

# Exploring Language & Communication Opportunities

A Process Document for Professionals  
working with Children who are Deaf or  
Hard of Hearing and Their Families

***(Professional Guide)***



Maine Educational Center for the Deaf and Hard of Hearing. Early Childhood and Family Services. Adapted from Amy Spencer 2016.

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# ELCO Process

## Introduction & Purpose

*Amy Spencer MS CCC/SLP, TOD*

The Exploring Language and Communication Opportunities, or ELCO, process was developed to ensure families receive the necessary information to begin their journey of developing a strong language foundation for their child. As we know, children need language to learn. Language, whether visual or spoken, is necessary for cultivating critical life skills; communication, knowledge base, literacy, thinking, social skills and self-esteem.

While the Language and Communication Opportunities overview provides general information about visual, spoken, and combined approaches, the ELCO webs guide professionals to include more specific information about the elements needed for each approach to attain its fullest potential.

Professionals are encouraged to use a cyclical four stage approach in the ELCO process to ensure the information is digestible, consistent, and complete. Stage One includes the overview information for the Language and Communication Opportunities. Stage Two is driven by parent interest in exploring one approach, or many of the approaches, in a more in-depth manner. The guide attached to each approach is intended to be thorough and provide some parameters for information sharing, as well as a way for professionals to guarantee fidelity across ELCO process experiences for each family. Although some professionals presenting the ELCO process are specialists in one area or another, each provider is encouraged to

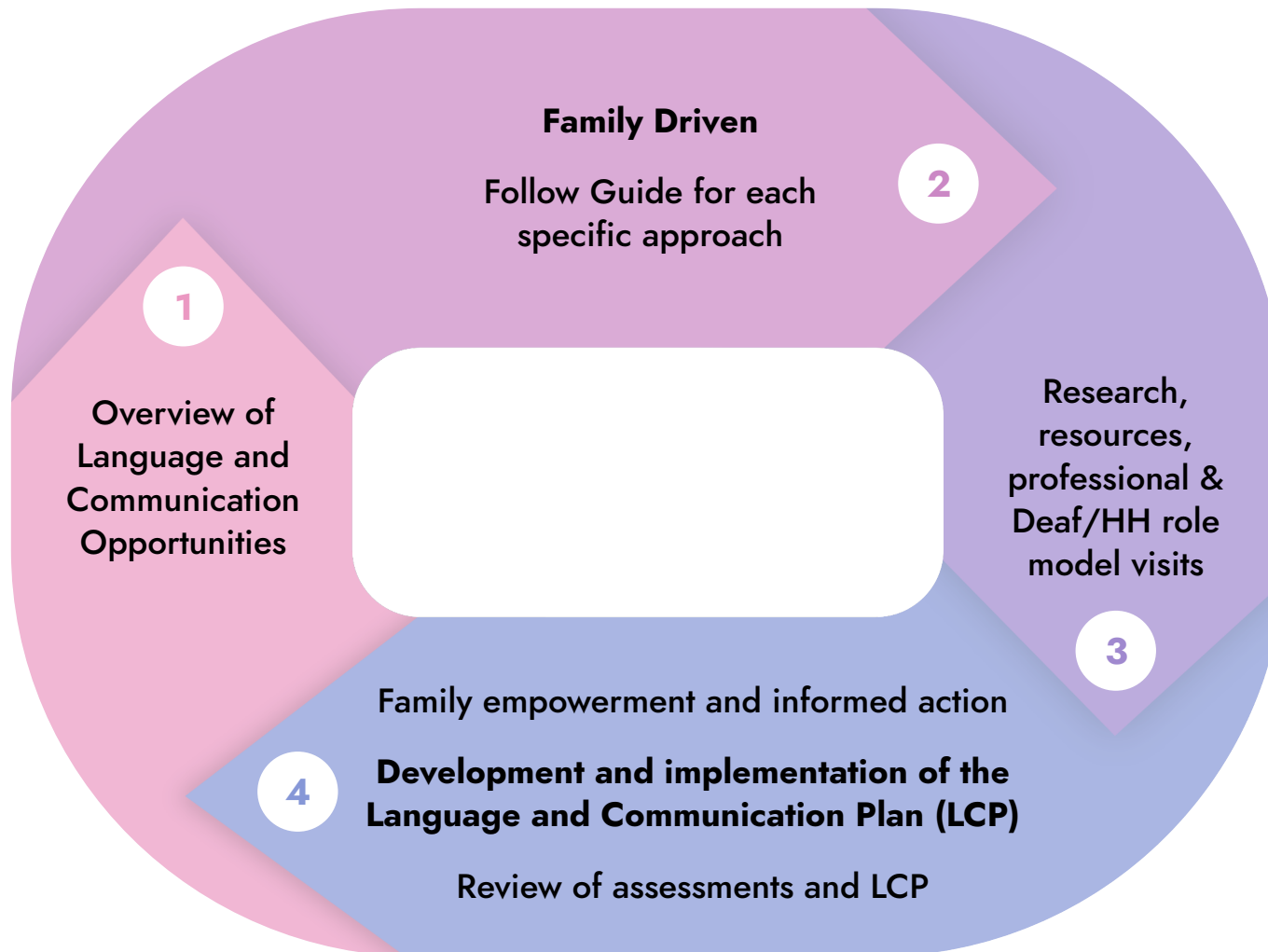
present this information without bias, giving comprehensive information and resources for families to consider. Professionals guide families to think about which elements of the approach are benefits, and which are limitations for their unique situation. Stage Three of this exploration may include diving into online resources, exploring literature and research, as well as a visit(s) from a professional(s) who specializes in the approach(es) of interest and/or Deaf or Hard of Hearing role model(s).

The ultimate goal of the ELCO Process, Stage 4, is to empower families to make evidence-informed decisions and devise an initial language and communication plan (LCP). This plan will allow the team to put the appropriate supports and services in place based specifically on the approach or approaches chosen by the family. Ongoing assessments and the language and communication plan will be reviewed frequently, at least every 6 months to 1 year; to determine what is working, what is not working, and, consequently, if changes need to be made to the original plan. The individual ELCO webs can act as a framework to families and providers in determining which elements may be missing and what changes should be considered if language growth is suboptimal.

