

## **7 Steps to Better Communication**

### *When a loved one has hearing loss*

*This handout gives practical tips to help people communicate better in spite of hearing loss.*

### **How does hearing loss affect communication?**

Hearing loss is our most common chronic health condition and our most common communication disorder. Even people with normal hearing may have a hard time communicating in some situations such as noisy places, when many people are talking at once, when someone has an unfamiliar accent, or in rooms with echoes. If someone has even mild hearing loss, it makes communication even harder.

To communicate, both the speaker and the listener must make sure messages are received and understood. When someone has a hearing loss, everyone must work harder to communicate.

Speaking is not our only way to communicate. But the ability to speak and hear language is the basis for most of our communication.



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### **Challenges to Spoken Communication**

Some things that may interfere with spoken communication are:

- Hearing loss
- Not paying attention to what is said
- Distractions and background noise
- Echoes
- More than 1 conversation going on at the same time
- Too much distance between the speaker and listener

## About Hearing Loss

Mild hearing loss may cause only minor problems in communication, but severe hearing loss can make spoken communication seem impossible.

No matter what degree of hearing loss is present, following the “7 Steps for Better Communication” can improve your ability to communicate with your loved one who has hearing loss. These steps begin on page 3.

Some people with hearing loss may also find it helpful to use hearing aids or assistive listening devices. A *cochlear implant* may be prescribed for people with severe or profound hearing loss (see page 6).

Hearing problems can be *genetic*. This means they tend to run in families. Hearing loss at any age can deprive us of our most precious human gift – being in touch with others.

## Presbycusis

As we age, our hearing ability may slowly get worse. Age-related hearing loss is called *presbycusis*. It is the most common type of hearing loss. There is no cure for presbycusis.

But, there are some things we can do to lessen the hearing loss or delay its onset. Two of these are staying healthy and protecting our ears from loud noises.

Another problem that occurs with age is that our nervous system slows. This means our brains cannot process information as quickly as when we were young. This makes the hearing problems of presbycusis harder to deal with.

Many older people who cannot hear well stop taking part in social activities. They can become isolated from their friends and family, which often leads to depression and poor health. But, we can avoid these side effects of hearing loss.

## Stages of Presbycusis

Presbycusis begins earlier for some people than others. Most times, it first affects the ability to hear high-pitched sounds. *Consonants*, which are all the letters that are not vowels, are high-pitched sounds. This means that someone with presbycusis has a hard time understanding words.

This is often the main problem caused by presbycusis. People with presbycusis often say that they cannot understand what is being said, not that they cannot hear the person speaking. To them, it may seem that everyone is mumbling.

People with presbycusis may not realize that their hearing is the source of the problem. They may blame others for not speaking clearly enough. This can cause serious relationship problems.

It can take a while for people who are hard of hearing to accept the fact that the problem is with their ears, not with other people. They are likely to go through all the stages of grief when faced with the loss of hearing. These stages include denial, anger, sadness, and, finally, acceptance.

The family and friends of someone who is losing their hearing may also have emotional reactions. Some of these may be annoyance, frustration, anger, and avoidance. If they do not deal with these feelings, they may lead to separation and isolation from loved ones.

## Shouting: A Common Mistake

One thing that people often do when they talk with someone who is hard of hearing is to shout in their ear. This does **not** work because:

- Shouting does not make words clearer.
- Loud sounds may be **too loud** for the hard of hearing person.

## What to Do

Good communication takes work, even when hearing is perfect! Remember to take your time and stay calm. Here are some specific things you can do to help improve your communication:

### 1. Get Close

Communication works best when the speaker and listener are near each other and in a quiet area with plenty of light. Being able to see each other clearly makes it easier for both the speaker and the listener to understand each other.

Being provides a better volume of speech as well as visual information from the speaker's face and gestures. Face-reading helps us understand some words, and it also lets us know how the speaker is feeling. Whether you call it lip-reading, speech-reading, or face-reading, using your eyes helps your hearing.

Also, voices sound louder in small rooms than they do in large rooms. This is because sound waves spread out as they move through space. In a small room, the sound waves are more focused, because they do not spread out as much.

