NCHAM- Facilitating Effective Hearing Device Use-(Adobe) Friday, December 4, 2020 1:00 – 2:00 p.m. Eastern Remote CART

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- >> Hello, everyone, we welcome you from Utah state university. It's good to see some of you joining us early. We will begin our presentation at 11:30, Mountain Standard Time.
- >> Testing, testing. Can you hear me? Does it sound okay?
- >> Testing, testing. Can you hear me again? (Please stand by for event to begin)
- >> Audio recording for this meeting has begun.

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>> NICOLE JACOBSON: Hello, everyone. Welcome to today's hear to learn webinar brought to you by the department of communicative -- at Utah State University. Please note that handouts for this presentation can be found for download in the bottom left corner of your screen. Today's presentation is entitled Facilitating Effective Hearing Device Use which will be presented by Claire Annis. Claire Annis is a teacher at Utah State University. She has served as a preschool teacher at Sound Beginnings. At the conclusion of the presentation, I will open up a text field for you to submit any questions or comments you may have for our presenter. Now, I would like to welcome Claire Annis to today's webinar.

>> CLAIRE ANNIS: I'm really excited to be here. This is something that I think is pertinent to a lot of parents, a lot of professionals, and a lot of children, too, who just are struggling to wear their devices. So I'm excited to talk about this.

I want to share how important it truly is to keep those devices on at least ten hours a day and this is something that is specific to all waking hours. Your child might not be awake ten hours if they're an infant, but we want to take all the opportunity that they're awake because it's so important to get that access to their brain because it is all about the brain.

I also want to discuss some strategies for you to implement if they're going to be successful for your child, for babies and toddlers, and then also some strategies for school-aged children, and these can differ between ages kindergarten to age 18, so it will be exciting for you to see these and if they work for you, I'm all the more happy to share them.

So I wanted to start just by listing off the devices. We've got hearing aids, cochlear implants and BAHAs which are bone-anchored hearing aid. All these devices have different manufacturers, so those are going to have specific retention options that you can look into for your child.

So what specifically is the goal? The goal is really dependent on the wearer. So we've got two different ways to look at it. Is the goal language? Then if it is language, we need to look at wear time as a really important factor. To have access to all the speech sounds, access to environmental sounds, to incidental learning, you need to have at least ten hours of wear time all waking hours of the day. If the goal is just to hear emergency sounds, wear time might not be as important as I'm stressing in this webinar.

So it really is dependent on the wearer, but the importance of wear time is specific to access for language.

So upon doing some further research myself, I came across Hearing First five quick tips and this is found on their website, you can search five quick tips and find it really easily or there's a link that I put at the bottom of the slide, but this is Dr. Theresa Caraway, the CEO of Hearing First -- and Dr. Wolf at the Hearts for Hearing Foundation in Oklahoma City. And they just are having a conversation back and forth about these important topics.

So I wanted to briefly explain each tip, and then I'm going to go deeper into two, three, and five. So for part 1, this one is called take 5.

And Dr. Caraway and Dr. Wolf talk about hearing aid volume and that it should be within five decibels of the prescriptive target. Volume does matter. It's so important because it could be a reason your child is struggling with those hearing devices as well, if they're too loud or too quiet, you want to be sure that their needs are being met.

For part 2, the early bird gets the worm, this is just important because Dr. Wolf and Dr. Caraway talked about that we're learning from day 1. Children are very visual learners, they're listening to everything, and all of that information that's coming in is stimulating the brain, so the earlier, the better.

And that means the better the language outcome. This is all thanks to universal newborn hearing screenings. We get children fit within the first few weeks of life, and that's not always the case, but that is a really, really great goal to set.

Part 3 is eyes open, ears on. And this one they are just stressing the importance of all waking hours. Part 4 is deciding between hearing aids and cochlear implants. And with this conversation, they're talking about evaluating each child's situation individually.

This is a team decision, and it also is really dependent on many factors for the child's health, degree of loss, and many other factors to have the best possible auditory access. Part 5 is tips for keeping hearing aids on children.

This one, Dr. Theresa caraway really stresses persistence and she laughs about it, jokes about it that it's a parent's middle name, persistence, because I'm sure many of the parents that are in this webinar can relate. It's just difficult with little ones to keep their devices on.

