

SUPPORTING SOMEONE WITH HEARING LOSS

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PREVALENCE

- 1 in 8 people in the United States (13%, or 30 million) ages 12 or older has hearing loss in both ears, based on standard hearing examinations.
- About 5% of adults ages 45-54 have disabling hearing loss. By 75 years old 55% of adults have a disabling hearing loss.
- It's estimated that between 50 and 80% of people with Down Syndrome have some degree of hearing loss.
- Some studies suggest the overall prevalence of hearing loss among people with ID is much higher than the general population and starts at a younger age.

TYPES OF HEARING LOSS

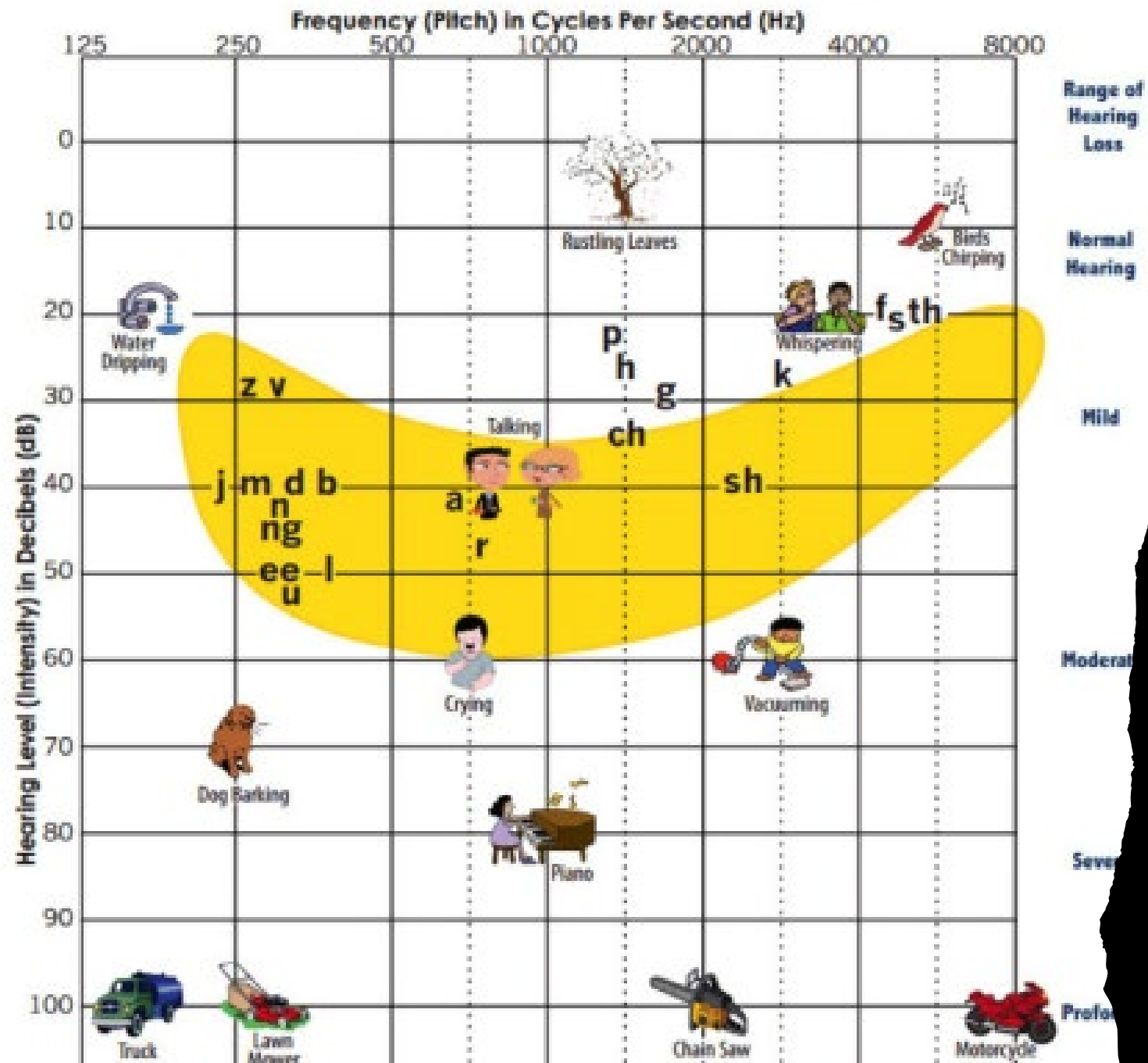
Conductive Hearing Loss

- Some type of obstruction is present in the hearing pathway
- Could be an infection, a growth, or an unusually formed ear canal
- Earwax is a common culprit

