

IDEAL Technical Assistance



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Extraordinarily Committed to Enrichment in Language & Literacy

Language Access Series

A key element for deaf and hard of hearing children's success is ensuring language access.

This series brings together explanations of terminology, important information to consider and ideas for improving access and language for deaf and hard of hearing children.

The pamphlet is designed to be distributed as a packet to families and professionals to use as a resource. Individual pages can be printed as flyers as is useful.



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DEFINITIONS



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Social vs. Academic Language



It is important to know that there are two types of language: social and academic. These can be expressed manually/orally (American Sign Language, spoken language or augmentative/alternative communication) and in print (written English).

Social

- **Everyday** conversation
- Used with **friends and family** for social purposes
- **Informal** language
- Can be **phrases** rather than full sentences
- Does not necessarily follow grammar conventions
- Often involves **shared background information**
- Often involves answering simple questions, sharing personal stories, negotiating communication, etc.
- **Context-embedded**
- May see referred to as basic interpersonal communication skills (BICS) or conversational informal language fluency (CILF)

As you can see, there are differences between the two types of language skills; however, it is important to note they are not independent from each other. Both are needed to develop a well-rounded individual with strong literacy skills.



Academic

- **Context-reduced** situations where not all the communication partners share background information
- In **textbooks** and research papers
- Used in **school/work** conversations
- Needed to complete **homework and classwork**
- Uses **complete sentences** with appropriate grammar
- Involves transition words (e.g., moreover, hence)
- Involves **problem solving** and reasoning
- Ability to use language and vocabulary for thinking
- **Theory of mind** skills
- Advanced and **abstract vocabulary** use
- May see referred to as cognitive academic language proficiency (CALP) or formal academic language fluency (FALF)

Without fully developed academic language, students may struggle to keep up with the writing demands of the classroom and to develop literacy skills, even if they demonstrate proficiency with social language. Many times, the child's language skills are impacted by their access to information.

<https://www.bilingualbridges.com/blog/social-fluency-vs-academic-proficiency/>

[https://www.colorincolorado.org/faq/what-are-bics-and-calp#:~:text=Basic%20Interpersonal%20Communication%20skills%20\(BICS,social%20interactions%20is%20context%20embedded.](https://www.colorincolorado.org/faq/what-are-bics-and-calp#:~:text=Basic%20Interpersonal%20Communication%20skills%20(BICS,social%20interactions%20is%20context%20embedded.)



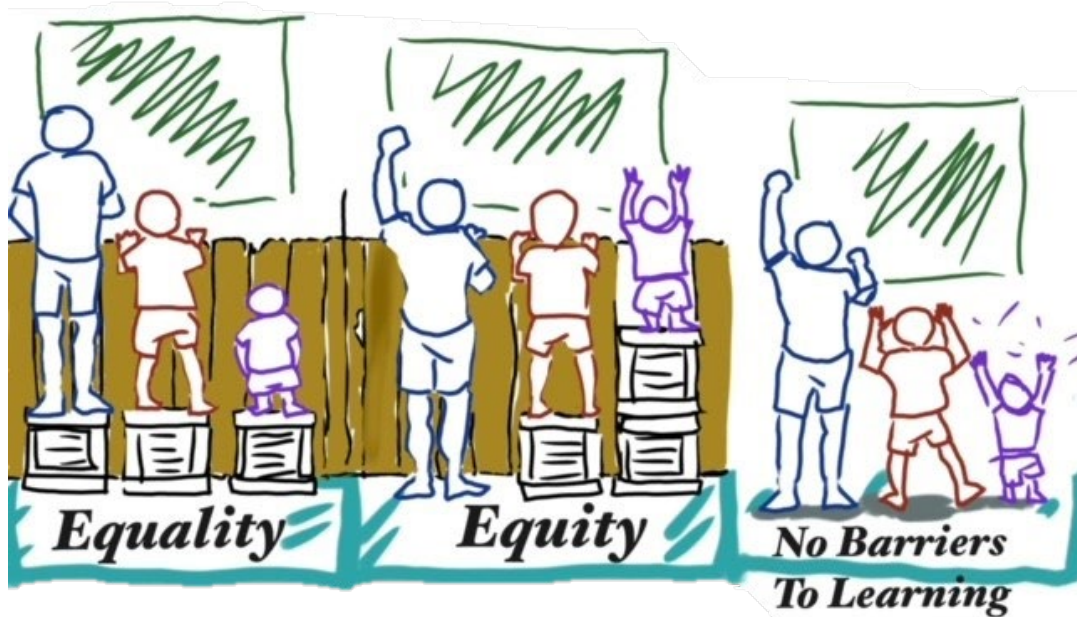
Paul, R., Norbury, C., & Gosse, C. (2018). *Language Disorders from Infancy Through Adolescence* (5th ed.). Elsevier Gezondheidszorg. Page 153.