But we need to stay persistent with our strategies and trying different things so that it works because it is so important. So I'm going to dive a little deeper into part 2. Here was part 2. The early bird gets the worm.

I want to stress the word early. Within the first just few weeks of life, we want to make sure they're screened, that they're fit with their devices within one to two months as Dr. Theresa Ching has stated, the head at the National Acoustics Laboratory in Sydney, Australia. I'll talk about her in just a minute and her study that she's putting on. But the early bird gets the worm is dependent on the universal newborn hearing screening and I'm really glad to see how well that's doing and that children's hearing loss is being detected early, and then they're going to get the worm.

They're going to get that language to help them be successful through their life.

For part three, eyes open, ears on, this is all waking hours. We want to make sure the child is having at least ten hours, but as long as they're awake, have those devices on. We want to be sure that those are functioning appropriately as well and that parents are trained for listen checks, to check devices, and that audiologists are aware if anything is malfunctioning because it really is all about the brain, all the sounds and access that's coming in is affecting your child's output of their language.

Part five, Dr. Wolf and Dr. Caraway talk about tips for keeping a child's hearing aid on and what I took from what they were saying all is just all waking hours, you know. The best thing we can do is just keep them on.

So now, I'm going to dive into some strategies that I've heard from colleagues, from parents that I've seen and experienced myself and I would love to have you take anything you can from this and hope it works for your case.

So first, I'm going to talk about the LOCHI Study. The L. stands for longitudinal. O is outcomes, C children, H hearing, I impairment. Dr. Ching, like I said, is the head of the research study following children from their diagnosis until around age 21 and they're going to be -- (Captioner rejoining presentation) -- what Dr. Ching has found so far is early and right is what she has stressed. And when Dr. Ching says early, it's meant that the child is fit by an appropriate device by the age one to two months.

The child is fit with a device that's specific to their needs, specific to their degree of loss and it's meeting those needs. This is also pertaining to the audiologist that they're doing the right things, taking the right measurements to make sure that those hearing aids, hearing devices stay the way they need to be. I love that she stressed this and made it so easy to understand. Early and right.

We can all take that with us and remember that for our child's success.

So ASHA also recommends -- they're following the Joint Committee on Infant Hearing's recommendations. I know we all are familiar hopefully with the 1-3-6. So we are making sure that children are screened for hearing loss no later than one month, that they are fit with their devices no later than three months of age.

We want to make sure that they're confirmed hearing loss and fit with amplification within a month of diagnosis and so important that early intervention is started no later than six months.

And this isn't always the case. But when it is the case, we see better outcomes for language along the way. Something to do, though, is -- the whole point of this PowerPoint and webinar is to keep those devices on, regardless of when you start, keep those devices! I can't stress it enough.

So I said before that each manufacturer offers specific retention options. You need to look into what's provided for your child, and there are things that are specifically fit to help your child. It doesn't mean that they're going to be the best fit, but it's something worth trying and seeing if that's what you would like to try.

So some of those retention options, we've got -- I've only listed a few so this isn't all-encompassing, but we've got a safety line, a hair clip, right here. We've got a cap to help keep those fussing hands away from the ears. Tape if we've got looser earlobes. If the cartilage isn't as strong. EarGear, caps, critter clips and Safe-n-Sound. Those are just some of the retention options available.

I wanted to start with babies and toddlers. And these are the ones that I've listed -- I just talked before in the slide. We've got caps for those babies with fussing hands, the tape and I said and then the loops which EarGear is the specific brand name, but we've got loops.

So if the devices are falling off or the child is pulling them off, they're going to hang back on the cord. Something else as a suggestion is increased attention when the devices are in. So with this, you want to praise, praise. And it might not necessarily be a good job or a thumbs-up like I have in this picture, but you're going to be giving more attention and children are very aware of body language and the gestures that you're making and your facial expression to help them build confidence in a foreign object.

They're not always aware what is going on, why is this thing in my ear, but we can help them build that confidence by showing them with our expressions and our body language. Another strategy shared with me from a colleague is the "who's in charge" behavioral strategy.

