

How to Know if You and Your Child has a Qualified Auditory-based Therapist

An auditory-based therapist can consist of three professionals: audiologist, speech-language pathologist and/or a teacher of the hearing impaired. However, it is important to know that not everyone in these professions has received training and/or has experience in developing spoken language through listening. As parents, **you are the most important advocates for your child**. You must ensure that the therapist/teacher working with your child is qualified. The following are questions to help:

1. Is the therapist focused on helping the child acquire and use auditory information, and does the therapist expect the child to gain most information through listening?
Does the therapist:
 - Draw the child's attention to new and novel sounds?
 - Include different types of listening activities, use whispered speech and tape-recorded speech and music, help your child discriminate sounds and speech in noisy and quiet environments
 - **Observe and coach you as you speak to or work with your child, pointing out problems and solutions and teaching you how to make sound meaningful to your child all day long**
2. Is the therapist aware of how the environment affects listening?
Does the therapist:
 - Explain how background noise can interfere with understanding
 - Instruct you about how to care for and maintain hearing aids/ FM systems/ cochlear implant, check batteries and do listening checks?
 - Require your child be seen for periodic checks of the hearing technology?
 - Suggest that family members become good monitors of the auditory environment and support the attitude that parents expect the child to hear?
 - Work to help the child be aware of his/her own voice so that they work to match what he/she says with he/she hears others say
3. Does the therapist encourage the parent to think of the child's speech and language in terms of normal development?
Does the therapist:
 - **Talk naturally with the child, speaking without exaggerated facial movements (especially mouth and tongue) and without sign language?**
 - Emphasize the sounds of speech in games of vocal play the way that mothers do with infants who hear normally?
 - Have high expectations for the child to eventually learn to follow speech through his/her hearing aids or cochlear implant and learn to talk?
 - Use auditory age-appropriate language?
 - Use natural expressions appropriate to the child's age and language level?
 - Use familiar books, nursery rhymes, songs, and other culturally based materials in therapy?

- Have knowledge of the levels of normal developing speech and language and base explanations of your child's progress on these developmental models?
 - Explain language, speech, and listening in **parent-friendly language**?
 - Understand, use and **teach** effective listening strategies, such as pausing in expectation of hearing something meaningful.
 - Encourage the your child to use babbling and jargon as normal hearing infants do, rather than push the child to imitate speech sounds, syllables or words?
 - Help your child participate educationally and socially with children who have normal hearing by supporting them in regular education classes
4. Does the therapist have a good understanding of how children learn through their hearing?
Does the therapist:
- Note instances when your child has perceived some meaningful aspect of sound and draw this to the parent's attention
 - Encourage the child to develop an auditory memory for familiar sounds in the environment and familiar voices, and provide opportunities to use developing auditory memory skills?
 - Avoid touching or tapping the child to obtain his or her attention and speaking to your child even when his/her eyes are focused away from the clinicians' face
 - Repeat a message auditorily, if vision was first needed to gain the child's attention or used to help the child understand?
5. Does the therapist demonstrate a positive relationship with parents, family and child and is the therapist concerned about developing a healthy, informative, and supportive parent guidance program?
Does the therapist:
- Encourage you to ask questions regarding what the therapist is doing without making you feel uncomfortable?
 - Encourage parents to meet other families and adults who live with profound hearing loss?
 - **Discuss weekly goals in terms of long-term goals so that parents understand how auditory processes are developed over time?**
 - Encourage parents to be objective about their child and his/her program and discourage feelings of dependency upon the therapist?
 - Explain all these things in words that you understand?

*Adapted from:

A Parent's Guide to Auditory-Verbal Therapy, The Auditory-Verbal Network, Inc., Denver, CO, 1988

50 Frequently Asked Questions about Auditory-Verbal Therapy, response by Marian Ernst, M.A., CCC-SLP-A, Cert. AVT, Edited by W. Estabrooks