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Defining Access

When the term “full access” is utilized in the context of deaf and hard of hearing individuals, it refers to the ability to gain the exact same information as hearing people at or roughly at the same time. The term itself is not referring to a particular language or presentation of that information, as that is unique to each deaf or hard of hearing person.



- Special Factors and Considerations <https://www.in.gov/health/cdhhe/files/Consideration-of-Special-Factors-fillable.docx>
- Office for Civil Rights Deaf Education Services Policy Guidance <https://www2.ed.gov/about/offices/list/ocr/docs/hq9806.html>
- Impact within the mainstream classroom <https://successforkidswithhearingloss.com/impact-of-hearing-loss-child/>
- Teach. Learn. Grow. Improving equity for students with disabilities <https://www.nwea.org/blog/2021/on-knocking-down-the-fence-4-ways-you-can-improve-equity-for-students-with-disabilities/>
- TEACHMAGAZINE Equity Vs. Equality <https://teachmag.com/archives/18257>



Incidental learning

For deaf and hard of hearing children, access to language--direct and incidental--will impact overall language and literacy development. Between 80% and 90% of acquired academic language is learned incidentally.

Incidental Learning

- A result of information that is **not directly taught** and comes from external sources and surrounding interactions.
- Opportunities often occur for **only seconds** and can be visual, auditory or kinesthetic.
- Information from these stimuli are tuned out, stored consciously or stored subconsciously and may be comprehended in the moment or later.
- The learning takes place when these stimuli are understood by **associating them with prior knowledge**.
- Approximately **80%-90%** of the learning needed for proficient language and literacy development is gained through incidental information.

DHH children don't just need a program that tries to directly teach incidental information. These children need ensured full access to all language, annual tracking of language skills (especially academic language) and a language-rich environment within the least restrictive environment. Click these Center resources to learn more:

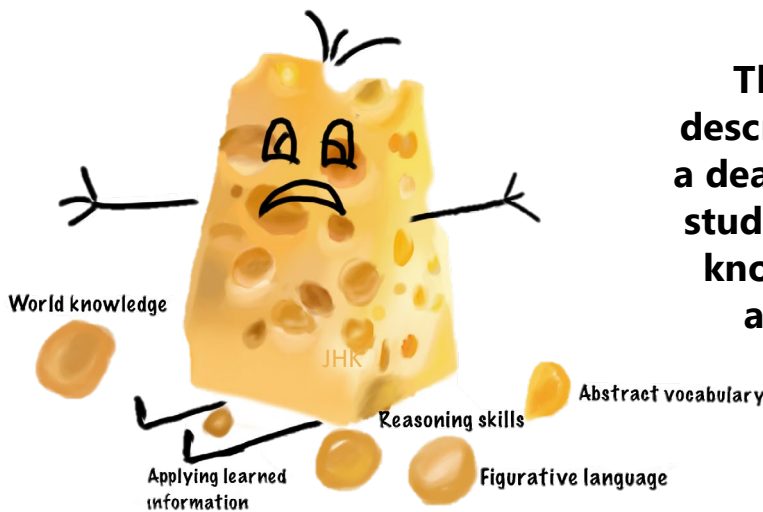
<https://www.in.gov/health/cdhhe/files/Language-Rich-Environment-DHH-students.pdf>

<https://www.in.gov/health/cdhhe/files/Least-Restrictive-Environment-Considerations-DHH-students.pdf>



Swiss Cheese Effect

The English idiom “more holes than Swiss cheese” means *something has many problems or there are many troubles associated with it*. It provides the basis of the term “Swiss cheese” that is used to describe the effect that occurs within learning for some DHH children.



