Extensive research has shown that there are many measures for the successful habilitation of children with hearing loss. Professionals agree the most significant measure is life success – a direct reflection of educational achievement. We have long known that language development is a particular challenge for deaf and hard of hearing children. A child’s academic progress is directly linked to his or her underlying language skills.

Hearing loss affects children in many ways. Research has proven that vocabulary develops more slowly in children who have hearing loss. For example, it causes a delay in the development of receptive and expressive communication skills (spoken language skills). In turn, the language deficit causes learning problems that result in reduced literacy and academic achievement. These communication difficulties often lead to social isolation and a poor self-concept.

Most critically lacking in the intervention programming afforded to children with hearing loss is sufficient opportunity to practice targeted listening, language, and academic skills within meaningful, real-life contexts outside of therapy. Living and learning with hearing loss in this digital age places additional demands for the student with a hearing loss to acquire a level of competency in fully accessing and responding to information presented through multi-media sources. “Smarty Ears,” a company created in August of 2009 has been responding to information presented through multi-media sources.

Up until recently, speech therapists have been limited to ordering paper and pencil activities or creating their own materials for children with communication disorders. These materials are often expensive and static (quickly dated and useless by the vocabulary related to the time of publication). Smarty Ears adds one additional possibility to the market, which is the ability to instantly download materials on the iPad or iPod. These applications, in turn, have the potential of being periodically “updated” to accommodate the changing linguistic environment of our time.

Specifically valuable to children with hearing loss is the fact that the individual Smarty Ears programs obligate reciprocal interaction between the user (the child with a hearing loss) and his or her speech/auditory therapist and/or parent. Spoken communication by its nature requires verbal turn-taking or an active exchange of ideas between two or more conversational partners. This provides a definite advantage over other available computer games or educational software structured so that the child/student works independently. *In addition, children with communication disorders sometimes have reduced attention spans, making it difficult for improving their language or articulation skills. Smarty Ears adds the component of technology that children from this generation in particular love; increasing their attention span and making therapy, practice, and progress a much more intrinsic experience.

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With its 1001 ways to improve the life of any human being, the use of the iPad has also been a hot topic in the disability community. It is the combination of superb touch screen devices with the scientific knowledge and experience from a speech therapist that is making the difference for thousands of children with hearing loss and special needs around the world.
It is well documented in the literature that monolingual Spanish-speaking families are similar to English-speaking families with respect to: 1. parents talk more to daughters vs. son; 2. parents talk more to first-born; and 3. parents tend to use “closed ended” constructs and more verbal directives with children who have lost hearing compared to those with normal hearing. Approximately 15% of students in US schools come from primarily Spanish-speaking homes (NCES, 2010). However, in most US schools, instruction is conducted only in English and Spanish-speaking students face challenges in learning the expected academic skills (such as literacy and math) and learning English as a second language. This challenge is particularly difficult for the student with a severe to profound hearing loss that is fitted with a cochlear implant.

Methodology:

The purpose of this study is to obtain information regarding the parental input directed to both a child with a cochlear implant and a younger normal hearing sibling. It is predicted that there will be a difference in the maternal input directed to these siblings, e.g. with less sophisticated and more constructs requiring a yes/no response directed to the child with a hearing loss. LENA monitoring and transcription of a 24 hour period within the child’s home will be obtained prior to direct instruction/intervention to the Spanish-speaking parent regarding specific expansion techniques. A second 24 hour monitoring session will be transcribed following the instructional/intervention programming.

Expected Results:

It is expected that more open-ended maternal input will be documented. In addition, changes in child’s English and Spanish verbal proficiency will be specifically, increased lexical diversity and linguistic complexity (w/increased parental expansion strategies).

An increase in word count, turn-taking, and complex linguistic forms is anticipated. The findings of this pilot will guide the formulation of more extensive IRB investigation of the benefit to different bilingual home environments (including Russian, Mandarin, Cantonese, Arabic, Italian and Wolof, e.g. representative of the caseload followed by the NYEE-Ear Institute’s hearing habilitation program).

Applications are now being accepted for The Susan Cheffo Memorial Scholarship

This scholarship will be given to a hearing impaired student who is a cochlear implant user and was born deaf and enrolled full of 2012. If you are determined to overcome the challenges of hearing loss and strive to achieve academic success, please contact Myrna Farrell at 646-438-7819 or mfarrell@nyee.edu to request a copy of the scholarship guidelines and application. Deadline for submitting applications is Friday, June 8th.

