Children who are Hard of Hearing: Still Forgotten?

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Children who are "Hard of Hearing"

- Characteristics of children who are HH:
 - Hearing levels in the mild through moderately severe range
 - Use hearing aids rather than CIs
 - Reliant on spoken language for functional communication (Jamieson, 2010)
- Described by Julia Davis as "Our Forgotten Children"



Why Called "Forgotten Children?"

- 1 arestimation of needs
- Any of these true today??
 - - extent of support services & impact
 - Poorly monitored amplification

Background

- 30,000 children < age 6 have mild-to-severe, persistent bilateral hearing loss
- Paucity of research on outcomes of HH children
 - Reflect a belief that HL does not place these children at risk?
- NIDCD Working Group in 2006 identified research gaps & needs
 - Ear & Hearing, 2007

OCHL Study: Aims

- To describe the characteristics of:
 - children and families
 - intervention services
 - factors associated with service variations
- To measure a range of:

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backgrounds

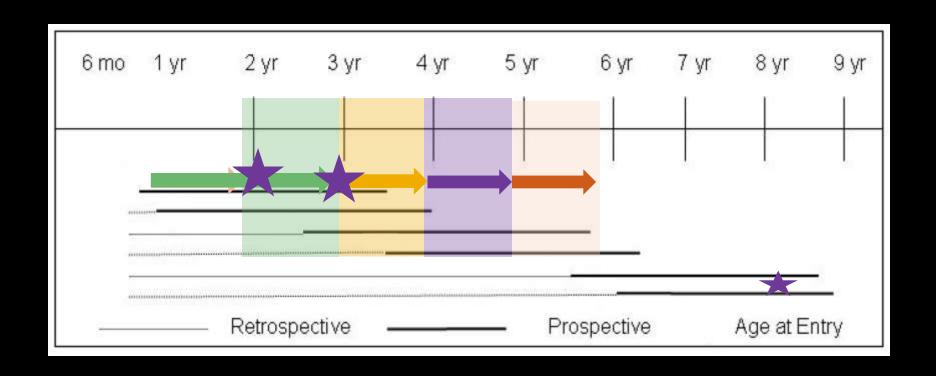
- To explore:
 - how variations in child & family factors & intervention characteristics relate to functional outcomes







Accelerated Longitudinal Design

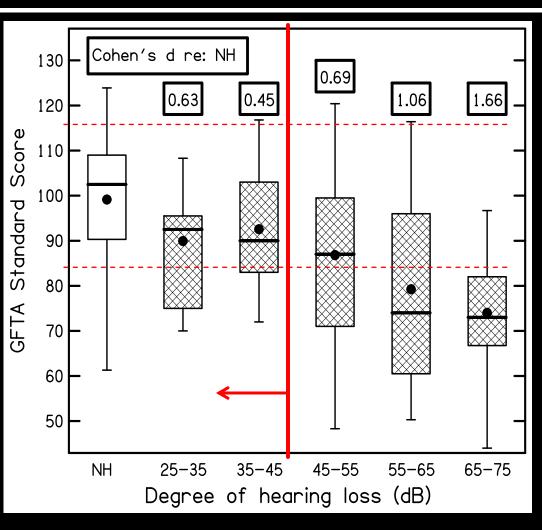


- Each child followed for 3+ years (around birthday)
- Comprehensive battery of child, family, & intervention measures

Sample Description

	нн	NH
Number of subjects	316	115
Hearing (PTA)	25-75 dB HL	< 20 dB HL
Age ranges	o;6 to 6;11 at entry	
From 17 states 76.1% HH children identified through NHS		
Language use	Spoken English in the home	
Additional disabilities	No autism; no major vision, cognitive, or motor disabilities	