So we've got infants who are ripping out devices. You need to show that child who's in charge and set that expectation early, so you're going to be the one who puts them back in and then takes them out yourself.

It's not the child who gets to take them out; it's the parent or the audiologist. And setting that expectation early is going to help the child say oh, I can't take this out.

And it's a thought process that will build by repeated exposure.

Another strategy I wanted to share is one of diversion and this one is a pat, pat, clap, clap. So this is a strategy to refocus the attention for the child. And it will help with hand over hand, if your child's fussing like this cutie in the picture at the top, you can put your hand over their hand and quickly pat, pat the ear and bring your hands together and clap, clap together. This will help to just refocus the attention and bring the child back to I don't need to fuss with that ear. We're going to clap, clap. That sounds much more fun.

It's not foolproof. This is not a foolproof plan, but something that you can try with your infant or see if it's going to be successful for you.

So jumping into the school-age. We've got device accessories. And I love this. I'm just very excited about it because I think it's important for the child, your children to build confidence in their devices. We want them to be excited to put them on every day. We want them to be proud to show their friends and say well look at my cute EarGear, look at how cool this superhero is on my hearing aid. I bet you want a hearing aid, too.

It's a thought that when you can share that moment with someone else, you're going to be more excited about it. So we have some more masculine options and this isn't provided by us. I found these on Etsy and this cute girl on the right is a colleague of mine, her former student shared some pictures of what's been successful for them, so she'll be throughout most of my slides. So she calls these her hear-rings, H-E-A-R. It's very cute to share with her friends. She can match different holidays, sporting teams, events, anything she would like to support she can and just show off how proud she is of her device.

Another suggestion to build that confidence and independence and show off individuality is stickers. So here we've got some cute Nightmare Before Christmas stickers that fit very well to the hearing device. This is again that family that I showed before and they just got these off Skinit.com.

So I think it's really fun to explore. If your child wants to feel more excited to show off their devices, I think why not build that for them and give them that opportunity?

They also have -- this family, they use previously worn ear molds that no longer fit or devices that are no longer functioning as decorations after they've been used. I think this is such a special idea. Keeps the memory, it keeps the importance and has a personal meaning to the child. Every time they're pulling out that ornament, they're going to think, I'm still wearing my hearing aids, you know. There's lots of thoughts that can come from that.

I've thought of opportunities to have art projects with some old ear molds or create just, you know, anything you can from it to hold that memory. I've also seen a lot of children take previous molds as something they can sew on to their stuffed animals so it can be a relatable object, that I have hearing aids and Puppy has hearing aids. It's very key for them to keep that connection, and it's very important. Something else that's very important to introduce to your child is relatable stories. There are so many stories that can be found and easily shared with your child to relate or understand that different is good. Some of these stories I have on here are Let's Hear It for Almigal, Mila gets her SuperEars, and Gracie's Ears and these are just some of the books I've heard of and I know there's so many out there. I've seen, as children get their first device, this is the book and you can take a picture with them with their book, and then as they get older and are more aware, as you're reading the book over and over, they can look back at that picture and remember oh, my goodness, I've had this book since I was a baby.

It's so meaningful to the child and helps them feel that importance and how great of an experience it is. Another suggestion I have is having that peer connection for a child. There are many times we see that a child with hearing loss is alone in their class. They don't have anyone to relate to. Everyone else has typical hearing, and they can just feel like an outcast at times and that certainly can affect wear time. So having that peer connection is so important. There's different ways you can find that peer connection, so I've listed some ideas here just having a social or support group. I know Facebook, you can search through Facebook and find many opportunities to talk to those that are going through the same things as your child. There are summer camps that are offered.

I know that Sound Beginnings of Logan, Utah, offers a summer camp that's open to anyone who wants to register and we've had a lot of fun with this over the years. A.G. Bell has a program, Leadership Opportunities for Teens and that has been a very successful program in bringing teens closer together, having the opportunity to relate to someone who's going through the same things as them.

At Sound Beginnings, we have our summer camp, like I said, is age 3 to 18, and these children just go through activities for two days that help build them closer. I led the teen group for the last two years, and they're getting each other's numbers and they're able to text each other and say you know what? This is not fun for me. What do you do when this happens?

