

Something to Talk About: Spoken Language Approaches for Children with Hearing Loss

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Hearing Loss in Children

With the implementation of universal newborn screening, hearing loss is being detected in children soon after birth. Newborns can undergo a hearing screening to determine the probability of the presence of a hearing loss. This test is neither painful nor invasive, takes only a few minutes, and is usually conducted in the hospital before the baby goes home. This early identification of hearing loss soon after birth gives the parents the opportunity to gather information and make informed decisions about their child's future from the very start. Often, hearing aids or cochlear implants are recommended for babies with hearing loss. Providing babies with better quality sound through hearing technology gives them access to spoken language and allows them to begin learning to understand speech and other environmental sounds in their environment. (To learn more about hearing technology for children, contact AG Bell to request the brochures titled *What Are Hearing Aids?* and *Kids and Cochlear Implants: Getting Connected*, or visit our website at www.agbell.org.)

Ninety percent of children with hearing loss are born to parents with normal hearing. Parents often wonder how their children will succeed when so much information is communicated through listening and talking. Fortunately, families have the option to help their children with hearing loss develop the abilities to communicate via spoken language by enrolling them in an oral education program.

Why Is Exposure to Sound Important to Children with Hearing Loss?

The “critical period” for speech and language development in children ranges from before birth to 6 years old. This “critical period” refers to a stage of intense brain development in babies and young children when their brains are using input from their senses to organize their perception of the world around them. Because spoken language is based on listening, it is vital that children with hearing loss receive clear, complete, and consistent sound during these first years of life. This helps their brains develop the ability to understand spoken language and the ability to speak fluently. When a child with a hearing loss does not receive access to sound during the critical language-learning years, their ability to meaningfully recognize and process sound deteriorates over time, making it more difficult for the brain to meaningfully interpret sound.

The world around us sends messages to the brain through the ears. For children with hearing loss, this process must be nurtured and stimulated. The incorporation of hearing technology and early intervention with spoken language instruction is the key to developing the ability to talk. Equally as important is the coordination of the family members and professionals in working together to help children learn to process and produce sound.

What Is the Spoken Language Approach?

A Spoken Language Approach is an approach to teaching children with hearing loss that focuses on developing speech, listening, and spoken language skills. Any spoken language approach requires a commitment on the part of the parents and families to work with professionals to stimulate their child’s spoken language development throughout their child’s day. Specific communication options that develop spoken language abilities include the Auditory/Oral, Auditory-Verbal, and Cued Speech approaches. These are described in more detail below.

What Are the Different Types of Spoken Language Approaches?

Auditory/Oral

In auditory/oral programs, children make maximum use of their residual hearing through hearing aids or cochlear implants in order to learn to talk. Speech(lip)reading is used as a supplement to listening to provide maximum language input. The goal in auditory/oral programs is for the children to develop the skills they need (in language and academics) to be successful in the regular classroom environment as soon as possible. To meet that goal, children are often educated, at least for a time, in an intensive language-rich environment with other students with hearing loss.

Auditory Verbal (A-V)

A central tenet of A-V therapy is the belief that children with hearing loss can be taught to use even minimal amounts of amplified residual hearing. To do so, one-on-one teaching is used to help children develop strong auditory skills. In addition, therapists partner with parents to provide them with the skills needed to continue therapy and auditory learning at home. To preclude children from relying on speechreading, Auditory-Verbal therapists will sometimes sit behind the child, cover their mouths, or otherwise encourage a child to rely on listening skills alone. The Auditory-Verbal approach excludes the use of sign language, while supporting a child's participation in regular learning and living environments ("mainstreaming") as soon as possible.

Cued Speech

This approach uses a visual communication system to demonstrate phonetic information to the child with hearing loss. It is a simple, sound-based, visual system that combines the natural mouth movements of speech with visual cues that represent groups of sounds. For English, there are 8 handshapes, each of which represents several consonant sounds, and 4 positions around the mouth, each of which represents several vowel sounds. The use of cues enhances speechreading ability and is useful for a child who is unable to internalize spoken language through amplified hearing alone. It is recommended that children who use Cued Speech be enrolled in programs that emphasize auditory/oral development.

What Are the Similarities Among Spoken Language Approaches?

All spoken language programs support the following goals for children with hearing loss:

- ✓ Ensuring early identification and intervention
- ✓ Maximizing residual hearing by utilizing amplification technology (hearing aids or cochlear implants) consistently and as early as possible after diagnosis
- ✓ Participating in ongoing speech-language therapy or instruction to improve intelligibility
- ✓ Developing listening skills
- ✓ Teaching parents and caretakers to provide children with optimal speech/language stimulation
- ✓ Empowering children to self-monitor their speech/language skills
- ✓ Mainstreaming children with hearing loss into the regular classroom environment when appropriate

What Are the Benefits of Spoken Language Approaches?

