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Raised House Bill 6805 - Committee on Children

Luke was born on a beautiful April day with 10 fingers and 10 toes. He passed all his newborn screenings with flying colors and was absolutely perfect. By the time he was 8.5 months he decided to walk and I knew then I had my work cut out for me. Luke was developing language at a regular pace and then, one day, it seemed as though he just gave up and lost interest. Our journey began in B-3 with speech services. From there he went right into the town's preschool program and was labeled ADHD and medicated. Age 8 he became a constellation of disabilities which included ADHD, anxiety, ODD, OCD, learning disabled, and PDD. We no longer rode the bus to school because of bullying and still refuse to do so. He had eloped from the classroom so much that he was in a self contained classroom. When he had a behavioral issue he was sent to a modified janitors closet or a "safe room." And....he suffered a breakdown. We had been through evaluation after evaluation, PPTs became heated, trust was broken, relationships lost. It was only at my younger child's 5 year checkup I asked the nurse to test Luke's hearing, and....he failed....miserably. I had him at an audiologist the next day and within 2 weeks we had hearing aides.

There are different types of hearing loss: sensorineural, mixed, conductive, and central. Luke was diagnosed with sensorineural hearing loss. Luke's hearing loss is documented as being an educationally significant hearing loss and is directly associated with language and speech acquisition.

Hearing loss does not discriminate. It could happen at any age even if you pass your newborn hearing screening. We are positive that if he had been giving the opportunity to have early detection and intervention for his hard of hearing diagnosis, during his birth-3 experience, we may have had a better outcome.

In fact, children that were identified from birth to age 7 and received timely access to early intervention achieved age-appropriate developmental outcomes not only in the first 3 years to life, but through age seven. Left undetected, mild or unilateral hearing loss can result in delayed speech and language acquisition, social-emotional or behavioral problems, and lags in academic achievement. And many social responses that are related to hearing loss are similar to the diagnostic criteria for ADHD.

Annual hearing screening in the CT birth-3 program is not only necessary, it is needed and should be an effective tool under part C of the IDEA. CT has the power to enhance and enrich children's lives and "screening for success" can aide them. No mother should have to go through what I have gone through and no human being should have to endure what my son has endured.

Finally in 5th grade, under program of a teacher for the hard of hearing, we have seen significant growth and improvement, not only in academics and social functioning, but also with self advocacy. My son is a brilliant boy who happens to be hard of hearing and he is perfect! Thank you for listening to my story, I'm Sheri Romblad from Madison.