Instructor: Samira Anderson, Au.D., Ph.D.  
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Office Phone: 301-405-4224  
Office: 0119B  
Office Hours: by appointment  
Dept. Phone: 301-405-4213  
Meeting Time: Mon-Wed (mostly), 3:15 pm to 6:30 pm  
Meeting Location: Susquehanna Hall, Room 2120

**Learner Outcomes**

This course introduces students to the theories and procedures used to provide aural/audiological rehabilitation to children and adults who have hearing loss and to provide concomitant services to their family members. Students will develop competencies in the following areas: Knowledge and understanding of basic concepts and components of aural/audiological rehabilitation.

1. Demonstrate knowledge of assessment procedures for determining aural rehabilitation needs, including means for assessing hearing status, auditory, visual, and audiovisual speech recognition, hearing-related disabilities, and conversational fluency.

2. Demonstrate knowledge of cultural and linguistic factors that may affect your aural rehabilitation programs.

3. Describe the role of auditory and visual cues in spoken communication.

4. Develop aural rehabilitation plans for children, adults, and their family members.

5. Describe elements of counseling, psychosocial support, and assertiveness training.

6. Describe the evidence for auditory neuroplasticity across the lifespan.

*See p. 7 for the Audiology Knowledge and Skills addressed by specific learning outcomes

**RECOMMENDED READING**

# Course Schedule

## Reduction of disability and hearing handicap

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Activities</th>
<th>Readings</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 4</td>
<td>Discussion responses due for Hamilton et al. (2018)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
hearing and children with mild bilateral or unilateral hearing loss,” Ear Hear 39, 783-794.

## Communication Strategies

### June 10

**Communication Strategies and Conversational Styles**  
Kahoot!  
Class discussion  
Role play activities  
Case studies  
Readings:  
- Chapter 6, Tye-Murray  
➢ Post on-line discussion article: Harris, J. L., Fleming, V. B., Harris, C. L. (2012). A focus on health beliefs: What culturally competent clinicians need to know. Perspectives on Communication Disorders and Sciences in Culturally and Linguistically Diverse (CLD) Populations, 19, 40-48. (Kathryn)
➢ Discussion responses due for Nieman et al (2016)

### June 12

**Assessment of Conversational Fluency and Communication Difficulties**  
Kahoot!  
Class discussion  
Create daily log  
Mock discussion of communication difficulties  
Readings:  
- Chapter 7, Tye-Murray  
➢ Post on-line discussion article: Jones, R. (2009). Acquisition of information and the utilization of hearing health care services and related hearing aid technologies by parents of deaf and severely hard of hearing children. ECHO, 4, 6-23. (Calli)

### June 13

➢ Discussion responses due for Flores et al. (1996)

### June 17

➢ Discussion responses due for Harris et al. (2012)

### June 19

**Communication strategies training, counseling, psychosocial report**  
Kahoot!  
Class discussion  
Role play informational and affective counseling  
Readings:  
- Chapter 9, Tye-Murray  
➢ Discussion responses due for Jones (2009)
➢ ALD presentations

## Aural Rehabilitation/Habilitation Plans

### June 20

**Aural rehabilitation for adults**  
Kahoot!  
Class discussion
<table>
<thead>
<tr>
<th>Work on rehabilitation plan</th>
<th>Readings:</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ Post on-line discussion article: Calendruccio, L. (2010). Sentence recognition for non-native speakers: Researchers reduce linguistic bias in audiology assessment. The ASHA Leader, 15, 5-6. (Mary)</td>
<td></td>
</tr>
<tr>
<td>June 24 Aural rehabilitation for older adults</td>
<td>Kahoot!</td>
</tr>
<tr>
<td>Class discussion</td>
<td></td>
</tr>
<tr>
<td>Work on rehabilitation plan</td>
<td>Readings:</td>
</tr>
<tr>
<td>June 26 Aural rehabilitation for children</td>
<td>Kahoot!</td>
</tr>
<tr>
<td>Class discussion</td>
<td></td>
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<tr>
<td>Work on rehabilitation plan</td>
<td>Readings:</td>
</tr>
<tr>
<td>June 27</td>
<td>➢ Discussion responses due for Calendruccio (2010)</td>
</tr>
<tr>
<td>July 1 Neuropasticity across the lifespan</td>
<td>Kahoot!</td>
</tr>
<tr>
<td>Class discussion</td>
<td></td>
</tr>
<tr>
<td>Work on rehabilitation plan</td>
<td>Readings:</td>
</tr>
<tr>
<td>Research articles:</td>
<td></td>
</tr>
<tr>
<td>July 3 Final exam</td>
<td>➢ Discussion responses due for Bunta et al. (2016)</td>
</tr>
<tr>
<td>➢ Present rehabilitation plans</td>
<td></td>
</tr>
</tbody>
</table>
Learning Assessments

Class participation

Each student will be expected to contribute to the class discussion at least two times per class to receive the full four percentage points. A powerpoint presentation will be posted prior to each scheduled class. This presentation and the assigned readings should help you to prepare for the discussion.