Big Picture Findings to Date



Many HH children demonstrate resilience

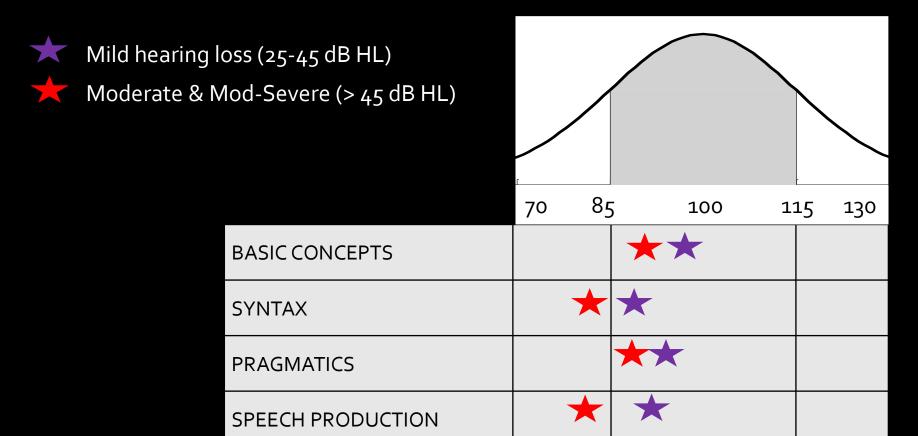
- Some children (25-30%) & some aspects of development are particularly susceptible to effects of HL.
- Strong and systematic effects of degree of loss on speech and language development.
- HL interferes with consistency/quality of access to input.
- ✓ Aspects of language most dependent on the fidelity of the speech signal may be most vulnerable to delays.

Inconsistent Access?

Children with HL experience inconsistent access to linguistic input, due to:

- Periods without amplification
 - Delays in hearing aid fitting
 - Inconsistent hearing aid use
- Limitations of hearing aids
 - Bandwidth
 - Audibility
- Effects of negative environmental acoustics
 - Distance, noise, and reverberation

Profile of Relative Strengths and Vulnerabilities at 3 yrs



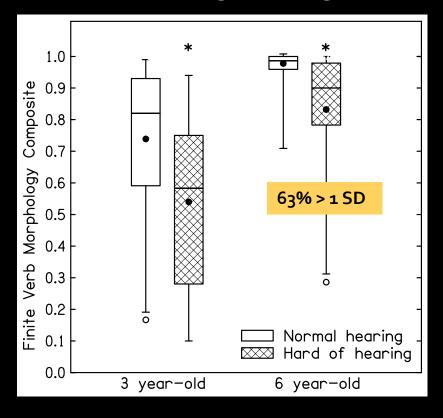
Evidence of Vulnerable Domains

Articulation

3 year 5 year 7 year 130-115-100-GFTA SS 85-70-0 55-40-NH HH NH HH NH HH 125 24 69

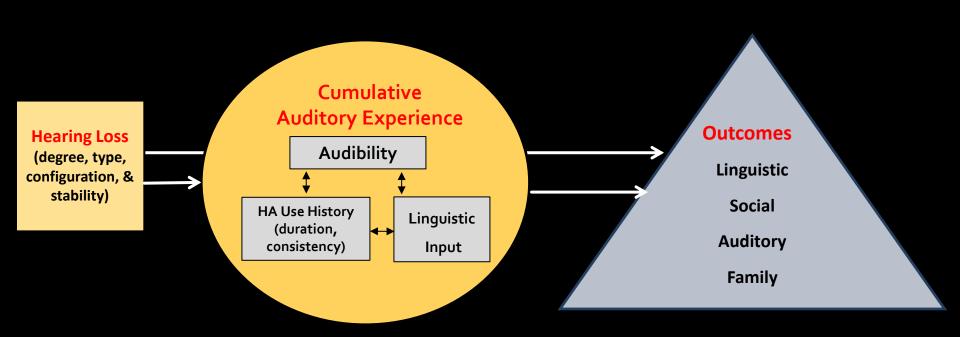
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Use of verb endings (sits, goes, walked)



