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Association for the Deaf & Hard of Hearing

DEAF & HARD OF HEARING **FIRST STEPS GUIDE**

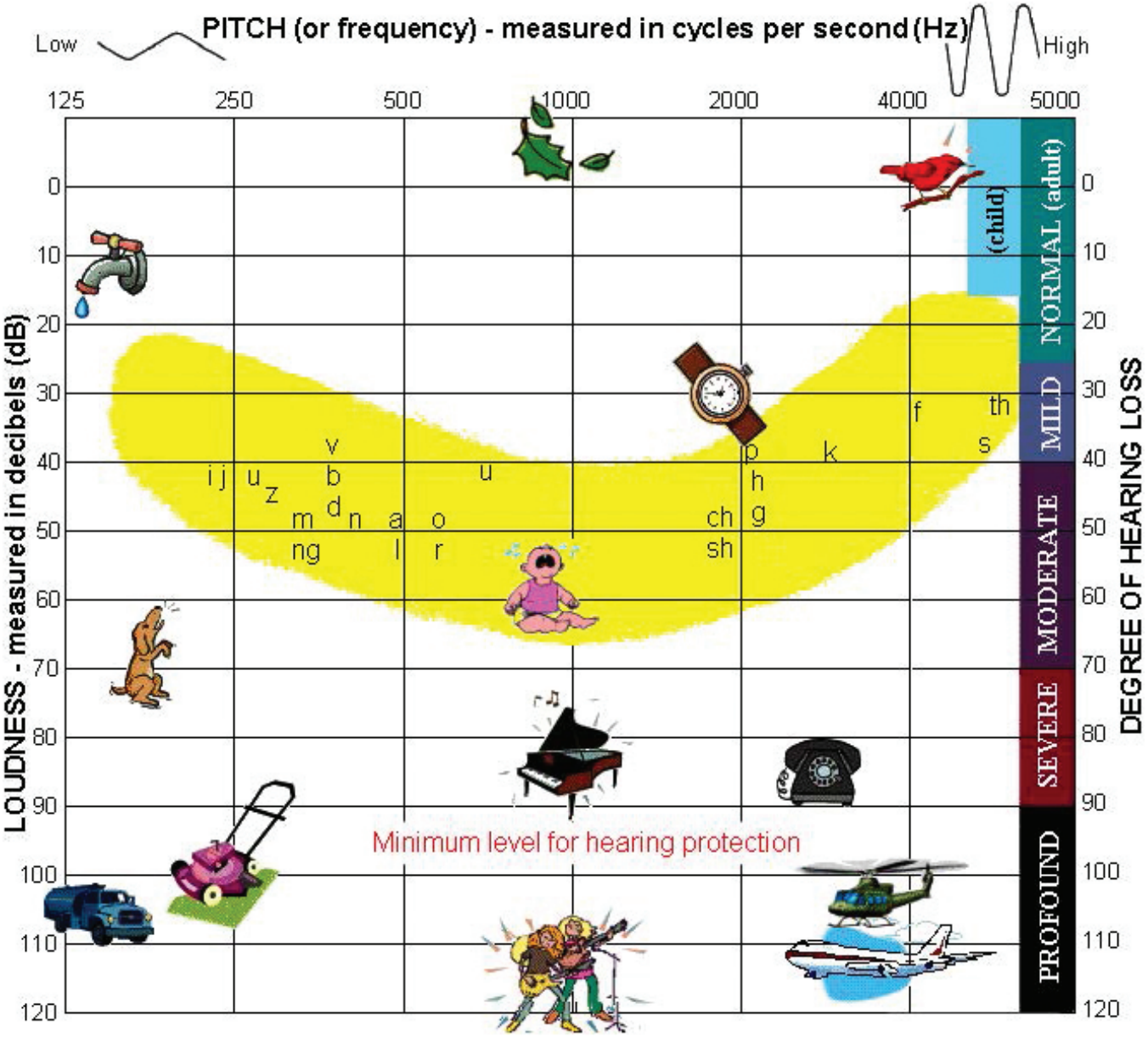
If you have just learned that your child may be deaf or hard of hearing, you may be feeling overwhelmed and confused. We know firsthand what you are going through, and we are here to provide you with support and guidance every step of the way.

