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Book Review

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BOOK REVIEWS

Educational Audiology for the Limited Hearing Infant, Doreen Pollack, Charles C. Thomas, Springfield, Ill.: 1970. 237 pages. Hard cover.

In her introduction, the author explains that between 1948 and 1954, uni-sensory auditory training programs were being developed in several parts of the world. She was a member of a pioneering group using an experimental approach in regard to infant testing, hearing aid fitting, and training (later referred to as *acoupedics*). It was felt that the new term was necessary to describe the comprehensive habilitation program for infants and their parents which emphasized a uni-sensory (auditory) approach as opposed to traditional *auditory training*, which is one part of a multi-sensory approach to training that includes lipreading.

The acoupedic program stresses early detection of hearing impairment, the fitting of two hearing aids as soon as possible after the otologist's diagnosis, and a "natural" method of hearing training which is to be carried out continuously during the child's waking hours. The parents' rule is emphasized, as well as the importance of integrating the child within classes of normal hearing children.

Mr. Pollack acknowledges the reluctance of many professionals to accept a uni-sensory approach to the training of these children and asks that the reader keep an open mind in seeking a better way of teaching communication.

It is interesting to note that in his foreword to the book, Dr. Erik Wedenberg states that his pupils became the best lipreaders because they acquired, through intensive auditory training, a much larger vocabulary than normal. The author subsequently points out that vocabulary and abstract concepts are learned more rapidly due to intensive auditory training during the preschool years. These arguments are exactly the same as those used by professionals who advocate the extensive use of manual communication in the preschool years!

The book presents a strong argument for the early detection and diagnosis of hearing impairment, preferably by means of a neonatal testing program of the "screening" type. Those infants who fail can then be referred for objective-type tests in an audiological clinic. The remaining sections on diagnostic procedures, while brief, are to the point and should be of considerable value to the student and professional alike, particularly if use is made of the many references cited.

It is unfortunate that the book contains non sequiturs such as comparing myopia with deafness (pp 17-18). The fact is, of course, that amplification does not "focus" hearing in any way like corrective lenses focus vision for most myopics. The author eventually acknowledges this in the section on parent education (p. 147).

Mrs. Pollack points out that the multi-sensory approach is widely used today and that while many children acquire excellent language skills when taught by this method, the majority do not. The inference is, of course, that the majority of those involved in the acoupedic programs *will* acquire these skills. This remains to be seen. New theories and innovations of all types, which hopefully will add to the armamentaria of those who work with hearing-impaired youngsters, appear continuously in the literature. Some have considerable impact; others create a great deal of immediate interest and excitement and then quietly fade away. In any event, the extent of actual influence is best determined by objective, long-range studies.

Allowing for the difference in emphasis upon one modality as the pathway toward successful acquisition of speech and language, most of the book's latter chapters rely on traditional, well-known methods for helping the child attain these skills. Sample lesson plans, a list of tests which are available, activities, etc., should be useful for professionals and, to varying degrees, parents. An extensive bibliography and a section containing parents' own stories are included.

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