Another really great relatable website that I found through a colleague is Hearing Like Me. And it's a teen peer connection group that offers testimonials of teens sharing strategies for fitting in at school and also wearing their hearing devices during sports activities.

I know there's so many difficult situations out there, but we can make the best of them with relating with children who have been there before. We don't have to re-create the wheel every time. There's

solutions out there. I remember reaching out to these groups and finding local groups in your area for your child to have that connection.

Another helpful tip is to get teachers involved. Of course, we want to make sure the child has approved this. That the teacher is not going to bother them if they don't want to be bothered. It's child approved, parent approved, and the teacher can give a private and a personal gentle reminder.

Just maybe a tap on the shoulder, or a tap on the shoulder, a look or a wink, just a reminder that it's time to put your devices back on, can be a helpful motivation to keep their devices on throughout the school day.

This former student of one of my colleagues celebrates each year that she's been hearing. She calls this her HEARiversary. Here, we've got her pictures from her fifth HEARiversary and her sixth HEARiversary. And this creates that memorable moment. I've been hearing for five years, that's crazy! She's so excited to have these traditions each year and share them with her family.

It's really important to have those regular hearing evaluations. So after a year, we want to be having the children every six months because you can catch things and talk to your audiologist regularly about experiences you're having with your child's wear time, or difficulties that you're having.

Oftentimes, our children are having their devices too loud or too soft and it can be a discomfort to them or maybe not even providing the benefit that they need, which would create the lack in motivation for wearing them.

So it's always important to check in on that and make sure that the devices are fitted appropriately for the child.

Another strategy is just a reinforcement behavior strategy. This is from Clarissa Ong who gave a webinar presentation on behavior reinforcement earlier this year or last year and she shared that it's important to start small. You want to make sure that child starts with the small step, learn that, and maybe that step is just wearing hearing aids for one minute. Start there, and then if they do that, praise.

Maybe it's an internal praise, maybe it's something that they feel so proud about that they're going to keep doing it. Maybe it does take a tangible reinforcement of a sticker book or a treat that you want to build up from there.

My final thoughts are just to stress again that it's important to do what's best for your child. Each child is different, no one is going to have the same experience. We want to, you know, have that importance for individuality. Each child has their own personality and they're all having difficulties that are specific to them.

We want to make sure that their needs are being met both for their hearing loss and for their confidence.

So be sure to talk with your audiologist, talk with your classroom teacher and brainstorm those ideas that are going to be best for them. And these are my references, if you look back on this, you can research and look further on those.

And we just want to say thank you to all of those that have helped support us.

>> NICOLE JACOBSON: Thank you, Claire, for your presentation. At this time, we have just a couple of minutes for questions. If you will please type your questions in the Q&A pod that is opening up. We will have Claire respond to those.

After this webinar if you still have any follow-up questions or comments, please e-mail me at Nicole.jacobson@usu.edu as noted in the left side pod.

No questions, just wanted to say I loved this presentation. Shelly, I'm glad you found that helpful. Katherine says I have a comment rather than a question. Claire, thank you so much for sharing so many helpful strategies. Sarah Roof, just a note that another great resource for parents are the local Hands and Voices chapters. Thank you, Sarah.

And can you please share the full reference of Clarissa Ong? Theodora, if you will e-mail me at Nicole.jacobson@usu.edu, we will see if we can get that resource to you.

Shelly is asking when will this be recorded and shareable? Usually typically within a couple of weeks. These webinars are posted to our Hear 2 Learn website.

What strategies have you used when children go from the phase of pride and individualization of their hearing aids and then reaching a point when they become less confident? Excellent question, I'm afraid we're out of time but will you please e-mail that question to us? And we will be very glad to respond to you from an e-mail.

We would like to thank our captioner and our I.T. support. We could not do this without their help. And we also likewise thank all of you who have participated online today. And again, remind you that a video recording of today's presentation will be available on our website at www.hear2learn.org. At the close of this session, you will be invited to complete a very brief survey that will help us improve future webinars and we again want to thank you for your participation in today's webinar and hope to see you back for the next one. Thank you for joining us.