



NASET's Educating Children with Severe Disabilities Series

Hearing Impairments: An Overview

Definition

The Education of the Handicapped Act (P.L. 94-142), includes "hearing impairment" and "deafness" as two of the categories under which children with disabilities may be eligible for special education and related services programming. While the term "hearing impairment" is often used generically to describe a wide range of hearing losses, including deafness, the regulations for IDEA define hearing loss and deafness separately.

Hearing impairment is defined by IDEA as "an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance."

Deafness is defined as "a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification."

Thus, deafness may be viewed as a condition that prevents an individual from receiving sound in all or most of its forms. In contrast, a child with a hearing loss can generally respond to auditory stimuli, including speech.

Incidence

Available data indicate hearing loss affects a small percentage of children. In 2008, the prevalence of hearing loss among infants under 12 months was 0.1 percent, or about 1 diagnosed case per 1,000 screened. While the Centers for Disease Control and Prevention (CDC) does not collect hearing test data for children under age 12, other than EHDI data, federal surveys conducted from 2005 to 2009 estimated 3 percent or fewer of children nationwide under age 12 had hearing problems. Based on nationwide hearing examination data for youth aged 12–17 from 2005 to 2008, an estimated 1 percent had at least moderate hearing loss in one or both ears.

According to the Center for Hearing and Communication (2015) :

FACT: Approximately 12% of the U.S. population or 38 million Americans have a significant hearing loss.

FACT: Over 90% of deaf children are born to hearing parents.

FACT: 30-40% of people over 65 have some type of hearing loss

FACT: 14% of those ages 45-64 have some type of hearing loss

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FACT: 15% of children between the ages of 6-19 have a measurable hearing loss in at least one ear.

FACT: Hearing loss occurs in 5 out of every 1,000 newborns.

FACT: Exposure to a noisy subway, for just 15 minutes a day overtime, can cause permanent damage to hearing over time.

FACT: Hearing aids can offer dramatic improvement for most people with hearing loss.

FACT: A mild hearing loss can cause a child to miss as much as 50% of classroom discussion.

FACT: Listening to an MP3 Player at high volumes over time can cause permanent damage to hearing.

FACT: With early identification and appropriate services, deaf children can develop communication skills at the same rate as their hearing peers.

FACT: Noise is one of the leading causes of hearing loss.

FACT: Tinnitus (ringing in the ears) affects 50 million people in the United States.

FACT: Babies are never too young to have their hearing tested.

FACT: Speech -reading is the more current word for lip-reading.

FACT: People with hearing loss wait an average of 7 years before seeking help.

FACT: Only 16% of physicians routinely screen for hearing loss.

FACT: 15 million people in the United States with hearing loss avoid seeking help.

FACT: 1 out of 3 people over age 65 have some degree of hearing loss.

FACT: Approximately 3 million children in the U.S. have a hearing loss; 1.3 million of them are under the age of three.

Hearing loss affects 38 million people in the United States. Hearing loss can occur at birth or can develop at any age. There have been many advances in all aspects of hearing health care so that from the youngest infant to the eldest senior citizen, there are new and exciting options available to help. Treatment options vary depending on the degree or type of hearing loss, age of onset and individual lifestyle needs. If you suspect that you or a family member has a hearing loss, the best place to start is with a hearing evaluation by a licensed audiologist.

- See more at: <http://chchearing.org/facts-about-hearing-loss/#sthash.bG86Ms1h.dpuf>

Characteristics

It is useful to know that sound is measured by its loudness or intensity (measured in units called decibels, dB) and its frequency or pitch (measured in units called hertz, Hz). Impairments in hearing can occur in either or both areas, and may exist in only one ear or in both ears. Hearing loss is generally described as slight, mild, moderate, severe, or profound, depending upon how well a person can hear the intensities or frequencies most greatly associated with speech. Generally, only children whose hearing loss is greater than 90 decibels (dB) are considered deaf for the purposes of educational placement.

There are four types of hearing loss. Conductive hearing losses are caused by diseases or obstructions in the outer or middle ear (the conduction pathways for sound to reach the inner ear). Conductive hearing losses usually affect all frequencies of hearing evenly and do not result in severe losses. A person with a conductive hearing loss usually is able to use a hearing aid well or can be helped medically or surgically.