The “Swiss cheese” effect describes the language skills of a deaf or hard of hearing (DHH) student who has unpredictable knowledge gaps in academic and language concepts.

The “Swiss cheese” effect within learning occurs with some DHH students in large part due to not having full access to language. Most language (80%-90%) is learned incidentally. In other words, it is overheard and/or overseen. When a DHH student does not have access to incidental learning and those skills are not taught directly, they develop gaps in their foundational skills. This is why young DHH children may seem to be learning language similar to their same-age peers but as they age, they develop a noticeable language disorder.

As time passes, the incomplete foundation of learning that was laid is simply not adequate to support continued learning growth.

For ideas on enhancing learning opportunities check out this Hands & Voices resource:
http://albertahandsandvoices.com/wp-content/uploads/2017/11/Incidental_Learning.pdf



Language Deprivation

Language deprivation occurs when there is a lack of access to a full and natural language when children are learning language. The crucial language learning years have been identified as birth through age 5. This lack of access prevents children from developing a complete first language.



Language Deprivation:

- Is not a result of not being able to hear or an inevitable consequence of deafness
- Can be prevented by understanding and ensuring access to a full rich language early
- Results in long-term struggles if identification and intervention do not occur

Tracking of yearly language progress is essential to identify potential access issues early. Check out these Center milestones resources: <https://www.in.gov/health/cdhhe/files/IDEAL-Parent-Document-Milestones.pdf> and <https://www.in.gov/health/cdhhe/files/ASL-and-English-Milestones-The-Next-Steps.pdf>

Professionals working with deaf/hard of hearing children can collaborate to ensure a child's language progress is being continuously monitored. This allows for flexibility in programming to meet the child's access and language development needs, which will enable the child to meet their optimum potential.



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IMPACT



Missing Incidental Information

Because 80%-90% of language is learned incidentally, deaf and hard of hearing children face the potential for significant impact if they are not accessing the language occurring in the environment. Since most hearing children have access to incidental learning, their deeper language understanding is well established prior to entering school. Ensuring access and early intervention services can help deaf and hard of hearing children and their families develop a strong language foundation prior to school as well.

http://albertahandsandvoices.com/wp-content/uploads/2017/11/Incidental_Learning.pdf

Abstract language concepts and the ability to **use language for thinking** are significant contributors to proficient reading. Many of these are overheard/overseen, such as

- World knowledge
- Figurative language
- Elements of a story
- Social codes
- Game rules
- Problem solving and reasoning

Auditory/concentration fatigue plays a large part in a person's ability to overhear/oversee language information.

- Concentration Fatigue
<https://hearmeoutcc.com/concentration-fatigue-affects-deaf-people/>
- Hearing like me, concentration fatigue
<https://www.hearinglikeme.com/why-you-should-know-about-concentration-fatigue/>
- Healthy hearing listening fatigue
<https://www.healthyhearing.com/report/52807-Hearing-loss-and-listening-fatigue>

In a classroom, learning often occurs outside of a DHH child's listening/viewing bubble. The student may not even know the discussion is occurring. For example:

- In small group work, hearing children can **listen to other groups** while participating in their own. They can learn additional information with this skill.
- Hearing peers can have a **side conversation** from the lesson that can provide social or academic information to those around them.
- Conversations occurring in the **noisy cafeteria or hallway** can not only include social information, but may also be talking about resources or additional information from a lesson.

