Chapter 10
Educational Settings

“Hearing loss of any type or degree that occurs in infancy or childhood can interfere with a child's development of spoken language, reading and writing skills, and academic performance.”
—Cole & Flexer, 2016

Introduction

With support from qualified professionals in appropriate educational environments, students who are deaf or hard of hearing (D/HH) can achieve academically in ways commensurate with their hearing peers.

The purpose of this chapter is to describe the various educational placement options that can be available to children who are D/HH. Due to Public Law 94-142—passed in 1975 and later reauthorized as the Individuals with Disabilities Education Act (IDEA)—there has been a shift from residential and other segregated schools and programs to more educational placements in general education settings. The concept of least restrictive environment (LRE) has increased the attention given to educational placements and the academic achievements of students who are D/HH. The decision regarding placement is often as contentious as the decision regarding communication methods and teaching approaches. Children who have more significant hearing losses—combined with other factors outlined below—may benefit from specialized programming, especially when growth in listening and spoken language (LSL) is the goal or when the student needs access to communication partners who are fluent in American Sign Language (ASL).

When considering educational placement along with academic achievement and the importance of social relationships for children who are D/HH, it is important to consider the following topics that will be addressed in this chapter:

- **IDEA**
- Continuum of educational placement options, services, and settings.
- Different roles that certified personnel hold.
- Indicators of academic readiness.
- Importance of social relationships.
- Process of determining placement.
IDEA Overview

Overall, the goal of IDEA is to provide children with disabilities the same opportunity for education as those students who do not have a disability. When reviewing educational options, it is important to understand the aspects of the law with regards to deaf education (Wright, Wright, & O'Connor, 2010). The Office of Special Education Programs—part of the U.S. Department of Education—provides information and resources about IDEA at the IDEA website (https://sites.ed.gov/idea/about-idea/). The Council on Exceptional Children provides another excellent source for information on IDEA (https://www.cec.sped.org/Policy-and-Advocacy/Current-Sped-Gifted-Issues/Individuals-with-Disabilities-Education-Act).

IDEA is composed of four parts:

| A | General aspects of the law. |
| B | Education of all children with disabilities from age 3 to 21. |
| C | Services for infants and toddlers with disabilities from birth to age 3. |
| D | National support programs administered at the federal level. |

IDEA has five elements that support the main points:

| 1 | Individualized Education Program (IEP) |
| 2 | Free Appropriate Public Education (FAPE) |
| 3 | Least Restrictive Environment (LRE) |
| 4 | Parent and Teacher Participation |
| 5 | Procedural Safeguards |

For the purposes of this chapter's focus on educational settings, knowledge of FAPE and LRE is essential.

FAPE

Special education and related services that are provided at the public's expense, under public supervision and direction, and without charge.

- Meets the standards of the state's educational agencies.
- Includes appropriate preschool, elementary, or secondary education.
- Aligns with the IEP.
- Results in educational benefit to the child.

Overall, the goal of IDEA is to provide children with disabilities the same opportunity for education as those students who do not have a disability.

The main idea is that it is the state's responsibility to provide an appropriate education with necessary services in order for students to achieve their IEP goals and demonstrate growth in an educational setting. Keep in mind that each state, agency, school community, and/or parents may interpret what is considered appropriate differently.

LRE

To the maximum extent appropriate, children with disabilities, including children in public or private institutions or care facilities, are to be educated with children who are non-disabled; and special classes, separate schooling, or removal of children with disabilities from regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

The LRE is the environment most like that of typical children in which a child with a disability can succeed academically as measured by specific goals on the IEP.

When discussing the LRE, there are two questions to consider:

| 1 | Can an appropriate education in the general education classroom with the use of supplementary aids and services be achieved satisfactorily? |
| 2 | If placed in a more restrictive setting, is the student integrated to the maximum extent appropriate? |
Again, the words *satisfactorily* and *appropriate*, along with supporting verbiage, is often viewed more subjectively than objectively. It can be difficult for an IEP team to come to a conclusion as to what is appropriate for a student, which is why it is so important for the team to work collaboratively and consider what is best for each individual student.

**Continuum of Placement, Services, & Settings**

While there are a variety of ways that terms related to placement, services, and settings are defined, the definitions found in *Table 1* will be used in this chapter.

