

SOCIAL ISSUES AND INTERVENTIONS

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Objectives for this session:

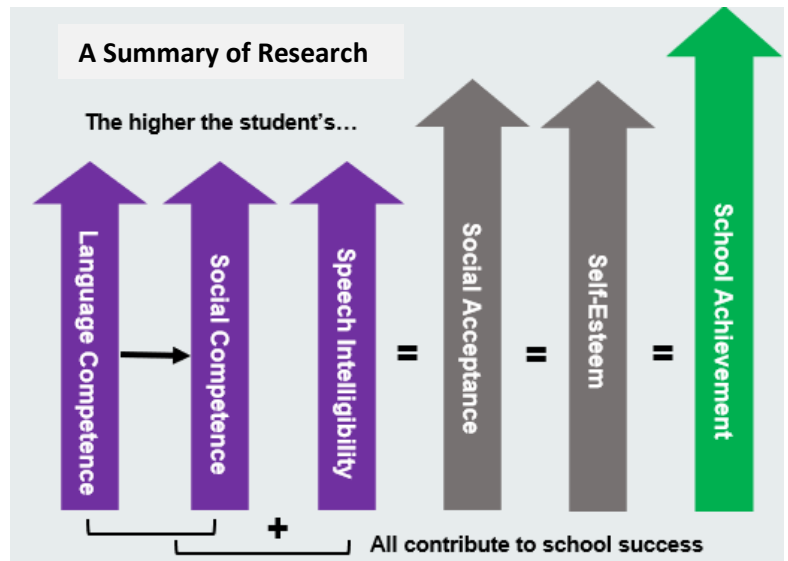
- 1) Describe early development of communication skills and confidence
- 2) Describe research findings on how social competence contributes to school achievement
- 3) Describe strategies to address self-confidence in the mainstream classroom

We know for most children, the **single most effective** means to address learning and development issues associated with hearing loss is through the consistent use of hearing technology (hearing aids, cochlear implants, BAHA, FM).

Language Competence

Access to spoken language = **better** language development. Key contributors:

1. Early identification of hearing loss, +
2. Amplification ASAP, +
3. Use of amplification a minimum of 10 hours per day, every day, +
4. Communication partners who understand the importance of effective communication AND use strategies to 'grow' auditory and language skills



2016 www.OCHLStudy.org

What Can We Do? Language Competence

- Be sure recent hearing aids and RM tech is used
- Continue all efforts to enrich vocabulary
- Pre-teach/Post-teach - new concepts and vocabulary to be presented in class
- Provide intervention to address deficits in syntax, morphology, and idioms
- Ongoing appropriate assessment of ALL areas of vulnerability with the involvement of a specialist in the impact of hearing loss (DHHT, specialized SLP, educational audiologist)
- Provide intervention to address deficits in syntax, morphology, idioms, and pragmatic language
- Develop strong literacy skills from the beginning

30 Million Word Gap (Hart & Risley, 2003)

Study identified the number of words spoken at home of 42 families by age 3. Professionally employed families averaged 45 million words, working class families averaged 26 million words, and lower SES families averaged 13 million words. Professional families provided 60,000 more encouraging than discouraging words. Working class families provided 100,000 more encouraging than discouraging words. Lower SES families provided 125,000 more prohibitions than encouragements.

Social Competence

Refers to the social, emotional, and cognitive dimensions that the individual needs to adopt in order to create successful social interactions. It includes the individual's emotional awareness, sociability, tendency to be prosocial and the readiness and ability to initiate social relations.