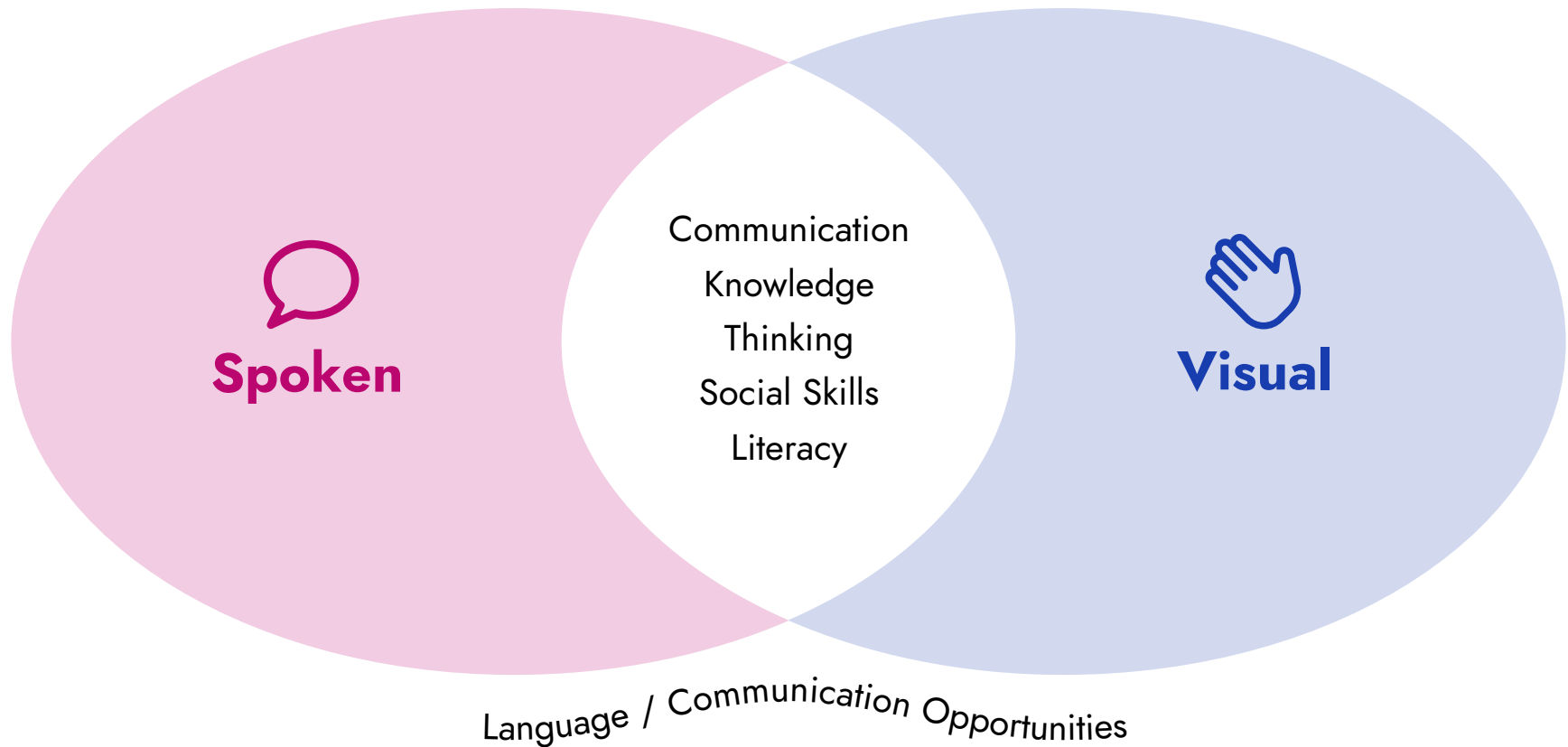
This is a journey. Plans are made. Families and children grow. The family and their team reflects on growth and decides how the approach is working and what may need to be added or changed to best match the family's desired outcomes and the child's unique needs. No Language and Communication Plan is final. It is a fluid document used to ensure that family's goals are clear, and services are in place to support strong language foundations for children who are deaf or hard of hearing.



# Professional Approach



# Children Need Language to Learn



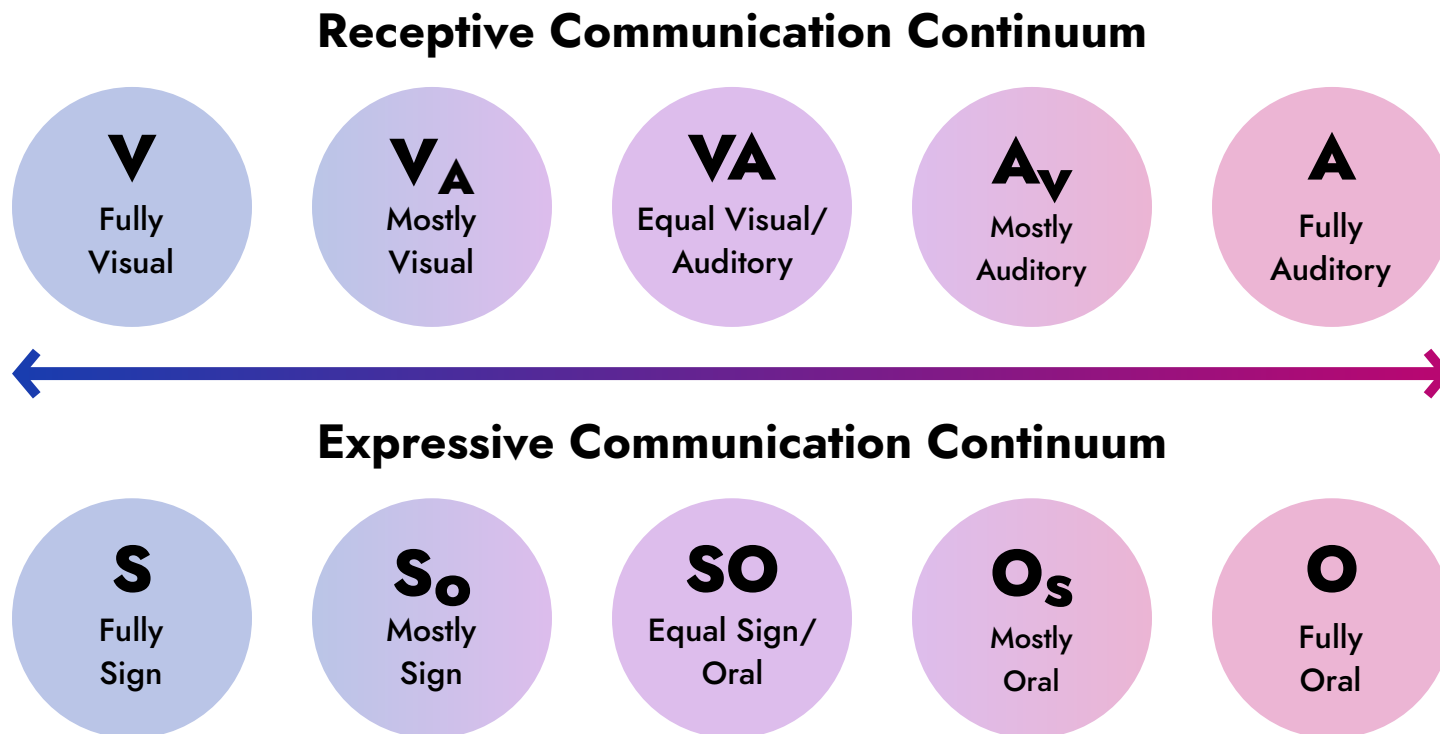
## Children Need Language to Learn

- As we know, children's brains learn best in the early years from birth to age three. Research indicates that early access to a full language is essential for optimal language development.
- We're going to talk about communication opportunities and language development for children who are deaf or hard of hearing. We do this to ensure that your family has the information and resources necessary to make an informed decision about what path or paths to language development you want to explore.
- This is an ongoing exploration. Our job is to give you all of the information so that you feel comfortable with all of the opportunities available to your family.
- Regardless of whether a language is visual or spoken, your child will have access to attain the ultimate goals: communication, knowledge, literacy, thinking, and social skills.
- Some families and children use a visual or spoken language. Some use a combination of the two.