Hands and Voices incidental learning
<http://www.eparent.com/features-3/incidental-learning-deaf-child/>





Language Deprivation Syndrome

Language Deprivation Syndrome (LDS) may be the result of a child who has experienced long-term language deprivation. It causes recognizable social, emotional, intellectual and other consequences. Individuals with this syndrome often present with structurally incomplete neurodevelopment and demonstrate permanent characteristics that are similar across the population even with support after identification.

An adult or a teenager with LDS will exhibit many of these characteristics:

- Has emotional regulation difficulties
- Has trouble gaining and maintaining relationships
- Has poor world knowledge (may be street-wise)
- Acts out feelings
- Has poor predictions skills
- For those using American Sign Language: has problems with spatial awareness, use of classifiers, referents, sign space and nonmanual markers
- Appears to use language fluently, but closer inspection reveals dysfluent production and poor comprehension
- Struggles with concept of time
- Struggles with cause and effect
- Lacks theory of mind
- Has difficulty understanding abstract concepts
- Struggles with learning
- Has limited or no literacy skills

National Association of School Psychologists DHH Position Statement

<https://www.nasponline.org/research-and-policy/policy-priorities/position-statements/serving-deaf-and-hard-of-hearing-students-and-their-families-implications-for-education-and-service-delivery>

Red flags that could indicate your child/student may have access issues that require action:

- Struggles with language and understanding complex language concepts
- Poor reading skills and lack of academic progress
- Behavioral challenges
- Low self-esteem and/or lack of identity
- Impaired relationships



Gulati, S. (2019). Language Deprivation Syndrome. In *Language Deprivation and Deaf Mental Health*. Routledge Taylor & Francis Group.

Hall, W. C., Levin, L. L., & Anderson, M. L. (2017). Language deprivation syndrome: a possible neurodevelopmental disorder with sociocultural origins. *Social psychiatry and psychiatric epidemiology*, 52(6), 761–776. <https://doi.org/10.1007/s00127-017-1351-7>





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IDENTIFICATION



Determining Auditory Access

Because it is essential that deaf/hard of hearing children have access to full incidental and direct language, it is important the child's team be on the lookout for signs that those individuals gaining academic information through audition-only may not have full auditory access.

Testing can be completed to attempt to determine if the child has full auditory access to language. A pure tone audiogram is not the full picture of what a child can hear and perceive. Functional testing, both in a sound booth and in day-to-day environments, gives more information on a child's access and ideas for support.

In the Classroom

- [Functional Listening Evaluation](#)
- [Communication Access in Virtual Learning](#)
- Observations across environments
- [The Listening Inventory for Education: an Efficacy Tool \(L.I.F.E.\)](#)
- [The Screening Instrument for Targeting Educational Risk \(S.I.F.T.E.R.\) /The Preschool S.I.F.T.E.R.](#)

Audiological Battery

- [Ling 6 detection \(each ear and both\) for typical conversation \(50 dB\) and soft conversation \(35 dB\)](#)
- Functional gain (aided testing)
- Speech perception in quiet (single words and if possible, sentences)
- Speech perception in noise using standardized measures
- Electroacoustic verification of their hearing aids (checking hearing aid programming)
- Listening in noise

Other Testing Options

- [Early Speech Perception test](#)
- [Mr. Potato Head Test](#)
- [Common Object Token Test \(COT\)](#)
- [Lexical Neighborhood Test/ Multisyllabic Lexical Neighborhood Test \(LNT/MLNT\)](#)
- [Compass Test of Auditory Discrimination](#)

Regular language monitoring is considered part of the national best practices for DHH children. Language testing is often the first tool that identifies possible access issues. The child should make at least one year's progress in one year's time. If the child is delayed, they need to demonstrate accelerated language growth.