Students with hearing loss: Have fewer friends than age/class peers; Less interaction with other students; less initiation; More often feel socially rejected or neglected; Feeling excluded can result in lower self-esteem; Greater sense of loneliness; Less collaborative;

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passive observers vs involved; More socially withdrawn; More often perceived as victims who needed help; More casual friends than deep friendships. Review of research in this area can be found in: Review of literature in: <https://pdfs.semanticscholar.org/96bd/885b6c84ebb0b46938b145f5ae0414074319.pdf>

“Why Me?” Children with hearing loss are just like other kids. All kids have some kind of uniqueness or difference. Kids with hearing loss have obvious differences (Hearing devices, speech differences, language and learning differences). Hiding hearing devices will result in shame and disuse. Allowing minimal use will reduce the rate of learning.

KEY – “Loud and Proud” We need to support them to feel that they are okay and valued even if they have differences.

HANDOUT: *Attitude is Caught Not Taught*

The Root of Social Issues: Having a smaller ‘listening bubble’ = less overhearing. The impact of duration/intonation/prosody (DIP). Observed actions don’t fully capture the meaning of verbal language. Non-verbal communication clues are not fully connected to what children hear.

Incidental Hearing: We use incidental hearing to understand and monitor the world around us. To learn social graces and appropriate use of language/communication. Incidental hearing provides the opportunity for passive learning, including development of a rich vocabulary and empathy.

What Can We Do? Social Competence

- Ensure appropriate assessment of pragmatic language, even if the team thinks ‘he is okay’
- Encourage social connections – activities, camps, neighborhood – kids learn from kids!
- Focus on ‘making friends’ skills, initiating conversations, turn-taking in conversation, etc
- Teach emotions, social cognition - explain
- Focus on improving theory of mind/perspective
- Look for a classroom with integrated teaching of social skills and intolerance of negative social interactions
- PREPARE the child to respond appropriately to bullying/teasing situations

Impact of Speech Intelligibility Issues

Early intervention, parent education, consistent use of hearing technology provides early access to hearing technology which allows the development of an auditory feedback loop, which is necessary to naturally develop clear speech intelligibility. Auditory access in the educational setting also encourages development of communication repair strategies.

Social Acceptance - Why Are Pragmatics Specially Important? ? Pragmatic difficulties increase risk for social and emotional deficits (Ketelaars, et. al 2009) and for victimization (Contii-Ramsden & Botting, 2004). Children who are deaf or hard of hearing use more directive and less informative communicative functions than their normally hearing age-matched peers (Day, 1986; Nicholas, 2000; Nicholas & Geers, 1997).

Information on Pragmatics on DHH: Study by Christi Yoshinaga-Itano et al. (EHDI conference, 2012). Administered *The Pragmatic Checklist* (Goberis, 1999) to 109 children with normal hearing; 126 children with hearing loss of all degrees. All children cognitively normal, English-speaking. 45 items completed by parents who judged if skills are: Not present; Preverbal; 1-3 words; Complex language. 45 Pragmatics questions on the PRAGMATICS CHECKLIST (find under informal tests in SSCHL site). Research found children who are deaf or hard of hearing are significantly older when demonstrating skill with complex language than their normal hearing peers. Children in age groups were determined to have “mastered” a skill with use of complex language when 75% of age group achieved skill. Children with normal hearing: **44%** (20 of 45) of the items were mastered using complex language by **3 years of age**; **95.5%** (43 of 45) of the items by **4 years of age**; **98%** by 5 years; **100%** by 6 years. Children with hearing loss: **6.6%** (3 of 45) of the items were mastered using complex language by **3 years of age**; **69%** (31 of 45) of the items by **7 years of age**. Result: 3+ years delayed by grade 2. ALL levels of hearing loss. http://ehdimeeting.org/2012/Users/Uploads/pdfs/sps_17ChristineYoshinaga-Itano.pdf

Items not Mastered by age 7

- Provides information on request
- Repairs incomplete sentences
- Ends conversations
- Interjects
- Apologies
- Request clarification
- Makes promises
- Ask questions to problem solve
- Asks questions to make predictions
- Retells a story
- Tells 4-6 picture story in right order
- Creates original story
- Explains relationships between objects-action-situations
- Compares and contrasts
- Identifies Feelings

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Which Type Of 'Social'? Social cognition – being able to read feedback from people's faces to help you know if you should regulate your behavior. Social skills – doing things that are socially acceptable, being a friend to others, etc. Children with hearing loss are typically delayed in BOTH skill areas. Different skill sets needed for each area. Approximate 4 years delayed in the area of social cognition per the results from *The Pragmatics Checklist* items.

