



ASHA
American
Speech-Language-Hearing
Association

February 3, 2022

The Honorable Ronald D. Kouchi
415 South Beretania Street
Hawaii State Capitol, Room 409
Honolulu, HI 96813

RE: Hearing and Vision Screening; SB 1141

Dear Senator Kouchi:

On behalf of the American Speech-Language-Hearing Association, I write to express support for SB 1141, which will increase the early identification of children with hearing or vision loss by establishing consistent protocols for hearing and vision screening and follow-up, screener training, data collection, and reporting.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 500 ASHA members reside in Hawaii.¹

ASHA supports SB 1141, which requires the Department of Health to establish the following:

- Protocols for evidence-based hearing and vision screening, including ages or grades for screening; screening tools, instruments, and passing and referral criteria for screening that are based on national guidelines and best practices; and referrals, tracking of referrals, and follow-up of children who do not pass screening;
- Training, certification, and qualifications of personnel who conduct hearing and vision screening, other than those who are licensed health care professionals acting within their legal scope of practice; and
- Data collection and reporting on hearing and vision screening, referral, and follow-up.

Newborn hearing screening is now the standard of care in hospitals nationwide. In 2014, 96.1% of babies born in the United States had their hearing screened before one month of age and 6,163 infants were diagnosed with permanent hearing loss.² According to the Joint Committee on Infant Hearing, there is a growing body of literature indicating that when identification and intervention occur at no later than six months of age for infants who are deaf or hard of hearing, the infants perform as much as 20 to 40 percentile points higher on school-related measures (vocabulary, articulation, intelligibility, social adjustment, and behavior).³

Thank you for helping to ensure proper hearing and vision health care for children in Hawaii. If you or your staff have any questions, please contact Eileen Crowe, ASHA's director, state association relations, at ecrowe@asha.org.

Sincerely,

Judy Rich, EdD, CCC-SLP, BCS-CL
2022 ASHA President

¹ American Speech-Language-Hearing Association. (2020). *Hawaii* [Quick Facts]. <https://www.asha.org/siteassets/uploadedfiles/hawaii-state-flyer.pdf>.

² American Speech-Language-Hearing Association. (n.d.). *Newborn Hearing Screening*. <https://www.asha.org/practice-portal/professional-issues/newborn-hearing-screening/>.

³ Joint Committee on Infant Hearing. (2007). *Year 2007 Position Statement: Principles and Guidelines for Early Hearing Detection and Intervention Programs*. https://www.infanthearing.org/resources/2007_JCIH.pdf.