



Every child and family has unique aspects of their situation, experience, and diagnosis. This page is intended to provide a general overview, but is not attempting to represent every situation or child you encounter. Every family deserves your expertise to assess and adapt your prior knowledge. This resource is best viewed electronically.

DEFINITION

"Deaf and hard of hearing means a decreased ability to detect sound in one or both ears with or without amplification, whether permanent or chronically fluctuating..."(1)

Kinds of Hearing Differences(2)

NATIONAL/STATE ORGS

- The National Association for the Deaf(NAD) is the nation's premier civil rights organization of, by, and for deaf and hard of hearing individuals in the United States of America.
- Wisconsin Sound Beginnings: Early Hearing Detection and Intervention Program. "Vision: All families will have equal access to a seamless system of early and continuous hearing screening, skilled and timely diagnostics and quality interventions to enable children with hearing loss to thrive."

PREVALENCE

1.8 per 1,000 (3)

- Approximately 95% of children identified as DHH are born to hearing parents, into homes where spoken languages are in use at the time of birth. (4)
- Between 35% and 50% of DHH kids are considered "Deaf Plus" or "Deaf with Additional Disabilities" (5)

CONSIDERATIONS THAT MAKE EARLY INTERVENTION SO IMPORTANT

- "A child's access to language exposure (spoken and/or visual) is critical for ALL later learning.
- Language acquisition happens only when a child regularly hears (spoken words) or sees (American Sign Language) language happening around them in their daily environments.
- Any type of a hearing difference (including mild or unilateral) is a risk factor for later language, learning, and literacy development. "Minimal is not inconsequential"
- Amplification is often a first step, but hearing devices are not a "fix". Ongoing assessment and intervention is key.
- It is important that a child consistently wear their amplification device to optimize benefit.
- Parental preferences and child's learning for communication (American Sign Language, Augmentative and Alternative Communication (AAC), Aural, mixed) "(10)
- Children with hearing loss who begin early intervention earlier (by 6 months of age) have significantly better developmental outcomes than similar children who begin intervention later. (11)

LANGUAGE TO USE/AVOID

Ok to use:

- Child with a hearing difference
- deaf and hard of hearing (DHH)
- D/deaf (D=culturally deaf)

Avoid:

- "Deaf and Dumb"
- "Deaf mute"
- hearing impaired

Consider:

- Most children are born with a hearing difference and therefore did not lose anything; the term "hearing loss" is not accurate.
- Deaf pride movements affirm that people with hearing differences are able to do all of the same things that hearing people are able to do, so therefore do not consider themselves "disabled."

DIFFERENCES

THAT MAY BE PRESENT

- Hearing sounds and words helps children learn to talk and understand. A child with a hearing difference may miss out on these sounds. (6)
- Receptive Language
- Expressive Language
- Speech(modality)/Articulation
- Vocabulary
- Social/pragmatic
- Listening effort and fatigue (<u>6</u>)
- Language Deprivation(Z)
- Memory acquisition, literacy, and academic learning
- Heightened other senses(8)
- Balance and postural control differences when proprioception and vision systems are unavailable(2)

TOP RESOURCES

- Hands & Voices Virtual Waiting Room
- Wisconsin Deafblind Technical Assistance Project
- National Center for Hearing Assessment and Management (NCHAM) Early Intervention website
- Hearing First
- American Society for Deaf Children

SUPPLEMENTARY TESTS THAT COULD BE USED OR SEEN IN MEDICAL RECORDS

- Cincinnati Auditory Skills Checklist
- Visual Communication Sign Language Checklist (VCSL)
- MacArthur Bates Communicative Developmental Inventories, Second Edition (CDI)
- SKI-HI Language Development Scale Instruction Manual, 3rd Edition
- Communication Matrix



