



The Importance of Early Identification of Auditory Processing Disorders

Throughout the years there have been innumerable cases where parents report that their child understands everything that is said to them, but *chooses* not to listen. While this prompts the immediate impulse to ask, "How then do you know the child understands?", it really raises a red flag to the speech or hearing professional. These inconsistencies are often what trigger the thought that perhaps the child's problem is rooted in an auditory processing impairment.

Auditory processing disorders can take many forms. The more obvious forms are evidenced by the child's inability to follow directions accurately without any visual or gestural cues. These children are often incorrectly labeled as oppositional or "space cadets." In actuality these children cannot retain an entire direction long enough to interpret or store the information. If they hear the direction again they can sometimes retain the information they need. However, in an intense auditory environment, such as a classroom, they often tune out because they can't follow along rapidly enough. To their credit, many of these children use their visual skills to compensate whenever possible. They watch the other children before they perform a group act in an effort to make use of any apparent visual cues. These children sometimes process better when they are looking at the speaker. It allows them to focus more intently.

Some children can follow most directions issued to them, but cannot hear the difference between similar sounds. They often think you said one thing when you said something entirely different. For them, functioning auditorally is like playing the telephone game or "operator." They sometimes cannot discriminate between sounds, which affects their own speech production and/or their ability to read phonetically. Their discrimination worsens when they are in a noisy environment, or when they have competing sounds in the background.

Most normal processors can miss some of an auditory message and fill-in the blanks. This skill is known as auditory closure. Children with difficulty in this task cannot fill in what they missed, or take so long to fill in that the speaker is on to the next sentence. These slow processors are perhaps the most common. They can eventually process the message, but the world moves too quickly for them.



Of utmost importance to realize is that auditory processing deficits frequently occur in conjunction with other disorders, such as, attention deficit disorder, learning disabilities and speech and language disorders. It is not uncommon for a child to be labeled as having a form of attention deficit disorder because of the inability to follow directions of the “tuning” out which occurs. However, this behavior may be a response to poor auditory processing skills. Parents are often frustrated because it takes so long to do homework and keep their child on task. When these children are placed on medications, their behavior sometimes improves, but their auditory processing does not. Why wait for failure when a referral to an audiologist can verify or rule out auditory processing deficits?

When a child presents him or herself to a pediatric professional, that professional needs to observe as well as listen. If the child is displaying age appropriate expressive language skills, but not following directions, the child cannot automatically be considered to be within normal limits. Although it is possible that the child’s behavior is dictating the listening performance, it is also possible that an auditory processing disorder is present. It has always been easy to identify more severe deficits. When a child is not talking, it is more apparent that there is a deficit. However, as many parents will attest down the road, children with auditory processing disorders do not always evidence expressive language weaknesses. Many a chatterbox turns out to be a poor auditory processor. Since not all the hearing is done in the ear, these children do not appear to be hearing impaired and generally have no peripheral hearing loss. They can hear even soft sounds without difficulty and are often quite hypersensitive to loud sounds. Many of them actually look as if they are hearing, listening and interpreting every word you say. Upon closer examination, you can see the inconsistencies.

A general rule that we follow is to always give credibility to a parent who is reporting difficulties in the child’s listening experiences. Many a parent reports a long history of describing their child’s differences to a variety of professionals who dismiss their concerns because the child is so obviously verbal or bright.

Remember, it isn’t only what you hear, it is what you do with what you hear!