Post on-line article discussion

You will be responsible for leading and participation in on-line discussions of articles focused on cultural and linguistic diversity. Each person will take the lead on one article, but each person must participate in each discussion. Refer to the rubric on ELMS.

ALD presentation

You will each be asked to act in the role of accessibilities coordinator for an event. You will be given a description of the event and you will need to determine what is necessary to make the event accessible to people with different listening/visual needs. You will present your recommendations in a powerpoint to the class. See ELMS for rubric.

Communication Options Debate

You will research the pros and cons of a particular communication option for a child with hearing loss or deafness and will participate in a debate regarding the merits of communication options with your classmates. See ELMS for rubric.

Aural Rehabilitation Plan

You will work in pairs to develop an adult/child rehabilitation program for a specific individual/family or group and will present your plan to the class on the last day. See ELMS for details.
Campus Policies

It is our shared responsibility to know and abide by the University of Maryland’s policies that relate to all courses, which include topics like:

- Academic integrity
- Student and instructor conduct
- Accessibility and accommodations
- Attendance and excused absences
- Grades and appeals
- Copyright and intellectual property

Please visit http://apps.gradschool.umd.edu/Catalog/policy.php?the-academic-record for the Graduate School’s full list of campus-wide policies and follow up with me if you have questions.

Make-up /Assignments
If you are aware ahead of time that you will be absent on the day of a presentation, you may schedule a make-up presentation provided that (1) you have an approved University Acceptance (e.g., religious observance) and (2) I am notified in writing within the first weeks of the semester. Assignments are expected to be submitted by the dates indicated on the syllabus or in advance of the due date if you anticipate being absent from class on the due date. You should inform me that you will be absent ahead of time to make arrangements to submit the assignment.

When the reason for an absence on the day of an exam or assignment is not foreseeable, you must inform me as soon as possible. Please make every effort to contact me by phone or by email prior to class if you will be absent due to illness or other emergency. Campus Senate policy requires students who are absent due to illness/injury to furnish documentary support to the instructor. You must provide written documentation verifying your illness/injury on the day that you return to class. You will not be allowed to turn in missed assignments or make up exams if you have not provided this documentation. In addition, if it is found that you have falsified the documentation provided, you will be referred to the University’s Student Conduct Office.

Make-up presentations will be scheduled at a time that is mutually agreeable to both the instructor and the student. Assignments are due immediately by electronic submission if possible or upon the student’s return to school. All missed assignments not turned in will result in a grade of zero for that exam/assignment.

Problems/Questions
Please do not hesitate to make an appointment to speak with me if you are having difficulty with the material or with an assignment, if you have questions about how something was graded, or if you have other problems or issues related to the course you wish to discuss. Email is an excellent way to reach me outside of course meetings.

Get Some Help!
You are expected to take personal responsibility for your own learning. This includes acknowledging when your performance does not match your goals and doing something about it. Everyone can benefit from some expert guidance on time management, note taking, and exam preparation, so I encourage you to consider visiting http://ter.ps/learn and schedule an appointment with an academic coach.Sharpen your communication skills (and improve your grade) by visiting http://ter.ps/writing and schedule an appointment with the campus Writing Center. Finally, if you just need someone to talk to, visit http://www.counseling.umd.edu.

Everything is free because you have already paid for it, and everyone needs help… all you have to do is ask for it.
Audiology Knowledge and Skills addressed by specific learning outcomes:

3.1.1A PROFESSIONAL PRACTICE COMPETENCIES
- Clinical Reasoning (Outcomes 1 to 5)
- Evidence-Based Practice (Outcomes 1 to 6)
- Concern for Individuals Served (Outcomes 1 to 5)
- Cultural Competence (Outcomes 1 to 5)
- Collaborative Practice (Outcomes 1 to 5)

3.1.2A FOUNDATIONS OF AUDIOLOGY PRACTICE
- Normal aspects of auditory and vestibular function across the lifespan (Outcomes 1 to 4)
- Normal aspects of speech perception across the lifespan (Outcomes 1 to 4)
- Interaction and interdependence of speech, language, and hearing in the discipline of human communication sciences and disorders (Outcomes 1 to 4)
- Effects of hearing loss on the speech and language characteristics of individuals across the life span and the continuum of care (Outcomes 1 to 4)
- Effects of hearing impairment on educational, vocational, social, and psychological function and, consequently, on full and active participation in life activities (Outcomes 1 to 4)
- Administer clinically appropriate and culturally sensitive assessment measures (Outcomes 1 and 2)
- Principles and practices of research, including experimental design, evidence-based practice, statistical methods, and application of research to clinical populations (Outcome 1)

