



# **SPEECH THERAPY FOR CHILDREN WITH HEARING LOSS: WHEN DOES IT END?**

**UNDERSTANDING THE PROCESS, PROGRESS, AND GOALS**

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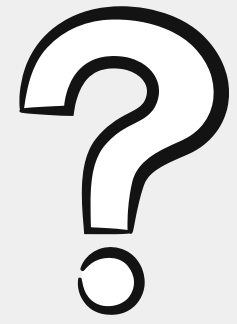
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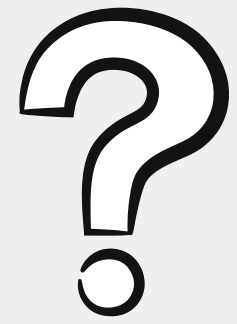
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CONCLUSION

## HOW SPEECH THERAPY IS FOR CHILDREN WITH HEARING LOSS?



Speech therapists can help children develop the skills they need to improve their communication abilities. This may include training them how to lip-read, use sign language, and/or improve their vocal production.



Speech therapists can train children how to make eye contact, take turns in conversations, and start/maintain friendships. Speech therapists also can help children with hearing impairments improve their reading comprehension and oral expression skills by engaging families to the process.



# IMPORTANCE OF EARLY INTERVENTION

1

Based on Early Hearing Detection and Intervention (EHDI) program, one of the first steps of auditory habilitation is to conduct high-quality audiologic diagnostic evaluations

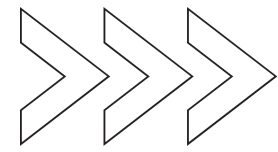
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Children need to be exposed to quality and frequent communication in their daily lives to optimally develop language and communication skills. These skills underpin socio-emotional wellbeing and improve long-term life chances of children with hearing loss.

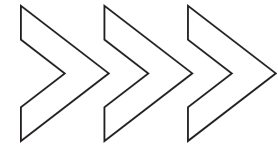
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Another major emphasis of the integrated care system is the engagement of parents, families and communities. These services aim to support the families of children with hearing loss and provide the children with role models for success in life.

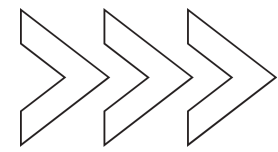
# The S.M.A.R.T. Goals of Speech Therapy



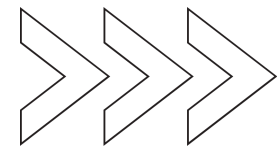
AUDITORY TRAINING BASED ON ERBER'S HIERARCHY



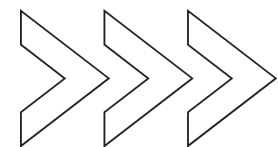
IMPROVED ARTICULATION AND SPEECH CLARITY.



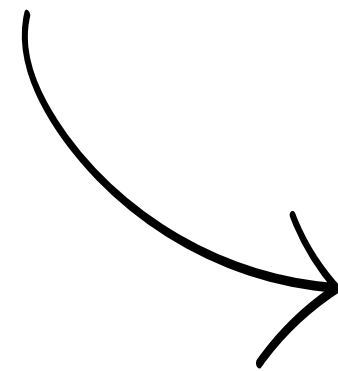
DEVELOPMENT OF AGE-APPROPRIATE LANGUAGE SKILLS (BOTH EXPRESSIVE AND RECEPTIVE).



EFFECTIVE USE OF COMMUNICATION STRATEGIES (E.G., AUDITORY ORAL/VERBAL THERAPY).



ABILITY TO ENGAGE IN CONVERSATIONS AND SOCIAL INTERACTIONS INDEPENDENTLY.



