

LANGUAGE **FIRST**

# PARENT GUIDE



## Language First Parent Guide

a road map for parents of Deaf and hard of hearing (DHH) children

This guide is intended to help hearing parents of DHH children navigate their journey and ensure that they are providing their child with the most evidence-based care. This document is packed with resources and links to help parents best be able to support their DHH child.

# My child is Deaf...What now?

First of all, congratulations! Your baby has passed the Deaf test! This guide is meant to help you navigate your journey by providing you with the most current, evidence-based information about your Deaf child. You will find links throughout this document to help you find programs, professionals, resources, books, support, and anything else you might need to best support your Deaf child as they grow. If you are interested in taking a free course led by a Deaf professional to learn more about the basics of raising a Deaf child, click the image below.

**Please note:** Throughout this guide, we use the word “Deaf” as an inclusive term for all Deaf, hard of hearing, DeafBlind, DeafDisabled, and late-deafened children.

[Click to find deaf mentor programs by state.](#)

[Click for a list of DHH Commissions by state.](#)



We know it can be difficult to find professionals in your state who support a bilingual ASL-English approach and who know about local ASL resources and programming. Many medical and early intervention professionals are trained in a model that prioritizes oral language and listening devices. This is why we maintain a list of pro-ASL professionals organized by state. Professionals are listed by state with their name, credentials, and email addresses. They have agreed to help parents and caregivers get in touch with programs or resources in their state.

**Note:** Professionals are not required to provide any evaluation, treatment, or other direct services; they are simply a source for you to find local programming and support for your child.

[Click here for the list of pro-ASL professionals by state](#)



Click on the icon to join our parent Facebook group

# *your right to* **INFORMATION**

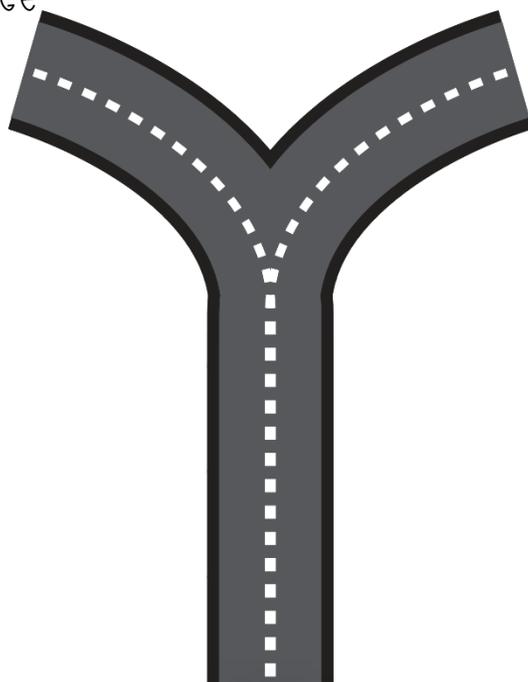


If you have any questions about the right to information section, click the icon below to email us:



AMERICAN SIGN LANGUAGE  
DEAF MENTOR  
BILINGUALISM

LISTENING THERAPY  
HEARING AIDS  
COCHLEAR IMPLANTS



It may feel like you have to choose one road to take right now. **But you don't.** These approaches are not mutually exclusive. You can give your child everything and see what works best for them. When a Deaf baby is born, we have no way of knowing if listening devices and oral language will work for them. Therefore, we must give them both oral language **and** signed language to ensure that they acquire **at least one language.**

“

The argument is no longer “spoken language or sign language” but “spoken language and signed language” for deaf individuals pursuing spoken language” (Secora & Smith, 2021, p. 400).

LANGUAGE FIRST

either/or  
both

LANGUAGE FIRST

# LANGUAGE OPPORTUNITIES

Language	Tools	Importance	Considerations
American Sign Language (ASL) or other signed languages	<ul style="list-style-type: none"> <li>✓ Deaf mentors</li> <li>✓ Bilingual strategies</li> <li>✓ ASL classes</li> </ul>	<ul style="list-style-type: none"> <li>✓ Most accessible language for Deaf children</li> <li>✓ Allows for effortless language acquisition</li> <li>✓ Helps build Deaf identity</li> <li>✓ Supports socioemotional growth and well-being</li> </ul>	<ul style="list-style-type: none"> <li>✓ Find native-signing language models</li> <li>✓ Help parents learn as much ASL as they can</li> </ul>
English or other oral languages	<ul style="list-style-type: none"> <li>✓ Hearing aids</li> <li>✓ Cochlear implants</li> <li>✓ FM system</li> </ul>	<ul style="list-style-type: none"> <li>✓ Most often the parents' native language</li> <li>✓ Language spoken by the greater population within the region/country</li> </ul>	<ul style="list-style-type: none"> <li>✓ Not fully accessible to Deaf children, despite hearing aids and cochlear implants</li> <li>✓ What kind of access does the child have?</li> </ul>

We use the term “language opportunities” instead of “language options” because the word **options** implies that you must choose just one.

You may notice that communication modes are not listed in this table. This is because Deaf children need to be exposed to **naturally occurring languages**. For more on communication modes and why the term may be confusing, check out the next page.

# COMMUNICATION MODES

**NOTE:** American Sign Language (ASL) is not included on this list because it is a complete, naturally-occurring language with the same linguistic properties as oral languages. For more information on the term *communication mode* and how it can sometimes complicate things, we encourage you to read the work of [Hall and Dills \(2020\)](#).

TC

Total Communication\*

- ✓ A method of using all means of communication (gesture, fingerspelling, body language, etc.)
- ✓ Originally intended to include speech, auditory training, print, and ASL

CS

Cued Speech\*

- ✓ Visual cues that represent phonemes in English
- ✓ Used to differentiate phonemes that look similar on the face

SimCom

Simultaneous Communication\*

- ✓ Simultaneous use of a signed and spoken language
- ✓ Difficult to produce each language in robust form; features of each tend to be dropped or lost

Sign  
Systems

Signing Exact English\*  
Seeing Essential English\*  
Manually Coded English\*

- ✓ The use of signs to represent English words, morphology, and syntax in the air
- ✓ Follow the grammar rules of English but may borrow signs from ASL

\*not a naturally occurring language

Copyright © 2022 Language First

# Quick Facts

Remember, the decreased hearing levels themselves do not constitute an emergency or cause any difficulty with language acquisition. It is **inaccessible language** that is the concern.

Being able to hear is **not a prerequisite** for language acquisition. Remember, language can enter the brain through the eyes, the ears, or the skin (via tactile signing). It can exit the brain via the hands or the mouth.

When counting your baby's total vocabulary, make sure to count signs as well. **Signs are words** and count towards the total repertoire. If your baby knows the oral and the signed word for something, count it twice!

## Handouts

Be sure to check out all of the [free handouts](#) we offer for parents on our website.



