

GLUE EAR: WHAT IS IT, AND HOW CAN WE HELP YOUNG CHILDREN?



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1 in 5 children under the age of 5 will have glue ear at any one time, and 8 out of 10 children will experience glue ear before the age of 10 (National Deaf Children's Society, 2024). I am a Specialist Speech and Language Therapist with over 15 years' experience of working with d/Deaf adults and children in both educational and hospital settings. In this blog, I will explain what glue ear is, how it affects speech and language development, and how you can help the children in your setting who have glue ear.

WHAT IS GLUE EAR?

Glue ear, or to use its medical term, Otitis Media with Effusion (OME) is caused by a build up of fluid in the middle ear, behind the ear drum. As this fluid accumulates, it can become thicker and stickier, preventing sound from being transmitted to the inner ear and the brain.

WHAT IS THE IMPACT ON YOUNG CHILDREN?

As adults, a blocked ear (or ears!) is frustrating. We have to work harder to hear, especially in noisy places. However, we are seldom too inconvenienced as we use our knowledge of language, vocabulary and context to 'fill in the gaps' and 'get the gist' of a conversation.

However, young children are unable to do this. Their vocabulary, grammar and supporting language system are not yet fully developed, and they are unable to employ the strategies that we can as adults.

Glue ear results in a muffled quality to the speech a child hears (Speech and Language UK, 2024). It especially affects the high frequency fricative sounds such as 's', 'sh', 'z', 'f', 'v' and 'th'. A prolonged period of time without access to these (and potentially other) speech sounds can result in a speech and/or language delay.

Other effects of glue ear can be behavioural as children become fatigued, stressed and frustrated as they struggle to hear in noisy pre-school settings.

HOW CAN I SPOT A CHILD WITH GLUE EAR?

Children with glue ear may:

- not always respond to their name
- not understand instructions, often copying their peers to see what they do
- have unclear speech
- become tired and frustrated easily
- prefer to play alone

WHAT DO I DO IF I SUSPECT A CHILD HAS GLUE EAR?

Always speak to the child's parents if you suspect glue ear. Recommend they talk to their GP and request a referral to their local Audiology Department.

More practical interventions in setting include:

- providing a quiet area for 'listening breaks'
- keeping background noise to a minimum – turn off background music or radio
- ensure children take turns talking at circle time
- making sure you have the child's attention before giving them instructions
- contact the National Deaf Children's Society (www.ndcs.org.uk) or Speech and Language UK (www.speechandlanguage.org.uk) for more information and advice.

<https://www.ndcs.org.uk/information-and-support/childhood-deafness/causes-of-deafness/glue-ear/>

<https://speechandlanguage.org.uk/help-for-families/resource-library-for-families/glue-ear/>

**FOR MORE INFORMATION ON PUTTING
EVIDENCE INFORMED APPROACHES
INTO PRACTICE SCAN HERE:**

