“Parents are important partners. They have the greatest impact upon their young child and their active participation is crucial.” – Mark Ross (1975)
What is Universal Newborn Hearing Screening (UNHS)?

UNHS is a hearing screening service for all infants born in Manitoba, or newborns who arrive in Manitoba in early infancy (less than six months of age).

Why does my baby need hearing screening at birth?

Most babies are born able to hear their parents’ voices and the sounds of the world around them. Being able to hear is extremely important for language development and learning. Babies with hearing loss need to spend time in places that inspire and encourage them to use language. Their ability to learn depends on it. This is why discovering a baby’s hearing loss soon after birth is so important. It gives families, and their health care professionals, time to decide on the best way to help these children learn language, so they can avoid delays or difficulties in communication, school and social development.
How is the hearing screening performed?

A health professional, who specializes in newborn hearing tests, will perform a hearing screening on each of your baby’s ears. This screening is fast and safe. Soft sounds are played by a computer into your baby’s ears using a soft ear tip. The computer measures the response to the sound from your baby’s ears, to find out if your baby has normal hearing. Many babies sleep during the screening. You can breastfeed or hold them while it’s going on. The screening works best when your baby is quiet and sleeping.

What if my baby does not pass the hearing screening?

If your baby does not pass the first hearing screening, and you get a ‘refer’ result, your baby will have a second hearing screening. This will take place either before you leave the hospital or in the community shortly after you leave. The second screening uses a different type of testing. If you get a ‘refer’ result after the second hearing screening, your baby will be scheduled for a hearing test with an audiologist. An audiologist is a specialist who identifies and manages hearing losses in children. It is very important that you go to this appointment because finding hearing loss early in life helps your child develop speech, language, reading and social skills. These are all important for school and overall health.
What happens if my baby has a hearing loss?

About two out of every 1,000 babies are born with a hearing loss. If your baby is diagnosed with a hearing loss, the audiologist will explain the type of hearing loss, the sounds the baby will be able to hear, and the sounds he or she might not hear. The audiologist will also explain how the hearing loss could affect speech and language development. The audiologist will help connect you to resources and services for communication development.

Can hearing loss happen later in my child’s life?

About three to four of every 1,000 children will develop a hearing loss by five years of age. This may affect their language, reading, school and social development. If you have any concerns about hearing, speech or language development, it is important to have your child’s hearing tested by an audiologist. If your baby is identified at birth as having a risk of developing a later hearing loss, it is important that you pay close attention to their hearing and language development skills. You can do this by looking for age-appropriate responses to language and sounds.
Speech, Language and Hearing Milestones

Here are some signs you can watch for to see if your child is hearing normally. If your child is not responding to the signs listed below, for a child his or her age, you should let your child’s health care provider or audiologist know.

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**Birth to 3 months, does the child:**

- make cooing sounds
- have different cries for different needs
- smile at you
- startle to loud sounds
- soothe/calm to a familiar voice

**4 to 6 months, does the child:**

- babble and make different sounds
- make sounds back when you talk
- enjoy games like peek-a-boo
- turn his/her eyes toward a sound source
- respond to music or toys that make noise

**7 to 12 months, does the child:**

- wave hi/bye
- respond to his/her name
- let you know what he/she wants using sounds, and/or actions like pointing
- begin to follow simple directions (e.g., Where is your nose?)
- localize correctly to sound by turning his/her head toward the sound
- pay attention when spoken to

**12 to 18 months, does the child:**

- use common words and start to put words together
- enjoy listening to storybooks
- point to body parts or pictures in a book when asked
- look at your face when talking to you

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18 to 24 months, does the child:
• understand more words than he/she can say
• say two words together (e.g., More juice)
• ask simple questions (e.g., What’s that?)
• take turns in a conversation

2 to 3 years, does the child:
• use sentences of three or more words most of the time
• understand different concepts (e.g., in-on; up-down)
• follow two-part directions (e.g., take the book and put it on the table)
• answer simple questions (e.g., Where is the car?)
• participate in short conversations

3 to 4 years, does the child:
• tell a short story or talk about daily activities
• talk in sentences with adult-like grammar
• generally speak clearly so people understand
• hear you when you call from another room
• listen to TV at the same volume as others
• answer a variety of questions

4 to 5 years, does the child:
• pronounce most speech sounds correctly
• participate in and understand conversations even in the presence of background noise
• recognize familiar signs (e.g., stop sign)
• make up rhymes
• hear and understand most of what is said at home and school
• listen to and retell a story and ask and answer questions about a story

Where can I go for more information?
For more information on UNHS and on age-appropriate responses to language and sound, go to www.gov.mb.ca/health/unhs