

Deafness & Hearing Loss

◆ Definition ◆

The Individuals with Disabilities Education Act (IDEA), formerly 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 ◆

Hearing loss and deafness affect individuals of all ages and may occur at any time from infancy through old age. The U.S. Department of Education (2002) reports that during the 2000-2001 school year, 70,767 students aged 6 to 21 (or 1.3% of all students with disabilities) received special education services under the category of “hearing impairment.” However, the number of children with hearing loss and deaf-



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ness is undoubtedly higher, since many of these students may have other disabilities as well and may be served under other categories.

✧ 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.



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✧ 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.

Other Helpful Things to Know

These NICHCY publications talk about topics important to parents of a child with a disability.

Parenting a Child with Special Needs

Your Child's Evaluation

Parent to Parent Support

Questions Often Asked by Parents About Special Education Services

Developing Your Child's IEP

All are available in English and in Spanish—on our Web site or by contacting us.

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◇ Organizations ◇

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) 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.

◇ Resources ◇

Luterman, D.M. (2002). *When your child is deaf: A guide for parents* (2nd ed.). Parkton, MD: York Press. (Phone: 800.962.2763. Web: www.yorkpress.com/index.html)

Medwid, D.J., & Weston, D.C. (1995). *Kid-friendly parenting with deaf and hard of hearing children: A treasury of fun activities toward better behavior*. Washington, DC: Gallaudet University Press. (Phone: 800.621.2736; 888.630.9347 (V/TTY). Web: <http://gupress.gallaudet.edu>)

Ogden, P.W. (1996). *The silent garden: Raising your deaf child* (Rev. ed.). Washington, DC: Gallaudet University Press. (See contact information above.)

Schwartz, S. (Ed.). (1996). *Choices in deafness: A parents' guide to communication options* (2nd ed.). Bethesda, MD: Woodbine House. (Phone: 800.843.7323. Web: www.woodbinehouse.com)

So your child has a hearing loss: Next steps for parents (n.d.). (Available online at: www.agbell.org/information/brochures_parent_so.cfm)

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for the Deaf and Hard of Hearing
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American Society for Deaf Children
P.O. Box 3355, Gettysburg, PA 17325
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www.deafchildren.org

American Speech-Language-Hearing Association
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301.897.5700 (V/TTY)
800.638.8255 (V/TTY)
www.asha.org

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<http://clerccenter.gallaudet.edu/InfoToGo>

National Institute on Deafness and Other
Communication Disorders Information
Clearinghouse
1 Communication Avenue
Bethesda, MD 20892-3456
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nidcdinfo@nidcd.nih.gov
www.nidcd.nih.gov/

Self Help for Hard of Hearing People (SHHH)
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www.hearingloss.org

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