

Co-morbidities of Hearing Loss in the Preschool Population

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Declaration

I declare that this dissertation is my own unaided work. It is submitted for the degree of Masters in Audiology by dissertation at the University of the Witwaterstrand, Johannesburg. It has not been submitted before for any other degree or examination in any other university.

Varsha Sewpersad

9th day of July, 2012

This dissertation is dedicated with sincerity

**To all the children that I have worked with, who have inspired me with their perseverance
and love for life.**

Each one of you has touched my life in a way that I cannot describe.

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Abstract

Background: Many hearing impaired children present with one or more health-related conditions, in addition to hearing loss. Families and professionals are therefore faced with numerous challenges when a child presents with co-morbidities of hearing loss. The implications for assessment, management and educational placement of these children are numerous.

Appropriate plans for holistic intervention and education are essential for the development of the child as well as improved life quality. This study therefore aimed to describe the co-morbidities that pre-school children with hearing loss present with at the Centre for Language and Hearing Impaired Children (CLAHIC), and its implications for management.

Method: A descriptive, retrospective research design was employed for the purpose of this study. A non-probability, purposive sampling strategy was implemented to select the records of children diagnosed with a hearing loss, and who have attended CLAHIC from 1999 to 2010. The records of 62 children were reviewed.

Results: The more prevalent co-morbidities identified in this study were fine motor delay, gross motor delay, visual motor integration disorder, bilateral integration disorder, apraxia of speech and attention deficit hyperactivity disorder. Further findings of the study indicated that the co-morbidities of hearing loss are independent of the degree of the hearing loss. It was however found that there is an increased risk for fine-motor difficulties across the sample.

Implications: The findings of this research suggest that pre-school children with hearing loss, irrespective of degree of hearing loss, should be screened and or monitored for the risk of prevalent co-morbidities, such as fine and gross motor difficulties. A collaborative, holistic and

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multi-disciplinary team approach should be implemented to ensure that services are provided to improve the life quality and development of the hearing impaired child.

Keywords: Children with hearing loss; co-morbidities; educational placement; holistic intervention; management; interdisciplinary team.

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