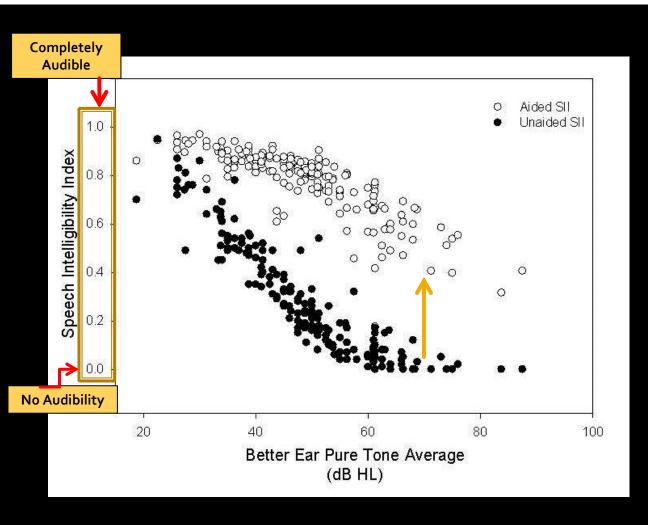
Koehlinger, Owen Van Horne & Moeller, JSLHR, 2013

Emerging Model: Inconsistent Access





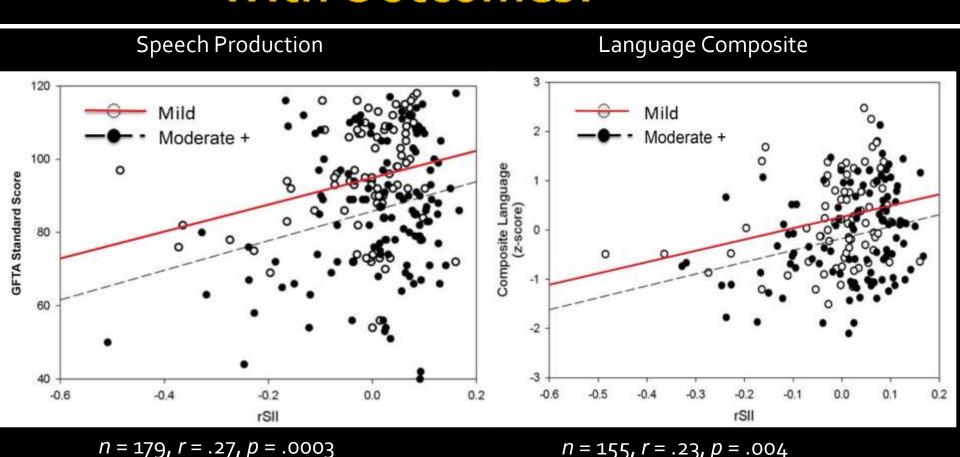
Speech Intelligibility Index (SII)



- Degree to which HA improves audibility is constrained by severity of HL
- Created residual SII (rSII)
 - To test unique contribution of HAs (Aided SII)
 - After controlling for the unaided SII



Is Aided Audibility Associated With Outcomes?



- 1. Audibility provided by HA is significantly associated with speech & language.
- 2. Audibility has similar relationship with outcomes for children with mild and moderate-to-severe HL.



Is Audibility Associated with Grammar Use?

- Spontaneous language samples 51 HH 3 yr olds
- Do hearing-related factors predict use of word endings?
 - BEPTA, SII, 4kHz SL
- Does perceptibility influence accuracy in HH?
 - In NH children, /s/ and /z/ emerge before /lz/
 - Hits, cars > houses, fixes → More audible?



Summary of Results

- Audibility matters
 - 4kHz SL predicts word endings

Audibility in the high frequencies + articulation skills are essential for development of English morphology

