



House Enrolled Act 1484
Indiana Deaf Education and
Assessments of Language (IDEAL)

PARENT RESOURCE



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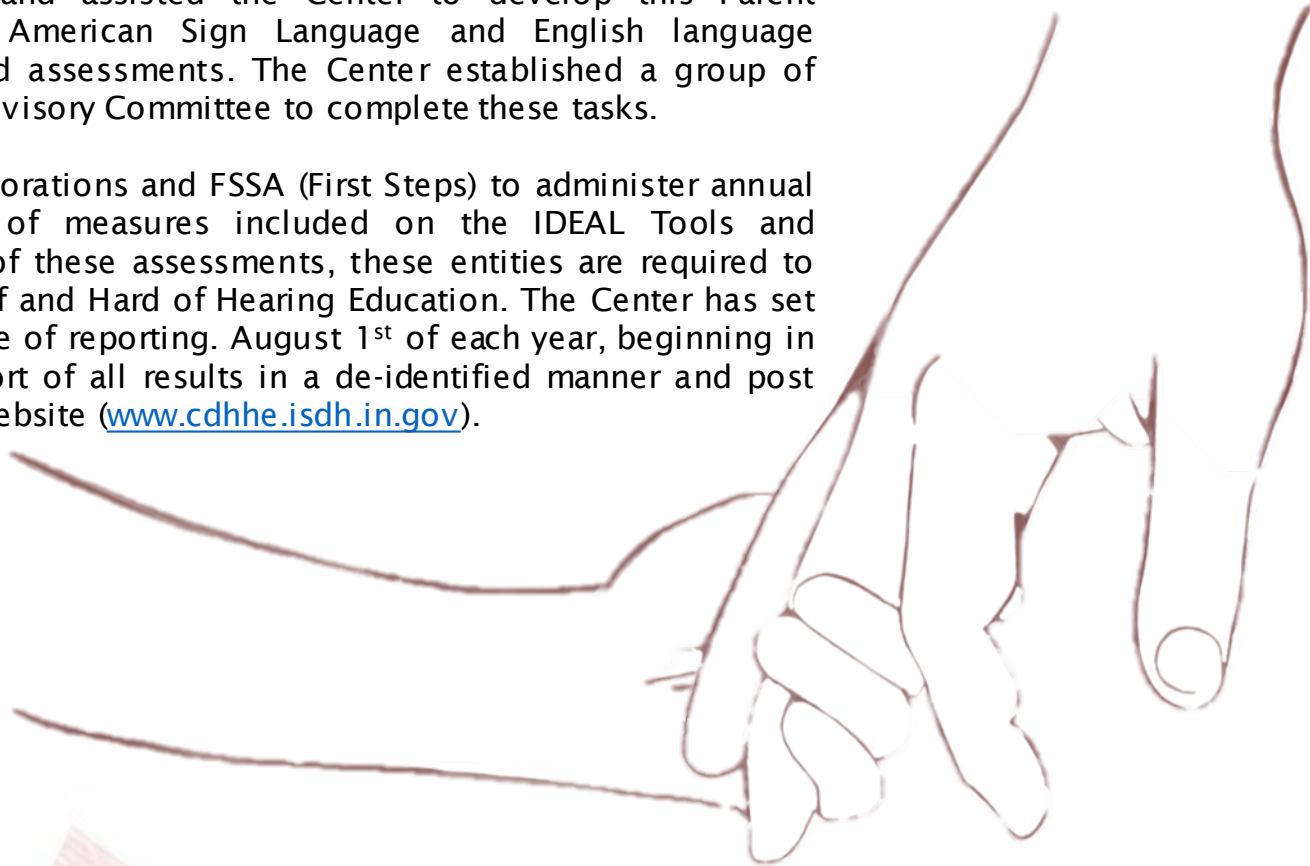
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[The Center for Deaf and Hard of Hearing Education](#) was given the task of overseeing the mandates within House Enrolled Act 1484. As of July 1, 2019, this act was put into law as IC 20-35-12 entitled 'Language Development for Children Who Are Deaf and Hard of Hearing.' This is also known as IDEAL: Indiana Deaf Education and Assessments of Language.

This chapter delineates responsibility to the Director of the Center for Deaf and Hard of Hearing Education to appoint an Advisory Committee to assist the center staff with the mandates of this act. The IDEAL Advisory Committee was to be made up of parents and experts in assessment and/or instruction of American Sign Language, listening and spoken language, English with visual supports, and literacy.

The Advisory Committee advised and assisted the Center to develop this Parent Document, including selection of American Sign Language and English language milestones, and approving tools and assessments. The Center established a group of staff members to partner with this Advisory Committee to complete these tasks.

IC 20-35-12 also enables school corporations and FSSA (First Steps) to administer annual progress monitoring through use of measures included on the IDEAL Tools and Assessments list. Upon completion of these assessments, these entities are required to provide results to the Center for Deaf and Hard of Hearing Education. The Center has set up an online reporting portal for ease of reporting. August 1st of each year, beginning in 2020, the Center will prepare a report of all results in a de-identified manner and post this for public view on the Center's website (www.cdhe.isdh.in.gov).



IDEAL Advisory Committee Members

Mariana Barquet: Parent; ASTra Coordinator – Indiana Hands & Voices; Guide By Your Side Coordinator – Indiana Early Hearing Detection & Intervention (EHDI)

Tai Botkin: Deaf Educator – Earlywood Educational Services

Tina Caloud: Parent; American Sign Language Specialist – Indiana School for the Deaf

Melissa Cassel: Parent, Deaf Educator

Christina Commons: Director – Indiana First Steps, Indiana Family and Social Services Administration

Jodee Crace: Parent; ASL Connect Family Resource Coordinator – Gallaudet University; Deaf Mentor Coordinator – Center for Deaf and Hard of Hearing Education

Brittany Feilen: Blind-Low Vision and Deaf-Hard of Hearing Itinerant Teacher – Center Grove

Lisa Kovacs: Parent; Director of Programs – National Hands and Voices; Indiana Special Education Advisory Council – Indiana Department of Education

Raschelle Neild: Associate Professor, Special Education and Program Director, Deaf Education, Ball State University

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Patrick Rhodes: Complaint Investigator for Office of Special Education – Indiana Department of Education; Indiana Department of Education School Board Representative – Indiana School for the Deaf

Rachel Ross-Kroemer: Assistant Director of Special Education – Greenfield – Central School Corporation; Member – Indiana Council of Administrators of Special Education; Member and Past President- Indiana Speech-Language-Hearing Association

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Casey Spelman Speech-Language Pathologist, Indiana School for the Deaf

Joanna Witulski American Sign Language Teacher- LaPorte Community Schools & Purdue University Northwest; Deaf Services Coordinator- Everybody Counts, Inc.

Dear Parents,

It is with great pleasure that the Center for Deaf and Hard of Hearing Education releases this Parent Document. This document is specifically designed for Indiana parents of deaf and hard of hearing children ages birth through 10 years. You can gain knowledge about how language develops- and what role you have as your child's language model along the way. You will find milestones for American Sign Language and English – both spoken and written. This can be used to ensure your child's language is growing as it should. If not, seeking assistance in a timely manner is key. Resource links are included for your support, including those for children with additional disabilities.

It is well known that children who are deaf and hard of hearing can have difficulty accessing language. We want to ensure you know that your child can obtain language and literacy milestones like his/her peers. With the right supports, information, and interactions that you can provide, your child can thrive in his/her communication development. This will set him/her up for success in his/her classroom and provide a foundation for reading and writing.

Please use this resource to learn about how your child's language can grow. Make it your own by documenting growth of the milestones along the way. You can also use this in educational meetings for your child – referencing the law section of this document.

As you need assistance, consider contact with the Center for Deaf and Hard of Hearing Education. Our staff is knowledgeable and passionate about our work. We are here as a resource to parents and professionals throughout Indiana.

Bethany Colson, MA, MSDE, CCC-SLP

Bethany Colson
Executive Director
Center for Deaf and Hard of Hearing Education
Indiana State Department of Health



GENERAL LANGUAGE DEVELOPMENT

This section provides information about language development that is true for all languages. Some children who are deaf and hard of hearing have English and/or American Sign Language as the primary language of the home. Other children do not. Parents can also find out about children's bilingual language development and resources for children who are deaf or hard of hearing with additional needs.



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What is Language?

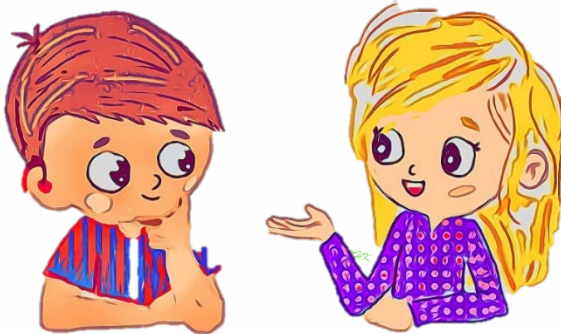
Language consists of output and input. It gives people the ability to communicate and understand people who sign/speak the same language. While speech is the movement needed to express, language is the words we use and how we use them to share ideas and get what we want. https://www.asha.org/public/speech/development/language_speech/

	American Sign Language		Spoken Language		Written Language	
	Viewing	Signing	Listening	Speaking	Reading	Writing
Phonology: Sounds that make up a word or forms of signs	Recognizes handshapes, movement, palm orientation, location, non-manual markers (ASL parameters)	Produces correct ASL parameters	Can discriminate and identify phonemes	Able to say all the speech sounds	Understands words consist of letters	Can spell words well
Morphology: The smallest units of meanings that are formed to make signs/words	Can understand signs (bound and free)	Signs concepts correctly in a context	Can identify grammar markers (e.g., plural -s)	Says all the parts of a word (e.g., Billy 's, kicked)	Understands words when reading	Uses words when writing
Syntax (Grammar): How signs/words are combined to create phrases and sentences	Understands parts of a signed sentence	Signs using ASL grammar	Identifies part of a sentence when listening	Uses correct grammar when talking	Understands parts of a printed sentence	Uses correct grammar in writing
Semantics (Vocabulary): The meaning of words and combination of words in a language	Receptive sign vocabulary	Expressed signed vocabulary	Listening vocabulary	Speaking vocabulary	Reading vocabulary	Writing vocabulary
Pragmatics: The rules of language for conversation and social situations	Understand signed conversations	Participates in signed conversations	Understands spoken conversations	Participates in spoken conversations	Understands points of view in reading	Conveys points of view through writing

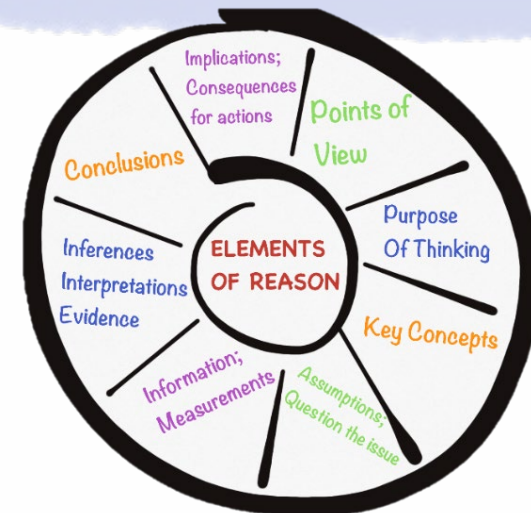
- <https://www.asha.org/practice-portal/clinical-topics/spoken-language-disorders/language-in-brief/>
- Laurent Clerc National Deaf Education Center. (2020). *K-12 ASL Content Standards*. www.gallaudet.edu/k-12-asl-content-standards/standards.
- <https://handsandvoices.org/fl3/resources/toolbox.html>
- Thompson, G., Bowcher, W., Fontaine, L., & Schönthal, D. (Eds.). (2019). *The Cambridge Handbook of Systemic Functional Linguistics* (Cambridge Handbooks in Language and Linguistics). Cambridge: Cambridge University Press.
- Valli, C. (2011). *Linguistics of American Sign Language: an introduction*. Gallaudet University Press.

There are two types of language, **Basic Interpersonal Communication Skills (BICS)** and **Cognitive Academic Language Proficiency (CALP)**. To function in the world, your child needs to master both types of language.

Basic Interpersonal Communication Skills (BICS) are used every day. These skills do not require much thinking. This may include chatting about the weather, sharing what happened yesterday, or completing routine tasks (e.g., go get your shoes). It includes pronunciation and grammar within a language. Children with strong social skills may still have trouble with language.



Cognitive Academic Language Proficiency (CALP) includes skills needed in school. These skills require a child to use language for thinking. CALP is more than vocabulary. Children must be able to reason, problem-solve, and infer. This type of language requires thinking. It is important for literacy development.



- Aukerman, Maren. 2007. A culpable CALP: rethinking the conversational/academic language proficiency distinction in early literacy instruction. *The Reading Teacher*, 60 (7), 626- 635.
- Cummins, J. (2003). BICS and CALP. In J. Cummins Bilingual Education Web, University of Toronto.
- Cummins, Jim. (2007). *Literacy, technology, and diversity: teaching for success in changing times*. Boston: Pearson
- Dancygier, B. (Ed.). (2017). *The Cambridge Handbook of Cognitive Linguistics* (Cambridge Handbooks in Language and Linguistics). Cambridge: Cambridge University Press.
- Mesthrie, R. (Ed.). (2011). *The Cambridge Handbook of Sociolinguistics* (Cambridge Handbooks in Language and Linguistics). Cambridge: Cambridge University Press.
- Snow, C. E., & Uccelli, P. (2009). The challenge of academic language. In D. R. Olson & N. Torrance (Eds.), *The Cambridge handbook of literacy* (pp. 112-133). Cambridge: Cambridge University Press.

Communication happens when you exchange information.
You may learn something you did not know the other person was thinking.

Initially, young children use communication to

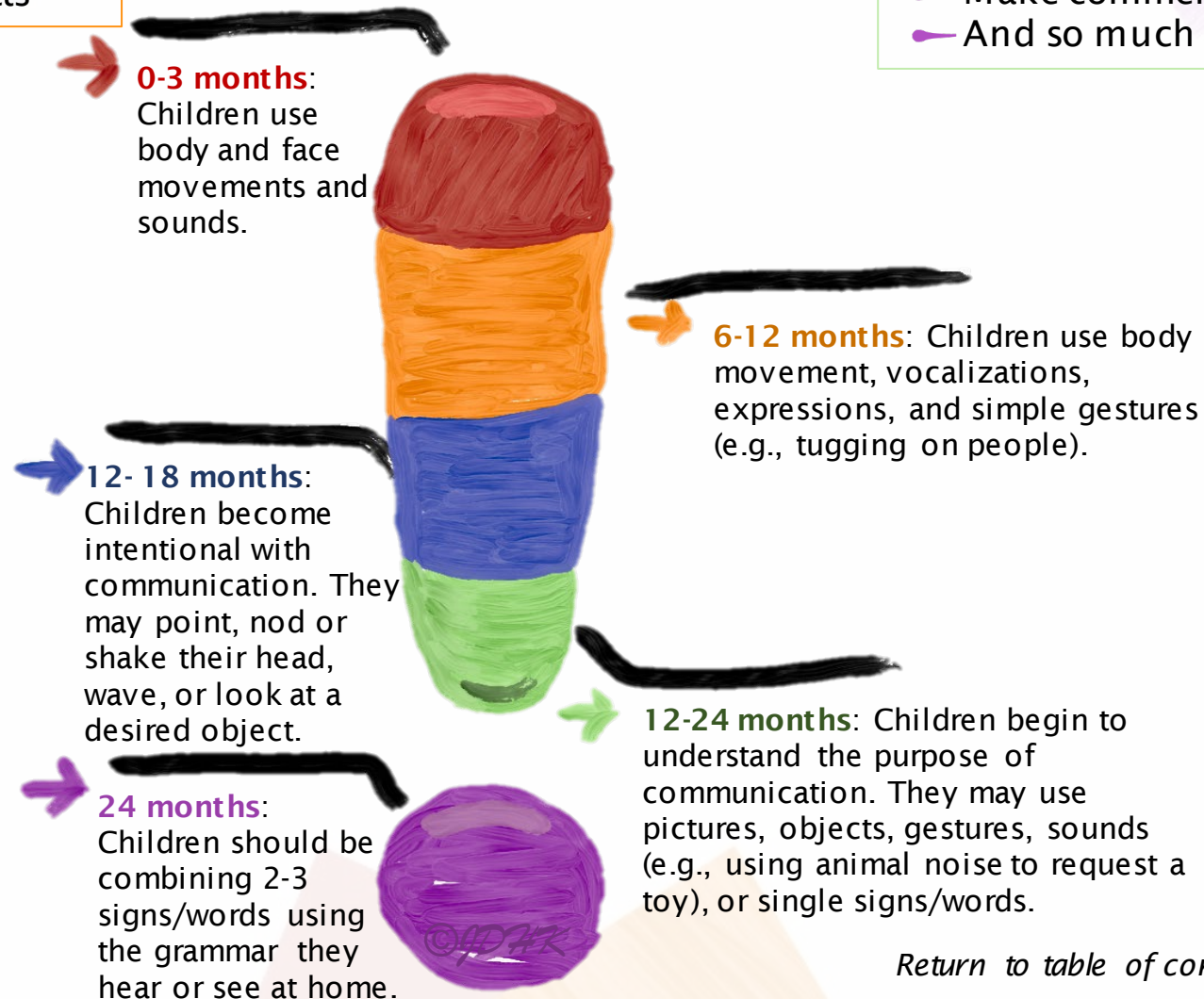
- Refuse or reject
- Request more action
- Request new action
- Request more objects
- Make choices
- Request new objects

As children grow, they use combined communication and language to

- Request attention
- Show affection
- Request absent objects
- Greet people
- Offer or share toys or thoughts

Later, children will be able to use combined signs/words to

- Direct your attention
- Use polite social forms
- Answer yes/no questions
- Ask questions
- Name things/people
- Make comments
- And so much more!



While culture can influence language skills, some abilities develop at the same age for all children.

0-1 month

Crying and vegetative sounds

2-3 months

Eye gaze

1-6 months

Coos and laughs

6-9 months

Joint attention;
Babbling

9-12 months

Uses gestures

12 months

First words

18 months

20-50 word vocabulary;
Pretend play

15 months

4-6 word vocabulary

12-15 months

Follows simple commands

24 months

250-500 words

2-3 years

Begins to tell a story

36 months

Roughly 1000 words

3-4 years

Stories follow sequence and theme

4-5 years

Understands the basic rules of grammar

5-6 years

Adult-like grammar

5-7 years

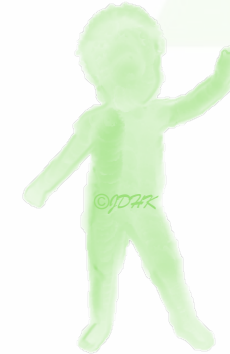
Stories follow a logical order with a problem and solution

5-6 years

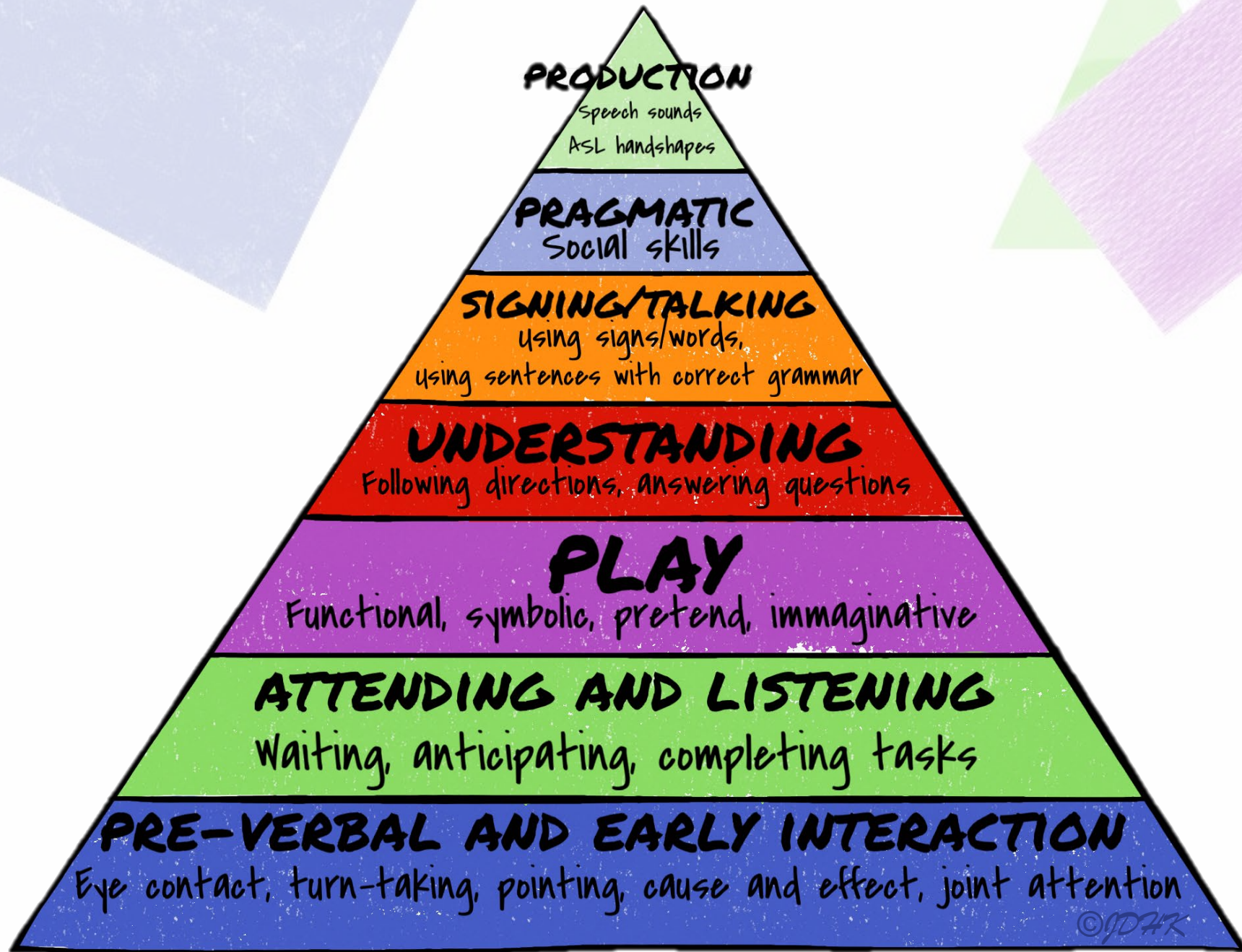
Able to use give-and-take when signing/talking

6-8 years

Begins to think about language and how to use it



Your child progresses through skills in an order that provides the needed groundwork for language growth.



- Friederici, A. D., & Thierry, G. (eds.). (2008) Early Language Development: Bridging Brain and Behaviour: Vol. 5. *Trends in Language Acquisition Research*. Amsterdam: John Benjamins.
- Schwieter, J., & Benati, A. (Eds.). (2019). *The Cambridge Handbook of Language Learning* (Cambridge Handbooks in Language and Linguistics). Cambridge: Cambridge University Press.

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Access to Language

Children who are deaf and hard of hearing need access to language. Access allows learning the same information as hearing people at the same time.

Language is both directly taught and learned through example (incidental). Most language (80-90%) is not directly taught. Be aware of your child's access to indirect language that they may overhear/oversee.

