

# Infants and Hearing Health: What Families Need to Know

About 1 in 500 babies in the United States are born deaf or hard of hearing. Here is what families need to know about their infant's hearing health and testing:



**One of baby's very first postnatal health screenings.** Nearly all babies born in the United States undergo a newborn hearing screening. This usually happens before they are discharged from the hospital (if not, parents should talk to their child's pediatrician about getting this screening before the child is 1 month old). A baby will receive a *pass* or *fail* result that is provided to parents immediately.

**What comes next?** For babies who pass, and do not have other hearing loss risk factors such as a family history of childhood hearing loss, nothing. Babies who fail the screening should receive further testing from a pediatric audiologist as soon as possible. Families are responsible for scheduling this appointment. The hospital or pediatrician may have a recommendation for an audiologist, or they can search [www.ehdi-pals.org](http://www.ehdi-pals.org) to find a facility.

Sometimes, this second test shows typical hearing levels—and no further action is needed. However, if there is any hearing loss, it's important that families follow up with a pediatric audiologist and enter into their local early intervention (EI) program right away.

**Why Early Counts: Building Blocks for Life.** Babies interact with their parents/caregivers from birth. Their exposure, and access to, language (spoken and/or signed) fuels their brain growth. The sooner families receive needed services and supports, the more likely a child with hearing loss will avoid delays in their development of speech, language, cognition, social, and learning skills. These delays all can occur when hearing loss goes unaddressed and the child does not have full access to language.

**Did You Know?** Research shows that children who are deaf or hard of hearing who begin services before 6 months of age can develop language (spoken and/or signed), cognitive, and social skills similar to their peers without hearing loss—and are equally prepared to enter school at age 5 ("kindergarten readiness").

**Mind the Guidelines: 1-3-6. By 1 month**, all babies should receive a newborn hearing screening. **By 3 months**, an infant who did not pass their hearing screening should receive a follow-up evaluation from a pediatric audiologist. **By 6 months**, a child identified with hearing loss should enter into EI services. These services may last a few months to a few years, depending on the child.

**Early Intervention: Not One-Size-Fits-All.** There are different strategies, technologies, supports, and services that may be recommended for a child who is deaf or hard of hearing. These can include any combination of spoken and/or signed language, hearing aids, cochlear implants, cued speech, augmentative and alternative communication, and other approaches. All can have positive outcomes if the child has full access to a language, allowing them to meet their full potential.

Learn more at [www.asha.org/public](http://www.asha.org/public).

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