



# Management of unilateral hearing loss



## MANAGING UHL IN CHILDREN

Currently, there is no high-quality evidence on how best to manage unilateral hearing loss in children. However, there are some published guidelines to help families make decisions<sup>14</sup>.

There are four areas of management for children with unilateral hearing loss:

### Audiological monitoring

Make sure your child gets regular hearing tests. It's a good idea to have their hearing tested once a year. Important transition times, like before they start school and high school, are also a good time to talk to your audiologist at Hearing Australia about your options. The audiologist can do functional assessments to see if your child's hearing loss affects their everyday listening and if a listening device could help. Your audiologist can also recommend tactics and strategies to help manage the impact of UHL. If you're worried about your child's hearing, always contact your audiologist.

### Developmental monitoring

Regular monitoring of speech, language and developmental milestones is recommended for all children with UHL. Your paediatrician can monitor your child's growth and development, and any ongoing health needs. If there are concerns about your child's language development, a speech pathologist or your early intervention service provider can assist with more comprehensive speech and language tests to identify any issues.

## Early intervention

Early intervention provides services to families to help their children to get the best start in life. Family-centred early intervention recognises that children learn best through everyday activities and interactions within their natural environments. By incorporating learning into daily routines, such as playtime, mealtime, and family outings, families can support their child's development in meaningful and practical ways.

The best time to start early intervention is now. Family-centred services can help you understand hearing loss and language development, and gain confidence as a parent of a child with UHL. Early intervention programs for children with hearing loss should regularly monitor your child's language and overall development.

## Technology management

There are a number of listening devices, which may enhance your child's listening experience, including hearing aids, Remote Microphone or FM systems, implantable devices such as cochlear implants, and soundfield systems. Each option has different applications, as well as their pros and cons. It's important to note that there is no clear evidence on which children with UHL would benefit from a listening device, when a child with UHL should be provided with a listening device, or what type of device is optimal. Your audiologist at Hearing Australia will provide you with information on possible technology solutions for your baby, consider their listening needs and difficulties, and guide and support you in whatever decision you make about fitting a device.

If you decide against a hearing aid now, you can always review your child's needs with Hearing Australia in the future. And vice versa: you may decide to trial a hearing aid but feel there are no noticeable advantages for your child at this time, and discontinue its use. Keep in mind that you can revisit options in the future as the listening demands of your child changes with age.

# MAKING DECISIONS

Parents make all kinds of decisions throughout the life of their child. As the parent of a child with UHL, these decisions may be about choices that are new to you. Most families know little about hearing loss when their child is diagnosed, and it can be a big learning curve.

Knowing you're making the right choices at the right time can often be clouded by stress or the differing views of professionals, family and friends. The amount of information given to you can be overwhelming, given the complex nature of many issues. How can you make the right choices?

## Shared decision-making

Families have the right to make decisions regarding the care that best suits the needs of their child and family. Every family is different, and your choices should reflect your family's desires, beliefs and values. Decisions should balance the needs of the whole family.

You do not need to make these decisions on your own. Your relationship with the professionals looking after your child is important—it should be a partnership between two experts. The professionals are experts on hearing loss; you are the expert on your child, their needs and personality, and your family's circumstances. Through a process of shared decision-making, you can work together with the professionals to make a decision. You will share information, discuss options, and decide the best plan based on your preferences and professional advice.

## Becoming informed

Reliable information is crucial if you are to make an informed decision. There are many ways for you to find the information you need:

- Face-to-face discussions with professionals and service providers
- Written information
- Talking to other parents with a child with UHL
- Websites, blogs, online groups
- Discuss your options with family and friends.

Wherever you find information, it must be reliable, up-to-date, and based on quality research. Research about UHL may not be conclusive, and you may not be able to find definite answers.

The information you get from other parents may not be based on research but on the 'lived experience.' While this insight can be valuable in understanding how a particular option may impact your child and family, it's important to remember that their perspectives may be influenced by their own views and experiences. Therefore, you shouldn't rely solely on this information. What works for one child and family might not be the best choice for another. It's advisable to compare their experiences with information from other sources and seek the guidance of professionals responsible for your child's care.

You should feel confident that you understand the information and what each option means for your child and family now and in the future before making any decisions. Don't be afraid to ask questions – there is no such thing as a silly question. When someone uses words or concepts you don't understand, ask the person to explain what they mean. Parents who actively participate in decision-making by asking questions, giving their opinions, and expressing concerns tend to make better decisions.

## Comparing options

- What are the options?
- How effective would each option be for my child?
- What are the possible benefits and risks of each option for my child?
- Can I delay making a decision until my child is older?
- How much time do we have to make a decision?
- How do I get support to help me make the right decision for my child and family?