Sensorineural Hearing Loss

- Tiny hair cells in the vibrate to help transmit sounds to the brain
- When these cells stop working, hearing is permanently damaged

Audiogram of Familiar Sounds

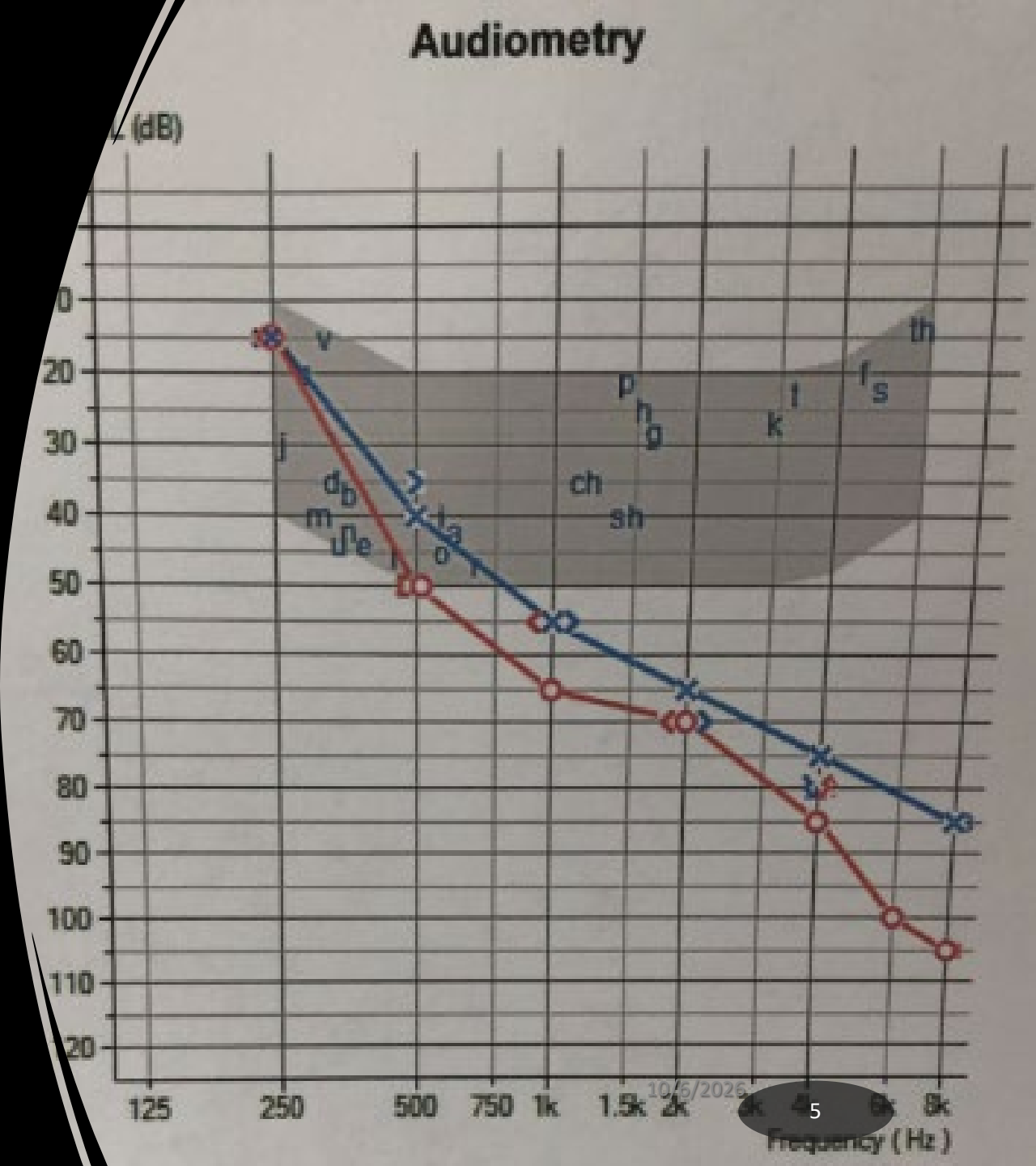


THE SPEECH BANANA

Speech sounds fall roughly between 250 Hz and 6000 Hz.

