

hard of hearing in some situations. It is important to remember that hearing aids have limitations. They are unable to make a person hear perfectly. The most common train of thought is to use any residual hearing that the child may have to help develop language. Hearing aids amplify all the noises in the environment as well as speech. This makes it difficult to discriminate among speech sounds. Hearing aids, combined with speech reading and/or sign language, are invaluable for many children with hearing impairments.

*Children and youth with disabilities have the right to a free appropriate public education.  
IDEA 2004*

## RESOURCES AVAILABLE

**Office of Deaf & Hard of Hearing Services**  
Department of Social & Health Services  
14<sup>th</sup> & Jefferson; Olympia, WA 98504-5300  
360-902-8000 (v); 360-753-0699 (tty)  
Website: [www.dshs.wa.gov/hrsa/odhh/](http://www.dshs.wa.gov/hrsa/odhh/)

**Hearing Loss Association of WA**  
PO Box 4025  
Kent, WA 98089-0525  
Email: [pallen@wasa-shhh.org](mailto:pallen@wasa-shhh.org)  
360-871-0997  
Website: [www.hearingloss-wa.org](http://www.hearingloss-wa.org)

**Alexander Graham Bell Association for the Deaf & Hard of Hearing**  
202-337-5220 (v)  
202-337-5221 (tty)  
Website: [www.agbell.org](http://www.agbell.org)

**American Society for Deaf Children**  
1-800-942-ASDC (2732) (v/tty)  
Website: [www.deafchildren.org](http://www.deafchildren.org)

**Beginnings for Parents of Children who are Deaf or Hard of Hearing**  
919-8502746 (v/tty)  
Website: [www.ncbegin.org](http://www.ncbegin.org)

**John Tracy Clinic**  
1-800-522-4582 (voice)  
213-747-2924 (tty)  
Website: <http://www.jtc.org/>

**National Cued Speech Association**  
1-800-459-3529 (v/tty)  
Website: [www.cuedspeech.org](http://www.cuedspeech.org)

**Parent Training and Information (PTI) Offices are located throughout the State.**

**For the office closest to you,  
call our main office toll-free  
at  
800-572-7368 (v/tty)**

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## **Parent Training and Information Program**

### **Tips for Parents of Children with Hearing Impairment**

**Statewide Parent Training and Information Center**  
6316 So. 12<sup>th</sup> St.  
Tacoma, WA 98465  
(253) 565-2266 (v/tty)  
1-800-5-PARENT (v/tty)  
Fax: (253) 566-8052  
E-mail: [pave@wapave.org](mailto:pave@wapave.org)  
Website: [www.wapave.org](http://www.wapave.org)

**Third Decade of Service**

## What is Hearing Impairment?

There are two primary terms used to describe people with hearing impairments. A person, who is deaf, has a hearing loss so great that he or she cannot hear what is being said, even with a hearing aid. A person who is hard of hearing may be able to hear much of what is being said with the use of a hearing aid. There are two kinds of hearing impairments:

(1) Conductive hearing loss caused by a problem in the outer or middle ear that reduces the intensity or loudness of sound. Medication, surgery or hearing aids can often treat this type of hearing loss. (2) Nerve or sensor neural hearing loss is a result of damage to the auditory nerve itself that carries impulses to the brain. In the past, nerve hearing loss has not been treatable medically or surgically, but a surgical procedure called a cochlear implant may provide sound perception for some people. Individuals with nerve loss may benefit enormously from hearing aids and often can use their residual hearing. Depending on the degree of loss the hearing impairment is classified as: (a) mild, (b) moderate, and (c) severe to profound.

Some people are born deaf, while others lose their hearing later in life. A child who has a congenital hearing loss is born deaf or hard of hearing. A congenital loss has the most serious effect on the child's language skills, because in the first years of life the child learns to talk by listening to others. There are three main causes of deafness in infants: genetic reasons, disease, or an injury.

### School Programs

Deafness itself does not affect a person's intellect or ability to learn. Children, who are deaf, do generally

require some form of special supports to gain an adequate education. Early, consistent and conscious use of visible communication modes (such as sign language, finger spelling, and cued speech) and/or amplification and aural/oral training can help reduce this language delay. Many deaf children begin their education program between the ages of one to three. Most of these programs include heavy parental involvement. Check with the special education department in your school district to find out what is available. Since the great majority of children who are deaf are born to hearing parents, some programs provide instruction for parents about deafness in the family. By age four or five, most deaf children enroll in school on a full-day basis. Approximately one-third of school age children who are deaf attend private or public residential schools. Two-thirds attend day programs in schools for the deaf or special day classes located in regular public schools, or are mainstreamed into regular school programs. Some mainstreamed children who are deaf do most or all of their school works in regular classes, occasionally with the help of an interpreter, while others are mainstreamed for special activities or for one or two classes.

### What are the means of communication?

In the United States, people who have hearing impairments use a variety of methods of communication. Listed below in alphabetical order are communication approaches. The style of approach must be individualized to meet the child's needs. School districts tend to adopt either oral or total communication educational systems.

- *American Sign Language (ASL)* is a manual language. It is not spoken English in sign form. This approach is quite natural in families where both parents and children are deaf.
- *Auditory/Verbal* concentrates on the development of listening and speaking skills. The child is encouraged to

learn to process and acquire language through the maximum use of residual hearing with the use of hearing aids.

- *Cued Speech* is designed to clarify lip-reading by using simple hand movements (cues) as supplements to the mouth movements of speech.
- *Oral* approach is similar to the Auditory/verbal approach in that it stresses the use of residual hearing, speech, and language development. It places a strong emphasis upon visual clues from the face and body.
- *A variety of forms of Signed English* are frequently used in schools to teach English grammar and syntax and by parents in communicating with young children.
- *Total Communication* involves exposing the child to a variety of communication techniques that include sign language, auditory training, speech, speech reading, finger spelling, and gesture.

**REMEMBER:** Whatever approach parents choose for their child, they should be actively involved in the child's Individualized Education Program (IEP)/ Individual Family Service Plan (IFSP) and all the decisions regarding the program and placement.

### Should my child be mainstreamed?

This is an individual decision that must be based on the needs of the child. When a child is mainstreamed, the program must include needed related services and regular monitoring.

### Some considerations when looking at a program for your child who has hearing impairments:

Education personnel should have specialized knowledge and skills needed to serve children who are deaf

and hard of hearing. They should also know how to work with families.

- Program and placement options should consider all the factors unique to the student to ensure that the placement is appropriate and least restrictive. The students and parents' preferences and choices should be considered in all aspects of program options, placement, and IEP/IFSP development. Remember placement decisions are not final; decisions can be changed later.
- The program should stress the importance of social and emotional development of the student.
- The program should provide access to other related services, e.g., transportation, parent counseling, physiological services, assistive technology, and physical and occupational therapy. The related service staff members should also be qualified to work with students who are deaf or hard of hearing.
- Visit and observe each program in person and meet with parents who have children enrolled in the program. If possible, meet with graduates of the program.
- Students should be placed with other students of the same age and ability. They need other hearing impaired students as well as hearing students with whom to work and play.

### Should my child wear a hearing aid?

Parents often ask this question when they find out their child has a hearing loss. This decision should be based on the individual needs of the child. Modern hearing aids are a marvelous help for many individuals. They permit hard of hearing people to approach normal hearing in many situations. They enable other people, who would otherwise be deaf, to become functionally