to severe. Some disabilities identified include cerebral palsy (2); Down syndrome (3); autism/asperger's syndrome (4); ADHD, DeGeorges syndrome and Rhetts syndrome. Semi-structured interviews lasting 60-90 minutes were conducted in the participant's homes. The interviews covered key areas: expectations and experiences of the grandparenting role, recalling their experiences at time of diagnosis and their relationship and activities with all their grandchildren, both with and without disabilities. A thematic analysis was utilized in the review of the data collected. Three central themes were formulated and discussed in depth: formation of grandparenting identity, styles of grandparenting, and role enactment (interactions with typically-developing and disabled grandchildren). Both the experiences and enactment of the grandparents varied depending upon the characteristics of both the grandparent and the grandchild, but all grandparents presented an overwhelming drive to play a positive role in their grandchild's life. From a theoretical perspective, this study suggests that a grandchild's disability does not impeded or significantly alter the development of the grandparenting identity or style. Woodbridge states, "the grandparenting experience and role enactment may be universal with only the context and delivery varying... [there is a need to develop] strategies to enhance the lived experience of the intergenerational grandparent-grandchild relationship, both with and without the presence of disability" (Woodbridge et al., 2011).

There is a very limited amount of research on the benefits of grandparent support for grandchildren when we specifically look at the population of grandchildren with hearing loss. We are also lacking in research on the areas where grandparents may benefit themselves from receiving support and guidance. It is not common to find professional support and education for grandparents as a routine part of the early intervention or diagnosis process. Currently there is a minimal recognition in the field of the significant benefits of grandparents when they effectively participate in early intervention therapy and home-visit sessions with parents and grandchildren. In the *Grandparents of Children with Disabilities: a review*, there is reference to “The Supporting Extended Family Members (SEFAM)” project which highlights available educational services and emphasizes the importance of providing support to extended family members including grandparents.

They also offer ideas to develop services that facilitate this process:

The Supporting Extended Family Members (SEFAM) project in Seattle (Vaasy et al., 1986)..... developed programs for.... grandparents. The basic model used was a regular workshop at which grandparents were offered information (often, information that they had specifically requested), and had a chance to share their experiences with other grandparents and with professionals. Group leaders used various techniques (e.g., role play) to explore grandparents’ feelings and focus on how grandparents could support their families (Woodbridge et al., 1997).

There is a high need for research that examines the influences of support groups for grandparents of grandchildren with hearing loss. If these studies were available, it is likely that they would yield results similar to those of other disability groups when grandparents are educated and supported. Support services for grandparents of grandchildren with hearing loss could bring the same benefits we have seen on other studies, such as lower stress levels and increased comfort with the future while benefiting the child’s growth and performance. “Direct support for grandparents may be an effective way of reducing the

difficulties experienced by families of children with disabilities” (Woodbridge et al. 1997). That being said, early intervention professionals need to be aware of the need for grandparent support. Inviting grandparents to be involved in early intervention services with families of children with hearing loss including therapies, home–visit sessions, and family education would be an important first step. It would be expected that, if included in the education process, grandparents would benefit from information and guidance in the following areas: grandchild’s specific hearing loss; hearing loss needs; support services availability for themselves and for their grandchild; available hearing loss and/or early intervention training workshops; and information to facilitate the parent - grandparent–parent relationship. Mitchell (2006) suggests organized workshops and/or meetings for grandparents of grandchildren with hearing loss, should be structured to provide ongoing support rather than allowing them to be sporadic events, without follow–up.

While it is significant for early intervention professionals to offer professional support to grandparents, they must also use their education and experience to consider ethnic and cultural factors that may exist within the intergenerational family system. Relevant issues may include perceptions of disability and expectations of support needs to be contextualized within different ethnic belief systems and cultural practices. Mitchell (2006) shares interesting insights in the role of ethnicity and cultural traditions (Dilworth–Anderson’s 1994) that may vary in grandparent support to families with children disabilities, and the type of support grandparents themselves need. These insights remind us of the impact of cultural diversity and would be valuable for early interventionists collaborating with families of children with hearing loss. Mitchell shares:

Dilworth–Anderson’s (1994) study highlights the role of ethnicity and cultural traditions, especially the importance and expectation of intergenerational care

giving between mothers and grandmothers....Hatton et al. (2002) note that South Asian parents with disabled children in the UK have been shown to have low levels of support from extended family. Perceptions of intergenerational support can thus diverge among different ethnicities and in different countries (2006).

Cultural and ethnic differences may well influence the type of support provided by grandparents and valued by different family members. It is important that future research recognizes the need for exploration of cultural diversity and seeks to avoid tokenism and generalizations, but rather applies cultural knowledge to the implementation of services. (2006).

