HEARING LOSS
COMMUNICATION OPTIONS

Communicating with your child is of the utmost importance! Two-way communication, responding to your child and encouraging your child to respond to you, is the key to your child's language development. There are different ways to communicate and different philosophies about communication. As you think about how your family communicates now with your child and how you would like to communicate with him or her in the future, you are thinking about the communication methodology/mode issue. The best way to decide which approach to communication will be best for your child and family is to be open about all the modes, ask questions, talk to adults who are Deaf and Hard of Hearing and other families with children who have a hearing loss, and discuss, read, and obtain as much information you can about the various methods.

Factors to Consider
Consider the following factors when choosing a communication mode:

- Will the communication mode enable all your family members to communicate with your child?
- Do you feel comfortable with the amount of information you have received about modes and methods of communication?
- Have you talked to a variety of people and heard a variety of perspectives on each choice?
- Is the communication mode in the best interest of your child? Does it allow your child to have influence over his/her environment, discuss his/her feelings and concerns, and participate in the world of imagination and abstract thought?
- Does the communication enhance your relationships with each other as a family? (It should promote enjoyable, meaningful communication among all family members and enable your child to feel part of your family and know what is going on.)
- Has the information you received about communication choices been delivered to you in an unbiased manner? Are you looking at your choice of communication in terms of what will be best for your child and family, and not what someone has promised you about a certain method?

Definitions

American Sign Language (ASL): This is a fully developed, autonomous, natural language with distinct grammar, syntax, and art forms. Sign language can perform the same range of functions as a spoken language. “Listeners” use their eyes instead of their ears to process linguistic information. “Speakers” use their hands, arms, eyes, face, head, and body. These movements and shapes function as the “word” and “intonation” of the language. If parents are not deaf, intensive ASL training is necessary in order for the family to become proficient in the language.
Auditory-Oral (AO): This method of teaching spoken language stresses the use of amplified residual hearing, speech and oral language development. Additionally it places emphasis on speech reading and visual clues from the face or body. Tactile methods may also be used to encourage the child to feel the sounds of speech. Parents need to be highly involved with child’s teacher and/or therapists to carry over training activities to the home and create an optimal “oral” learning environment.

Auditory-Verbal (AV): This approach to teaching spoken communication concentrates on the development of listening (auditory) and speaking (verbal) skills. It emphasizes teaching the child to use his or her amplified residual hearing and audition from listening devices (like hearing aids or cochlear implants) to the fullest extent possible. A high degree of parent involvement is necessary as parents learn methods to integrate listening and language throughout daily routines.

Cued Speech: This system is designed to clarify lip reading by using simple hand movements (cues) around the face to indicate the exact pronunciation of any spoken word. Since many spoken words look exactly alike on the mouth (e.g. pan, man), cues allow the child to see the difference between them. Cued speech can be learned through classes taught by trained teachers or therapists. A significant amount of time must be spent using and practicing cues to become proficient.

Simultaneous Communication: This occurs when a person uses sign language and spoken English at the same time. The signs used may be an exact match to the spoken message (Signed Exact English). Or, a person may sign some, but not all, of the words in the spoken message (Pidgin Signed English). The words that are signed and the words that are spoken occur simultaneously. Parents must consistently sign while they speak to their child. Sign language courses are routinely offered through the community, local colleges, adult education etc.

Total Communication (TC): The term Total Communication was first defined as a philosophy using of all modes of communication (i.e. speech, sign language, auditory training, speech reading and finger spelling). Today the term Total Communication is commonly interpreted as Simultaneous Communication (signing while talking). This philosophy led to the formation of manual systems (e.g. Signing Exact English - Signed English) that attempt to represent spoken English.

Communication Options FAQ’s

1. Is American Sign Language a true language? Is it ‘universal’?
   Many people mistakenly believe that American Sign Language (ASL) is English conveyed through signs. Some think that it is a manual code for English, that it can express only concrete information, or that is one universal sign language used by Deaf people around the world. It is not a form of English. It has its own grammatical structure, which must be mastered in the same way as the grammar of any other language.

   ASL is capable of conveying subtle, complex, and abstract ideas. Signers can discuss philosophy, literature, or politics as well as football, cars, or income taxes. Sign Language can express poetry and can communicate humor, wit, and satire. As in other languages, the community in response to cultural and technological change is constantly introducing new vocabulary items. ASL is not universal. Just as hearing people in different countries speak
different languages, members of the Deaf community around the world sign in different languages. Members of the Deaf community in Mexico use a different sign language from that used in the USA because of historical circumstances, contemporary ASL is more like French Sign Language than like British Sign Language.

2. What does the research say about communication methods? Has research proven that one method is better than another?

No one method of communication has been scientifically proven to be the best for ALL Deaf and Hard of Hearing children. In “A Research Synthesis of Language Development in Children who are Deaf” by Marc Marschark, Ph.D (2001), over 150 research studies were looked at, and the conclusion was that “…the most frustrating finding concerning language development of children who are deaf is the fact the researchers have not yet found THE approach that supports development across the domains of social functioning, educational achievement, and literacy. A single such approach is unlikely….“ Research studies on language development and mode of communication for children who are deaf can be of use to parents and professionals in understanding language development, the importance of early intervention, mother-child bonding etc. regardless of the mode of communication the child is using.

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

Decisions about communication mode are not irreversible. In fact, it is very important for families to remain flexible and open-minded about their choices in communication. The needs of the child and family may change over time. As families gain further information and knowledge about deafness and their child’s hearing loss, choice of communication may be impacted. A child’s progress should be monitored through objective assessments in order for parents to understand the growth their child is making in language development.

Additional Resources:

www.handsandvoices.org
http://ncbegin.org
www.mychildwithoutlimits.org
www.nidcd.nih.gov
www.raisingdeafkids.org/communication/choices
http://www.lsl.usu.edu/files/Gravel-ComunicationOptions.pdf

Adapted from: http://www.cdc.gov/ncbddd/hearingloss/freematerials.html