



**International Journal of Biology, Pharmacy  
and Allied Sciences (IJBPAS)**

*'A Bridge Between Laboratory and Reader'*

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**CHALLENGES OF DEAF AND HEARING-IMPAIRED CHILDREN**

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**ABSTRACT**

Hearing disorder and hearing-impaired have many causes and many consequences. But children are more vulnerable than adults. Parents' reactions and social reactions are the challenges that the deaf and hearing-impaired children are dealt with. The parents' reaction and their emotions to their children due to their disabilities. These emotions are sometimes like the extreme care and support or sometimes are like the children's rejection, discouragement of care, and transferring them to the rest home, etc. Social reaction and attitude of the society towards these children, and emotions such as compassion and pity or blame provide a difficult to the deaf children and cause the disorders in children's mood and behavior. In this research first, we study the causes of deafness and hearing impaired, and the challenges that these children are faced with them.

**Keywords: Hearing Impaired, Deafness, Social Reaction, Speech Disorder, Learning Disorder**

**INTRODUCTION**

Almost in every 2700 birth, a child is born with hearing impaired and the prevalence of the disorder is increased in the first year of life and increases to about one in 1000 people (Hindley, 2005). According to the report of Bubbico and et al. (2007) every thousand people, seven people are born with to deep severe hearing impaired that hearing impaired happened before forming the language. The appearance of the

hearing impaired and deaf children is so normal that it is difficult to diagnose the hearing disorder from the child's appearance. Therefore, the families are not able to diagnose it, it is able to diagnose it after two or three years. As you know disabilities can be recovered if it is diagnosed sooner. So, the parents especially the mother who cares the child should pay attention to the child's growth.

Hearing impaired is one of the most common congenital disorders that occurs without outward symptoms. The best time to diagnose the hearing disorder is from the birth to 6 month that is concerned by the parents. This is done by the audiologist. It is clear that the reduction of child's hearing can affect his speech growth, social personality, and education, especially when this disorder occurs in utero due to genetic causes. That is why the age of diagnosis of hearing loss is before 3 months of age and the onset of rehabilitation (before 6 months) is an important factor in improving speech and language in hearing impaired children.

The causes hearing impaired in children

Four major cause of hearing loss in children include:

1. Otitis media (ear infections)
2. The causes of congenital
3. Causes Acquired
4. Genetic factors

#### • Otitis Media

Otitis media is inflammation of the middle ear (the area behind the eardrum) that is usually associated with fluid in that area.

The liquid may or may not be infected.

Symptoms, severity, and duration of diabetes is different reliability levels. May be non-infective fluid, clear and thin without pain and fever, and only a little hearing loss to repeated attacks with thick

sticky fluid in the ear and some other symptoms such as hearing loss is permanent.

Almost all types of media with fluctuating hearing loss can be spread. In fact, otitis media is the most common cause of hearing loss in children.

#### • Congenital Hearing Impaired

Hearing impaired that is since birth.

The term "congenital hearing impaired" is hearing impaired that is present at birth and include hereditary hearing impaired or hearing impaired that can be caused by other factors before birth.

#### Acquired Hearing Impaired

Acquired hearing impaired, hearing impaired after birth that occur at any time during a person's life because of diseases, injuries and have specific requirements.

#### • Genetic Factors

It seems that more than 50 percent of all congenital hearing loss in children is related to genetic factors. Genetic hearing loss may be autosomal dominant, autosomal recessive or related to the sex. In autosomal dominant hearing loss, one of the parents that has the hearing impaired gene and is transferred to his or her child. In these cases, at least 50% is probable that the child has a hearing loss. This is more likely when both parents have the dominant gene (hearing loss) or

grandfather and grandmother of one of the parents have a genetic hearing loss. Since at least one of the parents usually suffers the hearing impaired, it is expected that children suffer hearing loss. In autosomal recessive hearing loss, both parents suffer hearing disorder, they have a recessive gene. In such cases, the risk of hearing loss in children is 25%. Since both parents suffer hearing disorder and no members in family suffer hearing disorder, it is not expected that the child suffers the hearing impaired. Almost 80% of hereditary hearing loss are autosomal recessive.

At the hearing loss associated with sex, parents have a recessive gene on sexual chromosome, hearing loss is transferred to their sons not to their daughters. This type of hearing loss is rare, and only 2 percent suffer hereditary hearing loss.

### **Characteristics of deaf children**

#### **1. Cognitive development and IQ**

Recent research results show that, unlike the past, people who are deaf, hard of hearing and hearing-impaired are a group of people that are normal in intelligence and cognitive ability. For years, psychologists believed that reasoning and thinking capacity of deaf people is low. It should be noted that these results are due to inappropriate test has been deaf. Today, the correct tests have shown that people with hearing loss are normal in intellectual

and cognitive abilities, however, they do not get a good score at the IQ tests.

#### **2. Academic Achievement**

Despite the natural cognitive ability and intelligence, academic achievement of most of the deaf children is significantly lower than the hearing children. Paul and Jackson, reported: One of the strongest findings is that there is a relationship between hearing loss and achievement; the more severe the hearing loss, the lower educational attainment. Children with low or moderate deafness and hard of hearing as had been intended, more likely to be in regular classes or special classes for children 3-1 years, despite remaining hearing of achievement behind the hearing children.

#### **3. Language Development**

Some suggest that the first disability of deaf children is not deprived of sound deprivation of language. Children who have the ability to hear through listening, comprehension and expression in the work and words and achieve the cognitive maturation; but for children who cannot hear or cannot hear well, it is less than that and they start their school delayed language development and some of them do not achieve their growth counterparts linguistics and education. Children who are deaf and their hearing ability is low are more likely to reinforce language

development. The research that study acquisition of language skills, speaking and reading and writing in deaf children, suggesting that the language of children who are deaf grow the same as the health children, but this process is significantly slow.