We Need to Teach Children with Hearing Loss vocabulary for emotions beyond happy, mad, sad. What emotions look like on the face. What emotions and facial expressions or posture tell us about how others are feeling. Or how to tell when others are pleased or displeased with our behavior. Many apps now available for social cognition.

Social Skills Checklists – some options

- Social Interaction Skills Checklist – Elementary (*Building Skills for Success* book, *Teacher Tools*)
- Social Attributes Checklist <http://successforkidswithhearingloss.com/tests>
- Social Skills Checklist – PreK/Elementary *Teacher Tools – Social Needs*
- Social Skills Checklist – Secondary *Teacher Tools – Social Needs*
- Minnesota Social Skills Checklist for Students who are Deaf/Hard of Hearing – PreK-High School *SSCHL website*

How can we shape social skills? MODEL – Use good social skills yourself, role-play with the child, provide the words for what he's feeling. TEACH – Explain what the child should do, be aware of, wait for, think about – don't assume he knows! WATCH AND SUPPORT: Reinforce good social behaviors – be specific about what s/he did well!

Self Esteem: Common Responses By Children With HL

- Checking out- being passive or shutting down when they know they have missed something.
- Relying on others to be 'human hearing aids'
- May stop trying even in situations that aren't difficult
- Loss of identity – don't feel a part of the group. May feel stuck between the 'hearing and deaf worlds'.
- Even family and friends forget their communication needs which results in feeling left out, less important, strengthens feelings of loneliness

The Stages of Facing Loss

- **Denial** – I don't need hearing aids
- **Anger** – I hate my hearing aids, hate people coming around because I have a hearing loss
- **Bargaining** – If I pretend I don't have a hearing loss and hide my hearing aids then I will be the same as my peers
- **Depression** – Just leave me alone

Sometimes students who continue to use devices go through depression in response to feeling left out by their peer group or "weird", discontinuing use is a strategy to resolve these issues. **Stages are an emotional response that isn't rectified by rational arguments. Students KNOW they do better with their devices.** Behavioral contracts are not successful for hearing aid use.

If you had to focus on just a couple of things....Research: Children with language impairment learned to increase the production of: Validating comments (That's cool!); Making positive statements (I love your shoes!); Asking peers questions about themselves (Do you like Iron Man?). Teachers reported improvement in sociable behavior. Fujiki et al, (2013). A social communication intervention to increase validating comments by children with language impairment. *Language, Speech, Hearing Services in Schools*, Vol 44(3), pp 3-19

Self-identity and having a hearing loss: Study of hard of hearing age 11, 13, 15 years compared to NH peers. 56% did NOT identify themselves as having a disability. May identify as having a 'hearing problem'. Those who identify themselves as having a hearing disability were more likely to report feeling lonely or alone. Kent, B. (2003). *Journal of Deaf Studies & Deaf Ed* 8(3), 315-324.

BULLYING WILL HAPPEN. Bullying rates are 2-3 times higher for children who are DHH than for peers. At least half of students will have obvious bullying experiences. Bullying for exclusion (excluding from group) is high. Bullying to coerce a child to do something is also high. Children younger than 12 report lower rates of bullying than adolescents (the likelihood never stops...). Students with lower language abilities are more vulnerable to victimization, especially if they lack social cognition skills. <https://successforkidswithhearingloss.com/2019/10/07/bullying-teasing-happens/>