**Most importantly, we know that children need language to learn.**



# Communication Continuum for Individuals Who Are Deaf/Hard of Hearing



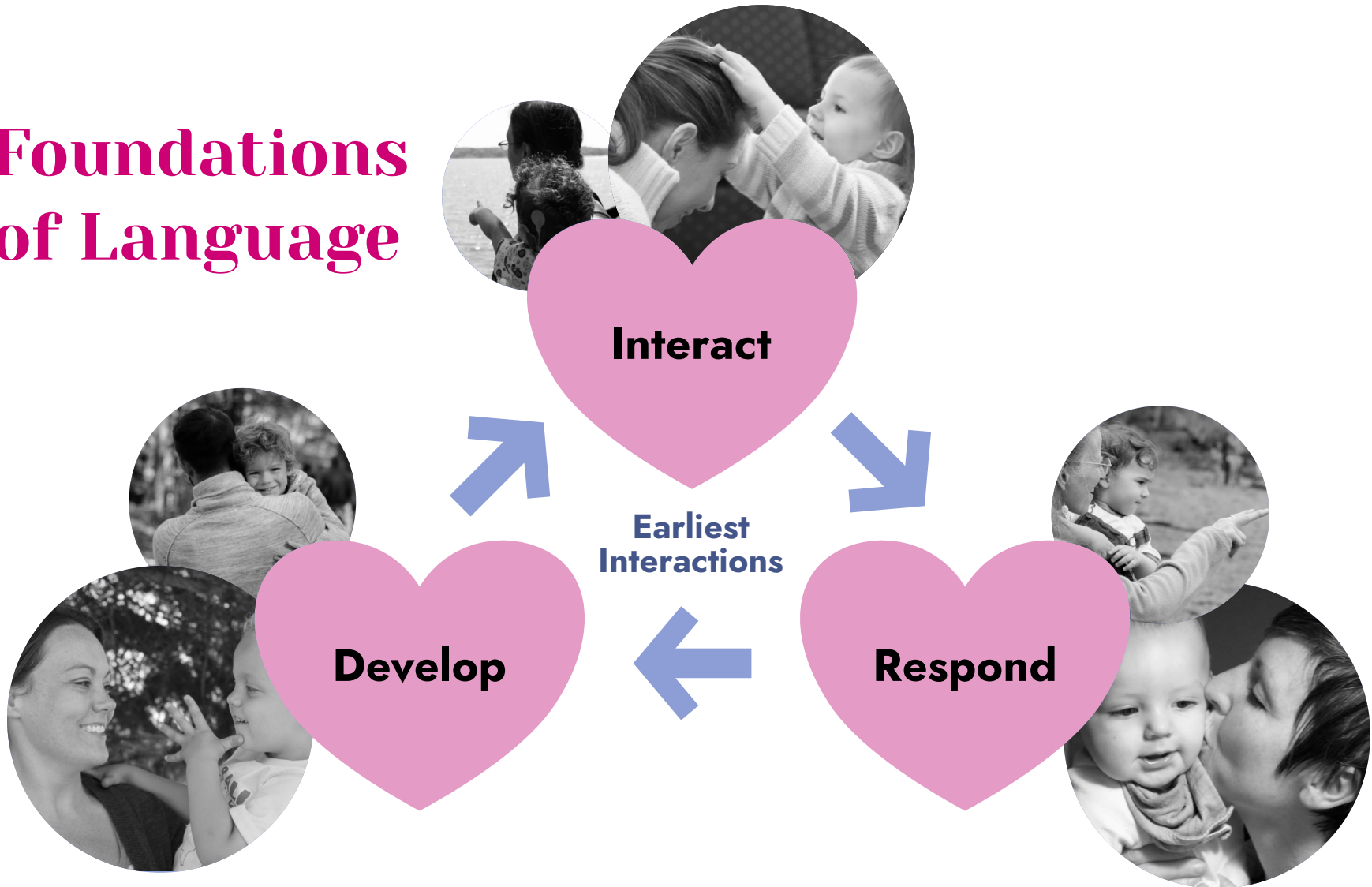
## **Communication Continuum for Individuals Who Are Deaf/Hard of Hearing**

- Language understanding or receptive language can be more visual or auditory based depending on a child's access and environmental factors.
- Language use or expressive language can be more sign or oral depending on context, ability, and environmental factors.





# Foundations of Language



# Earliest Interactions Can Be Visual, Physical, and Vocal

Regardless of your child's hearing levels, your earliest interactions serve as the foundation for language development.

For example, your child may **INTERACT** with you:

- *Verbally by:* crying, cooing, babbling vocally
- *Physically by:* touching, cuddling, reaching
- *Visually by:* smiling, looking, gesturing, using facial expressions, babbling with hands

Your responses to these interactions can encourage connections to continue. These interactions will become the foundations for your child's communication and language development. They teach your child that you will respond to what they do therefore what they do is meaningful. These are your child's first conversations!

For example, you can **RESPOND** and encourage interactions by:

- Engaging in face-to-face connections
- Narrating throughout daily routines such as feeding, bathing, diaper changes, etc. (i.e. Saying or signing- "Let's change your diaper," etc.)

- Using actions, facial expressions, or words/signs
- Following your child's lead by noticing their gaze, smile, point, etc.
- Commenting on things of interest in the environment

**Development of thinking, knowledge, social skills, literacy, and communication are highly dependent on these interactions.**

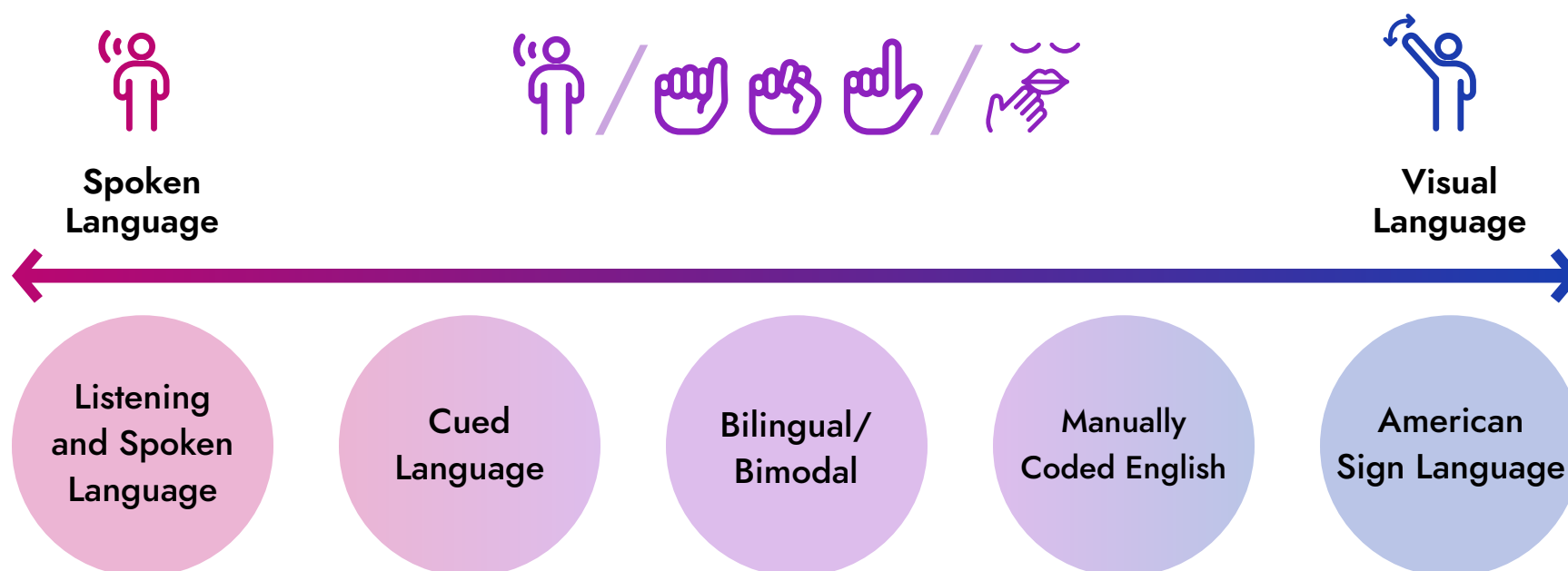
Early interactions serve as the foundation to **DEVELOP**:

- Knowledge
- Thinking
- Social Skills
- Literacy
- Communication





# Communication & Language Opportunities for Children Who Are Deaf or Hard of Hearing



## Communication and Language Opportunities

**Here is a representation of the communication and language opportunities used to develop language. Spoken language is represented in pink, visual language in blue, and the combination of the two in purple.**

As we can see, there are many ways for children who are deaf or hard of hearing to learn language. Choosing a communication approach to foster language development for your child requires time and many thoughtful decisions. What works for one family may not work for another. All communication and language approaches require lots of family involvement and a language-rich environment.