Develop a touch signal, such as touching the hand or shoulder of the person with hearing loss. If they are doing a noisy activity, get close, and then use your touch signal to let them know you want to talk with them.



1. *Get close when you talk with someone.*



2. *Get quiet.*



3. *Get clear.*



4. *Get closure.*

## 2. Get Quiet

One of the biggest obstacles to clear communication is background noise. “Noise” is any sound other than the message. It can be other people talking, music, animals, traffic, or the sound from a radio, TV, or household appliance.

Reducing noise and distractions can help you hear and be heard. It may help to move to another room or to a quiet place in the same room.

## 3. Get Clear

### • If you are speaking:

- Think of ways to help the other person understand what you are saying.
- Get to the point. Do not say more than the listener needs to be able to understand your message.
- Be specific.
- Speak a little more slowly than normal.
- Do **not** shout. Loudness may not help. Speaking clearly is what counts the most.
- Do **not** mouth your words too much. It disrupts the natural flow of speech and may make it harder to the other person to understand you.

### • If you are listening:

- Tell the speaker if you are not hearing them clearly. Be specific about how they can help you. You may want to ask them to speak more slowly, more loudly, or to move their hand away from their mouth.
- You might say something like, “I didn’t understand you. Please speak just a little slower.” This helps the speaker know how to help you get the message.

## 4. Get Closure

Have the listener repeat back the main points of the message. This way, both people know what communication really took place.

Getting closure in this way helps avoid misunderstandings.



## 5. Get help.

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Anyone with a hearing loss should set up a hearing test with an *audiologist* (hearing specialist). An audiologist can also recommend and fit hearing devices.

A person with hearing loss may also talk with an *otologist* (a doctor who specializes in the ear and diseases of the ear) to learn more about hearing loss and hearing devices.

If a hearing loss is diagnosed, there are many options for improving the ability to hear sounds. When choosing a hearing aid or assistive listening device, make sure to get a device that is best for your type of hearing loss. Be sure to get one that fits well and meets your other specific needs.

- *Hearing aids* are made for all levels of hearing loss. Options range from basic hearing aids to the latest in technology. Often, devices with more features will cost more.
- *Implantable hearing aids* are an option for certain types and levels of hearing loss. They can also be helpful for people who have problems wearing standard hearing aids.
- People with profound hearing loss may choose to get a *cochlear implant* (see page 6).
- *Assistive listening devices*, such as FM systems, are another option for improving hearing or for hearing in specific situations. This type of device can be helpful when watching TV or attending a performance or religious service.

Remember, investing in these devices means investing in improved communication and better relationships!



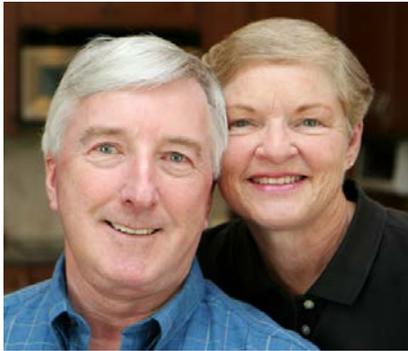
## 6. Get creative.

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Be creative as you figure out ways to meet the needs of the person with hearing loss. Find other ways to communicate besides speaking. Writing can work very well. And sometimes, just giving the person a pat on the back or a hug can tell them what you want to say.

You can also think of creative ways to improve the communication environment. Ask for a table in a quiet location when you go to a restaurant. And, choose a seat nearest the speaker at a meeting or the pastor at church.

If you are someone who hears well and you know a person with hearing loss, imagine yourself in various situations and come up with ideas of how you might handle communication in those settings. Good communication habits help everyone.



7. Accept the hearing loss.

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Hearing loss and communication problems affect people of all ages and from all backgrounds.

While it may be hard not to be sad about losing your hearing, it helps to accept the hearing loss. This is the first step toward better communication. As the hearing-impaired person learns the new communication skills, they will be rewarded with better and richer communication with their loved ones. And, these skills will soon become new habits and feel more natural over time.

If you are hearing-impaired:

- Let others know that you have hearing loss. Do not try to hide it – family and friends already know!
- Get hearing aids or other assistive devices, and use them. It may be an adjustment at first, but it will become easier over time.

