Auditory-Verbal Practice Today: A Shifting Paradigm

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Renaissance man and mentor of many of today’s auditory-verbal professionals, Dr. Daniel Ling, wrote that “auditory-verbal practice… developed as a result of the natural outcomes of advances in knowledge, skills and technology. As such advances occurred, new treatment strategies were devised to maximize their applications”. Auditory-verbal practice is rapidly becoming widely accepted because more children are acquiring, or have already acquired the ability …… to use spoken language……… to interact more freely with other members of society………to obtain higher levels of academic education, to have a more extensive range of careers, a greater security of employment and fewer limitations on the personal and social aspects of their lives.” (Estabrooks, 2006).

Today, the ongoing pursuit of science and artful Auditory-Verbal practice continue to yield greater possibilities than ever before for children who are born hearing impaired or who acquire hearing impairment in early childhood. These children and their parents are transforming “a grey world of silence into a colorful world of sound”. (MacIver-Lux, 2005).

Most of these children are learning to listen to their own voices, listen to the voices of others and listen to all the other sounds of life. By learning to listen, they are learning to talk. By learning to listen and talk, they are learning to communicate in spoken conversations. By learning to listen and talk they are learning to read and write. By learning to listen and talk, they are achieving the dreams of an abundant academic and social life held for them by their parents.

Through universal newborn screening programs, advanced hearing technology and family-centred education and therapy, most children who are hearing impaired, can benefit greatly from Auditory-Verbal therapy* and Auditory-Verbal education.* Globally there is a great shift towards listening and spoken language for children who are deaf and hard of hearing. Recently through scientific study, it was found that auditory-verbal programmes and auditory-oral programmes had much more in common than in difference. Subsequently, in June, 2008, the AG Bell Academy for Listening and Spoken Language developed the following position paper* to describe the work of the professional community (printed by permission).

Listening and Spoken Language Specialists

Listening and Spoken Language Specialists (LSLS) help children who are deaf or hard of hearing develop spoken language and literacy primarily through listening.
LSLS professionals focus on education, guidance, advocacy, family support, and the rigorous application of techniques, strategies, and procedures that promote optimal acquisition of spoken language through listening by newborns, infants, toddlers, and children who are deaf or hard of hearing.

LSLS professionals guide parents in helping their children develop intelligible spoken language through listening and coach them in advocating their children’s inclusion in the mainstream school. Ultimately, parents gain confidence that their children will have access to the full range of educational, social and vocational choices in life.

**Listening and Spoken Language Approaches**

The two main Listening and Spoken Language approaches, historically, have been the Auditory-Verbal Approach (AV) and the Auditory-Oral Approach (A-O). Today, as a result of advances in newborn hearing screening, hearing technologies, early intervention programs and the knowledge and skills of professionals, these two approaches have more similarities than differences and they lead to similar outcomes.

The AG Bell Academy for Listening and Spoken Language certifies Listening and Spoken Language Specialists (LSLS).

Currently, the designations of the LSLS certification program are:

**LSLS Cert. AVT (Certified Auditory-Verbal Therapist) and LSLS Cert. AVEd (Certified Auditory-Verbal Educator)**

The LSLS must provide services in adherence to the A G Bell Academy Code of Ethics and the Principles of Auditory-Verbal Therapy or the Principles of Auditory-Verbal Education (available in the LSLS Candidate Handbooks and online at www.agbellacademy.org).

**Listening and Spoken Language Practice**

Listening and Spoken Language Specialists have similar knowledge and skills and work on behalf of the child and family.

The LSLS Cert. AVT works one-on-one with the child and family in all intervention sessions.

The LSLS Cert. AVEd involves the family and also works directly with the child in individual or group/classroom settings.

The LSLS Cert. AVT and the LSLS Cert. AVEd both follow developmental models of audition, speech, language, cognition and communication.

The LSLS Cert. AVT and the LSLS Cert. AVEd both use evidence-based practices.
The LSLS Cert. AVT and the LSLS Cert. AVEd both strive for excellent outcomes in listening, spoken language, literacy and independence for children who are deaf or hard of hearing.

Charting the Course

Doreen Pollack, Helen Beebe, Daniel Ling and other pioneers of the Auditory-Verbal movement knew that no one approach could possibly meet the individual needs of all children who are hearing impaired. But, they showed us how the knowledge, techniques and strategies of Auditory-Verbal practice could be successfully used to achieve the very high standards of intelligible spoken language that are in evidence in many parts of the world today. They helped us to chart a course for children in the years 2015, 2020 and beyond.

According to the World Health Organization’s estimates of 2005, 278 million people worldwide have moderate to profound hearing loss in both ears and 80% live in low- and middle-income countries. So, even though a great deal of progress has been made, there is still much to do to bring the gifts of hearing, listening and spoken language to the many children in the world for whom the desired outcome is full inclusion in a global society.