Tips to improve incidental language:

- Say/sign what you are thinking
- Give your child chores and work together. Talk about what you are doing (e.g., planting flowers, weeding, sweeping).
- Cook together and help your child follow a recipe. Taste and explore the ingredients.
- Go places that will show your child new ideas. Talk about what you see, smell, feel, etc. (e.g., local park, woods, nearby museum, etc.).
- Talk with your doctor about having your child's vision tested.
- Read books about different places in the world. Talk about how the people dress or eat differently.
- For more tips:
 - <https://tmwcenter.uchicago.edu/parents/>
 - <https://www.asha.org/public/speech/development/activities-to-Encourage-speech-and-Language-Development/>
 - <https://clerccenter.gallaudet.edu/national-resources/documents/clerc/webcasts/ResourcesforFamilies.pdf>

Some children who are deaf and hard of hearing access language through hearing technology (e.g., hearing aids, cochlear implants, etc.) Some children access language through their eyes using American Sign Language. Some children may use both. Some children may need more help accessing language through pictures.

Lipreading is using vision to watch mouth movements. Lipreading may be a tool to give children who are deaf and hard of hearing help with understanding speech. Most speech is not able to be seen through watching the mouth. Lipreading does not give full access to language alone.



The first step in your child's language journey is learning basic communication skills. Your child learns these skills in the first year of life. Children that do not develop these skills may not understand why they should sign and/or talk. They may have a hard time using signs/words and sentences to communicate.

These early language or prelinguistic skills are:

- Joint attention
- Turn-taking
- Requesting continuation of action
- Requesting assistance
- Responding to greetings
- Following directions
- Answering yes/no questions
- Protesting



Your child will begin to show early language skills through actions:

- Wave
- Smile
- Coo/goo
- Cry
- Push away a toy/person/food
- Look at something they may want

These are still ways your child is communicating.

Encouraging Your Child's Early Language Development

The best way to encourage your child's language growth is to sign/talk about things your child likes. You should follow your child's lead.

- Ensure your child has access to the language(s) you are using.
- Take turns communicating with your child.
- Give your child your full visual attention. Move to eye level.
- Repeat and build on what your child says/signs.
- Sign/talk out loud about what you see, hear, smell, and feel using a variety of words.
- Sign/talk about things in the past and in the future (e.g., your plans for tomorrow or what you did yesterday).
- Reading with your child every day is the best way to develop a positive bond. It can increase your child's attention. You can expose your child to more vocabulary and develop literacy.

- Fernald, A., Zangl, R., Portillo, A. L., & Marchman, V. A. (2008). Looking while listening: Using eye movements to monitor spoken language comprehension by infants and young children. In I. Sekerina, E. Fernández & H. Clahsen, (Eds.), *Developmental Psycholinguistics: Online Methods in Children's Language Processing*. (pp. 97-135). Amsterdam: Benjamins.
- Iverson, J. M. & Goldin-Meadow, S. (2005). Gesture paves the way for language development. *Psychological Science*, 16, 368-371.
- Tomasello, M., Carpenter, M., & Liszkowski, U. (2007). A new look at infant pointing. *Child Development*, 78, 705-722.

Children Learn Through Play

Play is an important part of language development. All children play following similar stages. Children of all ages need time to learn language through play.

<https://cid.edu/2018/07/09/not-just-childs-play-the-relationship-between-play-and-language/>

Play **helps** your child:

- 🧒 Learn how to learn
- 🧒 Gain world knowledge
- 🧒 Boost problem-solving
- 🧒 Improve focus
- 🧒 Learn to handle frustration
- 🧒 Nurture selfreliance
- 🧒 Improve self-esteem
- 🧒 Have healthy brain growth
- 🧒 Become creative and curious
- 🧒 Grow language
- 🧒 Learn proper social skills

Play is the primary way your child develops theory of mind skills. Theory of mind is when your child starts to think about thinking. Your child learns that others think differently and have different emotions. Your child learns to predict what others might do, say, or feel.

Outside play is important. Your child develops gross motor and balance skills while walking, running, and jumping in the grass, sand, and dirt. Your child sees, smells, and touches different things that help promote good sensory processing skills. If your child has good motor and sensory skills, the brain can focus on learning language instead of trying to keep the body safe and balanced.



Smith, P., & Roopnarine, J. (Eds.). (2018). *The Cambridge Handbook of Play: Developmental and Disciplinary Perspectives* (Cambridge Handbooks in Psychology). Dancygier, B. (Ed.). (2017).

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Stages of Play

8-12 months: Children will pick up toys and explore its parts. They will place toys in their mouth and touch an adult to continue an activity.

13-17 months: Children will enjoy placing objects in a container and dumping them out. They will explore toys to see how they work through trying different ways to play with it.



17-19 months: Children will begin to pretend such as pretending to sleep or drink from an empty cup.

19-22 months: Children will use a doll or stuffed animal to complete a short sequence of play such as rocking the doll and putting it to bed.

2 years old: Children will begin to pretend to complete tasks that they have seen at home using props such as putting the lid on a pan, placing the pan on a stove, and setting the table.

2 ½ years old: Children will use stuffed animals or dolls and sign/talk to them. They will role-play familiar activities with others (e.g., cashier/shopping).



3 years: Children will play using a sequence that changes (e.g., mixing the batter, baking a cake, and celebrating a birthday). When playing with peers, they will play beside them, but not act as a team for a common goal.

3 ½ years: Children's play with other children becomes interactive. They may assign roles to other children to role-play unfamiliar situations (e.g., going on an airplane). Children will also have any dolls used for props take turns and sign/talk as part of the play.

3 ½-4 years: Children will use dolls and puppets to act out scripts with many different roles.



Westby, C.E. (2000). A scale for assessing development of children's play. In K Gitlin-Weiner, A. Sandgrund , & C. Schaefer (Eds.), *Play diagnosis and assessment*. New York: Wiley.

5 years old: Children's play is highly imaginative. They will work with other children to create a (e.g., traveling to another planet). Children will work with their friends to use available items as props (e.g., box for a spaceship).

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Language and Literacy Connection

Reading is important for school success. Your child's overall language development is important to learn to read, particularly Cognitive Academic Language Proficiency (CALP). The first few years in school are learning to read. After 3rd grade, a child needs to be able to read. Your child needs to use reading to learn. A child who avoids or does not want to practice reading may struggle with language.



Tips to encourage reading:

0-3 years:

- Read to your child for at least 15 minutes every day.
- Hold your child when you read your books.
- Read with a fun voice or animated signs.
- Talk about the pictures in the books.
- Stop if your child has trouble paying attention. Every time you read with your child try to read for a minute or two longer.
- Show your child words as you read.

● <https://blog.allaboutlearningpress.com/motivating-kids-to-read>

● <https://www.asha.org/public/speech/emergent-literacy/>

● <https://www.asha.org/uploadedFiles/Build-Your-Childs-Skills-Kindergarten-to-Second-Grade.pdf>

● <https://www.asha.org/uploadedFiles/Getting-Your-Child-Ready-Reading-and-Writing.pdf>

● http://www.handsandvoices.org/fl3/topics/lang_lit-soc-development/lit-resources.html

● <https://www.oxfordlearning.com/encourage-good-reading-habits/>

● <https://www.readingrockets.org/article/tips-encouraging-kids-read>

● <https://www.understood.org/en/school-learning/learning-at-home/encouraging-reading-writing/>

● <https://clercenter.gallaudet.edu/national-resources/info/info-to-go/literacy.html>

● <https://clercenter.gallaudet.edu/national-resources/info/info-to-go/literacy/literacy-it-all-connects/reading-to-students.html>

Preschool years:

- Tell your child how much you love to read with them.
- Have many books at home.
- Visit your library often.
- Let your child choose the book.
- Do things that make books special (e.g., your child uses own library card to check out books, books are gifts).
- Read a story again and again.
- Let your child tell you the story.
- Ask your child open-ended questions (e.g., What do you think will happen next?).

Elementary years:

- Take turns reading a book.
- Connect what you read to something that happened in your child's life.
- Turn off screens after supper; offer reading as a fun option over going to bed early.
- Turn on closed captions on your TV and leave them on when your family is watching TV.
- Read different kinds of books (e.g., fact, make-believe, manga, comic).
- Follow your child's interests.

Because narrative development, or how children tell stories, is similar for all languages, it is helpful to understand the sequence of these stages.

1

In preschool, children will begin to tell stories that describe characters' looks or personalities. They will describe where the story occurs. They will connect the story using the signs/words: *and, and then.*

2

As children experience preschool, their stories will change to focusing on a character or theme and what happens in the story. They may show time by using signs/words: *then, first, next, when, after that.*

3

While in preschool, children's stories begin to show actions that cause changes in the story. They will connect the story using signs/words: *so, but, or.*



4

In early elementary children's stories will add purpose for actions to the plot. The story will include cause and effect and character emotions. They will connect the story using the words/signs: *because, if.*

5

In late elementary years, stories will include events that are in order to meet a goal. The characters will show planning, thinking, attempting a task, and understanding of other character's viewpoints. There will be a problem and a solution in the story. They tie the story parts together using the signs/words: *as a result, because, therefore.*

6

In middle school, children's stories may have multiple plots occurring at the same time. The story will have obstacles to a goal. The characters may exhibit trickery or show change as the story progresses. They will use figurative language in the story. They will connect the story parts by using signs/words: *however, although, like, similarly.*

7

In high school, stories will be elaborate. There may be two characters with separate goals. The actions of the characters influence the behaviors of the other character. Things that happen in the story can start another event.

- Fernández, C. (2013). Mindful storytellers: Emerging pragmatics and theory of mind development. *First Language*, 33, 20-46.
- Friend, M., & Bates, R. P. (2014). The union of narrative and executive function: Different but complementary. *Frontiers in Psychology*, 5, 469.
- Hutson -Nechkash, P. (2001). *Narrative Toolbox: Blueprints for Storybuilding*. Thinking Pubns.
- Khan, K. S., Gugiu, M. R., Justice, L. M., Bowles, R. P., Skibbe, L. E., & Piasta, S. B. (2016). Age-Related Progressions in Story Structure in Young Children's Narratives. *Journal of Speech, Language, and Hearing Research*, 59(6), 1395-1408.
- Melzi G., Caspe M. (2017) Research Approaches to Narrative, Literacy, and Education. In: King K., Lai YJ., May S. (eds) Research Methods in Language and Education. Encyclopedia of Language and Education (3rd ed.). Springer, Cham
- Nippold, M. A. (2016). *Later language development: school-age children, adolescents, and young adults*. Austin, Texas Pro-Ed.
- Stadler, Marie & Ward, Gay. (2005). Supporting the Narrative Development of Young Children. *Early Childhood Education Journal*. 33. 73-80..

Any child from any culture can have language struggles for unknown reasons. Children who are deaf and hard of hearing have the added need for full access to information. Children that do not have consistent access to language are at risk of having poor language skills.

Language Delay	Language Disorder	Language Difference
Developing language is noted but is not within age levels.	Periods of time noted where language stays at one level.	Has age-level language that follows the rules of their language community.
Likely do not have additional needs.	Often have additional needs that impact learning.	Typically developing with no additional needs.
Play skills are likely developing typically.	Play skills are likely delayed or atypical	Play skills are typical.
May learn skills in a different developmental order.	May learn skills in a different developmental order.	Learns skills seen in all languages typically. May not follow the rules of General American English (GAE).
May learn language at a slower rate.	Will learn language at a slower rate. Progress is hard to measure using formal tests.	Will learn language at a typical or fast rate.
May be caused by lack of access to language.	Access to language may impact language learning but is not the main reason for the language disorder.	Access to language will impact learning in any language or dialect.
Should show steady progress with language skills if given support.	May not show steady growth even with support. May demonstrate the same skills for a long time and then gain many skills at once.	Will show typical language growth for the language or dialect of the home.
Supports will need to focus on accelerated language development.	Needs a different approach to language therapy. Will need lots of repetition and time to think. Benefits from multi-modal teaching approaches. Additional supports like pictures are helpful.	These children do not need any support for language as they are developing as they should.
With support, will likely achieve age-appropriate skills.	With support, will show progress with language but may never reach the language levels of same-age peers.	These children show good language development when they use grammar and vocabulary from their language community.

- Bishop, D.V. M. (2006) What causes specific language impairment in children? *Current Directions in Psychological Science*. 15(1), 217-221.
- Cummings, L. (Ed.). (2013). *The Cambridge Handbook of Communication Disorders* (Cambridge Handbooks in Language and Linguistics). Cambridge: Cambridge University Press.
- Paul, Rhea. (2012). *Language disorders from infancy through adolescence : listening, speaking, reading, writing, and communication*. St. Louis, Mo. :Elsevier,
- Weismer, S.E. (2006). Typical talkers, late talkers, and children with specific language impairment: A language endowment spectrum. In R. Paul (Ed.) *Language Disorders From a Developmental Perspective* (pp. 83-102). Hillsdale, NJ: Lawrence Erlbaum Associates.

Multilingual/ Bilingual Language Development

Children who are multilingual can comprehend and/or produce two or more languages. These languages can be spoken, signed, and/or written. A multilingual child has at least basic use of the languages. A child can learn languages at any age to be multilingual. Your child's amount of time exposed to another language impacts their level of fluency.

All children acquire language in the same way. Children develop language no matter what language they use. Your child can learn many languages and not show delays. Your child can learn languages that use different ways to express thought (e.g., speech, sign, pictures, etc.). It is important to remember that:

- 1 Your child does not use language like adults. Learning a language is a slow process. Your child will make mistakes when learning any language and that is perfectly typical development.
- 2 Children will learn to sign/speak the dialect and language used around them. If your child has access to language, they will usually begin by signing/speaking like you. Once your child starts to socialize with other children they start to sign/speak like friends their age. Your child acquiring the dialect of your community is part of typical development.

Dialects refer to rule-based versions of a language that are different from the formal language taught in school. For Indiana, General American English (GAE) is taught in language arts. GAE should not be preferred over other languages or dialects.



A child is a **simultaneous bilingual** when they have been exposed to two languages at the same time. This child may understand two languages and express them in one or both.

A child who is a **sequential bilingual** learns a second language later. The child begins to learn the second language before mastering the first language.

- Grosjean, F. (2015). The Complementarity Principle and its impact on processing, acquisition, and dominance. In C. Silva-Corvalán & J. Treffers-Daller (Eds.), *Language Dominance in Bilinguals: Issues of Measurement and Operationalization* (pp. 66-84). Cambridge: Cambridge University Press.
- International Expert Panel on Multilingual Children's Speech (2012). p. 1, adapted from Grech & McLeod, 2012, p. 121.
- Kroll, J., & de Groot, A. M. B. (Eds.). (2005). *Handbook of Bilingualism: Psycholinguistic Approaches*. Oxford: Oxford University Press

Code-switching is normal and expected with bilingual people. Bilingual children will use code-switching to vary their language. Children may speak Spanish with grandma, mix Spanish and English with parents, and speak only English with friends at school. Children may also code-switch to:

- Use a word/phrase that is not used in the other language
- Fill in a word from another language when the vocabulary word is unknown
- Quote
- Highlight group identity
- Keep information private
- Exclude someone from the discussion
- Change speaker role
- Add authority
- Show expertise

Code-switching in very young bilingual children may appear as language mixing. It is typical to hear your preschooler say, "Then we went to abuelita's para la fiesta." Children who are bilingual in two different modalities (speaking and sign) also code-switch. Your preschooler could come home from school and say, "Today we learned about" SCOTLAND. You should not be concerned with language mixing. Your child is showing the growth of more brain connections.

Learning many languages can support your child's language growth. Your child will have better thinking and problem-solving skills. They can bond to family and community members.

Simultaneous bilingual children use similar language patterns. These patterns are normal and are not signs of delay.

- They will have a high percentage of mixed utterances.
- They will be slow to separate the languages. These children will need time to realize they know two languages.
- One language may affect the other.
- They will avoid hard words and sentences for the weaker language.

Remember:

- A bilingual child is not two monolingual children stuck together.
- Your child can learn many languages and not be delayed or confused. Your child who is deaf or hard of hearing will need access to both languages to learn them.
- Even if your child is not fluent in both languages, they are still bilingual.
- Children with additional needs can learn multiple languages.

- Bullock, B., & Toribio, A. (Eds.). (2009). *The Cambridge Handbook of Linguistic Code-switching* (Cambridge Handbooks in Language and Linguistics). Cambridge: Cambridge University Press.
- Paradis, J., Genesee, F., & Crago, M. B. (2011). *Dual language development and disorders: a handbook on bilingualism and second language learning, second edition*. Paul H. Brookes Pub. Co.
- Peña, E. D., Gillam, R. B., Bedore, L. M., & Bohman, T. M. (2011). Risk for Poor Performance on a Language Screening Measure for Bilingual Preschoolers and Kindergarteners. *American Journal of Speech-Language Pathology*, 20(4), 302-314.

You should use your most comfortable language making sure your child can access it.

- Children acquire a lot of world knowledge at home.
- Children with strong home language skills will likely acquire more knowledge.
- Good language skills support your child's reading comprehension.
- Children with limited receptive and expressive skills in the home language may miss out. They will not have the world knowledge needed for reading.
- Children with good home language skills can understand their family's culture.

Children who are deaf or hard of hearing need access to language they will overhear/oversee. If your child is using visual language, be sure you are sharing your thoughts in a way they can learn. Children using visual supports or augmentative/alternative communication also need you to be sure you help them learn language.



Encouraging your multilingual child's language development:

- If your child has access, use your native language to communicate with your child.
- Play in your native language; be sure to include dancing, dress-up, games, and other creative ideas important to your culture.
- Read and tell stories in your native language.
- Look for local programs that support your child's use of language in their home language or organize play groups.
- At home, engage in everyday activities such as cooking together. Make dishes that celebrate your heritage.

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- <https://www.asha.org/advocacy/idea/idea-part-b-issue-brief-culturally-and-linguistically-diverse-students/>
- <https://bilinguistics.com>
- www.leadersproject.org/
- De Houwer, A., & Ortega, L. (Eds.). (2018). *The Cambridge Handbook of Bilingualism* (Cambridge Handbooks in Language and Linguistics). Cambridge: Cambridge University Press.
- Paradis, J., Genesee, F., & Rago, M. B. (2011). *Dual language development and disorders: a handbook on bilingualism and second language learning, second edition*. Paul H. Brookes Pub. Co.

Internationally Adopted Children

Children adopted from another country are sometimes referred to as second first-language learners. They are no longer exposed to their native language. They are learning the language of their adopted parents.

Internationally adopted children are more at risk for language disorders because of the abrupt change in language. Many of these children were raised in orphanages with reduced interaction and language exposure, which increases the possibility they may have missed the critical language learning years.

However, when compared with children who have not been adopted internationally, there are more language struggles with internationally adopted children. Therefore their language development should be closely monitored.

Older adopted children are at greater risk of delayed language. Other risks for delayed language can be:

- Children who had long stays in orphanages.
- Children that lived in poor conditions.
- Children that had limited human social interaction.
- Children with physical or mental health concerns before adoption.



Children are remarkably resilient, therefore international adoption itself is not a risk factor for poor language, academic, or socioemotional development

Tips for Parents:

- Work with an audiologist to understand your child's hearing and access to language.
- Read and talk with your child in your home language if they have access.
- Check to see if there are social groups that use your child's birth language in your area.
- Be patient.
- Read to your child every day, even with older children.
- Use pictures and gestures to help communicate at first.
- Find times your child can play with peers from your area or their school.

- <http://adoptmed.org/topics/language-development-in-internationally-adopted-children.html>
- <https://www.colorincolorado.org/article/top-tips-parents-speech-and-language-acquisition-internationally-adopted-children>
- Glennen, S. & Masters, M. G. (2002). Typical and atypical language development in infants and toddlers adopted from Eastern Europe. *American Journal of Speech Language Pathology*, Vol 11 pp 417-433. <http://ajslp.asha.org/cgi/content/short/11/4/41>).

Since each adopted child who is deaf or hard of hearing is unique, it is difficult to predict the impact of the preexisting factors on their language development. Their progress, speed of development, and fluency is affected by:

- Access to language in the critical early months/years.
- Level of interaction/socialization given in infancy and early childhood.
- Age of adoption.
- Birth/health factors.



If an internationally adopted child who is deaf or hard of hearing had access to language, has no additional concerns, and was adopted very young, they should learn spoken English or ASL very quickly. There will likely be little to no academic impact.



Language Evaluations for Multilingual Children

The best option for an evaluation of your bilingual child is working with a speech-language pathologist (SLP) fluent in both of your child's languages. Indiana is the Crossroads of America. There are over 275 languages in use. More than 112,000 Indiana students speak a language other than English at home. The state has several English dialects. A SLP fluent in several languages may not be available. Your second option is a bilingually-trained SLP when no one is fluent in the child's home language. This SLP is also a good choice if your child uses a different dialect. If your child only has a monolingual SLP available, best practice is for this SLP to consult with a bilingually-trained SLP.

- <https://www.in.gov/doe/grants/english-learning-and-migrant-education/>

Any evaluation should follow the current Individuals with Disabilities Act (IDEA).

https://www.asha.org/practice-portal/professional-issues/bilingual-service-delivery/#collapse_1

- <https://www.colorincolorado.org/article/language-and-older-adopted-child-understanding-second-language-learning>
- <https://www.asha.org/practice/multicultural/intadopt/>
- <http://www.mnsha.org/pdfs/TWM-Chapter-8-Appendix.pdf>
- <https://www.parents.com/parenting/adoption/international/language-acquisition-for-the-internationally-adopted-child/>

Clark, M. D., Baker, S., & Simms, L. (2019). A culture of assessment: A bioecological systems approach for early and continuous assessment of deaf infants and children. *Psychology in the Schools*, 57(3), 443–458.

Deaf Children with Additional Needs

Many children who are deaf and hard of hearing have additional needs. These needs may affect school performance. As a parent of a child with additional needs, you may be on a different journey than expected but the view is no less rewarding.

Parents of children who are deaf with additional needs may benefit from keeping in mind:

- Raising a deaf child with additional needs is a **journey**.
- Your child is **unique**. Your family's experience will be special. Your child will grow in their own way.
- Your child will **learn, grow, and change**.
- Your child can meet their optimum potential if you have a support team. The support team should have training specific to deaf children with additional needs.
- Seeking out support for your child and family early can help meet overall goals.
- You may feel overwhelmed. You can use an advocate to help you understand the systems and supports available to you.
- Your child will progress better when they are **understood** and **accepted**.

Deaf with additional needs is a term that describes children who are deaf and hard of hearing that have further differences. The additional needs are not related to your child's hearing levels. These needs impact your child's development in one or more areas. Some additional needs may include, but are not limited to:

- Syndromes
- Deafblind
- Autism
- Sensory processing
- Attention Deficit Hyperactivity Disorder
- Executive function
- Medical needs
- Specific learning disability
- Intellectual disability
- Behavioral and/or emotional challenges

Tips for developing language

- Continue to expect your child's language to grow.
- Pay attention to your child's learning style. Use their way of learning to teach language.
- Give your child time to respond; be patient.
- Allow your child to sign/talk/communicate.
- Repeat concepts you teach over and over; review what your child learned often.
- Sign/talk at a slow and steady pace. Pause often.
- Use pictures, role-play, drawings, props, etc. to teach language.
- Be open to other ways to communicate that may give your child a way to share their thoughts.
- Read to your child every day; use books that apply to your child's experiences:
 - <https://www.juliacookonline.com/>
 - <https://www.mother.ly/shop/the-best-books-for-your-toddlers-big-emotions>.
- Teach social skills directly.



Appropriate Evaluations for Deaf Children with Additional Needs

You can feel free to discuss your concerns with your support team. In order to create a plan of action, you and your support staff should:

- Consider possible risk factors.
- Review all previous evaluation information.
- If in school, review progress on goals.
- Collect data on your child's behavior and performance.
- Consult with additional professionals as needed.