It is important to check your child's progress often. Remember that you can change what you are doing if your child is not making sufficient progress toward language

milestones. Keep in mind that no choice is permanent. Professionals will be working with you to make sure your child is learning language and communicating well. The following is a description of the different language and communication approaches.

All of the communication and language opportunities we will review can be used to facilitate language development for your child. You can choose which side of the visual we will start on and then we will move to the other extreme, and end with the approaches in the middle.



# Overview of Communication and Language Opportunities

## Listening and Spoken Language (Auditory Oral)

- The Auditory Oral approach to developing spoken language focuses on the consistent use of hearing technology to develop age-appropriate spoken language through listening.
- Listening skills are worked on systematically and naturally across all environments so that the child strengthens the auditory centers of his/her brain.
- Speech reading and natural gestures may be used, although listening is the primary focus.
- The goal is to develop listening and spoken language to the fullest extent.
- Signing may or may not be used.

## Listening and Spoken Language (Auditory Verbal)

- Auditory-Verbal Therapy is therapy that focuses on listening and spoken language through the consistent use of hearing technology to develop age-appropriate spoken language skills through listening.
- Listening skills are worked on systematically, through play and routine activities, so that the child strengthens the auditory centers of his/her brain.
- The goal is to develop listening and spoken language to communicate, and to assist parents/caregivers to help their child learn to listen to and speak the language of their home through everyday play activities and routines.
- Natural gestures and speech reading may be used but are not encouraged.
- Sign language is not used.



## Overview Continued...

### American Sign Language (ASL)

- American Sign Language (ASL) is a visual language and the language of Deaf Culture.
- The brain processes linguistic information through the eyes.
- The shape, placement, and movement of the hands as well as facial expressions and body movements all play important parts in conveying information.
- ASL has its own grammar and word order.
- In the approach, ASL is the primary language. English is learned through reading and writing, and /or speaking and listening.
- The goal is to provide the child with a fully accessible language regardless of their hearing levels.

### Manually Coded English

- Manually Coded English systems use signing to produce "English on the hands."
- Several systems have been developed but the most commonly used MCE systems today are Signing Exact English, and Conceptually Accurate Signed English.
- Manually coded systems use signs in English word order and sometimes add special signs to show the grammar of English.
- Depending on the system, signers may produce every word/part of word on the hands, or use sign supported speech by signing the major concept words of what they are saying.
- Individuals who communicate using a manually coded English system may speak and sign at the same time.
- While learning a visual system, some families use sign supported speech using the signs they know while speaking to support understanding of the context of their spoken message.



# Overview Continued...

## Cued Language

- Cued Speech is a visual communication system of eight hand shapes (cues) and four positions around the face that represent all of the different sounds of speech.
- These cues are used while talking in order to make the spoken language clear through a combination of lip and cue reading.
- This system allows the child to distinguish sounds that look the same on the lips.
- The primary goal of Cued Language is to develop a complete phonetic representation of spoken language in order to foster age appropriate literacy skills in that language.
- Children who learn spoken language through Cued Language learn to read and write phonetically like their hearing peers, regardless of their hearing levels.

## Bilingual Bimodal

- The Bilingual Bimodal approach supports the acquisition of both ASL and spoken and/or cued English.
- A child's brain has the ability to learn both a visual and a spoken language at the same time without delaying the learning of either language.
- "Bilingual" refers to the fluent use of both languages. "Bimodal" refers to the use of language in two modalities: signed language, spoken language and/or written language.
- This approach includes early access to visual language, while also pursuing the maximal use of hearing technology and listening & spoken language therapy.
- The languages are kept separate and whole: speaking and signing are not presented simultaneously, but rather at separate times, or one after the other.
- The goal is to learn both languages and have the option of using either ASL or spoken English based on the child's preferences.



## Overview Continued...

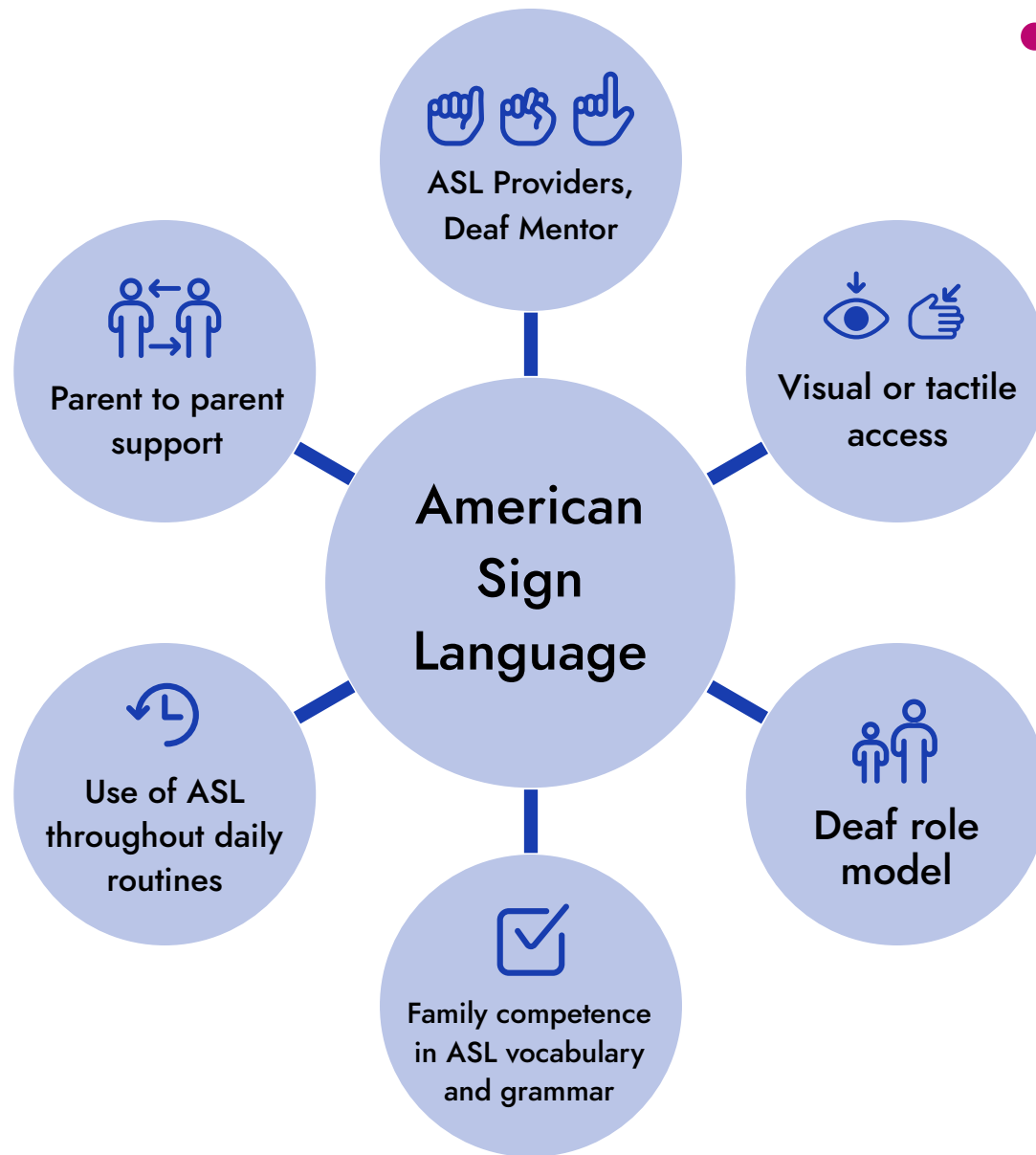
### Combined Approaches

For some children, one communication approach will be sufficient to develop language. For other, a combination of approaches will be beneficial. Your child's team will work with you to help you decide when more than one approach may be needed.