- Hall ML (2020) The Input Matters: Assessing Cumulative Language Access in Deaf and Hard of Hearing Individuals and Populations. *Front. Psychol.* 11:1407. doi: 10.3389/fpsyg.2020.01407
<https://www.frontiersin.org/articles/10.3389/fpsyg.2020.01407/full>
- Checking for Audibility in School
<http://www.janemadell.com/publications/Checking%20For%20Audibility%20in%20School.pdf>



Determining Visual Access

Deaf and hard of hearing children who access information visually may have difficulty gaining full visual access. It is important the child's team monitor for full visual access and language growth. The child needs to make at least one year's progress in one year's time.

A child's team may benefit from completing a classroom observation(s) and

- Reviewing a current vision examination
- Coordinating with OT/PT to complete
 - Balance assessment tasks
 - Eye tracking
- Working with a school psychologist or occupational therapist to include visual processing assessments in the child's profile
 - [Test of Visual Perceptual Skill 4th Edition](#)
 - [Beery Visual Motor Integration](#)
 - [Wide Range of Visual Motor Abilities](#)

Language progress and growth can be measured by:

- [American Sign Language checklists](#)
- [Discourse and narrative assessments](#) [Discourse and narrative assessments](#) will enable you to view higher-level skills of time, complex sentence use, theory of mind, story sequencing, understanding of cause and effect and using language for thinking.
- [Criterion-referenced or norm-referenced tools](#) given by Deaf American Sign Language Specialists that were developed for deaf/hard of hearing children.

Remember--visual access involves more than visual acuity!

"Acuity of vision" is a term used to describe the clearness or sharpness of your vision when measured at a distance of 20 feet. Visual access includes visual acuity but also involves visual processing or how the brain receives and understands visual information. The term "visual access" also includes the needed supports and environmental modifications that aid language learning.

Check out this Hands and Voices information on maximizing visual access:

<https://www.handsandvoices.org/fl3/fl3-docs/maximize-visual-access-tips.pdf>





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ACTION STEPS



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When A Child Does Not Have Full Access—Next Steps

DHH children need a coordinated team assisting them with achieving their optimal potential. Once investigation and yearly progress monitoring have determined that lack of access may play a part in the deaf/hard of hearing child's access to education, the child's team should meet to implement steps that will help improve the educational plan.

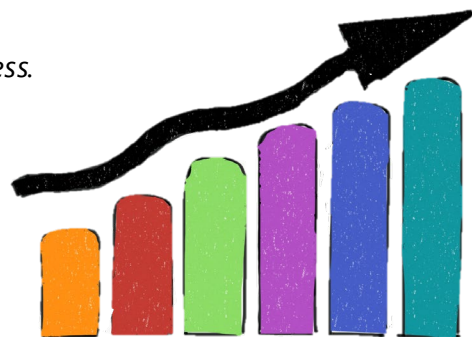
Actions Toward Improving Access

- Review progress monitoring data.
- Record reviews of all previous testing, including any MTSS/RtI data and current audiological information.
- Examine type and amount of services.
- Observe deaf/hard of hearing child and note access and attention. For example:
 - What noise (visual and auditory) may be interfering with learning?
 - Does the child have consistent visual attention?
 - Does the child appear engaged and able to follow everything?
 - Are the IEP accommodations in place consistently?
 - Is the child getting the side conversations?
 - Do you see instances of incidental learning?
 - How independent is the child completing tasks?
 - Are individuals in the child's environment concerned (parents, teachers, other staff, etc.)?
- Revise plan for child as evidenced by review and observations.
- Maintain communication with all providers, public and private, and have a fluid plan that evolves to meet the student's ongoing needs.

Consider consulting with Center staff as is helpful to this process.

If the child is not showing measurable progress (optimally at least one year's progress in one year's time), reviewing programming and child needs, along with completing the Considerations of Special Factors

(<https://www.in.gov/health/cdhhe/files/Consideration-of-Special-Factors-fillable.docx>) will assist in ensuring full access.



Optimizing Outcomes for Students who are Deaf or Hard of Hearing

<http://www.nasdse.org/docs/nasdse-3rd-ed-7-11-2019-final.pdf>



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Access and the Role of the Interpreter

Deaf/hard of hearing students may utilize an interpreter in the classroom to assist with language access for that child. It is important to note that a child does not learn language from an interpreter and that interpreter involvement changes the communication in the classroom entirely.

