How Early Intervention Can Make a Difference: Research and Trends

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Overview

- Research findings
- Current trends in early intervention
- How can you make a difference?

What Do Families Have in Common?

First deaf person they met was...



What Do Families Have in Common?

- Discovery of having a deaf child is unexpected
- Impact of having a deaf child is unknown
- Opportunities and potential are unknown
- Education and communication are unknown
- Resources are unknown
- Struggle with communication and technology
- Without support---experience stress

(Sass-Lehrer, 2008)





 English language performance better with experiences with deaf mentors (Watkins, Pittman, & Walden, 1998)

 Social-emotional, cognition, and communication development supported by opportunities for interactions with deaf adults/children (Calderon & Greenberg, 2003)



 Interactions with deaf adults reduced families' feelings of grief (Hintermair, 2000)

 Level of family involvement heavily correlates with academic success (Moeller, 2000)

 High expectations are a predicator for academic success (Bodner-Johnson, 1988)



 Deaf children in deaf families demonstrate greater academic success than deaf children in hearing families (Prinz & Strong, 2000; Brasel & Quigley, 1977; Corson, 1973; Vernon & Koh, 1970)



 Critical age for language appears to be earlier than speech (Sedley & Yoshinaga-Itano, 2002)

 Visual language reduces the risk of language deprivation at no risk to acquisition of other languages (Humphries et al., 2012; Grosjean, 2008; Nussbaum, 2008; Malloy, 2003; Yoshinaga-Itano, 2003; Emmorey, 2002; Krashen, 1973)



Visuality of Humans (Richmond, McCroskey, & Hickson, 2008):

- 80 percent of information enters through the eyes
- Eyes and ears are critical for communication across cultures
- All languages include gestures
- 65-93 percent of communication is nonverbal



 Deaf children with cochlear implants who had deaf parents outperformed deaf children with cochlear implants who had hearing parents in speech performance (Hassanzadeh, 2012)

- American Sign Language (ASL) is a language; a cochlear implant is a communicative tool
- Children are still deaf and wired to be visual learners

 Incidental learning opportunities missed (Yoshinaga-Itano & Sedey, 2000)

Babies are Visual Beings



What Children Need

- Full access to language
- Supportive environments
- Strong family involvement
- Language models
- High expectations
- Role models
- Can-do attitude



MISINFORMATION

If children sign, then they won't talk

Children with cochlear implants should not sign

You have to choose between signing or talking

MISINFORMATION

Deaf people who sign do not read well

ASL is not a "real" language

All children should try speech first

All deaf people are against cochlear implants

Children who speak don't need signs



We CANNOT wait...

- Cannot risk language delay
- Cannot risk delays in other areas of development
- Cannot risk effective family-child interaction

We CANNOT wait...

- Cannot risk late exposure to ASL
- Cannot risk the impact of academic, linguistic, and cognitive development
- Cannot risk delayed written English

Issues and Trends

UNHS, NHS, or EHDI

- Universal Newborn Hearing Screening (UNHS)
- Newborn Hearing Screening (NHS)
- Early Hearing Detection and Intervention (EHDI)

Newborn Hearing Screening and Intervention Act (2000)

1993

- 3 percent screened at birth
- Average age of identification: 2½ years old

Today

- 85-99 percent screened at birth
- Average age identified: 3-6 months

Hearing Levels

- 1,000: > 4 identified
- 1,000: 1 infant if 50 dB or higher,
- 1,000: 2.5 infants between 30-50 dB loss,

Resources

- EHDI
- Centers for Disease Control and Prevention (CDC)
- American Academy of Pediatrics (AAP)
- American Speech-Language-Hearing Association (ASHA)
- National Center for Hearing Assessment and Management (NCHAM)

www.infanthearing.org



Messages Sent to Families

Medical View

Socio-cultural View

Communication options

Hearing loss

Intervention

Failed hearing test

Diagnosis

Grief process

Communication opportunities

Hearing level/status

Involvement

Refer with explanation

Identification

Journey

http://www.infanthearing.org/ehdi-ebook/2013 ebook/21Chapter20DeafCommunity2013.pdf



Maryland's Advisory Council

- One physician with expertise in childhood hearing loss
- Three representatives from education
 - One from the Maryland State Department of Education
 - One from the Maryland School for the Deaf
 - One from a local education program
- One representative from the Maryland Department of Health and Mental Hygiene
- One mental health professional with expertise in the deaf field
- Two parents of deaf or hard of hearing children
- One Maryland Association of the Deaf representative*
- One audiologist with expertise in childhood hearing loss
- One AG Bell representative

* article in MAA



Joint Committee on Infant Hearing

- Alexander Graham Bell Association for the Deaf and Hard of Hearing (2)
- American Academy of Audiology (2)
- AAP (3)
- American Academy of Otolaryngology-Head and Neck Surgery (2)
- ASHA (3)
- Council on Education of the Deaf (2)
- Directors of speech and hearing programs in state health and welfare agencies (3)

www.jcih.org



Principles and Guidelines for EHDI Programs (2007)

