

Infants and Hearing (1996)

Authors: Deborah Hayes and Jerry L. Northern

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Reviewer: Prudence Allen, PhD, School of Communication Sciences and Disorders, University of Western Ontario, London, Ontario

Infants and Hearing was written for practising audiologists, graduate students in audiology, speech-language pathologists, neonatologists, paediatricians, and other professionals who work with infants. The goal is to integrate clinical audiology and medical practice as they meet in the care of infants. Speech and hearing professionals will find it a useful source of information that is not typically part of their educational programs. As well as acting as a useful reference for practising audiologists and other professionals, this book may be used as a text for audiology students enrolled in an advanced course dealing with services to infants.

The book is divided into three sections and 10 chapters. Section I includes two chapters on infant hearing and overviews efforts to identify and habilitate infants with hearing loss. Chapter 1, "The quest for early identification of hearing loss," summarizes the formation and decisions of the Joint Committee on Infant Hearing and the National Institute on Deafness and other Communicative Disorders' Consensus Statements on the early identification of hearing loss. As well, the positions of various governmental and professional agencies are presented and discussed. An effort is made to provide a historical frame of reference for these recommendations noting how they have changed the practice of audiology to better suit the needs of newborns and infants. The complex issues confronted in hearing screening

programs are presented, further adding to the history of the efforts in this area. As well, screening programs that have been successfully implemented in various American states are summarized giving the reader a broader sense of the issues and practical considerations of infant screening programs. In Chapter 2, "Components of an infant hearing program," a clear approach to implementing and evaluating the success of hearing programs is laid out. The information is practical and provides a good start for any individual or organization interested in starting such a program.

Section II focuses on clinical aspects of hearing in infants and seeks to describe the genetic, teratogenic, traumatic, and infectious processes to which an infant may be exposed and the impact of those processes on development. It begins with an informative chapter on clinical genetics that covers basic principles in genetics, thus helping the reader to understand how genetic disorders are transmitted and detected. It continues with a discussion of a number of common genetic disorders that affect hearing. Chapter 4 focuses on human development before birth. This gives a good overview of embryologic development and the formation of fetal systems. Specific emphasis is placed on the development of the head and the structures of speech and hearing systems. Chapter 5 discusses the care of premature and critically ill newborns in the neonatal intensive care unit. It begins with a history of health care for infants and continues with an informative description of infant care, including the various levels of perinatal care and description of the neonatal intensive care unit, its philosophy, staff, and technologies. Chapter 6 provides an overview of disorders that affect newborns and infants. It begins with a good summary of assessment criteria and then details several disorders that are commonly encountered with the newborn population including descrip-

tion of their pathophysiology, treatment, and any complications of the disease or its treatment. The disorders discussed are not those that are routinely discussed in audiology courses and, as such, provide a broader understanding of the holistic environment in which our young patients may exist. As well, several conditions that may result in hearing loss and/or central nervous system dysfunction are described. These descriptions combine to provide a relatively complete yet concise discussion of infant and newborn hearing and other medical disorders.

Section III changes focus and concentrates on evaluation and management. The goal is to give an overview of medical and audiological treatment of infants using a family-centred approach. Chapter 7 returns to the issues of hearing screening, giving practical information about the principles of screening theory and the efficacy of various screening strategies and techniques. Chapter 8 focuses on hearing evaluation in infants. It begins with a good summary of developmental milestones in speech, language, and hearing and discusses several useful tools for speech and language screening. Hearing assessment procedures are discussed including behavioural techniques (unconditioned, conditioned, and visually reinforced). Nonbehavioural audiometric techniques are also described and include the historic electrodermal response, heart rate, and respiration audiometry, as well as the more contemporary techniques of Acoustic Immittance evaluation, Auditory Brainstem Response measurement, and Otoacoustic Emissions testing. Chapter 9 discusses comprehensive assessment techniques for infants with hearing loss. It begins with a good discussion of indicators of hearing loss during the first three years of life, followed by a description of the physical examination that will enable the professional to detect abnormalities in the ears and head that may be suggestive of auditory system problems. Syndromes are described that may include hearing



