

Deafness – overview

If you are a member, please [log in](#) to access the full version of this content. If you are a speech and language therapist and not yet a member, [sign up](#) to access our full content.

What does it mean to be deaf?

It is estimated that around **one in five people in the UK are deaf**. That's around 12 million people. It is thought over **50,000 of these individuals are children**.

In this section, we use the term 'deaf' to refer to anyone who has a hearing loss. This is solely for the purpose of consistency.

It is important to acknowledge that people who are deaf may identify with and prefer to use a different term. The simplest thing to do is to ask a person how they would describe themselves.

Some people will be deaf from birth (congenital), other people's hearing may change over time or they may become deaf in later life (acquired).

Being deaf can affect one (unilateral) or both (bilateral) ears. Hearing levels in each ear can be the same or different. A hearing loss can be permanent or temporary.

Hearing loss is usually described by type and degree. More information about this can be found in the how we hear section on this page and in our [guidance glossary](#).

Some people who are deaf will use hearing technology (eg hearing aids or cochlear implants), other people will decide not to use technology.

Similarly, some people who are deaf may use listening and spoken language to communicate, some may use strategies such as **lip reading** while others may use sign language, such as British Sign Language (BSL), and some people may use a combination of speech and sign.

Some people will be the only person in their family, or that they know, who is deaf. Other people may have several other family members who are deaf, or be part of the **Deaf community**.

This page provides:

- Information about being deaf
- Links to resources
- Information about the role of SLTs in working with people who are deaf

Visit the glossary for [definitions of commonly used terms](#), as well as some additional information about how we hear.

What can you expect from speech and language therapy?

Speech and language therapists (SLTs) are highly specialist and have extensive training and skills. They therefore have a vital role in supporting individuals who are deaf.

There aren't currently any UK-wide competencies relating to the role of the SLT in working with people who are deaf. However, the RCSLT has developed person specifications for SLTs working with children and young people who are deaf in England and Scotland:

- **[England person specification \(PDF\)](#)** – for a specialist speech and language therapist working with children and young people who are deaf.
- **[Scotland person specification \(PDF\)](#)** – for a specialist speech and language therapist for children and young people who have a hearing loss.

SLTs always work as part of a multidisciplinary team (MDT) to support individuals who are deaf. As part of the MDT, SLTs play a specialist role in the identification, assessment, and (re)habilitation of individuals who are deaf.

Some of the other professionals that may be involved if you/someone you know is deaf include:

- Audiologist
- Audiovestibular consultant
- Clinical and/or educational psychologist
- Communication support worker (CSW)
- Ear nose throat (ENT) consultant
- Educational audiologists
- Family liaison officer (FLO)
- Genetics counsellor
- Hearing therapist
- Mental health services
- Paediatrician
- Professionals who have first language fluency in BSL, eg deaf tutors, BSL interpreters, sign communication advisors.
- Qualified teachers of the deaf (QToD)
- Sensory support services
- Social services

The information in this section includes some common activities that SLTs may be involved in with people who are deaf.

This information is intended as a guide only. Specific support will be designed for individuals depending on their needs.

Working with children and young people

As part of the MDT, an SLT working with children and young people who are deaf might:

- Support families and young people in making informed decisions regarding language and communication
- Provide specialist assessment
- Provide specialist intervention, for example:
 - Facilitating parent-child interaction
 - Facilitating communication development
 - Facilitating language acquisition
 - Facilitating speech development
 - Assess and facilitate social communication skills
 - Assess and evaluate speech acoustics
 - Identify any specific language and communication difficulties existing over and above the impact of being deaf
- Support children and young people to meet their educational potential
- Work as part of a multidisciplinary team (MDT) to support families in making informed decisions regarding hearing technology
- Signpost and connect families to relevant additional services, eg teacher of the deaf, local support groups

An SLT will also advocate for all deaf people who require access to sign language in order to communicate at their fullest potential if required.

Working with adults

As part of the MDT, an SLT working with adults who are deaf might:

- Assess speech, language and communication skills
- Assess communication skills in different situations and locations
- Assess speech perceptions skills
- Facilitate communication in different situations and with different communication partners
- Offer specialist rehabilitation following a change in technology/hearing status (eg following a cochlear implant (CI) or deterioration in hearing)
- Identify any specific language and communication difficulties existing over and above the impact of being deaf

- Connect individuals to relevant additional services, eg mental health services
- Empower individuals to understand their rights to access
- Deaf awareness education and training for carers.

An SLT will also advocate for all deaf people who require access to sign language in order to communicate at their fullest potential if required.

What does it mean to be deaf aware?