ONCE THESE MILESTONES ARE MET, THE NEED FOR REGULAR THERAPY DIMINISHES AFTER THE FIRST YEARS OF INTERVENTION

# FACTORS AFFECTING THE DURATION OF SPEECH THERAPY

1

The duration of treatment depends on severity of hearing loss and the age of diagnosis

2

If the child wears hearing aids or cochlear implants to develop his auditory processing skills

3

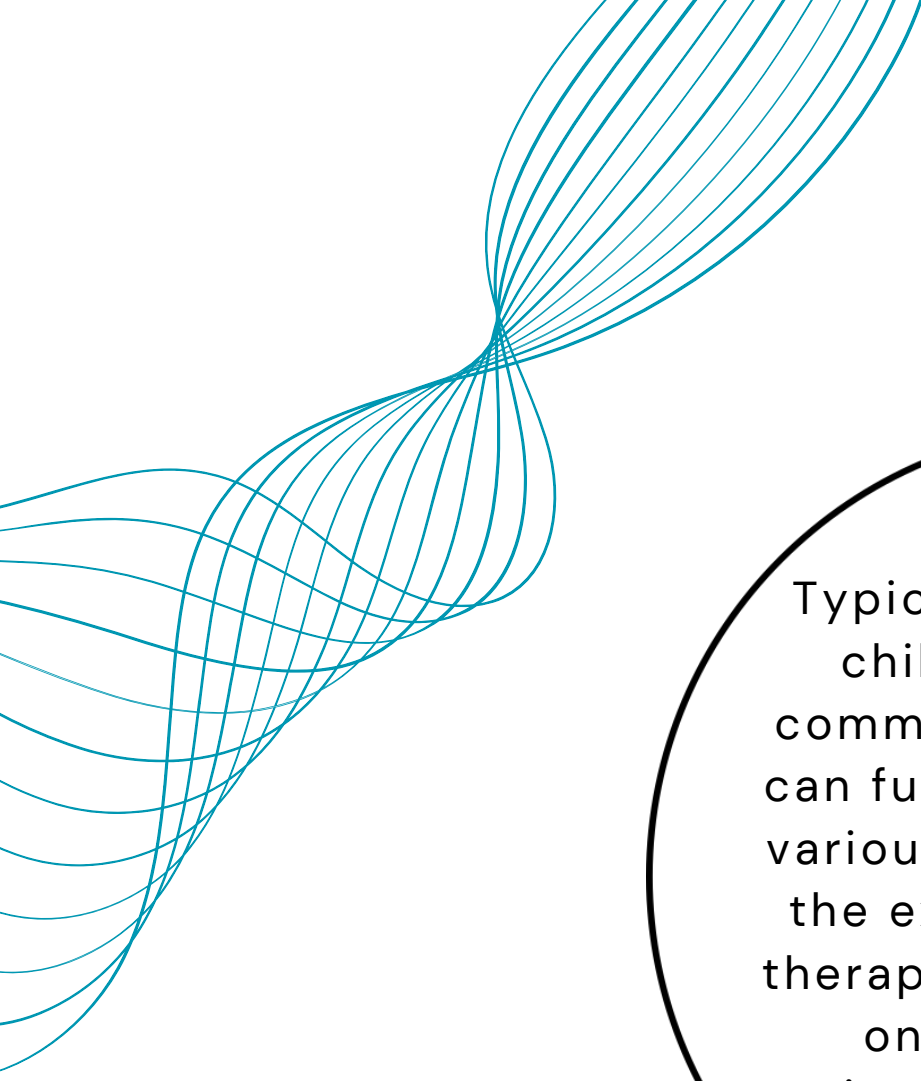
The support from home and school to build a rich linguistic environment suitable for "brain building"

## ASSESSING PROGRESS IN THERAPY

Regular assessments should be made based on speech and language milestones for each age and monitoring of improvements in communication skills through **interdisciplinary collaboration**. Direct communication with parents and teachers for feedback would also be good.



