

Relationship of Hearing Loss to Listening and Learning Needs

Child's Name: _____ Date: _____

FLUCTUATING 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"> Of greatest concern are children who have experienced hearing fluctuations over many months in early childhood (multiple episodes with fluid lasting three months or longer). Listening with a hearing loss that is approximately 20 dB can be compared to hearing when index fingers are placed in ears. This loss or worse is typical of listening with fluid or infection behind the eardrums. Child can "hear" but misses fragments of what is said. Degree of difficulty experienced in school will depend upon the classroom noise level, the distance from the teacher and the current degree of hearing loss. At 30 dB can miss 25-40% of the speech signal. A child with a 40 dB loss associated with "glue ear" may miss 50% of class discussions, especially when voices are faint or speaker is not in line of vision. Child with this degree of hearing loss will frequently miss unstressed words, consonants and word endings. 	<ul style="list-style-type: none"> Barriers begin to build with negative impact on self esteem as the child is accused of "hearing when he/she wants to," "daydreaming," or "not paying attention." Child may believe he/she is less capable due to understanding difficulties in class. Typically poor at identifying changes in own hearing ability. With inconsistent hearing, the child learns to "tune out" the speech signal. Children are judged to have greater attention problems, insecurity, distractibility and lack self esteem. Tend to be non-participative and distract themselves from classroom tasks; often socially immature. 	<ul style="list-style-type: none"> Impact is primarily on acquisition of early reading skills and attention in class. Screening for language delays is suggested from a young age. Ongoing monitoring for hearing loss in school, communication between parent and teacher about listening difficulties and aggressive medical management is needed. Will benefit from sound-field FM or an assistive listening device in class. May need attention to development of speech, reading, self esteem, or listening skills. Teacher inservice is beneficial.

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).