First, you should be confident that your child can thrive! Children with hearing loss can excel at sports, music, and school. They have successful careers and families of their own, and live a life without limits. Your unconditional love and support is the most important factor in your child's success.

If you are hoping to use Listening and Spoken Language with your child, this guide will walk you through the key first steps to get started down that path. If you have any questions, feel free to **reach out to us** or to contact your AG Bell chapter to connect with a family local to you.

Confirm your child's hearing loss and determine level of severity.

Hearing loss can impact your child whether it is in one ear or both. Loss can range from slight to mild, to moderate, to severe, and to profound. The chart below visualizes common sounds and the hearing range at which they can be detected.



Build your team.

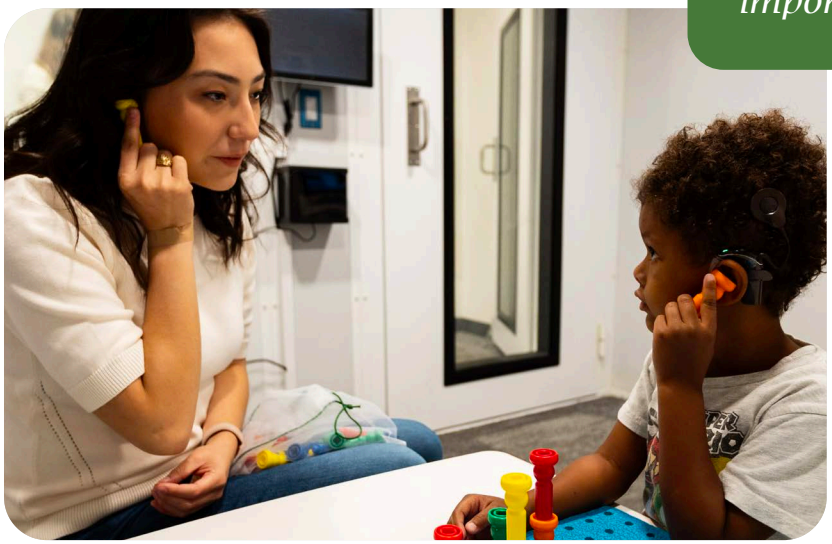
The first professional on your team is a pediatric audiologist who will diagnose both the type and degree of hearing loss. They will discuss what kind of hearing technology (hearing aids, cochlear implants, etc) will best benefit your child. They will also start talking with you about language learning options for your child.

Making connections to other families with children who are deaf or hard of hearing is extremely helpful. You've already taken a great first step by joining AG Bell. Reaching out to your local AG Bell chapter can help you to connect, and there may also be schools or community groups for people who are deaf or hard of hearing in your area.

If you choose to use Listening and Spoken Language with your child, you should seek out a professional who provides early intervention listening and spoken language services. That person can be a teacher of the deaf, speech-language pathologist and/or audiologist who is specially trained to help you help your child develop Listening and Spoken Language.

Professionals who are certified in supporting families and children to develop Listening and Spoken Language are known as Listening and Spoken Language Specialists (LSLS) and are designated as either LSLS Certified Auditory-Verbal Educators (LSLS Cert AVEd) or LSLS Certified Auditory-Verbal Therapists (LSLS Cert. AVT). These professionals support and coach you in your role as your child's most important teacher of Listening and Spoken Language skills.

Listening and Spoken Language Specialists support and coach you in your role as your child's most important teacher of language.



Search here for a LSLS near you.

STEP → 03

Get connected to sound.

Next, it is important to make sure your child's brain receives consistent access to sound, especially speech. Infants need appropriate amplification as soon as possible. Every day counts. Amplification should be fit on infants and children immediately following identification of hearing loss. For babies who are born with hearing loss, amplification should be fit, ideally, before 3 months of age.

The type of technology your child needs will depend on the type and severity of hearing loss. It is very important that you speak to your audiologist about the options available. Regardless of what technology your family chooses, the goal will be to help your child make the best possible use of their hearing through learning to listen.

