

# Educating Children with Hearing Loss: Delaware Needs a New Model Now

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Making Language *CHOICES* Available to Delaware  
Families of Children with Hearing Loss

# About Choices

- Grassroots organization
- Core group: parent, audiologists, teachers of deaf, a UD professor, research scientist, lawyer, epidemiologist
- Goals
  - Make all language modalities available
  - One modality is not necessarily “better” than another
  - Parents have a right to make informed **choices** for their children

Language can

start wars

ruin marriages

allow a talk to SCPD

**Language allows us to label objects.....**

**But more importantly.....**

# Language is about relations

The power of language is not in learning the word “cabbage” and the word “Jim” but in learning how to express relations between these words.

“Jim ate the cabbage”

“The cabbage attacked Jim”

“Jim, don’t sit the babies in the cabbage!”



Babies are genius at language learning!



"This is a great book. It's an important addition to any parent's library."

— T. BERRY BRAZELTON

# HOW BABIES TALK



**THE MAGIC *AND* MYSTERY**  
*OF LANGUAGE IN THE*  
**FIRST THREE YEARS *OF* LIFE**

ROBERTA MICHNICK GOLINKOFF, Ph.D. *and* KATHY HIRSH-PASEK, Ph.D.



But what happens if  
babies are born deaf  
or with moderate to  
severe hearing loss?

4% of these children are born to deaf parents and learn ASL, becoming a part of Deaf culture.

96% of children are born to hearing parents. What happens to these children?

# The Law: *The Individuals with Disabilities Education Act*

- Free and appropriate public education
- Least restrictive environment

Building the Legacy: IDEA 2004



**Part B**  
(ages 3-21)  
[Click Here to Enter](#)

**Part C**  
(ages birth-2)  
Coming Soon

# A Range of Possibilities for Language Learning Exist

- Various approaches that use oral and signed language and American Sign Language (ASL)
- Listening and spoken language now possible because of the advent of *cochlear implants*

Communication options for children with Hearing Loss. Gravel J.S., O'Gara J. *Mental Retardation and Developmental Disabilities Research Reviews*. 2003; 9: 243-251.

# Advent of advanced technology



Hearing aids for children as young as 3 months



Cochlear Implants - offered to babies at 12 months (sometimes earlier)

And amplification devices continue to improve in sophistication.

What would you want for  
your child if you were the  
parent of a deaf or hard of  
hearing child?