Language is not an ear thing  
or a mouth thing. It's a  
*brain thing*



LANGUAGE FIRST

~~Signs don't count as words~~

~~A sign only counts as a word if the  
parents want the child to learn a  
signed language~~

~~A sign only counts as a word if the child is deaf~~

~~A sign only counts as a word if the parents are deaf~~

~~A sign only counts as a word if the child also says  
the English word~~

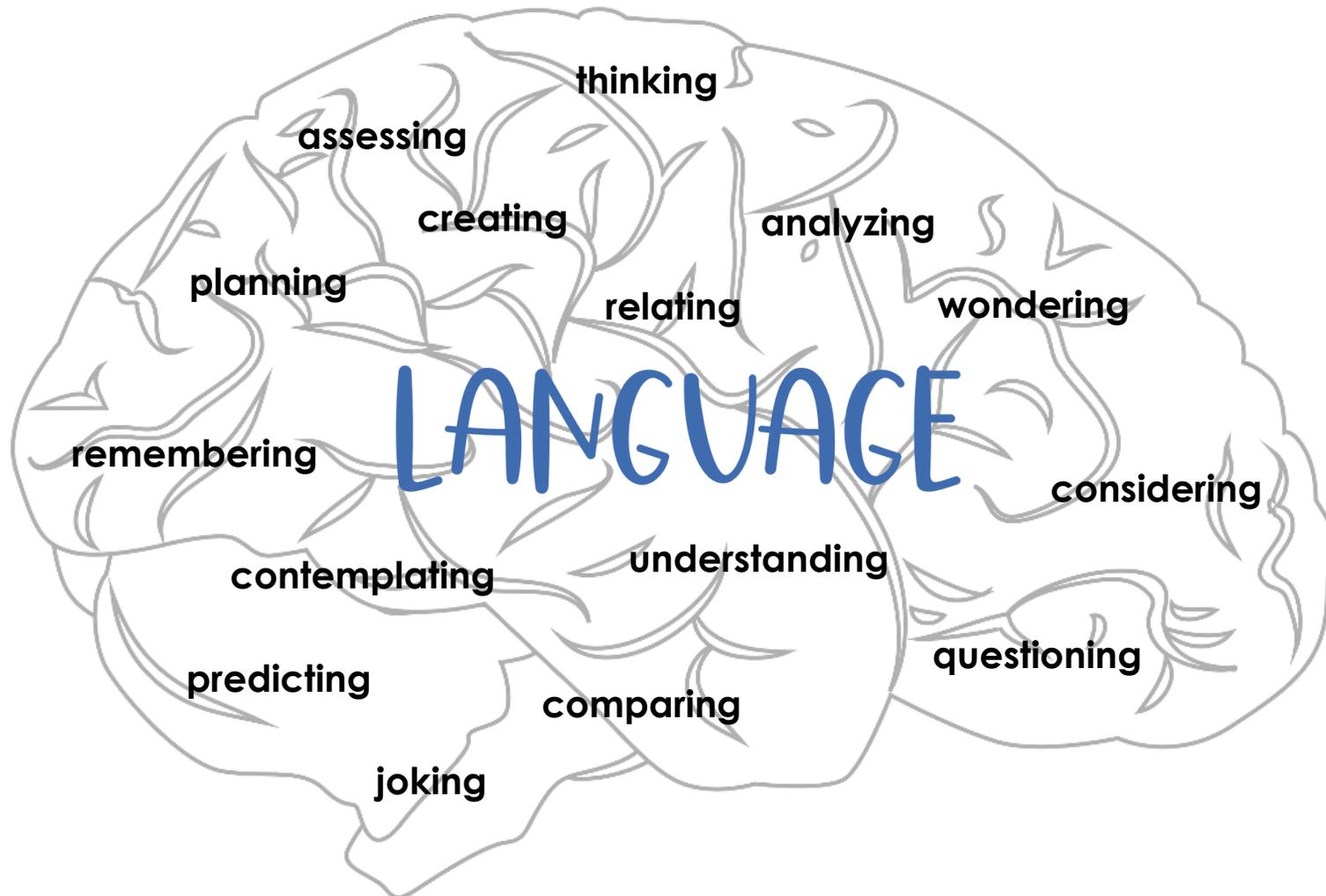


**SIGNS ARE WORDS.**



LANGUAGE FIRST

# What is language?



Language is so much more than just listening and speaking.

# Your Right to Information

As the parent, you have the right to all information about your Deaf child's language development.

This means that information presented to you should not be **misleading or omitted**.

**i·at·ro·gen·ic** (*adj*)

relating to illness caused by medical examination or treatment

Remember, even with listening devices like hearing aids and cochlear implants, Deaf children will **still mishear and miss information**. Watch [this video](#) to get an idea of what that might be like.

## Article Suggestions

[Making Decisions Without all the Information](#)

“

When based on professional advice not to use sign language in order to “force” reliance on sound, language deprivation can be considered iatrogenic.

- Dr. Sanjay Gulati

LANGUAGE FIRST

“

Because of the information they were given, [parents] had very high expectations of the usefulness of the hearing aids, but seemed disappointed that their hopes were not realized” (Eleweke & Rodda, 2000, p. 379).

LANGUAGE FIRST

# PROVIDER CHECKLIST FOR PARENTS OF DEAF CHILDREN

Use this resource to help yourself navigate your desires and expectations for your child's speech-language pathologist. In the boxes under the descriptors, write an **I** if it's ideal, an **A** if it's acceptable, and a **U** if it's unacceptable. You can mark multiple boxes under a single criterion.

## PHILOSOPHY

My child's speech-language pathologist:

does not accept or support any use of ASL

accepts our use of ASL but does not use it with my child

accepts our use of ASL and uses it with my child

A horizontal blue double-headed arrow spans the width of the section. Below the arrow, there are five empty square boxes, each centered under one of the three text labels above. The boxes are intended for parents to mark their responses with 'I', 'A', or 'U'.

## MINDSET

My child's speech-language pathologist:

believes that deaf children do not need to be fixed

appears to have neutral beliefs about deaf children

believes that deaf children should learn to hear and speak

A horizontal blue double-headed arrow spans the width of the section. Below the arrow, there are five empty square boxes, each centered under one of the three text labels above. The boxes are intended for parents to mark their responses with 'I', 'A', or 'U'.

My child's speech-language pathologist:

believes that a deaf child doesn't need to speak/listen

believes that speaking/listening is one option

believes that a deaf child must learn to speak/listen



### TREATMENT FOCUS

My child's speech-language pathologist:

focuses on global cognitive-linguistic development

focuses on all skills equally

focuses on listening and speech



My child's speech-language pathologist:

focuses on language in any modality

focuses equally on spoken and signed language

focuses solely on spoken language



# language **ACQUISITION**



If you have any questions about the language acquisition section, click the icon below to email us:



# A Quick Guide To:

## AMERICAN SIGN LANGUAGE

The most important thing to remember about American Sign Language is that it is a full language. It has grammar, syntax, semantics, morphology, and phonology. It differs from spoken language only in that it uses a visual modality and does not have a written form.

foundation

A deaf child that knows ASL has a foundation of language on which to build other skills. This includes speaking and listening skills, as well as reading and writing skills.

literacy

A deaf child that knows ASL is able to learn to read much faster and with more ease. This is because early access to a language allows the child to make connections to print.

options

A deaf child that knows ASL has the option to become bilingual. With the foundational knowledge of one language, it is much easier to learn a second. Knowing two languages provides options.