Interpreter Terminology

- American Sign Language Interpreter—Translates spoken English to American Sign Language and vice versa.
- Certified Deaf Interpreter—Certified native or near-native users of ASL who incorporate gestures, mime, props, drawings and other tools to enhance communication.
- Oral Transliterators—Person who is positioned in front of the DHH student who inaudibly repeats the spoken message and makes the speech as readable as possible.
- Language Facilitator—Monitors student comprehension and provides instructional support as needed.

Tips

- It is impossible for one interpreter to interpret everything the teacher says and side comments or impulsive responses.
- The child needs to have opportunities to directly communicate and socialize with peers without an interpreter present.
- The child does not learn language from an interpreter.

The More you Know

- Best practice suggests interpreter/student pairings should be changed every three years.
- Indiana law states an educational interpreter MUST hold an Indiana Educational Interpreters Permit.
- Student age, classroom setup, teacher placement and visuals used should be taken into consideration for interpreter position in the classroom.

Interpreting is beneficial only if a child already knows the language or communication system that the interpreter uses to convey the information. For instance, if a child is very young or only beginning to learn language through signing, watching a sign language interpreter is not an effective way to learn sign language. Learning sign language is an interactive process, as is learning spoken language.

Clerc Center Working with an interpreter <https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/interpreting/working-with-interpreters.html>

Classroom Interpreter and language modeling <https://www.classroominterpreting.org/Interpreters/children/Interpreting/languagemodel.asp>



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Improving Access

Environment

- Adequate lighting to see communication partner(s).
- Person's position in environment allows visual and auditory access to speaker and classmates.
- Speaker faces the students.
- Speaker stands away from back lighting.
- Room arrangement is conducive to full access:
 - No decorations or structures blocking views.
 - Desks arranged in "U" shape.

Auditory

- Use of hearing-assistive technology (HAT)
 - Personal (preferred)
 - Soundfield
- Noise treatment
 - Ceiling and wall treatments
 - Carpet, curtains, cloth hangings
 - Tennis balls on chair legs
- Addressing potential classroom interfering noise
 - HVAC
 - Students talking or moving
 - Hallway noises

Visual

- Interpreter positioned where child can see teacher, projected information and interpreter
- Quiet visual environment:
 - Plain backgrounds
 - Reduce extraneous movement

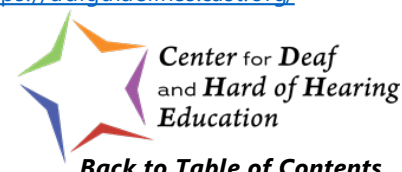
Classroom Instruction

- Language-rich environment (<https://www.in.gov/health/cdhhe/files/Language-Rich-Environment-DHH-students.pdf>).
- Teacher repeats what others say.
- Teacher pauses to allow viewing of materials prior to continuing with instruction/discussion.
- Teacher checks for understanding.
- Awareness of accents or soft-spoken individuals who may require additional accommodations for the DHH student.
- Compensates for reduction in access to visual cues and reduced auditory signal during mask use.
- Raising hands and directing attention.
- Opportunities to directly communicate with peers/teacher.
- Print support (include school announcements as well as instruction).
- Group work – allow in a different room away from other groups.
- Able to see lipreading and facial expressions.
- Print and captions available.
- Visual and listening breaks.