**Table 1**

**Definitions of Terms Related to Placement, Services, & Settings**

<table>
<thead>
<tr>
<th>Definitions of Terms for Placement</th>
<th>Inclusion</th>
<th>Mainstreaming</th>
<th>Integration</th>
<th>Reverse Mainstreaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>The placement of a student into general education classes regardless of the degree or severity of a disability. An inclusive classroom and the LRE may be the same placement for a child who is D/HH, but that may not always be the case.</td>
<td>The process of integrating a student with a disability in a regular education school setting, but only if they can follow the mainstream curriculum academically without any issues and without the regular education teacher needing to make adaptations to the curriculum.</td>
<td>Efforts used to move students from segregated classes into a more mainstreamed setting. Integration is IEP-driven.</td>
<td>The practice of bringing typical peers into the special education classroom of students who are D/HH to provide opportunities for interaction.</td>
<td></td>
</tr>
<tr>
<td>For example, a student with a moderate unilateral hearing loss who does well academically, is socially appropriate, and has good self-advocacy skills could benefit from an inclusion placement. A student with significant gaps in language and literacy may not be able to learn in an inclusive setting. Special education professionals and parents may disagree on inclusive placements, and these decisions will be made in IEP meetings or through mediation or due-process hearings.</td>
<td>An example of mainstreaming is a student with a profound, bilateral hearing loss who does well academically and socially in a general education classroom with support and/or consult with a teacher of the deaf (TOD). The TOD may preteach vocabulary, language, and academic concepts. However, the regular education teacher doesn't make any adaptations to the curriculum.</td>
<td>For example, a private preschool program for students who are D/HH enrolls typical hearing peers into their program. The hearing peers model age-appropriate language and social interactions.</td>
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</tr>
</tbody>
</table>
### Definitions of Terms for Services

<table>
<thead>
<tr>
<th>Remediation</th>
<th>Accommodations</th>
<th>Modifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching that includes identification of a student’s specific learning skill deficit and corrective, remedial, or clinical approaches to improve that deficit.</td>
<td>The adjustments that the school provides that will make a student more successful academically. These may include strategies to bypass a weak function or skill.</td>
<td>Changes that a school or teacher may make to the curriculum. This may result in a modified grade or diploma at the high school level.</td>
</tr>
<tr>
<td>For example, a student who is having trouble learning to read may get extra help on individual phonics work.</td>
<td>For example, a student with handwriting issues may use a keyboard for written assignments.</td>
<td>For example, a student who has a challenging learning disability in math may have fewer math problems assigned.</td>
</tr>
</tbody>
</table>

### Definitions of Terms for Settings

<table>
<thead>
<tr>
<th>Class Within a Class (CWC) or Co-Taught (CT)</th>
<th>Push-In</th>
<th>Pull-Out</th>
<th>Resource Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>CWC is an inclusion model of service delivery for students with mild to moderate disabilities. CT is a collaborative teaching model that pairs a special education teacher with a general education teacher. These two professionals co-plan and co-teach. The general education teacher is the curriculum expert, and the special education teacher is the strategic expert when co-planning. Planning also involves deciding which teacher is the lead and which is the support for each lesson. Successful planning provides for the education of all students who are in a CWC classroom.</td>
<td>This type of therapy involves a TOD and/or a therapist (speech-language therapist, occupational therapist, or physical therapist) working with a student in the classroom along with the general education teacher (Miller, 2014).</td>
<td>This type of therapy is provided by the TOD or other therapist outside of the general education classroom (Miller, 2014).</td>
<td>A classroom in a student's school where special program services are provided by the TOD.</td>
</tr>
</tbody>
</table>
**Placement Options**

The placement options shown in Table 2 are often used for students who are D/HH.

**Certified Personnel**

Students who are D/HH often receive services from a number of professionals, including those shown in Table 3.

### Table 2
**Placement Options for Students Who Are D/HH**

<table>
<thead>
<tr>
<th>Local Public School Classroom</th>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students with disabilities are taught in a general education classroom alongside their peers. Supports are offered in the classroom in several different ways. First a TOD and/or special education teacher may come into the classroom and co-teach with the general education teacher for portions of the day. Services may also be provided to the students by an instructional assistant or aide working under the direction of the special education teacher. Finally, the classroom teacher may provide services to the student by collaborating with the TOD and/or special education teacher. In any of these scenarios, the instruction and assignments in the classroom need to be differentiated in order to meet the needs of students with disabilities.</td>
<td>In a regular education public school placement, students who are D/HH receive the maximum exposure to nondisabled peers. This placement is beneficial for students who are able to learn in a general education classroom with minimal outside support.</td>
<td>Special education services in a local public school may not be as intensive as those offered in more structured environments. Students having difficulty with listening in noisier environments, expressive and receptive language skills, and academics may feel overwhelmed or frustrated.</td>
</tr>
</tbody>
</table>

### Public School Classroom with Resource Room Support

The resource room is a classroom in the school setting where a TOD and/or special education teacher works individually or with small groups of students for certain subjects during the school day. Students attend a general education classroom but receive pull-out services in the resource room for portions of the day. The purpose of the resource room is to provide more intensive and individualized instruction for students with disabilities. This level of instruction is not available to students in a general education classroom. The amount of time that students spend in a resource room should be clearly defined in the services section of the IEP.

