BIRTH - 3: A NEW PARADIGM FOR A DIVERSE POPULATION

Presentation to Early Hearing Detection and Intervention Conference
March 2010
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WHY A NEW PARADIGM?

• Increase in number of infants
• Decrease in age of children
• Diversity among population:
  • Hearing Levels
  • Culture and Language
  • Abilities and Disabilities
  • Economic Resources
• Outcomes not Good Enough
ADVANCES

• Longer “stays” in Birth to 3 Programs
• Outcomes better for children by age 3
• Families more competent
  • Better informed
  • More involved
  • Better communicators
  • Informed decisions and choices
  • Better advocates
CHALLENGES

• Delays from Confirmation of Hearing to Early Intervention

• Information Overload and Controversy

• Limited Service Availability
  • Birth to 3
  • Preschool and Kindergarten

• Outcomes Falling Short

• Shortage of Fully Prepared Professionals
GOALS OF NEW PARADIGM

• Close the Gaps in Services
• Expand Opportunities
  • Communication
  • Technologies
• Improve Services to Children and Families
• Improve Language and Literacy
• Improve Quality of Providers
CLOSING THE GAPS
From Newborn Hearing Screening
To Early Identification
To Early Involvement
COLLABORATION

Collaboration between Health Care, Families, Professionals and Deaf Community
CLOSING THE GAPS

Traditional

• Screening and Identification
  • Medical
  • Health Care
  • Hearing Deficit = Pathology
  • Focus on Hearing Functioning

New Paradigm

• Screening and Identification
  • Collaborative Approach
  • Education, Families & Communities
  • Focus on Whole Child
<table>
<thead>
<tr>
<th>Disability</th>
<th>Ability</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Failed Screening</td>
<td>• Referral for Evaluation</td>
</tr>
<tr>
<td>• Diagnosis</td>
<td>• Identification/Evaluation</td>
</tr>
<tr>
<td>• Hearing Loss</td>
<td>• Hearing Levels/Status</td>
</tr>
<tr>
<td>• Hearing Impaired or Deafness</td>
<td>• Deaf or Hard of Hearing</td>
</tr>
<tr>
<td>• Treatment</td>
<td>• Ways to Facilitate Development</td>
</tr>
</tbody>
</table>
EXPANDING OPPORTUNITIES
From Confirmation of Hearing Status
To Communication, Technology
To Program Opportunities
COLLABORATION

Collaboration between Health Care, Families, Professionals and Deaf Community
## Expanding Opportunities

### Communication & Technologies

<table>
<thead>
<tr>
<th>Traditional</th>
<th>New Paradigm</th>
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</thead>
<tbody>
<tr>
<td>Learning to Listen</td>
<td>Learning to See &amp; Listen</td>
</tr>
<tr>
<td>Learning to Talk</td>
<td>Learning to Communicate (Signing/Speaking)</td>
</tr>
<tr>
<td>Hearing Aids/CIs</td>
<td>Hearing &amp; Visual Technologies</td>
</tr>
<tr>
<td>English Only</td>
<td>Multilingual/Multi-modal</td>
</tr>
</tbody>
</table>
CHANGE IN PERSPECTIVES

Hearing - Normal

• Hearing is Better
• Language = Spoken Language/Speech
• Speech = Success
• Signing = Failure
• Assistive Technology = Hearing Technology

Deaf/HH - Difference

• Deaf/HH is Diverse
• Language = Speech/Signs/Reading/Writing
• Language & Thinking = Success
• Limited Language = Failure
• Assistive Technology = Auditory & Visual Technologies
IMPROVING SERVICES

Early Involvement Program

Approaches
Collaboration between Health Care, Families, Professionals and Deaf Community
<table>
<thead>
<tr>
<th>Traditional</th>
<th>New Paradigm</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Therapy Model</td>
<td>• Meaningful/Functional Model</td>
</tr>
<tr>
<td>• Professionals as Experts</td>
<td>• Professionals/Parents/Caregivers as Collaborators</td>
</tr>
<tr>
<td>• Hearing People are Language &amp; Role Models</td>
<td>• Hearing, Deaf &amp; HH People are Language and Role Models</td>
</tr>
<tr>
<td>• Mainstream as Goal</td>
<td>• Opportunities/Continuum</td>
</tr>
<tr>
<td>One Way</td>
<td>Multiple Paths</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------------------------------------------</td>
</tr>
<tr>
<td>Professional is Expert</td>
<td>Family-Professional Collaboration</td>
</tr>
<tr>
<td>Family Involvement is Proscribed</td>
<td>Many Types of Involvement</td>
</tr>
<tr>
<td>Goal to be Hearing-Like</td>
<td>Goal to Optimize Potential</td>
</tr>
<tr>
<td>Identity as Hearing</td>
<td>Identity as Deaf/HH</td>
</tr>
<tr>
<td>Failure Model</td>
<td>Assessment &amp; Evidence-Based Models</td>
</tr>
</tbody>
</table>
LANGUAGE & LITERACY
From Communication & Language
To Programs
To Literacy
Traditional

- Focus on Dominant Language
- Transition from Home Language
- Literacy at School
- Language Teaching
- Language and Cognition

New Paradigm

- Support Development of Multiple Languages
- Maintain Home Language
- Family Literacy Practices
- Language Acquired in Meaningful Contexts
- Language, Cognition and Social Interactions
PROFESSIONAL DEVELOPMENT
From Hearing Screening
To Identification
To Communication
To Programming
PROFESSIONAL DEVELOPMENT

Traditional

- Pre-service Training
- Professional Background in One Area
- Uni-disciplinary Approach
- Limited Field Experience
- On Campus, In Workshops

New Paradigm

- Professional Development
- Professional Expertise in Multiple Areas
- Interdisciplinary Approach
- Field Experience & Mentoring
- Multiple Approaches Including Online, Distance Models
“Change will not come if we wait for some other person or some other time. We are the ones we've been waiting for. We are the change that we seek.”

-PRESIDENT BARACK OBAMA
SELECTED REFERENCES

- Position Statement: Joint Committee on Infant Hearing (JCIH) Year 2007 Position Statement
SELECTED REFERENCES

- Schwartz, S. (2007). *Choices in Deafness*
- Snoddon, K (2008)