- √ 100 percent of newborns to be screened
- ✓ Audiological evaluation before 3 months old
- ✓ Referral from hospital within two working days
- ✓ Follow-up by 3 months old if needed

Principles and Guidelines for EHDI Programs (2007)

- ✓ Provide access to early intervention
- ✓ An Individualized Family Service Plan (IFSP) must be signed within 45 days of referral
- ✓ Enrolled in an early intervention program with knowledgeable professionals about overall child development and communication options by 6 months old

JCIH Principles and Guidelines for Early Intervention After Confirmation that a Child is Deaf or Hard of Hearing (www.aap.org)

- ✓ Timely entry into an early intervention program
- ✓ Service coordinator with knowledge and skills working with deaf and hard of hearing babies (IFSP)
- ✓ Skills of the early intervention providers
 - Service providers that teach ASL must be native or fluent

JCIH Principles and Guidelines for Early Intervention After Confirmation that a Child is Deaf or Hard of Hearing

(www.aap.org)

- ✓ Specialists working with babies with additional disabilities
- ✓ Non-native English and multicultural populations
 - Provide support, mentorship, and guidance through families

JCIH Principles and Guidelines for Early Intervention After Confirmation that a Child is Deaf or Hard of Hearing

(www.aap.org)

- ✓ Progress monitoring with developmental assessments and transitions
- ✓ Children with special monitoring needs
- ✓ Parent/family involvement in the EHDI system
- ✓ Parent/communication system network
 - Meet other families

www.jcih.org



JCIH Principles and Guidelines for Early Intervention After Confirmation that a Child is Deaf or Hard of Hearing

(www.aap.org)

- ✓ Guidance from deaf and hard of hearing adults
- ✓ Fidelity (quality) of intervention
- ✓ Auditory checklist
- ✓ Visual strategies checklist

www.jcih.org



Why Include the Deaf Community?



How Can You Make a Difference?

Get Involved

- American Academy of Audiology
- ASHA
- EHDI
- Meetings and conferences
- American Society for Deaf Children
- Hands and Voices
- AG Bell

Get Involved

- Get on UNHS, NHS, or EHDI advisory council
- Actively represent state and national associations of the deaf deaf mentor programs
- Partnerships
 - Deaf and hearing adults (allies)
 - Early intervention and educational programs
- Shared reading programs
- Gallaudet University's Infants, Toddlers and Families Interdisciplinary Graduate Certificate Program (<u>www.gallaudet.edu/x57447.xml</u>)



Resources

- Visual Language and Visual Learning (VL2)
 (http://vl2.gallaudet.edu)
- Laurent Clerc National Deaf Education Center (www.gallaudet.edu/clerc center)
- Signing Times
 (www.signingtime.com)
- ASL websites and classes
 - Include families
- Books
 - Bilingual Deaf and Hearing Families (Bodner-Johnson & Benedict, 2012)
 - American Deaf Culture (Holcomb, 2012)



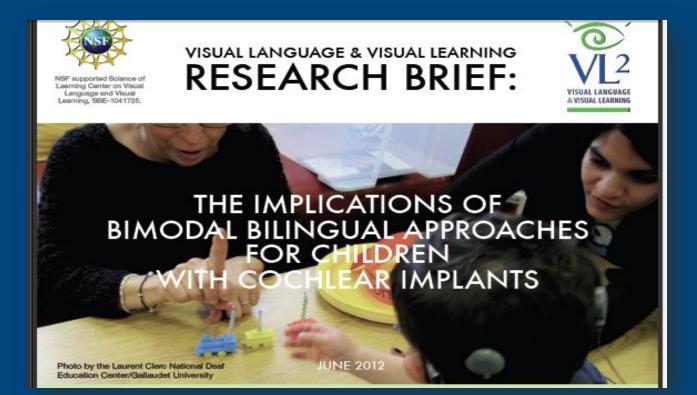
NSF supported Science of Learning Center on Visual Language and Visual Learning, SBE-0541953, Gallaudet University.

RESEARCH BRIEF:



ADVANTAGES OF EARLY VISUAL LANGUAGE







Learning Center on Visual Language and Visual

Learning, SBE-0541953.

RESEARCH BRIEF:









Language and Visual Learning, SBE-1041725.

RESEARCH BRIEF:





Resources

- Websites
 - www.aslized.org
 - www.jaclynvincent.com
 - www.deafchildren.org
- Use of Social Media
 - Why ASL? (Jackerson, 2011)
 - Early Intervention: The Missing Link (Benedict, 2011)
 - Storysigning Strategies (Holcomb, 2012)
 - lowa School for the Deaf (ISD, 2011)
 - Theory of Mind (Lewis, 2012)



Advocacy Strategies

Empowerment

Collaboration

Litigation

Education and Media

Negotiation

Protest/Rally

Pilot or Model Programs

Public Education and Media



Yes, We Can Make a Difference!

Individually, we are one drop. Together, we are an ocean.

~ Ryunosute Satoro



Please submit your questions using the chat box.

