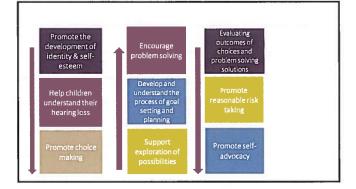


Cheryl DeConde Johnson, Ed.D. The ADEvantage consulting University of Arizona



Take Aways: Children with Unilateral HL/SSD Advocacy

- Hearing loss is generally physically invisible but behaviorally insidious
- Identity as a person is paramount to well-being; identity as a person with hearing loss with UHL/SSD is unclear but requires support and counseling.
- Every child is different but all are at risk for same problems as a child with bilateral HL.
- We cannot assume that these children are fully accessing their environment, communication, or learning even with the best hearing technology.

 Or that with access they understand and process what they hear.
- There are often a variety of interacting variables. However, the sensory
 impairment should be given precedence in the evaluation and investigation of
 a child's behavior and learning abilities by qualified professionals

| # A Case Study: Kevin #Early History 12 year old male (now 13), has lived with grandparents since age 4, adopted at age 6 along with a younger sister, now referred to as mother and father Prenatal, birth, and developmental history mostly unknown except biological mother reported to have bipolar disorder and history of drug use Attended community preschool At school entry for kindergarten, no reported significant learning or medical issues | |
|---|--|
| + A Case Study: Kevin Educational History Kindergarten passed hearing screening Teacher noted difficulties with "listening comprehension" Summer: Mother consulted pediatrician: Diagnosed ADHD and referred to ENT ENT Audiologist: Diagnosis of SSD- Right Ear | |
| +A Case Study: Educational History First grade Fall: Mother refers Kevin for special education Multidisciplinary Education Team (MET) assessments: Speech-Language, Audiology (ENT audiology evaluation), Occupational therapy | |
| Findings: Audiology - Right sided deafness as per ENT audiology report, 100% speech discrimination Receptive Language - low average; Expressive Language moderate delay range; normal intellectual functioning, academics estimated to be in average range Social-Emotional - concerns related to hyperactivity, conduct problems, atypicality, withdrawal, attention problems; Functional Behavior Analysis indicated behavior was attention seeking | |

+A Case Study: Educational History ■ First grade ■ Eligibility- Primary: Other Health Impairment; Secondary: Speech & Language Impairment or present at eligibility or IEP meetings



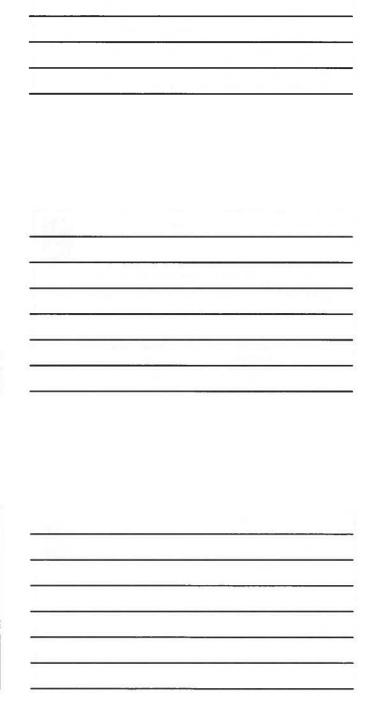
- Mother tells IEP team that Kevin "is easily frustrated...can be bossy...lacks social skills...problems interacting with other children...tends to give up easily when learning something new...temper tantrums'
- SLP responds to mother saying "lots of kids that age are like Kevin"
- No recognition of hearing loss, no accommodations to address hearing loss

| + A Case Study: Educational Hi | History |
|--------------------------------|---------|
|--------------------------------|---------|

- Second Grade
- August- Surgery for bone anchored hearing instrument (Ponto)
- Fall IEP Annual Review "hearing aid" discussed but no audiologist or TOD involved; no adjustments to IEP based on hearing status ■ March- processor activated
- Third Grade No change; met standards on state tests
- # Fourth Grade
- Beginning of school year: Three year eligibility evaluation
- No additional testing completed
- Staffed out of special education because goals met, declared "model student"
- # MET noted ADHD disability still present but does not require special designed
- Grades: mostly B's & C's but D in math (F 4th qrtr)
- = State Tests: Minimally proficient (Math) to Partially Proficient (ELA)

