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Hearing Loss in Young Children Hearing Helps Develop Speech and Language

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Did you know that hearing loss affects two in every 100 children under the age of 18? With an early diagnosis and modern technology, audiologists can treat most hearing losses effectively. To maximize a child's hearing, the child must get an *early* diagnosis of hearing loss, an *early* fitting of hearing aids, and an *early* start on special education programs. Your child needs these events to occur in a timely manner in order to have the best chances for successful speech and language development.

The cause of hearing loss in children can be **congenital** (present at birth), **acquired** (occurring any time after birth), or **transient** (middle ear infections or trauma).

Causes of congenital hearing loss:



- Infections during pregnancy
- Toxic medications during pregnancy
- Serious complications at birth
- Disorder of the brain or nervous system
- Genetic syndromes
- Family history of hearing loss

Causes of acquired hearing loss:



- Untreated middle-ear infections
- Other infections
- Torn or ruptured eardrum
- Excessive loud noises
- Diseases that affect the ear
- Head injury
- Toxic medications

Causes of transient hearing loss

Frequent or untreated middle ear infections (otitis media) cause transient hearing loss. Transient (temporary) hearing loss in children is also detrimental to speech and language development. By the age of three, at least 75 percent of children have had at least one ear infection. Middle ear infections are very common in early childhood because of the 'almost horizontal' position of the Eustachian tube. The Eustachian tube equalizes air pressure between the middle ear and the nasopharynx (the nasal cavity that opens at the back of the throat). Because of its small size and horizontal position during childhood development, it is very susceptible to blockage by fluids or large adenoids.

Transient hearing loss sometimes resolves itself. Many children with transient hearing loss can have their hearing restored through medical treatment or minor surgery. However, frequent or untreated middle ear infections, untreated earwax buildup, lesions, or diseases of the eardrum (auditory nerve) can cause extensive damage over time to the delicate bones of the middle ear, creating permanent hearing loss.



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Birth to Age 4

Hospitals perform hearing screenings and tests on infants shortly after delivery, which will assure a call for early intervention in the event a baby exhibits any signs of hearing loss. Even if an infant presents no signs of hearing loss, a few months later, parents may sense their child has a hearing problem.

The most critical period for speech and language development is birth – 4 years, so it is important to recognize signs of hearing loss as early as possible. As parents, you may suddenly realize something isn't quite right with your child's speech and language. If you ever question anything about your child's language development, get the child's hearing tested as soon as you can. It's always better to be safe than sorry. **Remember, an acquired hearing loss can occur at any time.**



Potential Hearing Loss Checklist for Preschoolers and Older Students

The checklist of signs below will not confirm that your child has a hearing problem, but any sign could be a strong indicator of one. If you answer "yes" to any of the questions below, or if you suspect your child may have difficulty hearing, contact your pediatrician or family doctor. Let them guide you in scheduling an evaluation with an experienced audiologist.



Does your child:

- ☐ Use an excessively loud volume for TV and other devices?
- ☐ Respond to questions with answers that are inappropriate for what you asked?
- ☐ Not answer when you call?
- ☐ Watch others to imitate what they're doing?
- ☐ Present articulation or speech/language delays?
- ☐ Have academic problems overall?
- ☐ Complain of headaches, earaches, or head noises?
- ☐ Have difficulty understanding what others are saying?
- ☐ Watch your lips when you're speaking to him/her?
- ☐ Speak differently than others his or her age?



Audiologists offer a broad range of testing and evaluation for infants, children, and adolescents in order to assess whether the ear is conducting sounds efficiently. They can assess any damage to the inner ear or nerve pathways, as well as perform tests to see if the brain is processing what your child is hearing.



After testing, the audiologist will discuss your child's diagnosis with you, along with recommendations for treatment. If your child has a hearing loss, the audiologist may refer you to an Ear, Nose & Throat specialist (Otolaryngologist). Depending on the nature of the disorder, a hearing aid or other amplification device may be necessary. The audiologist will guide you and your child through every step of the selection, fitting, use, and care of the device. For a child diagnosed with severe hearing loss, parents should ask for or expect referrals to other resources, including regional centers specializing in education and speech pathology as well as habilitation/rehabilitation.

Resources:

Mroz, Mandy. Healthy Hearing. 2017. Hearing loss in children. Retrieved online May 2017 from <http://www.healthyhearing.com/help/hearing-loss/children>

Sutter Health. 2015. Hearing loss in children. Retrieved online May 2017 from <http://www.pamf.org/hearinghealth/facts/children.html>

WebMd. 2017. Help for parents of children with hearing loss. Retrieved online May 2017 from <http://www.webmd.com/parenting/help-for-parents-hearing-impaired-children#1>

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