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students receive instruction in a quieter, small-group setting at an individualized level and pace. Instruction is tailored for the individual needs of each student.</td>
<td>While in the resource room, students are not educated with their typically developing peers. Students may encounter or perceive negative stigma from their peers for going to the resource room. This is more common in the upper grades than in primary grades.</td>
</tr>
</tbody>
</table>
Table 2 (continued)

Separate Classroom in Public School/Self-Contained Classroom

Self-contained classrooms are special education classrooms designed to meet the academic, social, and behavioral needs of students who would otherwise struggle in a typical classroom. Self-contained classrooms are taught by a certified special education teacher trained to work with a specific population of students. A TOD is usually in a more supportive role, although in some districts there may be resource rooms that are staffed by a TOD. These classrooms often have a specific focus, such as autism, behavior, or cognitive delays. There is a lower student-teacher ratio. Typically these classrooms have approximately ten students with one teacher and several instructional assistant, or paraeducators. Students may spend their entire day in a self-contained setting or have a combination of time in the self-contained classroom and time in mainstreamed classes with their peers.

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-contained classrooms are usually highly structured and designed to provide enhanced services to students who require more support than services available in the general education setting. Students receive instruction in a small-group environment with a highly trained special education teacher.</td>
<td>Social interaction with typical peers is reduced. Access to a TOD is often limited.</td>
</tr>
</tbody>
</table>

Separate Nonresidential Schools—Public or Private/Out of District

Sometimes a student may have educational needs that cannot be met within the programs available in a public school district. At times, an out-of-district placement in a private school setting may be necessary. Most communities have private or not-for-profit schools that specialize in a variety of areas, such as autism, behavior, and schools for students who are deaf and/or blind. Public schools vary in their available programming. If they are unable to provide the appropriate special education services that students need, they are legally required to pay for tuition and transportation to an out-of-district placement.

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
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<tbody>
<tr>
<td>Out-of-district placements are highly specialized schools with certified staff trained to work with a specific population of students. Services are based on best practices, the most current research and materials are utilized, and most schools have direct access to more immediate audiological support. Students receive all day, direct support from staff who are highly trained and certified.</td>
<td>Exposure to typically developing peers is generally not available. Depending on the location of the school, it may be a long commute for the students. Due to students not attending their home school, they may find it difficult to fit in with their neighborhood peers and community. Such placements are extremely costly for school districts. School districts are held accountable to the state department of education for explaining such expenditures and balancing that with why they don't have their own program.</td>
</tr>
</tbody>
</table>
Table 2 (continued)

### OPTION Schools, Inc.

This coalition of schools advance LSL education by supporting and promoting educational options for students, measuring outcomes, establishing and sharing best practices, and raising awareness through advocacy (www.optionschools.org).

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shared access to the most current research, methods, and best practices in deaf education that benefits families that have chosen the communication mode of LSL.</td>
<td>While an excellent resource and option, not always readily available due to the limited number of programs.</td>
</tr>
</tbody>
</table>

### Teleintervention/Teletherapy

Teletherapy offers support for both families and schools towards helping students obtain services via the internet (Stredler-Brown & Alverson, 2012). Academic supports, speech therapy, audition therapy, and consultation are some of the options available. This is a good option for families and/or school districts that do not have immediate access to a TOD (https://sjid.org/services/ihear-internet-therapy/).

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teletherapy offers services for those who may not have access otherwise.</td>
<td>There are costs related to the technology and updating equipment. There may be issues with internet failure and internet access.</td>
</tr>
</tbody>
</table>

### Separate Residential Schools—Public or Private

All states, except for Nebraska and Wyoming, have a public state school with a residential option (http://www.deafed.net/PageText.asp?hdnPageId=105). Most state schools use both sign language and spoken language with the emphasis being on sign language. All private schools for the deaf have closed the residential aspect of their programs.