# ASL Developmental Milestones

## Development OF ASL



**3-12**

*mo.*

### AT 3-12 MONTHS:

- Begins to notice signing
- Imitates facial expressions
- Babbles with hands
- Points to people, objects, and places
- First sign at 10-12 months

**12-18**

*mo.*

### AT 12-18 MONTHS:

- Uses at least ten signs
- Begins to use pointing for pronouns
- Acquires new signs but does not mark with inflections

**18-24**

*mo.*

### AT 18-24 MONTHS:

- Combines 2-3 signs, including pointing
- Signs reflect basic handshapes with simple movements
- Begins to use non-manual markers (i.e. facial grammar)

**2-3**

*years*

### AT 2-3 YEARS:

- Begins to use classifiers to represent objects
- Sign order shows semantic relations
- Begins to use non-manual markers for yes/no and WH- questions
- Demonstrates negation with headshake
- Begins to use possessive and plural pronouns

**3-4**

*years*

### AT 3-4 YEARS:

- Begins to distinguish between noun/verb pairs
- Uses classifiers to show objects and their movement
- Begins to modify verb signs to show manner
- Tells stories through the use of objects or role-playing

**4-5**

*years*

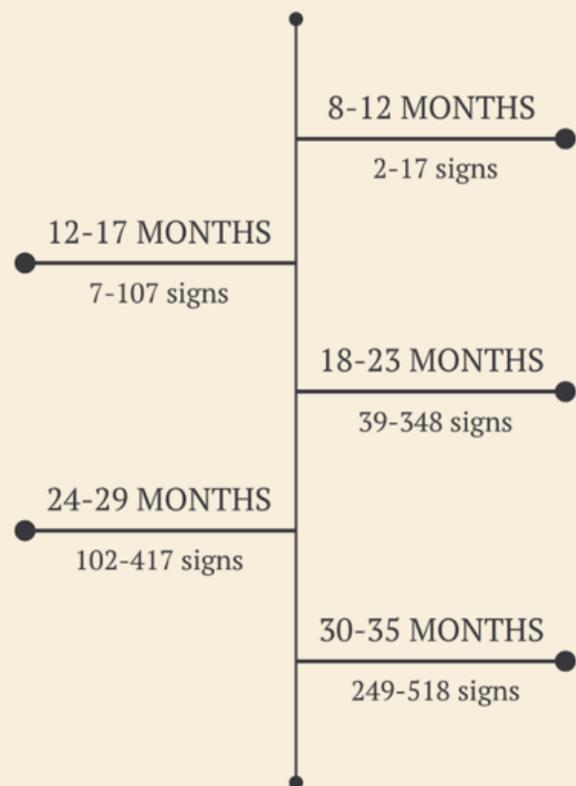
### AT 4-5 YEARS:

- More complex handshapes and movement used accurately
- Begins to use noun modification
- Simple sentences uses, but complex emerging
- Begins to use space to establish location for people

Source: California School for the Deaf - Fremont, Early Childhood Education Department

[www.language1st.org](http://www.language1st.org)

## ASL VOCABULARY DEVELOPMENT



(ANDERSON & REILLY, 2002)

[www.language1st.org](http://www.language1st.org)

# Handshape Development Checklist

(Braem, 1990; Simms et al., 2013)

1 – 2 years					
A	S	M	A	S	M
					
C	S	A	1	5	
2 – 3 years					
A	S	M	A	S	M
					
B	F	O			
3 – 4 years					
A	S	M	A	S	M
					
W	D	P	3	V	H
3;6 – 4 years					
A	S	M	A	S	M
					
X	R	T	8		

**NOTE:** This is not a comprehensive list of handshapes in American Sign Language. If you notice your child having difficulty with a handshape that is not listed here, we recommend consulting with a professional. This checklist is one part of a larger resource, the [Motor Skill Resource – 2<sup>nd</sup> Edition](#).

# myths and **MISCONCEPTIONS**



If you have any questions about the myths and misconceptions section, click the icon below to email us:



# Common Myths and Misconceptions

Many parents of Deaf children have expressed that they were given misinformation by the professionals they met along their journey. And of course, they believed them! It wasn't until later, as they learned more about language acquisition, that they realized that they were misinformed. Parents are not expected to be experts in language development in Deaf children. You deserve to be provided with the most accurate information. This means that not only is the information provided to you evidence-based and factual, but that there is no omission of additional information that may be vital for you to know. You may have been told something by a medical professional and had no reason to question it. Here are some common examples of misconceptions or misinformation parents are told:

- ✚ A Deaf child only needs ASL if they have profound hearing levels.
- ✚ If a Deaf child learns ASL, they will come to rely on it or use it as a crutch.
- ✚ In order for a Deaf child to learn to speak oral English, they have to practice listening.
- ✚ A Deaf child with hearing aids or cochlear implants can hear like a typically hearing child.
- ✚ A Deaf child with good speech must have good language skills.

The next four pages break down some of the most common myths and misconceptions and provide an explanation as to why they are not true.

Remember, every child deserves a first language that they can fully access. There are no hearing levels or speech skills that indicate a Deaf child doesn't "need" ASL. Even a child with mild hearing levels or beautiful speech production can greatly benefit from a signed language for a variety of reasons.



A Deaf child's articulation is not an indicator of their mastery of spoken language.



LANGUAGE FIRST



A child is not a "candidate" for ASL any more than a child is a "candidate" for German. There is no candidacy for language acquisition.



LANGUAGE FIRST

# Myth: You have to be fluent in ASL

“Hearing parents who learn to sign **can and do influence** their children’s language skills and the development of their higher level language abilities” (Henner et al., 2016, p. 12).

A family’s openness to bilingualism conveys their **acceptance of deafness**...and the language of the deaf community. This communicates to deaf children that their families accept and embrace them (Wilkinson & Morford, 2020).

“Children who are deaf with hearing parents can predictably and consistently develop **age-level vocabularies** at rates similar to native signers” (Caselli et al., 2021, p. 229).

## Article Suggestions

[Five Tips for Overwhelmed Parents of Deaf Children](#)

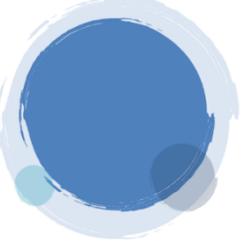


You do not have to be fluent in ASL for your child to become fluent.



LANGUAGE FIRST

“



The idea that families are already struggling and can’t afford to learn a new language for their child is problematic. There is research to show that how fluent parents sign doesn’t matter as much as how well they learn to communicate with their child and support their child’s needs”

- Marlene Medina Nero, a trilingual speech-language pathologist



LANGUAGE FIRST

# Myth: ASL makes it hard to learn to read

Deaf children with good phonological awareness in a signed language are better at reading written words from an oral language (Holmer et al., 2016).

Positive transfer from a signed language as a first language to a second language will aid with the task of learning a new language through print (Chen Pichler et al., 2018).

“Skilled reading was predicted by a combination of print exposure and sign language proficiency” (Chamberlain & Mayberry, 2008, p. 382).

Phonological awareness in a signed language can help with written word recognition and reading comprehension (McQuarrie & Abbott, 2013).

MYTH  
*busters*

**MYTH:** D/HH children acquiring ASL will have trouble learning to read because ASL doesn't have a written form.

**Busted!** Knowing any language helps children learn to read, even if it is not *the* language captured in print (Goldin-Meadow & Mayberry, 2001).

LANGUAGE FIRST

Reading is a  
*language-based* task.

LANGUAGE FIRST

# Myth: Listening devices “correct” hearing

## [This video](#)

demonstrates how even with listening devices on, Deaf children may mishear or misperceive oral language.

“

Hearing sound is not the same as hearing it *clearly*. Hearing devices do not provide perfect clarity of sound.”

- Dr. Sarah Sparks, a deaf audiologist

Cochlear implant “stars” are visible, but they are few and far between (Humphries et al., 2012).

## Article Suggestions

[The Case for Sign Language](#)

What people *think* affects Deaf kids’ spoken language outcomes after cochlear implantation:

Child effort

Parent effort

Speech and listening therapy

What *actually* affects Deaf kids’ spoken language outcomes after cochlear implantation:

Prior language skills

Age of implantation

Quality of language input

Quality of auditory access

Parent education level

Parent socioeconomic status

Exposure to a signed language

Parent-child communication

Parent-child interaction

Parent involvement

Child’s neurobiology

Brain-device interface

LANGUAGE FIRST

We saw this in a presentation recently: “If a student’s amplification is functioning at its maximum potential and a hearing loss persists...”