Some possible causes for concern:

- Language delays that are not narrowing with therapy.
- Academic delays that are not responding to supports offered.
- Behavior differences.
- Attention struggles.
- Sadness.
- Isolation from class and peers.
- Clear changes from previous performance in language, academic, and/or behavior.
- Risk factors.

Some possible risk factors:

- Prematurity
- Low birth weight
- Birth injury
- Brain injury
- Sensory differences
- Chronic illness
- Oxygen deprivation
- Exposure to alcohol or drugs
- Malnutrition or neglect
- Neurological diagnosis and/or syndromes
- Life change (move, family death, etc.)



If you and your child's support team decides further evaluation is needed, take care to ensure:

- The evaluation is done by people who have training specifically for children who are deaf with additional needs.
- Linguistically and developmentally appropriate evaluations are used.

- CHARGE <https://www.chargesyndrome.org/>
- Gallaudet University <https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/deaf-students-with-disabilities.html>
- Raising and Educating Deaf Children With Multiple Challenges <http://www.raisingandeducatingdeafchildren.org/2014/04/01/educating-deaf-children-with-multiple-challenges/>
- Success for Kids with Hearing loss <https://successforkidswithhearingloss.com/for-professionals/hearing-loss-plus-additional-disabilities/>
- Understanding Dad <http://understandingdad.net/research2>
- Understood <https://www.understood.org/en>



SUPPORTS FOR LANGUAGE ACQUISITION

This section describes various opportunities for language learning and resources to support those approaches. The impact of hearing levels and various devices to assist with listening are also included. Links to resources for families to access more tools and websites to assist them on their journey are included as well.



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American Sign Language (ASL)

American Sign Language is a natural language that allows people who are deaf and hard of hearing to access information through vision. ASL is used in the United States and many parts of Canada, but it is not a universal language. ASL has its own rules of grammar. Grammar is not only expressed in sign order but also with facial expressions, body movements, and the shape, placement, and movement of the hands.

Just as with spoken languages, ASL has regional dialects that vary throughout the United States and Canada like spoken English (e.g., pop/soda). A person's dialect may show through how they produce sign, their signing space, degree of facial expressions, etc.



When children are learning American Sign Language (ASL), it is important that families learn ASL, too. Additionally, children will learn ASL quicker if they have opportunities to interact and socialize with peers and adults who are fluent users of ASL. For more information on ASL and bilingualism as a communication opportunity:

- <https://vl2.educ.ualberta.ca/>
- <https://www.vl2family.org/get-your-package-today>
- <https://www.handsandvoices.org/fl3/fl3-docs/maximize-visual-access-tips.pdf>

Vernon, M. (2005). Fifty Years of Research on the Intelligence of Deaf and Hard-of-Hearing Children: A Review of Literature and Discussion of Implications. *Journal of Deaf Studies and Deaf Education*, 10(3), 225-231.
<https://doi.org/10.1093/deafed/eni024>

Some opportunities to learn ASL through taking courses include:

- ASL NYC <https://asl NYC.com/>
- Gallaudet University online ASL courses <https://www.gallaudet.edu/asl-connect/asl-courses>
- Indiana Association of the Deaf - ASL courses <https://www.iadhoosiers.org/asl-courses>
- IUPUI ASL Class <https://www.iupui.edu/academics/degrees-majors/degree/american-sign-language-english-interpretation-bs-iupui-asleibs>
- Indy Language Center <https://www.indylanguagecenter.com/asl/index.html>
- Vincennes University ASL Class <https://www.vinu.edu/web/asl>
- Sign School <https://www.signschool.com/>
- Start ASL <https://www.startasl.com/>

Opportunities for children to learn sign language:

- American Society for Deaf Children online Deaf Mentor <https://deafchildren.org/sign-on/>
- Deaf Mentor Program <http://www.deaf-mentor.skihi.org/>
- Once Upon a Sign - ASL signed stories <http://us11.campaign-archive2.com/?u=5f5981615a94b38768c53edbf&id=55c403d012&e=c92131d686>
- You Tube ASL Stories ASL stories for young children <https://www.youtube.com/channel/UCYyRpJBseu43EojDdSUcSyA>
- For teens:
 - Deafverse- video game designed for teens to improve their signs www.deafverse.com



For Spanish-speaking families, some useful resources about ASL:

- <https://docs.google.com/document/d/119cuyTybfjq3Fkf457GbV75sswRWe278phB4YRmTTsU/edit#heading=h.1eg5v6hoopvn>
- <https://clerccenter.gallaudet.edu/national-resources/documents/clerc/HispanicFamilies-Espanol.pdf>
- <https://youtu.be/9Npl5B8YZaU>



Bilingual – Bicultural Education

One methodology for teaching children who are deaf and hard of hearing is Bilingual-Bicultural (bi-bi) education. A bi-bi program uses American Sign Language (ASL) as the first language for children who are deaf and hard of hearing. Written English is the child's second language and is taught at the same time as ASL. Children with access to speech also learn spoken English. For more information about bi-bi, see the National ASL and English Bilingual Consortium on Early Childhood Education; www.bilingualece.org

Online Resources:

- Auditory Technology and its Impact on Bilingual Deaf Education(2015) https://clerccenter.gallaudet.edu/national-resources/documents/clerc/odyssey/2015_issue/ODYSSEY_SPR2015_Mertes.pdf
- Bilingual Storybook Apps: An Interactive Reading Experience for Children(2015) https://clerccenter.gallaudet.edu/national-resources/documents/clerc/odyssey/2015_issue/ODYSSEY_SPR2015_HerzigMalzkuhn.pdf
- Bilingualism for Children Who Are Deaf or Hard of Hearing (2016) <http://www.raisingandeducatingdeafchildren.org/2016/01/11/bilingualism-for-children-who-are-deaf-or-hard-of-hearing-and-their-families/>
- Developing ASL Text in the Bilingual Classroom (2015) https://clerccenter.gallaudet.edu/national-resources/documents/clerc/odyssey/2015_issue/ODYSSEY_SPR2015_BaerOsbrink.pdf
- Evidence and Evolution: Research and Teachers' Intuition Lead to a Bilingual Program (2012) https://www.gallaudet.edu/Images/Clerc/articles/Odyssey_SPR_2012_Rhoten.pdf
- Indiana School for the Deaf <https://www.deafhoosiers.com/aboutus>
- Success in Two Languages: Focused Programming Provides On -Target Development for Maine Preschoolers (2017) https://clerccenter.gallaudet.edu/national-resources/documents/clerc/odyssey/2017_issue/ODYSSEY_2017-12_Hopkins.pdf
- Supporting Deaf and Hard of Hearing Preschool Students' Emerging ASL Skills: A Bilingual Approach (2017) https://clerccenter.gallaudet.edu/national-resources/documents/clerc/odyssey/2017_issue/ODYSSEY_2017-9_Mitchiner_Gough.pdf
- The "Why" And "How" of an ASL/English Bimodal Bilingual Program (2012) https://clerccenter.gallaudet.edu/national-resources/images/clerc/articles/Odyssey_SPR_2012_NussbaumScottSimms.pdf



Webcasts

- Dispelling Myths of Language Acquisition (2016) <https://clerccenter.gallaudet.edu/national-resources/learning/learning-opportunities/webcasts/dispelling-myths-of-language-acquisition.html>
- Language Learning Through Eye and Ear (2017) <https://clerccenter.gallaudet.edu/national-resources/learning/learning-opportunities/webcasts/language-learning-through-the-eye-and-ear-webcast.html>
- Maximizing Language Acquisition: ASL and Spoken English (2016) <https://clerccenter.gallaudet.edu/national-resources/learning/learning-opportunities/webcasts/maximizing-language-acquisition-webcast.html>
- What the Eyes Reveal About the Brain: Advances in Human Language Acquisition -Insights from Visual Language and Visual Learning (VL2) and the Brain and Language Laboratory for Neuroimaging (BL2) (2014) <https://clerccenter.gallaudet.edu/national-resources/learning/learning-opportunities/webcasts/what-the-eyes-reveal-about-the-brain-webcast.html>

Spoken Language

Spoken language is a term used to indicate language that is understood through listening and expressed using voice. Children who are deaf and hard of hearing need access to sound to develop spoken language. Most children who are deaf and hard of hearing will use personal amplification (e.g., hearing aids, cochlear implants, bone anchored hearing aids). Children need to develop auditory skills to develop spoken language skills.

A child using spoken English needs full access to language. You should find an audiologist that understands your child's education and learning needs.

Your child's providers and clinicians need to know auditory skill development as well as spoken language strategies. They need special training in hearing, language, and deaf education.

Children need to develop listening skills to learn to speak. Parents can keep track of how their child's listening skills are growing.

- First Years - Auditory Learning Guide providing auditory skills that are to be learned in the first four years of listening <https://www.psha.org/member-center/pdfs/auditory-learning-guide.pdf>
- Integrated Scales of Development <https://www.cochlear.com/uk/en/home/ongoing-care-and-support/rehabilitation-resources/scales-of-development>
- Success for kids with hearing loss auditory skill hierarchy resource <http://successforkidswithhearingloss.com/wp-content/uploads/2016/08/Auditory-Skill-Hierarchy.pdf>
- Track a Listening Child - guide for language, listening and self-advocacy development [https://www.cochlear.com/0f576aaf-45ce-4256-9b3b-e772663bf661/general_rehabilitationresources_earlyintervention_trackalistingchild\(tlc\)_en_3.31mb.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE-0f576aaf-45ce-4256-9b3b-e772663bf661-15rD6NH](https://www.cochlear.com/0f576aaf-45ce-4256-9b3b-e772663bf661/general_rehabilitationresources_earlyintervention_trackalistingchild(tlc)_en_3.31mb.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE-0f576aaf-45ce-4256-9b3b-e772663bf661-15rD6NH)

To learn more about spoken language for children who are deaf and hard of hearing:

- Cochlear Implant Education Center at the Clerc Center (CIEC) <https://clerccenter.gallaudet.edu/national-resources/resources/our-resources/cochlear-implant-education-center.html>
- Educational Planning for Students with Cochlear Implants <https://clerccenter.gallaudet.edu/national-resources/learning/learning-opportunities/webcasts/educational-planning-for-students-with-cochlear-implants-webcast.html>
- Gallaudet Clerc Center Spoken Language Resources <https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/spoken-language.html>
- John Tracy Clinic <https://www.jtc.org/pals/en/course-lists/>
- John Tracy Clinic <https://www.jtc.org/ideas-and-advice/>
- Students who are Deaf and Hard of Hearing and Use Sign Language: Considerations and Strategies for Developing Spoken Language and Literacy Skills https://clerccenter.gallaudet.edu/national-resources/documents/clerc/Nussbaum_Scott%5B1%5D.pdf
- Students with Cochlear Implants: Guidelines for Educational Program Planning <https://clerccenter.gallaudet.edu/national-resources/resources/our-resources/publications/students-with-cochlear-implants.html>
- The Listening Room <https://thelisteningroom.com/>

Listening and Spoken Language

One method for learning spoken language is the Listening and Spoken Language (LSL) approach. This method teaches deaf and hard of hearing children to use spoken language through listening.

The goal for your child is to wear their technology all waking hours. Use of technology to access the full speech sound spectrum is key to this approach. This amount of access plays a role with your child's progress using the LSL approach. Your child's LSL specialist will coach and model LSL strategies with you. Parent participation is another key to the success of this approach.



Some things you will learn during coaching sessions include:

- Directing your child to listen.
- Pointing out a sound and name it.
- Using audition first.
- Expecting a response.
- Describing actions and thoughts.
- Creating an auditory sandwich.
- Asking "What did you hear?".
- Making it easier for your child to listen.
- Expanding your child's communication.

<https://www.infanthearing.org/ebook-educating-children-dhh/chapters/7%20Chapter%207%202020.pdf>

Listening and Spoken Language (LSL) Specialists are either teachers of the deaf, speech-language pathologists, or audiologists who are specially trained and certified to develop listening and spoken language for children who are deaf or hard of hearing. An LSL Specialist follows developmental models in listening, language, speech, social, and thinking skills. LSL Specialists support and coach parents and caregivers to learn how to teach their children spoken language naturally at home. They may also work in school settings, especially at preschool and elementary levels, to develop spoken language skills that support school-age reading and academics.

To learn more about LSL:

- AG Bell <http://www.agbell.org/>
- Hear Indiana <http://hearindiana.org/>
- Hear to Learn <http://www.hearlearn.org/in>
- Hearing First -Listening and Spoken Language (LSL) <https://hearingfirst.org/>
- Laurent Clerc National Deaf Education Center Info to Go <https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/spoken-language.html>
- Oír Para Aprender <http://oirparaaprender.org/>
- St. Joseph Institute for the Deaf <https://sjid.org/indianapolis->

Visual Approaches

Visual approaches are:

- Cued American English/ Cued Speech (CS)
- Manually Coded English (MCE)/Sign Systems
<https://www.cdc.gov/ncbddd/hearingloss/parentsguide/building/manual-english.html>(CDC)
 - ◆ Conceptually Accurate Signed English (CASE)
 - ◆ Pidgin Signed English (PSE)
 - ◆ Seeing Essential English (SEE 1)/Morphemic Sign System (MSS) <https://seecenter.org/>
 - ◆ Signing Exact English (SEE 2)

Cued American English/Cued Speech is a visual mode of communication in which mouth movements of speech combine with “cues” to make the sounds (phonemes) of traditional spoken languages look different. Cued speech has been adapted to 56 languages and major dialects. It does not require the use of speech or voice to communicate clearly. Cued speech is often used to assist with reading comprehension.

- Cue College <http://www.cuecollege.org/>
- CueSign Inc. <https://www.cuesign.org/>
- Daily Cues <http://www.dailycues.com/>
- National Cued Speech Association www.cuedspeech.org

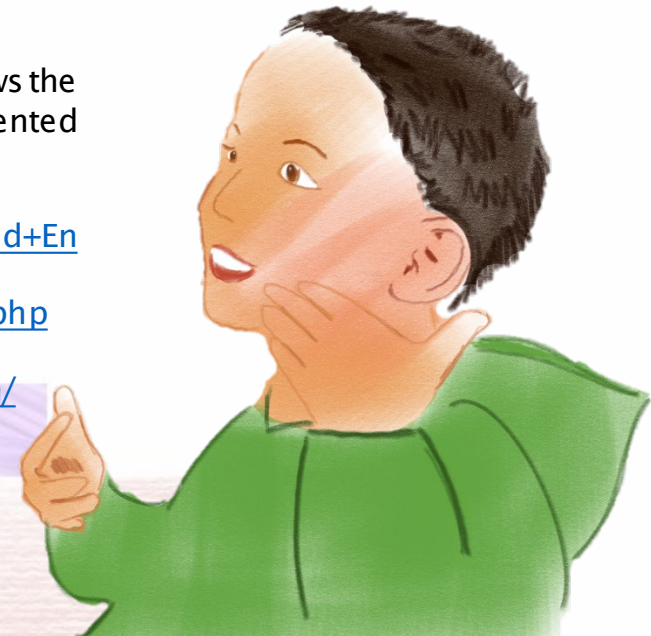


Manually Coded English is a tool that follows the grammar of spoken English. It is generally presented at the same time a person is speaking.

- Everything2 Manually Coded English <https://everything2.com/title/Manually+Coded+English>
- Sign.Com Au <http://www.sign.com.au/index.php>
- Signing Exact English <https://www.signingexactenglish.com/>

Communication opportunities:

- <http://www.gallaudet.edu/clerc-center.html>
- <http://www.handsandvoices.org/comcon/index.html>
- <https://www.infantheating.org/ebook-educating-children-dhh/chapters/2%20Chapter%202%202020.pdf>
- <https://ncbegin.org/communication-options/>



Augmentative/ Alternative Communication (AAC)

Some children who are deaf and hard of hearing may have needs that require additional supports to learn language. Augmentative/Alternative Communication or AAC can be used at any age. AAC can refer to systems used to develop language without technology (e.g., picture system). The term AAC can also mean using electronic devices that generate speech to communicate. There are a variety of options available for communication, including switches and eye gaze systems. A child can use AAC alone to communicate or combined with speech and/or sign. Some children who begin learning language with AAC may not need the support later. Some children will use AAC as their way to express language throughout their lives. To learn more about language and AAC: <http://www.everyonecommunicates.org/methods/tech.html>

Other useful resources to explore AAC:

- AAC Institute www.aac institute.org
- Aided Language Stimulation <https://youtu.be/flFNMky22-U>
- Angelman Syndrome Foundation <https://www.angelman.org/resources-education/communication-training-series/>
- Easterseals Crossroads Assistive Technology Services – lending library for AAC equipment https://www.eastersealstech.com/device_loan_library/
- Indiana Resource Center for Autism IU Bloomington <https://www.iidc.indiana.edu/pages/visualsupports>
- Promoting Achievement through Technology and Instruction for all Students <https://www.patinsproject.org/>
- United States Society for Augmentative & Alternative Communication <https://ussaac.org>

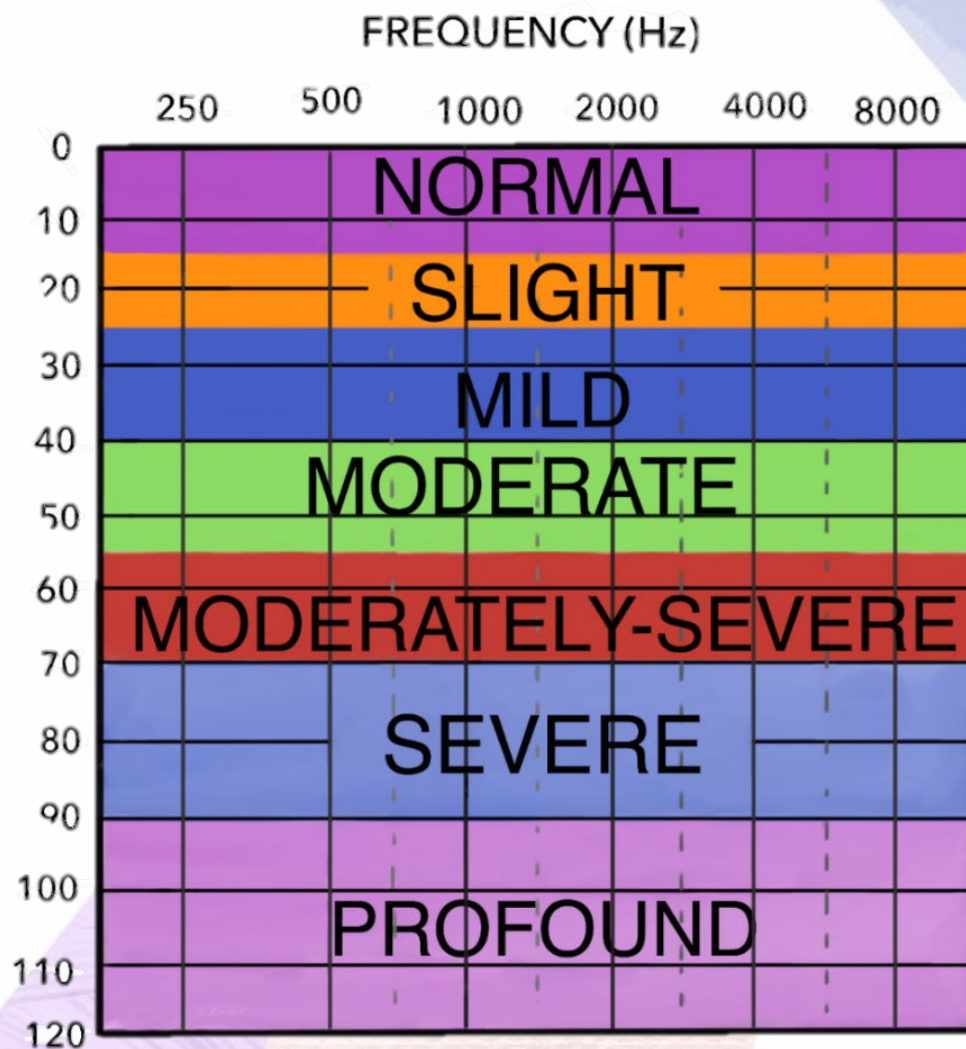


Hearing Levels - Degrees of Hearing Loss

The impact different hearing levels have on a child varies greatly. The impact may be related to the degree of hearing loss and how it affects a person's ability to hear speech. The amount of hearing loss is shown by **hearing thresholds** that are marked on an **audiogram**. A hearing threshold is the softest level a person can hear a specific sound. Thresholds are usually measured for pure tones or speech. Thresholds marked toward the top of an audiogram indicate responses to softer sounds and those toward the bottom indicate louder sounds. Hearing thresholds are described as ranging from slight to profound.

An **audiogram** is a graph that shows the softest sounds a person can hear at different pitches or frequencies.

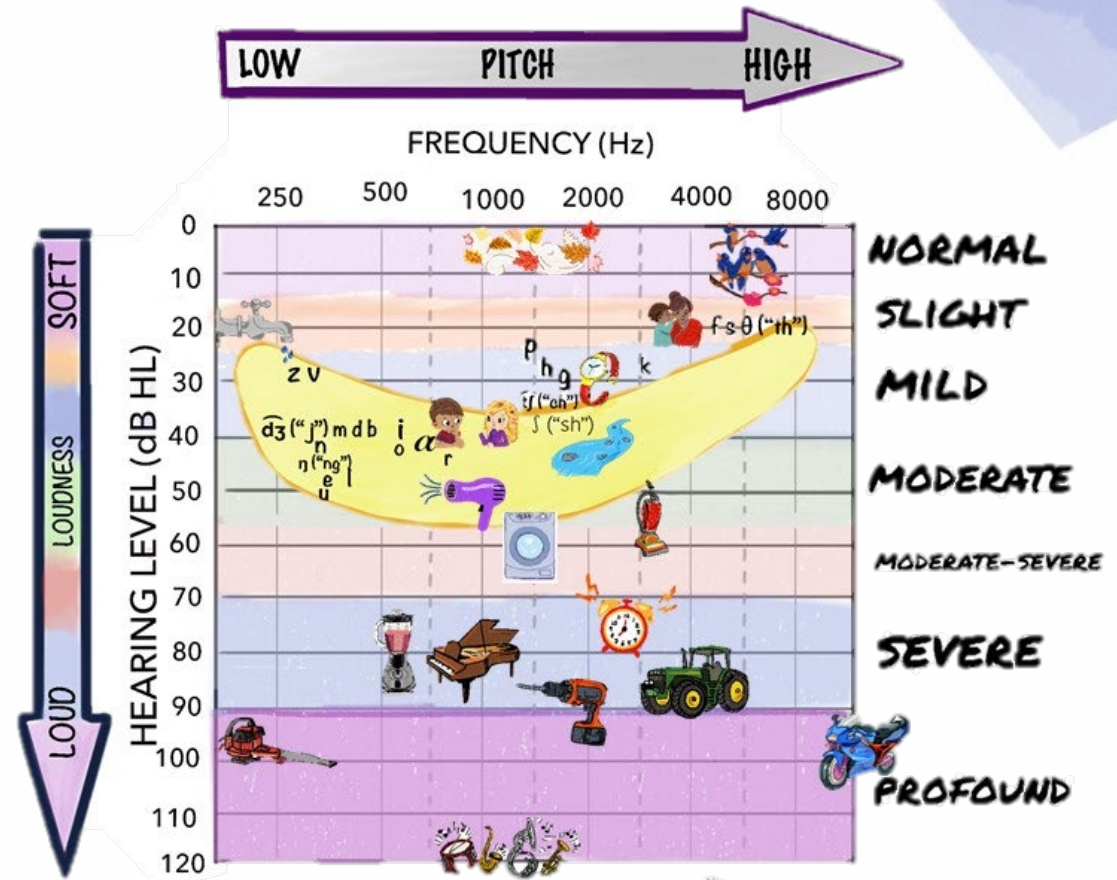
The **hearing threshold** is the sound level below which a person's ear is unable to detect any sound.