## Making decisions is not always easy

Making decisions can be challenging, and it can be tempting to think that professionals know best. The professionals are the experts in their area and sometimes have strong views about different options, which can be confusing and difficult at times. However, as a parent, you know your child and family's situation better than anyone else. The choices you make should be right for your child and family. If you need more time or more information, the professionals should help and support you.

Decisions are not set in stone. As your child grows and develops, your understanding of their needs could change, and new choices might be necessary. Choices that are right when your child is young may no longer be appropriate as they grow. A professional can help you re-evaluate your options, and support and guide you in making new decisions for the next stage of your child's life.

## WHAT TO EXPECT FROM A HEARING AID

Because babies with a UHL have normal hearing in one ear and are likely to respond to a wide variety of sounds, it can be difficult to observe changes related to hearing aid fitting. Depending on the degree of unilateral hearing loss, the most noticeable change is likely to be an improvement in the baby's ability to correctly identify the source of a sound. Keep in mind that very young babies' responses, even with normal hearing in both ears, are subtle.

The responses of older children also vary. Children diagnosed with UHL when they are older may not always be compliant with hearing aid use. Their brain may need time to adapt to the new sounds, and you may need to show some patience and perseverance with them. Encourage them to start using the hearing aid at home, in a quiet environment, and gradually increase the amount of time and places where they wear the hearing aid.

Older children may also worry about the appearance of the hearing aid. Your response to the hearing aid will impact how your child feels about wearing it. If you fuss about hiding the hearing aid with their hair, or remove it for photos or special occasions, you may be giving them the message that the hearing aid is something to be hidden, which can result in a reluctance to wear it.

The most successful hearing aid users understand why they need a hearing aid and can explain their hearing loss to others confidently. Teach your child to politely explain why they need a hearing aid.

# PRACTICAL CONSEQUENCES OF CHOOSING A TECHNOLOGY OPTION

	UNAIDED	HEARING AID	COCHLEAR IMPLANT
DAILY ROUTINE	Nothing specific.	The child wears the device for most waking hours.  Daily checks that the aid is working.  Charging and changing batteries.	The child wears the implant for most waking hours.  Daily checks that the implant is working.  Charging and changing batteries.
TESTS & APPOINTMENTS	Respond early if any change in hearing is noticeable in either ear.  Annual visits to the audiologist for ongoing monitoring.  Regular speech and language assessments.	Frequent impressions for the ear mould in babies.  Six-monthly or annual visits to the audiologist for ongoing monitoring.  Regular speech and language assessments.	Multiple visits to the audiologist for mapping (fine-tuning) the implant after surgery.  Six-monthly or annual visits to the audiologist for ongoing mapping and monitoring.  Regular speech and language assessments.
COSTS	Costs for audiology are covered by Hearing Australia.  Speech and language assessments might incur a cost.	Cost for hearing tests and device, repairs, maintenance and upgrading of device is covered by Hearing Australia until aged 26 years.  Speech and language assessments might incur a cost.	Funding for cochlear implants varies. Speak to your cochlear implant team about any out-of-pocket expenses.  Speech and language assessments might incur a cost.

	UNAIDED	HEARING AID	COCHLEAR IMPLANT
EDUCATION	<p>A listening device might be beneficial in learning environments.</p> <p>Captions are recommended for all audio-visual materials.</p>	<p>Remote microphone system or other assistive technology might be needed in learning environments.</p> <p>Captions are recommended for all audio-visual materials.</p>	<p>Remote microphone system or other assistive technology might be needed in learning environments.</p> <p>Captions are recommended for all audio-visual materials.</p>
EXERCISE & ACTIVITIES	<p>No restrictions on activities.</p> <p>Teach child about safety with unilateral hearing loss.</p> <p>Helmets should be worn for sports where a helmet is recommended.</p> <p>Communication tips for coaches and team mates might be beneficial.</p>	<p>Hearing aids are not waterproof and can't be worn for swimming and other water activities.</p> <p>Hearing aids can be worn for other sports.</p> <p>Helmets should be worn for sports where a helmet is recommended.</p> <p>Communication tips for coaches and team mates might be beneficial.</p>	<p>Water sports can be enjoyed as long as the processor is removed.</p> <p>Cochlear implant processors can only be worn in water with appropriate accessories to keep them waterproof.</p> <p>Contact sports (rugby, karate, boxing, etc.) are not advised with or without the processor.</p> <p>Helmets should be worn for sports where a helmet is recommended.</p> <p>Communication tips for coaches and team mates might be beneficial.</p>
LIFELONG CONSIDERATIONS	<p>A device can be considered at any stage.</p>	<p>Future funding for listening devices can't be guaranteed. There are lifelong cost implications for devices, repairs and batteries that should be factored into future financial planning.</p>	<p>Future funding for cochlear implants can't be guaranteed. There are lifelong cost implications for upgrades, repairs and batteries that should be factored into future financial planning.</p>

# BABIES AND HEARING AIDS

If you decide on a hearing aid for your baby, there are couple of initial challenges:

Stopping it whistling, and  
Keeping it on!