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Extra need for Resilience & Persistence: Children with hearing loss WILL work harder to understand and will still miss more than their peers. Components of resilience include: Having a positive outlook; being aware of the feelings/perspectives of others; being able to tell people how I feel; having plenty of friends; being able to think of many ways to solve problems, ETC. Set clear goals; use humor, especially in difficult situations; problem solve challenges rather than pout, stew, internalize, or withdraw. Instructional material in *Building Self-Confidence & Resilience to Maximize Acceptance of Hearing Devices* – SSCHL website

Ingredients of Feelings of Fitting In

- Self-concept – “Am I ‘good’ or ‘worthy’?”
- Identity – “Do I truly belong to a group?”
- Social communication skills – “Am I comfortable interacting?”

Develop a Sense of ‘Group’

Bring students together to talk about their hearing loss, challenges, feelings. They can ‘teach’ each other about their hearing loss and share/support challenges at school. Ask “What do you think other kids with hearing aids do/feel/try?” Get questions written down, share them with older students and bring replies back to younger students. Talk about how other students you serve are challenged, how they handle it. Parents work to get kids together regularly to ‘hang out’.

Aim to Connect on Emotional Issues, especially Grades 4-6

Have conversations with tweens that support growth in identity by better understanding “**What have I got?**” with “**What am I going to do with it?**” Continue to integrate ‘cool’ values into your **discussions with the student**. “When you get to middle school it might be harder for you when you want to be like everybody else. “Your hearing friends may see you differently than you see yourself. Let’s see what a friend says.” *Students often tell us that they feel more confident in the ability to hear and understand their teachers than they do their peers.* SAC-A and SOAC-A checklists at SSCHL site, assessment, informal tests – free download.

Social Language : Being ‘Cool’ - Students want to be part of a group. They may monopolize conversation. Due to limited overhearing of incidental language they may not use colloquial (hip) terms. Include teen slang as vocabulary.

HANDOUT: HOW TO BE COOL! Developed by kids! Here is a sample: Don’t care so much what others think of you. Be aware of how you come off to others. Don’t be afraid of being different, whether that means standing up for yourself, defending someone else, or taking interest in something that no one else does. Be a good conversationalist. Feel good about yourself. Speak up. Be yourself.

What Can We Do? School Achievement:

- Inservice educators about the impact of HL!
- Consider COMMUNICATION GOALS
 - Receptive/Expressive language
 - High level vocabulary
 - Social communication
 - Communication repair skills
 - Listening in noise
- Work on and reward resilience and perseverance skills

The Need in the Classroom

Simply increasing the volume of speech is not enough. Children who use hearing aids or cochlear implants need to have the loudness of speech to be enhanced so it can easily be heard above background noise. All children have immature listening systems. Poor acoustics exacerbate speech comprehension and discrimination. Children and teens don’t necessarily know that there is a problem.

Rejecting Amplification Survey: Placement Implications

2016 survey - respondents: 88 survey respondents representing 1863 students on their combined caseloads. Respondents: 68 itinerant DHH teachers, 9 center-based DHH teachers, 8 educational audiologists, 3 others. Almost ¼ of students refuse or reject hearing aids and/or hearing assistance technology (HAT) use. Students who are ‘one and onlies’

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in their school or grade and do not come into contact with other students with hearing loss are much more likely to reject using hearing technology in comparison to those who regularly interact with peers with hearing loss.

Why do kids reject amplification? Summary:

- Students use amplification initially because adults tell them they have to and – usually - they know it helps them
- When families are not supportive of amplification, no benefit is experienced or there are comfort issues, we see non-users in PK-2
- Students often try to ‘pass’ without amplification when peers are more likely to tease and make ‘differences’ an issue (Grades 3-5)
- In middle school, they may feel like they ‘know how to get what they need from classes’ and are focused on fitting into their peer group. Often students haven’t formulated long-term goals by then. The inability to understand the long-term impact of their non-use decision and social issues together foster non-use.
- We cannot force them to comply and behavior plans have no long-term benefit.

