Hearing loss –
the facts

• In Australia, three to six children in
every thousand have some degree of
hearing loss. Approximately 250–400
children born each year have significant
permanent hearing loss in both ears.
Permanent hearing loss is where the
hearing threshold (or hearing level)
is more than 40dB and where this
threshold is permanent.
• Each year in Victoria between 65 and
75 children are born with a moderate
or greater degree of hearing loss in
both ears.
• More than 11,000 Australian children
under the age of 17 years are fitted with
hearing aids or a cochlear implant.
• According to Australian Hearing’s aided
child demographics (2006), nearly 3000
Victorian children under the age of 17
are fitted with hearing aids or a cochlear
implant. Of these children:
  – 37 per cent have a mild loss
  – 38 per cent have a moderate
    hearing loss
  – 13 per cent have a severe hearing loss
  – 12 per cent have a profound
    hearing loss.
• Each year approximately 1300–1500
Australian children under 17 years are
fitted with hearing aids for the first time.
Of these children:
  – approximately 25 per cent live in
    Victoria
  – 36 per cent are under the age of four.
• The tests used to diagnose a baby with
a hearing loss are reliable.

• Research has shown that early diagnosis
and early intervention do make a
difference. Babies who are diagnosed
early and start wearing hearing aids and
attending early intervention services by
six months of age have better language
and learning outcomes than those who
begin late.1,2,3

• Types of hearing loss can be:
  – unilateral (one ear)
  – bilateral (two ears)
  – congenital (present at or soon after
    birth)
  – acquired
  – conductive
  – sensorineural, or
  – a combination of the above.
• Most children born with a hearing loss
will benefit from hearing aids, and some
may benefit from a cochlear implant.
Hearing aids are available free of charge
to babies and children from Australian
Hearing. Hearing aids and cochlear
implants assist the child to hear and to
develop speech and language.4
• You don’t need to be able to hear to
communicate. Babies use many types
of communication including vision,
gestures, touch, body language and
voice.
• Young babies can start to communicate
their needs using sign language even
before they can talk. Many families
whose child has a hearing loss learn to
sign to their child.
• Auslan is the name of the sign language
used in Australia. It is a complete
language in its own right, capable of
all the functions of any other language.

Young children learn sign language at
the same time and pace as any other
language.
• Typically, the main priority for parents
is to communicate with their child by
whatever means that suits their child
and family best. Parents will need to
make decisions about such matters as
using sign language, fitting a hearing aid
or the child having a cochlear implant.
• A number of risk factors that are
associated with deafness are also
known to cause other disabilities, for
example certain syndromes or viral and
bacterial risk factors. Having a hearing
loss does not automatically mean
your child will have other disabilities.
However, many babies with hearing loss
will be referred to a paediatrician so that
their health and development can be
assessed and assistance provided where
necessary to ensure the child has the
best chance of achieving their potential.

1 Markides, A., Age at fitting of hearing aides and
speech intelligibility, British Journal of Audiology,
2 Robinshaw, H., The pattern of development from
non-communicative behaviour to language by
hearing impaired and hearing infants, British
3 Yoshinaga-Itano, C., Sedey, A. L., Coulter, D., et al.,
Language of early- and later-identified children
4 Aussie deaf kids, in Building blocks: Helping a
friend whose baby has been diagnosed with a
hearing loss (www.aussiedeafkids.com).

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