Accommodations and Modifications for deaf/hard of hearing students:
https://www.handsandvoices.org/pdf/IEP_Checklist.pdf

More Accommodations Resources
<https://www.livebinders.com/play/play?id=1592733>

Universal Design for Learning Guidelines <https://udlguidelines.cast.org/>





Improving Access—Home Edition

Environment

- Consider lighting:
 - Adequate to see one another.
 - Avoid light behind you while communicating.
- Set up your home so it is as open as possible.
- Communicate with your child while facing them at eye level.
- Check to make sure no decorations or structures are blocking views. *For example, at the table, be sure nothing is in the middle of the table or only items that are below eye line.*

Auditory Considerations

- Use your child's hearing-assistive technology (HAT) if they have any.
- Add any noise treatment that may help your child hear, such as curtains, rugs or padding on table/chair legs.
- Turn off the TV, computer or radio during language interactions.
- Work with other family members to have quiet times or work in other rooms during listening activities.

Visual Considerations

- Be sure your child can see your lips and facial expressions.
- Tap, wave or flick lights to gain attention.
- Model good eye contact.
- Have quiet visual environments:
 - Plain backgrounds
 - Reduce extraneous movement

Creating Full Access to a Language-rich Home

- Read to your child every day. Select books one level beyond their language age and, once in school, their reading level.
- Narrate your thoughts while engaging your child in learning. Use words such as "think, feel, wonder, curious" in discussions.
- Look for times each day to have family time communicating, playing games and/or doing learning activities.
- Encourage outside physical play and activities.
- Sign/talk about your young child's actions. Communicate about what you hear, feel, see, etc.
- Work with the whole family (siblings, extended family and visitors) to take turns while communicating and including everyone, especially during reading, eating and performing activities together as a family unit.
- When your child is old enough, include them in planning decisions and discussions.
- Model using linguistic verbs (sobbing, moaned, sighed, etc.) when you communicate about your day, thoughts or experiences.

- Accessible home for DHH people <https://www.hearinglikeme.com/accessible-home-for-deaf-and-hard-of-hearing-people/>
- Accessible home modification checklist https://mn.gov/deaf-commission/assets/2015-Updated-Home-Modification-Checklist_tcm1063-154030.pdf
- DHH home improvements <https://www.yourathometeam.com/deaf-or-hard-of-hearing-home-improvements/>





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Developing Academic Language Skills

It is important that people interacting with and/or teaching deaf/hard of hearing students encourage academic language development; however, the task may seem daunting. Here are some simple ideas to start using today.

- Incorporate **jokes, humor and slang** in your teaching/discussions, and discuss why they are funny or difficult to understand.
- Teach **abstract vocabulary** (including multiple meanings, figurative language, etc.).
- Use abstract vocabulary intentionally and repeat the concept by replacing a word with a different word, then repeat again (e.g., *Let's get in the car. A car is a vehicle. Let's get in the vehicle.*)
- Use the **correct terminology** at the age-appropriate level. Break down the meaning for understanding but be sure to repeat the concept using the original vocabulary words.
- Use movies and commercials to experience humor, puns, slang and **figurative language**.
- **Wordless movie shorts** provide useful language material.
- Continue to **read with the child no matter the age**. Discuss and explore new vocabulary words. Relate books to real-life experiences the child has. As the child ages, read the same book and discuss your thoughts and opinions about the reading. Wordless books provide a good option for encouraging storytelling and creativity.
- Pair vocabulary learning with **fun and experiential activities**. Focus on depth of vocabulary, not just breadth. Use the words in a funny or personal story.
- Explore **why and how** things work.
- Think of failing as learning and encourage the child to try to **figure things out** without help first before providing supports tailored to encourage learning but avoiding frustration.
- Engage in **large motor play**, particularly outside.
- Use **further learning** portions of books and curriculum.
- **Pre-teach, highlight in the moment and review** concepts/vocabulary frequently.
- **Check for understanding** by having the child summarize information or by asking open-ended questions.
- Sign/talk out loud to **model thinking skills**.
- **Make up stories** and practice with the child. Include, jokes, humor, surprises, emotions, linguistic verbs, figurative language, etc.
- Openly discuss other people's **opinions and perspectives**.
- Set up opportunities for problem solving and reasoning within the natural context of home or class activities.
- Model how to say something in a more academic way and vice versa how to **paraphrase** academic texts into more conversational language.
- Help the child diagram similarities and differences between words. Talk about **categories and descriptions**.