Let’s get one thing straight: amplification **does not fix** hearing levels. A DHH child **still has reduced hearing levels**, even when their amplification is functioning “at its maximum potential.” A DHH child **will still mishear and misperceive** lots of oral language with their amplification on and functioning.

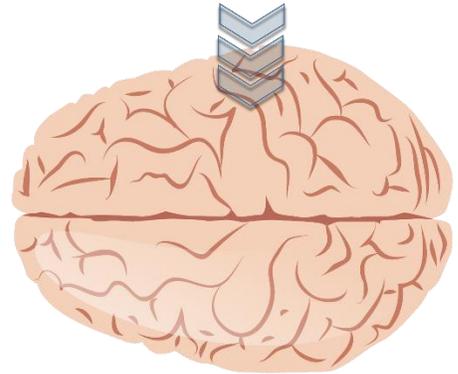
***Amplification does not fix hearing levels.***

LANGUAGE FIRST

# FULL ACCESS FOR LANGUAGE

What does it mean when we say “full access” when talking about Deaf children?

Access means entry into the brain.



If any of these are true, your child does **NOT** have full access to oral language:

- ✚ Your child can hear *most* sounds *most* of the time
- ✚ Your child struggles to hear in background noise
- ✚ Your child must take hearing equipment off in the water
- ✚ Your child struggles to follow conversation at the dinner table
- ✚ Your child isn't able to wear hearing equipment at any point during the day

Access does **not** refer to the *quality* of language input. In other words, a deaf child would still have full access to the signing of someone who is not fluent in ASL. Similarly, a deaf child may not have full access to oral English, even if the person is using rich language structures.

## REMEMBER:

When there is a language stimulus, the child must be able to obtain **all parts** of that stimulus.

## Language accessibility

Naturally occurring signed languages (ASL, BSL) are the only languages that are 100% accessible to Deaf children.

## Cumulative effect

Missing small bits of language here and there adds up, and it has a cumulative effect. It can permanently affect brain development.

For example, if the teacher says, “Get your books” and the child misses the /k/ and the /s/ in books, that child does not have **full access**.

# DECONSTRUCTING DANGEROUS FABRICATIONS

Parents are typically educated on approaches that focus solely on listening and spoken language without the use of a signed language. These are based on an age-old and non-evidenced-based premise of keeping the auditory pathway "pure." Despite the fact that we now know this not to be true, the fabrications that were created from that concept persist today. Unfortunately, these fabrications are dangerous in that they have the potential to cause permanent neurological deficits in deaf children resulting in lifelong difficulties in language, cognition, and academics.

**Fabrication:** Learning sign language interferes with spoken language development.

**Truth:** Learning a signed language does not negatively impact auditory development whatsoever. In fact, it can actually aid in spoken language development.

**Fabrication:** Missing out on a little language input here and there won't hurt.

**Truth:** Intermittently missing out of small bits of language input has a cumulative effect which significantly impacts a child's ability to attain language fluency.

**Fabrication:** If your child doesn't have two amplification devices, that's fine.

**Truth:** The disadvantages of listening with only one ear instead of two are bountiful and this significantly impacts a child's ability to learn spoken language.

**Fabrication:** Anyone with who has enough hearing loss is a cochlear implant candidate.

**Truth:** The cochlear implant involves direct interaction with the human brain and its success is based on language abilities. Hearing loss itself is a tiny portion of what makes someone an implant candidate.

**Fabrication:** Success is 10% hardware (device) and 90% software (rehabilitation).

**Truth:** Success is 90% hardware, brain function, and access to language. Rehabilitation plays a futile role when a child isn't able to access language through auditory-only means.

**Fabrication:** A miniscule percent of the population knows sign language so it's useless to learn.

**Truth:** American Sign Language (ASL) is the fourth most taught language in the United States. It's the natural language of the Deaf community and over half a million people use it.

**Fabrication:** If wearing amplification is required instead of optional, children will wear it.

**Truth:** Making something a requirement doesn't make children suddenly do it. Children reject their implants for a variety of reasons, none of which include a parent not "requiring" it.

# *the Deaf* **PERSPECTIVE**



If you have any questions about the Deaf perspective section, click the icon below to email us:



# Listening to Deaf People

One of the most important suggestions we can make to new parents of Deaf children is to listen to the lived experiences of Deaf adults. Remember, they used to be Deaf children! Deaf adults often have important insight that can help us in better understanding our Deaf children.

## LEARNING TO LISTEN to Deaf people

"I was raised oralist and now ASL is like a balm to my soul."

- Diana, a Deaf adult



LANGUAGE FIRST

## LEARNING TO LISTEN to Deaf people

"I grew up with cochlear implants in a hearing community and no Deaf interaction at all. I didn't know my identity."

- Jordan, a Deaf adult



LANGUAGE FIRST

## When and Why Parents Learn Sign Language

Click on the picture below to watch the presentation by Dr. Nate Dutra.

### The Gift of Language



# Listening to Deaf People

My hearing mum learnt a sign language with I was 4½. It was her third language and my first accessible language. She still is not as fluent as me in sign language and English today, but she made sure I had deaf adults and peers around me when growing up. That made a huge difference. **It's ok not to be perfect with signing** but I love that my mum signs for me. I am grateful that she learnt sign language to make my life a bit less stressful.

- Erika, a Deaf adult

”

“

Be open-minded and flexible in approach. **Use every possible resource** and never stop at 'good enough.'

- Leah, a Deaf adult

Offer ALL resources to your child from the very beginning and then **allow them to choose what works best for them**, not what works best or is more convenient for everyone else.

- Amber, a Deaf adult

”

“

I have moderately severe loss and wear hearing aids. Only the last few years of my life have I started “unlearning” all the faking and overcompensating I've been doing the entire time in order to appear to be keeping up with the hearing world, and recognizing how incredibly tiring that's been for me. **I wish someone had taught me ASL as a child** and modeled that Deaf culture is nothing to be ashamed of.

- Beth, a hard of hearing adult

I am an oral success. I progressed at grade level and eventually got a Ph.D. from a hearing university. But in the mainstream, I always felt alone. I was bullied, shunned, and quietly ignored. This, you call a success?

- Donald, a Deaf adult

”

“

When I finally learned ASL I was shocked. I didn't know communicating could be this easy. I was like, wait, is this how hearing people hear? **With no effort?**

- Natalie, a Deaf adult

# *bimodal* **BILINGUALISM**



If you have any questions about the bilingualism section, click the icon below to email us:



# Why ASL-English Bilingualism?

Research continues to show that there are any benefits to bilingualism. However, for Deaf children, ASL-English bilingualism is important for many reasons. First, providing a signed language like ASL can help with language acquisition, as there are many times when a Deaf child will struggle to hear oral language. Also, it helps foster the child's Deaf identity and social-emotional development, and empowers them with multiple language choices. As Wilkinson and Morford (2020) state, "Once language fluency is established in two or more languages, and social networks are robust, deaf individuals can choose for themselves which languages to use in which contexts. Bilingualism is empowering to deaf individuals" (p. 5).

### ASL/English Bilingual Puzzle Piece

ASL	ENGLISH
<ul style="list-style-type: none"><li>✓ Most accessible language for Deaf children</li><li>✓ Allows for effortless language learning</li><li>✓ Provides a language foundation for brain development</li><li>✓ Help builds identity and socioemotional well being</li></ul>	<ul style="list-style-type: none"><li>✓ Often parent's native language</li><li>✓ The language of the greater population and country</li><li>✓ The language of print and print literacy</li><li>✓ Language of focus in the pervasive medical model</li></ul>

LANGUAGE FIRST

## A Hearing Family's Approach to ASL-English Bilingualism

Click on the picture below to watch Christina Pacala's presentation.