Sensorineural hearing losses result from damage to the delicate sensory hair cells of the inner ear or the nerves which supply it. These hearing losses can range from mild to profound. They often affect the person's ability to hear certain frequencies more than others. Thus, even with amplification to increase the sound level, a person with a sensorineural hearing loss may perceive distorted sounds, sometimes making the successful use of a hearing aid impossible.

A mixed hearing loss refers to a combination of conductive and sensorineural loss and means that a problem occurs in both the outer or middle and the inner ear. A central hearing loss results from damage or impairment to the nerves or nuclei of the central nervous system, either in the pathways to the brain or in the brain itself.

Educational Implications

Hearing loss or deafness does not affect a person's intellectual capacity or ability to learn. However, children who are either hard of hearing or deaf generally require some form of special education services in order to receive an adequate education. Such services may include:

- regular speech, language, and auditory training from a specialist;
- amplification systems;
- services of an interpreter for those students who use sign language;
- favorable seating in the class to facilitate lip reading;
- captioned films/videos;
- assistance of a notetaker, who takes notes for the student with a hearing loss, so that the student can fully attend to instruction;
- instruction for the teacher and peers in alternate communication methods, such as sign language; and counseling.

Children who are hard of hearing will find it much more difficult than children who have normal hearing to learn vocabulary, grammar, word order, idiomatic expressions, and other aspects of verbal communication. For children who are deaf or have severe hearing losses, early, consistent, and conscious use of visible communication modes (such as sign language, fingerspelling, and Cued Speech) and/or amplification and aural/oral training can help reduce this language delay. By age four or five, most children who are deaf are enrolled in school on a full-day basis and do special work on communication and language development. It is important for teachers and audiologists to work together to teach the child to use his or her residual hearing to the maximum extent possible, even if the preferred means of communication is manual. Since the great majority of deaf children (over 90%) are born to hearing parents, programs should provide instruction for parents on implications of deafness within the family.

People with hearing loss use oral or manual means of communication or a combination of the two. Oral communication includes speech, lip reading and the use of residual hearing. Manual communication involves signs and fingerspelling. Total Communication, as a method of instruction, is a combination of the oral method plus signing and fingerspelling.

Individuals with hearing loss, including those who are deaf, now have many helpful devices available to them. Text telephones (known as TTs, TTYs, or TDDs) enable persons to type phone messages over the telephone network. The Telecommunications Relay Service (TRS), now required by law, makes it possible for TT users to communicate with virtually anyone (and vice versa) via telephone. Dial 711 to access all TRSs anywhere in the United States. The relay service is free.

Organizations

Alexander Graham Bell Association for the Deaf and Hard of Hearing

3417 Volta Place, NW
Washington, DC 20007
202.337.5220 (V); 202.337.5221 (TTY)
E-mail: info@agbell.org
Web: www.agbell.org

American Society for Deaf Children

P.O. Box 3355
Gettysburg, PA 17325
800.942.2732 (V/TTY); 717.334.7922 (V/TTY)
E-mail: ASDC1@aol.com
Web: www.deafchildren.org

American Speech-Language Hearing Association

10801 Rockville Pike
Rockville, MD 20852
301.897.5700 (V/TTY); 800.638.8255 (V/TTY)
Web: www.asha.org

Laurent Clerc National Deaf Education Center

KDES PAS-6, Gallaudet University
800 Florida Avenue N.E.
Washington, DC 20002-3695
202.651.5051 (V/TTY)
E-mail: Clearinghouse.InfoToGo@gallaudet.edu
Web: <http://clerccenter.gallaudet.edu/InfoToGo/index.html>

National Institute on Deafness and Other Communication Disorders Information

Clearinghouse
1 Communication Avenue
Bethesda, MD 20892-3456
800.241.1044 (V); 800.241.1055 (TTY)
E-mail: nidcdinfo@nidcd.nih.gov
Web: www.nidcd.nih.gov/

Self Help for Hard of Hearing People (SHHH)

7910 Woodmont Avenue, Suite 1200
Bethesda, MD 20814
301.657-2248 (V); 301.657.2249 (TTY)
E-mail: info@hearingloss.org
Web: www.hearingloss.org