If you would like to donate to the Scholarship Fund in honor of Susan, please make checks payable to The Children’s Hearing Institute and reference Scholarship Fund in the memo or visit the Susan Cheffo Memorial Scholarship page to donate online at http://www.childrenshearing.org/custom/susan-cheffo.html.

Brendan Borowsky and Cub Scout Pack 146 raise money for The Children’s Hearing Institute

Our Lady of Sorrows Cub Scout Pack 146 in White Plains recently raised money playing bingo to donate to a charity of their choice. The Cub Scout pack visited The Children’s Hearing Institute website and viewed the 25th Anniversary Documentary that describes the services and programs that benefit hearing impaired children and their decision was made.

Brendan, age 10, was diagnosed with a hearing loss at age 1 and received his first cochlear implant at age 2 and his second implant at age 5 by surgeon, Dr. Ronald Hoffman at the Children’s Hearing Institute. His hard work and perseverance has shown him how to overcome any obstacle that gets in his way. Today, Brendan is an outgoing energetic boy and fully mainstreamed in 4th grade at The Our Lady of Sorrows School.

Brendan says, “I am thankful for everything that CHI does for hearing impaired children – especially me. I am doing great, studying hard and having fun everyday!”

The Children’s Hearing Institute is proud to have generous friends like Brendan and Cub Scout Pack 146. On behalf of all the children who depend upon our services, we thank you for your thoughtful donation.

The Children’s Hearing Institute partnered with the New York Mets to sponsor Deaf and Hard of Hearing Awareness Day at CitiField on Saturday, September 24th. The Institute provided over 800 free tickets to the patients of the Cochlear Implant/Hearing & Learning Center at The New York Eye & Ear Infirmary as well as several other deaf and hard of hearing programs in the New York City metro area.

On Sunday, October 2nd, The Children’s Hearing Institute also sponsored a team for the Hearing Loss Association of America – Walk4Hearing in Riverside Park. Patients, friends and families who joined the CHI Walk Team to end the stigma of hearing loss and provide support and resources for hearing loss prevention and awareness programs.

“Sister Crafts” donates proceeds to The Children’s Hearing Institute

Serena and Sofia were both born with Levy-Yeboa Syndrome, a rare congenital, multi-symptom disorder. One particular symptom of this syndrome is loss of hearing (neural deafness). Both Serena and Sofia, hearing impaired since birth, had their hearing restored with a cochlear implant and are doing extremely well. They attend Our Lady of Grace Catholic School in Brooklyn, are members of the Girl Scouts, and enjoy Hip Hop classes at their local Dance School.

“Both girls are like every other pre-teen. They enjoy their friends, music, pop stars and are very fashion forward!” says their Mom, Christine Latuiga. “We always teach our children to be thankful for all they have and that the greatest gift is not to receive but to give.”

The Children’s Hearing Institute is very grateful for this donation and thank Serena and Sofia for their giving spirit. We wish them all the best on their future projects.
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Methodology:
The purpose of this study is to obtain information regarding the parental input directed to both a child with a cochlear implant and a younger normal hearing sibling. It is predicted that there will be a difference in the maternal input directed to these siblings, e.g. with less sophisticated and more simplistic conversational turns using English and Hispanic as a second language. This challenge is particularly difficult for the student with a severe to profound hearing loss that is fitted with a cochlear implant.

Expected Results:
It is expected that more open-ended maternal input will be documented. In addition, changes in child’s English and Spanish verbal input will be specifically, increased in lexical diversity and linguistic complexity (e.g. increased parental expansion-breathes). An increase in word count, turn-taking, and complex linguistic forms is anticipated. The findings of this pilot will guide the formulation of more extensive IRB investigation of the benefit of different bilingual home environments (including Russian, Mandarin, Cantonese, Arabic, Italian and Wolof, e.g. representative of the case load followed by the NYEE-Ear Institute’s hearing habilitation program).

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Up until recently, speech therapists have been limited to ordering paper and pencil activities or creating their own materials to be used for children with communication disorders. These materials are often expensive and static (quickly dated and useless by the vocabulary related to the time of publication). Smarty Ears adds one additional possibility to the market, which is the ability to instantly download materials on the iPod or iPad. These applications, in turn, have the potential of being periodically “updated” to accommodate the changing linguistic environment of our time. Specifically valuable to children with hearing loss is the fact that the individual Smarty Ears programs obligate reciprocal interaction between the user (the child with a hearing loss) and his or her speech/auditory therapist and/or parent. Spoken communication by its nature requires verbal turn-taking or an active exchange of ideas between two or more conversational partners. 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