### Raising Riley: A Hearing Family's Approach to ASL-English Bilingualism for their Deaf Child

Christina & Andrew Pax are hearing parents to their Deaf daughter, Riley. Together, the family is learning American Sign Language (ASL) to communicate with Riley in her native language.

Enroll for free



# A Quick Guide To:

## BILINGUALISM

The most important thing to remember about bilingualism is that it has more benefits than drawbacks. Bilingualism has been shown to improve cognitive function and therefore delay the onset of cognitive disease such as dementia. This includes bilingualism in both spoken and signed languages.

### advantages

Bilingualism has been linked to improved problem-solving skills, good listening skills, and increased interpersonal skills. Bilingual children have an easier time learning new words and concepts.

### myths

Learning one language at the same time as another will NOT hinder the development of either language. A child does NOT need to be fluent in one language prior to learning a second.

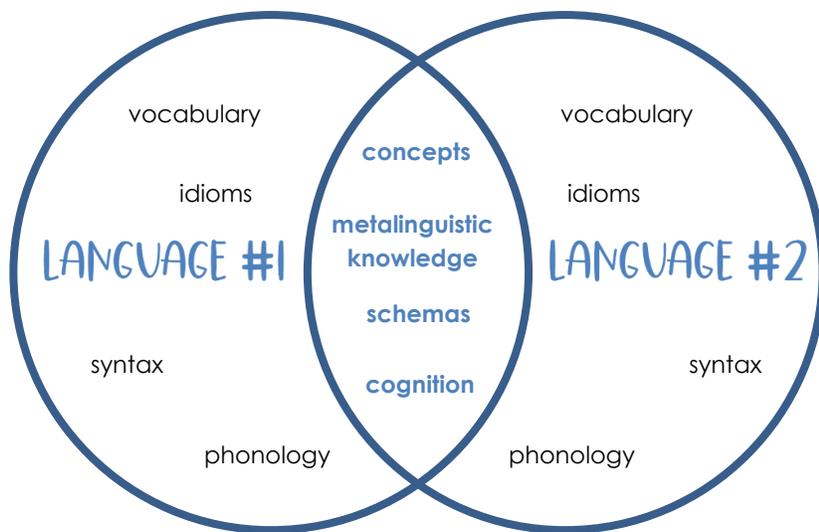
### types

Simultaneous bilingualism is when a child is exposed to two languages at the same time, from birth. Sequential bilingualism is when a child is exposed to a second language after the age of 3.

# Common Underlying Proficiency (CUP)

Think of bilingualism like you do handedness. It doesn't matter which hand (e.g., left or right) you learned to do things in, as long as you can do them. Similarly, it doesn't really matter what language you learned concepts in, as long as you learned them.

Cummins (1980) suggested that development in any language contributes to overall linguistic development, regardless of the language in which it occurs. Experiences in one language or another language promote proficiency in both languages. He called this Common Underlying Proficiency (CUP).



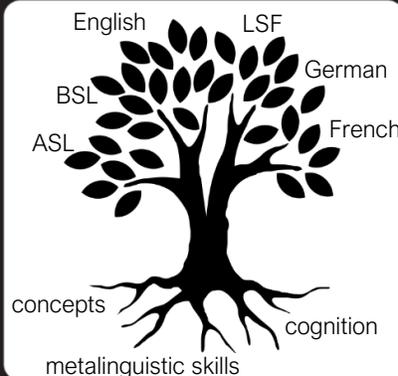
Although the specific vocabulary or sentence structure may differ from language to language, the concepts behind them remain the same. For example, if you already know what a noun and a verb are in your language, you might just have to learn how they are ordered in a sentence in another language. Or, if you already have the concept of a *platypus* and understand what it is, you just have to learn what the word is in another language.

With bilingualism, there are two linguistic channels that feed a common language center.

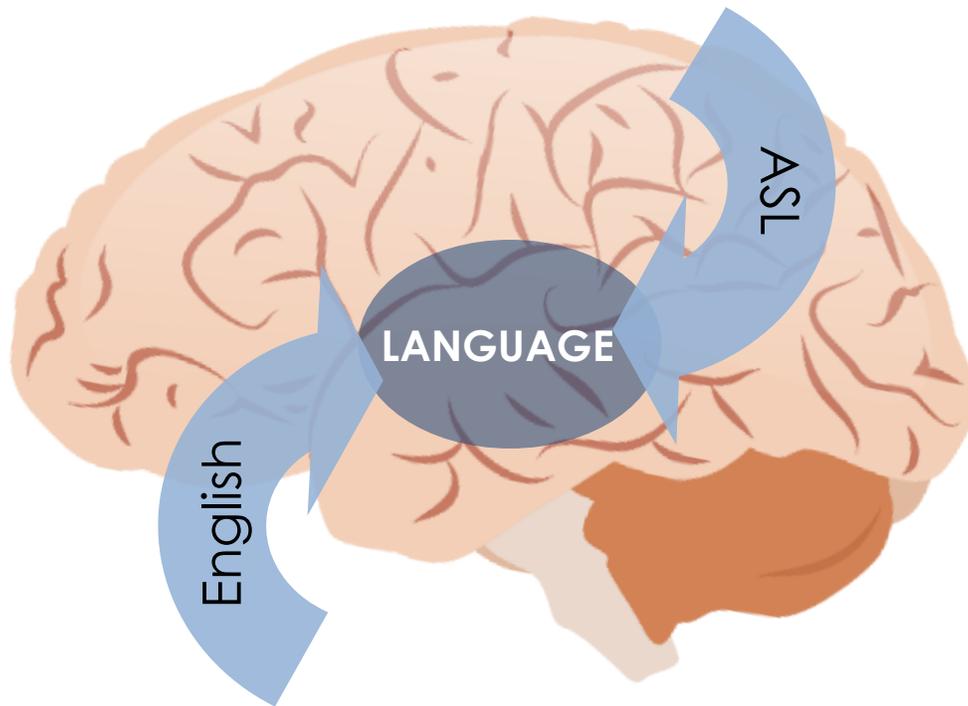
Gutierrez-Clellen (1999) asserts that:

- ✚ The underlying cognitive processes responsible for language processing and language acquisition are similar across languages
- ✚ Correlations between L1 and L2 skills would suggest an underlying learning processes applied to both languages
- ✚ Learning in one language involves related processes in the other language **for both typical and atypical learners**

Implanted children who sign from birth perform comparable to their hearing peers on language testing (Davidson et al., 2014).



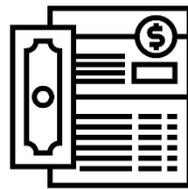
# Common Underlying Proficiency (CUP)



Think about an infant's brain like a bank account.



Language input is like depositing money into their account.



It doesn't matter if you deposit the money via check (signed language) or wire transfer (oral language). It all gets deposited to the same account and **adds to the total value.**

But in Deaf children, the wire transfer (oral language) doesn't always deposit all of the money into their account. Sometimes only part of the money is deposited. **Sometimes, very little of it is deposited.**

Instead of focusing all your attention on the wire transfer, which continues to not work properly, **you could just deposit the money via check (signed language).**

The bank account doesn't care how the money is deposited. **If one method isn't working reliably, use another method.** Just get the money (language) into that bank account (brain).

