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What is meant by the auditory-verbal approach?

The goal of auditory-verbal practice is for children who are deaf or hard of hearing to grow up in "typical" learning and living environments that enable them to become independent, participating, and contributing citizens in an inclusive mainstream society.

The auditory-verbal philosophy supports the basic human right that children with all degrees of hearing loss deserve an opportunity to develop the ability to listen and use verbal communication within their own family and community constellations.

The auditory-verbal philosophy follows a logical and critical set of guiding principles that outline the essential requirements needed to increase the likelihood that young children who are deaf or hard of hearing can be educated to use even minimal amounts of residual (remaining) hearing. Use of amplified residual hearing permits these children to learn to listen, to process verbal language, and to speak.

The principles of auditory-verbal practice are:



1. Working toward the earliest possible identification of hearing loss in infants and young children, ideally in the newborn nursery. Conducting an aggressive program of audiologic management.



2. Seeking the best available sources of medical treatment and technological amplification of sound for the child who is deaf or hard of hearing as early as possible.



3. Helping the child understand the meaning of any sounds heard, including spoken language, and teaching the child's parents how to make sound meaningful to the child all day long.



4. Helping the child learn to respond and to use sound in the same way that children with normal hearing learn.

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5. Using the child's parents as the most important models for learning speech and spoken communication.

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6. Working to help children develop an inner auditory system so that they are aware of their own voice and will work to match what he or she says with what they hear others say.

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7. Knowing how children with normal hearing develop sound awareness, listening, language, and intellect and using this knowledge to help children with hearing impairments learn new skills.

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8. Observing and evaluating the child's development in all areas. Changing the child's training program when new needs appear.

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9. Helping children who are deaf or hard of hearing participate educationally and socially with children who have normal hearing by supporting them in regular education classes.

(The 1991 Auditory-Verbal International organization developed these principles of Auditory-Verbal practice based on the work of Pollack, 1970, 1985.)

Who can use this option?

The auditory-verbal option is an early intervention strategy. It is not a set of principles

for classroom teaching. The purpose is to teach auditory-verbal principles to the parents of very young children who are deaf or hard of hearing. Therefore, any family with a young child, regardless of the severity of the hearing loss, can choose the auditory-verbal option. As with all early intervention programs, the younger the child is identified as being deaf or hard of hearing, the better. All children in auditory-verbal program will need comprehensive and aggressive audiologic management. In the United States, the auditory-verbal approach is usually conducted by private clinics, therapists, and programs, although some publicly funded projects embrace auditory-verbal principles.

What are the benefits of this option?

The majority of parents of children who are deaf or hard of hearing have hearing within normal limits. Parents in auditory-verbal programs therefore do not need to learn sign language or cued speech. In auditory-verbal intervention programs, parents are returned their natural parenting role. Auditory-verbal therapy sessions typically address speech, language, and auditory goals with the therapist working in partnership with the parents so that the parents can model communication strategies with their child throughout the child's daily life.

Results of a study of graduates of auditory-verbal programs in the United States and Canada (Goldberg & Flexer, 1993) showed that the majority of the respondents were integrated into "regular" learning and living environments. Graduates often had been mainstreamed in their local schools, attended post-secondary institutions that are not specifically designed for persons who are deaf or hard of hearing, and were involved in typical community activities. In addition, reading skills of auditory-verbal children have been demonstrated to equal or exceed those of their hearing peers (Robertson & Flexer, 1993).

What are the limitations of this option?

The auditory-verbal approach depends highly on parental involvement. It is not a classroom approach but a style of interaction between parent and child. If the parents are unable to commit to the intensity of involvement required, then the child may not make as much progress as she or he could. Further, the auditory-verbal centers and practitioners usually are found in areas of denser population and may not be easily accessible to families in rural and remote areas. Finally, many auditory-verbal centers are not supported by public funds, so a fee for services may be requested, although scholarships may be available.



What are some questions to ask before choosing this option?

As with any intervention option, the method selected must match the family's needs versus one selected by well-meaning professionals. The most important question for parents would then be, "Is the auditory-verbal approach right for my child and our family?" The parent might ask such questions as:

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- 1. How much time will be involved at the center and at home?
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- 2. Where is the closest auditory-verbal center located, and will I be able to get there consistently?
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- 3. What is the relationship between the center or therapist and the school my child will attend in the future?

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Auditory-Verbal International, Inc. (AVI) is an international organization of parent and professional members. AVI advocacy for the choice of listening and speaking for children who are deaf or hard of hearing through education, and family support. The organization's quarterly newsletter is "The Auricle," and separate parent and "Kids Only" publications are available to members. Additional information about the auditory-verbal approach is available from:



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