Navigating the Parenting World with a Deaf Child

Amber Chrischilles

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Roughly fifty million Americans report a degree of hearing impairment, and around twenty-four thousand children are born each year with a degree of hearing impairment in the United States (“About Hearing Loss”). Navigating the parenting world is hard enough, especially when parents are just learning about new decisions they will have to make for their hearing-impaired child. Parents with deaf children must educate themselves about the different hearing, language, and educational options available to them in order to help give their child a happy life.

As quoted from My Baby’s Hearing website from the Boys Town National Research Hospital, “most of these children are born to parents with normal hearing, who have had no experience with deafness or hearing loss of any kind. It is natural to feel overwhelmed and unprepared to deal with the situation.” Melissa B. Smith from Gallaudet University Press reports that 92% of deaf children come from parents who are both hearing, only 8% of deaf children come from one parent who is hearing impaired, and only 4% of children come from a family where both parents who are hearing impaired. Parents often do not know which options are best for their child, which is why it is important to become educated and to talk to specialists. Parents with deaf children should talk to a Service Coordinator, an Infant or Family Specialist, a Pediatric Audiologist, an Ear, Nose, and Throat Physician, or a Pediatrician or Family Practitioner in order to figure out how to properly help their child. In addition to seeking advice from medical professionals, talking to deaf members in their community, reading online blogs from parents with deaf children, or reading information from health care websites may be useful resources. Parents with deaf children should understand that “we become educated and realize that the hearing loss is merely a part of who our children are, not a definition of who they are” (“Language and Learning”).

There are many different hearing options available for parents with hearing impaired children. Hearing devices not only help to improve the patient’s language, but they help develop the patient socially and academically (Smith). There are two main types of hearing devices, including amplification devices and the cochlear implant. Amplification devices, such as hearing aids, amplify sound. Hearing aids are the most common route for hearing impaired patients who do not have a severe degree of hearing loss. If the patient does have a serve degree of hearing loss, the most common route is to get a cochlear implant (“Language and Learning”). A cochlear implant is a computer chip that is implanted under the scalp. This device replaces the damaged part of the ear and is able to relay information and send it to the brain where it can be recognized as sound. Some requirements in order to be considered for a cochlear implant is to not be benefitting from hearing aids, not making auditory improvement, and have no medical contraindications not allowing them to have this procedure. Being evaluated for a cochlear implant may take several months, and the patient will have to undergo various tests assessing the child’s hearing, speech, education, medical, and psychological wellbeing. Every patient has different and changing needs, and patients should be frequently reevaluated in order to find solutions that better suit their personal situation (“About Hearing Loss”).

There is much debate about whether or not a child should learn sign language at a young age. Studies have shown that children who sign at an early age improve more academically than those who do not sign (Smith). However, since most parents with deaf children are hearing and do not know sign language, it is often hard on both the child and the parent to communicate effectively. According to Smith, **“**Critical time passes while hearing parents try to determine how best to provide access to language, and to learn to communicate effectively with their child. As a result, deaf and hard of hearing children may not be exposed to sign language and other interventions during the most critical years for language acquisition.” The most critical time for learning language is from birth until the age of three. Figuring out what is best for the child and the family early on is the best solution to discovering whether or not the child should start learning sign language.

The Individuals with Disabilities Act (IDEA), signed in 1997, states that all children with disabilities will gain access to free and appropriate public education (“Language and Learning”). Parents with deaf children often are conflicted about which type of school setting is best for their child. “About Hearing Loss” states that, “no two children or families are the same, and no two hearing losses are the same. What works for one child may not work for another. The best way to decide which communication method will be best for your child is to be open to all methods, ask many questions, talk to other parents, talk to adults who are deaf or hard of hearing, and read as much as you can about the different methods. In the end, you need to do what you feel is best for your child and for your family in general.” Parents should continue to encourage and support their child throughout their education as well as keep a close eye on their progress.

From mainstreaming to residential programs, there are many options that are able to fulfill each child’s specific needs. If a child does not have severe hearing loss and their auditory skills are similar to other hearing children of their age, a good fit would be to mainstream the child, meaning to emerge the child in a normal public-school setting. By wearing hear aids, wearing their cochlear implant, or having the teacher hooked up to a microphone linked to the child’s hearing device, the child will be able to learn adequately in a mainstreamed classroom. However, if the child would need more assistance, they can either have the teacher be counseled with a speech and language pathologist or be tutored one on one by the pathologist to assist the child’s needs further. Day schools and residential programs are also available to hearing impaired children. Almost every state has a school specifically designed for the deaf. An important factor to keep in mind is that most day or residential schools specify in a certain type of language philosophy, and some school systems may not fit well depending on the child and family’s personal needs (“Language and Learning”).

There are two main types of plans that parents with deaf children will have in order to help keep track of their child’s educational experience. In order to stay organized and keep a steady track of their child’s progress, it is highly recommended that parents start a binder or notebook containing their plans, report cards, any notes from teachers, and any other helpful material. An Individual Education Plan, IEP, outlines goals designed by teachers, the special education teacher for the hearing impaired, the principle, and the parents. This describes how the goals will be met, and it also describes how to track the child’s improvements. An Individual Family Service Plan, IFSP, is very similar to an IEP. However, an IFSP is for the child from when they are born to when they are three years of age. Instead of including plans for just the child, the IFSP includes plans for the whole family to make sure the child is developing and that the family is supported (“Language and Learning”). These programs are designed to help children with special needs and assistance, and it is beneficial to parents with deaf children to assist them in making decisions about what their child’s needs are academically.

There are many different options for parents with deaf children including hearing, language, and education options. Although becoming informed and figuring out which solutions are best for each family may seem scary and difficult for new parents, there are systems and specialists in place to help parents navigate the world of parenting with a deaf child.

Works Cited

“About Hearing Loss.” *Boys Town National Research Hospital*, Boys Town National Research Hospital, 2017.

“Language and Learning.” *My Baby's Hearing,* Boys Town National Research Hospital, 2017.

Smith, Melissa B. “Academic Performance of Deaf and Hard of Hearing Students” *Gallaudet University Press,* Gallaudet University, 2017.