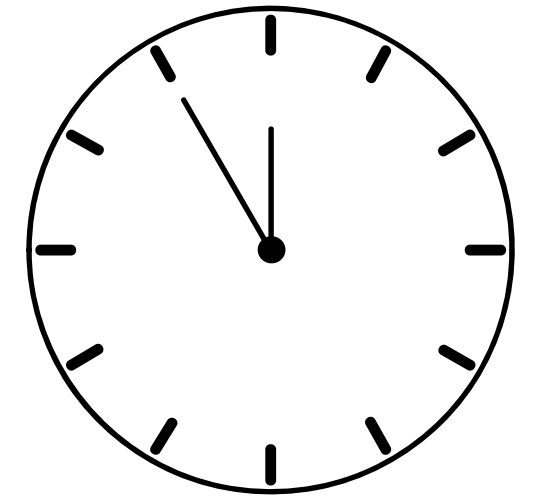
## BUT, WHEN SPEECH THERAPY ENDS?



Typically ends when the child meets specific communication goals and can function effectively in various settings. However, the exact point at which therapy ends varies based on several factors, including the child's individual progress.

Therapy may end when a child demonstrates effective use of hearing technology and achieves consistent communication skills across settings such as home, school, and social interactions.

children who start cochlear implants or amplification early (as young as six months) generally show better language development by age five, compared to those who start later







## THE ROLE OF THE FAMILY AND SCHOOL

Families and teachers can observe the child and note whether he/she can communicate successfully and does not need constant, intensive support.

Additionally they help with any residual or minor day-to-day difficulties that can be addressed without the need for regular therapy sessions.

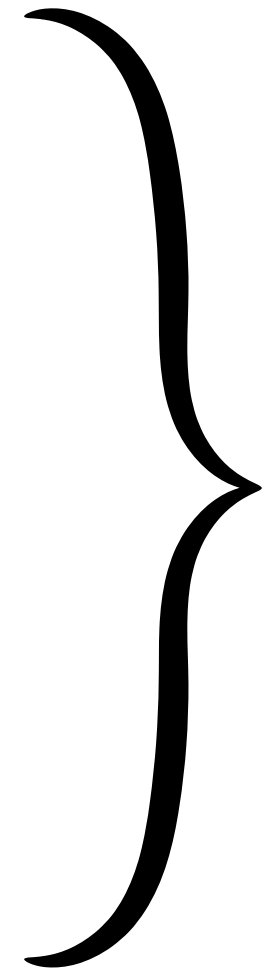
Involving family, teachers and peers in supporting speech therapy progress and skills at home and at school helps the child smoothly engage in language use and understanding