- Strassman, B. K., Marashian, K., & Memon, Z. (2019). Teaching Academic Language to d/Deaf Students: Does Research Offer Evidence for Practice? *American Annals of the Deaf*, 163(5), 501–533.
<https://www.jstor.org/stable/26663592>
- Instructional strategies for DHH children
<https://ttaonline.org/instructional-strategies-students-deaf-hard-of-hearing>



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Filling in Foundational Gaps

Once a child has experienced the Swiss cheese effect, it is challenging to repair the faulty foundations. Yet, as individuals who work with DHH children, it is important to do so. This is a responsibility that falls on every adult in the child's life.



When conducting language assessments, looking for specific patterns within individual subtests or responses proves invaluable. Some patterns that will reveal missing overheard/overlearned information include, but are not limited to:

- Struggles to complete tasks that require using knowledge of vocabulary depth, such as comparing/contrasting, categorizing, providing complete definitions, etc. Child/student may be able to label vocabulary well.
 - Expressive responses are short and choppy, even if grammar is correct. Child/student uses vague vocabulary (this, stuff, it) rather than age-appropriate abstract vocabulary that includes mental state vocabulary (felt, wondered, hoped).
 - Child/student may be able to answer details about a story but unable to infer information not directly stated, provide alternative solutions to problems, predict what may happen next, discuss character emotion, etc.
 - Child/student is challenged to solve problems, reason solutions and complete tasks that require theory of mind.
 - Narratives and expository discourse lack details and ability to fully engage their communication partner.
 - Child/student struggles to summarize learning/reading, give rules, solve conflicts, navigate challenging social interactions and advocate for own needs.
-
- University of Minnesota Language Resources <https://www.cehd.umn.edu/DHH-Resources/Language/lea.html>
 - Clerc Center Tips to Go <https://clerccenter.gallaudet.edu/national-resources/tips-to-go/tips-to-go.html>
 - Optimizing Outcomes for Students who are Deaf or Hard of Hearing <http://clerccenter2.gallaudet.edu/ndec-dev/NASDSE/NASDSE-Guidelinesbk.pdf>

- Accommodations vs. Modifications <https://www.livebinders.com/play/play?id=1592733>
- Accommodations and Modifications for deaf/hard of hearing students: https://www.handsandvoices.org/pdf/IEP_Checklist.pdf
- Considerations of Special Factors <https://www.in.gov/health/cdhhe/files/Consideration-of-Special-Factors-fillable.docx>
- More Accommodations Resources <https://www.livebinders.com/play/play?id=1592733>
- Least Restrictive Environment <https://www.in.gov/health/cdhhe/files/Least-Restrictive-Environment-Considerations-DHH-students.pdf>



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Access and the DHH Adult Perspective

By: Laura Burklew, Margaret Kramer, Justin Perez, Madeline Warnock

DHH adults report that in addition to using their language (ASL and/or spoken languages), they use other tools to support access. Tools cannot provide full access individually, but they can supplement language and enhance understanding.

Access Tools for In-person Interactions

- Visual supports
- Text to speech
- Signed books
- Facial expressions
- Amplification
- Optimum seating
- Tapping, waving or flicking lights
- Modified environment to reduce noise
- Hearing-assistive technology (HAT)
- Pictures
- Clear masks or shields
- Print
- Gestures/pantomime
- Watching the reactions of others in the room
- Computer-aided notetaking
- Captions
- Fingerspelling
- Group members raising hands
- Small group settings
- Lipreading
- Fidget toys to maintain attention/concentration
- Body language

Access Tools for Virtual Meetings

- Spotlight who is speaking along with the interpreter.
- Plain video background differing in color from presenter's attire.
- Participants raise hands and wait to be acknowledged before commenting.
- Captioning.

If you have an opportunity to chat with a deaf or hard of hearing adult, you will discover that how they access information is unique. It is important to prepare deaf/hard of hearing students to learn how to advocate for full access and teach them the full array of options.