HIGH FREQUENCY LOSS
EXAMPLE

Degree of hearing loss	Hearing loss range (dB HL)
Normal	-10 to 15
Slight	16 to 25
Mild	26 to 40
Moderate	41 to 55
Moderately severe	56 to 70
Severe	71 to 90
Profound	91+

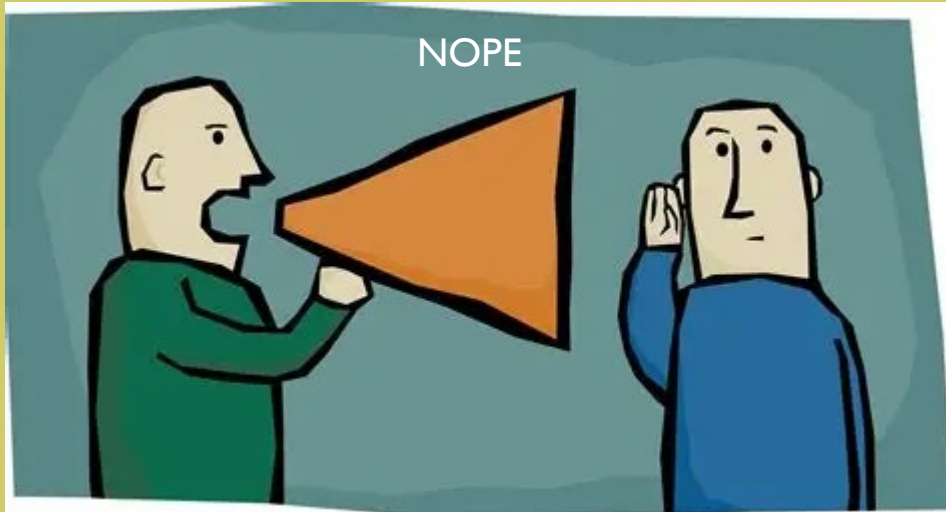




SIGNS OF HEARING LOSS

- Not reacting to sounds
- Hearing sounds that aren't there (tinnitus)
- Not following directions
- Ignoring others
- Increased volume on TV, music, computer
- Avoiding phone use
- Speech changes
- Avoiding social interaction
- Frustration when communicating with others.
- Asking others to repeat themselves

SUPPORTING SOMEONE WITH HEARING LOSS



- Rephrasing is often better than repeating louder (remember the speech banana)
- Provide context – repeat the whole sentence, not just the word you think the person missed
- Face the person you're talking with
- Try not to cover your mouth or talk with your mouth full
- Use visual clues to supplement speech-gestures, signs, age-appropriate pictures
- Offer written information
- Plan ahead to address communication needs especially in loud settings
- Explain the joke!
- Sometimes physical touch is helpful, but try to explain what you're doing
- Offer adaptive devices and generously provide encouragement to use them even when it's hard



HELPING DEVICES

- Bed Shakers
- Vibrating wrist bands
- Strobe light doorbell
- Bone conducting headphones
- White noise machines to combat tinnitus

MEDICAL DEVICES

In-the-ear hearing instruments (ITE)

These are custom made devices that house all of the hearing instrument's components in a unit that fits within the ear. You may be offered one of the following:



CIC
Completely-in-the-canal:
Fits deeply inside your ear canal



ITC
In-the-canal: Small enough to fit almost entirely in your ear canal



ITE
In-the-ear: Made to fit within the external ear

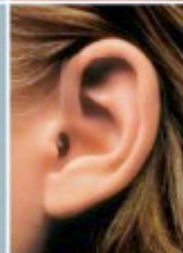


Behind-the-ear hearing instruments (BTE)

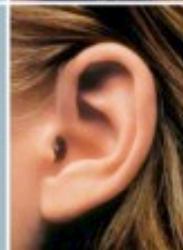
Components in these instruments are contained in the housing that rests behind the ear, connected by a thin tube to a custom ear mould or tip. You may be offered one of the following:



BTE
Behind-the-ear: Fits snugly behind the ear and is attached to a custom earpiece



'Open Fit'
Ultra-thin tubing is virtually invisible



RIC
Receiver-in-the-canal: The smallest BTE instruments



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TYPES OF EAR MOLDS



Skeleton
(Acrylic, silicone)



Full Shell
(Acrylic, silicone,
soft silicone)



Half Shell
(Acrylic, silicone,
soft silicone)



Semi-Skeleton
(Acrylic, silicone)



Canal
(Acrylic, silicone,
soft silicone)



Canal Lock
(Acrylic, silicone)



CROS
(Acrylic, silicone)



Solid Sleeve
(Acrylic, silicone,
soft silicone)

Full Shell molds can be the default for children and people with ID/DD because they are sturdy, but they can be very uncomfortable. If a person really dislikes these, it's worth advocating for a more comfortable open style if it meets the person's needs.

WHY WON'T SHE WEAR THE HEARING AIDS?