# Many parents who self identify in Deaf culture

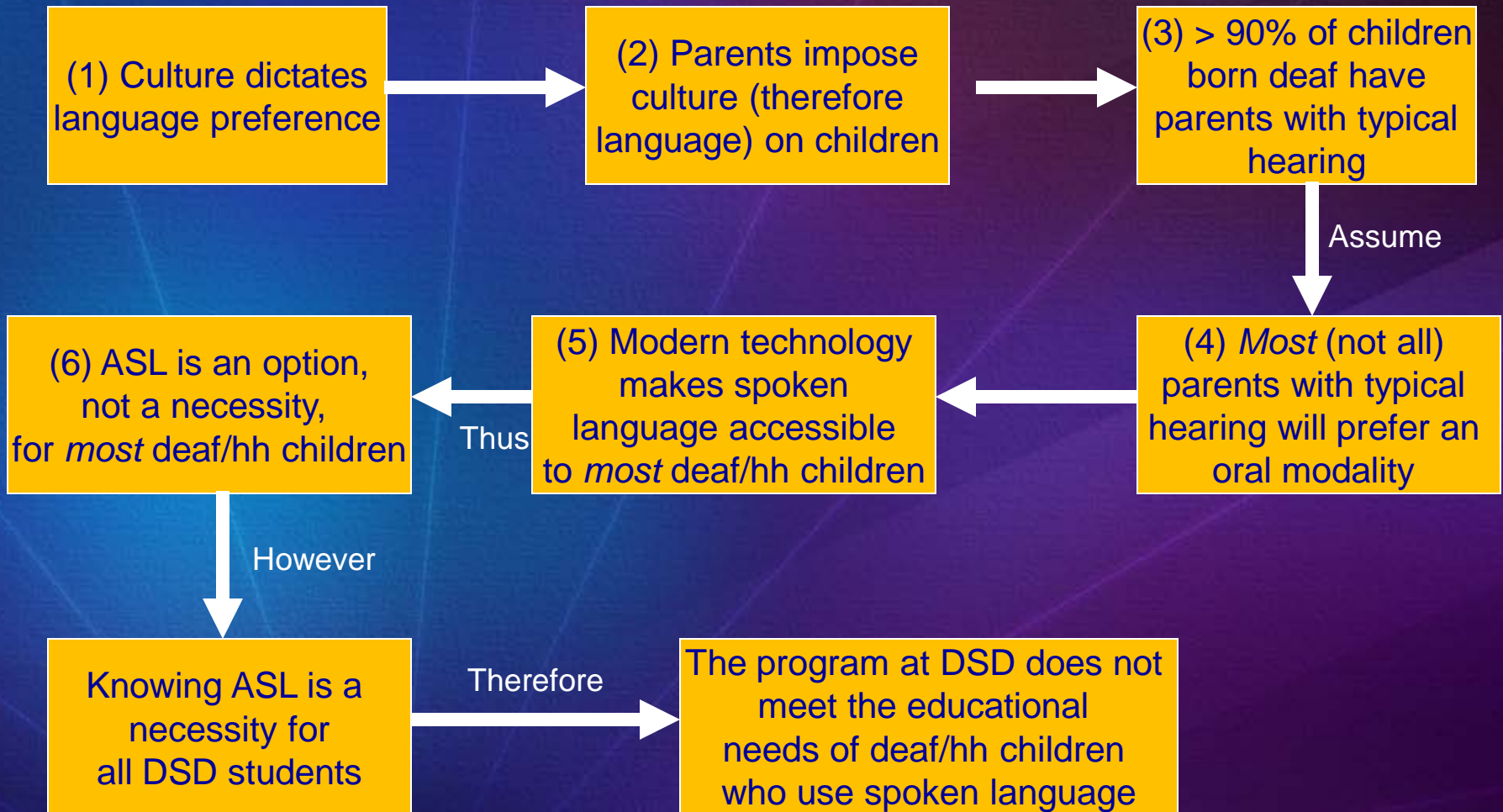
- Want their children to learn ASL and be a member of the Deaf world as they are. These children are “bathed” in ASL, as they communicate with family and friends.
- In fact, many Deaf parents insist on this approach, although there is an increasing embrace of alternatives.

# What would you want for your deaf/hard of hearing child as a hearing parent?

- Most likely, to have your child be part of your world, the world of people who use spoken language.



# A Logic Chain



# Frustration for Parents: *1997*

“[Sharon] Collier had followed the advice of state experts who lauded American Sign Language (ASL) as the best means of communicating with deaf children. The professionals at the Margaret S. Sterck School for the Hearing Impaired never mentioned other options, she said – so she assumed there were none.

Today she knows otherwise. The Colliers dropped ASL and the Sterck school two years ago in favor of Cued Speech—a technique that allows them to speak and use hand cues that help Aaron lip-read.”

# More Frustration: 1997

“Parents are given literature that explains other teaching options besides ASL, [Richard] Gays said.

But when Maureen and John Bard’s youngest son, Christopher, now 8, was diagnosed with a hearing disorder in 1989, the Bards said they were told only about the merits of ASL – and the services available through the Sterck school. Sterck professionals who sat in on the evaluation told the parents that hearing aids would be futile for Christopher . . .”

[After therapy at the Helen Beebe Speech and Hearing Center in Paoli, PA], “Christopher hears sounds and speaks with ease. He enjoys books and reads above his third-grade level.”

# More frustration: *2009, 12 years later....*

Similar stories in other recent interviews

- A mother with deep regrets that she sent her son, now 22, to DSD for 8 years. (“We knew of no other options.”)
- A mother who withdrew her daughter at age 3 when the bilingual methods used earlier changed to ASL only.