Hearing Loss - Impact

The impact of the hearing loss is often predicted by the degree, configuration, and amount of speech information that can be heard.

- Children who have hearing levels in the mild range generally have difficulty hearing soft speech and speech from a distance.
- Children who have hearing levels in the moderate range generally have difficulty hearing speech at a comfortable voice level, even when the person speaking is close to them.
- Children who have hearing levels in the severe range may only hear very loud speech and environmental sounds.
- Children who have hearing levels in the profound range may hear little without personal hearing devices.



To better understand how to relate this familiar sounds audiogram to your child's hearing levels: <https://s3.amazonaws.com/www.jtc.org/Ideas-Advice/hearing-loss/New+Audiogram+of+FS+English+2019.pdf>

Amplification - Purpose

Amplification allows children who are deaf and hard of hearing to hear environmental sounds and speech at softer loudness levels than possible without assistance. To develop listening and spoken language, consistent auditory access is essential. Without amplification, children may miss important auditory information that helps them to learn about their environment and communicate with people in their lives. For children who are deaf and hard of hearing, auditory access may be provided through various types of amplification.

Amplification consists of hearing aids (traditional or bone-anchored), cochlear implants, and other assistive technology, which increase the loudness or the individual's access to sound. Depending on the type and severity of a child's hearing loss, a specific style of amplification may be recommended.

Amplification - Types

If a child has a long-standing hearing loss with typical outer/middle ear structures, an audiologist may recommend:

Traditional Hearing Aid: device designed to amplify (make louder) sounds and send them down the ear canal. Traditional hearing aids are placed behind the pinna (outer ear). The amplified sounds travel through the typical hearing system (ear canal, ear drum, middle ear space, cochlea).

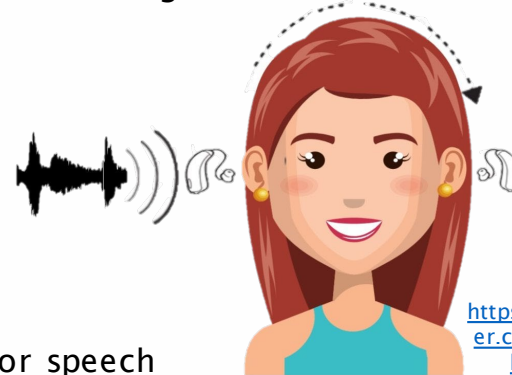


Amplification - Types

If a child has a severe to profound hearing loss or poor speech understanding in *one* ear with normal hearing in their other ear, an audiologist may recommend the following.

Contralateral Routing of Signal (CROS): a device designed for individuals with normal hearing in one ear and little to no benefit from a hearing aid in the other ear. One device (transmitter) is worn on the ear with hearing loss; another device (receiver) is worn on the ear with normal hearing. Sound is sent from the transmitter to the receiver in the normal-hearing ear. All sound is presented to the normal-hearing ear. CROS does not restore hearing to the ear with hearing loss.

CROS may be recommended for individuals with single-sided deafness.



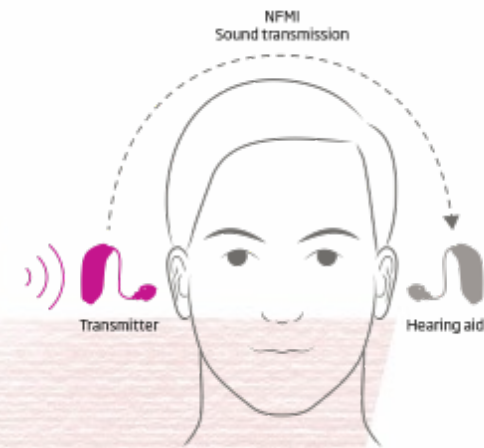
Single Sided Deafness (SSD): unaidable hearing loss in one ear and normal hearing in the opposite ear; ear may be considered unaidable due to degree/severity of hearing loss or poor speech perception.

<https://www.hearinginsider.com/what-is-a-cros-or-bicross-hearing-aid>

If a child has a severe to profound hearing loss or poor speech understanding in *one* ear with a hearing loss in his or her other ear, an audiologist may recommend the following.

BiCROS: like CROS, one device (transmitter) is worn on the ear that receives little to no aided benefit; another device (receiver/hearing aid) is worn on the better-hearing ear. Sound is sent from the transmitter on the poorer hearing ear. The device on the better-hearing ear receives the signal and amplifies it to an audible level. It is both a hearing aid and a receiver. All sound is presented to the better-hearing ear.

BiCROS may be recommended for individuals with bilateral hearing loss when one ear is unaidable.



<https://www.oticon.com/solutions/cros>

Amplification - Types

If a child has hearing loss caused by abnormal outer/middle ear structures (microtia/atresia) or function (recurrent middle ear fluid), an audiologist may recommend the following.



Bone Anchored Hearing Aid (BAHA): this device is worn on the mastoid (bony space behind the ear). The bone conduction hearing aid converts sound to vibrations. These small vibrations are sent through the bone directly to the cochlea, without traveling through the ear canal or middle ear space.

The audiologist may set this device for placement on a different position on the head.

This device may also be recommended for single-sided deafness.

If a child has hearing loss and does not receive significant benefit from traditional hearing aids, an audiologist may recommend the following.

Cochlear Implant: this device sends sound from a speech processor worn behind the ear to an electrode array that is surgically placed inside the cochlea. The electrode array electrically stimulates the hearing nerve, without sound traveling through the ear canal, middle ear, or inner ear.



Literacy

Your child who is deaf or hard of hearing needs to develop good literacy skills. Several resources are available with tools to help you teach your child to read.

Children who read well have parents who read to them every day, no matter how old. When reading to a child who is deaf or hard of hearing, some tips include:

- Pause to allow your child to look at the pictures before reading. Wait for your child to look up for visual cues (lip reading, cueing, or signing).
- Prop the book so your hands are free to point, gesture, sign, etc.
- Sit so you are eye level with your child.
- Use lively facial expressions and sign/voice to keep your child's interest.
- Sign/talk about vocabulary within the context of the story.
- For younger children, read the same story all week.



Visual Phonics is a tool that provides handshapes which give a visual representation of phonics used in reading. When learning to read, some students who are deaf and hard of hearing benefit from pairing sounding out an unknown word with a handshape cue. <http://seethesound.org/>

- Advanced Bionics – Literacy strategies for parents to use with young children <https://www.advancedbionics.com/content/dam/advancedbionics/Documents/libraries/Tools-for-Toddlers/development-of-hearing-speech-language/Literacy-Strategies.pdf>
- Described and Captioned Media Program (DCMP) <https://dcmp.org/>
- Hands and Voices
 - https://handsandvoices.org/fl3/fl3-docs/parent-take-aways/parenttake-aways_02-early-literacy.pdf
 - <https://handsandvoices.org/fl3/topics/lang-lit-soc-development/literacy.html>
 - https://www.handsandvoices.org/fl3/fl3-docs/parent-take-aways/parenttake-aways_02-early-literacy.pdf
- Hearing First
 - <https://www.hearingfirst.org/listening-reading-connection/reading-aloud>
 - <https://www.hearingfirst.org/listening-reading-connection/early-start-to-reading>
- Laurent Clerc National Deaf Education Center Info to Go: General Considerations to Support Literacy Development <https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/literacy/strategies-to-support-literacy.html>
- Laurent Clerc National Deaf Education Center Info to Go: Literacy <https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/literacy.html>
- Med-el: 10 Tips for Reading to Your Child Cochlear Implant Recipient <https://blog.medel.com/10-tips-reading-child-cochlear-implant-recipient/>
- VL2 Language and Literacy <https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/asl/summary-vl2-research-briefs.html>

Self-Advocacy and Self-Esteem

Children who are deaf and hard of hearing need to advocate for their own access needs as they grow. Some resources to help parents track self-advocacy skills include the following.

- Iowa's Expanded Core Curriculum for Students who are Deaf or Hard of Hearing
<https://educateiowa.gov/documents/deaf-and-hard-hearing-education/2020/03/expanded-core-curriculum-ecc-students-who-are-deaf>
- Minnesota Compensatory Skills Checklist for Students with Hearing Loss – a resource for track a student's self-advocacy skill development in a variety of domains <http://bit.ly/2GpgSN6>
- Student Expectations for Advocacy & Monitoring (SEAM) Listening and Hearing Technology – a checklist to track students' self-advocacy as it relates to technology and interpreting needs
<http://successforkidswithhearingloss.com/wp-content/uploads/2011/08/SEAM-for-School-Success.pdf>
- Success for Kids Self-Advocacy for Students who are Deaf or Hard of Hearing
<http://successforkidswithhearingloss.com/wp-content/uploads/2011/12/Lesson-1.pdf>



Children who are deaf and hard of hearing perform better academically when they have positive self-esteem and good social-emotional health. Children feel good about themselves when they feel like they fit in with a group. They perform better in school when they are not isolated and have a strong group of friends with whom they can communicate with directly. In addition to learning to accept and celebrate their uniqueness, the ability to socialize with peers who are deaf and hard of hearing is greatly beneficial.

Opportunities for interaction with peers who are deaf and hard of hearing

- ★ Deaf Youth Sports Festival, Inc.
<https://www.mdoyouth.org/>
- ★ Gallaudet University – year-round programs for youth to participate or join <https://www.gallaudet.edu/youth-programs>
- ★ Indiana Association of the Deaf – Facebook page that will post community events <https://www.facebook.com/IADeafHoosiers/>
- ★ Indiana Deaf Camp– Summer camp in northern Indiana that uses ASL <http://indeafcamps.org/>
- ★ Laurent Clerc National Deaf Education Center – list of summer camps nationwide
<https://clerccenter.gallaudet.edu/national-resources/info/info-to-go/national-resources-and-directories/summer-camps.html>
- ★ Listening and Spoken Language Camp
<http://www.hearindiana.org/camp>
- ★ National Technical Institute for the Deaf/ Rochester Institute of Technology – techboyz camp and techgirlz camp for boys or girls entering 7th, 8th, or 9th grade who are interested in science, technology, engineering, and math
<https://www.rit.edu/ntid/techboyz/>
<https://www.rit.edu/ntid/techgirlz/>

Early Intervention

Your child who is deaf or hard of hearing can receive support through the Individuals with Disabilities Act (IDEA), Part C (early intervention). <https://www.in.gov/fssa/4655.htm>

Some resources to help you with the First Steps journey are below. <https://clerccenter.gallaudet.edu/national-resources/info/#.~:text=Welcome%20to%20Info%20to%20Go,deaf%20or%20hard%20of%20hearing.>



Early language planning information

- Communication Planning Guide for Students Who Are Deaf or Hard of Hearing (Outreach Center for Deafness and Blindness, Ohio Center for Autism and Low Incidence) <https://deafandblindoutreach.org/communication-planning-guide-hh>
- https://www.handsandvoices.org/resources/pubs/Final_8-30-2017.pdf
- Making a Plan: IFSP Considerations for children who are Deaf and Hard of Hearing (CDC) <https://www.cdc.gov/ncbddd/hearingloss/freematerials/planforyourchild.pdf>
- The Radical Middle (DHH) <http://radicalmiddledhh.org/>
- Tools for Developing Communication Plans: Louisiana https://www.louisianabelieves.com/docs/default-source/academics/tools-for-developing-communication-plans.pdf?sfvrsn=48198c1f_12

Online resources:

- <https://www.agbell.org/Families/Early-Intervention>
- <https://www.babyhearing.org/language-learning/how-early-intervention-helps>
- Early Intervention Network: Supporting Linguistic Competence for Children Who Are Deaf or Hard of Hearing <https://clerccenter.gallaudet.edu/national-resources/clerc-center-sites/early-intervention-network-supporting-linguistic-competence-for-children-who-are-deaf-or-hard-of-hearing.html>
- https://www.infanthearing.org/ehdi-ebook/2020_ebook/18%20Chapter18EarlyIntervention2020.pdf
- Setting Language in Motion: Family Supports and Early Intervention for Babies Who are Deaf and Hard of Hearing (2016) <https://www.clerccenter.gallaudet.edu/national-resources/micro-sites/setting-language-in-motion/eng/index.html>



School Age



Some tools that may help you with the school journey are included in the special education law section of this resource. You may also want to see:

- Advanced Bionics Tools for Schools a resource for teachers for activities and information <https://advancedbionics.com/sg/en/home/support/tools-for-schools.html>
- Boston Children's Hospital Deaf and Hard of Hearing Program Resources <http://www.childrenshospital.org/centers-and-services/programs/a--e/deaf-and-hard-of-hearing-program/patient-resources>
- Charting the Life Course Framework <https://www.life coursetools.com/>
- Emergency Evacuation Planning Guide for People with Disabilities https://www.in.gov/isdh/files/Emergency_Evacuation_Planning_Guide_for_People_with_Disabilities.pdf
- Supporting Success for Children with Hearing Loss - resources for parents and educators, including transition and communication strategy materials <http://successforkidswithhearingloss.com/>

If your child needs an interpreter to provide communication access, there are resources to find support. To read the Indiana Department of Education's information on Educational Interpreters:

<https://www.in.gov/doe/educators/educator-licensing/educational-interpreter-certificate-applicants/>

Other interpreting resources:

- Indiana Family and Social Services Administration, Deaf & Hard of Hearing Services - This site has an extensive list of resources for interpreting services, interpreted events, and social opportunities for deaf and hard of hearing residents of the state of Indiana www.dhhs.in.gov.
- Classroom Interpreting; Boystown - Supports educational teams K-12 supporting deaf and hard of hearing students who use educational interpreters to access education and social interaction <https://www.classroominterpreting.org>.
- Classroom Interpreting For Students Who are Deaf or Hard of Hearing; Laurent Clerc National Deaf Education Center - A series of guides for parents, professionals, and students <https://clerccenter.gallaudet.edu/national-resources/resources/our-resources/publications/classroom-interpreting-for-students-who-are-deaf-or-hard-of-hearing.html>



Eventually, your child will progress through school and become an adult. It is useful to meet the family's goals for their child if thoughts to the future occur earlier rather than later during their child's education. Families can set goals for the future using person-centered planning (PCP). In other words, determining hopes and objectives and mapping the steps needed to meet those goals. For more information on PCP: <https://www.pacer.org/transition/learning-center/independent-community-living/person-centered.asp>
http://mn.gov/mnddc//extra/publications/choice/Its_My_Choice.pdf



Some resources that may help with transition:

- Deaf and Hard of Hearing Services <https://www.in.gov/fssa/ddrs/2637.htm>
- Disability Rights ADA and higher education information <https://www2.ed.gov/about/offices/list/ocr/transition.html>
- Indiana Secondary Transition <https://instrc.indiana.edu/>
- Indiana State Department of Health secondary transition resource manual http://www.in.gov/isdh/files/Indiana_Secondary_Transition_Resource_Manual.pdf
- Milestones Autism Resources- General self-advocacy skills and link to life binder to assist with successful transition <http://milestones.org/individuals-with-asd/self-advocacy/>
- National Deaf Center- a transition resource for deaf or hard of hearing teens to assist with moving from high school to vocation or college www.nationaldeafcenter.org
- Phonak Guide to Access Planning Checklist of skills needed for transition into post-secondary life <https://www.phonak.com/us/en/support/children-and-parents/planning-guide-for-teens.html>
- The Royal Children's Hospital Melbourne- a Healthcare Skills Checklist providing information on what students will need to learn in order to manage their own health as an adult http://www.rch.org.au/uploadedFiles/Main/Content/transition/Adolescent_Transition_checklist_1.pdf
- Transition portfolio Guidance Document https://docs.google.com/document/d/1eqpW_aOOzgl1iy4R957WpPGPy7n7oWpbBDaxZc7syFXQ/edit
- University of Minnesota Deaf/Hard of Hearing Post-Secondary Competency Skills Checklist <http://www.cehd.umn.edu/DHH-Resources/Transition-Guide/resources/Post%20SecondaryCompetency%20Skills.pdf>
- Vocational Rehabilitation <https://www.in.gov/fssa/ddrs/2636.htm>



Other Supports

You can find the most current information on the Center website: www.cdhhe.isdh.in.gov.

Indiana resources for individuals who are deaf and hard of hearing:

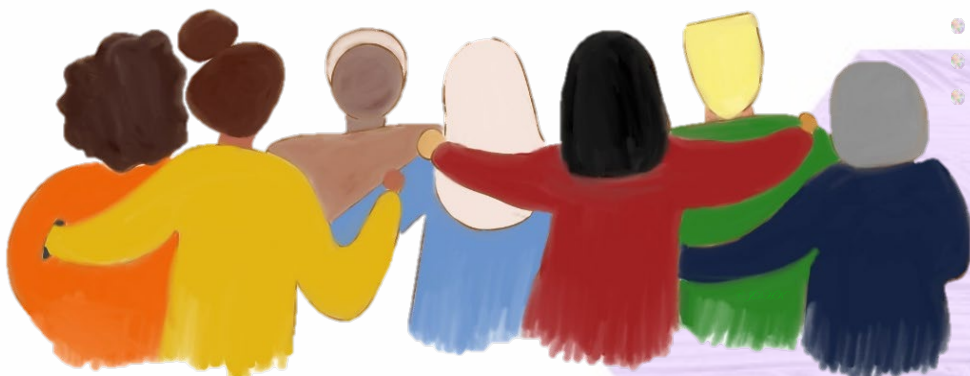
- <https://www.in.gov/fssa/ddrs/rehabilitation-employment/deaf-and-hard-of-hearing/>
- https://www.in.gov/isdh/files/Indiana_Family_Resource_Guide.pdf
- https://www.in.gov/isdh/files/How_hearing_loss_is_diagnosed_in_infants_and_children.pdf
- https://www.in.gov/isdh/files/Descriptions_of_Hearing_Loss.pdf
- https://www.in.gov/isdh/files/Services_for_Children_with_Hearing_Loss.pdf
- <https://www.in.gov/isdh/files/Risk%20Factor%20Information%20Progressive%20Hearing%20Loss.pdf>
- <https://www.in.gov/isdh/files/Comprehensive%20and%20Limited%20Audiology%20Provider%20Facilities.pdf>
- <https://www.haapindiana.org/>

Indiana parent and support organizations:

- About Special Kids
 - <https://www.inf2f.org/fact-sheets.html>
 - <https://www.inf2f.org/espantildeol.html>
- Hands & Voices
 - Indiana <http://www.inhandsandvoices.org/>
 - National <http://www.handsandvoices.org/>
 - Spanish <https://www.handsandvoices.org/resources/espanol/index.htm>
- Hear Indiana <http://hearindiana.org/>
- IN*Source
 - <http://insource.org/>
 - <http://insource.org/espanol/>

National parent and support organizations:

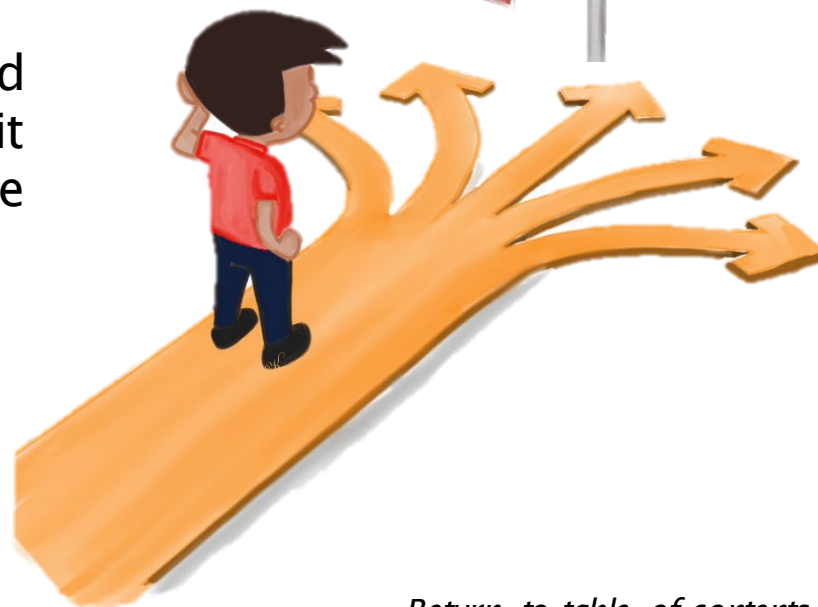
- AG Bell Family Resources
 - <https://www.agbell.org/Families/Family-Resources>
- American Society for Deaf Children
 - <http://www.deafchildren.org/>
- Baby Hearing Parenting and Support
 - <https://www.babyhearing.org/parenting>
 - <https://www.audiciondelbebe.org/>
- Gallaudet Parent Advocacy App
 - <https://www.gallaudet.edu/parent-advocacy-app>
- Hearing First <https://hearingfirst.org/>
- My Deaf Child <https://www.mydeafchild.org/#welcome>
- National Association of the Deaf www.nad.org





LAWS FOR CHILDREN WHO ARE DEAF AND HARD OF HEARING

This section includes laws and best practice guidance as it pertains to children who are deaf and hard of hearing.



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Laws and Policies for Children who are Deaf and Hard of Hearing

Americans with Disabilities Act of 1990 (ADA) :

- Civil Rights law
- Forbids disability discrimination
- For any person in public and private places <https://www.ada.gov/>

Section 504 of the Rehabilitation Act of 1973:

- Civil Rights law
- Forbids disability discrimination
- For both students and teachers at public and private schools that receive government funding <https://www2.ed.gov/about/offices/list/ocr/504faq.html>

Individuals with Disabilities Education Act (IDEA):

- Federal Education funding law
- Entitles every child with a disability to a Free Appropriate Public Education (FAPE)
- Part C program is for children ages birth through 3 years. In Indiana, called First Steps
- Part B section for children over 3 years. Indiana's law is called Article 7
 - <https://sites.ed.gov/idea/>
 - <https://www.in.gov/doe/students/special-education/laws-and-resources/>

Family Education Rights and Privacy Act (FERPA):

- Confidentiality law
- Prohibits all students' school records from being shared without parent permission

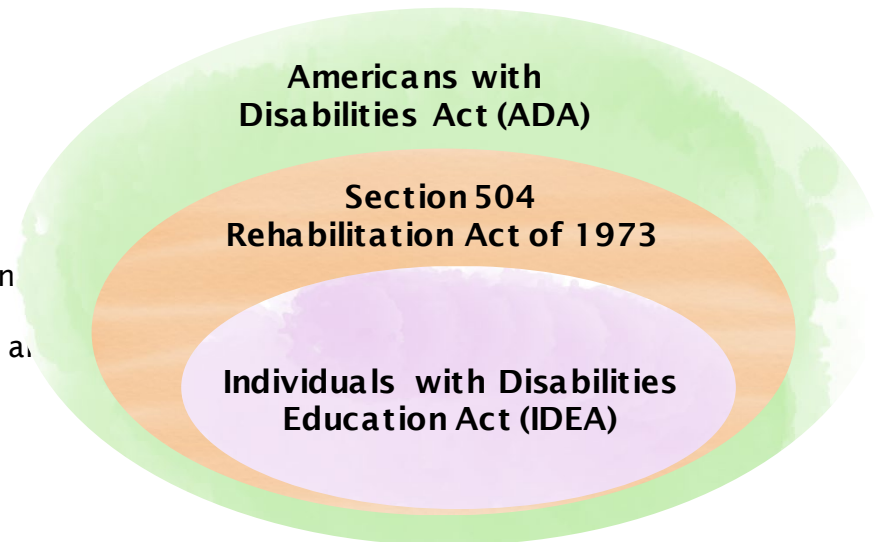
All the laws work together to make sure your child who is deaf or hard of hearing is fully able to participate in public schools. Public schools, (including the Indiana School for the Deaf) must make sure that communication with students "with hearing, vision or speech disabilities is as effective as communication with all other students."