The pioneers laid the groundwork and helped us to chart a course for the future. This charted course continues as work by LSLS professionals around the globe as we continue the journey from the fundamental aspects of the development of listening, neurologic research, medical aspects of audition, significance of early diagnosis of hearing loss, new intervention and hearing technologies, family coaching and guidance, and practical aspects of Auditory-Verbal intervention throughout the preschool and school-age years to the future of research and state-of-the-art practice for today’s and tomorrow’s children.

Auditory-Verbal practice is like sailing a ship and, to maximize the thrill of the journey, we must all work together:

- It is only with parents that we can truly chart the course
- The parent is the captain of the ship, who hires the crew
- The therapist is the navigator
- The children are the precious passengers carried by the crew
- We all sail together, charting a course for the future
- We drop anchor at many ports along the way. Each port is a transition to the next destination.
- At each port, we may rest, study the maps, prepare travel plans for the next destination and take on supplies and perhaps more crew if needed
- The ultimate goal is to reach the final destination where the child will take up sailing on his or her own.
• Along the way, it will not always be clear sailing. Winds of hope and fear may collide to create storms. But the weather will improve and we will all be guided by beacons along the shore.
• The vessel is made of love, care and attention and throughout the journey, it will grow stronger

A Paradigm Shift

The clinical landscape has changed dramatically over the years and so should the ways we work. There has been a significant shift in the development of Auditory-Verbal therapy and Auditory-Verbal education in the past decade. In polling the professional community of Certified Auditory-Verbal Therapists in 2007 about how “things had changed” in the last ten years, the following responses were offered which I have placed in four categories: clients, professional development, therapy practices, and other.

Clients

- Younger children are in therapy and are discharged earlier
- Public is becoming aware of AV everywhere and is often viewed as a “first option”
- Dramatic increase in CI in pediatrics
- More children with additional challenges
- AV has embraced bilingualism and multilingualism
- Parents are informed from the Internet
- More fathers are actively involved

Professional Development

- AV and cochlear implants seem to “go together”
- Many professionals want to become “certified”
- Advances in technology have made spoken language easier to learn
- More data is being collected
- Expectations have increased
- More training programs are available……and more needed
- More children are transitioning from visual to auditory programs

Therapy Practices

- Therapy is less formal and more parent centered
- People speaking are at natural distances
- Playing is much more the norm
- Decreased use of the “hand cue” (Estabrooks, 2006)
- Increased cross-profession collaboration
- Application of AV strategies are used with the “multi challenged” child
- Inclusion in regular schools is more common
Other

- Shift in expectations
- We listen more to what children say and how they say it
- We use “AV” techniques all the time to maximize speech reception through listening
- Language is learned mostly informally in real life and real time
- Therapists and parents can be in harmony with developmental processes rather than a remedial model
- Focus is on family-child intervention with the professional as a coach and guide
- Degree of hearing loss is no longer a major factor in spoken language outcomes
- Audiologist is our key to making auditory access to the brain
- Most children who are deaf will be in regular school by first grade
- Acoustic accessibility to intelligible speech is essential for brain growth

Conclusion

The magic of amazing auditory options, the miracle of cochlear implant microsurgery, and the pursuit of excellent (re)habilitation by highly-qualified professionals working in partnerships with families will hopefully become the standard of international health care and educational intervention for children who are hearing impaired around the world.

It is the work of therapists, teachers, audiologists, surgeons, social workers and allied professionals in health care and education to guide, navigate, and coach parents on their search for the treasure chest of spoken communication...to help them help their children discover the valued jewels of hearing, listening and spoken conversation. Professionals will form alliances of hope and trust with parents as together we polish these precious gems until they sparkle and dance with life. Why would we ever consider compromising when so much is possible?

In the year 2030, we may look back and see an abundance of evidence-based outcomes, all barriers to equitable service gone and a global focus on literacy with a deep understanding of powerful auditory access to the brain provided by state-of-the-art hearing technologies.

In our pursuit of excellent science and artful Auditory-Verbal Practice, we can build an outstanding community of success, as we appreciate the journey and the many transitional destinations. As we continue to chart the course, we can learn many lessons provided from the story of Noah’s ark:

- Don’t miss the boat
- Remember we are all in the same boat
- Plan ahead. It wasn’t raining when Noah built the ark
- Listen to the critics. Then just get on with the job that needs to be done.
- Build your future on high ground
- For safety’s sake, travel in pairs
- Speed isn't always an advantage. The snails were on board with the cheetahs
- When you're stressed, float awhile
- Remember that the ark was built by "amateurs"

And remember that no matter how bad the storm, there is always a rainbow waiting.

References

AG Bell Academy for Listening and Spoken Language*


*For further information about certification in Auditory-Verbal therapy and Auditory-Verbal education please contact the Alexander Graham Bell Academy for Listening and Spoken Language at the following website (www.agbellacademy.org)