loss as one of their complications. Techniques for laboratory evaluation are discussed and information is provided that can assist the professional in the diagnosis and assessment of hearing loss, both conductive and sensorineural. The final chapter is dedicated to habilitation and amplification for infants. It discusses the need for early intervention, the role of the family and the need for individualized rehabilitation plans. Recommendations are made based on the Joint Committee on Infant Hearing's statement and discussion is devoted to home intervention programs and the deaf culture movement. The final section discusses various assistive devices and their fitting. Among the devices discussed are personal hearing aids, FM systems, and cochlear implants.

In general, the book is complete and well written. It provides a good foundation for many professionals who find themselves working with infants with potential hearing impairments and is successful in its goal to unite diverse fields of knowledge into one references book. I highly recommend it to anyone interested in infant audiological assessment and hearing disorders.

Multicultural Neurogenics: A Resource for Speech-Language Pathologists (1997)

Author: G. L. Wallace (Ed.)

Published by: Communication Skill Builders, 3830 East Bellevue, PO Box 42050, AZ 85733 Tucson, USA. Tel.: (602) 323-7500

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Reviewer: Ernest J. Aucone, Nova Southeastern University, Fort Lauderdale, Florida

The paucity of research addressing issues of assessment and rehabilitation of culturally and linguistically diverse individuals with neurologically based communication impairments and

dysphagia makes *Multicultural Neurogenics: A Resource for Speech-Language Pathologists* a welcome volume. The book addresses in a comprehensive manner the perils of clinicians working with minority clients who "must be able to select, gather, synthesize, and judge relevant information in the absence of guidelines, norms, and materials appropriate for minority populations". The power of this volume lies in its sweeping coverage of a vast range of Americans from non-European backgrounds and the impact of those heritages on the assessment and treatment of neurologically based communication and language impairment. Additionally, Dr. Wallace and her collaborators offer copious suggestions for culturally appropriate assessment and treatment within the confines of current healthcare practices. For these reasons, *Multicultural Neurogenics* is a must read for clinicians and researchers employed in neurolinguistic and neuropsychology settings who routinely work with minority populations, although not all is applicable to the Canadian context.

The present volume is divided into three parts. The first part provides a foundation for working with diverse populations by providing a rationale for 'multicultural neurogenics'. Part 1 is made up of several themes. First, although it is recognized that diversity can be found across groups, great diversity can also be found within groups. Differences within a group can be found in socio-economic status, education, area of residence, communication patterns, and adherence to specific cultural norms. Second, there is a need for greater attention to the individualization of assessment and treatment for all neurogenics clients. Third, Dr. Wallace and her collaborators appropriately address the issue of rapport, emphasizing the critical nature of this construct when working with clients from diverse backgrounds who may be suspicious and guarded with regards to Western approaches to the assessment and treatment of communication impairment and dysphagia.

Part 1 provides a rationale for multicultural neurogenics by first focusing on growing minority populations and their increased risk for certain conditions

that could lead to neurologically based communication impairment such as AIDS, traumatic brain injury, and drug abuse. Given the prevalence of risk factors associated with neurological impairments among minority populations, it would follow that a great percentage of clients in the neurogenics caseload are minorities. However, this is not the case. Dr. Wallace contends that minority clients are greatly underrepresented in the neurogenics caseload, thus supporting the need for multicultural neurogenics. A particular strength of Part 1 is its inclusion of a listing of the various assessment measures used in evaluating clients with communication disorders and a brief description as to the critical appropriateness of each. Speech-language pathologists and other clinicians working with these populations will find this listing informative and comprehensive, offering excellent guidance in conducting a culturally sensitive assessment. Additional issues addressed in Part 1 include the importance of recruiting and training bilingual and bicultural clinicians, the perils of employing volunteer interpreters (i.e., hospital staff, family members, friends), and the need to have a respectful understanding of the spiritual orientation, health practices, and food preferences of the minority client.