## LIFE AFTER SPEECH THERAPY

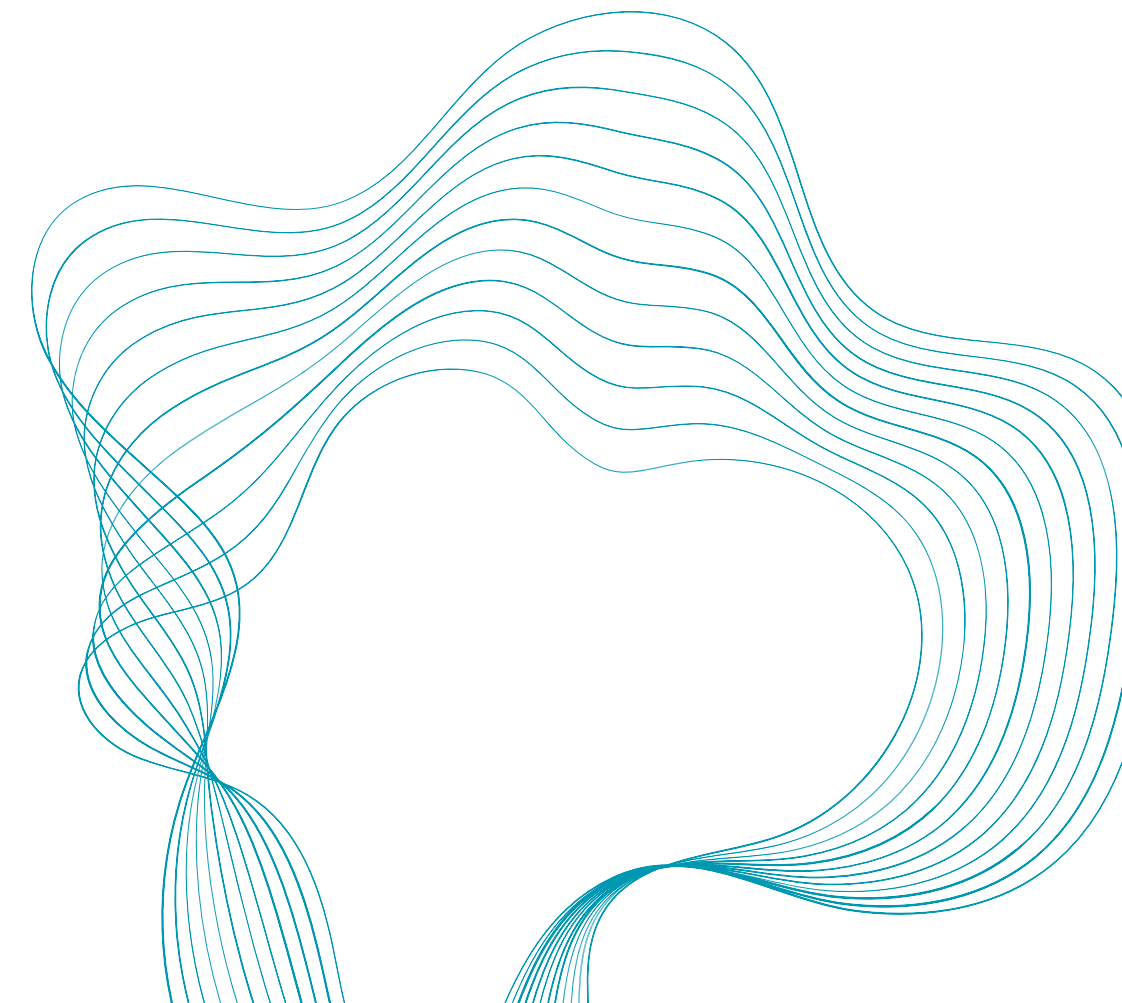
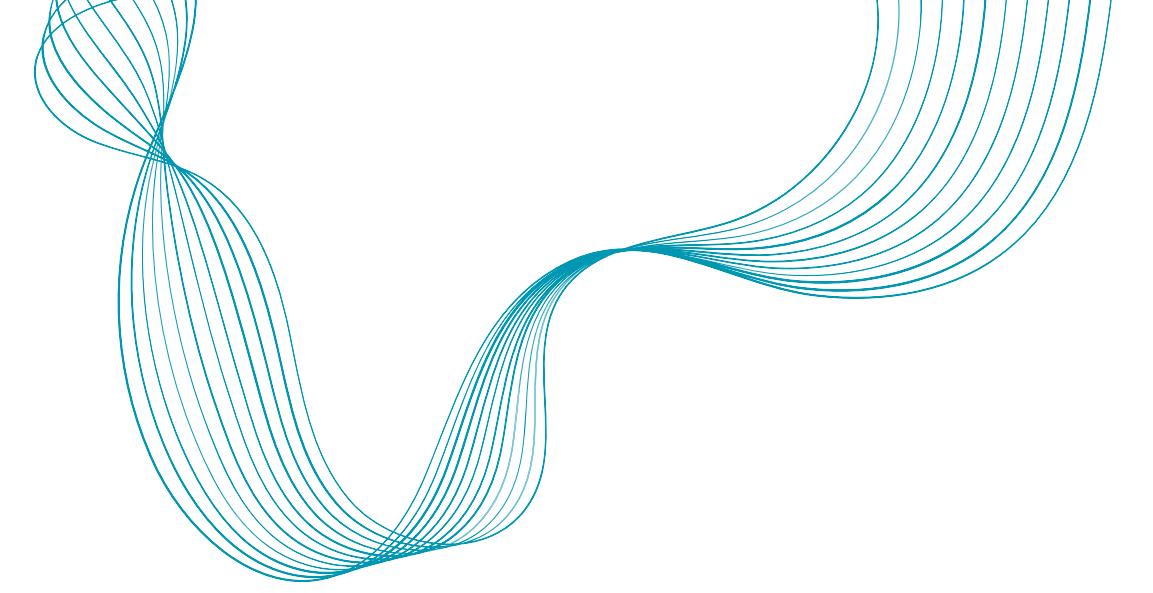
Even after formal therapy ends, there may be occasional check-ins to monitor progress or address any emerging challenges.