HEARING AIDS

There is a critical period in which children learn language, from birth to age 3 1/2. Fitting your baby with hearing aids right away must be a priority if your child's brain is to have access to sound and maximize that window of opportunity to acquire language. Infants as young 2 weeks old can be fitted with hearing aids.

Children with mild to moderately-severe hearing loss will benefit from hearing aids which will enable them to hear many sounds, including environmental sounds (a dog barking or a rattle shaking) and speech. Hearing aids work by boosting the intensity (or loudness) level of sounds at different frequencies or pitches.

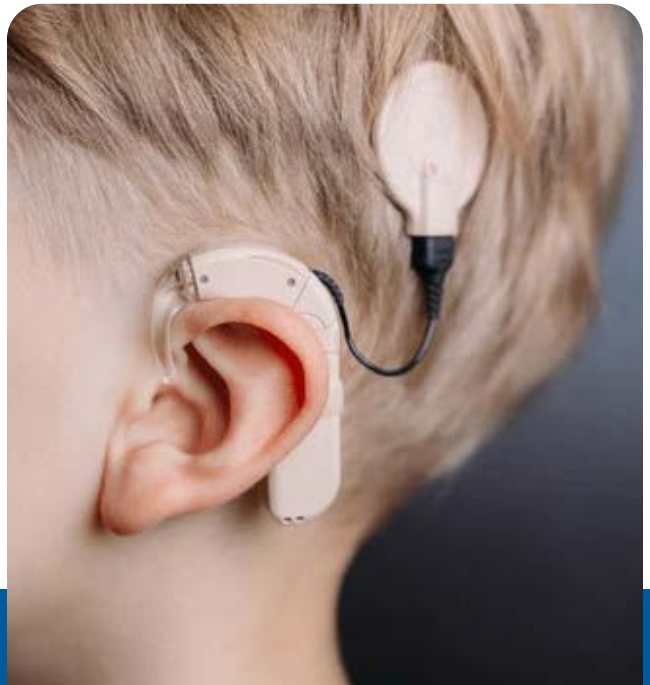
It is important to note that hearing aids do not correct hearing the same way that glasses correct vision. It can take time for your child to understand and distinguish the sounds they are hearing. Regular sessions with a Listening and Spoken Language Specialist (LSLS) will help your child's brain learn the meaning of sounds around them and start to learn language and so much more.

COCHLEAR IMPLANTS

Cochlear implants are used to help individuals who have moderately severe to profound hearing loss and who do not gain sufficient benefit from hearing aids.

When hearing is functioning normally, the inner ear converts sound waves into electrical impulses, which are sent to the brain and recognized as sound. A cochlear implant works in a similar manner—when surgically implanted behind the ear and in the cochlea, the electronic device is able to bypass damaged hearing cells and stimulate the auditory nerve to restore partial hearing. Cochlear implants provide enhanced sound detection and a greater potential for understanding speech.

If your child receives little to no benefit from hearing aids, he or she may be a candidate for one or two cochlear implants.



Start listening and talking!

The most important step after providing your child's brain with access to sound through hearing technology is to begin Listening and Spoken Language therapy. Although your child is hearing sound, he or she still needs to learn to understand the sounds by learning to listen and then translate those sounds into spoken language. This type of therapy will help your child learn how to hear and speak.

Family-centered early intervention services promoting the use of Listening and Spoken Language should start as early as possible, and no later than 6 months of age. If your child's hearing loss is found at a later age, the priorities to focus on include the immediate fitting of hearing technology and immediate enrollment into early intervention within 1 month of diagnosis.

As your child's parent, you can expect to actively participate in your child's Listening and Spoken Language learning process. Through parent guidance, coaching and demonstration, you will become the primary facilitators of your child's Listening and Spoken Language development. It is important that you establish an environment at home that facilitates Listening and Spoken Language. This includes speaking to your child even when his/her eyes are focused away from you, ensuring your child's hearing technology is working properly, practicing a variety of listening activities with your child as learned during therapy sessions, and including other family members in the therapy at home.

With time, you'll will see that your child can have access to a full range of academic, social and occupational choices—they will live a life without limits!