In Part 2, Dr. Wallace and her collaborators shift from the general to the very specific. As in Part 1, several themes are present. These themes include the importance of establishing rapport with the minority client. The pervasiveness of within-group differences becomes apparent as Dr. Wallace and her collaborators present specific guidelines for working with clients with African, Hispanic, Native, Asian, and Pacific Islander backgrounds. Each chapter in Part 2 is devoted to one of the aforementioned minority groups and provides a comprehensive and exhaustive discussion of historical, cultural, and communication issues as they relate to the clinical management of these groups. In Chapter 7, the authors accentuate the importance of understanding the impact of history (e.g., slavery) on the health-seeking behaviour of African-American clients. Additionally,



strong emotions are evoked as the authors present an in-depth history of African-American culture. This history acts to instill a sense of understanding among clinicians of non-African backgrounds, and helps the reader to recognize the importance of rapport when working with African-American clients.

Chapter 8 presents the historical, cultural, and communication issues of clients of Hispanic backgrounds. The importance of assessing the acculturation level of the clients is emphasized. The authors contend that acculturation is a multidimensional phenomenon, and that clinicians cannot assume that Hispanic-Americans become acculturated along all variables as a result of their exposure to mainstream culture. Indeed, acculturation may take place along certain factors from one generation to the next, but other factors (e.g., ethnic identity, family ties) may remain intact and resistant to change. As such, sensitivity to certain aspects of the Hispanic client's experience, such as the importance of the family, may go a long way in promoting rapport. The Native client, as described in Chapter 9, must also be understood in terms of history and acculturation level and how these variables contribute to the tendency of this population to underutilize speech-language rehabilitation services. Much of the information that appears in Chapter 9 has been verified by ac-

counts passed down via the oral tradition by the grandmother of one of the chapter's authors, Rhonda Friedlander, who is a Kootenai Indian raised in the traditional ways of her people. The strength of Chapter 9 lies in this qualitative, non-Western interpretation of history of the First Nations people. Finally, chapters 10 and 11 discuss issues relevant to Asian and Pacific Islander clients. The authors point out that although these two groups are often grouped together in the literature, the terms Asian and Pacific Islander include more than 60 separate ethnic and racial groups and subgroups. Furthermore, these people are quite diverse in many aspects of their lifestyles, including language, culture, religion, attitudes toward education and disabilities, childrearing practices, and the role of individuals within the family.

In Part 3, Dr. Wallace and her collaborators present a plethora of case examples that are both comprehensive and enlightening. Included in this section are clinical management considerations for dialect speakers of non-European backgrounds, non-English speaking unilingual and monocultural, polyglot and bicultural, or multicultural individuals. Disorders represented in Part 3 include aphasia, dysarthria, dysphagia, dementia, right hemisphere deficit, and traumatic brain injury. The reader will find these case presentations well organized and informative, provid-

ing appropriate guidance for the assessment and treatment of neurologically based communication and language impairment in minority populations. Appended are thumbnail sketches of each cultural group represented in the case studies. These sketches are a wonderful adjunct to the case examples as well as to the more comprehensive profiles included in chapters 7 through 11.

Dr. Wallace intended this volume to be used as a guide in incorporating multicultural issues into the neurogenics curriculum. This book is certainly appropriate for such a purpose. Students studying speech-language pathology will find this volume clear and straightforward, as well as entertaining. Established speech-language pathologists and researchers will find that *Multicultural Neurogenics* greatly adds to their knowledge base and that the area of multicultural neurogenics is an area ripe for further research. If nothing else, the reader will walk away with an understanding of the reciprocal influence that different cultures exert upon one another and the importance of this idea with regards to assessment and treatment in speech-language pathology.