### Glossary

**Cochlear implant:** a surgically implanted device. It has an internal nerve stimulator and external microphone, speech processor, and battery. A cochlear implant is suitable for babies and adults with severe to profound hearing loss that is not helped by hearing aids.

**Decibel:** a measure of sound level.

**Hearing aid:** a sound amplifier that is worn in or on the ear and runs on batteries. Hearing aids come in many brands, shapes, and sizes. An audiologist can advise you on options and help you make the best choice for your needs.

#### Levels of hearing loss:

- **Mild:** cannot hear sounds softer than 26 to 40 decibels. A whisper is 20 to 30 decibels. The hum of a refrigerator is about 40 decibels.
- **Moderate:** cannot hear sounds softer than 41 to 70 decibels. Normal conversation is about 60 decibels.
- **Severe:** cannot hear sounds softer than 71 to 90 decibels. A vacuum cleaner is about 80 decibels. Truck traffic is about 90 decibels.
- **Profound:** cannot hear sounds softer than 91 decibels. A chain saw is about 110 decibels. A jet plane taking off is about 120 decibels.

**Presbycusis:** the most common type of hearing loss. It is caused by aging, but noise exposure and many other causes of hearing loss can add to presbycusis over time. Usually, presbycusis begins with a loss of sensitivity to high-frequency sounds. It often gets worse with age.

**Sensorineural:** hearing loss that occurs when there is damage to the inner ear or to the nerve pathways from the inner ear to the brain. This type of hearing loss involves not being able to hear sounds and not being able to hear clearly. It is permanent. It cannot be corrected by medicines or surgery.

**Speech understanding:** a complex process that uses the brain to translate sounds into meanings. Speech understanding requires speech to be loud enough to stimulate the inner ear.

High-frequency hearing loss, such as the hearing loss that occurs in early presbycusis, affects speech understanding by making it hard to hear some consonant sounds (such as ch, d, f, k, p, ph, s, and t). For example, “some **day**” and “some **pay**” might sound the same to someone with a high-frequency hearing loss.

**Tinnitus:** ringing in the ears, a common symptom of hearing loss. Tinnitus is the result, not the cause, of the hearing loss. Talk with an audiologist or otologist for tips on how to cope with tinnitus.

**Word recognition test:** a way to measure the ability to understand speech. It tests the ability to hear and repeat 1-syllable words such as “mat,” “cat,” “cap,” and “add.”

## To Learn More

To learn more about hearing loss and communication, visit these websites:

- **University of Washington's Virginia Merrill Bloedel Hearing Research Center:** <http://depts.washington.edu/hearing>
- **American Academy of Otolaryngology – Head and Neck Surgery:** [www.entnet.org/healthinformation/ears.cfm](http://www.entnet.org/healthinformation/ears.cfm)
- **Deafness Research Foundation (DRF):** [www.drf.org](http://www.drf.org)
- **National Institute on Deafness and Other Communication Disorders:** [www.nidcd.nih.gov](http://www.nidcd.nih.gov)
- **American Speech-Language-Hearing Association:** <http://asha.org>
- **American Academy of Audiology:** [www.audiology.org](http://www.audiology.org)

*The information in this handout is adapted from “Eight Steps Toward Better Communication” by the Virginia Merrill Bloedel Hearing Research Center, in cooperation with the Otolaryngology – Head and Neck Surgery Clinic at University of Washington Medical Center, Seattle, Washington.*

*The Virginia Merrill Bloedel Hearing Research Center brings together an interdisciplinary group of researchers to study hearing, hearing loss, and related communication disorders. Their goal is to help those with hearing loss hear. The center is a place for scientists to share ideas and information to advance auditory science and patient care.*

## Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

### **To make an appointment:**

Call Otolaryngology – Head and Neck Surgery Center, 206.598.4022 and press 8 when you hear the recording.

### **If you are already a patient and have questions about your treatment plan:**

- Weekdays from 8 a.m. to 5 p.m., call 206.598.7519 and leave a message for the Otology and Audiology staff.
- After hours and on weekends and holidays, call 206.598.4022 and press 5 when you hear the recording. This will connect you with a nurse on the Community Care Line.