–As stated in a Dear Colleague letter sent to all states Department of Education from the U.S. Department of Justice and the U.S. Department of Education, Nov. 12, 2014

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

<https://clercenter.gallaudet.edu/national-resources/info/info-to-go/legislation-and-policies/laws-impacting-students.html>

Family Education
Rights and Privacy
Act (FERPA)



Indiana's Early Hearing Detection and Intervention (EHDI) Mandate

Indiana Code 16-41-17-2 states that "...every infant shall be given a physiologic hearing screening examination at the earliest feasible time for the detection of hearing loss."

At birth, your child received the Universal Newborn Hearing Screening (UNHS). Your child was referred for a hearing test

Birth facilities and hospitals are required to report screening results and referral information to the EHDI department at the Indiana State Department of Health each month.

Your child's hearing levels are confirmed by an audiologist

Diagnostic Audiological Evaluation form (DAE) sent to Early Hearing Detection and Intervention (EHDI)

DAE shared with CDHHE Network

Your child is referred to Indiana's Early Intervention system (First Steps)

Referral to the CDHHE Network

Your family will get services that help meet your desired goals. *This should happen before your child is 6 months old, per EHDI goals*

Audiologists are required to report children who are diagnosed or found to be deaf and hard of hearing to the EHDI program. They submit a Diagnostic Audiological Evaluation (DAE).

Some children are found when they are older for various reasons:

- Lack of follow up from Universal Newborn Hearing Screening (UNHS)
- Late onset hearing loss due to illness or trauma
- Hearing loss that progresses overtime

The phrase or term **deaf or hard of hearing (DHH)** includes all degrees and types of hearing levels outside of the normal hearing range. It applies to children and adults with any age of onset.

Process for Getting Early Intervention Services

1 Your First Steps referral is given to a Service Coordinator (SC). Your SC will contact you to schedule a meeting.

2 At the meeting with the SC, they will start the paperwork needed to enroll your family in First Steps. You may have a staff member there to learn about potential services and specialists.

3 First Steps schedules an evaluation that will occur in your home.

4 Your child's Individualized Family Service Plan (IFSP) is written for services. These services are designed to meet your family's desired outcomes. Outcomes are also based on the evaluation findings and language needs.



A doctor needs to sign the initial IFSP

Early Intervention (EI) is the services and supports that are available to babies and young children up to three years old. These are given to children and their families that have developmental delays. Services may include Audiology, Developmental Therapy- DHH, Parent Education (Parent Advisor), Speech-Language Therapy, Deaf Mentor services, Occupational Therapy, Physical Therapy. The services are based on the needs of the child and family. Indiana calls their EI Program, First Steps.

<https://www.in.gov/fssa/4655.htm>

A **Service Coordinator (SC)** is your one point of contact for all services through First Steps. Your SC can help identify resources in your community and coordinate transition.

Children identified as deaf and hard of hearing are eligible for First Steps and can receive services. These children are at risk for developmental delays. They need specialized early services.

Starting Early Intervention Services Through Indiana's First Steps Program

A First Steps assessment is family-directed. It will reveal your concerns. It can help you find resources and set priorities for your child. You can choose to participate in a First Steps evaluation.

Your child's evaluation and initial IFSP will occur within 45 days of the referral. It will include several professionals. Providers will come to your home and look at your child's skills in all areas. The providers are trained and can use their clinical judgment. They will review health and audiology data. The process will meet your child's unique needs. It will identify the services your child needs to meet your goals.

The assessment must:

- Be conducted by trained people using proper methods and processes.
- Contain information gotten through family interview.
- Include the family's description of its resources, priorities, and concerns.
- Focus on supporting the child's development.
- Be given in the language of the home.



Individualized Family Service Plan (IFSP)

When the evaluation process is finished, you will have an IFSP meeting. Your IFSP paperwork will have:

- What type of services your child will receive.
- How often each service will happen (frequency).
- How long each service will be (length of sessions).
- Where the services will happen (location).
- What you will pay in exchange for services (sliding scale).
- When the services will start.
- Goals and benchmarks.

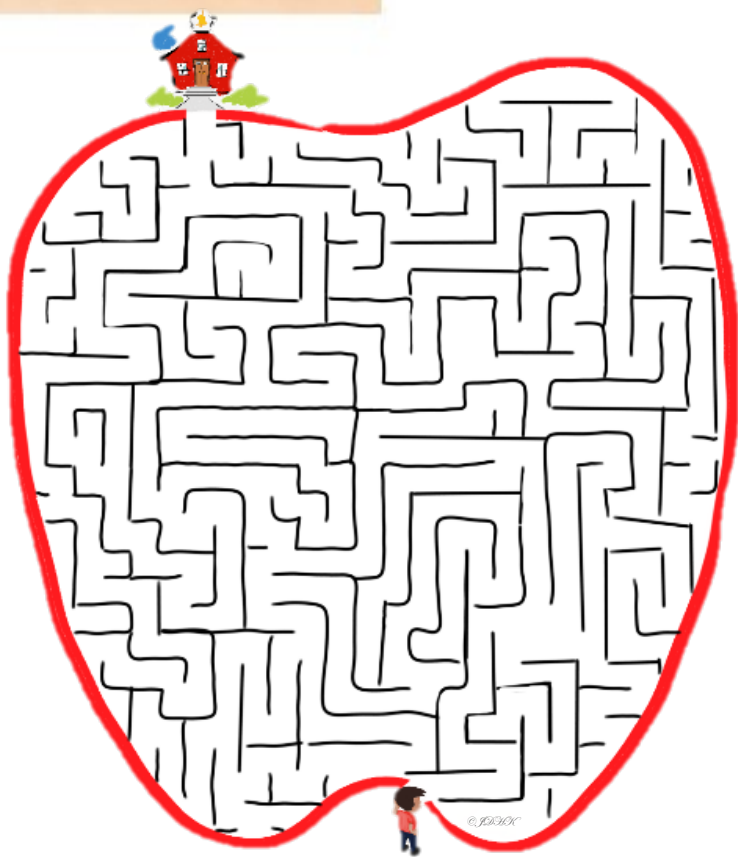
The CDHHE Network providers specialize in working with deaf and hard of hearing children. These DHH experts understand your child's language needs.

A meeting must be conducted at least once a year. The meeting will discuss continued eligibility and review the IFSP. Your annual IFSP meeting will review your child's needs and your family's goals. Your child will grow, learn, and change during the year. Your IFSP may need more frequent revising. Any current assessments available must be used in deciding what services will be given to meet your child's needs.

[A Parents Guide to Deaf and Hard of Hearing Early Intervention Recommendations \(2017\)](http://www.handsandvoices.org/resources/jcih-parent-guide.html)
<http://www.handsandvoices.org/resources/jcih-parent-guide.html>

Transition from Part C to Part B

On or before your child's third birthday, your child's First Steps services will stop. Your child may start a new program or service. This program change is called transition. You will begin to work with different agencies when your child is three years old. The rules and guidelines focus on your child, rather than on your family and child. Services may include early childhood special education and/or community programs.



To begin the process, you will have a transition meeting. This meeting happens when your child is around 30 months of age. You will need to approve who can come to the meeting. At the meeting, you will be asked to sign consent for an evaluation. The evaluation results are needed to decide if your child will receive school support and services.

Your child's transition meeting will have the First Steps Service Coordinator and school early childhood staff in attendance. You may also invite:

- Other family
- First Steps providers
- Staff from preschool programs you think your child might attend
- Staff from the Center

To help you, the Center provides information, resources, and services to support you and your child as they transition to another program. The Center is available to ensure all deaf and hard of hearing children in Indiana learn, grow, and progress to the best of their abilities.

Procedural Safeguards parent rights under IDEA and Article 7



1 Procedural Safeguards Notice

The school must provide guardians with a written explanation of parent rights under both IDEA and Indiana Article 7. Guardians get printed or electronic notice of procedural safeguards. Guardians may ask for a verbal explanation.



2 Parent Participation

Guardians have a legal right to take part in meetings about their child's education, including IEP meetings. Guardians may request an IEP team meeting at any time.



3 Access to Educational Records

Guardians have the right to see and get an explanation of their child's school records. Guardians can also ask for any updates. These rights are protected by IDEA and the Family Educational Rights and Privacy Act (FERPA).



4 Confidentiality of Information

The school must protect children's confidentiality. This includes personal information, such as a child's name, address, social security number, and other personal details.



5 Informed Consent (or Parental Consent)

The school must tell guardians what is involved in evaluating a child. They must do this before evaluating a child or providing special education services for the first time. Guardians need to give permission in writing before the school can move forward.



6 Prior Written Notice

The school must give written notice to guardians before changes are made to a child's special education plan. This includes when there may be discussion about adding or denying services. The school must tell guardians what is proposed and why.



7 Understandable Language

Written notice must be in a language that's understandable to the general public. The notice must also be in guardian's native language (this includes Braille).



8 Independent Educational Evaluation (IEE)

Guardians have a right to an IEE if they question the school's evaluation results. An IEE is an evaluation of a child's skills and needs by someone who is not a school employee. The school must consider the results of the IEE. However, the school is not required to accept the findings.



9 "Stay Put" Rights

Guardians may disagree with a proposed change to a child's IEP services or placement. The "stay put" protection keeps a child's current IEP in place while the case conference committee works things out.



10 Dispute Resolution Options

Guardians have the right to disagree with the school. IDEA and Indiana Article 7 give several options if guardians disagree. Families can negotiate and talk things out with the school, or they can use the mediation process, where a neutral third party helps to try to resolve a dispute. Guardians also have the right to due process. Due process starts with a written complaint and ends with a decision after a hearing. Finally, guardians can file a complaint with the state if they feel school is violating Article 7.

Early Intervention Services Compared to School-Based Services

Individual Family Service Plan (IFSP) vs Individualized Education Plan (IEP)

IDEA Part C	IDEA Part B
Birth to age 3	Age 3 through school exit
Includes the family's needs	Focuses on child's needs
Services provided in natural environment(s)	Services provided at school
Families have a Service Coordinator (SC)	Student has a Teacher of Record (TOR)
IFSP reviewed every 6 months	IEP reviewed every year
IFSP Team makes decisions	IEP Team makes decisions

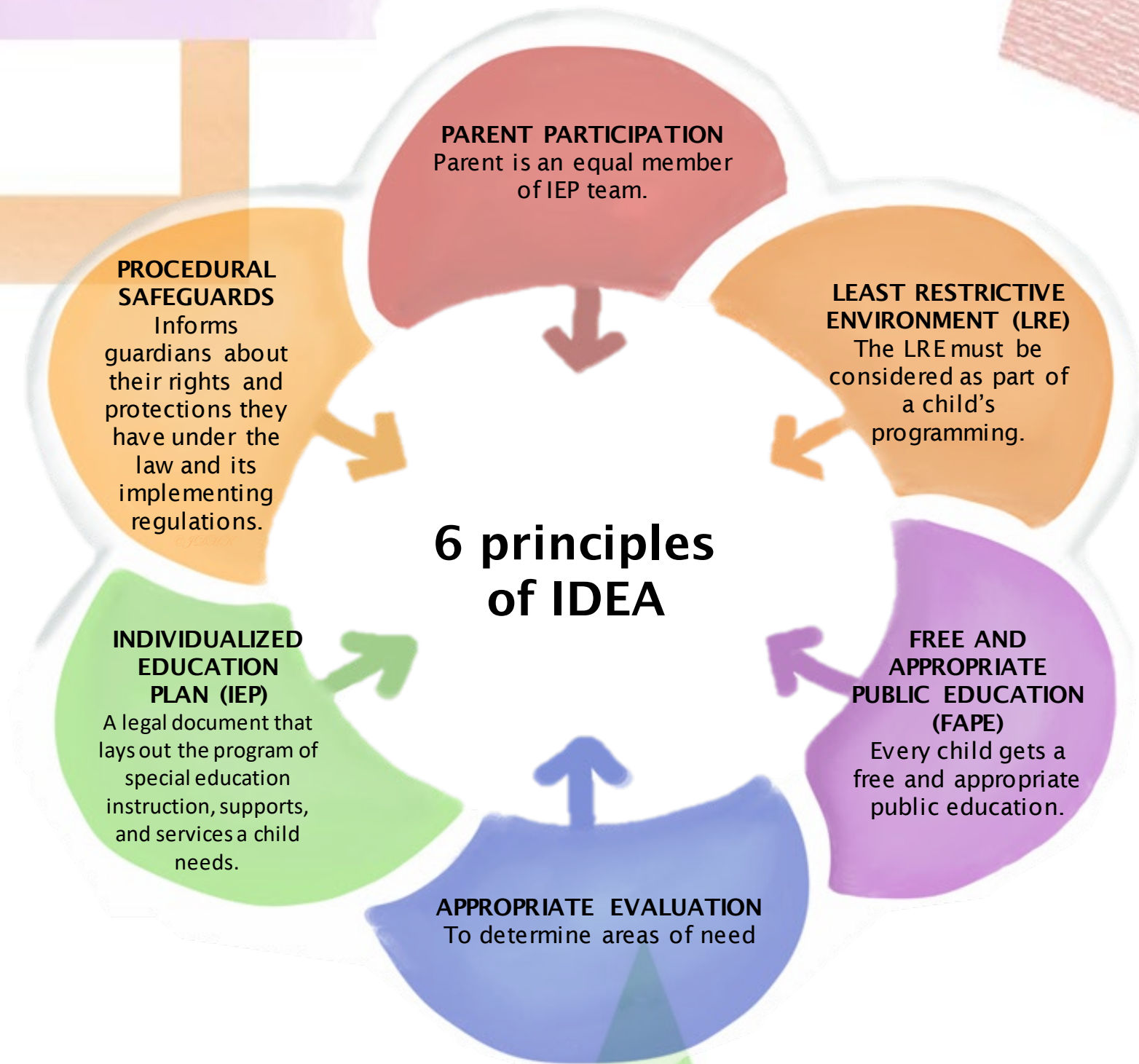


The rules to qualify for school services are different than the rules used to qualify for First Steps. The child will need to be evaluated to gather the data needed. The IEP Team, also called the case conference committee (CCC), will use the data to decide if the child needs school-based services. Guardians are part of the CCC. This initial evaluation and case conference (CC) must occur before the child's 3rd birthday.



The term **guardian** includes people who have the legal authority to make decisions for the child. This could be a parent, educational surrogate, foster parent, guardian ad litem, etc.

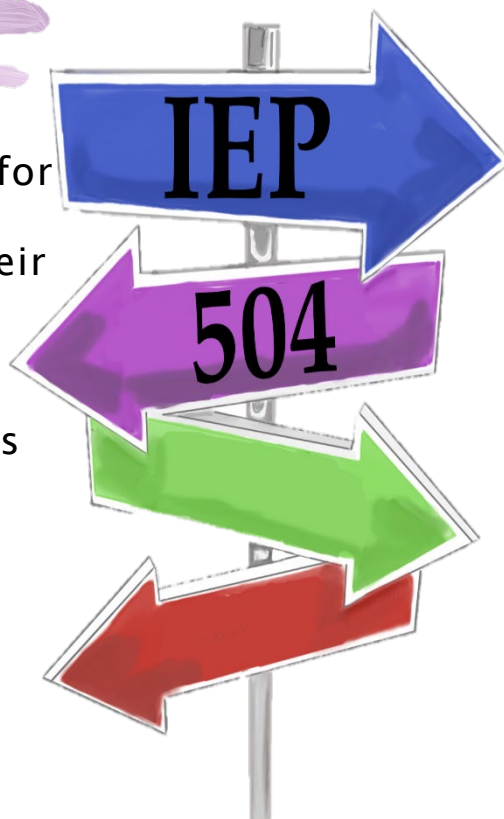
Guardians may decide that they do not want an evaluation or services for their child.



IEP and 504 Plans for Children Who are Deaf and Hard of Hearing?

504 Plan: Civil Rights Rehabilitation Act of 1973

- Section 504 is under the Office for Civil Rights (OCR)
- A child can have a 504 Plan if their hearing impacts a major life function
- A 504 Plan will afford a child with accommodations and services access to school programs
- An individual can have a 504 Plan at any age
- An individual with a diagnosed hearing loss is eligible for a 504 Plan



IEP: Individuals with Disabilities Act (IDEA)

- IDEA is under the Department of Education (DOE)
- A student can have an IEP if
 - They meet IDEA requirements
 - Their hearing negatively impacts their education
 - Their needs require specialized services
- An IEP will afford students with specialized education services, accommodations, and related services
- A student can have an IEP until they exit public school or the CCC determines the child is ineligible

Educational Evaluations Process

Educational evaluations help find out if students are eligible for school-based services. Evaluators should have training and experience testing children who are deaf and hard of hearing.



Initial evaluations will include:

- Social Developmental History
- Adaptive Behavior
- Pre-academic/academic skills
- Communication/language skills
- Audiological report
- Observation of child in natural/classroom setting
- Additional areas based on needs

The evaluation team will at least include:

- School Psychologist
- Speech-Language Pathologist
- Teacher for the Deaf and Hard of Hearing
- Optimal: Audiologist

Children may have more professionals (e.g., ASL specialist, occupational therapist (OT), physical therapist (PT)) working with them.

A re-evaluation may occur:

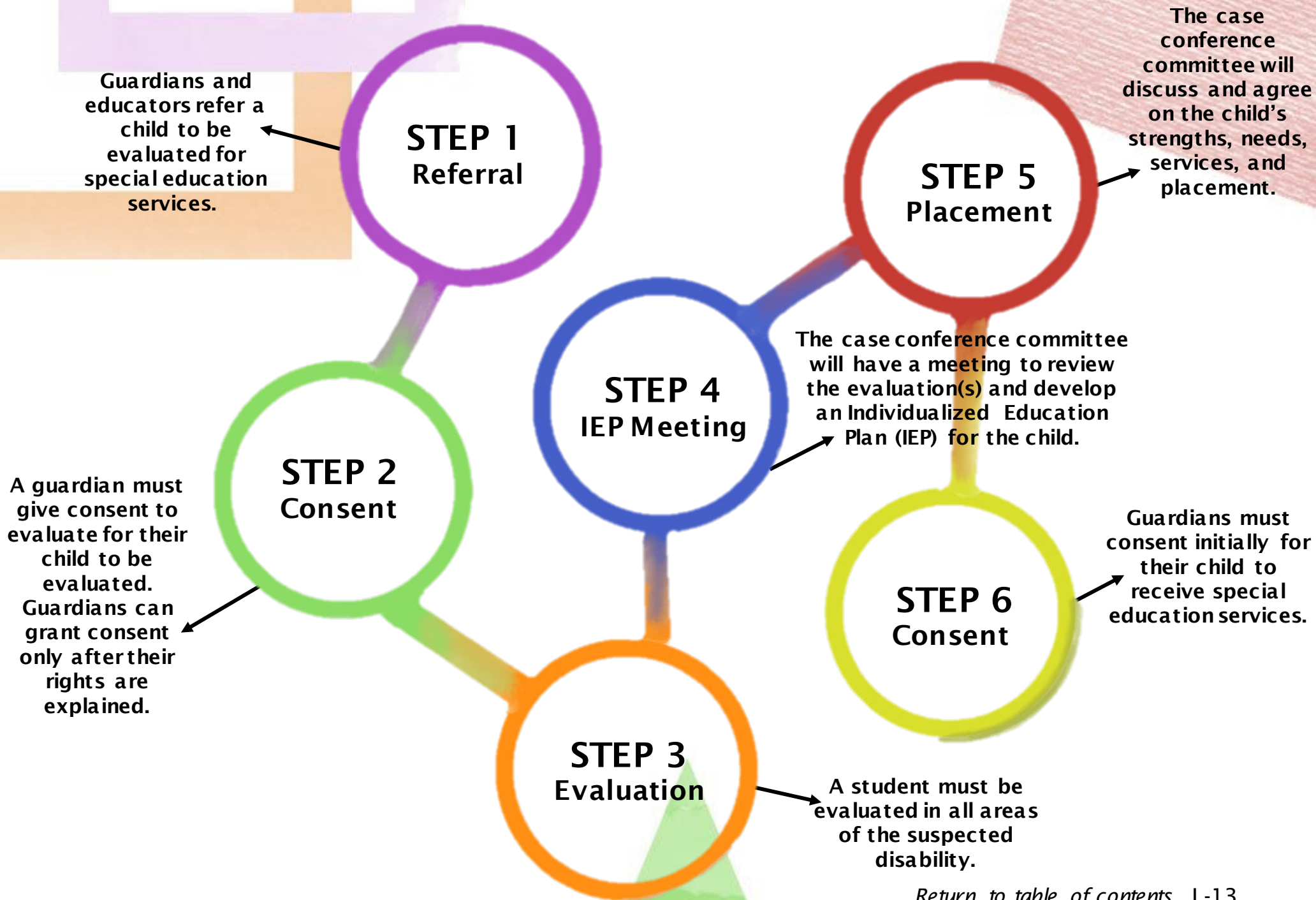
- To determine if the child's needs have changed.
- If there's a concern that the child needs additional services.
- For progress monitoring purposes; to gather updated baseline information.
- To determine if the child qualifies for additional special education services.

Guardians may be asked to complete checklists. Staff may observe the child. A child may participate in informal and/or formal testing. The evaluation will be able to paint a picture of the child's strengths and identify areas of need.

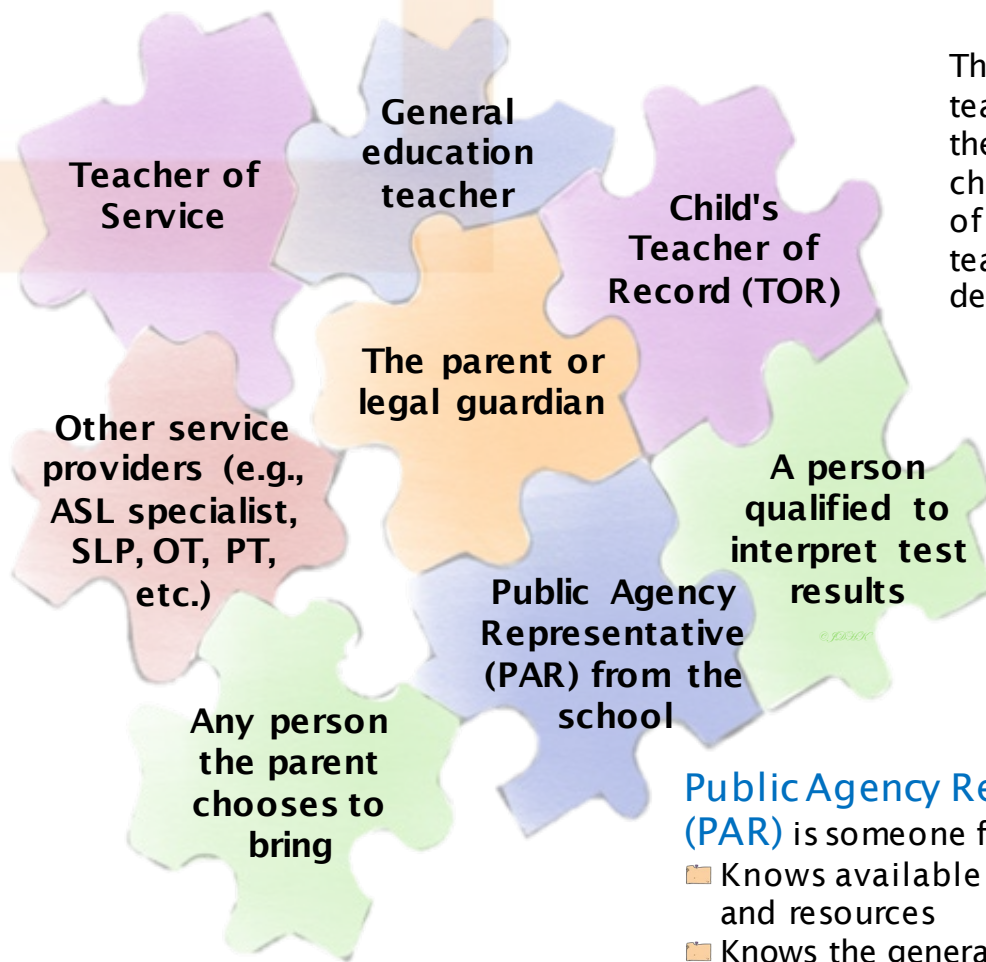
There are specific timelines that schools must follow. Timelines vary based on the reason for the evaluation.