3.1.3A IDENTIFICATION AND PREVENTION OF HEARING LOSS, TINNITUS, AND VESTIBULAR DISORDERS
- The prevention of the onset of loss of auditory system function, loss of vestibular system function, development of tinnitus, and development of communication disorders (Outcomes 1 to 5)
- The use of protocols to minimize the impact of the loss of hearing, tinnitus, loss of vestibular system function, and development of communication disorders (Outcomes 1 to 6)
- The use of screening protocols, including clinically appropriate and culturally sensitive screening measures, to assess individuals who may be at risk for hearing impairment and activity limitation or participation restriction (Outcomes 1 and 2)
- The screening of individuals for speech and language impairments and other factors affecting communication function using clinically appropriate and culturally sensitive screening measures (Outcomes 1 and 2)
- The use of screening tools for functional assessment (Outcomes 1 and 2)
- Applying the principles of evidence-based practice (Outcomes 1 to 6)
- Selection and use of outcomes measures that are valid and reliable indicators of success of prevention programs (Outcomes 1 to 5)
3.1.4A ASSESSMENT OF THE STRUCTURE AND FUNCTION OF THE AUDITORY AND VESTIBULAR SYSTEMS

- Evaluate information from appropriate sources to facilitate assessment planning (Outcomes 1 to 5)
- Obtain a case study (Outcomes 1 to 5)
- Administer clinically appropriate and culturally sensitive assessment measures (Outcomes 1 and 2)
- Perform assessment to plan for rehabilitation (Outcomes 1 to 5)
- Document evaluation procedures and results (Outcomes 1 to 5)
- Interpret results of the evaluation to establish type and severity of disorder (Outcomes 1 to 5)
- Generate recommendations and referrals resulting from the evaluation processes (Outcomes 1 to 5)
- Provide counseling in a culturally sensitive manner to facilitate understanding of the hearing loss, tinnitus, or balance disorder of the individual being served (Outcomes 1 to 5)
- Maintain records in a manner consistent with legal and professional standards (Outcomes 1 to 5)
- Communicate results and recommendations orally and in writing to the individual being served and other appropriate individual(s) (Outcomes 1 to 5)
- Apply the principles of evidence-based practice (Outcomes 1 to 6)
- Select and use outcomes measures that are valid and reliable indicators of success in assessment protocols that are used (Outcomes 1 to 5)

3.1.5A ASSESSMENT OF THE IMPACT OF CHANGES IN THE STRUCTURE AND FUNCTION OF THE AUDITORY AND VESTIBULAR SYSTEMS

- Administer clinically appropriate and culturally sensitive self-assessment measures of communication function for individuals across the lifespan and the continuum of care (Outcomes 1 to 5)
- Administer clinically appropriate and culturally sensitive scales of communication function to communication partners of the individual being served (Outcomes 1 and 2)
- Select and use outcomes measures that are valid and reliable indicators of success in determining the impact of changes in structure and function of the auditory and vestibular systems (Outcomes 1 to 5)

3.1.6A INTERVENTION TO MINIMIZE THE EFFECTS OF CHANGES IN THE AUDITORY AND VESTIBULAR SYSTEMS ON AN INDIVIDUAL’S ABILITY TO PARTICIPATE IN HIS OR HER ENVIRONMENT

- Perform assessment for aural (re)habilitation (Outcomes 1 to 5)
- Perform assessment for tinnitus intervention (Outcomes 1 to 5)
- Develop and implement treatment plans using appropriate data (Outcomes 1 to 5)
- Counsel individuals served, families, and other appropriate individuals regarding prognosis and treatment options (Outcomes 1 to 5)

Develop culturally sensitive and age-appropriate management strategies
• Develop culturally sensitive and age-appropriate management strategies (Outcomes 1 to 5)
• Perform hearing aid, assistive listening device, and sensory aid assessment (Outcomes 1 to 5)
• Perform assessment of device used to manage tinnitus (Outcomes 1 to 5)
• Recommend, dispense, and service prosthetic and assistive devices (Outcomes 1 to 5)
• Provide hearing aid, assistive listening device, and sensory aid orientation (Outcomes 1 to 5)
• Conduct audiologic (re)habilitation and engage in interprofessional practice to maximize outcomes for individuals served (Outcomes 1 to 5)
• Serve as an advocate for individuals served, their families, and other appropriate individuals (Outcomes 1 to 5)
• Monitor and summarize treatment progress and outcomes (Outcomes 1 to 5)
• Assess efficacy of interventions for auditory, tinnitus, and balance disorders (Outcomes 1 to 6)
• Apply the principles of evidence-based practice (Outcomes 1 to 6)
• Document treatment procedures and results (Outcomes 1 to 5)
• Maintain records in a manner consistent with legal and professional standards (Outcomes 1 to 5)
• Communicate results, recommendations, and progress in a culturally sensitive and age-appropriate manner to appropriate individual(s) (Outcomes 1 to 5)
• Select and use outcomes measures that are valid and reliable indicators of success in determining the impact of the interventions used to minimize the effects of changes in structure and function of the auditory and vestibular systems (Outcomes 1 to 5)