### **Analysis of the Disorders caused by Hearing-impaired and Deaf in Children**

Guttmanova and et al. believe that the person's performance is essential for the person's growth and the predictor of his compatibility in future. Pastor and et al. (2012) reported that the emotional and behavioral disorders in childhood can be spread rapidly. They have negative outcomes on their educational performance, social relations, and growth (Barker and et al., 2009).

In this section we study some of them:

#### **A) Behavioral disorders**

The children who suffer the hearing disorder are more exposed to the behavioral disorder (Pastor and et al., 2012; Wallis and et al., 2004; Achenbach and et al., 2003). As their classmates speak together, the deaf student whether is girl or boy, it is so boring that he or she cannot understand what happened around him or her, and some bad habits are created for them and it leads to excessive actions or normative behaviors. Thus, it is necessary

to evaluate rather than behavioral disorders to clarify the predisposing factors.

#### **B) Paresis**

The children need to understand the processes and harmonizing the environment and movement. They need to use the information to design and recognizing their environments, as well as physical skills in their activities. The activities include playing, self-care, self-regulation of sensual and movement skills, interactive and social skills.

The deaf children feel more pressure in using these skills due to the physical problems. To diagnose and support the children with additional problems, it is so important to understand the sense of growth at all levels.

#### **C) Impairment of Learning**

The important issue that should be considered about the relationship between delay on growth with intelligent disability and deafness is that the outcome of the mix of these cases in the person lead to vulnerability in the person.

The hearing disorder prevents learning through the effect on language that reduce the person's ability in communication with others, this cycle continues.

The learning disorder can be specific or acquisitive and the severity can be from low to severe. Learning disabilities can be primary or secondary. It is important to

evaluate the child's learning needs are general or specific (Dyslexia, speech disorder or central auditory processing) because they can affect the educational replacing ideas and interventions. At the time of recognizing the children, it is recommended to use non-verbal tools as the general evaluation to show the dumb child's performance with different mood. By determining whether the learning needs are specific or acquisitive, the appropriate intervention can be done at its place, and the child's learning capacity can progress easier. Most of the deaf children don't have the primary learning process.

Their non-verbal diagnosis is medium. However, because the communication style is different from the people around them, they can have secondary learning. In an environment where all children have the same communication patterns, learning needs will be secondary. Without a full understanding of the relationship between primary and secondary learning disabilities, to gain confidence and self-esteem expectations of those around the child will not. Children with general learning disabilities and hearing loss at their writings are not properly introduced.

(D) Impairment of speech

Understanding the important role of hearing and speaking in the lives of people

is impossible; but if we accept the theory about the relationship between language and thought, scientists recognize the importance of language in social affairs. We can understand this fact that the deaf people are not able to speak due to the hearing disorder, and they live difficultly. Someone who is deaf his power of thinking is also limited because the human expresses his intentions by the words and they think by these words, and if these tools are not available, their thought powers are limited.

Language Disorders can be seen in three areas received disorder, expression or combination. Language disorder include difficulties in processing and production of phonology, understand the meaning of words (semantics) and lack of knowledge or use of grammatical sentences (morphological or so). Difficulties are also seen in the integration of language and text (decoding means) and to understand the meaning (social and business). Some children suffer speech disorders (production) that cause the transfer of language problems in the social area and affect the relationship with peers. Deaf students with language disorders (e.g. practical meaning disorder) often have behavioral problems, and this is not surprising. They may have a problem in suitable for treatment in unforeseen

circumstances, for example, in social situations with peers if they can be easily read social cues and understand their meanings, cannot participate in that activity.

Younger children may harm (possibly as an attempt to call) or refuse (they may prefer to play alone). Thus, as seen in adults learn to speak the time to understand the rules of social communication will be difficult. Assessment and diagnosis of language disorders, especially in children affected by hearing problems. Language delays can be caused by hearing impairment in children hidden in the special class.

Many deaf children do not have the required oral language or literacy skills to understand and follow trainings or verbal response.

Delayed language development and verbal communication problems are not only incomplete but also the development of a theory of mind. (Austin et al., 2007) because the person (child) is normally not exposed to the language and conversation opportunities there. (Knutson and et al., 2004)

(E) Attention disorder

Sometimes the attention of deaf children have also been evaluated. These evaluations are an important part of the diagnosis of ADHD and can differentiate to

form memory and attention problems, performance problems are to be effective. Researchers found children with acquired sensual and neutral hearing impairment are at risk of attention problems more than their peers.

However, there is no difference between children affected by congenital hearing normative data. At the time of the evaluation of children suspected of having attention problems, knowing how they become deaf is important because problems can affect behavioral characteristics. For example, attention deficit may be the primary disability, psychological and social consequences of hearing loss in a hearing world. So, in appropriate educational placement decisions, it is important to consider this case.

## CONCLUSION

The present research that is entitled challenges of hearing impaired and deaf children is descriptive. In the first step we studied the causes of hearing impaired that among these factors acquired causes and otitis media can be prevented more than other factors.

Today, by the hearing technologies, the deaf children or the children who suffer the hearing disorder are learning the solutions for hearing and speaking by the methods that were impossible many years

ago. This teaching goes beyond speaking, and the deaf and dumb children are able to read stories, sing, tell a joke, create art, enjoy the music, and know about their around world the same as the health. There is no limitations for the deaf children. It is adequate that the parents provide something they need to understand the issues and use the method that is suitable for their children.

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