Definitions Related to Deaf, Hard of Hearing, Deaf-Blind

Hearing Loss:

- This is a broad term used to describe any level of decreased hearing acuity, i.e., mild, significant, moderate, or profound loss of hearing.
- Approximately ten percent of the general population has a hearing loss. The elderly are more likely than any other age group to have hearing problems. (One out of every three persons over the age of 65 has a hearing loss).

The following definitions are general and individuals may fall into more than one group and utilize more than one means of communication.

Hard of Hearing:

- A condition in which there is some degree of hearing loss varying from mild, to moderate, to profound. The sense of hearing is partially, but not completely functional for ordinary life purposes. The hearing loss can be acquired at any age between birth and late adulthood.
- The person, who is hard of hearing, has some residual hearing and is able to discern speech through the auditory channel, with the assistance of hearing aids and/or assistive listening devices (ALDs). They often use speech reading. They usually associate with the hearing community and use their voice. (However, there are some people who are hard of hearing that use sign language and associate with the Deaf Community).
- People who are hard of hearing comprise over ninety eight percent of the population that has a hearing loss.

Deaf:

- A condition in which perceivable sounds (including speech) have no meaning for ordinary life purposes. Visual communication, such as sign language, writing, text reading, and speech reading, is necessary. Auditory stimulation may be achieved through the use of a cochlear implant (the surgical implantation of a device in the cochlear of the ear).
- Persons who are deaf comprise approximately two percent of the population of people with hearing loss.

Pre-Lingual Deaf:

- Hearing loss that transpires prior to 3 years of age and prior to developing speech or language skills.
- A person, who is pre-lingually Deaf, usually has Deaf Community associations and generally uses ASL
- Some persons are raised and educated in an oral tradition, which means speech reading and using their voice, and they may or may not have a cochlear implant. They associate with the hearing community.
- People who are Culturally Deaf have severe to profound hearing loss that is acquired at birth or early in life. They derive little or no benefit from hearing aids or other ALDs. They rely on sign language [usually ASL, Pidgin Signing English (PSE), or Signing Exact English (SEE)] for communication, are usually affiliated with the Deaf Community, and function primarily in the Deaf Culture in terms of friends and sometimes, family. They often work in a “hearing” job setting.

Late-Deafened or Post-Lingual Deaf:

- Hearing loss that transpires post-lingually, anytime after the development of speech and language.
- A person, who is late deafened, has a condition in which there is a severe to profound hearing loss acquired after
the development of speech (i.e., at about three years of age or any time thereafter into adulthood). New technology for hearing aids and cochlear implants mean that they may obtain sound stimulation and sometimes perceive speech without visual aids. They usually associate with the hearing community and use their voice. The person relies on their native language, e.g., English, Spanish, etc. for communication; may or may not know sign language; may or may not affiliate with Deaf Community; primarily functions within the “hearing world” in terms of family, friends, and work relationships.

- The late-deafened population comprises seventy five percent of the deaf population, which is two percent of the population with hearing loss.

**Deaf-blind:**

- Hearing loss along with visual loss less than 20/200 in the better eye with correction or visual field of twenty degrees or less. Visual loss frequently occurs from Ushers Syndrome and appears in later teens or early twenties.
- The person who is Deaf-Blind usually associates with the Deaf Community and usually uses ASL, but places hands on the signers hand to receive the message (tactile).

**Hearing Impaired:**

- Use of this term has fallen in disfavor by some due to the negative connotation of the word "impaired," but it is still used in formal legal, medical, and educational situations.
- This is a broad term used to describe all hearing loss and this includes the total population of people who are deaf and hard of hearing.
- A preferred broad term is i.e. mild hearing loss, significant hearing loss, or profound hearing loss.

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**Attachment B - Part 2**

**Definitions - Bulletin Terminology**

**Auxiliary Aids/Assistive Listening Devices** – Assistive Listening Devices (ALDs) are amplification instruments that are designed to be helpful in specific, but not all listening situations. Hearing aids, which also amplify sound, are instruments that can be used in all listening situations. But because a hearing aid is an all-purpose instrument, it may not be as successful in each and every specific application. An ALD can increase the loudness of a desired sound (a radio or television, a public speaker, an actor or actress, someone talking in a noisy place) without increasing the loudness of the background noises. There are many ALDs available today, from sophisticated systems used in theaters and auditoriums to small personal systems. People with all degrees and types of hearing loss -- even people with normal hearing -- can benefit from ALDs. Some assistive listening devices are used with a hearing aid. Some can be used without a hearing aid.

Various kinds of assistive listening devices are:

- **Personal Listening Systems:** All are designed to carry sound from the speaker (or other source) directly to the listener and to minimize or eliminate environmental noises. Some of these systems, such as auditory trainers, are designed for classroom or small group use. Others, such as personal FM systems and personal amplifiers, are especially helpful for one-to-one conversations in places such as automobiles, meeting rooms, and restaurants. Direct hard wire connections between microphone and receiver or infrared transmission systems usually ensure confidentiality. FM systems are not confidential if someone else is on the same frequency and within range.
- **TV Listening Systems:** Designed for listening to TV, radio, or stereo without interference from surrounding noise or the need to use very high volume. Models are available for use with or without hearing aids. Models are available for use with or without hearing aids or cochlear implants.
- **Direct Audio Input Hearing Aids and Cochlear Implants:** Hearing aids with audio input connections, can be
connected to TV, stereo, tape, and radio as well as to microphones, auditory trainers, personal FM systems and other assistive devices. Some connections are direct hard wire and other are wireless. A variety of adaptors, e.g., neckloop, boot, etc., are used depending on consumer preference and hearing aid or cochlear implant specifications.