+ A Case Study: Educational History

- Fifth Grade
- Grades: Math- C (D Q3), Reading- C- (D (Q2)
- State Tests: Partially Proficient
- Sixth Grade
- lacktriangle Discipline issues: 3 reports in 1 month (inappropriate language, threw an object at a student) resulting in in-school suspension
- Mother requests special education evaluation noting decline in grades, behavior issues, and hearing concerns
- MET does not include the educational audiologist or TOD but notes in audiology report that he has failed hearing screening annually
- MET states on IEP that Kevin's current difficulties are not primarily the result of adverse impact of "deafness in the right ear"
- MET determines additional assessments are needed to determine eligibility: general intelligence, academics, communication, social/emotional, and motor/sensory plus FBA to determine function of Kevin's argumentative behavior/noncompliance



A Case Study: Educational History

- Special Education Eligibility Meeting
- MET present results and determines eligibility- again Other Health Impaired (ADHD)
- MET states that Kevin's current difficulties are not primarily the result of adverse impact of "deafness in the right ear"
- Mother asks for evaluations related to audiology and hearing impairment and that eligibility include hearing impairment: Denied
- Mother asks for Independent Educational Evaluation (IEE) at school expense
- District denies because they did not conduct audiology or speech/language evaluations that included receptive and expressive language)
- District grants IEE for psychoeducational and OT evaluations
- Mother files a due process complaint
- IEP meeting is scheduled, mother notifies school she is bringing attorney; district invites educational audiologist to attend

+ A Case Study: Educational History

■ IEP Meeting

- Psychologist: Kevin struggles with controlling symptoms related to his diagnosis of ADHD...symptoms include difficulties with focus and attention...poor listening skills, and being in trouble for not paying attention... is extremely self-conscious about his hearing aid implant which also impacts his mood.
- ADOS Evaluation Team Summary: no evidenced of characteristics consistent with Autism Spectrum Disorder
- Speech/Language Summary: Kevin has ability to understand and use appropriate social language...may need occasional guidance with interpreting situations and body language of others.
- Occupational Therapy Summary: Kevin has overall typical sensory processing abilities; non-sensory concerns with social participation.

+ A Case Study: Educational History

■ IEP Meeting

- Audiologist Summary: Kevin has previously documented right single-sided deafness; he currently wears a PONTO bone anchored hearing aid on the right side. Recent audiological testing at XXX indicates he demonstrates excellent aided benefit in quiet situations.
- ADOS Evaluation Team Summary: no evidenced of characteristics consistent with Autism Spectrum Disorder
- Needs:
- Kevin can increase his communication ability through the provision of assistive technology including a classroom or personal FM amplification device.
- Not Needed:
- Special Considerations: Statement of the Language Needs, Opportunities for Direct Communication with Peers in the Child's Language and Communication Mode

| 4,511 | | | |
|-------|-------|------|-------|
| | | | |
| | | | |
| | _ | | _ |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| ALC: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

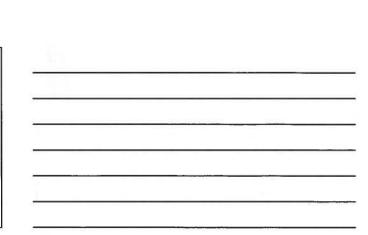
+ A Case Study: Educational History



- Kevin will follow a verbal direction positively (without arguing, talking back, commenting or making noises) in 8 out of 10 opportunities as measured by teacher data tracking sheets.
- When given a task, Kevin will begin the task within 1 minute and remain on task for a minimum of 7 minutes with no more than 1 adult prompt in 8 out of 10 opportunities as measured by teacher made data tracking sheets.
- When Kevin becomes upset, frustrated, or angry, he will choose to use a self-regulation or coping strategy (i.e., deep breathing, asking for a break/use a break card, ask for help, request a fidget, etc) in 3 out of 5 trails as measured by teacher data tracking sheets.