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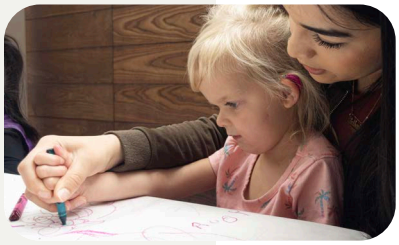
SUMMARY OF FIRST STEPS

Early identification of the child's type and degree of hearing loss. There are now very simple tests that can be performed with infants to identify hearing loss. Tests can be accomplished on tiny infants without their cooperation. Once a child can cooperate more testing can be done. These tests do not hurt and the child doesn't have to actively participate.

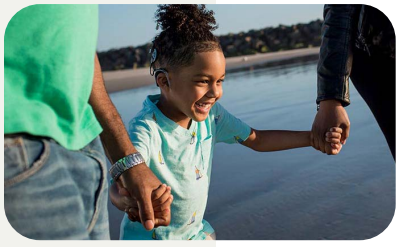
Fitting of hearing aids as soon as possible after the hearing loss has been identified. Ask if your child's audiologist has a hearing aid loaner program or whether a statewide hearing aid loaner bank exists.

Use of amplification 100% of your child's waking hours within two to three weeks of the initial fitting. Remember, hearing is something we do all the time and it is critical for your baby's learning brain to have constant, meaningful access to sound.

Observation of your child's response to sound. You will work with your team to determine how well your child is learning through hearing. These observations will help determine whether the hearing aids need adjustments, or if a cochlear implant should be considered.



Enrollment in early intervention with a professional who specializes in facilitating listening and spoken language in infants and young children. To learn more about early intervention services in your local area, contact the **National Center for Hearing Assessment and Management** and click on States.

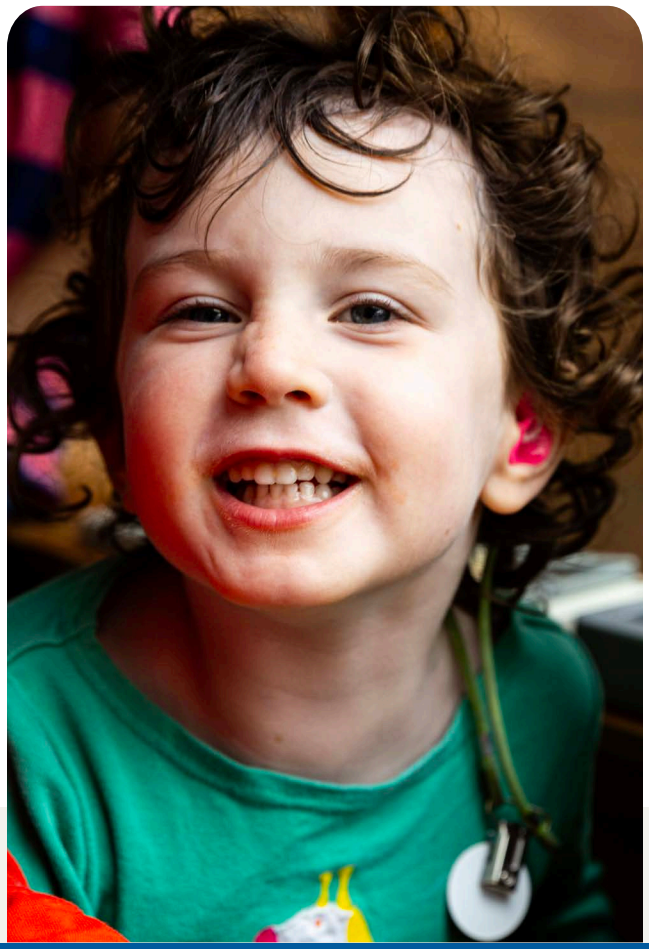


Strong parent support and attention to your child's hearing, speech, language and academic needs across childhood—with your love and support, your child will thrive!

AG Bell offers many ways to connect to other parents, to ask questions, and offer support.

AG Bell's Parent Support Line provides support when you need it. Contact Marti Bleidt, an early intervention specialist and parent of a deaf child, at **202-204-4680** or **parentsupportline@agbell.org** to have your questions answered and concerns heard.

Your local chapter can also help. Visit us at **https://agbell.org/getting-started/** for details.



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