

Communicating with Your Child

Communicating with your child is important. Language (sign or spoken) helps your babies brain develop. 35-45 hours of language (sign and/or spoken) is recommended.

There are many ways for children with hearing loss and their families to communicate.. We hope this section gives you the information you need to begin learning about options for communicating with your child.

The communication options you choose should provide your child with full access to communication. It should also use the primary language used in your home (such as English, Spanish, American Sign Language, etc.).When trying an option, keep in mind that no one option is best for all children. As your child's needs change, it is okay to make different decisions.

How Hearing Loss Affects Communication

With the appropriate early intervention, children who are deaf or hard of hearing can develop and learn on par with their peers with hearing. Hearing loss in a young child is different from hearing loss in an adult. This is because a young child hasn't learned many speech and language skills. Adults with hearing loss already know the rules of language and can apply them in daily conversations. For a child

of parents who use spoken language in the home, even a mild hearing loss can affect her ability to develop speech and language. Children need to hear all of the sounds of their language to learn how to talk. Similarly, children need to see a lot of visual language such as sign language in order to learn how to sign.

How much a hearing loss affects communication for your child depends on things like:

- The type, degree and shape of the hearing loss.
- Your family's involvement in your child's communication development.
- The age at which your child became deaf or hard of hearing.
- The age at which your child's hearing loss was found.
- The age at which intervention began, how often it occurred and the quality of the intervention provided.

Factors that contribute to a child successfully learning to listen and speak include:

- Consistent use of appropriately fit amplification (hearing aids, cochlear implants, FM systems, BAHAs) in order to have access to sound during all hours that the child is awake.
- Being surrounded by fluent speakers of the child's language and engaging the child most waking hours.
- Guidance and coaching by an early intervention provider knowledgeable in how to help children develop the ability to communicate and learn through listening and spoken language.

Factors that contribute to a child successfully learning to use sign language:

- Being surrounded by fluent users of your chosen sign system and engaging the child during all hours that the child is awake.
- Guidance and coaching by an early intervention provider knowledgeable in how to help children develop the ability to communicate and learn through the particular language or visual support system.

Choosing Communication Options

Many families say that choosing communication options is one of the hardest decisions they have ever made. Every option requires a commitment from your family to help your child learn language. Many people may tell you their method is best. Keep in mind that no one option is best for all children.

For some children, a combination of methods may be best. Also, remember that you can always change your decision later. Here are some things to think about as you explore communication options:

- Make decisions based on the needs of your child and family.
- Ask questions. Talk to adults who are deaf or hard of hearing, as well as to other families with children who have a hearing loss.
- Get as much information as you can about your options by talking to others, reading, and doing your own research.
- Watch your child's progress and re-evaluate your choice from time to time.

Remember that you can change your decision later if the option you chose isn't working as well as you think it should.

The option(s) you choose should allow your child to:

- Communicate with the entire family (siblings and extended family).
- Have a relationship with all family members.
- Enjoy meaningful conversations.
- Feel like part of the family.
- Know what is going on.
- Have control over the environment.
- Express feelings.
- Join in the world of imagination and play.

Communication Options

Below are some of the different ways your child can learn language. You can use this information as a starting point to learn about the options. Your child's audiologist or BCW Coordinator can provide more information about early intervention programs that may be available for each option. You can also visit programs and watch how other children, teachers and parents communicate.

American Sign Language (ASL) — English Bilingual

- The ASL–English bilingual option focuses on teaching your child ASL as the first language, while also learning English (reading, writing and speaking).
- ASL uses the body, face and hands to communicate language.
- ASL is a separate language from English and has a different sentence structure. The sentence structure is similar to Spanish.
- Your child doesn't have to wear amplification to communicate this way.
- The use of ASL is part of the Deaf community.
- Members of the Deaf community have a strong cultural identity of their own.

Cued Speech

- Cued speech uses eight hand shapes near the mouth that represent different sounds in spoken language.
- The hand shapes represent sounds that are hard to tell apart from each other with just lip reading.
- The hand shapes, combined with lip reading, give your child visual access to spoken language.
- Amplification is recommended, but not required.
- Families learn to communicate with their child using hand cues while speaking.

