Using an Adult Self-Assessment Scale with Adolescents

Judy Elkayam

Low Incidence Cooperative Agreement
Des Plaines, IL

Kris English
Duquesne University

A self-assessment scale typically used with adults and their significant others was adapted to use with an adolescent with hearing loss and his friend. Discussion of the results from both measures facilitated individualized counseling for the audiologist, and promoted independent problem-solving on the part of the adolescent. Applications for this kind of counseling strategy are discussed.

Introduction

Educational audiologists are in a unique position to offer much-needed counseling services to children with hearing loss. Counseling typically takes the form of information-sharing, by teaching children about their hearing loss, hearing aid care, assistive devices, and so on (Martilla & Mills, 1994; Von Almen & Blair, 1991). Frequently, learning this content becomes a goal for the Individualized Educational Plan (IEP).

Grunblatt and Daar (1994) point out that during the course of this type of informational counseling, personal adjustment concerns may be expressed, since children with hearing loss are more likely to have a diminished sense of self-worth and have greater feelings of social alienation compared to children with normal hearing (Capelli, Daniels, Durieux-Smith, McGrath, & Neuss, 1995; Moores & Meadow-Orlans, 1990). Children are likely to have a great deal on their mind about these difficulties and would benefit from having an audiologist who is a good listener as well as a good explainer (Clark, 1994; Mendel, 1997).

Adolescents pose a particular challenge in counseling as they are less likely to be forthcoming about their communication problems. To address this concern, it was hypothesized that a self-assessment scale might stimulate communication without seeming overly intrusive. Since adolescents place a high value on peer perceptions, a self-assessment scale that solicited responses from both a teen and a good friend seemed likely to enhance counseling efforts. The following report describes how an adaptation of an adult self-assessment scale was used to interact with one teen student.

Methods

Instruments

The Self-Assessment of Communication (SAC) and the Significant Other Assessment of Communication (SOAC) scales (Schow & Nerbonne, 1982) were selected because they provide perspectives from a "significant other" as well as from the person with hearing loss (Appendices A and B). The SAC and SOAC are "companion questionnaires for screening primary communicative difficulties and secondary emotional and social consequences" (Geier, 1997, p. 24). Each scale poses ten questions addressing communicative difficulties known to accompany hearing loss. Six questions explore communicative problems in different situations, two questions address feelings associated with those problems, and two other questions address how the individual perceives to be viewed by others. The response format is a five-option multiple choice, with answers ranging from "almost never," indicating little or no perceived communicative difficulty, to "practically always," indicating significant perceived difficulty. The SAC is designed to be completed by the individual with the hearing loss; the SOAC is designed to be completed by a "significant other" in that individual's life. The scale was designed to be used primarily with adults, as evidenced by examples of situations where communication may be hampered ("...in a civic meeting, in a fraternal or women's club, at an educational lecture, etc.").

When administering this scale to teens, the original probes were generally maintained, but examples were changed in an effort to reflect more accurately situations in which teens often find themselves. Examples of places where communicative difficulty may exist were amended to include: at home with parents, siblings; family gatherings, including holidays, birthday parties, etc.; at school, including lectures, discussions, taking notes, science or language labs, hallways between classes, school assemblies; during extracurricular activities including sports events; at parties; while driving in a car; and when shopping. Two questions were also added to the SAC and the SOAC, to emphasize Question #7 and to expand upon Question #10. The two questions added to the SAC were these:

1. Do you think that your communicative difficulties have prevented you from participating in any activities you might otherwise enjoy?
2. Do you think that others perceive you as being less social than your hearing friends because of your hearing loss?
Using an Adult Self-Assessment Scale with Adolescents

Corresponding items added to the SOAC were:
1. Has this individual’s hearing loss prevented him/her from participating in all the events s/he might like to?
2. After getting to know this individual, do you feel his/her personality is more open than you originally thought?

Subjects

The SAC was given to a 14 year old male student who is hard-of-hearing. Mark is an eighth grade student with a mild (30 dBHL) bilateral sensorineural hearing loss. Results of early school hearing screenings and follow-up audiologic evaluations were inconsistent; at one time, Mark was accused of being a malingerer. By the time the hearing loss was confirmed, Mark was in sixth grade. He is a very intelligent young man, an avid reader, and a computer whiz who prefers the company of two or three close friends rather than large groups. Mark is also a straight A student. He is adamant in his refusal to wear hearing aids, indicating that he sees no need for them. While he is physically mature, his ear canals are very narrow and the family reportedly has been told that he is not a candidate for CIC hearing aids. When asked various questions about his perception of the hearing loss on his functioning in a variety of areas, his responses were vague. Mark agreed to complete the adapted SAC, and identified one friend as his “significant other” (SO) to complete the SOAC.