# Learning American Sign Language

Language First is **committed to helping parents learn ASL**. We choose three families to receive five free online ASL sessions every quarter. You can apply and re-apply as many times as you would like. [Apply here](#).

**ASL at Home** is a curriculum created by a deaf linguist and an ASL-fluent speech-language pathologist. It offers ASL lessons that are functional for your home routine, and it is free for parents! Find out more at <https://aslathome.org/>.

We also maintain a **list of resources** for learning ASL. One list contains resources intended for parents to learn ASL and one list is of resources that were made for children. Find them at <https://language1st.org/learn-asl>.

## Article Suggestions

[Seven Reasons Why Using Sign Language Helps Families of Deaf Children](#)

ASL Nook has some great videos to help you and your child learn ASL! Click the image below to check out their YouTube channel.



California School for the Deaf has lots of videos of children's books signed in ASL. Click the image below to check out their channel.

## Stories in American Sign Language & English



# From the Mouths of Parents

My son was identified as profoundly deaf at birth and we started ASL immediately. By the time he received his cochlear implants at 7 months, he was already signing TREE, CAT, MOMMY, DADDY, MILK, and understanding much, much more. Now, at 15 months, **his language is blooming, both ASL and English.** My family is now bilingual and my son is happy, confident, and gloriously expressive.

- Will, father of a Deaf child

”

“

There is no difference between hearing my 3-year-old speak “mom” and seeing my 8-year-old sign MOM. The love resonates the same.

- Amanda, mother of a Deaf child

He uses cochlear implants and 5 years in, I’m realizing the **huge amount of misinformation we were given early in the process,** and the huge mistake we made not picking total communication as his speech therapy model.

- Laura, mother of a Deaf child

”

“

As soon as we learned our baby girl had hearing loss, I said, “Welp, I guess we learn sign.” As a family, we started working like mad to learn ASL. We’re so grateful we did. She never loved her hearing aids. At about 3 she began refusing to wear them. I regularly look at my spunky girl and wonder who she would be without language. I think my sassy, smart little girl would be angry, frustrated, and sad. **Without ASL, she wouldn’t be her.**

- Karli, mother of a Deaf child

When we learned ASL, my son instantly became a different kid. He was so happy, confidence, and social once he was able to communicate. **Turns out he can talk, he just doesn’t need to use his voice.**

- Kristy, mother of a Deaf child

”

“

When my husband and I started learning ASL, his first sentence was, “I am a proud father of a deaf daughter.”

- Karina, mother of a Deaf child

# For Hearing Parents, By Hearing Parents

Language First presents

## PARENTS' TOP FIVE

Advice From Parents of Deaf Kids

### DEAF ADULTS ARE IMPORTANT

#### Find Deaf role models

Your child benefits from having Deaf role models, and you will have a great source of information on Deaf kids. After all, they've been one!

### SIGN ALL THE TIME

#### Provide incidental language

Sign even when you are not talking directly to your Deaf child, even when you don't know every word or concept. Build the habit and give your child as much access to incidental language as possible!

### FIND SUPPORTIVE PEOPLE

#### Build your IEP/IFSP team

Find the people who will support your choices and be direct and upfront in vetting them for your team. Your time is limited and you will not have the capacity to constantly defend your decisions.

### DISCOVER DEAF CULTURE

#### Deaf culture is rich

Immerse your Deaf child and family in the Deaf community. It's important for Deaf children to meet other Deaf individuals and adults who give them access to their culture.

### DISPEL THE MYTHS

#### Sign language is a language

Learning a signed language does not cause language delays nor does it negatively affect one's ability to learn English, or any other spoken language.

Source: parents of Deaf children

[www.language1st.org](http://www.language1st.org)

FOR PARENTS, BY PARENTS

## What Hearing Parents Need to Know About Sign Language

### SIGNED SYSTEMS ARE NOT SIGNED LANGUAGES

Signed systems, such as Signed Exact English (SEE), Pidgin Signed English (PSE), or Makaton are not naturally occurring languages. They were created in order to help teach Deaf children spoken language in a visual way, however current evidence shows that they are not effective in helping Deaf children learn a first language.

### SIGNED LANGUAGES ARE JUST AS COMPLEX AS SPOKEN LANGUAGES

Natural signed languages, such as American Sign Language (ASL), British Sign Language (BSL), and Australian Sign Language (Auslan), are equally elaborate as spoken languages. Although the rules and grammar differ, anything you can express in a spoken language can be expressed in a signed language.

### SIGNED LANGUAGES ARE THE MOST ACCESSIBLE LANGUAGE FOR DEAF CHILDREN

While helping your Deaf child access a spoken language is encouraged, allowing them to learn a signed language at the same time is necessary. Your child may not be able to hear every part of their spoken language at all times, but they will always be able to see a signed language.

### YOU CAN LEARN SIGN LANGUAGE AS AN ADULT

Don't let the idea of learning a new language intimidate you. You don't have to become fluent in a signed language, you just need to learn enough to communicate effectively with your child. There are countless online resources to help you learn. You will pick it up faster than you think, and your child will thank you!

### THE DEAF COMMUNITY IS WAITING FOR YOU

Seeking out Deaf adults and other Deaf children in your local Deaf community is not as scary as it seems. They are often happy to help hearing parents that seek their support. Remember, it takes a village, and introducing your Deaf child to a community of people that are like them is priceless.

[WWW.LANGUAGE1ST.ORG](http://WWW.LANGUAGE1ST.ORG)

# Bilingual Strategies at Home

You may be wondering how to implement ASL-English bilingualism in your home. There are lots of different ways to do this, and it might look different in different homes! The most important thing to remember is to keep the two languages separate; try not to talk and sign at the exact same time. The next few pages provide some examples of what ASL-English bilingualism might look like.



Pro-ASL does not mean anti-English.



LANGUAGE FIRST



Routine-based learning empowers families to embed rich language into every aspect of their children's daily lives.



## Language Support Strategies

Click on the picture below to watch the video.



# LANGUAGE STRATEGIES

Language is learned from the environment around us. Deaf children often miss out on language input when it is auditory only. American Sign Language is a visual language that allows Deaf children full access to the linguistic input. Use these strategies to help increase a Deaf child's language in American Sign Language.

## Sign Out Loud

Narrate everything you're doing and thinking in ASL. Because Deaf children do not have as much access to incidental learning, seeing someone signing as they go about a task is good language exposure.

## Fingerspelling

Deaf children are never too young to fingerspell. Even if they are just moving their fingers to look like fingerspelling, they still are making the connection between letters, words, and signs. This directly relates to reading ability.

## Sandwich

If the child has some auditory access, use the sandwich method. Say something in ASL first, then in English, and then again in ASL. This will help make the connection between the two languages, with the more accessible language provided twice.

## Sign On Body

Produce signs on the Deaf child's body. If the child is sitting in front of you, or even next to you, signing on the body can allow the child to be looking at an object while simultaneously receiving your language input.

## Eye Gaze

Make sure the Deaf child is looking at you when you're signing. If there is an item you're referencing, give the child time to look at the item and then look back at you before you start signing again.

## Facial Expressions

Facial expressions are phonemic in ASL. This means that changing a small expression on your face can change the meaning of your message. Use exaggerated facial expressions with a Deaf child who is first learning how to sign.

## Sign On Object

Similar to the concept of signing on a Deaf child's body, you can sign directly on objects. For example, if a teddy bear is "upset," sign on the bear itself. Or, if you're counting with the child, sign the numbers on the objects as you count.