Guardians can request a meeting prior to the case conference to have the test results explained to them. They may also request more testing at any time.

Educational Evaluation Process

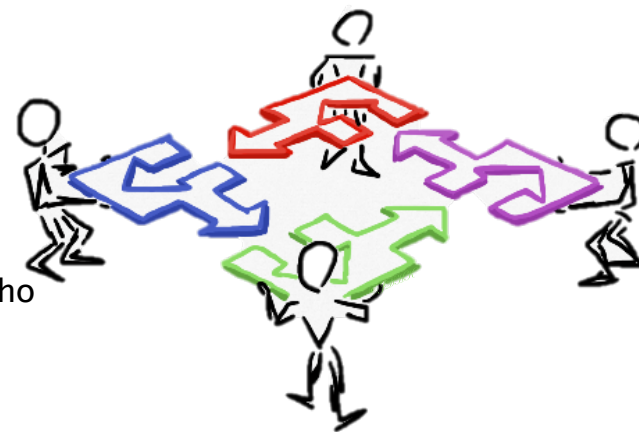


Case Conference Committee (CCC) or IEP Team



The **Teacher of Record** is a teacher trained and licensed in the suspected area of need. For children who are deaf and hard of hearing, the TOR is likely a teacher of students who are deaf and hard of hearing.

Decisions made at the IEP meeting (or case conference) are made as a team. No one person/entity can make decisions without CCC consensus.



The CCC will meet at least annually. Guardians can request a case conference at any time.

Public Agency Representative (PAR)

- Public Agency Representative (PAR) is someone from the school who
- Knows available services and resources
 - Knows the general education curriculum
 - Has the authority to approve services and supports
 - Can provide or supervise the provision of special education services

Basic Parts of the IEP

- Child's information (name, address, date of birth, etc.)
- Meeting purpose
- Testing results, progress monitoring information
- Student strengths
- Concerns of parents
- Eligibility information
- Special considerations for communication and language
- Accommodations for educational environment and statewide assessment
- Annual goals
- Special Education Services
- Related services
- Assistive technology (e.g., HAT)
- Extended school year services (ESY)
- Emergency evacuation plan (if applicable)
- Health plan (if applicable)
- Placement (Least Restrictive Environment)
- Staff in-service training

Hearing Assistive Technology (HAT)

Hearing Assistive Technology (HAT) are devices that support access to sound. They can overcome distance, background noise, and reverberation. Some of the most used HAT are Frequency Modulation (FM) systems, Digital Modulation (DM) systems, Bluetooth, Infrared systems, Audio Induction Loop systems, and other accessories to couple prescribed hearing devices to media such as phones, music players, computers, and tablet devices.

An **Individualized Education Plan (IEP)** is the legal paperwork created by the IEP Team/Case Conference Committee (CCC). It addresses the child's needs in the educational environment.

Assistive Technology (AT)

AT is defined as any device, piece of equipment or system that helps bypass, work around, or compensate for an individual's specific learning needs.



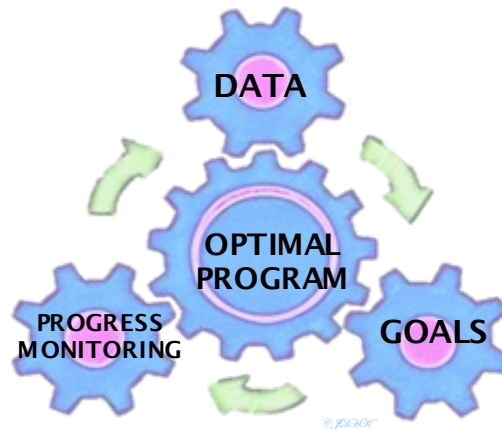
A parent's guide to IEP Planning can be found at <http://www.handsandvoices.org/IEPmeetingplanner>

Additional IEP Details

Data is information from testing and functional assessments.

Goals are created based on data. Goals must be measurable and address areas that need improvement.

Progress Monitoring is regular informal and formal data collection. It shows how much progress the student has made toward meeting goals and objectives. Parents can expect progress reporting.



Students who are deaf and hard of hearing may need instructional or testing accommodations to be able to access the educational setting.

Accommodations ensure equal access similar hearing peers without changing curriculum or assessments. Accommodations may include changes in the environment, curriculum, and how assignments/tasks will be completed. Examples are:

- Strategic seating
- Checking often for understanding
- Use of Hearing Assistive Technology (HAT)
- Extended time on assignments/tasks
- Allowable sections of tests read/signed to student
- Use of specialized materials
- Closed -captioning on visual media

Additional accommodations can be found at

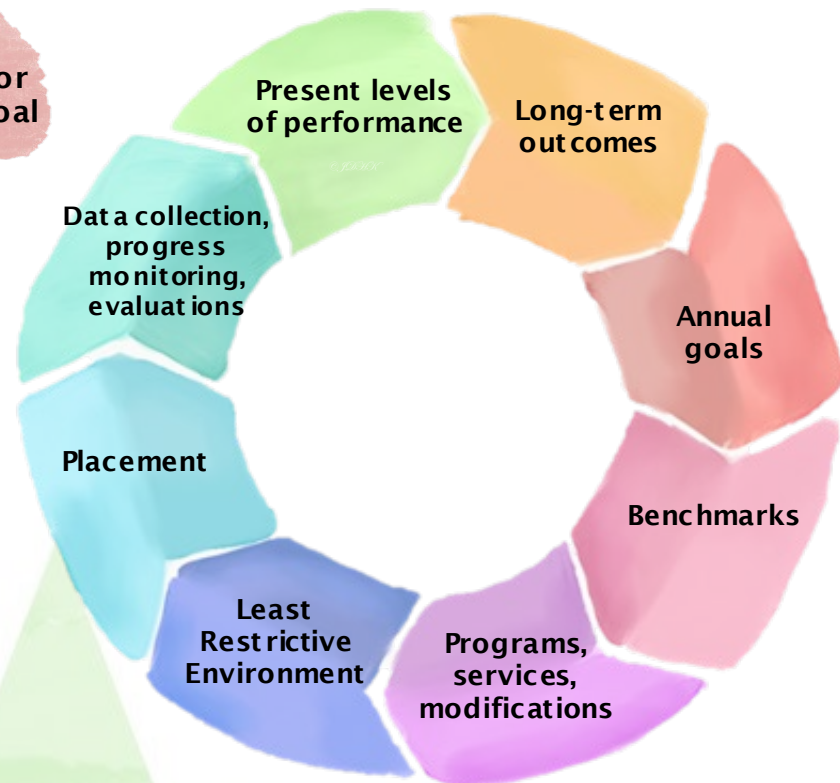
https://www.handsandvoices.org/pdf/IEP_Checklist.pdf

Benchmarks are objectives, checkpoints, or steps needed to meet a goal

Provisions are supports (services and related services) needed to work on goals and meet the student's needs.

Services are special instruction provided by the public schools at no cost. They can be provided in the educational environment, at home, in hospitals, institutions, or other settings

Related Services are services necessary to allow the student to benefit from their education such as occupational therapy (OT), physical therapy (PT), an educational interpreter (EI), educational audiology, CART, transportation, etc.



Considerations of Special Factors and Adverse Effects



A child's disability must have an adverse effect on their education to receive special education service. **Adverse effect** means there must be a relationship between the child's disability and academic performance. Students who are deaf and hard of hearing have additional areas that need to be considered due to the overall educational impact their hearing levels have on school access, performance, and outcomes. When determining eligibility for special education services, school teams should consider:

- Academic performance
- Audiological/visual access factors
- Functional listening/vision
- Language
- Personal adjustment and transition
- Social and emotional needs
- Use of personal or Hearing Assistive Technology (HAT)
- Vocabulary
- Vocational performance

To find out about this topic, see this guide:

<http://successforkidswithhearingloss.com/wp-content/uploads/2012/12/Support-for-Showing-Adverse-Educational-Effect-Due-to-Hearing-Loss.pdf>

IDEA requires **Consideration of Special Factors** for some situations when creating an IEP. Students who are deaf and hard of hearing need to have the following unique language needs considered when creating their IEP

- Language and communication needs
- Opportunities for direct communication with peers and professional personnel in the student's language and communication mode
- Academic level
- Full range of needs; including opportunities for direct instruction in the student's language and communication mode

This worksheet helps the CCC ensure all special factors in the law are documented in the IEP:

<https://www.in.gov/health/cdhhe/files/Consideration-of-Special-Factors-fillable.docx>



Placement Considerations

The Case Conference Committee will determine a child's placement, or Least Restrictive Environment (LRE), based on the needs and services discussed during the IEP process. All placement and LRE options should be discussed and considered during the case conference. Families are encouraged to visit all placement options for their child. A student receiving special education services should be educated with typical peers to the extent possible. Considerations of special factors may impact placement options.

Placement possibilities may include a full continuum of options with supports including:

- General education classroom
- Resource room
- Separate special education classroom
- Separate public or nonpublic nonresidential school or facility (e.g., Indiana School for the Deaf, local school programs, St. Joseph Institute for the Deaf, etc.)
- Public or nonpublic residential school or facility (e.g., Indiana School for the Deaf)
- Homebound or hospital setting



General education classroom considerations:

- ★ General education classrooms are set up for typical hearing students. This includes language and curricular design. It also includes the use of phonics to teach reading.
- ★ Language-rich classrooms encourage children to develop social language, academic language, reasoning skills, and numeracy.
- ★ Children lacking language skills or opportunities to fully engage using language are at high risk of failure when the environment does not match their strengths and needs.
- ★ A general education setting could be more restrictive for children who are deaf and hard of hearing. This occurs when a student who is deaf or hard of hearing is not given appropriate access. This access includes classroom curriculum and instruction.

For more information, visit <https://www.ceasd.org/wp-content/uploads/2019/10/What-Constitutes-the-Least-Restrictive-Environment-for-a-Deaf-or-Hard-of-Hearing-Student.pdf/>

Roles and Responsibilities of Personnel Serving Children who are Deaf and Hard of Hearing

Services should be provided by qualified professionals with specific experience and background working with children who are deaf and hard of hearing. Personnel may include:

Teachers of students who are Deaf and Hard of Hearing (TODHH)

Teachers of students who are deaf or hard of hearing are important for a child who is deaf or hard of hearing's education. They assist with the provision of appropriate evaluations and educational programming. The TODHH will help with planning and ensure student-centered instruction. They are essential to the student's achievement of their academic, linguistic, and social-emotional potential. Qualified TODHH work with the educational team to meet the requirements of the IEP.

● CEC Position Statement

https://dcdcec.files.wordpress.com/2020/03/dcdd_position_statement_tagged.pdf

● CEC Professional Standards

● <https://exceptionalchildren.org/standards#:~:text=The%20Council%20for%20Exceptional%20Children,accreditation%20organizations%2C%20and%20credentiaing%20agencies.Indiana Content Standards>

● <https://www.in.gov/doe/files/exceptional-needs-deaf-hard-hearing.pdf>

Speech-Language Pathologists (SLP) are professionals that work with children who are deaf or hard of hearing. They provide speech and language evaluations. An SLP will provide therapy and consultative services as determined by the IEP team. They focus on speech and language development. This can include reading and writing. <https://www.asha.org/public/who-are-speech-language-pathologists/>



For more information about the specialized roles for SLPs and TODHH when working with children who are deaf and hard of hearing:

<http://successforkidswithhearingloss.com/wp-content/uploads/2014/07/Roles-of-SLPs-and-TODs.pdf>

Visit *Optimizing Outcomes for Students who are Deaf and Hard of Hearing: Educational Service Guidelines* p. 67 for more detail on professional roles <http://www.nasdse.org/docs/nasdse-3rd-ed-7-11-2019-final.pdf>

American Sign Language Specialist

is a person who is Deaf and a native American Sign Language user. They provide cultural and linguistic expertise and language services to students who are deaf and hard of hearing and their families. They also work with a Speech-Language Pathologist to provide ASL assessments for students who are deaf and hard of hearing. The ASL Specialist analyzes, adapts, modifies, and/or creates teaching and assessment material. They consult with Teachers of the Deaf and Hard of Hearing.

CART Provider CART stands for Communication Access Realtime Translation. CART services provide text support to spoken information. The person typing what is being said is a CART provider or captioner. This can be done by an in-person or remote captioner.

Educational Audiologists are trained to identify a child's hearing, listening, and auditory processing skills to understand their access to learning through audition. The role may vary from one educational setting to another. The Educational Audiologist may provide assessments and screenings. They may also work with a child's hearing aid and provide listening therapy.

Recommended roles:

<https://successforkidswithhearingloss.com/wp-content/uploads/2014/07/Roles-of-Educational-Audiologists-EAA-Position-Statement-2015.pdf>

Educational Interpreters provide sign language translation or transliteration based on the decision of the IEP team. Since the interpreter observes and provides access for the student daily, they are an integral member of the IEP team. Educational Interpreters must be competent in both expressive and receptive skills and matched to the communication language and approach used by the student. In Indiana, Educational Interpreters must have a score of 3.5 or higher on the Educational Interpreter Performance Assessment (EIPA) or be nationally certified through the Registry of Interpreters for the Deaf

http://www.in.gov/legislative/iac/iac_title?iact=511&iaca=18

Interveners are professionals who have received specialized training to work with people who are deafblind. They help the person with deafblindness gain access to environmental information and facilitate communication. They help promote social and emotional development. <https://indbervices.org/images/forms/IntervenerTrainingBrochure.pdf>

Language Facilitators facilitate communication between the student who is deaf or hard of hearing and school staff and peers. Language facilitators do not hold educational interpreter certification.

Listening and Spoken Language (LSL) Specialists are either teachers of the deaf, speech-language pathologists, or audiologists who are specially trained and certified to develop listening and spoken language for children who are Deaf or Hard of Hearing. An LSL Specialist follows developmental models in listening, language, speech, social, and thinking skills. LSL Specialists support and coach parents and caregivers to learn how to teach their children spoken language naturally at home. They may also work in school settings, especially at preschool and elementary levels, to develop spoken language skills that support school-age reading and academics.

FAMILY

SUPPORTS

LAWS

COMMUNICATION

SUCCESS





AMERICAN SIGN LANGUAGE AND ENGLISH LANGUAGE DEVELOPMENTAL MILESTONES

This section includes language milestones for American Sign Language and English. These include skills for newborns to 11-year-olds. Each age range gives a skill for what your child should understand and express. It also provides information about your child's social and print skills. Your child's print skills include reading and writing.



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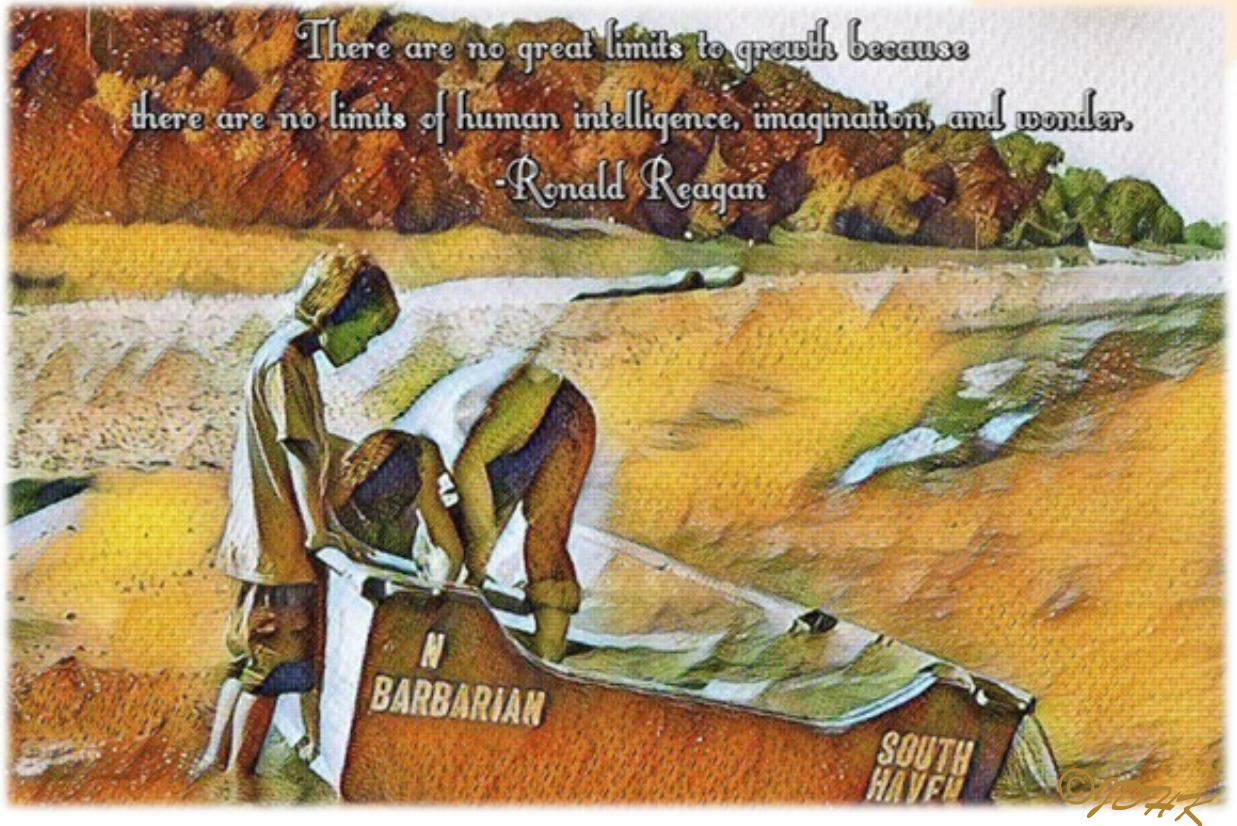
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Developmental milestones are the behaviors or skills seen in infants and children as they grow, learn, and change. There is a typical range in which a child will reach a milestone. Milestones on most checklists are not when an average child has mastered a skill. It is when 80-90% of the children within that age range have mastered the listed skills. Keeping track of milestones can help identify when your child may need some support (e.g., language therapy). The sooner your child receives any needed supports, the better their outcomes will be.

This resource includes milestones for spoken English from Standard American English. It does not address possible grammar differences that are present because of dialects. Dialects are rule-based variations of English. Your child should look/sound like their community. This community will include family, neighborhood friends, and school friends. Standard American English is used for reading and writing in Indiana schools.

In this resource, you will see examples of American Sign Language (ASL) provided in print using **gloss**. ASL does not have a print form. It is also not derived from English. To give examples of a skill, gloss is used to represent the signs word for word. The gloss does not show the meaning. ASL gloss is presented in capital letters and uses symbols to show some grammar.



As your child's first teacher, you have an amazing opportunity to nurture your child's language growth. By taking an active role, parents can help ensure that their child has all the support they need to develop to their full potential.

0-3 Months Receptive and Expressive Language Skills

Language your child understands

Your child will respond to your face and look attentively at your face (by 3 months).

How your child expresses thoughts/feelings

Your child will cry to express hunger and/or anger.

Your child will begin to gurgle, laugh, and smile.

Your child will bring both hands to their mouth.

Your child will express basic feelings and needs.

0-3 Months



ASL

Your child will look in the direction the signer is pointing.

Your child will begin to focus on faces and hands.

Your child will begin to look at the visual environment with alertness.

Spoken English

Your child will begin to search for the source of a sound.

Your child will respond to talking by quieting or smiling.

Your child will react differently to voices, sounds, and emotions.

Your child will startle to sudden noises.

Your child will quiet to a familiar voice.

ASL

Your child will begin to play by holding hands and fingers.

Your child will begin to smile to express pleasure.

Your child will sometimes look in the direction of movements.

Your child will begin to express interest in movement.

Spoken English

Your child will begin to vocalize to express pleasure.

Your child will sometimes vocalize in response to sounds.

0-3 Months Social and Print Skills

Your Child's Social and Play Skills

Your child will begin to smile and respond to you.

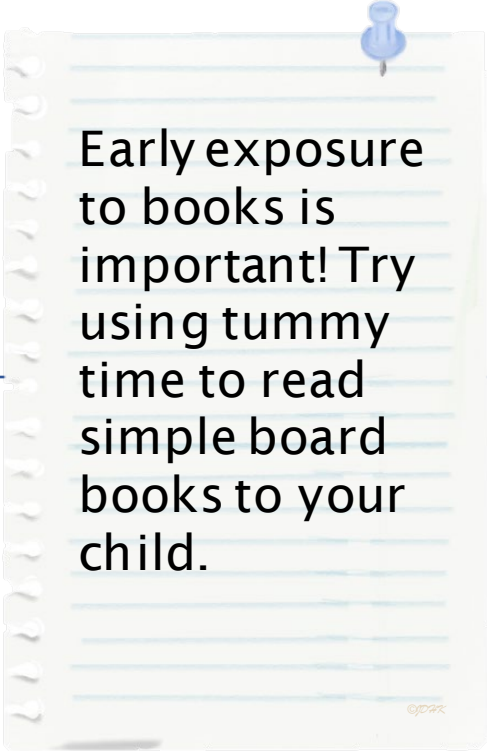
Your child will look at your face and localize you with their eyes (by 3 months).

Your child will smile in response to your signing/talking.

Your child will give a true social smile and/or coo in response to a familiar face.

Your child will begin to imitate facial movements.

Your Child's Print Skills



Early exposure to books is important! Try using tummy time to read simple board books to your child.



You have begun the exciting journey of watching your child grow, learn, and change! We hope you cherish the time you have to focus on loving and bonding with your baby who is deaf or hard of hearing. ♥

3-6 Months Receptive and Expressive Language Skills

3-6 Months




Language your child understands		How your child expresses thoughts/feelings	
Your child will discriminate between angry and friendly tones and facial expressions; cry in response to an angry voice/expression.		<p>Your child will blow raspberries, coo, yell.</p> <p>Your child will use non-verbal means to call attention to physical needs (e.g., toileting, hunger).</p> <p>Your child will use non-verbal means to express personal reactions (e.g., curiosity, surprise, reluctance).</p> <p>Your child will begin to express excitement and displeasure.</p>	
ASL	Spoken English	ASL	Spoken English
Your child will follow the eye gaze and movement of the signer.	Your child will localize a sound source with a head or eye turn.	Your child will copy movements involving the arms, hands, head, and face.	Your child will voice different sounds to express varied emotions (e.g., social intent, protest).
Your child will attend to sign presented with slow, repeated, large movements.	Your child will sometimes respond to their own name.	Your child will hand/finger babble (e.g., open and close hands, wiggle fingers, twist wrists).	Your child will babble with a variety of sounds, vowels, and consonants.
	Your child will often stop crying in response to voice.		Your child will try to imitate sounds.
	Your child will vocalize when you talk to them.		Your child will vocalize for needs and wants, in response to others, and when alone.