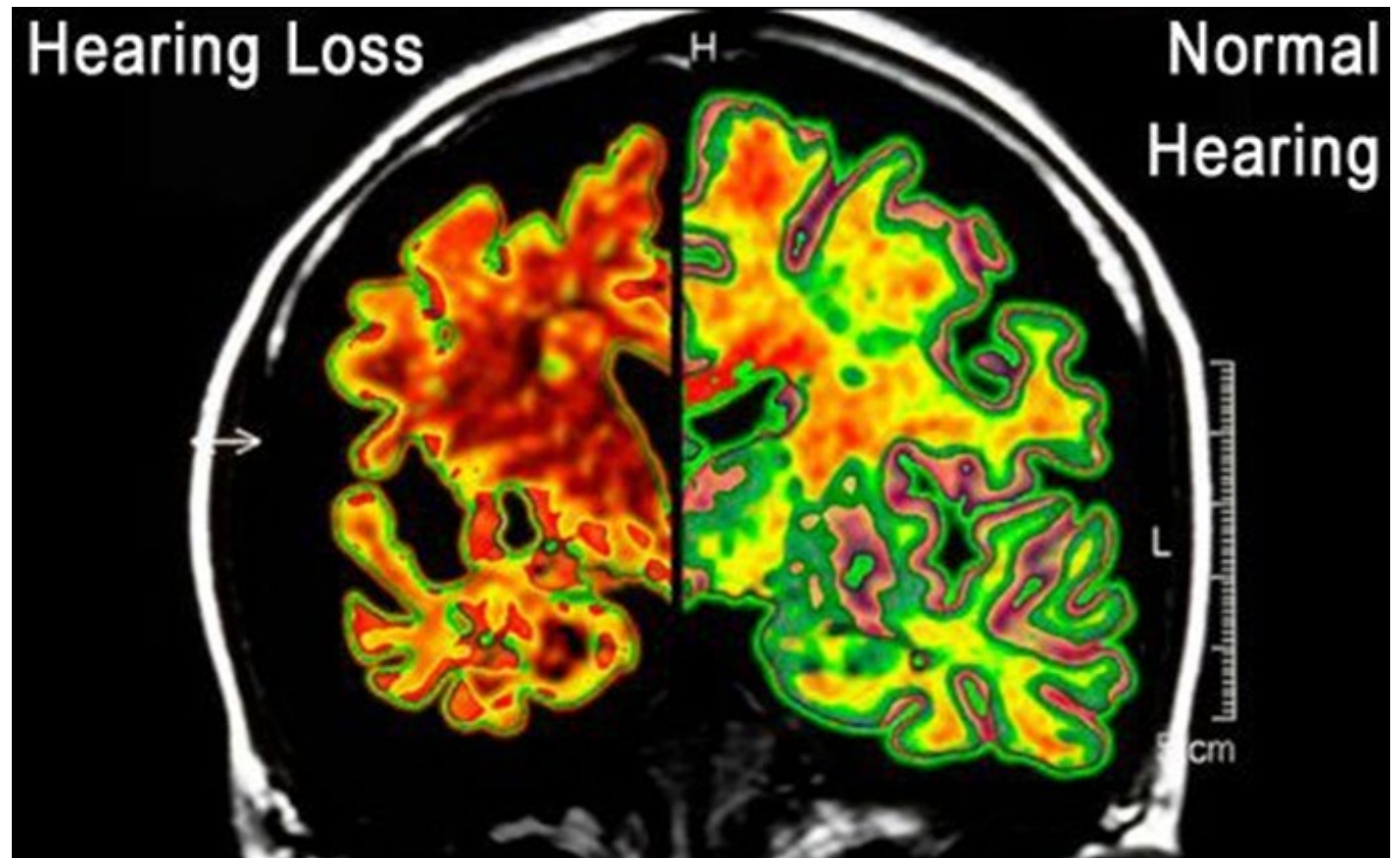
PROBLEM

- Ear infection
- Overwhelmed by new sounds
- Overwhelmed by social cues
- Everything seems too loud
- Feedback and squealing
- No infection, but ears hurt
- Aid not working at all

TROUBLESHOOTING

- Take a break from the HA, see a doctor
- Slowly add time wearing the HA
- Keep social groups small for practice
- Seek sound adjustment
- Remove items touching the microphone. Teach the person a side hug. Seek adjustment.
- Check for earmold fit. This can take several tries.
- Check the battery, charger and filter. A clogged filter makes an earplug out of an HA

A GREAT
REASON
NOT TO
GIVE UP



RESOURCES

- Hearing Loss Simulator
- <https://www.starkey.com/hearing-loss-simulator/simulator>
- General Hearing Loss Information
- [Hearing Loss Association of America](#)
- Deaf Culture and free ASL lessons
- [Deaf Awareness - National Deaf Center](#)
- [ASL By Topic | ASL Connect](#)