

# AUDITORY PROCESSING DISORDER IN TEENAGERS

## Information Sheet for Schools, Colleges and Employers - © APDUK 2014

Auditory Processing Disorder (APD) is a neurological listening disability. APD is a lifelong disability and requires lifelong support from family, peers, friends, and interim support from teachers and employers, etc. APD can include multiple issues, all of which can have varying degrees of severity, and no two individuals who have APD are the same. There is no cure for APD. Living with APD can be difficult at any age, and especially during the teenage years when children become more self-aware and hormones can pose additional problems.

Auditory Processing Disorder is a disability causing problems processing all sounds that the ears hear. Issues can include problems processing the gaps between sounds, having processing problems with low levels of background noise, poor auditory memory, poor sequencing skills and abilities, working memory issues especially stress related, word recall problems, problems following conversations, following multiple verbal instructions, problems repeating unfamiliar words / names, problems with reading aloud.

Living with APD can be very isolating especially for children who have APD, they need to know that they are not only one who has APD, understand it, learn coping strategies and learn to self-advocate. According to the Medical Research Council 10% of the child population has some degree of APD. Each individual who has APD needs to understand the limitations APD imposes on them and develop the alternative compensating skills and abilities they are able to develop and use to work around their problems; and the specific compensating skills and abilities individuals develop will depend on their neurological and genetic strengths and weaknesses.

Understanding the alternative compensating abilities and skills each individual who has APD is able to use is probably the most important part of living with APD. As both the individual who has APD and all those who live and work around them need to understand and be prepared to use the preferred alternative types of communication and information presentation, to enable effective integration and cooperation. Providing the wrong type of support can be as detrimental as having no support at all. This creates the perception that the specific APD related problems are not being understood, and that all of the offers of support and remediation are a waste of time and effort, because the support offered and provided does not match the individual's actual support needs.

Most people who have APD develop good lip reading skills, sometimes unknowingly, and learn to read the body language of others to help fill in the auditory communication gaps caused by the bit we miss or fail to process. It also has to be remembered that although there might be commonalities between people with APD, each sufferer is affected differently and with varying severity, has unique strengths and coping strategies and might also have additional co-morbid difficulties that impact negatively on them, making their APD difficulties harder to manage.

APD can also affect acquisition of speech in some people, for the same reason. ALL of these difficulties are worse when a sufferer is ill, tired or stressed, while the brain is focused on remedying these situations and their natural coping strategies can fail at these times making all symptoms of APD present as worsened.

APD can also be inconsistent and variable in its effects from day to day and even within a day. Stress, tiredness or illness can also make it far harder for them to process and their difficulties will be much harder to cope with at those times. Frustration is common, but this is not a behaviour problem, rather it should be seen as a cry for help.

APD is a complex and far-reaching disability which affects all aspects of a person's life, not only in education, but also communication and socialisation - from school to workplace problems, with difficulties in communicating with family and friends, choice of suitable careers, enjoyment of hobbies and leisure time – in fact, everywhere and with everyone. Each person with APD will therefore need individually tailored support and accommodations, throughout their life.

If adequate and appropriate support is not already in place by the time the sufferer reaches their teenage years, which are a particularly difficult time for them, problems like disaffection, depression, substance abuse can arise, in an attempt by the sufferer to regain control of their life. This can be avoided if vital, individually tailored support is in place. We must ensure that we 'get it right' - first time, every time. Additional Information can be found here:

**APDUK website:** <http://www.apduk.org.uk/>

**APDUK IEP ideas:** [http://www.tempinformationsheets.apduk.org.uk/iep\\_page.htm](http://www.tempinformationsheets.apduk.org.uk/iep_page.htm)

**APDUK newsletter:** <http://www.tempapd.apduk.org.uk/newsletter.htm> including articles written by parents, Adults and teenagers with APD and supportive professionals.

**Great Ormond Street Hospital (GOSH):** <http://www.gosh.nhs.uk/medical-conditions/search-for-medical-conditions/auditory-processing-disorder/auditory-processing-disorder-information/>

**Medical Research Council:** <http://www.ihr.mrc.ac.uk/research/apd>