+ A Case Study: Educational History

- IEP Services
- Behavior Support in the general education classroom to include disability awareness training and self-advocacy skills; provided by special education teacher
- Audiology annual audiogram may be provided by the district audiologist or parent's private audiologist through private insurance
- Speech to Text training- assistive technology to support initiation and writing activities; provided by para/teacher/staff
- FM training for student- audiological support (FM system) while in the general education setting; provided by the audiologist, 1 hour/semester
- Supports for school personnel- speech to text training and FM system training will incorporate universal application across the campus; provided by teacher/staff and audiologist
- Behavior Intervention Plan



A Case Study: Due Process Proceedings

What went wrong?

- Failure to rescreen hearing when kindergarten teacher expressed concern
 District is required to ensure all children with disabilities are identified, located, and evaluated (Child Find, (§300.111).
- Failure to conduct assessment according to IDEA requirements. (Denial of FAPE)
 A full evaluation in all areas of suspected disability meaning a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the child, including information provided by the parent (§300.304(a)(1)).
- Failure to recognize the possible implications of single-sided deafness.
- Failure to identify hearing impairment as a disability category.
- Failure to address the special factors (communication considerations for children who are deaf or hard of hearing) (§300.324(2)(iv)).
- Failure to offer a 504 Plan once staff out of special education even though the district stated that Kevin still had a disability of ADHD.

A Case Study: IEE Speech/Language Evaluation

■ CELF-5

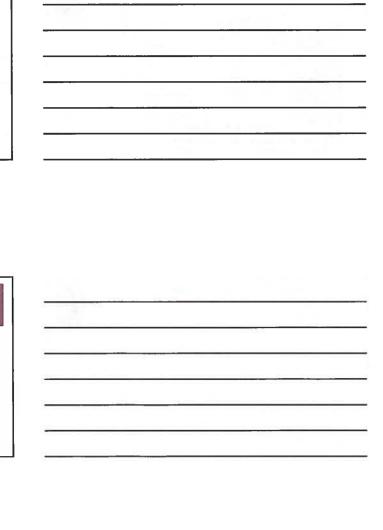
- Significant difference in understanding language and ability to express himself
- Significant difference between semantic knowledge and ability to apply memory to language tasks
- Summary: Difficulty with the metalinguistic skills needed to interpret and utilize complex language; as a result, we would expect difficulties with both processing and production of language to have a significant negative impact on the performance of the complex academic tasks required of adolescents.

| Indexes | Score* | Rank |
|------------------------|----------------------|------|
| Core Language | 107 | 68 |
| Receptive Language | 105* | 63 |
| Expressive Language | 89* | 23 |
| Language Content | 116** | 86 |
| Language Memory | 83** | 13 |
| Money is 100 warm ste | nderd destation of e | 415 |

Mean = 100, wan standard deviation of +/-1
"Statistically aignificant difference

| + | | | |
|---|------|-------|----|
| | Toet | Effo | rt |
| | 1621 | LULIU | ıι |

- Struggled to create sentences: frustration, banging his chin on the table and actually crying.
- Productions characterized by false starts, stopping, restarting, and very long pauses while he reformulated his sentences mentally; frequently made multiple self-corrections including after an item had passed.
- "In a classroom, if Kevin is rethinking things, the rest of the class is moving ahead, and he is likely to be frequently "lost" throughout his school day. Overall, Kevin's scores may appear to be better than his actual functioning, as a great deal of effort and self-correction was noted, and in a rapidly-paced classroom, he does not have the luxury of time that the testing environment affords."



| | se Study: IEE ional Listenir | ıg Eva | luatio | 1 | |
|---|--|-------------------------|--------------------------------|-----------------------------------|--|
| Average | d Results: Common | Phrases v | s Nonsen | se Phrase | es s |
| EffectEffect | on Phrases (able to of Noise – quiet 99%, of Distance – close 99 of Visual Input – audi | noise 96% %, distant | 96% | | |
| = Effect = Effect | use Phrases (ability) of Noise – quiet 74%, of Distance – close 66 of Visual Input – audi | noise 51% %, distant | 59% | | |
| | SPEEDS LINETESTANDING MONTENED PURALES | Close quiet | Close 'mpine (Pact of noise | Distant/quiet LDr-tuf distants | Distand name affect of sales fillsame a |
| | Auditory and rious | 70% | 65% | 75% | 50% |
| | An interventing | 70% | 60% | 80% | 30% |