The principal benefit of Spoken Language Approaches is one that you don't notice...which is exactly the point! Having developed spoken and written language skills, children with hearing loss are armed with the skills necessary to communicate effectively in a world comprised primarily of people with normal hearing who use spoken language. In many cases, children with hearing loss who have enrolled in spoken language programs perform at the same level as their peers with normal hearing in the classroom and beyond.

Studies show that success in the mainstream is indeed a reality for most children using spoken language and listening skills. For example, researchers Geers and Moog (1989) found that the majority of 16- and 17-year old students in their study who were educated using a spoken language approach were proficient in spoken language and had high levels of intelligibility. Furthermore, the teens possessed reading abilities that were approximately double the national average for children with hearing loss.

In fact, outcome studies have continuously shown that individuals who are taught through the use of amplified residual hearing from early childhood become independent, speaking, and contributing members of mainstream society (Goldberg & Flexer, 1993, 2001; Ling, 1989; Yoshinaga-Itano & Pollack, 1988).

What Can Parents Do To Stimulate Speech and Language Development in Their Babies with Hearing Loss?

General guidelines for fostering communication with your baby are listed below:

- Provide appropriate and consistent use of the recommended amplification.
- Speak to your baby frequently, including conversations about everyday events and routines.
- Speak at normal conversational levels, using natural gestures as appropriate.
- Speak clearly.
- Repeat key words, giving your baby extra chances to listen to the words.
- Encourage vocal play and imitation.
- Include melody or intonation in your voice to emphasize key words or to add meaning to the sentence.
- Give your child time to respond.
- Encourage your child to be an active reader by reading with your child. Books with predictable stories, rhyming words, and/or vocabulary that repeats are especially effective with babies.

This is just the start, however. Parents can let their imagination go wild with fun activities designed to help babies develop speech and language skills. Some kid-tested ideas for parents and caregivers include:

- Developing routines for daily activities. Talk about the activity using familiar words and language.

- Read stories together. Babies like to hear the same story over and over. After having heard a story often enough, your baby can start taking part by remembering and repeating words and sounds associated with that page.
- Sing songs together. Babies learn from hearing rhyming and repetition.
- Recite nursery rhymes.
- Create an experience book. Take a regular notebook or journal and glue pictures that represent the people and activities filling your baby's life (photos of grandparents, candy wrappers, sand from the beach). Sit with your baby and talk about the book together. Play "Pattycake," "Peek-a-boo," etc.
- Build from the familiar to the unfamiliar. For example, if your baby knows the word "shoe" start talking about sneakers, sandals, boots, and slippers.

Resources

Most families benefit greatly by having professional guidance in fostering the development of spoken language with their children with hearing loss. The Alexander Graham Bell Association for the Deaf and Hard of Hearing (AG Bell) is the world's largest membership organization and information center focusing on pediatric hearing loss and Spoken Language Approaches. AG Bell provides ongoing support, information and advocacy guidance to parents, professionals, and adults with hearing loss. Please contact us for names of professionals and agencies that will help you develop skills to foster your child's development of spoken language.

AG Bell publishes books and brochures on the subject of hearing loss, Spoken Language Approaches, advocacy, and advances in hearing technology. Of special interest to parents is the booklet *So Your Child Has A Hearing Loss: Next Steps for Parents*. The organization also publishes a magazine, *Volta Voices*, a peer-reviewed scholarly journal, *The Volta Review*, and offers resource/referral services to members and friends.

Through its scholarship program, AG Bell provides financial aid to qualifying applicants for mainstreamed oral education at preschool, school-age, and university levels. Regional

conferences and biennial conventions are held to share knowledge on issues relating to hearing loss. Mentoring programs are offered to link children with the support and friendship of adults to share personal experiences with hearing loss. Finally, AG Bell provides governmental and education advocacy services through its State Chapters, Children's Rights Coordinators, and International Affiliates. Please contact us for help and information:

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Publications from AG Bell that address various spoken language approaches include:

- *Literacy Learning for Children who are Deaf or Hard of Hearing* by Lyn Robertson, Ph.D., outlining strategies to ensure that children have access to good spoken and written language;
- *It Takes Two to Talk* by Ayala Manolson, presenting user-friendly advice and activities parents can use to help their children develop spoken language skills;
- *Auditory-Verbal Therapy for Parents and Professionals* by Warren Estabrooks, M.Ed., offering examples of AVT in action for children at ages 3, 7, and 14 years;
- *Educational Audiology for the Limited-Hearing Infant and Preschooler: An Auditory-Verbal Program* by Doreen Pollack, Donald Goldberg, Ph.D., and Nancy Caleffe-Schenck, providing a methods- and research-based explanation of the A-V approach; and
- *Cued Speech Curriculum: Acquiring Receptive and Expressive Cued Speech* by Karen Koehler-Cesa, outlining a cueing curriculum for students aged 8 to adult.