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is a sense of community for the students, since they are surrounded by their deaf peers at all times.</td>
<td>Students may feel left out and isolated from their own families. And if LSL is the communication goal, there isn’t as much support due to the focus of most state schools on Deaf Culture and sign language.</td>
</tr>
</tbody>
</table>

### Homebound or Hospital Environment

Homebound instruction is a service available to students ages 3 to 21 who, because of their medical and/or psychological condition(s), require instruction outside of school as a result of hospitalization or a medical/psychological condition that prevents their school attendance for an extended time. The time allotted for these services is considerably less compared to time spent in attending school daily.

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students at least have access to some services and one-on-one time with a teacher.</td>
<td>The students usually have limited time with an educator and no opportunity to learn with peers.</td>
</tr>
</tbody>
</table>
A teacher that has completed college programming in deaf education to become certified to teach children who are D/HH. Depending on the deaf education program at a given college or university, communication modes are focused on LSL or sign language. Some programs are described as comprehensive and address both spoken language and sign language. TODs who attend a deaf education professional preparation program that focuses on LSL are trained in the components of receptive and expressive language, literacy, and sign language. The curriculum includes content on hearing assistive technology, including hearing aids, cochlear implants, and classroom listening systems. TODs who attend a deaf education professional preparation program that focuses on sign language will study receptive and expressive language, literacy, and sign language.

### Listening and Spoken Language Specialist (LSLS) Certification.
Some TODs take the extra step of obtaining LSLS certification via the Alexander Graham Bell Academy. Teachers participate in professional learning and mentoring and demonstrate knowledge of the nine LSLS domains via a rigorous exam (http://www.agbell.org/Academy.aspx?id=555).

A TOD may provide services in a variety of ways depending on the educational needs of the student.

<table>
<thead>
<tr>
<th>Teacher of the Deaf (TOD)</th>
</tr>
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<tbody>
<tr>
<td>A teacher that has completed college programming in deaf education to become certified to teach children who are D/HH. Depending on the deaf education program at a given college or university, communication modes are focused on LSL or sign language. Some programs are described as comprehensive and address both spoken language and sign language. TODs who attend a deaf education professional preparation program that focuses on LSL are trained in the components of receptive and expressive language, literacy, and sign language. The curriculum includes content on hearing assistive technology, including hearing aids, cochlear implants, and classroom listening systems. TODs who attend a deaf education professional preparation program that focuses on sign language will study receptive and expressive language, literacy, and sign language.</td>
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</table>

- **Full access.** When a student has access to a TOD the majority of the day.
- **Hearing itinerant.** A TOD that will usually travel from school to school providing pull-out and/or push-in therapy and services (Compton, Appenzeler, & Kemmery, 2015; Luckner & Ayantoye, 2013). See the Itinerant Teaching chapter for more information about itinerant teaching.
- **Consult.** A TOD that is available to the rest of the staff for advice, inservices, classroom observations, and for trouble-shooting issues with hearing devices and/or classroom listening equipment.

### Table 3
Professional Services for Students Who Are D/HH

<table>
<thead>
<tr>
<th>Special Education Teacher</th>
<th>Speech-Language Pathologist (SLP)</th>
<th>Regular Education Teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special education teachers can provide resource room and/or general education support.</td>
<td>Depending on training and experience, SLPs can offer speech and auditory therapy. Service options can include pull-out and/or push-in, individual, and/or small-group instruction.</td>
<td>A teacher who teaches in a general education classroom.</td>
</tr>
</tbody>
</table>

### Sign Language Interpreters

A trained staff member whose job it is to sign information to students in a variety of settings—the classroom, assemblies, after-school activities, etc. It is not their job to assist the teachers, explain the content, or teach the student.

### Paraprofessionals

Also known as a shadow, teacher aide, teacher assistant—a trained worker who is not a member of a given profession but assists a certified professional. The paraprofessional is there to provide support to the students. This can include small-group review work, preteaching vocabulary, and academic support. It does not include direct instruction of new material.
Indicators of Academic Readiness

Academic readiness is one of many factors that the IEP team takes into consideration when determining placement for a student who is D/HH. The most obvious indicator, of course, is if the student is performing on grade level academically. Most classrooms have students who are functioning below grade level, on target, and above grade level. For example, if an IEP team is considering a student for placement in a fourth-grade class, some of the students may be reading at a third-grade level, some at the fourth-grade, and others at a fifth-grade level. Therefore, if a student who is D/HH is reading at the third-grade level, he could still possibly function just fine. However, it isn't always as simple as that. There are many other questions to ask that will also help determine if a student is academically ready for a given placement:

1. Does the student have appropriate classroom behaviors?
   - Raises hand to be recognized.
   - Follows directions.
   - Has good organizational skills.