## Challenge #1

When the ear mould doesn't fit well, sound escapes from the ear canal and is picked up by the hearing aid microphone, emitting an unpleasant whistling or squealing sound that you will hear. This is known as feedback.

The ear mould, which sit in the ear canal and transmit sound from the hearing aid, may need frequent replacement in the early months due to the rapid growth of babies' ear canals. This involves the audiologist taking an impression of the ear canal and sending this off to the ear mould manufacturers. The new ear mould can be posted to you. The ear mould comes with longer tubing than is necessary, so you'll need to carefully trim the tubing to the correct length for your baby. The audiologist can show you how to do this the first time.

Applying some ear mould lubricant (available from Hearing Australia) around the mould can help stop the whistling by creating a better seal and reducing feedback. If you are still experiencing feedback even with new ear moulds, contact your audiologist, as they may be able to troubleshoot further.

## Challenge #2

The second challenge is keeping the hearing aid on as the baby grows, as they tend to pull them out and often put them in their mouths. This can be frustrating, particularly when you aren't around to see where the hearing aid has disappeared. Hearing aids have small batteries and although the battery case door is tamper-proof, it's important to avoid the possibility of your baby accidentally swallowing a battery or an ear mould. A swallowed battery is a medical emergency.



To keep the hearing aid in place, some parents use pilot caps made from soft fabric that fit snugly over the ears and tie under the chin. These caps make it more difficult for the child to remove the hearing aid. They can be purchased at a number of the early intervention services. Retention lines attaching to your baby's clothing from their hearing aid can help prevent loss or misplacement. Your Hearing Australia audiologist can help you with obtaining suitable retention options.

| Your baby will grow out of this phase and it's worth persisting if you have decided on using a hearing aid. |

# FUNDING FOR CHILDREN WITH UHL

The Australian Government provides funding to support the development and hearing needs of children with hearing loss. All young children with UHL are eligible to receive services and support from Hearing Australia and the National Disability Insurance Scheme (NDIS). The specific support your child receives will be tailored to their individual needs and the choices you make regarding the management of your child's hearing loss.

## About Hearing Australia

Hearing Australia is a Commonwealth Government Authority and provides a comprehensive range of hearing services for children and young people up to 26 years of age, at no cost to families. These services include:

- Detailed hearing assessments for children of all ages
- Fitting of the latest hearing aid technology when appropriate
- Providing additional devices such as remote microphones when needed
- Evaluating the effectiveness of your child's hearing aid and other devices
- Regular monitoring of each child's hearing and hearing aid benefit
- Replacing and updating of devices as necessary
- Supplying batteries, replacement parts, repairs and device upgrades.

## About the National Disability insurance Scheme (NDIS)

The NDIS funds disability services and supports across Australia, offering individualised support for people with significant and permanent disabilities, as well as their families and carers. The NDIS is designed to give people with disability greater choice, control and flexibility in managing their support services. Assistance from the NDIS is not means tested and doesn't impact on income support.

The National Disability Insurance Agency (NDIA) is an independent statutory body and responsible for implementing the National Disability Insurance Scheme (NDIS).

## Early childhood approach

The NDIS supports an early childhood approach, providing children with disability under the age of 9 with the best possible start in life. Access to the NDIS is facilitated by early childhood partners—local organisations funded by the NDIS to deliver the early childhood approach. These teams of professionals have specialist skills in early childhood intervention, although not necessarily in hearing loss.

## The funding pathway

### Step 1: Diagnostic audiology to Hearing Australia

After diagnosing your child's hearing loss, the hospital audiologist will refer you to Hearing Australia.

### Step 2: Hearing Australia to the National Disability Insurance Scheme

Hearing Australia will assist you with applying for access to the NDIS and with connection to your local Early Childhood Partner. The audiologist at Hearing Australia will start the NDIS application process by forwarding evidence of your child's hearing loss to the National Disability Insurance Agency (NDIA), with your consent.

### Step 3: NDIS early childhood partner

Your local early childhood partner will then contact you to discuss your child's support needs and assist with the NDIS application if needed. Once NDIS eligibility is confirmed, you will receive written confirmation that your child is an NDIS participant.

An NDIS planner should contact you within two weeks to discuss and approve your child's NDIS plan, which will include funding for necessary and reasonable support services. Once the plan is approved, you can begin using the NDIS-funded supports with your chosen providers immediately.

### Step 4: Early intervention provider

Each state and territory has early intervention providers specialising in services for children with hearing loss. Your NDIS early childhood partner can help you explore your options.



Aussie Deaf Kids is a registered charity with the Australian Charities and Not-for-profits Commission (ACNC).

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