

Parent Survey

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Your child recently had one or more hearing tests. To improve the hearing test process and how information is provided to families, we would like to ask you a few questions about your experience with your child's first hearing test or screening. Please answer the following questions as accurately as you can. Thank you.

1. Indicate which of the following is most like how you understood the results of the first hearing test your child had:

- It was certain that my child had a hearing loss of some type.
- It was very likely that my child had a hearing loss of some type.
- It was possible that my child had a hearing loss of some type.
- It was possible, but rather unlikely, that my child had a hearing loss of some type.
- No possible hearing loss was found.

2. To what extent did the results of the first hearing test make you more aware of your child's hearing?

- much more aware somewhat more aware a little more aware not more aware

3. Since your child's first hearing test, have you had your child's hearing tested again? YES NO

If yes, what were the results? normal hearing hearing loss identified

If hearing loss was found, indicate the type and degree of loss, if you know: _____

4. Since your child's first hearing test, how often have you found yourself paying attention to how your child hears different sounds?

- very frequently somewhat frequently occasionally seldom never

5. How well do each of the following phrases describe your reaction to your child's first hearing test results?

	a lot like me	somewhat like me	not much like me	not at all like me
Confused (I didn't understand what the results really meant)	_____	_____	_____	_____
Informed (I understood the results & the need for another test)	_____	_____	_____	_____
Angry (that this was happening to me and my child)	_____	_____	_____	_____
Calm (not very worried about it at that point)	_____	_____	_____	_____
Afraid (about the unknown challenges of a child with a hearing loss)	_____	_____	_____	_____
Comforted (by staff who helped me to be hopeful)	_____	_____	_____	_____
Depressed (about what would be lost if my child had a hearing loss)	_____	_____	_____	_____
Encouraged (that I could handle it if my child had a hearing loss)	_____	_____	_____	_____
Certain (convinced that my child did, in fact, have a hearing loss)	_____	_____	_____	_____
Doubtful (not convinced that my child had a hearing loss)	_____	_____	_____	_____
Impatient (wanting more conclusive results sooner)	_____	_____	_____	_____
Patient (willing to just wait and see before reacting)	_____	_____	_____	_____
Frustrated (by lack of information and/or conflicting information)	_____	_____	_____	_____
Satisfied (with how my concerns and questions were addressed)	_____	_____	_____	_____
Other reactions:	_____			

6. How well do each of the following phrases describe your reaction to the first hearing test results?

	a lot like me	somewhat like me	not much like me	not at all like me
Shocked (I didn't know what I felt almost numb of feelings)	_____	_____	_____	_____
Sad (about what my child would be facing in life)	_____	_____	_____	_____
Guilty (feeling like my child's condition was my fault)	_____	_____	_____	_____
Blame (feeling that someone did something wrong to cause this)	_____	_____	_____	_____
Lonely (feeling that no one understood what I was feeling)	_____	_____	_____	_____
Accepting (willing to accept the fact of a hearing loss if necessary)	_____	_____	_____	_____

7. After receiving the results of your child's first hearing test, how much thought, if any, did you give to each of the following:

	a lot	some	very little	none
The general development of a child with a hearing loss	_____	_____	_____	_____
The language development of a child with a hearing loss	_____	_____	_____	_____
The intellectual development of a child with a hearing loss	_____	_____	_____	_____
The medical needs of a child with a hearing loss	_____	_____	_____	_____
The financial demands of a child with a hearing loss	_____	_____	_____	_____
How I would communicate with a child with a hearing loss	_____	_____	_____	_____
How I would parent a child with a hearing loss	_____	_____	_____	_____
What my child's overall future would be with a hearing loss	_____	_____	_____	_____
How I would get child care for a child with a hearing loss	_____	_____	_____	_____
How my relatives would react to a child with a hearing loss	_____	_____	_____	_____
How my personal goals would be affected by a child with a hearing loss	_____	_____	_____	_____