A **cochlear implant** is an electronic device designed to provide sound information for adults and children who have a profound sensorineural hearing loss (nerve deafness) in both ears and show [little or] no ability to understand speech through hearing aids. (Source: Issues and Answers--written by the Cochlear Corporation, as of January 1994.)

- **Telephone Amplifying Devices:** Many, but not all, standard telephone receivers come with an amplifying coil. This coil is activated when a person whose hearing aid is in the “T” position picks up the telephone receiver. These phones are called "hearing-aid compatible," and can be procured from the telephone company. Not all hearing aids have a "T" switch so make sure that the aid has one before asking for a hearing aid compatible phone. In addition, specially designed telephone receivers amplify sound. Also, special amplifying devices can be purchased that attach to a regular telephone receiver. Most of these devices have volume control dials. Some are recommended only for use where all household members have hearing loss. Some return to standard sound levels automatically and can be used in homes for people with or without hearing loss.

- **Auditorium Type Assistive Listening Systems:** Many major auditoriums and theaters, churches, synagogues, and other public places are equipped with special sound systems for people with hearing loss. Essentially, they consist of a transmitting system, which uses one of a variety of methods to send sound signals to an individual receiver. (Sometimes there is a rental fee for the receiver.) Some systems must be used with a hearing aid; other systems can be used with or without a hearing aid.

**Behavioral Health Managed Care Organization (BH-MCO)** - An entity, which manages the purchase and provision of behavioral health services.

**Behavioral Health Services Provider** - A provider, practitioner, or vendor/supplier that contracts with a BH-MCO to provide behavioral health services under the HealthChoices Behavioral Health Program.

**Cultural Competency** - The understanding of the social, linguistic, ethnic, and behavioral characteristics of a community or population, and the ability to translate systematically that knowledge into practices in the delivery of services. Such understanding may be reflected, for example, in the ability to: identify and value differences; acknowledge the interactive dynamics of cultural differences; continuously expand cultural knowledge and resources with regard to populations served; collaborate with the community regarding service provisions and delivery; and commit to cross-cultural training of staff and develop policies to provide relevant, effective programs for the diversity of people served.

**Denial of Services** - A decision by the MCO not to pay for a prescribed service, to pay for a lesser scope or duration of a service than prescribed or to pay for a different service than was prescribed.

**Health Maintenance Organization (HMO)** - A Commonwealth licensed risk-bearing entity which combines delivery and financing of health care and which provides basic health services to enrolled Members for a fixed pre-paid fee.

**HealthChoices (HC)** - The name of Pennsylvania's 1915(b) waiver program to provide mandatory managed health care to Medical Assistance recipients.

**Managed Care Organization (MCO)** - An entity that manages the purchase and provision of physical or behavioral health services.

**Mental Health Professional** - A person trained in a generally recognized clinical discipline including, but not limited
to, psychiatry, social work, psychology, and nursing who has a graduate degree and mental health clinical experience, or an RN with at least two years of mental health clinical experience.

**Provider** - A person, firm, or corporation that provides behavioral health or medical services or supplies.

**Special Needs Populations** - Individuals whose complex medical, psychiatric, behavioral or substance abuse conditions, living circumstances and/or cultural factors necessitate specialized outreach, assistance in accessing services and/or service delivery and coordination on the part of the MCO and its provider network.

**Sign Language** - The term "sign language" most often signifies American Sign Language (ASL). ASL is a distinct visual-gestural-kinesthetic language. While it borrows elements from spoken English and old French sign language, it has unique grammatical, lexical and linguistic features of its own. It is not English on the hands. Because ASL is not English, educators have developed a number of signed codes, which use ASL vocabulary items, modify them to match English vocabulary, and put them together according to English grammatical rules. These codes have various names including Signed Exact English (SEE) and Manual Coded English (MCE). Additionally, when native speakers of English and native users of ASL try to communicate, the "language" that results is a mixture of both English and ASL vocabulary and grammar. This is referred to as PSE (Pidgin Signed English) or contact signing. (Definition from Registry of Interpreters for the Deaf – RID)

**Sign Language Interpreter** - Sign Language/spoken English interpreters are highly skilled professionals. They must be able to listen to another person's words, inflections and intent and simultaneously render them into the visual language of signs using the mode of communication preferred by the deaf consumer. The interpreter must also be able to comprehend the signs, inflections and intent of the consumers who are deaf and simultaneously speak them in articulate, appropriate English. They must understand the cultures in which they work and apply that knowledge to promote effective cross-cultural communications. (Definition from RID)

**Sign language Interpreting** - Sign language interpreting is a highly specialized field. The professional interpreter is able to adjust to a broad range of consumer preferences and/or needs for interpretation. Sometimes it is necessary to have two or more interpreters working simultaneously in order to satisfy the preferences and needs of a varied audience (team interpreting). On occasion, one of the interpreters may be an individual who is deaf or a person fluent in a language other than English or American Sign Language. Interpreters should be aware of and sensitive to ethnic/cultural and linguistic concerns.

**Team Interpreting** - Team interpreting is using two or more interpreters functioning as equal members of a team, rotating responsibilities at pre-arranged intervals, and providing support and feedback to each other (using a certified deaf interpreter). The decision to use a team rather than an individual interpreter is generally based on length and/or complexity of the assignment, the unique needs of the persons being served, and the dynamics of the setting.