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Reflections on the return to in-school learning for deaf and hard of hearing students

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Now that schools are back to in-person learning, I encounter many statements, both from individuals and in the media, expressing the general sentiment “kids are resilient, they’ll bounce back”. Research is emerging on how students have weathered the pandemic academically, while those of us who work in schools have our own observations of how students are doing. Based on this, I worry that the kids may not be alright to paraphrase an old song by The Who.

Researchers are beginning to measure the impact of the COVID-19 pandemic on students across the world; entire books are now dedicated to the effects of the pandemic on student learning (Reimers, 2022). We should not be surprised that students with hearing loss experienced

difficulties with access to online learning; teachers of the deaf and hard of hearing, educational audiologists, and indeed, manufacturers, spent countless hours during the pandemic investigating, implementing (and in some cases, creating from scratch) options to improve auditory and visual access in online learning platforms. However, it is becoming clear that despite our best efforts, many deaf and hard-of-hearing students have experienced significant impacts, not only on academic achievement but on all aspects of student development and well-being (Aljedaani et al., 2022). Governments are scrambling to address academic achievement gaps due to the pandemic, but there are other equally significant factors and outcomes that we need to consider in supporting our deaf and hard-of-hearing students at school. There are three that I think deserve particular attention.

Social-emotional development and mental health

The interactive effects of the pandemic, lockdowns, and the implementation of distance learning have clearly had negative implications for student mental health. Hamilton & Gross (2021) note, “Students were cut off from their teachers, with uneven access to live instruction and hands-on, collaborative learning. There were few opportunities to see friends in person or engage in extracurricular activities. At the same time, many students also were contending with the pandemic’s frightening impacts on their family’s health and welfare, such as illness, the death of a relative or neighbor, and economic hardship”. Social skills development, which has often been challenging for deaf and hard-of-hearing students, requires interaction with others and is an important focus for teachers. Alsubaie (2022) terms this ability to communicate, interact, construct knowledge and socialize effectively as “social literacy” and found that students struggled with developing these skills during the pandemic. One study participant noted that the online learning environment reduced the students’ ability to control their emotions, communicate, show respect to other students, learn conflict-resolution skills, demonstrate empathy, and develop leadership. This author found that a reduction in face-to-face interactions and the inability to observe emotions contributed the most to the reduced development of social literacy. Decades of research have identified social-emotional development as a potential area of risk for students with hearing loss, so if this has become an issue for typical students, what has been the impact on students with additional learning needs? The research is beginning to answer this question for deaf and hard-of-hearing students, and the findings are not positive (Wright et al., 2022). Supporting students’ social and emotional health by providing opportunities to interact with other deaf and hard-of-hearing students to compare experiences and share challenges, feelings and strategies has always been a challenge due to the low incidence of hearing loss in children in general. It is extremely common for a student to be the only one with hearing loss at school. While we might hypothesize that increased exposure and access to online communication platforms might open up opportunities for connection, in my experience, this has not proven to be the case. However, we can learn from and build on the excellent work done by educational audiologists Carrie Spangler and Krista Yuskow on peer support and school-based mentorship programs. The article “The Availability and Features of School-Based Mentorship Programs for Students who are Deaf or Hard of Hearing in North America (Gordey et al., 2021) is a great place to start.

Amplification usage

One anecdotal observation that I have, and that others in education have reported, is seeing students who have reduced (or even discontinued entirely) their use of personal amplification, such as hearing aids during virtual schooling. Students with milder losses may have been able to use

headphones with their computers for audio without hearing aids. Even students with more severe losses sometimes wore their hearing aids for a few hours during virtual school but took them off afterward. The literature supports these anecdotal comments, indicating that students and families have not found it easy to use amplification during the pandemic (Shannan & O'Neill,2022). Reintroducing personal and classroom amplification at school has sometimes been challenging. The long-term implications of reduced access to spoken language because of inconsistent use of technology will be crystal clear to any audiologist.

Changes in service delivery models

Of course, during the pandemic, everyone delivering communication development services to deaf and hard-of-hearing students and their families switched to a virtual delivery model – there were no other choices. Access to health care in general, and hearing health care specifically, for families of deaf and hard-of-hearing students, was problematic (Mardinli et al., 2022). The research is clear that service delivery for students with disabilities suffered during the pandemic (Allison & Levac, 2022). This includes accessing and benefitting from online learning and specialized services (e.g., speech and language therapy or occupational therapy). In some jurisdictions (such as Ontario), students with severe disabilities were the only students still attending in-person schooling. However, it is more likely that students with disabilities were at home, placing more stress on families. It is clear that school closures and online learning have had a disproportionately negative effect on students with disabilities (Ashworth et al., 2022; Dababnah et al., 2022). However, some preschool communication development services continue with a virtual model despite this fact. This certainly offers efficiencies in terms of the number of preschoolers that can be seen per day if one does not need to spend most of the day driving, but can we say that virtual communication development services are effective when the "client" is a fidgety 2 year old on the other side of a screen? This is not to say that telepractice cannot be effective. Service providers in jurisdictions such as Australia and New Zealand routinely implemented telepractice for deaf and hard-of-hearing students before the pandemic, and the pandemic has provided lessons in improving practice (Noss, & Sanderson, 2022). However, we must ensure that we learn these lessons and implement evidence-based telepractice models, rather than simply turning to them for economic reasons.

Virtually everything about going to school has been profoundly disrupted by the pandemic – from everyday learning to making new friends, to navigating transitions such as heading off to kindergarten or high school, to celebrating successes such as high school graduation or attending a long-awaited prom. We need to remember that students and families will continue to require extra support, likely for longer than we imagine they will.

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