chapter 4: possibilities for communication development

REASONS TO BE OPTIMISTIC

You have every reason to be optimistic about your child developing into an effective communicator and you will probably be thinking about how you can support your child’s communication development very soon, if not immediately, after learning of your child’s hearing loss. Many possibilities are open to you and your child. Most children who have a hearing loss can learn to talk. Their ability to communicate by using spoken language depends on many things, for example, how severe the child’s hearing loss is, how much they can hear when they use hearing technology such as hearing aids and cochlear implants, and how much support they receive to develop their listening and speaking skills. Some children will learn to communicate best by using speech, others will learn best by using sign language, and others still will learn best by using a combination of both.

CHOOSING A COMMUNICATION APPROACH

All children, regardless of their hearing abilities, must develop skills in communicating effectively to support their social, emotional and academic development. Since every type of hearing loss is different, and every child who has a hearing loss learns differently, no single approach to developing language is best for all deaf children. You can take one of several different directions, depending on your individual circumstances. The right approach is the one that works best for your child and family. All types of communication are natural for some people under certain circumstances. All the communication approaches work toward the use of both ‘receptive language’ – understanding the language that other people use – and ‘expressive language’ – using language to express ideas.

Some families choose to use aspects of different programs, combining what works for their child. The only thing that makes one approach better than another is when that approach happens to work better for a particular child.

When you are choosing an approach:

- Find all the information you can about the services available to you before moving forward – even if you think you are clear about the direction you want to take
- Visit more than one program and sit in on a session or two
- Listen to more than just one person, and
- Be open to advice, but also trust your own judgment about the best direction for achieving your goals for your child.

You might also find it valuable to:

- Speak with other parents who have been through the same process
- Talk to young adults who have a hearing loss to find out about their experiences, and
- Explore the information sources listed at the end of this resource.

Regardless of which approach your family chooses, you will need to be highly involved with the professionals working with your child so that you can learn the methods and use them at home. The most important place for children with (and without) a hearing loss to learn language is with their family in the activities of their daily lives. Ultimately, the most important thing is that you choose a service, or a combination of services, that you feel is right for your child and your family.

Your Family Support Facilitator can help you explore the different communication approaches. They can also support you in making your decisions.
IMPORTANT NOTE:
Given the many changes that are occurring within the education system, please raise any questions you have about signing approaches with your Family Support Facilitator or local Education facility. It is important to discuss any communication options you are considering with the relevant professionals.

CHANGING APPROACHES
Once you have chosen a communication approach, it’s important to use it and give it a fair chance to succeed. Even so, you shouldn’t feel locked-in by your choice.

Over time, your understanding of the needs and preferences of your child and family will grow and change. As this happens, if you recognise that another communication approach or early intervention service may match the needs of your child and family better, explore these alternatives and change your decisions if necessary. Your Family Support Facilitator and early intervention service will help you.

APPROACHES TO COMMUNICATION DEVELOPMENT
Several different approaches to communication development are discussed in the following pages. The methods vary in whether they focus on the development of spoken language skills, sign language skills, or a combination of both signed and spoken language.

USING LANGUAGE/SKILLS NEEDED TO COMMUNICATE
We bring many different skills together to communicate, and people use different combinations of these skills. Understanding what people say and being able to use words and sentences are just two of these skills. Language provides a means for organising and sharing information and ideas, and it is probably the most important communication skill for any child to develop.

Whether someone has a hearing loss or has normal hearing, the meaning held in language can be shared in many ways. Some of the most familiar ways are speech, tone of voice, gestures, facial expressions, and writing. Many people use a combination of these to send and receive messages.

Other effective communication skills that some people may be less familiar with are sign language, finger-spelling, and lip-reading.

VISUAL APPROACHES

SIGN LANGUAGE
A sign language is a visual language in which ‘listeners’ use their eyes instead of their ears to receive the information being shared, and ‘speakers’ use hand shapes, facial expressions, gestures, and body language to create language. Sign languages are independent and unique languages with a structure and grammar different from spoken languages. People learning a sign language must master vocabulary, grammar, and social aspects of the language just as they do with any spoken language. There are many different sign languages across the world.

Auslan, or Australian Sign Language, is the language of the Australian Deaf community. In 1987, the Australian Government officially recognised Auslan as an Australian language. Auslan is not a signed representation of the English language in which one word follows the next and the meaning is conveyed through the word order. Instead, Auslan has its own word order and unique grammar. Facial expressions are combined with signs to show different emotions and meanings.