**As you begin this family journey and identify communication opportunities you want to explore, we will look at the necessary components for each approach to reach its full potential.**







# American Sign Language

- ASL is a visual language that developed naturally in the Deaf Community and was officially recognized as a language in the 1960's.
- ASL has its own unique grammatical structure.
- Language acquisition is visual in ASL.
- Language expression is on the hands, face, and by using body movement.

## Why would a family want to communicate with their child using American Sign Language?

- Families whose children do not have access to spoken language through audition but do have visual or tactile access.
- Families who want their children to have full access to information using a visual language.
- Families who want their children to be part of the Deaf Community.
- Families who want their children to have the ability to choose later in life to take courses, socialize, or attend events in either language.

## How does a family learn American Sign Language?

- Family Sign Classes
- ASL Family Training
- TOD who is fluent in ASL
- iPad Apps
- Community Classes
- Online Learning

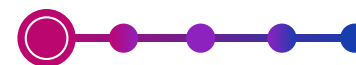
Research has shown that the involvement of a culturally Deaf individual in your journey of learning American Sign Language improves outcomes significantly for most families.

Your competence in ASL vocabulary and grammar will impact your child's success in learning ASL. Use of ASL consistently throughout your daily routines is imperative.

The consistent involvement of an ASL family trainer and/or a Deaf Mentor provides the resource necessary to comprehensively attain true language use and proficiency in all areas of ASL development. A native speaker of ASL is going to provide more nuances of appropriate language use than a fluent second-language user.

Children who communicate using ASL may use an ASL interpreter in the classroom.





## Listening and Spoken Language (AO)

- The Auditory Oral approach involves using your child's hearing technology all waking hours.
- Families use their home spoken language to communicate with their child.
- The use of speech reading, natural gestures, and listening are used in combination for comprehension of spoken language.

### **Why would a family want to communicate with their child using an Auditory Oral approach?**

- Families who want to communicate with their child using their home spoken language
- Families who are committed to the consistent use of their child's hearing technology
- Families who want their child to communicate using spoken language
- Families who want their child to access their education primarily through listening and spoken language
- Families who want to use visual support such as speech reading and visual gestures to enhance access to spoken communication

### **How does a family learn LSL/AO strategies?**

- Home visits with a provider who has experience using spoken language strategies and techniques
- Speech Language Pathologists and/or Listening and Spoken Language Specialists
- Oral Teachers of the Deaf
- iPad Apps
- Online Learning

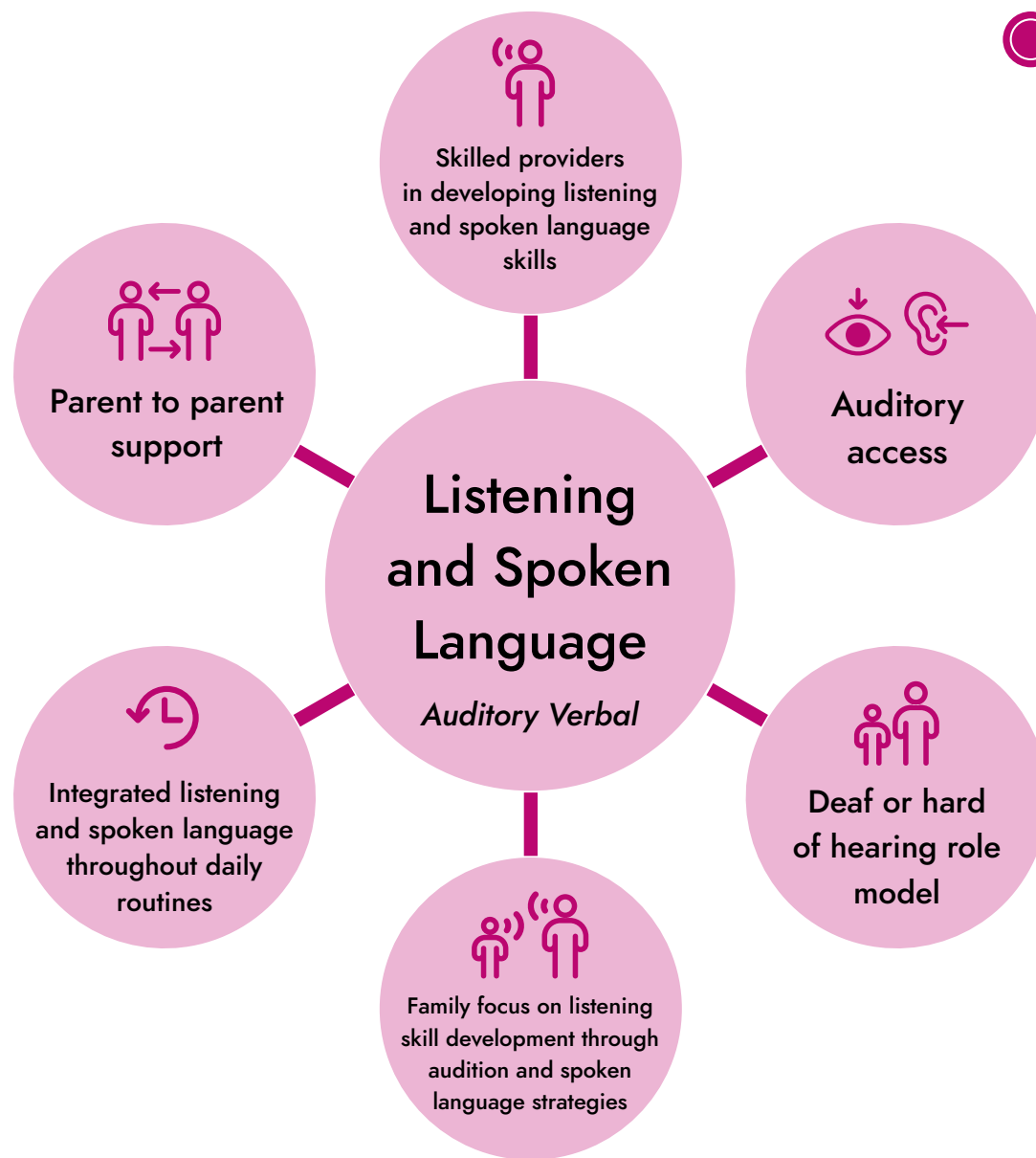
Many families feel that the involvement of a deaf or hard of hearing role model in their families journey is beneficial.

Attending audiological appointments and providing daily listening checks of your child's hearing technology will impact your child's success in learning to communicate using listening and spoken language.

Your consistent use of spoken language in discourse with your child will provide opportunities to hear, see, and process spoken language.

The consistent involvement of a Speech Language Pathologist or a Teacher of the Deaf that specializes in spoken language is necessary to support your child in developing proficiency in auditory skills development and spoken language.





## Listening and Spoken Language (AV)

- The Auditory Verbal approach involves using your child's hearing technology all waking hours.
- Families use their home spoken language to communicate with their child.
- The main focus of the AV approach is comprehension of spoken language using primarily audition. The use of natural gestures and speech reading may be used but are not encouraged.

### Why would a family want to communicate with their child using an Auditory Verbal approach?

- Families who want to communicate with their child using their home spoken language.
- Families who are committed to the consistent use of their child's hearing technology.
- Families who want their child to communicate using Listening and Spoken Language.
- Families who want to focus on their child's auditory development.
- Families who want their child to access their education exclusively through listening and spoken language.

