How We Can Make a Difference: Research and Successes in Early Intervention

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Thriving Together: Collaborating to Assure Bright Educational Opportunities for Deaf Children into the Future
Boston Children’s Hospital
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What Do Families Have in Common?

- Discovery of having a deaf child unexpected
- Impact of having a deaf child unknown
- Opportunities and potential unknown
- Education and communication unknown
- Resources unknown
- Struggles with communication and technology
- Without support—Experience stress

(Sass-Lehrer, 2008)

First deaf person they met was…
Early Intervention Research

- 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)
- Levels of family involvement heavily correlates with academic success (Moeller, 2000)
- High expectations are a predictor for academic success (Bodner-Johnson, 1988)
- Effective and appropriate early intervention program is an asset to families (Benedict, 2003)
Visual Language Research

• Visual Language reduces risk of language deprivation and presents no risk to acquisition to 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
Cochlear Implants: Why Sign?

- DOD outperformed DOH in cochlear implantation performance (Hassanzadeh, 2012)

- Sign Language as foundation and a predictor for speech development and ability (Yoshinaga-Itano, 2003; 2006)

- CIs are a physical device that can fail (Nussbaum, 2008)

- ASL is a language; CI is a communicative tool
What Children Need

• Full access to language
• Supportive environments
• Strong family involvement
• Language models
• High expectations
• Role models
• Can-do attitude
Successes in Early Intervention
Messages Sent to Families

Communication options
Hearing loss
Intervention
Failed hearing test
Diagnosis
Fix the ear
Deafness
Hearing impaired
Vocationally limited
Grief process
Disability (cannot)
Technology

Communication opportunities
Hearing level, status or differences
Involvement or Identification
Further testing needed
Identification
Modify or coping
Deaf beings or being deaf
Deaf or hard of hearing
Unlimited opportunities
Journey
Cultural (adapt)
Audio, tactile, and visual technology
Successes Based on Research

- Switch from Centers for Disease Control and Prevention to U.S. Department of Education
- Advisory Councils
- Uniformity of information packets
- Audiologists, SLPs and ASL therapists readily and equally available
- Audiologists, SLPs and ASL therapists covered by insurance
- ASHA-certified audiology training programs having ASL classes
- JCIH document as a model
Successes Based on Research

- Parent/family involvement in EHDI system
- Parent/Communication system network
  - Meet other families
- Guidance from Deaf/hard of hearing adults
- Fidelity (quality) of intervention
- Auditory Checklist
- Visual Strategies Checklist

www.jcih.org, April 2, 2013
• . . . To achieve informed decision-making, families should have access to professional, educational, and consumer organizations; and they should have opportunities to interact with adults and children who are deaf and hard of hearing . . .

• . . . Early interventionists should ensure access to peer and language models. Peer models might include families with normal hearing children as well as children or adults who are deaf and hard of hearing as appropriate to the needs of the infant with hearing loss . . .

• . . . Professional education programs in universities should also introduce training in . . . deaf culture.
READING RESEARCH & DEAF CHILDREN

JUNE 2011
THE IMPLICATIONS OF BIMODAL BILINGUAL APPROACHES FOR CHILDREN WITH COCHLEAR IMPLANTS

JUNE 2012

Key Findings:

- For deaf children with cochlear implants, a visual language such as American Sign Language (ASL) can provide advantages for the child's linguistic, communicative, cognitive, academic, literacy, and psychosocial development.
- Studies in neuroscience confirm that the brain has the ability to learn both visual and spoken languages. Furthermore, learning both a visual and a spoken language does not harm the development of either language.
- The development of early competence in a visual language can effectively facilitate a child's spoken language development.
- A bimodal bilingual language and communication approach—which addresses acquisition and use of both a visual and a spoken language—has the potential to foster early language through the child's vision while also stimulating the child's audition through a cochlear implant.
- Interaction with members of the Deaf community can be beneficial for the deaf child or adolescent's identity formation and social-emotional development.
- With systematic individualized planning, a rich spoken language environment can be provided within a bimodal bilingual setting.

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VISUAL LANGUAGE & VISUAL LEARNING
RESEARCH BRIEF:

ASL/ENGLISH BILINGUAL EDUCATION:
MODELS, METHODOLOGIES, AND STRATEGIES

JUNE 2012

Photo by the Laurent Clerc National Deaf
Yes, We Can Make a Difference!

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

- Ryunosute Satoro
Congratulations on your bicentennial!

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