

Chapter 1

CHILDREN WITH HEARING LOSS DURING THE COVID-19 PANDEMIC PROCESS

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INTRODUCTION

The COVID-19 pandemic process has led to significant changes in the daily routines of children with hearing loss and their families, as in all segments of society. While these changes were more pronounced on issues such as the prohibition of leaving homes/going out of the house that started with the stay home call, social isolation, obeying hygiene rules and wearing a mask, with parents taking a break from their work life for a while and spending more time at home, academic, physical and social problems that children experienced due to interruptions that children experienced in their academic and other educational lives, and COVID-19 induced anxiety, panic, and concerns that family members experience in relation to each other have increased. In interviews conducted with family members via phone, e-mail and online on the topic, it was observed that family members were under intense stress, fear and anxiety. When the reasons for this were examined, it was determined that the biggest stress factors were the risk of catching the disease, uncertainties related to when this period would end, physical, social and economic difficulties experienced in the home environment, and disruptions in the treatment and education processes of their children. Similarly, in related scientific studies conducted in the pandemic process, it is emphasized that the biggest problems experienced by the child and the family are emotions such as fear, anxiety, worry and social problems (1-3).

COVID-19 IN THE WORLD

WHO (World Health Organization), described the outbreak of COVID – 19 as a public health emergency at an international level on January 30, and defined it as a global pandemic on March 11 due to the occurrence, spread

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shaped in accordance with the course of the COVID–19 pandemic process in the coming period, considering the possibility of the pandemic continuing, shaping of private educational services systematically by taking the opinions and recommendations of relevant institutions, organizations, associations, health/education professionals and families into consideration and establishing a tele-rehabilitation infrastructure suitable for current technological and societal conditions will be critically important (16).

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