### How does a family learn LSL/AV strategies?

- Home visits with a provider who has experience using spoken language strategies and techniques
- Speech and Language Therapist and/or Listening and Spoken Language Specialists
- Oral Teachers of the Deaf
- iPad Apps
- Online Learning

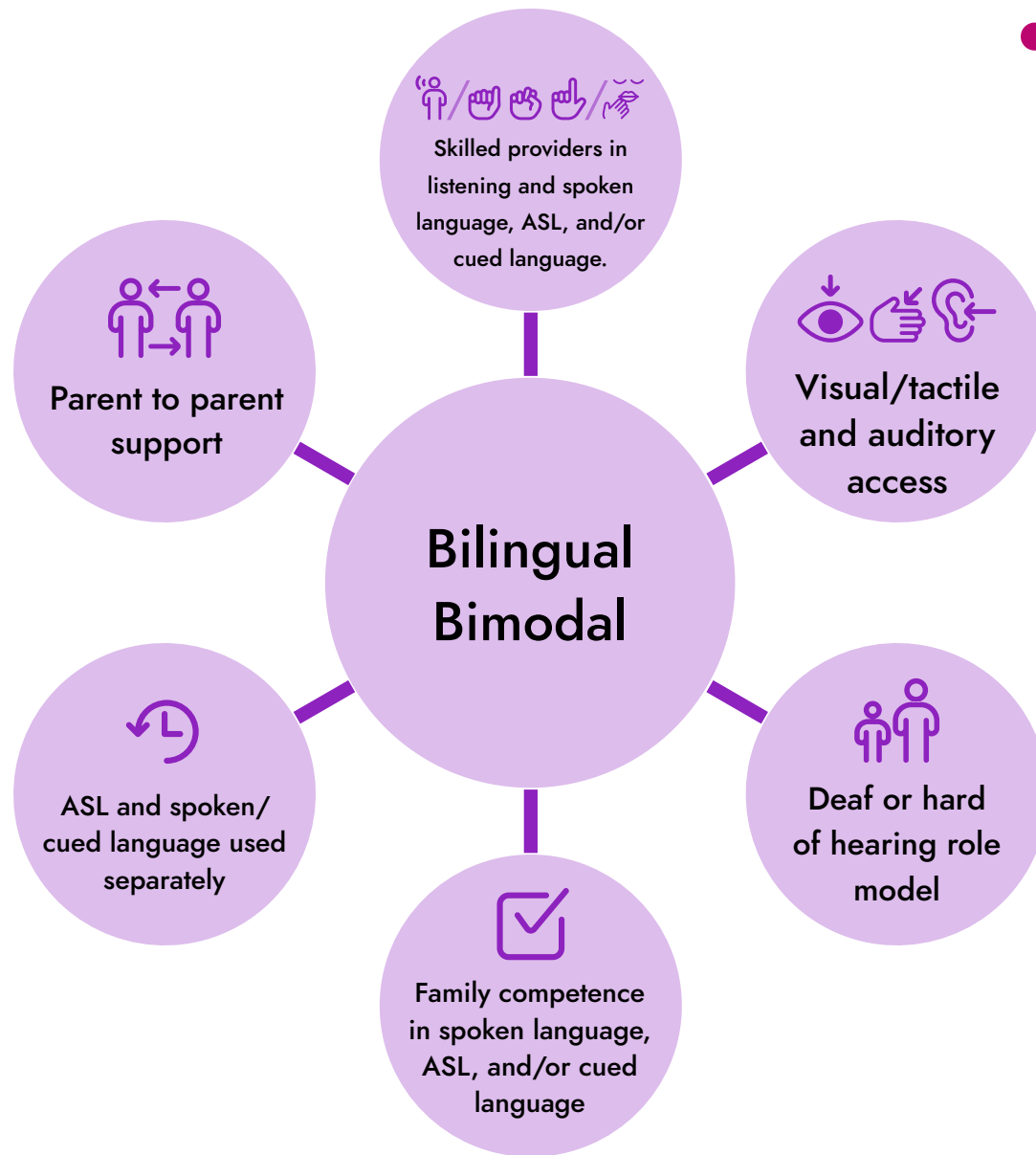
Many families feel that the involvement of a Deaf or hard of hearing role model that communicates using spoken language in their family's journey is beneficial.

Attending audiological appointments and providing daily listening checks of your child's hearing technology will impact your child's success in learning to communicate using spoken language.

Your consistent use of spoken language in discourse with your child will provide opportunities to hear and process spoken language.

The consistent involvement of a skilled Speech Language Pathologist and/or Listening and Spoken Language Specialist is necessary to support your child in developing proficiency in auditory skills and spoken language development.





# Bilingual Bimodal

- The Bilingual Bimodal approach involves the simultaneous development of two language: American Sign Language and a Spoken Language.
- The languages are presented in two different modalities: Visual and Auditory.
- The brain is able to acquire both a visual and a spoken language without detriment to either.
- Children are provided full access to language visually while they develop listening and spoken language skills.

## Why would a family want to communicate with a Bilingual Bimodal approach?

- Families who want their child to be bilingual.
- Families who want their children to participate equally in the Deaf and hearing communities.
- Families who want their child to have the ability to choose later in life to take courses, socialize, or attend events in either language.
- Families who are committed to consistent use and management of hearing technology.

## How does a family learn to implement a Bilingual Bimodal approach?

- TOD specializing in spoken language, ASL, and potentially cued language
- ASL family trainer and potentially Cued Speech family trainer
- Speech Language Pathologist or Listening and Spoken Language Specialist
- Workshops and/or cue camps
- Community courses

The success of this approach depends on maintaining the separation of the two languages. This can be done by assigning a different language for different activities or different times of the day, or by sandwiching (stating your message in one language first, then repeating in a second language).

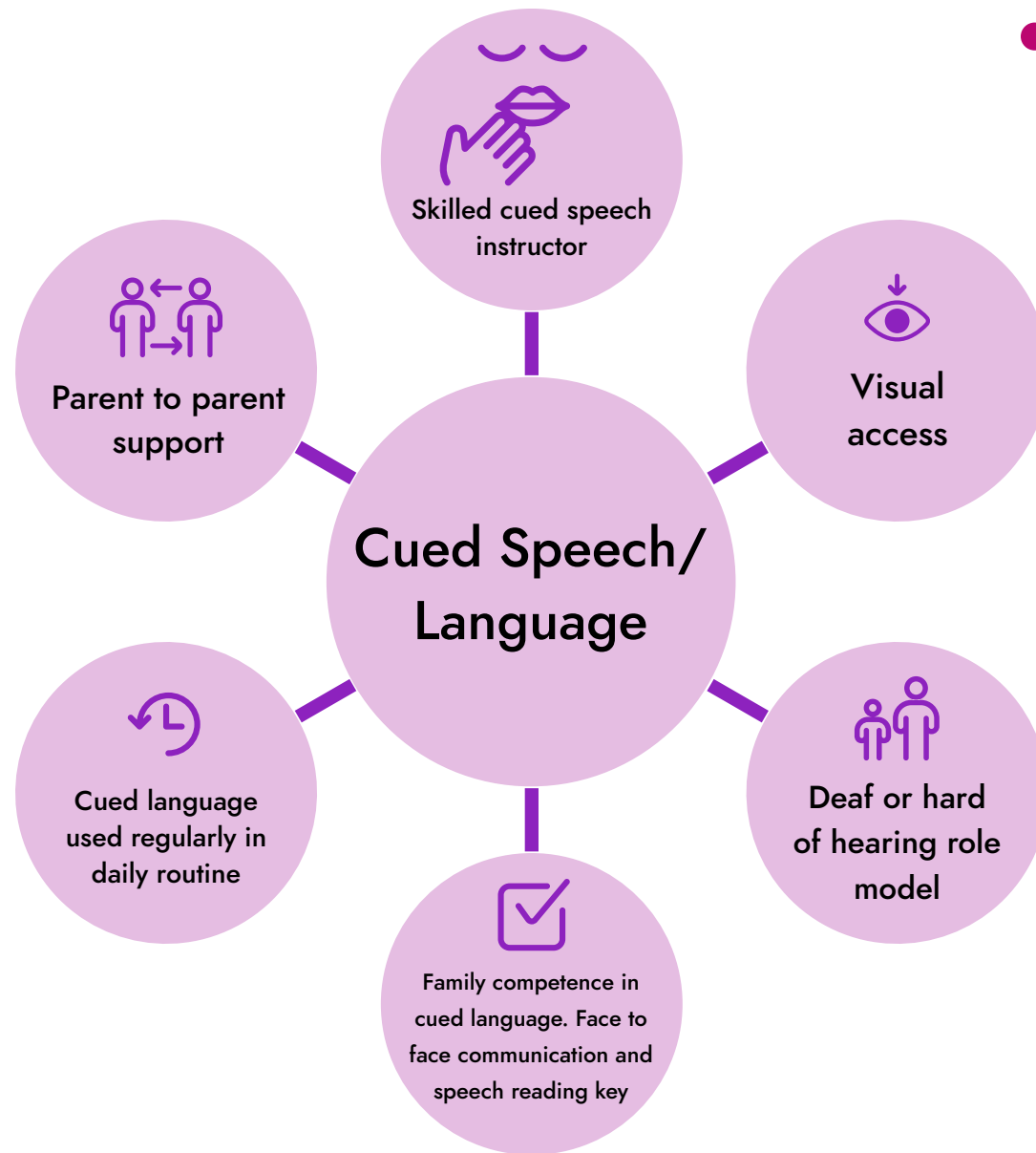
Many families feel that the involvement of culturally deaf role models that communicate using American Sign Language in their family's journey is beneficial.