2. How developed are the student’s language skills, including vocabulary, content, structure, and pragmatics? For a student using LSL to communicate, can he comprehend what he has heard? Can he give that information back verbally or in a written format? For a student who uses sign language, can she understand and/or keep up with a sign language interpreter?

3. If a student uses hearing devices, does he receive good benefit? Is he a good reporter if something isn’t working?

4. Is the student’s speech intelligible to unfamiliar listeners?

5. How does the student cognitively process?
   - Learning style.
   - Awareness of one’s strengths and weaknesses.
   - Knowledge of strategies to support challenges.

6. Is there a presence of other learning issues? If so, what supports would be needed?

7. Does the student advocate for herself?

8. How motivated is the student to succeed?

9. What kind of family support does this student have?

How Is Placement Determined?

Placement is determined by the IEP team, which consists of the parents, the student (if appropriate), TOD, general education teacher, and a representative of the local education agency (LEA). The LEA representative is usually the school administrator or principal. The team may also include related service providers, other administrators, school psychologists, school counselors, transition coordinators, or other individuals who have knowledge about the student. According to IDEA, placement decisions must involve the parent and cannot be predetermined prior to an IEP meeting (https://sites.ed.gov/idea/).

Placement decisions are based on the needs of the student. The law specifies that students must be educated in their LRE. This means to the maximum extent appropriate, students with disabilities should be educated with nondisabled peers in their home school. However, the general education classroom isn’t always a student’s LRE. For some students with disabilities, this setting can be highly restrictive, because the student may not be able to process the general education curriculum. Placement decisions are extremely individualized and must always take into consideration the unique needs of each student (Guardino, 2008).

In the last 15 years, many public school districts have formed working relationships with private schools that specialize in deaf education, especially schools that have created programs focused on LSL. Some school districts recognize the value of early intervention, auditory therapy, speech therapy, development of expressive and receptive language skills, emerging literacy skills, and academics. Educators are aware of how highly trained, certified, and knowledgeable the faculty are, and that they can’t always replicate that. It is also expected that when a student exhibits good growth in consistently meeting their IEP goals that the team will work together to have her mainstream back to her home school with the proper supports in place.
When determining placement, IEP meetings can be fraught with conflict—perceived or otherwise. Is the team working together in cooperation or collaboration? It is always in the best interest of the student to keep in mind that it is critically important for every member of the IEP team to approach each meeting, each discussion in the most collaborative manner possible. It is the team’s responsibility to go through the student’s IEP first to determine what the student needs to access his IEP goals. It is only after most of the IEP has been conducted, and the team arrives at the Placement Decisions and Considerations page that the team can determine placement.

In the broadest sense, parents have the responsibility to choose the educational setting for their child—public education, homeschooling, or education in a private institution. For the parent who has chosen public education, they are then part of a decision-making team through the IEP process in determining services, supports, and placement issues. When a parent chooses homeschooling or a private placement, a different set of rules apply to what they can and cannot expect from special education under IDEA (https://sites.ed.gov/idea/).

When it comes to who is making the decision about school placement in public education, the law is clear. For children who are D/HH, their communication needs set them apart from children with other disabilities. The law has delineated those needs.

**IDEA states...**

“"The IEP team shall consider the communication needs of the child, and in the case of a child who is D/HH, consider the child's language and communication needs, opportunities for direct communications with peers, and professional personnel in the child’s language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the child’s language and communication mode” (IDEA, Sec. 300.46 (a)(2)(iv); https://sites.ed.gov/idea/).

But how does the “consideration of communication needs” mesh with the general applicability of the LRE concept? The individualized needs of the student become the primary predictor of the placement decision. IDEA regulations state that in all cases, placement decisions must be individually determined on the basis of each child’s abilities and needs and not solely on factors, such as category of disability, significance of disability, availability of special education and related services, configuration of the service delivery system, availability of space, or administrative convenience.

**IDEA states...**

“Rather, each student’s IEP forms the basis for the placement decision. Further, a student need not fail in the regular classroom before another placement can be considered. Conversely, IDEA does not require that a student demonstrate achievement of a specific performance level as a prerequisite for placement in a regular education classroom” (IDEA, Appendix A, Section 1(1); https://sites.ed.gov/idea/).