Being deaf aware can mean different things. It can mean understanding the culture of deaf people or appreciating and supporting equal accessibility rights.

As speech and language therapists (SLTs) one of the most important aspects of being deaf aware relates to communication.

It is important to understand that all individuals who are deaf communicate in different ways. For example, not all deaf people use hearing aids and cochlear implants, and not all people who are deaf understand and use British Sign Language (BSL).

Communication is considered a basic human right and forms an important part of life and sense of self.

Some of the strategies that can be used to facilitate communication with someone who is deaf include:

- Make sure you have their attention before you start speaking to them
- Try and find a quiet place to talk, away from background noise and other distractions
- Try not to turn or look away while you are talking and don't cover your mouth when you speak
- If they haven't understood what you have said, try to say it in a different way. Never say "it doesn't matter".

Further information

- [**RNID - Communication tips**](#)
- [**NDCS - Communicating with a deaf child**](#)
- [**Communication Access UK**](#) (CAUK) – The RCSLT is part of the Communication Access UK partnership. This partnership between charities and organisations shares a vision to improve the lives of people living with communication disabilities.

Access for all

Human rights are the basic rights and freedoms that belong to every person in the world. They ensure equality for all. There is further UK legislation (the **2010 equality act**) that bans unfair treatment and promotes equal opportunities in the workplace and wider society.

Reports have shown that people who are deaf can experience challenges in accessing and communicating with different service providers.

It is the responsibility of all service providers (health, education, employers etc) to make reasonable adjustments to improve the quality of communication and increase the availability of information and the ability of people who are deaf to access services.

Examples of improving access

General

- Offer deaf awareness training to all staff
- Routinely make information accessible to people who are deaf (eg caption videos, provide BSL interpretation).

Health

- Ask someone who is deaf how they would like to communicate with you and record it on their notes
- Offer online booking for appointments and SMS or email contact
- Set up a simple system for booking interpreters and make sure all staff know how to do it.

Education

- Ask teachers to make sure that they face your child when speaking so that your child can lip-read
- Ask teachers to support their lessons with visual aids.

Work

- Adjust the layout of a meeting room and use good lighting to help everybody see each other clearly (important for lip reading)
- Give people time off work for audiology appointments
- Provide communication support for meetings, such as speech-to-text reporters, BSL interpreters when required.

COVID-19

In 2020 the COVID-19 pandemic changed how many service providers communicated and offered support. Most providers offered online services, using telephone and video calling technology. When working remotely like this, all providers must ensure it this isn't a barrier to a deaf person and reasonable adjustments must be made to ensure access for all.

Your rights and support

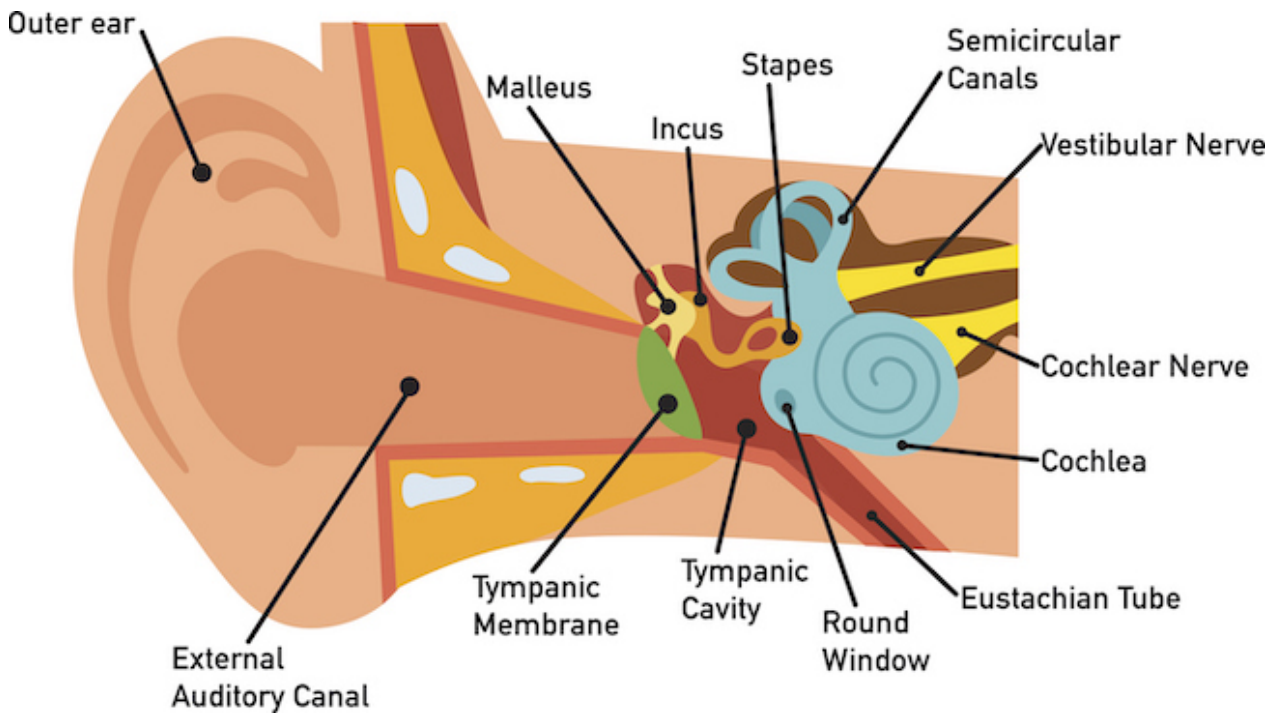
Everyone has the right to equal access and equal opportunity. Information about further support can be found at:

- [RNID - information on your rights](#)
- [RNID - information about benefits](#)
- [NDCS - understanding your rights](#)

How we hear

This is some introductory information about how we hear. We have also linked to some other web pages which have further information about some more specific topics (such as hearing technology).

Anatomy of the ear



The ear consists of three main parts:

- The outer ear
- The middle ear
- The inner ear

Each of these parts (as well as the auditory/cochlear nerve) work together to send sound to the brain.

When each part of the hearing pathway is functioning, the ear can detect a wide range of sounds – high pitch to low pitch and loud sounds to quiet sounds.

Hearing tests are done by an audiologist.

When you have a hearing test, the audiologist uses sounds to establish your threshold for hearing, that is how quiet a sound can be for you to hear it.

Sounds are measured as follows:

- How loud a sound is (measured in decibels, dB)
- The pitch (measured in Hz)

The audiologist will plot hearing threshold levels on a graph called an audiogram. Here is an example of what an audiogram can look like:

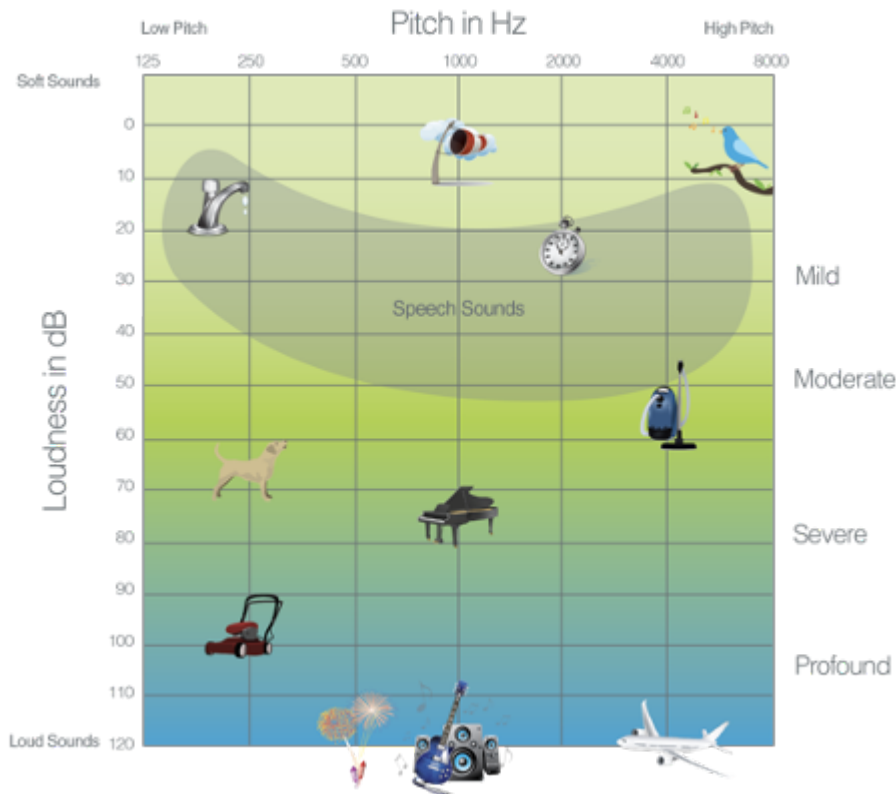


Image taken from [Advanced Bionics](#)

The images (eg dog barking, lawn mower) on this audiogram represent everyday noises and the shaded area (speech sounds) represents the sounds of speech. They represent where noises and speech occur based on their loudness and pitch.

