



# How To Manage “Deaf+” Children

Rachel Reyes, M.Ed, LSLS Cert. AVT

- Approximately 40% of children with hearing loss have some sort of additional disability or condition.
- Disorders that often co-occur with hearing loss vary widely.
  - Sensory problems- may have poor ability to process or use sound even with hearing technologies, visual impairment, etc
  - Motor disorders – may affect the ability to move the muscles of the mouth that are necessary for the production of intelligible speech
- A child can have any combination of sensory and motor disorders that may affect the ability to learn to understand spoken language as well as produce it clearly

# AVT for Hearing Impaired Kids with Speech Disorders

- Disorders of speech production include:
  - Apraxia
  - Dysarthria
  - Cleft palate
  - Phonological and articulation disorders
  - Dysfunction of the vocal cords
  - Stuttering
- Degree may vary from mild to very severe

# AVT for Hearing Impaired Kids with Speech Disorders

- Some children who have a mild speech disorder or delay may achieve intelligible speech and the AV therapist may be able to meet their special speech needs. **Example: Zia**
- If a child has a severe speech disorder but is able to learn to understand and retain spoken language, the AV therapist may want to provide services to develop the child's auditory functions. However, if the child is not capable of producing intelligible speech, other forms of expressive communication can be used. A specialist in augmentative and alternative communication (AAC) systems and devices can be consulted for this purpose. **Example: Shaun**

# AVT for Hearing Impaired Kids with Language Disorders

- Children with hearing loss can also have a variety of disorders that influence their ability to learn and use language
- There are numerous conditions that affect a child's ability to comprehend, retain and recall language that is heard.
  - Learning disability
  - Poor short- and long-term memory
  - Sensory integration dysfunction
  - Cognitive delay
  - Attention deficit
  - Hyperactivity
  - Autism

# AVT for Hearing Impaired Kids with Language Disorders

- Severity of the language disorder may range from mild to very severe
- Some children with mild or moderate language disorders may take more time to learn to understand and use language, may need therapy and support services throughout their school years and may need academic tutoring to help them in school. Yet with AV therapy, they may be able to use hearing and speech as their primary mode of communication
- As for children with language disorder that is so severe....

# Assessing a Child with Multiple Disabilities

- They may not be able to sit through a standardized test
- Instead, use criterion-referenced tests and dynamic assessments
- Fundamental question to ask: ***do the child's challenges prevent verbal language comprehension and spoken language development in children with normal hearing?***
  - If so, then the child may make little or no progress in AV therapy
  - If they cannot learn language with normal hearing, the hearing impairment only makes the task more difficult. Example: ***autism***

# Guidelines When Working with Children with ASD

- Use a visual schedule and a predictable routine for each session may be helpful to children who thrive on consistency.
- Spend extra time working on pragmatics and the social aspects of language that may come more naturally for children who are “just deaf.”
- For children who are more severely autistic, work with the family to identify functional language targets that will have the greatest effect over the greatest number of situations (for example, for some of these children, a small “core vocabulary” or words they use consistently may be more useful and attainable than learning academic curriculum words).



# Guidelines When Working with Children with ASD

- It's always a good idea to maintain good relationships and frequent communication with other members of a child's team. Even for a "just deaf" child, this includes a lot of professionals. For a child with autism, the team can be huge! Be an active participant in the child's care team and work to integrate care whenever possible. Occupational Therapists, in particular, may have good suggestions about the best positioning for the child or how to incorporate sensory play in a way that does not trigger any unwanted behaviors.
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- Be attuned to the unique needs and stresses of raising a child with multiple disabilities. Help to connect parents with resources in the community (respite care, counseling, social work, etc.).

# Guidelines When Working with Children with ASD

- Some children with ASDs are served primarily by special educators, not teachers of the deaf. As the LSL professional on the team, it is your job to be sure that the “listening piece” of the child’s puzzle doesn’t get lost in the shuffle. Even in a general special education classroom, attention can be paid to classroom acoustics, assistive listening devices, and opportunities to create a language-rich environment.

# REFERENCES

- Daniels, L. (2001). FAQ 14: Is the Auditory-Verbal Approach suitable for children with other delays and disorders? In W. Estabrooks (Ed.), *50 Frequently Asked Questions About Auditory-Verbal Therapy*. Toronto, Ontario, Canada: Learning to Listen Foundation
- Rosenzweig, E. (2013). *Autism and Hearing Loss*. [www.auditoryverbaltherapy.net](http://www.auditoryverbaltherapy.net)