se

- Perceptibility influences in HH
 - HH different from NH /Iz/ > /s/ and /z/



Challenges to Consistent HA Use



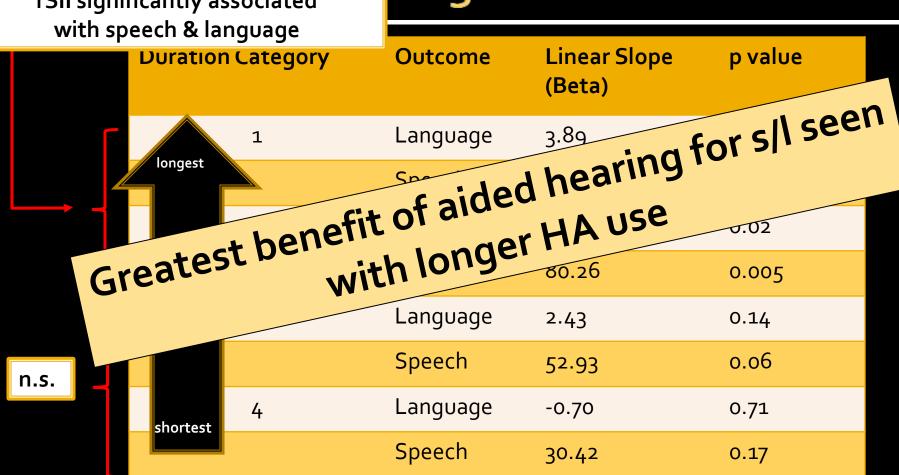
More challenges:

- At young ages (toddlers)
- With mild degrees of hearing loss
- Less educated families
 Strategic counseling?

audibility

Greatest Benefit of Aided Hearing

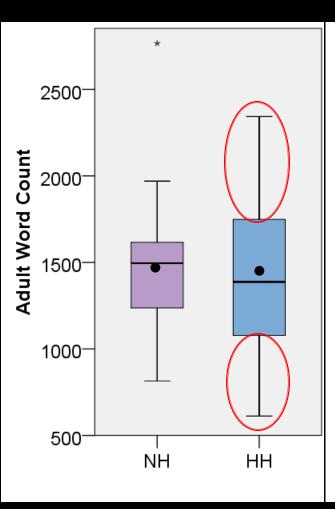


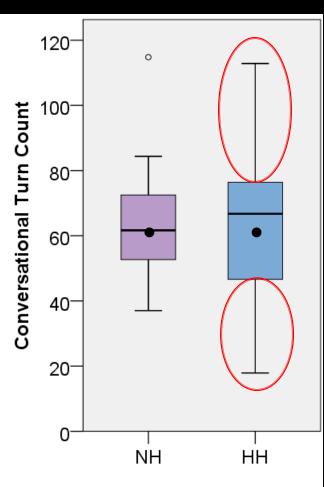


n = 161 (Speech); n = 148 (Language) HH children at 3 and 5 years of age



How Much Input?





M age = 30 months

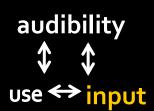
HH n = 38 NH n = 17

No significant differences between groups

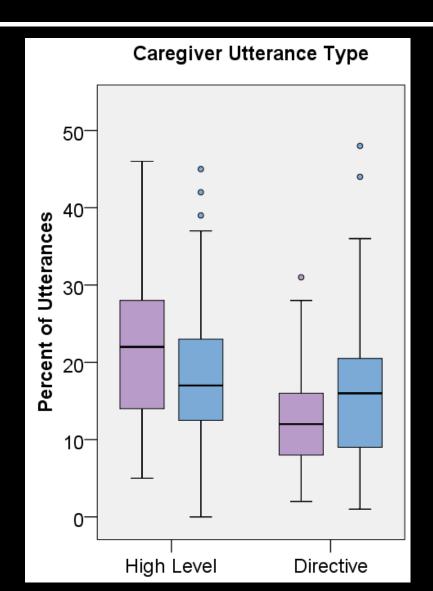
For HH group, more input = better language

Mullen Receptive correlated with AWC (r = 0.44**) and CTC (r = 0.46**)

Ambrose, Van Dam & Moeller, JDSDE, 2012



How Rich is the Input?