| | 1 - Almost No | PYRT | Desirable ratings are \$1 2 - Beldom | the 3.5-4 range. 3 - Often | 4 - Al | meet Ahm | yo . |
|---|-----------------|----------------|--|---------------------------------------|------------|----------|------|
| | Subscale (| instrum. | Questions | | | Rollings | |
| Ctinone Lone Board | | Manney . | | | 1 | 5 3 | 14 |
| Stinson, Long Rend, Kreimeyer, Sabers, | | | land my teacher | | | | 1 |
| Antia (2006) | Understanding | | toral my latecher when the green | | | | |
| Antia (2000) | Teacher | | tand my learner when she snow tand my learner when she talk : | | - | _ | - |
| | (4) | 11 I Index | SATISFALL BENEZIMEN WENNESS STAR BRIDE | net serial to study for a feet | - | | - |
| Desirable Ratings | (4) | | | Magn of the Sublisted | | | |
| 3.5-4.0 Negative | | T THE SAME | und the other students in class. | medi in our suprise | | 13.0 | - |
| 3.5-4.0, Negative | | | RMA GARLANDIA | - | | | |
| | Understanding | 12 under | tons other students during group | CHEUMOCON. | | | |
| Available from | Student | | Liest other students when they a | | | | |
| | (4) | | | | | | |
| www.adevantage.co | | _ | | Moon of the Subriotal | 14 | 14n 25 | |
| m | | | nat about how opening income in | 2684 | | - | - |
| | Positive | B I look yet | aned others I tells to my teacher | | | | - |
| | Affect | 54 I final Por | Story in group declarations in class | | | | |
| | (4) | 15 I teni go | od in group distussment in class | | | | 1 |
| | | | | Many of the Spinstel | | | 4- |
| | | _ | Destroide rollings are b | | - | 44. | - |
| | r - | T & Titled by | of almd buckaste 4 in difficult for a | to the control of the public property | - | - | - |
| | | students | | | 1 1 | | |
| | Hegetive Affect | | aid because other students cares | of confunctional man | _ | | 1 |
| | (4) | | est because my feacher commit i | | | | _ |
| | (4) | | PRODY IN GROUP declarations in ch | | The latest | _ | _ |
| | | - | | - III. | | _ | _ |
| | | | | Mean of the Subtatal | 98 | 14- 25 | |

| + A Case | Study: Implications | |
|---|--|-------------|
| Identity as | a person | |
| Identity as | a person with hearing loss | |
| Without acceptance | rommodations and support, Kevin's behavior and schoole spiraled | 1 |
| | er recognized hearing loss as a factor; focus on behavio for his challenges | r misplaced |
| Special con | siderations were not applied, FAPE not provided | |
| performan intervention support an | reness of the effects that SSD can have on a child's academic ce can lead to a reactive or "failure-based" approach toward n. By recognizing the significant effect of Kevin's hearing lod decrease of the control of the control of the control of the und social functioning". (SLP) | S 55, |

| Due Process Outcomes Mediation Settlement Private school placement Compensatory services Kevin in private school placement focusing on students with unique learning needs – 3 other students there with MMUSSD | |
|---|--|
| Reflections Identity and social-emotional development considerations are paramount Implications when hearing status is not recognized or factored into how a child functions Counseling at diagnosis and ongoing support Prior to and in conjunction with amplification Peer opportunities for shared experiences and acceptance | |
| Amplification Qualified Personnel Age of Intervention Age of Diagnosis/ Progression of Hearing Leevels Other birth or developmental challenges | |



+ Educational Audiology Association: Minimal, Mild, Unilateral HL, and Single-Singled Deafness (MMUSSD)

www.edaud.org

- Introduction and Overview
- Educational Audiology Evaluation Recommendations
- Technology Considerations
- Accommodations and Intervention Considerations
- Research citations

CALL COLUMN TO THE PARTY OF THE

Audiologists make the diagnosis; we have to get it right!!!

| ⁺ Reference | |
|---|--|
| ■ Johnson, C.D. and Zimmerman, C. (2018). A Case of Missed Opportunities. Journal of Educational, Pediatric and (Re)habilitative Audiology, 23. | |
| | |