CELEBRATE WITH US: MAY IS BETTER HEARING AND SPEECH MONTH

PROMOTING EARLY DEVELOPMENTAL AND HEARING SCREENING FOR YOUNG CHILDREN

May is Better Hearing and Speech Month, a time when the American Speech-Language-Hearing Association (ASHA) promotes the importance of developmental and hearing screenings for young children, including children with disabilities. This year’s theme is “Early Intervention Counts.” The Office of Special Education Programs within the U.S. Department of Education and the Office of Head Start within the U.S. Department of Health and Human Services are partnering to celebrate May is Better Hearing and Speech Month. Together, we want to promote the importance of developmental and hearing screenings to ensure that all children are screened early and on a regular basis in order to intervene early.

As many as one in four children through the age of five are at risk for a developmental delay or disability, and permanent hearing loss is the most common birth defect in the United States. Approximately one out of every 300 children in the U.S. is born with a significant hearing loss and by school-age the incidence has doubled. Early identification allows communities to intervene earlier leading to improved outcomes which can have a positive impact on children’s development and learning when they enter school. Early screenings can assess progress in development and can uncover potential developmental delays and hearing impairments. If a child’s screening result shows risk, families and providers will be in a better position to pursue a more in-depth evaluation, which is the first step toward getting help for a child who might need it.

The Individuals with Disabilities Education Act (IDEA) supports states in providing early intervention services for infants and toddlers with disabilities and their families (Part C) and special education and related services for preschool children with disabilities (Part B, Section 619). The state lead agency for Part C and the education agency for Part B have an obligation to identify any child who may be eligible for services through the “Child Find” requirement. Child Find requires a coordinated screening and referral effort between Child Care, Head Start and other early education programs to screen and identify young children early. These early care and education programs can partner at the state and local level to support identifying children who may be eligible for IDEA services by administering screenings and referring families to Part C and Part B, Section 619, if there is a developmental concern.

The Child Care and Development Block Grant (CCDBG) provides federal funding to states, territories and tribes to administer child care programs and includes provisions on developmental screenings for children at risk of cognitive or developmental delays.
Head Start Performance Standards require that a developmental screening be conducted within the first 45 days of entry into the program. Furthermore, Head Start programs must obtain from a health care professional a determination that each child is up-to-date on a schedule of age-appropriate preventive and primary health care, including, medical, dental, and mental health. Programs must also perform or obtain screenings to identify concerns related to hearing and speech. The schedule must incorporate the requirements of well-child care within EPSDT and the latest immunizations schedule recommended by the U.S. Centers for Disease Control and Prevention (CDC), state, tribal, and local authorities.

FREQUENT DEVELOPMENTAL SCREENING

Children’s development should be observed, or monitored, on an ongoing basis in the home, child care settings, and anywhere else children spend their time. The American Academy of Pediatrics (AAP) recommends developmental screening with a standardized developmental screening tool when a child is 9, 18, and 24 or 30 months of age or more routinely if needed. These screenings may be done in early childhood settings, schools, community based intervention programs, or in the child’s medical home. Although there are specific ages that screening is recommended, screening should be done at any age if you and/or family are concerned about a child’s development.

PERIODIC HEARING SCREENING

A young child’s hearing should be observed, monitored, and screened on a periodic basis beginning at birth and in subsequent early learning settings. Most newborns in the U.S. now receive an initial hearing screening before leaving the hospital, but not all hearing loss can be identified at birth. Hearing loss can occur at any time in a child’s life, but because it is difficult to identify, it often remains undiagnosed or misdiagnosed with negative repercussions on a child’s communication, learning, social-emotional development, and school readiness. The American Academy of Pediatrics recommends periodic hearing screening during early childhood because hearing is central to language development, communication, and learning. Relatively few health care providers have the equipment necessary to provide objective screening during well-child visits. This is why it is so valuable to have evidence-based hearing screening practices integrated into early care, education and intervention settings.
RESOURCES TO SUPPORT EARLY DEVELOPMENTAL SCREENING

*Birth to 5: Watch Me Thrive!* is a coordinated federal effort between the U.S. Departments of Education and Health and Human Services to encourage healthy child development, universal developmental and behavioral screening for children, and support for the families and providers who care for them. Click [here](#) to visit *Birth to 5: Watch Me Thrive!* and you will find resources, including a Compendium of Screening Measures for Young Children, designed to support families and providers in ensuring that all young children are screened early and frequently.

*Learn the Signs. Act Early.* is a coordinated public awareness campaign between the Centers for Disease Control and Prevention's (CDC) National Center on Birth Defects and Developmental Disabilities (NCBDDD), and a number of national partners. The campaign aims to educate parents about childhood development and encourages developmental screening and intervention. Click [here](#) to learn more about *Learn the Signs. Act Early.* where you will find free resources to support your screening efforts.

RESOURCES TO SUPPORT EARLY HEARING, SPEECH AND LANGUAGE SCREENING

*The Early Childhood Hearing Outreach (ECHO) Initiative* is part of the National Center for Hearing Assessment and Management (NCHAM) at Utah State University. NCHAM serves as the National Technical Resource Center for all state-based Early Hearing Detection and Intervention (EHDI) programs in the U.S. The ECHO Initiative specifically serves Head Start as the National Resource Center on Early Hearing Detection and Intervention and works to extend periodic hearing screening to infants, toddlers and young children in a variety of health and education settings. For more information about EHDI programs click [here](#). You also will find an array of resources and training/instructional materials for planning and implementing hearing screening and follow-up practices by clicking [here](#) or going to [www.KidsHearing.org](http://www.KidsHearing.org).

*The Centers for Disease Control and Prevention (CDC)* is committed to hearing loss surveillance, research, and health education. Their goal is to help children reach their full potential by promoting and tracking early screening, diagnosis, intervention, and hearing loss prevention. CDC offers [free materials](#) to support hearing health education for parents, health care providers, and public health professionals.

*Speech and Language Screening: Well-Child Health Care Fact Sheet* is a T/TA resource for Head Start programs developed by the National Center on Health describing the importance of speech and language screening tests, how they are conducted, and what treatments may include. This fact sheet is useful for health managers, health staff and disability coordinators in Head Start and child care programs.