Listening and Spoken Language

- Sometimes referred to as auditory/oral or auditory-verbal.
- Relies on access to sound and speech.
- Consistent use of recommended amplification (hearing aids or cochlear implant, BAHAs) is necessary with this approach.
- Provides visual cues, like lip reading and gestures, when needed to help a child understand and develop language.
- Does not use sign language.

Total Communication

- Families learn to communicate with their child using a combination of signed and spoken language.
- Children are encouraged to use their eyes, ears, voices and hands to communicate.
- The family learns a sign language system, such as ASL, Signing Exact English (SEE), or Conceptually Accurate Signed English (CASE). SEE and CASE are designed to be used together with speech to help your child understand and use language.

Hearing, Listening and the Brain

You may have questions about how hearing and listening are different or if your child will be able to listen to spoken language. These questions may become important as you consider communication options or communication goals. We hope this is helpful, but talk with your audiologist if you have more questions.

- Hearing is a sensory response to sound where the ear transmits information to the brain. Hearing develops before birth.
- Listening begins with hearing. A person who is deaf or hard of hearing may use amplification to hear (hearing aids, cochlear implant or other device). Over time, listening skills develop as the brain begins to understand what it hears.
- The brain can develop the ability to understand what it hears and enable understanding and learning through listening.

A child who is deaf or hard of hearing needs specialized therapy and education to develop effective listening skills. Early interventionists, teachers of the deaf, audiologists and speech language pathologists can provide educational and therapy services to develop these skills. Some professionals are certified as Listening and Spoken Language Specialists (LSLS) through the AG Bell Academy for Listening and Spoken Language. Children and families will often receive a combination of these services to help a child who is deaf or hard of hearing develop listening and spoken language.

Questions Parents Might Ask about Communication

Will my child be able to talk?

- This question is difficult to answer. It can depend on the how well hearing technology provides access to sound and spoken language, how well your child is able to use her remaining (residual) hearing, how much you talk with your child, and how often your child wears their recommended amplification.
- Many children with mild and moderate losses learn to talk well with the help of hearing aids and specialized services for children who are deaf or hard of hearing.
- Children with more severe hearing losses will rely on hearing technology in order to develop spoken language and it may take more time to develop spoken language. Your child's team of doctors, therapists and teachers of the deaf will help your family try to achieve your communication goals for your child.

Things that may help your child learn to talk are:

- Consistent use of amplification.
- Checking your child's amplification devices daily to make sure they are working.
- Attending follow-up appointments with your child's audiologist.
- Receiving regular services from professionals trained in working with children who are deaf or hard of hearing.
- Consistent use of strategies that give your child access to spoken language.
- Giving your child many opportunities to practice their skills.

Will my child and family learn to sign?

- This is also a difficult question to answer. Deciding to learn to sign is up to your family. Here are some things to consider when thinking about this decision:
- Children with hearing loss may benefit from learning some form of visual communication. This can include ASL, SEE, CASE, and Cued Speech (see Communication Options section). Including visual communication may help your child get speech and language information in more than one way.

- Learning to sign does not mean your child will not learn how to talk.
- Your child will learn how to sign by watching you and others sign.
- If you and your family do not already know how to sign, there are classes available to help you learn. Ask your BCW Coordinator or GA PINES Parent Advisor about these classes.

When making a choice in communication for my child, will this decision be for life?

- You can always change your decisions about communication. However, there is a critical period of time for language development and you must take advantage of this time if your child is going to develop age-appropriate language.
- Monitor your child's progress in order to understand the growth she is making in her language development, and if she is not developing age-appropriate language with the current communication option, you must consider additional communication options

Can my child's environment affect communication?

- There are some situations where listening through a hearing aid or cochlear implant can be very challenging. Background noises such as TV, multiple conversations, air conditioning or fans can reduce your child's ability to listen. An audiogram estimates what your child can hear in a quiet environment.
- Home, grocery stores, parks and playgrounds and other areas can have poor listening environments. Visual "noise" can also be distracting, such as a cluttered or busy environment, repetitive movements and bright or dark lighting.
- Talk with your early intervention specialist about options to help lessen problems related to noise.