In conclusion, the whole team, working collaboratively—diligently following the IEP process—should:

- First, discuss how to best support a student’s needs through the IEP goals developed by the team.
- Next, honor the mandate of LRE.
- Then, determine placement of what is in the best interest of the student educationally both academically and socially.

"Cooperation is when one person engages another person to achieve the goals of the first person. Collaboration is when two or more people engage in a mutually beneficial relationship that allows all involved to achieve goals while remaining true to beliefs and mission.”

—National Association of State Directors of Special Education, Inc.

"In determining the educational placement of a child with a disability, each public agency shall ensure that the placement decision is made by a group of persons, including the parents and other persons knowledgeable about the child, the meaning of the evaluation data, and the placement options” (IDEA, Sec. 300.552(a)(1); https://sites.ed.gov/idea/).
The Importance of Social Relationships

It is imperative to have all aspects of a student's academic education arranged and the appropriate supports put into place. Sometimes during the IEP process, professionals forget or do not place enough stress on the importance of a student's self-esteem and the correlation to positive social relationships. When asked, many parents will say it is more important for their child to succeed academically than to fit in with their peers. While that is important, a number of parents in their heart of hearts will admit that if asked to choose, they would pick social acceptance first. So why not make academics and social relations both a priority!

The U.S. Department of Education believes that it is important that state and local education agencies, in developing an IEP for a child who has a hearing loss, take into consideration such factors as:

- Communication needs and the child's and family's preferred mode of communications.
- Linguistic needs.
- Severity of hearing loss and potential for using residual hearing.
- Academic level.
- Social and emotional needs, including opportunities for peer interactions and communications (Deaf Students Education Services; Policy Guidance, U.S. Department of Education).

It is well documented that meeting a child's social and emotional needs contributes to positive self-esteem. Good self-esteem can help further academic success and lifelong happiness. Many studies have demonstrated that the more family support a student receives, the more likely it is the student will succeed academically and socially (Antia, Jones, Kreimeyer, Reed, & Luckner, 2011).

Oftentimes it can be difficult for a child with hearing loss to build appropriate social relationships. Families and schools can provide support by having the child engage in various activities with both hearing and non-hearing peers, including community and school activities.

The following strategies may support students who are D/HH in social interactions:

- Role-play new or doubtful situations at home before the encounter and rehearse conversational repair strategies.
- Use a buddy system.
- Find deaf support communities for both the students and families (online, local clubs, AG Bell, Hands & Voices).
- Monitor use of social media.
- Keep the lines of communication open regarding the child's hearing loss through the years as a toddler, child, adolescent, teenager, and adult. Most parents have already gone through the stages of grieving their child's hearing loss. Oftentimes upon becoming an adolescent, the realization that the hearing loss isn't going to go away can trigger one's own process of grieving. This may take a few days or a few years.

Families need to...

- Include the child in family discussions.
- Be both realistic and positive about the child’s strengths and weaknesses.
- Model good listening behaviors.
- Encourage appropriate risk-taking behaviors.
- Teach manners.
- Have consistent consequences for inappropriate behaviors.
- Have a positive attitude about the child’s hearing loss and use of amplification.
- Be educated with regards to the child’s audiological needs.
- Be involved in their child’s school and community.

<table>
<thead>
<tr>
<th>Community Activities</th>
<th>School Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sports</td>
<td>Choir</td>
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<tr>
<td>Religious Communities</td>
<td>Band</td>
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<tr>
<td>Scouts</td>
<td>Drama Club</td>
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<tr>
<td>Summer Camps</td>
<td>Dance Line</td>
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<tr>
<td></td>
<td>Cheerleading</td>
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<td></td>
<td>School Newspaper</td>
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<td>Yearbook Committee</td>
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<td>Community Service Projects</td>
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• Use humor to help children and their families when dealing with the unfairness of having a hearing loss, especially if a child has experienced someone making fun of them.

“I really hope we can laugh . . .

I believe that laughing was probably God’s best idea. It will be the one thing that can bring joy to our lives the quickest. If I get stuck in a mud puddle, it is probably funny. If you are lifting me, and we both fall on the floor in a heap, that is probably funny too. A good joke is worth taking the time to laugh at. Help me not get so caught up in the serious problems we face every day to forget about laughing.”

—The Ten Things I Wish You Knew, Sally Brown/AG Bell
Resources

- Individuals with Disabilities Education Act, Office of Special Education Programs, https://sites.ed.gov/idea/about-idea/

References


Individuals with Disabilities Education Act (IDEA) website. Retrieved from https://sites.ed.gov/idea/.