Another factor to consider when evaluating the grandparent-parent and grandparent-grandchild relationships is found in the research of Mirfin-Veitch and Bray. In their studies, they state that the level of support 'less involved' grandparents offer is often due to their previous poor relationships with their children rather than the grandchild's disability (Mirfin-Veitch et al. 1996; Mirfin-Veitch & Bray 1997). Interestingly, the process of adjustment of having a grandchild with hearing loss can be further hampered, beyond the poor parental relationship, if grandparents receive little professional support and information regarding their grandchild with hearing loss. (Burns & Madian 1992; Schilmoeller & Baranowski 1998). Expanded research would provide insightful information and resources necessary for early intervention professionals to better serve and collaborate with parents, grandparents and grandchildren. Recognizing initially the importance of grandparents' need for professional support is a first and critical step in exploring and growing research which will eventually develop effective resources and a positive influence on the fluid family system. Mitchell best explains:

Practitioners need to think beyond nuclear family and target support in an appropriate manner. However, it is clear that this is circular process; in order to develop relevant training for practitioners and support services for grandparents,

we need to know more about the support that grandparents themselves value and currently regard as an unmet need (2006).

Our knowledge of grandparent support needs will increase our understanding and ability as professionals to train other professionals to support grandparents within the family system. This in turn will promote a more positive psychological well-being, further enhance both the grandparent–parent and grandparent–grandchild relationships, and offer comfort and clarity to the role of grandparents toward parents and grandchildren with hearing loss.

Conclusion

In today’s society there is an ever-increasing range of family dynamics, and the need to facilitate consistency in education and support services for intra–family member needs is significant. “Rapid societal changes in the form and function of the family, specifically increased numbers of divorced, single parent and ‘blended’ families in westernized cultures, mean that contemporary grandparents often play a [more] critical role in maintaining family life and functioning – they frequently provide practical instrumental (e.g., childcare and finances) and emotional support to their children and grandchildren, facilitating intra–family communication and connections” (Woodbridge et al., 2011).

Current knowledge of intergenerational relationships is needed for early intervention professionals as they collaborate with families and grandparents of children with hearing loss. Before we can progress in this effort, it is necessary that an awareness and acknowledgement of the value of grandparents to both the parent and grandchild be a part of the training for professionals in deaf education. When their value is recognized then support services can be outlined for grandparents and their involvement promoted in the early intervention process. In *Grandparents’ Adjustment to Grandchildren with Disabilities’* interviews with grandparents of

grandchildren with disabilities revealed that grandparents express a yearning for support and resources, including support groups, counseling, forums to talk with other grandparents, and opportunities to share information through national associations. (Scherman et al. 1995)

Grandparents feel a dual responsibility to both parents and new grandchildren with hearing loss, increasing their own personal stress. Scherman et al. (1995) outlined implications for in-service professionals and higher education services to help respond to these needs.

First, professionals can facilitate a smoother family adjustment to the birth of a child with hearing loss by offering grandparents the opportunity to be active partners in family intervention right from the start. This can begin at the hospital where grandparents can be educated on how to provide appropriate care for their newborn grandchild and help in the medical habilitation process. Understanding the options a family has in early intervention, will assist in the comfort level grandparents have in becoming an early source of support. When grandparents reside in close proximity to their new grandchildren, professionals should take note and target them to be part of early intervention because of the high potential for involvement due to their location and the potential for value in their support. Second, the majority of grandparents lack a role model in modifying their traditional role expectation for a grandchild with hearing loss. This role can be met by the early interventionists modeling for grandparents while educating parents and siblings, and creating opportunities for communication with other grandparents. Third, grandparents may experience concern that their grandchild's disability can place stress on their children's marital relationships. Early interventionists should create an open environment for discussion of these subjects with grandparents, helping them to recognize signs of marital stress and encouraging their children to seek professional counseling where coping skills can be taught and emotional needs meet. Fourth, a significant role in early intervention is educating the entire family unit

regarding resources in disciplines outside the field of deaf education where help could be beneficial, including mental health, physical health, and educational support professionals. Being aware and taking advantage of support groups, grandparent workshops, forums for grandparents and parents to receive emotional support and family involvement programs can be a great benefit for the integration into the area of hearing loss. It is crucial that support groups should not only be informative and task oriented, but also provides a medium to discuss grandparents' unique concerns, as we are beginning to understand their significance in the early intervention process. Fifth and lastly, institutions of higher education should address the training needs of educational and health professionals who will be involved with family members including grandparents. Within the pre-service teacher training curricula, curricula needs to be designed that effectively explores and educates how grandparents can be incorporated as a resource. In-service professionals should conduct workshops for grandparents and teachers of the deaf, making available strategies that increase grandparents' involvement and provide emotional support.