# My story...

- Zoe Jane Symons born with a congenital heart defect in October 2006
  - Became deaf soon after birth due to post-surgical medication side-effects
- Followed by Child Development Watch and misdiagnosed by the State Audiologist at 8 months of age; told our daughter was Autistic or developmentally delayed
- Confirmed diagnosis of profound hearing loss at 15 months of age
- Immediately fitted with hearing aids and case was transferred from CDW to Statewide Services for the Deaf and Hard of Hearing and DSD
- Told repeatedly that our daughter's first language would be ASL and that this language could not be taught, but would need to be obtained through experience...immediate enrollment in DSD
- At a routine therapy session at CHOP we met a teacher from the Clarke School, Pennsylvania which changed our lives.....

# Our journey into the hearing world



- After a struggle, Zoe received weekly intervention services from a Clarke school teacher of the deaf from 18 months of age until 3 years of age; paid for by Part C

- At 22 months Zoe received her cochlear implant and attended a twice weekly toddler group at Clarke school; paid for by her parents



- At 3 1/2 Zoe:
  - Loves to go to music and dance class every week
  - Expressive and receptive language above her typically hearing peers
  - Reads on a 5-year-old level

# How good are amplification devices and cochlear implants?

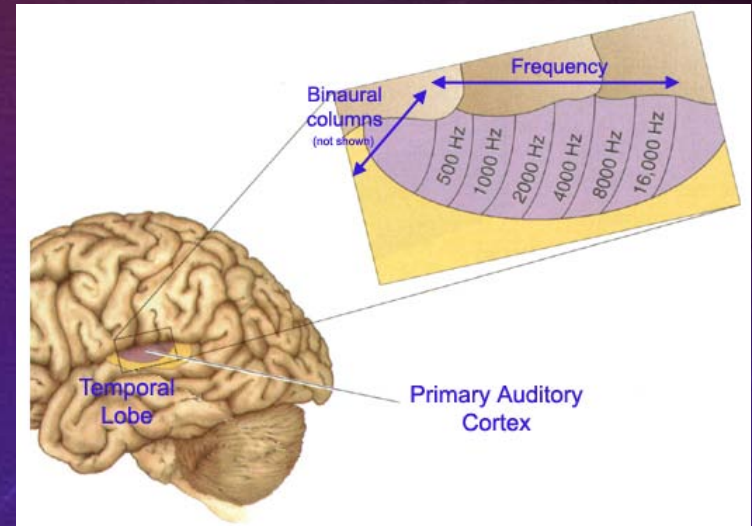
- Two recent studies tell the tale!
- Children with cochlear implants report equally happy lives as children with normal hearing
- Children implanted (mean age = 3.5 – late!) do just as well on language measures as hearing children by elementary years and h.s.

Loy et al. (2010). The children speak: An examination of the quality of life of pediatric CI users. *Otolaryngology*.

Geers et al. (2008). Long term outcomes of cochlear implantation in the preschool years. *International Journal of Audiology*.

# Importance of early intervention

- Auditory cortex plasticity: maximal for 3 ½ years
- Early intervention is key!
- Research indicates:
  - Identify at birth
  - Amplify before 3 months
  - Intervene by 6 months
  - Implant (if appropriate) by 12 months
- Most early-implanted children can function in the hearing world with supports by age 6!



Retrieved from website of  
the University of Colorado



# The economics of deaf education

**•We will always need DSD. There will always be children who require ASL and the accompanying services.**

- **The cost of a DSD education: substantially greater than that of a local school**
- **DSD enrollment would be lower if parents had access to a full range of services**
- **For example, among deaf/hh children**
  - DE: 39% in DSD (per Director, Delaware program)**
  - NJ: 14% at state school for the Deaf**
- **How is this possible?**

**Technology is improving rapidly!**

# Conclusion

- Delaware is not providing:
  - A free and appropriate public education
  - In the least restrictive environment for *many* children with hearing loss
- A change in public policy and practice is urgently needed: Delaware's children deserve better!