Results

Mark’s responses and those of the SO were generally compatible, with a primary communicative difficulty reported to occur in adverse listening environments; both respondents reported that Mark tended to avoid some situations because he knew he would not be able to hear, and the SO reported that sometimes he and his friends because frustrated when trying to communicate with him. When the first author met with Mark at school to discuss his responses and those of his friend, Mark was surprised to learn that sometimes his friends are frustrated with him. The tenor of the conversation then became more affective than informational, since Mark had already determined why some listening situations were easier for him than others and what he needs to do to “get by”. He was asked if he thought all his friends were frustrated when communicating with him, or just the one friend who had completed the questionnaire. Strategies for investigating this possibility, and Mark’s possible reactions to the responses of others, were discussed. After assuring Mark that coercing him into wearing hearing aids was not a goal of the conversation, the first author then pursued a line of questioning to help Mark envision what some advantages and disadvantages of hearing aid use might be and what others’ reactions could be if he chose to wear hearing aids. Unlike informational counseling, where the audiologist might feel a tangible goal has been achieved (“The patient now knows the degree and nature of his hearing loss”), at the conclusion of this session of affective counseling, it was not possible to identify measurable goals which had been achieved. Yet, it was apparent that both the audiologist and Mark had a new perspective on how his hearing loss has impacted him on a personal, and interpersonal, level.

Discussion

Adolescents who are hard-of-hearing face psychosocial issues which involve the conflicting challenges of being not-quite children and not-quite adults, as well as issues of being not-quite hearing and not-quite deaf. As stated in Altman (1996), the "hurdles" which all adolescents must conquer involve autonomy: identity of self, affiliation with a peer group, physiologic changes, and occupational preparation. With respect to the first three issues, adolescents who are hard-of-hearing must resolve for themselves whether they want to belong to a hearing world where they are often unable to predict how effectively they will be able to communicate, or to a deaf world where they can be viewed by other members as being only visitors. In facing these development/identity issues, adolescents who are hard-of-hearing need to have an accurate picture of how they are viewed by their many and varied communicative partners.

Perceptions can be skewed, at least in part, by the nature and level of previous parental involvement in controlling their hard-of-hearing child's communicative environment. Parents of children who are hard-of-hearing are often told that one way to advocate for their child is to serve as a communicative intermediary between the child and the rest of the world. This often takes a form which is familiar to most audiologists: hand-picking those teachers who have a teaching style which enhances comprehension; "structuring" play dates to insure successful communication; "rehearsing" an anticipated communicative event to help insure success, etc. While these measures may have been appropriate to facilitate the development of a variety of skills, they also may have the undesired "side effect" of masking communicative problems that the child who is hard-of-hearing eventually will have to face. Adolescents need to have a realistic understanding of the impact of their hearing loss on communication, as well as their competency as oral communicators.

In Clark and Martin (1994), Garstecki states that "it is important for the audiologist to help these (adult) patients realize that their decision to ignore their hearing problems may impinge greatly on their spouses or other significant people in their lives" (p. 228). Similarly, adolescents who are facing the multiple challenges of acceptance, identify formulation, and acknowledgement of their communicative needs have to understand that their decision regarding use or non-use of amplification can impinge on interpersonal relationships.

With some modification, the SAC and SOAC measures can be used to help adolescents 1) identify their communicative strengths and weaknesses, 2) obtain a picture of how they are viewed by others, and 3) provide a basis for affective and informational counseling by the audiologist. When completed by both the teen and a friend of his/her choosing, these measures can provide insight to the adolescent who refuses to wear hearing aids; decides to wear hearing aids only in school; decides to wear
monaural rather then binaural amplification; chooses cosmetic factors over technological improvement; or who rules out the use of an assistive listening device.