The ability to use Auslan helps people to participate in the Deaf community. When “Deaf” is spelt with a capital D like this, it usually refers to people who consider themselves to be members of the Deaf community and part of a specific cultural and language group using Auslan as their first or preferred language. More detail about the Deaf community and Deaf culture is provided in the Choices book.

Signed English is another type of communication that uses signing. Although it uses some signs similar to Auslan, Signed English is quite different from Auslan. In Signed English, signs are used to represent every spoken word to represent the grammar of English. Signed English – accompanied by finger spelling (see below) – was designed to be always used at the same time as spoken English; its ultimate aim is that the child will develop spoken English skills and also develop their English reading and writing abilities.

Finger-spelling involves using the hands to spell out English words and is used as part of both Auslan and Signed English. Each letter of the alphabet is indicated by using the fingers and palm of the hand in a specific pattern. Finger spelling is used for spelling names, places and words that don’t have a specific sign.

Reasons some families choose visual approaches

- If the child’s family are Deaf and communicate via Auslan or Signed English then they may raise their child to learn this language as their first or possibly only form of communication.
- They may want their child to develop the appropriate language to interact in the Deaf Community, and with others who use sign language.
AUDITORY APPROACHES

AUDITORY-VERBAL THERAPY
Auditory-Verbal Therapy focuses on developing spoken language through listening. It stresses the importance of consistent use of the best available hearing technology to maximise a child’s use of their hearing. Auditory-Verbal Therapy emphasises the use of hearing – rather than vision – to develop communication. Sign language is not used and children are discouraged from relying on other visual cues such as lip reading. The main goal is to develop spoken communication skills.

Auditory-Verbal therapy is offered by audiologists, speech pathologists or teachers of the deaf who have obtained a certificate in Auditory-Verbal Therapy. These professionals focus on training the family to become the main facilitators of speech and language development so that learning can occur in every day situations.

Reasons some families choose this approach
- Over 90% of children who have a hearing loss have parents who have normal hearing. Most of these parents use a spoken language as their first language and want this spoken language and its associated culture and traditions to be shared with their children as their first language.
- Auditory Verbal Therapy allows parents to support their child’s language development, in the language that they are most skilled in, in every day situations.
- Developing effective spoken language skills provides children with a hearing loss with opportunities to participate in the hearing community.

AUDITORY-ORAL APPROACH
The aim of the Auditory-Oral approach is similar to the Auditory-Verbal approach. They both stress the importance of consistent use of the best available hearing technology to maximise a child’s use of their hearing. Like the Auditory-Verbal approach, the auditory-oral approach aims to develop the child’s skills in communicating by spoken language. An auditory oral program may be offered by teachers of the deaf or speech pathologists who work with children who are deaf or hard of hearing. The teacher or therapist administers the program and provides home programs and ideas so the family can work on goals in the home environment.

Auditory-Oral approaches do not use sign language or finger spelling although natural gestures in everyday situations may be supported. Sometimes lip reading can be used to assist comprehension, but it is not a skill that is specifically taught.

Reasons some families choose this approach
- Parents may choose an Auditory-Oral approach so their child can develop speech and engage with the hearing community. Parents choosing the Auditory-Oral approach would have similar reasons for doing so as the parents who choose the Auditory-Verbal approach described above.

AUDITORY AND VISUAL APPROACHES

BILINGUAL-BICULTURAL
A bilingual-bicultural approach involves Auslan being used and taught as the child’s first language and English as their second language. Some children who use a bilingual-bicultural approach learn English solely for the purpose of developing reading and writing skills; other children will also work towards developing spoken English. The ability to use Auslan, together with knowledge of Deaf culture, enables participation in the Deaf community.

Reasons some families choose this approach
- Just as parents who use spoken English might hope to share their first language with their children, parents who are Deaf and identify with the Deaf Community are also likely to want their Deaf children to share their first language of Auslan. This approach also allows the development of English language skills for literacy and the ability to interact successfully with people who use spoken language.
- A small proportion of children gain little or no benefit from hearing technology. For these children, many parents will choose a Bilingual-Bicultural program so their child develops effective language skills using Auslan as well as English language literacy skills.
- The Bilingual-Bicultural approach will provide children with the opportunity to participate in the Deaf community.
- This approach gives people the capacity to communicate when spoken language skills are not adequate. For example, when communicating in noisy environments, windy weather, in the bath, or when swimming.