3-6 Months Social and Print Skills

Your Child's Social and Play Skills

- Your child will engage in play (e.g., peek-a-boo).
- Your child will begin to enjoy finger-plays/finger games.
- Your child will imitate facial expressions.
- Your child will have joint attention (e.g., look at an object with you).
- Your child will maintain eye contact.

Your Child's Print Skills



Sign/Talk to your baby throughout the day. Tell them about your plans, show them something in a store window, and ask them questions. Your baby will learn and later respond to you.



6-9 Months



6-9 Months Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will look at a toy you show them.</p> <p>Your child will look attentively at a person's face.</p> <p>Your child will begin to show attention to storytelling/story-signing.</p> <p>Your child will respond with gestures to words (e.g., up, hi , bye-bye) .</p>		<p>Your child will show objects by holding, pointing, reaching, or looking at them.</p> <p>Your child will use some gestures (e.g., shakes head for no).</p> <p>Your child will smile, make eye contact, and laugh.</p> <p>Your child will show they are excited or upset.</p> <p>Your child will use language to note the disappearance of objects (e.g., all gone).</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will alertly track/follow the eye gaze of a signer.</p> <p>Your child will understand emotions shown on your face (e.g., anger, friendliness).</p>	<p>Your child will sometimes respond to family names, "no," and own name.</p> <p>Your child will enjoy music or singing.</p> <p>Your child will appear to listen to the whole conversation between others.</p>	<p>Your child will hand/finger babble.</p> <p>Your child will laugh when sees fingers approach to tickle.</p>	<p>Your child will appear to "sing".</p> <p>Your child will repeat consonant-vowel syllables (e.g., pa pa).</p>

6-9 Months Social and Print Skills

Your Child's Social and Play Skills

- Your child will use gesture and/or voice to initiate contact.
- Your child will understand communication turn-taking.
- Your child will respond to social games (e.g., finger games, pat-a-cake).
- Your child will show a desire to interact with people (e.g., call out or wave to get attention).
- Your child will imitate the movements of others (e.g., nod, wave, and clap).

Your Child's Print Skills

- Your child will attend to/vocalize and pat pictures.
- Your child will begin to share a book with an adult.
- Your child will reach for a book.
- Your child will put books in their mouth.



When you read to your child, help them turn pages. Point to pictures as you read. Use animated facial expressions. Be at eye level with your child.

9-12 Months



9-12 Months Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will sometimes give toys/objects on request.</p> <p>Your child will sometimes follow simple commands (e.g., put that down).</p> <p>Your child will understand greetings.</p> <p>Your child will understand about 50 signs and/or words.</p>		<p>Your child will use first words (e.g., bye-bye, mama).</p> <p>Your child will label objects without adult cues.</p> <p>Your child will greet others (e.g., hi, bye-bye).</p> <p>Your child will copy face movements (e.g., frown, smile).</p>	
ASL	Spoken English	ASL	Spoken English
Your child will turn their head to attention-getting behaviors (e.g., hand waving, lights flashing).	Your child will respond to vocal intonation.	Your child will use face movement, gestures, and/or signs to protest.	Your child will use jargon of 4 + syllables sentence-like structures without true words.
Your child will recognize their own name sign.	Your child will respond to songs.	Your child will hand/finger babble to self or others.	Your child will produce many word-like one-syllable speech sounds (e.g., ma, pa).
Your child will use a negative headshake alone or with sign.	Your child will understand some object names.	Your child will point to self and objects in the environment.	Your child will imitate inflections and rhythms when vocalizing.
Your child will follow the eye gaze of the signer.	Your child will show increased attention to speech.	Your child will sign wants (e.g., MILK, WATER, MOM, DAD).	Your child will use voice and gestures to express (e.g., protest, call, tell feelings, and respond to others).

9-12 Months Social and Print Skills

Your Child's Social and Play Skills

Your child will respond to activities by laughing and repeating the action.

Your child will indicate a desire to change activities

Your child will direct others by tugging and pushing.

Your child will complete activities with at least two turns.

Your child will enjoy storytelling /story-signing.

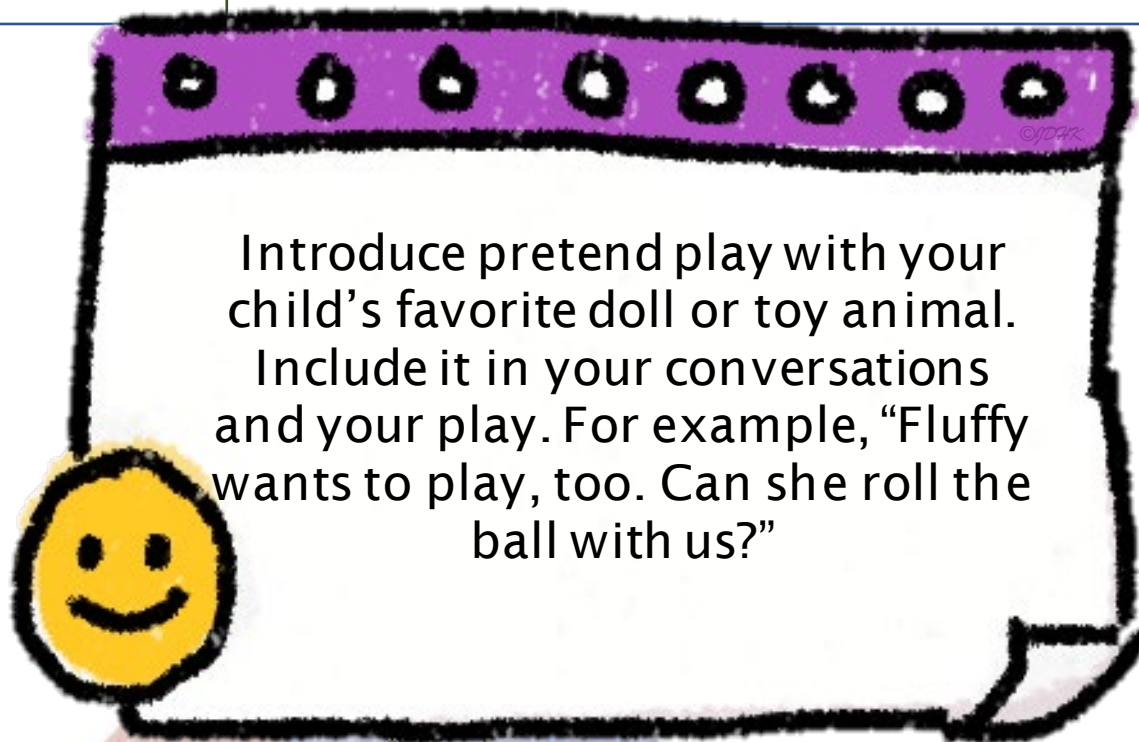
Your Child's Print Skills

Your child will look at books.

Your child will show interest in a familiar story or book.

Your child will attend to repetition of familiar signs and/or words, songs, and rhymes.

Your child will use a crayon to make marks on paper.



12-15 Months



12-15 Months Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will point to self on request.</p> <p>Your child will follow one-step directions.</p> <p>Your child will identify pictures/objects on request.</p> <p>Your child will begin to answer where and what questions.</p>		<p>Your child will use a single sign/word + a gesture/point.</p> <p>Your child will imitate new signs/words.</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will recognize their own name sign.</p> <p>Your child will recognize the name signs of family members.</p>	<p>Your child will understand new words.</p> <p>Your child will search for objects named verbally that are not in the room.</p> <p>Your child will identify an object from a group.</p>	<p>Your child will use name signs to refer to others.</p> <p>Your child will sign wants (e.g., SLEEPY, HUNGRY, THIRSTY)</p> <p>Your child will produce signs that have the simple handshapes of C, A, S, 1, 5.</p> <p>Your child will use gestures to communicate (e.g., COME HERE).</p>	<p>Your child will continue to use jargon with more true words developing.</p> <p>Your child will use up to 7 spoken words all the time.</p> <p>Your child will pause and use intonation when producing jargon.</p> <p>Your child will produce early consonants: b, m, n, t, d, w.</p>

12-15 Months Social and Print Skills

Your Child's Social and Play Skills

Your child will imitate actions of others.

Your child will take turns as language develops.

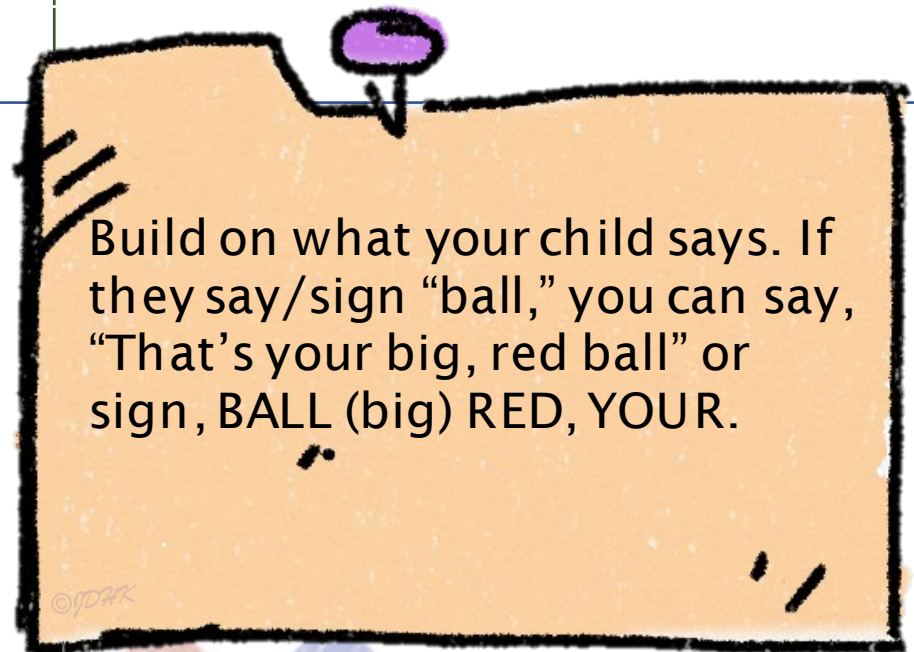
Your child will involve others by showing things during play.

Your child will use pointing, reaching, and single words to request.

Your child will begin to use signs/words to request a turn (my-turn, "mine").

Your Child's Print Skills

Your child will scribble with a crayon or pencil.



15-18 Months



15-18 Months Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will follow single step directions.</p> <p>Your child will find familiar objects out of sight.</p> <p>Your child will identify some clothing, toys, and food.</p> <p>Your child will respond to yes/no questions with head nod/shake.</p> <p>Your child will identify objects and actions in pictures.</p>		<p>Your child will respond to simple commands (e.g., “sit down” COME-HERE).</p> <p>Your child will imitate signs/words.</p> <p>Your child will use at least 10 meaningful signs/words.</p> <p>Your child will say/sign functional words (e.g., no, more, mine).</p>	
ASL	Spoken English	ASL	Spoken English
Your child will recognize the name signs of family members.	Your child will respond to simple requests for clarification.	Your child will use gestures to express.	Your child will begin replacing gestures with the use of words or word-like sounds.
Your child will identify familiar pictures, animals, and objects in the room upon request.	Your child will identify some body parts.	Your child will form the first ASL signs using simple handshapes C, A, S, 1, 5 clearly.	Your child will make the same sound in reference to a picture in a familiar book.
Your child will answer WHERE, WHAT questions about items in the room.	Your child will develop category vocabulary (e.g., dishes, toys).	Your child will sign 2-word phrases (e.g., EAT MORE).	Your child will verbally request and protest
		Your child will repeat what others sign.	Your child will initiate verbal turns.


15-18 Months Social and Print Skills

Your Child's Social and Play Skills

- Your child will prefer to be with familiar people.
- Your child will show caution with strangers.
- Your child will imitate other children.
- Your child will repeat what was just said/signed.
- Your child will use language to get attention.

Your Child's Print Skills

- Your child will carry a book.
- Your child will hold a book with help and attempt to turn pages, usually several at a time.
- Your child will turn the book right-side-up.
- Your child will point to a picture in a book when asked "Where's the ___?"



When your child points at or gives you something, talk about the object. You can say, "You gave me the book. Thank you! Look at the picture of the baby rolling the ball" or sign, BOOK, you-GIVE-me. THANK-YOU. PICTURE, LOOK BABY BALL ROLL.

18-24 Months

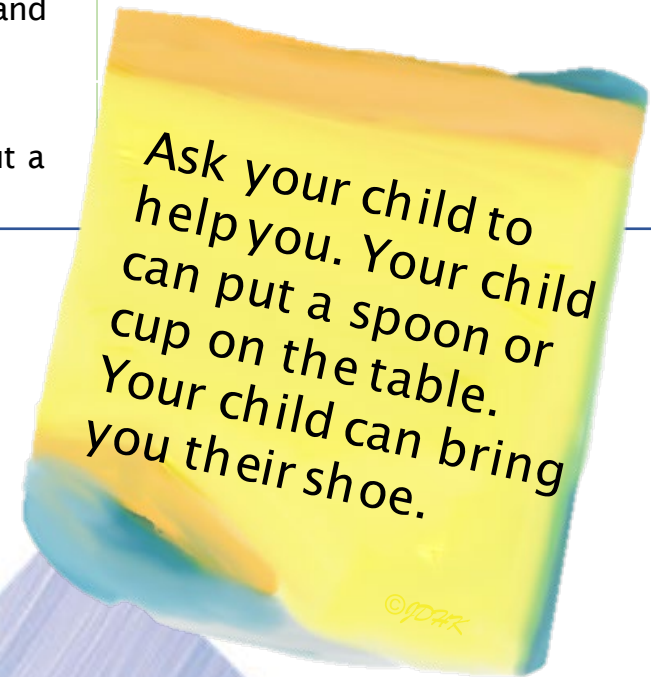


18-24 Months Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will complete two requests with one object.</p> <p>Your child will choose two familiar objects on request.</p> <p>Your child will understand 250-500 signs/words (by 24 months).</p> <p>Your child will understand personal pronouns (e.g., my, mine, you, your).</p> <p>Your child will follow 2-step related commands on request (by 24 months).</p>		<p>Your child will attempt to tell stories about experiences.</p> <p>Your child will use I, you, and mine, but still sometimes refer to self by name.</p> <p>Your child will ask where and what questions.</p> <p>Your child will use 2-word phrases with nouns, some verbs, and some describing words (by 24 months).</p> <p>Your child will independently say or sign between 150-300 signs/words (by 24 months).</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will imitate the actions or faces of people in a story.</p> <p>Your child will answer questions (e.g., WHO, WHICH, FOR+FOR).</p>	<p>Your child will point to at least 5 body parts.</p> <p>Your child will listen to simple stories.</p>	<p>Your child will use classifiers (CL) to describe things (e.g., CL: F for SPOTS).</p> <p>Your child will use non-manual markers (e.g., raised eyebrows, squints).</p> <p>Your child will use headshake + sign for negation.</p> <p>Your child will use lexicalized signs (e.g., #BUS, #ICE).</p>	<p>Your child will engage in word and sound play with adults.</p> <p>Your child's single-syllable words with early developing sounds will be understood 50% of the time.</p> <p>Your child will sometimes use the word endings -ing and -s.</p> <p>Your child will use the words in, on, and up.</p>

18-24 Months Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will take 1-2 turns in a conversation.	Your child will tell the difference between words and pictures.	Your child will imitate drawing marks or scribbling.
Your child will use language to request help.	Your child will bring a book to an adult to read.	Your child will explore drawing, painting, and writing as a way to communicate.
Your child will initiate pretend play.	Your child will look at a book alone and pretend to read familiar books.	
Your child will tell about past events and future actions.	Your child will attend to pictures and written text for several minutes.	
Your child will request information (e.g., What is this?).	With adult support, your child will respond to simple questions about a familiar story.	



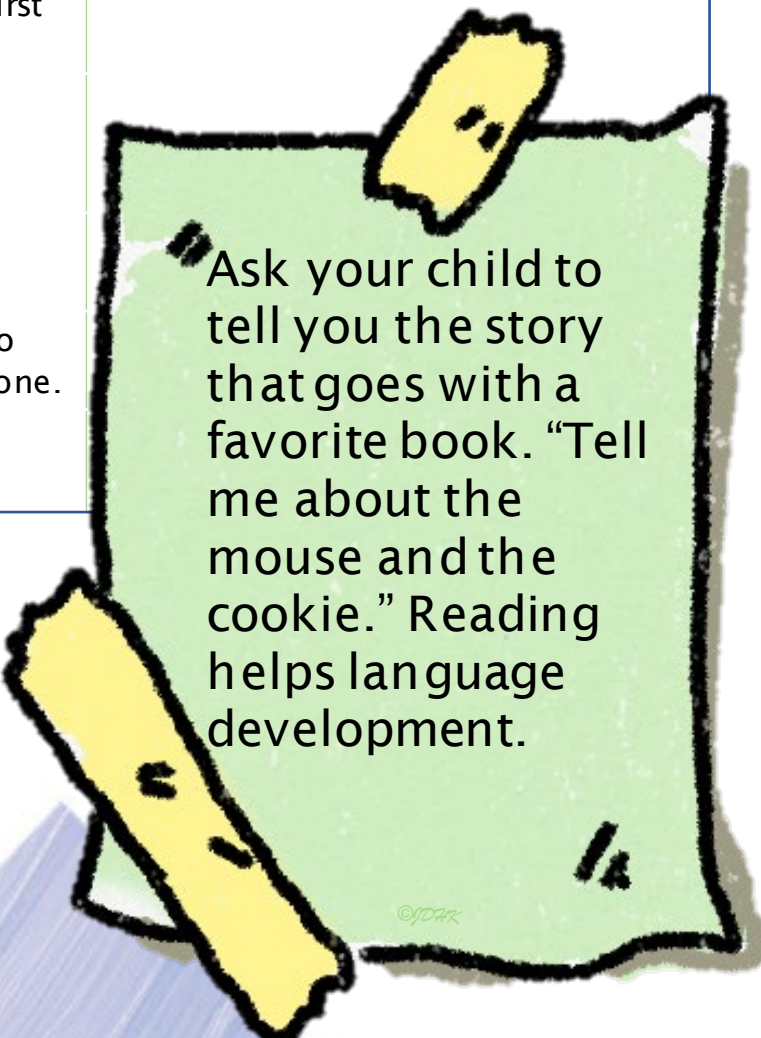
24-30 Months



24-30 Months Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will understand big and little.</p> <p>Your child will understand present and future (e.g., today, tomorrow).</p> <p>Your child will understand quantity (e.g., one, all).</p> <p>Your child will understand connected language.</p>		<p>Your child will use 2-3-word phrases consistently.</p> <p>Your child will have a vocabulary range of over 250 signs/words.</p> <p>Your child will ask and answer simple wh-questions (e.g., what? who? where?).</p> <p>Your child will refer to self with pronouns (e.g., I, me).</p> <p>Your child will use negation (e.g., don't like, don't know, no).</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will recognize own name when finger-spelled.</p> <p>Your child will answer questions by combining an object and a verb (e.g., FROG JUMP).</p>	<p>Your child will identify objects by their functions.</p> <p>Your child will repeat a 4-5-word sentence.</p>	<p>Your child will use NOT-YET.</p> <p>Your child will use descriptive classifiers (CL) (CL:O, CL:3).</p> <p>Your child will use handshapes: B, F, O.</p> <p>Your child will use pronouns and possessives (HE, SHE, IT, MY, YOUR, HIS, HERS).</p>	<p>Your child will say sentences that you understand 50-70% of the time.</p> <p>Your child will use words to describe pictures or objects (e.g., big book, three cookies).</p> <p>Your child will use -ing verbs and possessive -s.</p> <p>Your child will use prepositions in and on.</p>

24-30 Months Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
<p>Your child will use language more in play (e.g., pretend to chat on the phone/text/videophone).</p> <p>Your child will engage in parallel play (e.g., play beside other children using the same toys but not with the children).</p> <p>Your child will share toys and join games.</p> <p>Your child will complete actions (e.g., give me five).</p> <p>Your child will tell their own age.</p>	<p>Your child will recognize and identify a few letters in context (e.g., the first letter of their name).</p> <p>Your child will recognize familiar books by their cover.</p> <p>Your child will recite parts of well-known stories and songs.</p> <p>Your child will hold books with two hands and turn the pages one by one.</p> <p>Your child will answer simple questions about a story.</p>	 <p>"Ask your child to tell you the story that goes with a favorite book. "Tell me about the mouse and the cookie." Reading helps language development.</p>



30-36 Months

30-36 Months Receptive and Expressive Language Skills

Language your child understands

Your child will answer what, who, where and what doing questions (e.g., pet name, sibling name, name objects, name actions).

Your child will carry out 2-3 signed/verbal commands.

Your child will understand yesterday.

Your child will understand descriptive words.

Your child will identify parts of an object.

How your child expresses thoughts/feelings

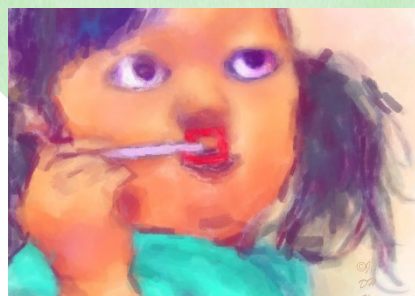
Your child will use 3-4-word simple sentences and questions.

Your child will use question forms of yes/no, who, what, where, and when.

Your child will use simple descriptors (e.g., hot, cold, big, little).

Your child will use commands with two steps.

Your child will use negatives (e.g., don't like, don't know, not yet).



ASL

Spoken English

Your child will understand familiar simple finger-spelled words.

Your child will understand spatial concepts (e.g., in, on, under).

Your child will understand categories.

Your child will repeat 3 numbers in a sequence, and/or a sentence of 6-7 words.

ASL

Spoken English

Your child will use emotion signs (e.g., SAD, HAPPY, SCARED).

Your child will substitute simple handshapes for more complex handshapes (e.g., CL:5 in place of CL:W for WATER).

Your child will use classifier(CL) CL:3 (e.g., CAR DRIVING FORWARD)

Your child will use simple, descriptive classifier(CL) CL:O (e.g., for pole).

Your child will use quantity words (e.g., something, nothing, none).

Your child will use unstressed words/sounds (e.g., plural -s, is).

Your child will use spoken language that everyone understands 75% of the time.

Your child will use at least 2 adverbs (e.g., fast, slowly, above, next to).

30-36 Months Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will take turns, share, and ask permission of others.	Your child will recognize and identify some letters in context.	Your child will imitate simple lines and shapes with a crayon.
Your child will engage in make-believe activities.	Your child will recognize that symbols have meaning (e.g., the golden arches symbolizes McDonald's).	Your child will tell a story for an adult to write .
Your child will express feelings (e.g., mad, happy, sad, scared).	Your child will recognize familiar books by their cover.	
Your child will begin to give directions (e.g., You do it, Don't touch it).	Your child will recite parts of well-known stories, songs, and nursery rhymes.	
Your child will use questions to get information and request clarification.	Your child will tell a story from pictures.	

Your child still needs quiet time. This is not just for naps. Turn off the TV and tablets. Let your child enjoy quiet play, singing, and chatting with you.