All of the above strategies and implications were derived from Scherman et al. study results. In addition to Scherman et al., other studies also identify the foundational need to evaluate, to facilitate intra-family communications, to provide family support, to help enhance grandparent roles, and to increase professional awareness of the benefits of grandparent involvement. Unfortunately, there is limited research in understanding the role of grandparents and their impact on early intervention with parents and grandchildren with hearing loss. However there is significant research with other populations of grandchildren with disabilities, and we can learn from that, gaining significant insights and relevant information for application to this population. Further exploration on this subject should seek to discover relevant structures and issues within intergenerational relationships and family systems, explore the impact of the

child's hearing loss on a family, and investigate grandparent adaptations, physical and psychological functioning, and the impact of educational level and/or social class on grandparents' involvement. These studies should be done with larger sampling groups including and separating ethnicity of participants in these groups.

In summary, there is evidence that the grandparent's role in the early intervention process with parents and grandchildren with hearing loss can have tremendous benefits. Currently, the value placed on the role of grandparents in the family system is underestimated, and increased attention and research in this area can provide another positive element in the support system for both parent and child. Many studies suggest that professionals should include grandparents when collaborating with families with hearing loss. Additionally, when grandparents are included there is significant evidence that indicates that grandparents themselves will have needs of support and direction. There seems to be a circular process, which occurs; when grandparents' support needs are met, their delivery of support toward the parents rises to at least an adequate standard, and then the relationships between grandparents, parents, and grandchild elevate to higher quality. Awareness of this great resource is imperative as professionals in the field of deaf education strive to use all avenues to help families. In-service professionals ought to receive special training to gain knowledge of the benefits of grandparents' role in early intervention, develop strategies and resources to incorporate grandparents in early intervention, and better understand the intergenerational relationships. Higher education professionals should consider designing curricula that offers inclusion to the grandparents in the early intervention process. We are fortunate that there is research on the grandparents' role in the early intervention process in many areas regarding children with disabilities; however there is an insufficient amount of research directly associated with grandparents and the field of deaf education. It is my recommendation

that we increase this research so that children with hearing loss and their families can also benefit from this significant source of support.

References

- Green, S. (2001). Grandma's Hands: Parental Perceptions of the Importance of Grandparents as Secondary Caregivers in the Families of Children with Disabilities. *International Journal of Aging and Human Development*, 53 (1), 11–33. Retrieved September 2, 2012, from <http://www.ncbi.nlm.nih.gov/pubmed/11678354>.
- Hastings, R. (1997, December). Grandparents of Children with Disabilities: A Review. *International Journal of Disability*, 44, 329–340. Retrieved September 14, 2012, from <http://www.tandfonline.com/doi/abs/10.1080/0156655970440404?journalCode=cijd20#p=review>
- McNee, C. & Jackson, C. (2012, April). The Experiences and Involvement of Grandparents in Hearing Detection and Intervention. *Topic in Early Childhood Special Education*, 32(2), 122–128. Retrieved August 14, 2012, from <http://tec.sagepub.com/content/32/2/122>.
- Mirfin-Veitch, B. & Bray, A. & Watson, M. (1997, July). “We’re Just That Sort of Family” Intergenerational Relationships in Families including Children with Disabilities. *Family Relations*, 46 (3), 305–311. Retrieved February 15, 2013, from <http://www.jstor.org/stable585129>.
- Mitchell, W., (2006, May). Research Review: The role of grandparents in intergenerational support for families with disabled children: a review of the literature. *Child and Family Social Work*, 12, 94–101. Retrieved August 16, 2012, from doi:10.1111/j.1365-2206.2006.00421.x.
- Morton, D. (2000, October). Beyond Parent Education: The Impact of Extended Family Dynamics in Deaf Education. *American Annals of the Deaf*, 145 (4), 359-365.

Retrieved from August 14, 2012, from, <http://muse.jhu.edu/journals/aad/summary/v145/145.4.morton.html>

Mueller, M. & Elder, G. (2003, May). Family Contingencies Across the Generations: Grandparent–Grandchild Relationships in Holistic Perspective. *Journal of Marriage and Family*, 65, 404–417. Retrieved February 13, 2013, from <http://onlinelibrary.wiley.com/doi/10.1111/j.1741-3737.2003.00404.x/abstract>.

Nybo L. & Scherman, A. & Freeman, P (1998, July). Grandparents' Role in Family Systems with a Deaf Child: An Exploratory Study. *American Annals of the Deaf*, 143 (3), 260–267. Retrieved February 18, 2013, from <http://muse.jhu.edu/journals/aad/summary/v143/143.3.nybo.html>.

Scherman, A. & Garnder, J. & Schutter, M. (1995). Grandparents' Adjustment to Grandchildren with Disabilities. *Educational Gerontology*, 21(3), 261–273. Retrieved September 12, 2013, from http://www.eric.ed.gov/ERICWebPortal/search/detailmini.jsp?_nfpb=true&_ERICExtSearch_SearchValue_0=EJ506064&ERICExtSearch_SearchType_0=no&accno=EJ506064.

Woodbridge, S. & Buys, L. & Miller, E. (2011). 'My grandchild has a disability': Impact on grandparenting identity, roles and relationships. *Journal of Aging Studies*, 25, 355–363. Retrieved August 14, 2012, from www.elsevier.com/locate/jaging.