The British Society of Audiology (BSA) uses the following terms to describe different hearing loss:

- Mild (hearing thresholds between 21–40 dB)
- Moderate (hearing thresholds between 41–70 dB)
- Severe (hearing thresholds between 71–95 dB)
- Profound (hearing thresholds above 95 dB)

Difficulties can occur at any part of the hearing pathway.

Difficulties that occur with the outer and middle ear are usually described as conductive and can be temporary or permanent.

Difficulties that occur in the inner ear, or with the auditory nerve are described as sensorineural and are always permanent.

Intervention and hearing technology

There are a number of options available to people who are deaf.

Some people may seek intervention and/or use available hearing technology. Other people may adopt different communication strategies (such as lip reading) or use sign language, eg British Sign Language (BSL).

Over half of deaf children are born deaf. Many of these will be identified through a **newborn hearing screening programme**. Other children will become deaf in childhood. The family will play a key role in decisions around support and strategies for their child. Professionals will play a key role in ensuring that families have the information they need to make informed choices that work for their child

This section describes some of the different intervention and technology options.

Intervention

Intervention is generally used to manage a conductive hearing loss but it can also be used to manage some forms of sensorineural hearing loss

Intervention might include:

- Ear drops or microsuction (if you have a build-up of ear wax)
- Grommets (for persistent ear infections, like **glue ear**)
- A course of steroids (if you suddenly become deaf)
- A course of antibiotics (if you have an ear infection)
- An operation (eg a stapedectomy if you have **otosclerosis**)

Hearing technology

Hearing aids

Many people who are deaf will be able to make use of hearing aids if they choose. A hearing aid amplifies sound, or more simply, makes sound louder.

There are several different types of hearing aids available, including behind the ear (BTE) hearing aids, in the ear (ITE) hearing aids, and bone conduction (BC) hearing aids.

Hearing aids will be recommended by an audiologist based on a person's hearing levels.

More information about how hearing aids work and the different types of hearing aids available for adults on the **RNID website** and on the **NDCS website for children**.

Hearing implants

For some people who are deaf, hearing aids won't be helpful in hearing sounds and speech. For these individuals a hearing implant might be an option.

There are different hearing implant options depending on your hearing levels. The most common are:

- Bone conduction implant (BCI)
- Cochlear implant (CI)

There are also some people who have a middle ear implant (MEI) and a few people in the UK each year who are assessed for an auditory brainstem implant (ABI).

The assessment and management of hearing implants is done by several specialist centres throughout the UK. A full list can be found on the [British Cochlear Implant Group website](#).

More information about hearing implants is available from [Hearing Link](#) and [NDCS website](#).

Assistive listening devices

There is additional hearing technology that can be used in combination with hearing aids and hearing implants to facilitate listening.

This technology might include:

- **Radio aids** – systems that wirelessly send sound from a microphone transmitter to a receiver. The transmitter is worn by a speaker and the receiver is worn by an individual who is deaf.
- **Soundfield system** – an amplification system that provides an even spread of sound around a room.
- **Loop system** – these systems directly transfer sound from a particular source to a hearing aid or implant which has the T programme set up.
- **Streamers** – these wirelessly link hearing devices to other products, such as smartphones, tablets, or the TV. They usually only work with hearing devices from the same manufacturer, ie Cochlear streaming products work with Cochlear hearing implants.

Radio aids and soundfield systems are predominantly used by children in educational settings. However, they can also all be used at home, at work and in social situations. [RNID](#) and [Connevens](#) provide more detailed information about this technology.

Related topics

Auditory neuropathy spectrum disorder

Auditory neuropathy spectrum disorder (ANSD) is a specific pattern of test results and can only be identified by an audiologist.

ANSD usually affects both ears (bilateral) but can also affect only one ear (unilateral).

People identified with ANSD can present with different hearing levels and therefore the management plan for individuals with ANSD can be highly variable and requires close liaison between professionals, typically an audiologist, SLT and qualified teacher of the deaf.

Auditory processing disorder (APD)

This guidance does not include information about auditory processing disorder.

Auditory processing disorder (APD) refers to difficulties in the processing of auditory information in the central nervous system.

The **British Society of Audiology (BSA)** produced a position statement and practice guidance in February 2018 that can be accessed if further information is required.

Multi-sensory impairment

Information for people who are deafblind or have multi-sensory impairment can be found in our clinical information A to Z:

- [Multi-sensory impairment](#)
- [Visual impairment](#)

Sensory integration

“Sensory integration is the ability to assimilate sensory information from the body and environment for use.” (Ayres, 1979; 2005).

