

Deaf and Hard of Hearing

Although students who are deaf and hard of hearing will work primarily with teachers of the deaf and hard of hearing (henceforth referred to as Teacher), the speech-language pathologist will frequently be the school-based person who works with classroom teachers when students are using FM auditory trainers or other sensory devices. The speech-language pathologist should work closely with the audiologist and teacher of the deaf to ensure that the settings are appropriate for the child's hearing and be proficient in trouble-shooting simple problems.

Due to the advancements in technology surrounding cochlear implants, it is more common for children to be entering school with cochlear implants. These students will need assistance from the school-based speech-language pathologists to develop their auditory-oral skills. Speech-language pathologists who are not up-to-date in their skills in this area should participate in professional development to renew their skills.

Specialized Roles of Speech-Language Pathologists

SLPs have the specialized preparation, experiences, and opportunities to address communication effectiveness, communication disorders, differences, and delays due to a variety of factors including those that may be related to hearing loss. SLPs provide services to a wide range of communication needs. SLPs in educational settings contribute to students' communicative competence and academic achievement including literacy ([Montgomery, 1998](#)). SLPs have the knowledge and skills to address the complex interplay of the areas of listening, speaking, reading, writing, and thinking. Furthermore, they understand how skill expansion in one of these components enhances performance in another area ultimately contributing to the overall development of literacy and learning.

The document *Knowledge and Skills Required for the Practice of Audiologic/Aural Rehabilitation* indicates that SLPs providing services to individuals who are deaf or hard of hearing should have knowledge of and skills that include, but are not limited to, the following areas of expertise ([ASHA, 2001](#)):

- normal communicative development and the effects of hearing loss on communicative development;
- the assessment of communicative skills and intervention with individuals with hearing loss; and
- the prevention of communicative issues

The scope of practice in speech-language pathology (ASHA, 2007) includes providing services to individuals with hearing loss and their families/caregivers, (e.g., auditory training; speechreading supports; speech and language intervention secondary to hearing loss; visual inspection and listening checks of amplification devices for the purpose of troubleshooting, including verification of appropriate battery voltage).

Understanding the Role of the Teacher of the Deaf and Hard of Hearing

Teacher education programs prepare teachers to plan and deliver the child's educational program, including the development of communicative competence within a variety of social, linguistic and cognitive/academic contexts. Teachers provide educational programming to children in center schools for deaf or hard of hearing children as well as in schools and programs that serve hearing, deaf, and hard of hearing children. These settings include self-contained classrooms, resource rooms, general education classrooms, and itinerant, home, or community-based settings.

Teachers are familiar with child development from infancy through adolescence. In addition to a common core of knowledge required to teach deaf or hard of hearing children, Teachers have a foundation of knowledge in a professional specialization ([CED, 2001](#)). Teachers with specialization in parent/infant education are prepared to work with families and very young children as part of an interdisciplinary team of professionals ([Joint Committee of ASHA-CED, 1994](#)). Specialization in early childhood addresses the development and educational needs of children and their families in the pre-primary years. Teachers specializing in elementary education typically are prepared to instruct in all academic areas and work collaboratively with parents and other professionals in elementary education settings. Teachers with specialization in multiple disabilities have an understanding of the concomitant effects of hearing loss and atypical developmental, social, emotional, motor, and physical conditions. Secondary education specialists have extensive knowledge in an educational content area and adolescent development.

Teachers are knowledgeable about both general education including the natural and behavioral sciences and humanities and pedagogy. Teachers are prepared to educate children who exhibit a range of learning abilities, challenges, and styles. Coursework and practica integrate cultural, linguistic, and socio-economic perspectives including the socio-cultural and linguistic phenomena associated with deafness. In addition, teacher preparation programs direct teachers to promote the child's sense of identity by collaborating with adults and peers who are social, cultural, and linguistic role models ([Christensen, 2000](#); [Cohen, 1997](#); [Cohen, 1993](#); [Cohen, Fischgrund, & Redding, 1990](#)).

Teachers plan for and educate children who are deaf or hard of hearing with varying backgrounds, abilities, and characteristics. Regardless of setting, Teachers—in collaboration with other professionals—provide, facilitate, monitor, and evaluate the development of communicative competence and literacy of children who are deaf or hard of hearing. Working closely with families, Teachers support family involvement and facilitate communication within the family. Teachers who have earned CED (Council on Education of the Deaf) certification are prepared to provide educational and communicative experiences that are developmentally and individually appropriate.

Collaborative Responsibilities

Children who are deaf or hard of hearing constitute a heterogeneous population whose abilities and needs may require the SLP and the Teacher to combine their expertise toward the development of communicative competence for these children. In addition, as the age and abilities of the child change over time, the professionals may also have to modify their roles. Collaborative responsibilities may include the following:

- Consider relevant background information (family history, medical information, previous assessments, reports, and observations) for the purposes of program planning;
- Obtain a comprehensive description of communicative and linguistic abilities and needs of the child, history of communication modalities and languages (signed and/or spoken) used and/or tried, family preferences, and concerns related to communication.
- Administer and interpret appropriate formal and informal, standardized and nonstandardized assessments of all areas of communicative competence.
- Develop communicative competence goals and objectives that address the general curriculum for the child; incorporating recommendations and findings of the family and interdisciplinary team;
- Identify individuals responsible for the design and implementation of an instructional program and related services to assist the child in achieving the identified goals and objectives;
- Evaluate the child's progress as related to the goals;

- Evaluate the program or related services provided;
- Provide progress reports to families on a regular basis and other professionals as consistent with federal requirements under IDEA;
- Determine the effectiveness of assistive technologies for the child in collaboration with the family and interdisciplinary team;
- Facilitate the development of social aspects of communication;
- Provide consultation, guidance, and education to children and young adults who are deaf or hard of hearing and to their families;
- Provide consultation and support to and or collaborate with professionals and paraprofessionals involved in the habilitation/educational program of the child;
- Consider overall learning strengths, weaknesses, differences, and/or delays which may be unrelated to hearing status for appropriate referral and/or educational planning;
- Collaborate with families and children regarding communicative and linguistic strengths and needs in planning appropriate educational, vocational, and/or career transitions;
- Assist families in receiving appropriate access to communicative and linguistic services for the child;
- Assist students in developing the skills and knowledge necessary for self-advocacy.

The Speech-Language Pathologist and Teacher of Deaf and Hard of Hearing will engage in a collaborative team approach to facilitate the development of communicative competence using one or a combination of service delivery models ([ASHA, 1999, 2001](#)). Service delivery is a dynamic concept varying according to the abilities and needs of the child. It is necessary for professionals to employ service delivery models that are most appropriate for the child and are based on the child's Individualized Education Program (IEP).

Adapted from “Roles of Speech-Language Pathologists and Teachers of Children Who Are Deaf and Hard of Hearing in the Development of Communicative and Linguistic Competence.” Developed by the Joint Committee of the American Speech-Language-Hearing Association (ASHA) and the Council on Education of the Deaf (CED) in 2003. *American Speech-Language-Hearing Association. (2004).*

For information on North Dakota Deaf and Hard of Hearing policies, refer to the ND Dept of Public Instruction policy paper, “Deaf and Hard of Hearing Students in ND Schools”

<http://www.dpi.state.nd.us/speced1/laws/policy/infopapr.pdf>

Additional information may be found at the National Association of State Directors in Special Education (NASDSE)

<http://www.NASDSE.org/Projects/DeafEducationInitiative/tabid/412/Default.aspx>