It is critical to note that the purpose of administering the scales is not to coerce the adolescent into changing decisions, but rather to “open the door” to communication, to give him/her a picture of how his/her decisions might impact on communication skills, interpersonal relationships and general lifestyle. It can also provide the audiologist with information regarding some of the emotional challenges the student is facing. This information may help facilitate a dialogue between student and parent as each attempts to understand the other’s perspective and to facilitate the parents’ understanding of the developmental and identity issues their child is experiencing.

An adolescent’s decisions regarding his/her use of amplification can affect interpersonal relationships and the establishment of identity. A self-assessment scale can be used by audiologists to facilitate the adolescent’s journey through this time in his/her life.

References


Martital, J., & Mills, M. (1994). Knowledge is power. (Available from [Mississippi Bend Area Education Agency, Special Education Division, 729 21st Street, Bettendorf IA 52722-5096, 800/947.2329]).


Appendix A

Self Assessment of Communication*
(Schow & Nerbonne, 1982)

Instructions: The purpose of this scale is to identify the problems your hearing loss may be causing you.

Please select the appropriate number to answer the following questions:

1 = almost never
2 = occasionally
3 = about half the time
4 = frequently
5 = practically always

Select only one number for each question. If you have a hearing aid, please fill out the form according to how you communicate when the hearing aids not in use.

Various Communication Situations

(1) Do you experience communication difficulties in situations when speaking with one other person? (for example, at home, at work, in a social situation, with a waitress, a store clerk, with a spouse, boss, etc.)

(2) Do you experience communication difficulties in situations when conversing with a small group of several persons? (for example, with friends or families, co-workers, in meetings or casual conversations, over dinner or while playing cards, etc.)

(3) Do you experience communication difficulties while listening to someone speak to a large group? (for example, at a church or civic meeting, in a fraternal or women’s club, at an educational lecture, etc.)

(4) Do you experience communication difficulties while participating in various types of entertainment? (for example, movies, TV, radio, plays, night clubs, musical entertainment, etc.)

(5) Do you experience communication difficulties when you are in an unfavorable listening environment? (for example, at a noisy party, where there is background music, when riding in an auto or bus, when someone whispers or talks from across the room, etc.)
Using an Adult Self-Assessment Scale with Adolescents

(6) Do you experience communication difficulties when using or listening to various communication devices? (for example, telephone, telephone ring, doorbell, public address system, warning signals, alarms, etc.)

* Reprinted with permission

Appendix B

Significant Other Assessment of Communication*
(Schow & Nerbonne, 1982)

Instructions: The purpose of this scale is to identify the problems a hearing loss may be causing your significant other.

Please select the appropriate number to answer the following questions:

1 = almost never
2 = occasionally
3 = about half the time
4 = frequently
5 = practically always

Select only one number for each question. If the patient has a hearing aid, please fill out the form according to how he/she communicates when the hearing aid is not in use.

Various Communication Situations

(1) Does he/she experience communication difficulties in situations when speaking with one other person? (for example, at home, at work, in a social situation, with a waitress, a store clerk, with a spouse, boss, etc.)

* Reprinted with permission

(2) Does he/she experience communication difficulties in situations when conversing with a small group of several persons? (for example, with friends or families, co-workers, in meetings or casual conversations, over dinner or while playing cards, etc.)

(3) Does he/she experience communication difficulties while listening to someone speak to a large group? (for example, at a church or civic meeting, in a fraternal or women's club, at an educational lecture, etc.)

(4) Does he/she experience communication difficulties while participating in various types of entertainment? (for example, movies, TV, radio, plays, night clubs, musical entertainment, etc.)

(5) Does he/she experience communication difficulties when in an unfavorable listening environment? (for example, at a noisy party, where there is background music, when riding in an auto or bus, when someone whispers or talks from across the room, etc.)

(6) Does he/she experience communication difficulties when using or listening to various communication devices? (for example, telephone, telephone ring, doorbell, public address system, warning signals, alarms, etc.)

* Reprinted with permission

Feelings About Communication

(7) Do you feel that any difficulty with your hearing limits or hampers your personal or social life?

(8) Does any problem or difficulty with your hearing upset you?

Other People

(9) Do others suggest that you have a hearing problem?

(10) Do others leave you out of conversations or become annoyed because of your hearing?

Remember to answer all of the questions and if you wear a hearing aid answer the way you hear without the hearing aid.

Raw Score: _____ x 2 = _____ 20 = x 1.25 = _____ %