SPOKEN LANGUAGE IN COMBINATION WITH AUSLAN
Some families make the decision for their child to develop spoken language in combination with Auslan. Some of these families come from a hearing background and have spoken language as their first language, others come from a Deaf background and have Auslan as their first language. In contrast to a Bilingual-Bicultural approach, the aim may not necessarily be to develop Auslan as the child’s first language.

Reasons some families choose this approach
- They want their child to develop skills to interact effectively with the Deaf community as well as with the hearing community.
- They want their child to have the flexibility of language skills so the child can eventually make his or her own choice about interacting with hearing and Deaf people, rather than making a single choice on behalf of their child at a young age.
When a very young child is diagnosed with a hearing loss, it may not be clear whether they also have other needs that could influence whether spoken or sign language communication development is more likely to be successful. Encouraging both sign and spoken language skills when a child is very young takes advantage of the important early years for language development. Some, but not all, families may later decide to stop using one system or the other as their child’s communication develops.

Parents may wish to give their child diverse communication skills to communicate in a range of different situations. For example, having the ability to speak with hearing peers, but the ability to use signing in situations where listening can be very difficult even with hearing aids (e.g., in a noisy room, in windy weather) or impossible because hearing aids or cochlear implants can’t be used (e.g., in the bath or when swimming, when hearing aids or speech processors are faulty).

**ALL-INCLUSIVE COMMUNICATION SYSTEM**

Some children who have a hearing loss have other needs to be considered when choosing communication approaches. Their other needs may require combining one or more different methods to support the child’s communication.

An all-inclusive communication system follows a philosophy of combining a range of methods to support the communication development of a child who has a hearing loss. The idea is to design the program to fit with the child’s individual needs. For this reason, the communication strategy could use any combination of:

- hearing aids and cochlear implants,
- spoken language,
- sign (Makaton, Auslan, tactile signs for children who might be Deaf and Blind),
- visual aids (such as photographs, pictures, symbols or boardmaker),
- writing,
- gesture or
- technological communication devices.

**Reasons some families choose this approach**

- A child may have multiple needs and could have difficulty learning to use either spoken or signed language alone.
- An all inclusive communication system is flexible and can be altered as the child’s needs become more evident or change.
- As the child is encouraged to communicate using spoken language and visual support, some parents will use this all inclusive system to allow their child to discover the communication option that best suits him or her.

**Total Communication** encourages the development of spoken language in combination with Signed English. The aim would be for the child to develop skills in Signed English as well as spoken English skills. At present there are a number of changes occurring within Education Queensland and it is important to consult your local Education facility about what communication options are being offered.

**Cued Speech** is a visual communication system that uses eight hand shapes in four different placements near the face in combination with the mouth movements of speech to distinguish the different sounds of spoken language. Parents are expected to use the cues at all times when they are speaking. Children learn to speak through the use of the cues, lip-reading, and using the best available hearing technology. The primary goal of Cued Speech is to develop spoken language and the literacy skills necessary for integration into the hearing community. Cued Speech is not currently offered by any of the early intervention programs available to Queensland children. Its use across Australia is limited.

**Lip-reading** or **speech-reading** is the ability to read words from a speaker’s lip and face patterns. Because lip patterns differ from person to person, the art of lip-reading is as much a creative art as it is the art of watchfulness. It requires not only a very good understanding of English but also the ability to ‘read’ facial expressions for tone and mood. To get the most out of lip-reading, people also need to learn to anticipate or guess what is being said.

**WEIGHING UP THE ‘INS AND OUTS’ OF THESE APPROACHES**

Other parents and adults who are deaf (both those who are part of the Deaf community and those who choose not to be) or who have a hearing loss will prove to be an excellent source of information about the ‘ins and outs’ of various approaches. You can contact these people in several ways:

- Your Family Support Facilitator can organise for you to connect with other parents who have children who have a hearing loss as well as adults who are deaf or who have a hearing loss
- Contact details for parent support groups are listed at the end of this resource
- Deaf Services Queensland can assist you to meet adults who are active members of the Deaf community, and
- Each of the early intervention services can put you in touch with families who attend their services. Some of these families may know deaf adults who live independently of the Deaf community and who would be happy to share their experiences with you.

**References**