Some children might need periodic "refresher" sessions, particularly during critical transitions (e.g., entering a new school level).

Reshape language input, so the child will be able to receive qualitatively and quantitatively the necessary "brain building" information.



Ongoing communication practice, ability to follow assessments and use support services if needed are important.





**01**

Speech therapy for children with hearing loss is a journey that depends on multiple factors. The goal is to achieve independence in communication, but the duration and endpoint vary for each child.

**02**

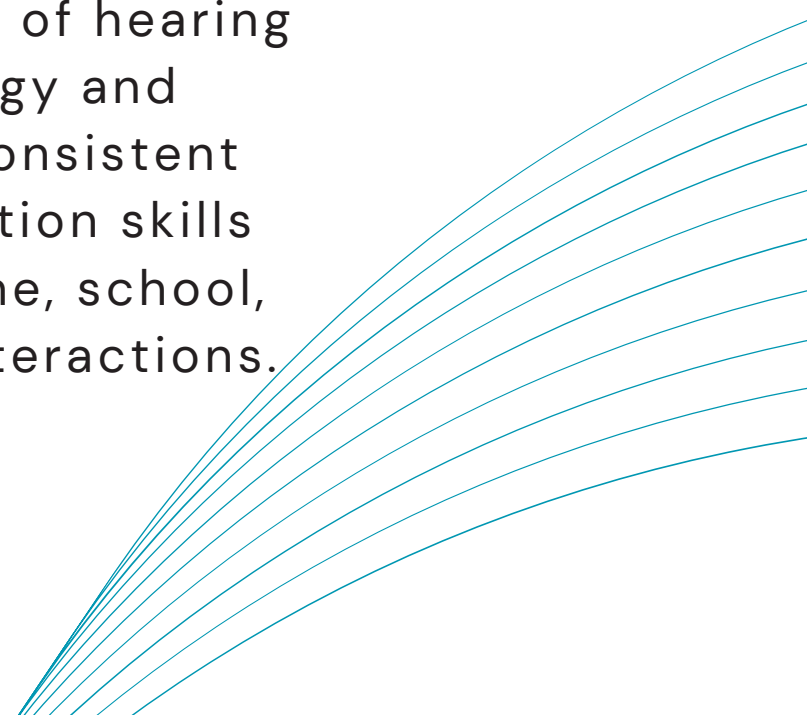
Speech therapy improving articulation, language comprehension, social communication, and listening skills.

**03**

With the early intervention children are exposed to quality and frequent communication in their daily lives to optimally develop their language and communication skills at school and home.

**04**

Therapy ends when a child demonstrates effective use of hearing technology and achieves consistent communication skills such as home, school, and social interactions.



## REFERENCES

<https://pubmed.ncbi.nlm.nih.gov/28864712/><https://pubmed.ncbi.nlm.nih.gov/10969127/><https://pubmed.ncbi.nlm.nih.gov/9794949/><https://pubmed.ncbi.nlm.nih.gov/17365061/><https://www.tandfonline.com/doi/abs/10.1179/146431506790560157>