Parent-child interaction samples analyzed in 3-year olds

HH group exposed to significantly:

- fewer high-level utterances
- more directive utterances

HH CASL scores significantly correlated with:

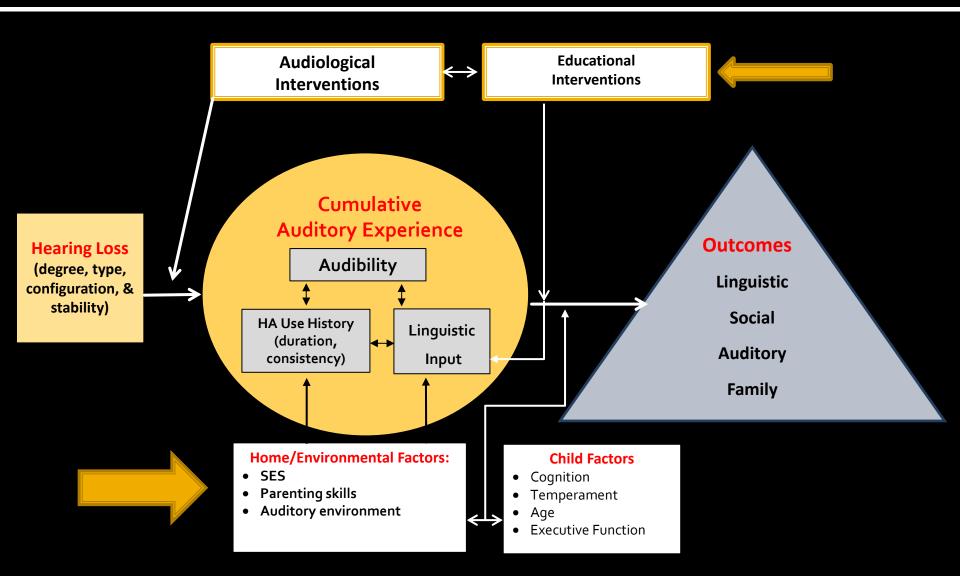
- proportion of high-level utterances (r = 0.57)
- proportion of directives (r = -0.38)

HH group also exposed to:

- less complex utterances
- fewer different words

Ambrose, et al., in preparation

Emerging Model: Inconsistent Access



Protective Factors

What protective factors result in resilience?



Protective Factors: Big Picture

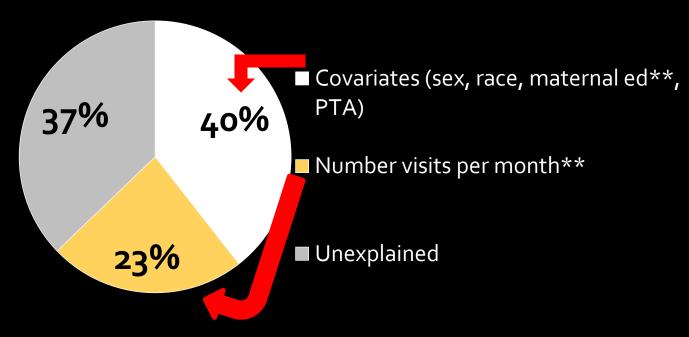
- Milder degree of hearing loss
- Better audibility
- Well-fit amplification
- Longer duration of hearing aid fitting (early fit)



- High quantity and quality of linguistic input
- Provision of timely & consistent early interventions
- More resourced homes
- Stronger cognitive abilities

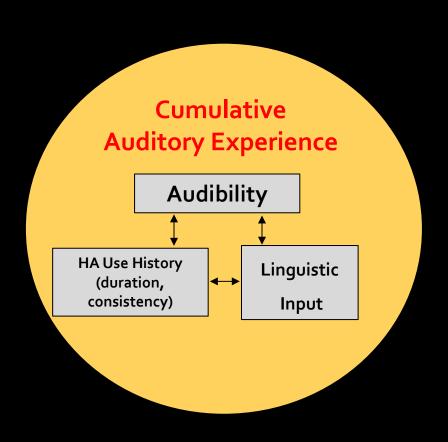
Early Intervention Services

Contribution of number of early intervention visits per month to CASL Scores at 3 years (regression results)



145/155 infants received early intervention

Implications: No Longer Forgotten



Optimize audibility

- Audibility matters
- Benefits observed with longer durations of use
- Promote use consistency
 - Toddlers; mild HL
 - Novel approaches?
- Support families to provide language-rich environments
 - Promotes cumulative auditorylinguistic experience

Acknowledgement: OCHL Project Team



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