Some people who are deaf can experience challenges in understanding and incorporating their senses which can result in daily challenges for them and those around them.

The research in this area regarding people who are deaf is developing.

Tinnitus

Tinnitus is described as a noise or ringing in the ears. About 30% of people will experience tinnitus at some point in their lives but the number of people who live with persistent tinnitus is

approximately 13% (over 1 in 8).

Tinnitus is sometimes described by people who are deaf.

More information about tinnitus can be found on the British Tinnitus Association website.

Other related topics

RCSLT public guidance pages about other related conditions:

- [Aphasia](#)
- [Augmentative and alternative communication \(AAC\)](#)
- [Autism](#)
- [Bilingualism](#)
- [Cleft lip and palate](#)
- [Craniofacial conditions](#)
- [Dementia](#)
- [Developmental language disorder \(DLD\)](#)
- [Mental health \(adults\)](#)
- [Motor disorders](#)
- [Speech sound disorders](#)
- [Social communication disorder](#)
- [Social emotional and mental health](#)

Resources and organisations

RCSLT resources

- [RCSLT position statement on deafness \(PDF\)](#)
- [RCSLT and BATOD collaborative working guidance \(PDF\)](#) – Best practice guidance for collaborative working between qualified teachers of the deaf and SLTs
 - [Appendix 2: Establishing roles and responsibilities \(Word\)](#)
- [RCSLT and NDCS recommendations for England \(PDF\)](#) – Recommendations for commissioning highly specialist speech and language therapy services for children and young people who are deaf.
- [Person specification, England \(PDF\)](#) – Specialist SLT for children and young people who are deaf (England).
- [Commissioning and service model in Cheshire and Merseyside \(PDF\)](#)
- [RCSLT recommendations for Scotland \(PDF\)](#) – Recommendations to support the provision of highly specialist speech and language therapy services for children and young people who have a hearing loss in Scotland.
- [Person specification, Scotland \(PDF\)](#) – Specialist SLT for children and young people who have a hearing loss (Scotland).

Organisations

These organisations can provide further information and support (this list is not exhaustive).

- [Advanced Bionics](#)
- [Auditory Verbal Therapy \(AVUK\)](#)
- [British Academy of Audiology](#)
- [British Association of Teachers of the Deaf \(BATOD\)](#)
- [British Cochlear Implant Group \(BCIG\)](#)
- [British Deaf Association](#)
- [British Deaf Association of Northern Ireland](#)
- [British Society of Audiology](#)
- [Cochlear Implanted Children's Support \(CICS\)](#)
- [Cochlear UK](#)
- [Cued Speech](#)
- [deafscotland](#)
- [The Elizabeth Foundation](#)
- [Hear Together](#) (previously known as the Ear Foundation)
- [Hearing Link](#)

- [Life and Deaf](#)
- [MEDEL](#)
- [Microtia UK](#)
- [National Deaf Children's Society \(NDCS\)](#)
- [Oticon](#)
- [Phonak](#)
- [RNID](#) (previously known as Action on Hearing Loss)
- [Royal Association for Deaf People](#)
- [Sense](#)
- [Sign Health](#)
- [UK Council on Deafness](#)
- [Wales Council for Deaf People](#)

Reports

Royal National Institute for Deaf (RNID, and previously known as Action on Hearing loss)

RNID produces reports that describe the potential impact of being deaf. Reports for each of the nations have been produced and can be found here:

- [Hearing Matters Report – England \(PDF\)](#)
- [Hearing Matters Report – Northern Ireland \(PDF\)](#)
- [Hearing Matters Report – Scotland \(PDF\)](#)
- [Hearing Matters Report – Wales \(PDF\)](#)

National Deaf Children's Society (NDCS)

In 2016 the NDCS produced the [Right from the Start report \(PDF\)](#), which describes the importance of early intervention for deaf children.

The NDCS have produced several [position statements](#) relating to different areas of deafness.

References

[Download the list of references \(PDF\)](#)

Contributors

Lead author – Alice Montgomery

Supporting authors

- Marie Down
- Lindsey Gagan
- Gemma Knight
- Sara Plowright
- Liz Rees

Acknowledgements

- Martina Curtin
- Helene Elia (Papadopoulos)
- Kate Green
- Victoria Grey
- Joanna Hoskin
- Harriet Jarvis
- Noel Kenely
- Ashley Mackay
- Caroline Murphy
- Helen O'Donnell
- Kimberley Pemberton
- Holly Richards
- Vanessa Sadler
- Leonie Seek
- Natalie Teakle
- Amanda Tivey
- Lada Vlašić-Miracle
- Sarah Worsfold