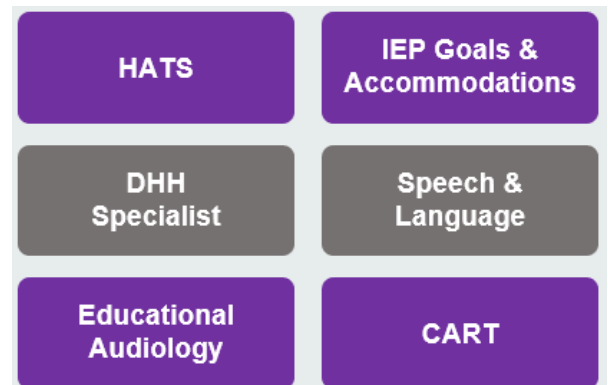
Getting students with hearing devices to interact, preferably weekly, will provide considerable ‘protection’ against rejection of hearing devices.

Perception vs. Reality

Perception – listening with a hearing loss in the classroom is not a problem but the gym and auditorium probably need acoustic improvements. Reality – classrooms are inadequate listening environments for all children and large rooms are universally abysmal. *Cochlear 2008*

How Can We Address these Issues?

- *Building Self-Confidence & Resilience to Maximize Acceptance of Hearing Devices* (SSCHL catalog)
- Start a conversation with the student about their feelings of acceptance! *Children’s Peer Relationship Scale* for grades K - 6 available from SSCHL at <https://successforkidswithhearingloss.com/for-professionals/tests-informal-assessments-for-parents-students-teachers/>



Signs of negative self-concept in adolescents

- Doing poorly in school
- Having few friends
- Putting down oneself and others
- Rejecting compliments
- Teasing others
- Excessive amounts of anger
- Being excessively jealous
- Appearing conceited
- Hesitating to try new things

Think About It Quiz – teens rate their perceived level of competence in 5 areas, including peer acceptance, physical acceptance and social acceptance. A score of 17 or less in any one area indicates a negative self-concept in that domain. Download from <https://successforkidswithhearingloss.com/for-professionals/tests-informal-assessments-for-parents-students-teachers/>

Self-Assessment of Communication Adolescent (SAC-A) Significant Other Assessment of Communication Adolescent

Provides a neutral 3rd thing to talk about with teens. 80% who went through the SAC-A and SOAC-A experience rated it positively even if their behavior was unchanged. Download from <https://successforkidswithhearingloss.com/for-professionals/tests-informal-assessments-for-parents-students-teachers/>

Common themes expressed SAC-A:

1. **Inherent isolation** of hearing loss: feeling left out of conversations; others just can’t understand what it’s like to have a hearing loss; futility of talking about it with friends as frustration still occurs

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2. **Identity and self-concept:** difficulty being the only one in school with hearing devices; preference for being with other students with hearing loss and support staff because they understand; challenges finding a social niche; easier to be viewed as deaf but missing information sometimes rather than hearing 'perfectly'
3. **Cosmetics** and other hearing device issues: hate having to explain to people; seen as being different
4. **Problem solving:** classroom can be easier than social situations; need for assistive devices; challenge of rapid speech, whispering, person turning away, background noise
5. **Self-acceptance:** blaming others for communication difficulties; desire for normal hearing; downplaying need for accommodations when challenged by teachers ("just forget it"); something just to deal with; being unique.

WHAT CAN WE DO? Self-Esteem

- Get kids with HL together so they can develop a healthy identity
- Encourage varied interests where HL is not a (significant) barrier
- Find a skill or accomplishment they feel proud of; something they are other than the 'kid with hearing aids/CI'
- Encourage skills in NH groups and alone
- Encourage them to read age-level books with DHH characters
 - *Song for a Whale* – Lynne Kelly (science, girl, sign user)
 - *Left Out* – Tim Green (football, boy, cochlear implant user)

Thank you for listening!