Many families feel that the involvement of a Deaf or hard of hearing role model that communicates using spoken language in their family's journey is beneficial.

Children who use a Bilingual Bimodal approach may use an ASL interpreter and/or a cued speech transliterator in the classroom dependent upon individual access.







# Cued Language

- The cued speech system and cued language strategies were developed to make spoken language clearer through speech reading.
- The system uses 8 hand shapes, representing consonant sounds, and 4 positions around the mouth, representing vowel sounds, to improve the accuracy of speech reading accuracy (i.e. pea, me, bee).
- Children with all hearing levels can acquire a spoken language phonetically, yet auditory access will continue to impact expressive spoken language quality.
- Children can learn to read and write phonetically like their hearing peers.

## Why would a family want to communicate with their child using cued language?

- Families who want to communicate with their child using the spoken language(s) of the home.
- Families who want their child to learn to read and write phonetically.
- Families who want their child to have clear access to any spoken language through a visual modality.

## How does a family learn Cued Speech strategies?

- Cued Speech System Family Trainer
- Teachers of the Deaf competent in Cued Speech
- Speech Language Pathologists who are competent in Cued Speech
- iPad Apps
- Online Learning
- Workshops and cue camps

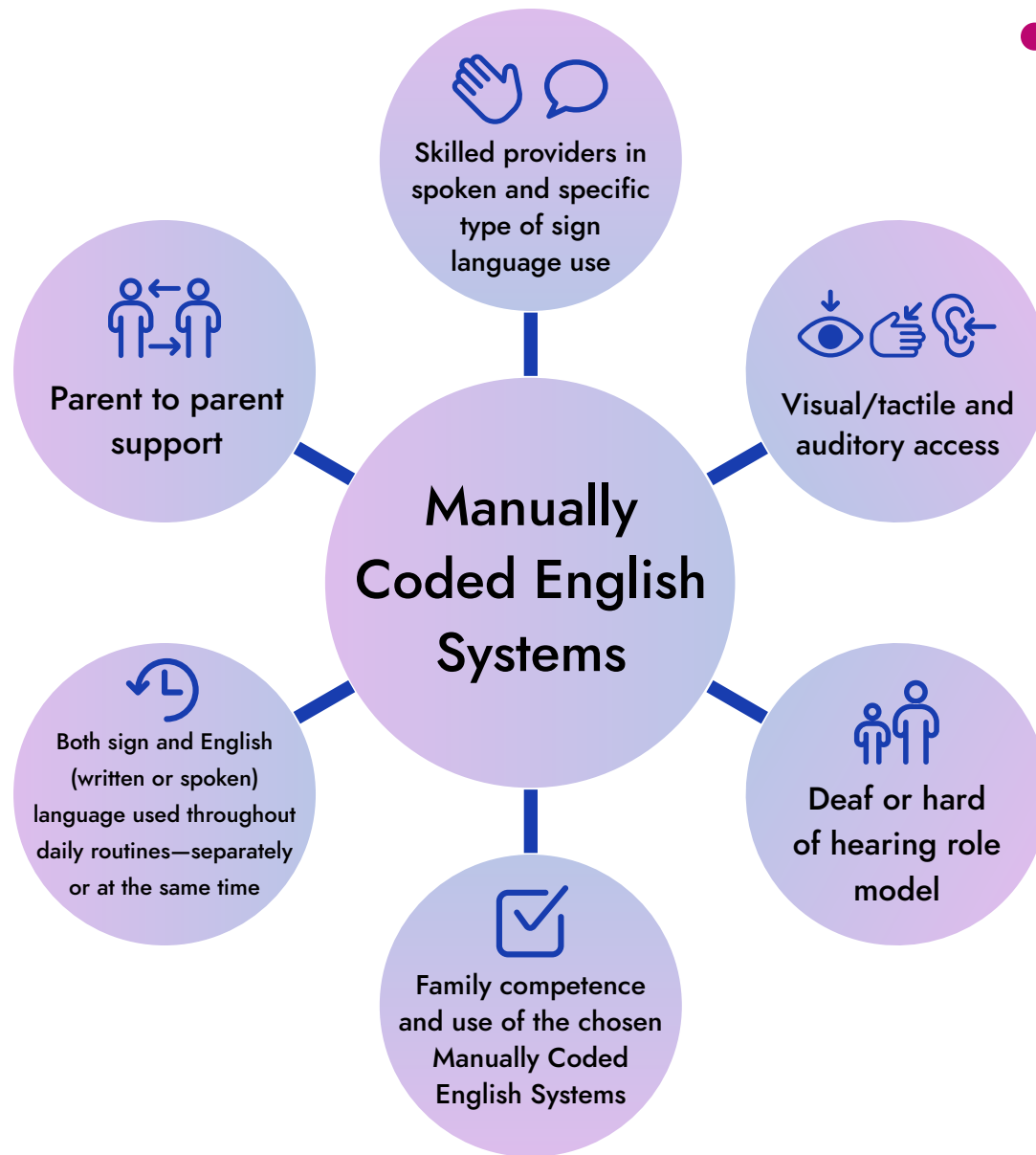
The involvement of a Cued Speech System Family Trainer is instrumental in developing cued language.

Many families feel that the involvement of a deaf or hard of hearing role model that communicates using cued language in their family's journey is beneficial.

Acquiring a command of English using cued language does not rely on, nor require, the use of hearing technology or residual hearing. However, the use of hearing technology improves outcomes for expressive spoken language development.

Children who communicate using Cued Speech may use a cued language transliterator in the classroom.





## Manually Coded English Systems

- MCE involves the use of sign in English word order most often speaking and signing at the same time.
- Each system varies in how strictly they represent English grammar; from marking every word/ word part to using sign to support contextual understanding of a spoken language message.
- Provides children with access to the native language of their home with visual sign support.
- Manually Coded English Systems include: SEE 1 (Seeing Essential English), SEE 2 (Signing Exact English), The Rochester Method (Fingerspelling), CASE—(Conceptually Accurate Signed English), Sign Supported Speech.
- While learning a visual system, some families use sign supported speech using the signs they know while speaking to support understanding of the context of their spoken message.

