

Relationship of Hearing Loss to Listening and Learning Needs

Child's Name: _____ Date: _____

41-55 dB HEARING LOSS		
Possible Impact on the Understanding of Language and Speech	Possible Social Impact	Potential Educational Accommodations and Services
<ul style="list-style-type: none"> • Consistent use of amplification and language intervention prior to age 6 months increases the probability that the child's speech, language and learning will develop at a normal rate. • Without amplification, child may understand conversation at a distance of 3-5 feet, if sentence structure and vocabulary are known. • The amount of speech signal missed can be 50% or more with 40 dB loss and 80% or more with 50 dB loss. • Without early amplification the child is likely to have delayed or disordered syntax, limited vocabulary, imperfect speech production and flat voice quality. • Addition of a visual communication system to supplement audition may be indicated, especially if language delays and/or additional disabilities are present. • Even with hearing aids, child can "hear" but may miss much of what is said if classroom is noisy or reverberant. • With personal hearing aids alone, ability to perceive speech and learn effectively in the classroom is at high risk. • A personal FM system to overcome classroom noise and distance is typically necessary. 	<ul style="list-style-type: none"> • Barriers build with negative impact on self-esteem as child is accused of "hearing when he/she wants to," "daydreaming," or "not paying attention." • Communication will be significantly compromised with this degree of hearing loss, if hearing aids are not worn. • Socialization with peers can be difficult, especially in noisy settings such as cooperative learning situations, lunch or recess. • May be more fatigued than classmates due to effort needed to listen. 	<ul style="list-style-type: none"> • Consistent use of amplification (hearing aids + FM) is essential. • Needs favorable classroom acoustics, seating and lighting. • Consultation/program supervision by a specialist in childhood hearing impairment to coordinate services is important. • Depending on early intervention success in preventing language delays, special academic support will be necessary if language and educational delays are present. • Attention to growth of oral communication, reading, written language skills, auditory skill development, speech therapy, self-esteem likely. • Teacher inservice required with attention to communication access and peer acceptance.

Comments:

Please Consider Indicated Items in the Child's Educational Program:

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| _____ Teacher inservice and seating close to teacher | _____ Hearing monitoring at school every ____ mos. | _____ Amplification monitoring |
| _____ Contact your school district's audiologist | _____ Protect ears from noise to prevent more loss | _____ Educational support services/evaluation |
| _____ Screening/evaluation of speech and language | _____ Note-taking, closed captioned films, visuals | _____ FM system trial period |
| _____ Educational consultation/ program supervision by specialist(s) in hearing loss | _____ Regular contact with other children who are deaf or hard of hearing | |
| _____ Periodic educational monitoring such as October and April teacher/student completion of SIFTER, LIFE | | |

NOTE: All children require full access to teacher instruction and educationally relevant peer communication to receive an appropriate education. Distance, noise in classroom and fragmentation caused by hearing loss prevent full access to spoken instruction. Appropriate acoustics, use of visuals, FM amplification, sign language, notetakers, communication partners, etc. increase access to instruction. Needs periodic hearing evaluation, rigorous amplification checks, and regular monitoring of access to instruction and classroom function (monitoring tools at www.SIFTERanderson.com).