# Bilingualism in Action

**Parent:** Says something in oral English.

**Deaf child:** Responds in a way that indicates they didn't hear it correctly.

**Parent:** Taps child to make sure they're looking before repeating it in ASL as best they can.

**Parent:** Speaking to child in oral English while getting ready for bed.

**Deaf child:** \*removes listening devices and climbs into bed\*

**Parent:** Sits next to child and signs a book in ASL, making sure the child can see their signs and the pages.

**Parent:** Asks child in oral English what happened at school today.

**Deaf child:** Starts to respond in oral English and then switches to ASL mid-sentence.

**Parent:** Signs WHAT ELSE, encouraging child to tell them more in ASL.

**\*at the zoo\***

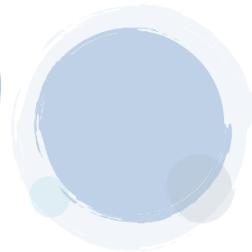
**Parent (in English):** Wow, look at that peacock!

**Deaf child (in English):** The what?

**Parent (in ASL):** PEACOCK, THERE.

(If you don't know the sign, fingerspell it!)

## bilingualism in action



**Parent (in ASL):** What did we see at the zoo today?

**Deaf child (in ASL):** Giraffes, lions, tigers...

**Parent (in English):** What about the animals in the water?

**Deaf child:** \*looks confused\*

**Parent:** Signs the question in ASL

**Deaf child (in ASL):** Dolphins!



LANGUAGE FIRST

## During bath time, when your Deaf child's hearing aids or cochlear implants are off, try:

- ✚ Signing WATER each time you pour water on them
- ✚ Fingerspelling the names of the bath toys
- ✚ Signing YOU WET multiple times in a fun, rhythmic way
- ✚ Signing FINISH and BYE WATER as you empty the drain

# parent **EMPOWERMENT**



If you have any questions about the parent empowerment section, click the icon below to email us:



# Individualized Family Service Plan (IFSP) and Individualized Education Plan (IEP)

## Before the meeting:

- ✚ Request a draft of the IEP. It is a working document, meaning it is meant to be revised following discussion at the meeting.
- ✚ Review the draft IEP and make a list of requested changes.
- ✚ Write out a list of your child's strengths and weaknesses. This can help guide discussion about new goals and services to include in the IEP/IFSP. Write down specific examples of weaknesses.
- ✚ Ask your child what they like and don't like about school. Ask them what they would like to see change at school.
- ✚ Ask someone to attend the meeting with you. This could be a parent/family advocate, or even a family member or friend who can be an additional set of eyes and ears and be there to support you. They can help you remember questions or concerns you had. They can also take notes for you to review after the meeting.

## During the meeting:

- ✚ Follow up verbal requests for changes to the IEP/IFSP with an email. Keep this documentation and all further correspondence.
- ✚ Ask to see the data team members are using to make decisions about your child.
- ✚ Ask questions.
- ✚ Remember, the "I" in IEP/IFSP stands for "individualized". This document should be tailored specifically to your child's needs. It should not be driven by the services the district has currently available. If your child needs a service that the district cannot provide, ask them how they plan to meet this need.

## After the meeting:

- ✚ Follow up to make sure that accommodations suggested are followed through with.
- ✚ Parent Advocacy App is a great tool! It includes lots of the information above and more. Includes checklists and parent anecdotes: <https://deafchildren.org/2019/07/new-parent-advocacy-app/>

## Questions to ask before sending a Deaf child to a mainstream school:

- ✚ Are there other students that use ASL at this school?
- ✚ What accommodations are widely used for Deaf students at this school?
- ✚ Are the teachers/admin trained to teach/interact with Deaf children specifically?
- ✚ What are the average classroom sizes for your school?
- ✚ How many interpreters are on staff and what are their EIPA scores?

# Empowering Parents

[SignOn](#) offers virtual one-on-one ASL sessions with a Deaf adult.

Use this [sample letter](#) and [this one](#) to advocate for SignOn to be written into your child's IEP.

We host monthly IEP support sessions for parents. This is a chance for you to ask any questions you have about your child's IEP. They are held via Zoom and lead by a Deaf professional. An ASL-English interpreter is provided. Sign up [here](#).

Your Deaf child's ability to hear sounds or produce speech does not dictate their need for a signed language like ASL. Even Deaf children with precise articulation and decent access to sound will benefit from visual language.

“

I simply cannot accept her not having equal access to her language, which is ASL. Denying her an interpreter denies her access to her natural language, which in turn can cause language deprivation. I will not sign the IEP until this is addressed.”

## EMPOWERING parents

Your child does not need a certain hearing level in order to be a “candidate” for ASL. A visual language like ASL is extremely beneficial for a Deaf child with any hearing level because it ensures full access to language at all times.

LANGUAGE FIRST

## EMPOWERING parents

“

When we learned ASL, my son instantly became a different kid. He was so happy, confident, and social once he was able to communicate. Turns out he can talk, he just doesn't need to use his voice.

- Kristy, mother of a Deaf child

LANGUAGE FIRST

# Educational Interpreters

Is your Deaf child in a mainstream school with an educational interpreter? The next few pages have more information about educational interpreters.

“



I always tell my teachers that if they're not sure I heard it, to assume I haven't. And if they think I've heard it, to assume I haven't. And if they speak using their voice at all, to **assume I didn't hear them ever.**

- Libby, a Deaf adult



LANGUAGE FIRST

## IN A REGULAR EDUCATION CLASSROOM:

### 1 VISIBILITY

Make sure not walk or stand in front of the interpreter. The DHH student must be able to see the interpreter at all times.



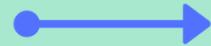
### RESPONSE TIME 2



Allow plenty of response time when you ask the student a question. They must watch the interpreter, process the question, and then respond.

### 3 DIRECT ACCESS

Speak directly to the DHH student, not to the interpreter. Make sure you're looking at the student when you communicate with them.



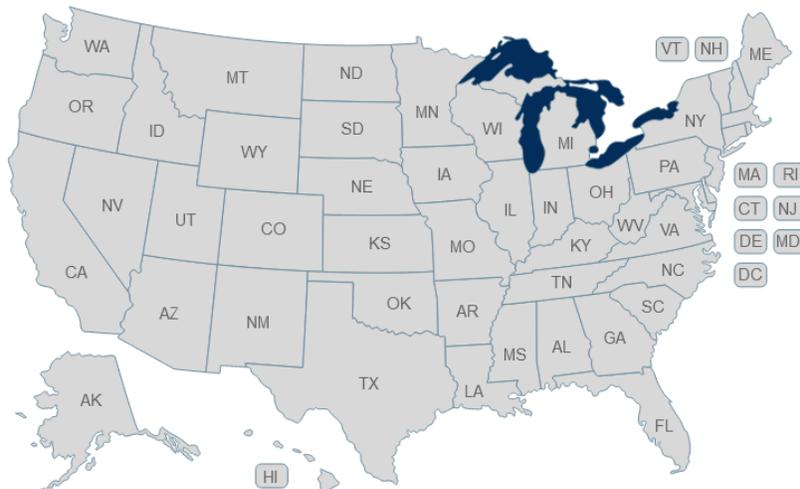
### VISUALS 4



Use lots of visuals in your teaching. DHH kids learn best through their eyes. Plus, visuals help all students!

## State Requirements for Educational Interpreters

Click on the image below to go to the website.



# Educational Interpreters

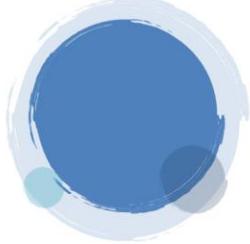
Use [this website](#) to find out more about what an interpreter's EIPA score means.