### Why would a family want to communicate with their child using Manually Coded English?

- Families who want to provide a visual model of spoken English to encourage comprehension of spoken, and later, written English.

- Families who want to provide their children with visual signs to fill in any auditory gaps.
- Families who want their child to be able to communicate using both spoken English and signs.
- Families who want their child to be able to communicate using signs if they are unable to produce verbal words.

### How does a family learn MCE strategies?

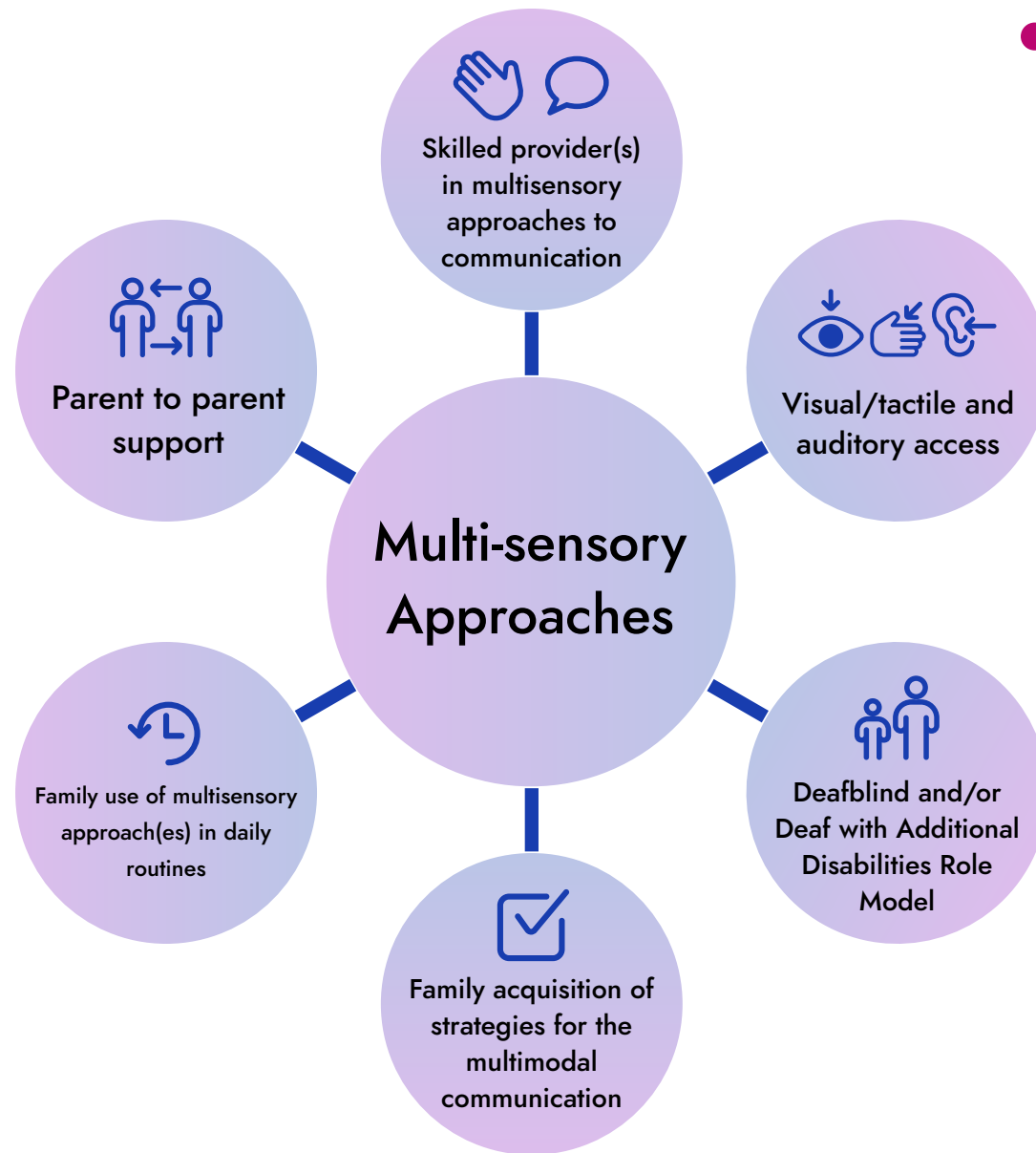
- Sign Language Family Trainer.
- Teachers of the Deaf competent in MCE.
- Speech Language Pathologists who are familiar with MCE.
- iPad Apps
- Online Learning

The involvement of a Sign Language Teacher is instrumental in developing Manually Coded English.

Many families feel that the involvement of a deaf or hard of hearing role model that communicates using Manually Coded English in their family's journey is beneficial.

Children who communicate using Manually Coded English Systems may use a sign language interpreter in the classroom.





# Multi-sensory Communication

- Multi-sensory communication systems are used with children with a variety of access and/or expressive differences including deafblindness, multiple disabilities, and/or neurodivergent learners.
- Communication acquisition can be through multiple senses that are available to the child; hearing, sight, and/or touch.
- Communication expression can be through the use of physical objects, gestures, touch cues, vocalizations, sign language, pictures, speech and more.
- Many families will use multiple methods.

## Why would a family choose a multi-sensory approach to communication?

- Families whose children have a combination of hearing, vision, motor, cognitive, learning differences and/or complex medical needs.
- Families whose children require an alternative way to access and understand information about the world around them.
- Families whose children will benefit from skilled assessments of strengths and preferences in order to determine the most functional mode of expressive communication.

- Families who want to develop strategies that support a unique approach that matches their child's specific access, learning, and communication needs.

## How does a family learn multi-sensory communication?

- Home visits with providers who specialize in working with multi-sensory approaches to communication
- Special Educators, Teachers of the Deaf, Teachers of the Visually Impaired, Speech Language Pathologists
- Workshops and training modules
- Online Trainings

Many families feel that the involvement of a Deafblind or Deaf adult with additional disabilities as a role model, is beneficial on their families journey.

Communication needs must be determined on an individual basis with consideration of hearing, vision, cognitive, motor, learning abilities, and/ or medical needs.

Non-verbal communication approaches include, but are not limited to: body language/movements, gestures, touch cues, vocalizations, object communication, signing (both visual/ tactile), and later more symbolic picture communication.

Verbal communication approaches include, but are not limited to: oral language, tadoma (tactile lip reading), ASL (tactile/ visual), print use/ braille, print on the palm.

Augmentative and Alternative Communication Methods include, but are not limited to: object systems, picture systems, and electronic communication systems.



## Community of Practice

*For children who are Deaf or Hard of Hearing, birth to age 5.*



ASL Family Trainers



Listening and spoken language specialists

### Early Childhood Intervention Team

Special Educators

Speech & Language Therapists

Physical Therapists

Teachers of the Deaf & Hard of Hearing

Occupational Therapists

Clinical & Educational Audiologists



SLPs/Educators who specialize in working with children who are deaf or hard of hearing with additional special needs



SLPs/Educators who specialize in working with children who are deaf or hard of hearing



Cued Language Family Trainers



Clinical and Educational Audiologists



Manually coded English family trainers



**Most importantly, we know that children need language to learn.**

- There are many ways for children who are deaf or hard of hearing to acquire language.
- Choosing a communication approach for your child requires time and many thoughtful decisions. What works for one family may not work for another.
- All communication approaches require lots of family involvement and a language-rich environment. This is your journey: you may make course corrections along the way.
- It is important to check your child's progress often. Remember that you can change what you are doing if your child is not making sufficient progress toward language milestones. Keep in mind that no choice is permanent.
- Professionals will be working with you and your child to make sure your child is developing language to foster effective communication, knowledge, literacy, thinking and social skills.





## Resources

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Handspeak

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Hands and Voices

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