

# Workshop 4

## Audiology and Intellectual Disability

## WG MEMBERS

EFAS Working Group on Audiology and Intellectual Disability created in March 2015.

- ANDERSSON Eva – Audiologist - **Sweden**
- CONINX Frans - Audiologist + Teacher of the Deaf - **Germany**
- CRAVO Melissa – Audiologist - **Portugal**
- GEORGESCU Madalina - ENT + Audiologist - **Romania**
- NEUMANN Katrin – ENT - **Germany**
- BRENNAN Giobhan - Audiologist - **England**
- WILLEMS Melina** - Audiologist + SLP + Deaf Interpreter - **Belgium**
  - Global Clinical Advisor - Special Olympics Healthy Hearing

## WHY?

- Ear and hearing problems in people with intellectual disability (ID) are more common than in the general population.
  - Hearing problems remain undetected, un-served and/or under-treated.
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- Create awareness to the importance of hearing screening and management for people with ID.
  - Develop guidelines towards audiological care for people with ID.

## WHAT HAS BEEN DONE?

1. Literature review:
  - Definition
  - Making of a reference list with all relevant literature. Will be very useful information to achieve other goals.
2. Questionnaire:
  - Gathering information on screening and assessing ear, hearing, vestibular problems in people with an intellectual disability in different European countries by the use of a questionnaire.
  - Identifying current practices and approaches across Europe
  - Strong/weak points of implementing
3. Guidelines:
  - WG decided to develop guidelines instead of protocols. Guidelines can be used on European level, and can be adapted to protocols on National level.

## INTELLECTUAL DISABILITY

Intellectual disability (intellectual developmental disorder) is a disorder with onset during the developmental period that includes both intellectual and adaptive functioning deficits in conceptual, social and practical domains. The following three criteria must be met:

- Deficits in intellectual functions, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience, confirmed by both clinical assessment and individualized, standardized intelligence testing.
- Deficits in adaptive functioning that result in failure to meet developmental and socio cultural standards for personal independence and social responsibility. Without ongoing support, the adaptive deficits limit functioning in one or more activities of daily life, such as communication, social participation, and independent living, across multiple environments, such as home, school, work, and community.
- Onset of intellectual and adaptive deficits during the developmental period.

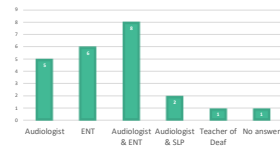
## QUESTIONNAIRE

<p style="text-align: center;"><b>General hearing screening programmes in each country</b></p> <ul style="list-style-type: none"> <li>• Age</li> <li>• Government regulation</li> <li>• Modifications for people with ID</li> <li>• Specific follow-up for people with ID</li> </ul>	<p style="text-align: center;"><b>Hearing screening programs for individuals with intellectual disabilities</b></p> <ul style="list-style-type: none"> <li>• Specific for people with down's syndrome or any form of ID</li> <li>• Screening methods</li> <li>• Government regulation</li> <li>• Follow-up</li> </ul>	<p style="text-align: center;"><b>Need for specific hearing screenings</b></p> <ul style="list-style-type: none"> <li>• Government initiatives for HS for people with ID</li> <li>• Government regulation</li> <li>• Opportunities/barriers for implementing HS</li> <li>• Existing guidelines</li> </ul>
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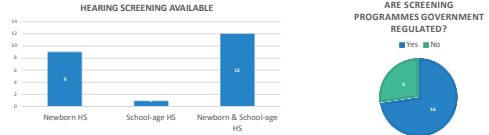
## QUESTIONNAIRE

- o Sent via email (Google forms) to EFAS representatives.
- o The data was collected between September 2016 and January 2017.
- o 23 answers received from 22 countries:

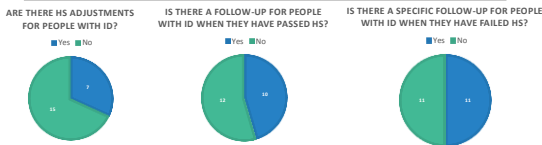
Austria	Greece	Slovakia
Belgium	Lithuania	Slovenia
Bulgaria	Luxembourg	Spain
Croatia	Norway	Sweden
England	Poland	The Czech Republic
Finland	Portugal	Turkey
Germany	Serbia	



## QUESTIONNAIRE – general HS

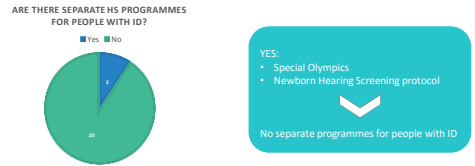


## QUESTIONNAIRE – general HS

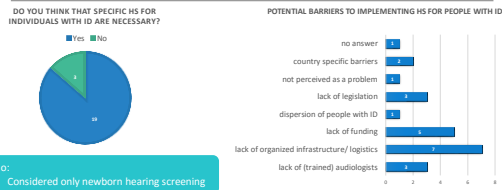


- Adjustments/follow-up mostly related to high risk newborn hearing screening
- "Recommend to go to the appropriate specialists"
- "Regularly check up for Mb Down"

## QUESTIONNAIRE – specific HS

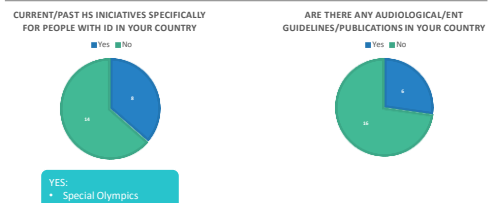


## QUESTIONNAIRE – need for specific HS?



- No:**
- Considered only newborn hearing screening

## QUESTIONNAIRE – need for specific HS?



## SOME CONCLUSIONS

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- Many countries perform newborn/school-age hearing screening
  - High risk protocol includes babies with ID
- Major focus on newborn/children HS
- No reference to adult HS
- No specific HS for people with ID however professionals consider it is needed

## Contact us

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