We provide a student at educational risk limited access to classroom content and increase their cognitive workload because the content is interpreted and not direct (Schick et al., 2005).

“The educational result is that the majority of students who use interpreters do not have access to the same classroom content as their hearing peers” (Schick et al., 2005, p. 12).

## Article Suggestions

[Educational Interpreters: Considerations for Schools](#)



Parents, did you know that you can ask for your child's interpreter's proficiency level?



LANGUAGE FIRST

“



Interpreters with weak performance skills do not simply modify the teacher's message so that it is simpler. There are many omissions of concepts and concepts that are not understandable in the interpreted version. These random errors, distortions, and deletions must have a large, detrimental effect on a young learner, especially one who may already be behind his hearing peers. The classroom content, as it is delivered to the student, is unlikely to be the same as what the hearing peers are receiving” (Schick et al., 2005, p. 16).



LANGUAGE FIRST

# MISCONCEPTIONS ABOUT:

## EDUCATIONAL INTERPRETERS

Many people think that if a Deaf or hard of hearing (DHH) child has good speaking and listening skills then they do not need an American Sign Language (ASL) interpreter. However, these things are not necessarily related. A DHH child may be able to produce intelligible speech but struggle to comprehend oral language and benefit from an interpreter for receptive input. Or, a DHH child may understand oral language well but struggle to produce intelligible speech and benefit from an interpreter for expressive purposes. A DHH child may have strong listening skills and speech production skills and still benefit from an interpreter to provide a visual language to help increase access and reduce fatigue.

### FULL ACCESS

A DHH child with "strong" listening skills may still struggle to obtain the whole message in a classroom setting where there is background noise and multiple speakers, despite having an FM system and other supports. An interpreter can offer visual access to language to reduce missed information.

### LISTENING FATIGUE

Attempting to take in language and academic information through their weakest sense (e.g., their hearing) all day is extremely exhausting for a DHH child. Having an interpreter can relieve some of that fatigue because it offers a more accessible way to receive the information.

### SPEECH VS. LANGUAGE

A DHH child may need an interpreter for receptive language, expressive language, or both. If a DHH child struggles to produce intelligible speech, the interpreter can help expressively. If the child struggles to understand oral language, the interpreter can help receptively.

# A QUICK GUIDE TO:

## EDUCATIONAL INTERPRETERS AND LANGUAGE DEPRIVATION

Simply providing a deaf child with language deprivation with an educational interpreter is likely not going to help them acquire language (Caselli et al., 2020). This is because children with language deprivation need explicit teaching of language structures by a native language model and must be immersed in an environment where they are instructed by multiple native models.

language  
models

Children learn language from multiple native or fluent language models. They must interact with a variety of language models and also observe language models interacting with each other. "We know of no empirical evidence that children can overcome the consequences of language deprivation via a single language model" (Caselli et al., 2020, p. 4).

interpreter  
fluency

Not all educational interpreters have high levels of fluency in American Sign Language (ASL). Additionally, not all states have standards that require ASL fluency from educational interpreters. Thus, it is entirely possible that a deaf student with language deprivation is placed with an interpreter, and therefore a sole language model, who is not a native or fluent signer.

explicit  
teaching

Deaf children with language deprivation are outside of the critical period for language acquisition and therefore will not pick up language effortlessly anymore. They require explicit language instruction. "We know of no evidence that children can overcome the consequences of language deprivation without explicit...language instruction" (Caselli et al., 2020, p. 4).

## References

- Braem, P. B. (1990). Acquisition of the Handshape in American Sign Language: A Preliminary Analysis. In: V. Volterra & C. J. Erting (Eds.), *From Gesture to Language in Hearing and Deaf Children*, (pp 107-127). Springer. [https://doi.org/10.1007/978-3-642-74859-2\\_10](https://doi.org/10.1007/978-3-642-74859-2_10)
- Caselli, N., Pyers, J., & Lieberman, A. M. (2021). Deaf children of hearing parents have age-level vocabulary growth when exposed to American Sign Language by 6 months of age. *The Journal of Pediatrics*, 232.
- Caselli, N. C., Hall, W. C., & Henner, J. (2020). American Sign Language interpreters in public schools: An illusion of inclusion that perpetuates language deprivation. *Maternal and Child Health Journal*.
- Chamberlain, C., & Mayberry, R. (2008). American Sign Language syntactic and narrative comprehension in skilled and less skilled readers: Bilingual and bimodal evidence for the linguistic basis of reading. *Applied Psycholinguistics*, 29, 367-388.
- Chen Pichler, D., Kuntze, M., Lillo-Martin, D., Muller de Quadros, R., & Rossi Stumpf, M. (2018). *Sign language acquisition by deaf and hearing children*. Gallaudet University Press.
- Cummins, J. (1980). The cross-lingual dimensions of language proficiency: Implications for bilingual education and the optimal age issue. *TESOL Quarterly*, 14(2), 175-187.
- Davidson, K., Lillo-Martin, D., & Chen Pichler, D. (2014). Spoken English language development among native signing children with cochlear implants. *Journal of Deaf Studies and Deaf Education*, 19(2), 238-250.
- Goldin-Meadow, S., & Mayberry, R. I. (2001). How do profoundly deaf children learn to read? *Learning Disabilities Research & Practice*, 16(4), 222-229.
- Gutierrez-Clellen, V. (1999). Language choice in intervention with bilingual children. *American Journal of Speech-Language Pathology*, 8, 291-302.
- Henner, J., Caldwell-Harris, C. L., Novogrodsky, R., & Hoffmeister, R. (2016). American Sign Language syntax and analogical reasoning skills are influenced by early acquisition and age of entry to signing schools for the deaf. *Frontiers in Psychology*, 7.
- Holmer, E., Heimann, M., & Rudner, M. (2016). Evidence of an association between sign language phonological awareness and word reading in deaf and hard-of-hearing children. *Research in Developmental Disabilities*, 48, 145-150.
- Humphries, T., Kushalnagar, P., Mathur, G., Napoli, D. J., Padden, C., Rathmann, C., & Smith, S. R. (2012). Language acquisition for deaf children: Reducing the harms of zero tolerance to the use of alternative approaches. *Harm Reduction Journal*, 9(16).

- McQuarrie, L., & Abbott, M. (2013). Bilingual Deaf Students' Phonological Awareness in ASL and Reading Skills in English. *Sign Language Studies* 14(1), 80-100.
- Secora, K., & Smith, D. (2021). The benefit of the "and" for considerations of language modality for deaf and hard-of-hearing children. *Perspectives of the ASHA Special Interest Groups*, 6, 397-401.
- Schick, B., Williams, K., & Kupermintz, H. (2005). Look who's being left behind: Educational interpreters and access to education for deaf and hard-of-hearing students. *Journal of Deaf Studies and Deaf Education*, 11(1), 3-20.
- Schick, B., Williams, K., Bolster, L. (1999). Skill levels of educational interpreters working in public schools. *Journal of Deaf Studies and Deaf Education*, 4(2), 144-155.
- Simms, L., Baker, S., & Clark, M. D. (2013). The standardized visual communication and sign language checklist for signing children. *Sign Language Studies*, 14(1), 101-124.
- Wilkinson, E., & Morford, J. P. (2020). How bilingualism contributes to healthy development in deaf children: A public health perspective. *Maternal and Child Health Journal*.

# thank you

CLICK ANY IMAGE BELOW TO

*follow us*



Language First



@language1st



@languagefirst

CLICK ANY IMAGE BELOW TO

*contact us*



[www.language1st.org](http://www.language1st.org)



[info@language1st.org](mailto:info@language1st.org)