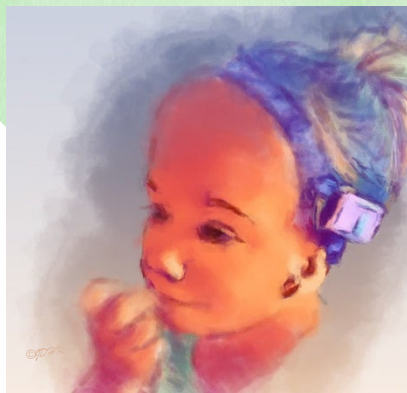


36-42 Months Receptive and Expressive Language Skills

36-42 Months

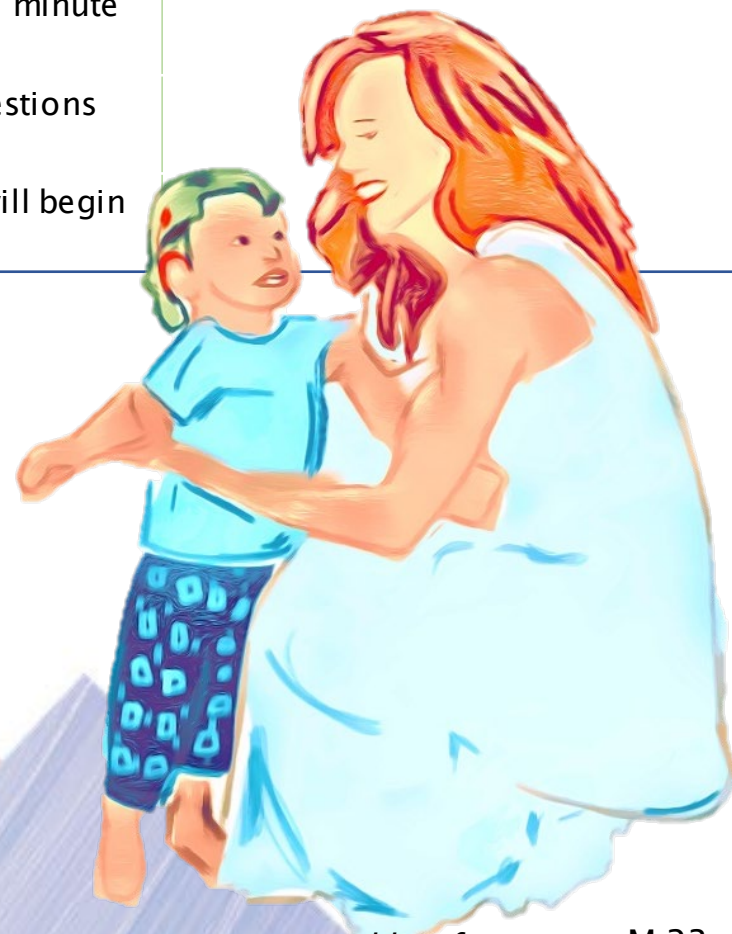
Language your child understands	How your child expresses thoughts/feelings
<p>Your child will name an object when given the function (e.g., What do you see with?).</p> <p>Your child will understand quality, texture, and quantity (e.g., nice, rough, smooth, some).</p> <p>Your child will begin to understand concepts (e.g., full, empty, some, same/different, day/night).</p> <p>Your child will correctly answer questions about a signed-/spoken-only message.</p> <p>Your child will understand 900 words.</p>	<p>Your child will describe what for objects are used for and identify items that do not belong.</p> <p>Your child will ask when, how many, and who questions.</p> <p>Your child will answer how many, who, whose, why, what if, and what is missing questions.</p> <p>Your child will use 5-6 sign/word sentences.</p>

ASL	Spoken English	ASL	Spoken English
<p>Your child will begin to understand part/whole relationships (e.g., ARM/BODY).</p>	<p>Your child will follow 2-3 step unrelated spoken commands.</p>	<p>Your child will use TWO-OF-US, THREE-OF-US.</p> <p>Your child will begin to use plain verbs to connect subject and object (e.g., HE LIKE ICE-CREAM).</p> <p>Your child will use verb modification (e.g., STROLLING, WALKING QUICKLY).</p> <p>Your child will use topicalization (e.g., POPCORN, ME LIKE).</p>	<p>Your child will talk using many grammatical structures (e.g., plurals, pronouns, prepositions, adjectives, present progressive - ing).</p> <p>Your child will combine sentences using <i>and</i>, <i>but</i>, <i>because</i>.</p> <p>Your child will use past modals (e.g., could, would, should, must, might).</p> <p>Your child will use <i>do</i> to ask yes/no questions.</p>



36-42 Months Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
<p>Your child will take 4-5 turns during conversation.</p> <p>Your child will relay a message.</p> <p>Your child will show understanding of others' feelings and needs.</p> <p>Your child will make conversational repairs.</p> <p>Your child will enjoy role-playing with others.</p>	<p>Your child will identify some uppercase and lower-case letters.</p> <p>Your child will respond to stories read aloud to a group.</p> <p>Your child will attend to a 10-15 minute story.</p> <p>Your child will answer some questions about a story.</p> <p>With adult support, your child will begin to retell familiar stories.</p>	<p>Your child will draw or copy two lines that cross (+).</p>



42-48 Months Receptive and Expressive Language Skills

42-48 Months



Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will understand the difference between past/present/future and singular/plural.</p> <p>Your child will understand opposites (e.g., cold/hot, big/little).</p> <p>Your child will carry out 3 related commands in order.</p> <p>Your child will recognize language absurdities (e.g., there's an elephant on your head).</p> <p>Your child will understand 1,500-2,000 signs/words.</p>		<p>Your child will use How much? and How? questions.</p> <p>Your child will provide a label when given a child-friendly definition of a familiar word (e.g., What is round and bounces? ... a ball).</p> <p>Your child will use associations and comparisons.</p> <p>Your child will use some basic qualitative concepts (e.g., wet, dry, hot, cold) and quantitative concepts (e.g., more, less, full).</p> <p>Your child will use 800-1500 words.</p>	
ASL	Spoken English	ASL	Spoken English
Your child will understand quantity (e.g., FULL, EMPTY, SOME).	Your child will answer final word analogies (e.g., cow is to farm as giraffe is to...).	Your child will fingerspell own name on request.	Your child will use negative modals (e.g., shouldn't, won't, can't).
Your child will answer questions: HOW, WHY, DO-DO.	Your child will understand -er and -est endings.	Your child will show increased use of topicalization (e.g., BALL, BOY THROW).	Your child will use regular and irregular past tense and third person singular -s verbs.
		Your child will use complex handshapes: W, D, P, 3, V, H, X, R, M, N, T, 8.	Your child will use articles <i>a</i> and <i>the</i> .
			Your child will be understood by everyone.

42-48 Months Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will follow topic changes and add comments without changing the subject.	Your child will understand that books are made up of written words.	Your child will draw pictures you can recognize.
Your child will use language to get and give details, tell needs/feelings, and make deals.	Your child will interact with books read aloud to a group.	Your child will draw pictures of people that have at least three parts (e.g., head, eyes, nose, arms, legs).
Your child will create and maintain worlds of make-believe.	Your child will hold books right-side-up and turn pages left to right.	Your child will print a few letters or numbers.
Your child will ask or respond to questions for clarification.	Your child will answer questions about a story.	
Your child will work in a small group for 10-15 minutes.	Your child will retell familiar stories.	



Think about including social skills or social stories for your daily reading. One resource is <https://www.juliacookonline.com/>

4-5 Years



4-5 Years Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will answer questions (e.g., what happened, why, how).</p> <p>Your child will understand more difficult directions about a picture (e.g., point to the big dog that is not brown).</p> <p>Your child will show the ability to think about and comment on language.</p> <p>Your child will understand time concepts and parts (e.g., later/earlier, half/whole, etc.).</p> <p>Your child will understand 13,000+ signs/words.</p>		<p>Your child will use 5-8 word sentences.</p> <p>Your child will tell a simple story that includes a beginning, middle, and end.</p> <p>Your child will use 2,500+ signs/words.</p> <p>Your child will ask why, whose, and what does this word mean questions.</p> <p>Your child will use two or more describing words in a sentence (e.g., front/back, heavy/light).</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will demonstrate awareness that lexicalized signs are made up of handshapes.</p> <p>Your child will distinguish nouns (double movement) from verbs (single movement) (e.g., CHAIR, SIT).</p> <p>Your child will understand number distribution (e.g., LEAVES, FALL-singular; LEAVES, FALL-plural).</p> <p>Your child will understand handshape categories (e.g., CL:F: BUTTON, FOX, CAT).</p>	<p>Your child will comprehend verb tense (e.g., kicked/kick, ran/run).</p> <p>Your child will follow directions using location words (e.g., on, top, beside, behind, under).</p> <p>Your child will comprehend irreversible passive tense (e.g., The ball was kicked by the boy).</p> <p>Your child will understand words for order (e.g., first, next, last).</p>	<p>Your child will use conditionals (e.g., SUPPOSE TEACHER SHE SICK? CLASS NONE).</p> <p>Your child will tell stories that include setting up absent people and objects in space.</p> <p>Your child will use time indicators (e.g., FINISH, NOT-YET).</p> <p>Your child will use WH bracketing (e.g., WHO GO WHO?).</p>	<p>Your child will use <i>because</i>, <i>if</i>, and <i>so</i> correctly in sentences.</p> <p>Your child will use words to describe placement (e.g., to, from, up, by, with).</p> <p>Your child will use irregular third person verbs (e.g., is, am, are).</p> <p>Your child will ask negative tag questions (e.g., we went, didn't we?).</p>

4-5 Years Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will join conversations. They will change the topic, nicely interrupt, and take at least 4 turns.	Your child will identify most uppercase and some lowercase letters.	Your child will recognize their own name in print.
Your child will discuss make-believe things and places.	For children that use a phonics-based approach, they will repeat a familiar rhyme and make rhymes to simple words.	Your child will print their first name or at least four letters.
Your child will understand humor and other points of view.	For children that use a phonics-based approach, they will blend and segment syllables and tell the first sound in some words.	Your child will draw pictures of people that have at least a head with eyes-nose-mouth, body, arms and legs, hands and feet.
Your child will state their town, their birth month, and their parents' first names.	With adult support, your child will track words in a book from left to right, top to bottom, and page to page.	Your child will draw and print in a planned and organized way.
Your child will use words to invite others to play.	Your child will retell familiar stories with structure and varying verb tense.	



Sign/talk “out loud” when you play with your child. Ask open-ended questions like “What do you think will happen if...?”

5-6 Years Receptive and Expressive Language Skills

5-6 Years



Language your child understands

- Your child will understand time sequences (e.g., What happened first, second).
- Your child will classify items by material (e.g., cloth, glass).
- Your child will understand who, what, when where, why, and how questions.
- Your child will understand verbs by demonstrating the action (e.g., walk, strut, march).
- Your child will follow group instruction and discussions.

How your child expresses thoughts/feelings

- Your child will relate action and describing words to their opposites.
- Your child will give and restate simple 1, 2, and 3-step directions.
- Your child will describe familiar people, places, things, and events with details.
- Your child will answer questions to get help, give information, or better explain something.
- Your child will add drawings or other visuals to descriptions to show ideas and feelings.

ASL

Spoken English

Your child will know basic classifier handshape and movement.

Your child will understand signing space and non-manual markers.

Your child will identify new meanings for similar signs (e.g., SAME/LIKE).

Your child will recognize common types of stories (e.g., story-signing, storytelling, poems).

Your child will follow directions that include *ask* or *tell*

Your child will understand passive tense (e.g., That song was sung by my Mom.)

Your child will understand irregular plurals (e.g., men, mice)

Your child will begin to understand non-literal meanings (e.g., make up your mind)

ASL

Spoken English

Your child will use basic classifiers for descriptions.

Your child will recite ASL poems, rhymes, and folklore with expression.

Your child will change sign movement or handshapes to make new words.

Your child will use role-shifting and/or non-manual markers (e.g., WANT/DON'T-WANT, WALK-QUICKLY/WALK-slowly).

Your child will use *it* or *that* to represent an entire idea (e.g., That's not my fault).

Your child will use adverbs (e.g., We will go *for* lunch. I want the yellow shirt *instead*).

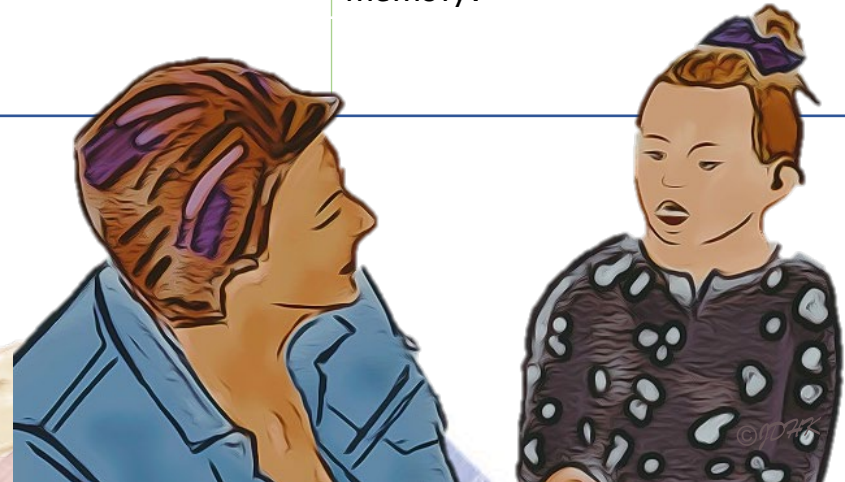
Your child will use clauses (e.g., as soon as, until, while, before, after).

Your child will use simple grammar correctly (e.g., pronouns, prepositions, and articles).

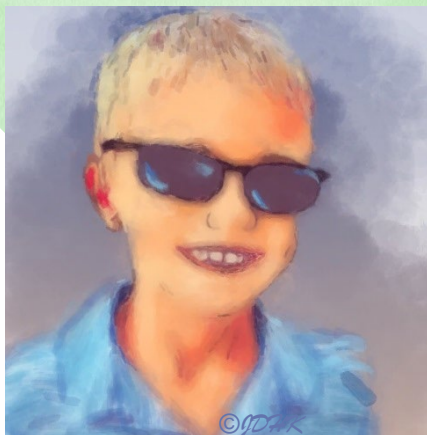
5-6 Years Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will follow agreed-upon rules for discussions (e.g., attend to others, taking turns).	Your child will identify and name all uppercase (capital) and lowercase letters of the alphabet.	Your child will write most uppercase and lowercase letters with correct spacing.
Your child will engage in different kinds of conversations.	For children that use a phonics-based approach, they will produce rhyming words, blend sounds, and segment words into syllables.	Your child will use words and pictures to tell an event or simple story in the right order.
Your child will maintain a conversation and respond to comments.	Your child will understand that print goes from left to right and top to bottom.	Your child will print first and last name with letters facing in the correct direction.
Your child will ask questions to understand a topic.	Your child will engage in a group reading with purpose and understanding.	Your child will print all 26 letters of the alphabet by copying them or from memory.
Your child will tell a well-structured, personal story.		

Cook with your child. Cooking gives you time together. You can work on following directions, math skills, and vocabulary.



6-7 Years

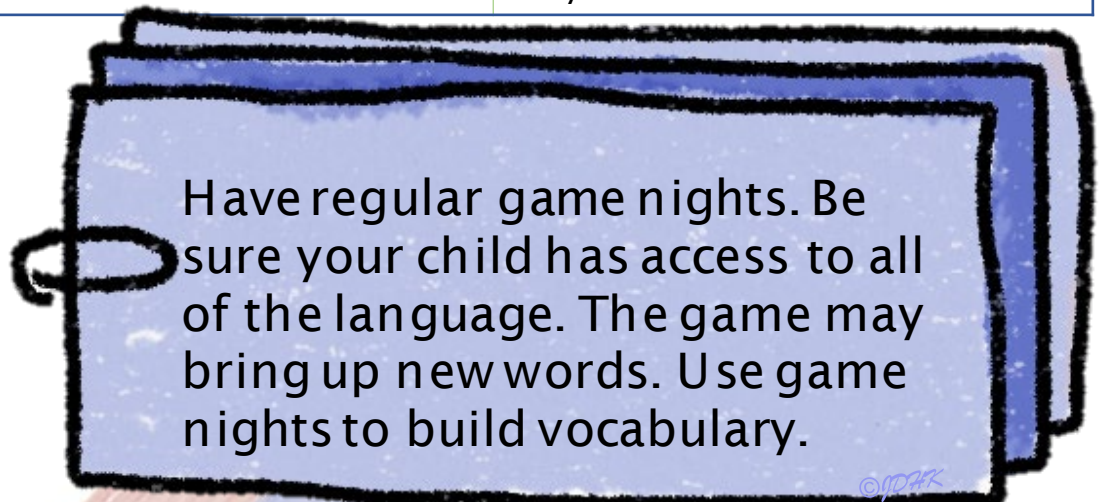


6-7 Years Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will be able to summarize a story after one exposure.</p> <p>Your child will be able to identify things that don't make sense in a sentence, both in the meaning of words and in the grammar.</p>		<p>Your child will use well-formed narratives.</p> <p>Your child will give and restate multi-step directions.</p> <p>Your child will list objects of a category and give categories a name.</p> <p>Your child will use <i>more</i>, <i>less</i>, and <i>most</i> in questions.</p> <p>Your child will produce full explanations.</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will recognize that signs are separated by movement and hold patterns.</p> <p>Your child will recognize that inflective changes in signs influence their meanings (e.g., SIT-for a long time, BOOK-give you/me).</p>	<p>Your child will understand reflexive pronouns (e.g., The girl fed herself).</p> <p>Your child will distinguish initial, middle, and final sounds in single-syllable words.</p>	<p>Your child will use the features of a sentence (e.g., eye gaze, body tilt, ending hold).</p> <p>Your child will use common conjunctions (e.g., KNOW, MOVE-ON, THAT; head nods, eye gazes).</p>	<p>Your child will use passive voice (e.g., The house was built in 1837.).</p> <p>Your child will use comparatives (e.g., better, best, worse, worst).</p>

6-7 Years Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will nicely gain attention and attend to others.	Your child will read grade appropriate texts with understanding.	Your child will print letters well.
Your child will have discussions with different people.	Your child will know and use common word families to decode unknown single syllable words.	Your child will be concerned with how their writing looks.
Your child will tell jokes.	For children who use a phonics-based approach, they will blend sounds to produce single and multi-syllabic words. Your child will segment individual sounds in one-syllable words, and add, delete, or substitute sound to change single-syllable words.	Your child will learn to spell one- and two-syllable words.
Your child will check on a listener's understanding.		Your child will establish hand dominance and pencil grip.
Your child will respond nicely to praise and apologies.		Your child will add words and simple sentences to pictures to write a story.



7-8 Years Receptive and Expressive Language Skills

7-8 Years



Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will use context clues to learn the meaning of unknown words.</p> <p>Your child will follow 3-4 oral directions in order (e.g., stay in your seat, wait for the bus to stop, and don't forget your backpack).</p> <p>Your child will answer questions about a story.</p>		<p>Your child will provide a summary of a story after one telling.</p> <p>Your child will answer complex yes/no questions (e.g., Was the boy telling the truth when he said he was going to a friend's house?).</p> <p>Your child will form their own ideas and opinions.</p> <p>Your child will use multi-word definitions.</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will build on conversations by adding their own comments to others' comments.</p> <p>Your child will ask for clarification of a topic.</p>	<p>Your child will understand words about place and time (e.g., midnight, minute, beneath).</p> <p>Your child will understand riddles and idioms.</p>	<p>Your child will manipulate signs (e.g., UNDERSTAND with four fingers to show intensity).</p> <p>Your child will describe how signs supply rhythm and meaning in a story, poem, or song.</p> <p>Your child will sign narratives in which they recount a well-elaborated event.</p>	<p>Your child will use present and past perfect tense (e.g., Have you been there before? She had read the book.).</p> <p>Your child will correctly use indefinite pronouns (e.g., <i>Many</i> come here, but <i>some</i> go down the street.).</p> <p>Your child will use complex verb tenses (e.g., He had been swimming. She might have hidden.).</p> <p>Your child will use up to 3 adjectives in the correct English order in a sentence.</p>

7-8 Years Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will produce full explanations.	Your child will read grade-level material and understand the text.	Your child will write simple stories with short sentences in sequence with pictures.
Your child will give multistep directions.	Your child will go back and re-read a sentence that does not make sense (self-monitor).	Your child will write short journal entries..
Your child will check for comprehension.	Your child will connect what they read to personal experiences and world events.	Your child will summarize stories with one to two short sentences
Your child will respond well to compliments.	For children who use a phonics-based approach, they will decode 1-2 syllable words and use context clues to help them sound out words.	



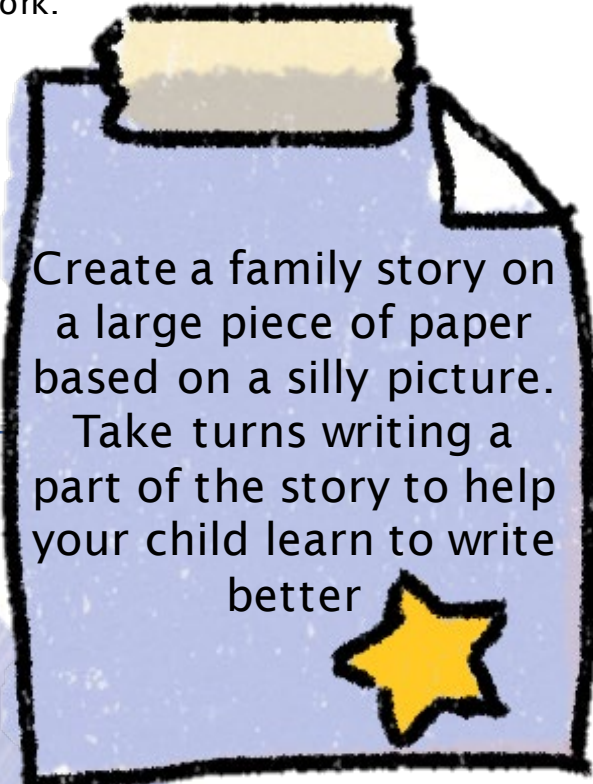
8-9 Years Receptive and Expressive Language Skills

8-9 Years



Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will understand what is taught in class.</p> <p>Your child will retell, paraphrase, and explain the main ideas and supporting details of a lesson.</p> <p>Your child will follow 4-step and higher directions.</p>		<p>Your child will share their own ideas and opinions.</p> <p>Your child will ask complex questions to gain information.</p> <p>Your child will use words taught in subjects like science, math, and social studies.</p> <p>Your child will clearly explain classroom vocabulary.</p> <p>Your child will ask and answer questions about information from a speaker.</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will determine the meaning of finger-spelled words and signs in context.</p> <p>Your child will decode unknown signs out of context.</p>	<p>Your child will understand jokes and riddles that have similar-sounding words.</p> <p>Your child will understand direction words (e.g., north, south, longitude).</p>	<p>Your child will express location through eye gaze and locative signs (e.g., VEHICLE-cl NEXT-TO HOUSE, HURT-ON-TUMMY).</p> <p>Your child will use descriptive classifiers.</p> <p>Your child will use linking signs (e.g., CL: 3-LIST, FOR-FOR-Q) to connect opinions and reasons.</p> <p>Your child will use temporal and inflection verbs to show event order (e.g., WAIT-a-long-time, GIVE-to me/you).</p>	<p>Your child will use passive sentences (e.g., Anita was driven to the theater by Carla).</p> <p>Your child will ask and answer factual and inferential questions.</p>

8-9 Years Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will use language to attain and maintain social status.	Your child will be able to identify the setting, characters, theme, and plot of a story.	Your child will use capitalization, punctuation, syntax, and grammar.
Your child will understand others' viewpoints.	Your child will describe characters in a story and explain how their actions impact the plot.	Your child will use writing to relate experiences .
Your child will give background details.	Your child will retell folklore, fables, and tall tales.	Your child will begin revising their work.
Your child will perform chores that take 15-20 minutes and run errands that involve time delays (e.g., remembering to bring something home from a friend's house).	Your child will determine the main idea of a text and recount key details.	
Your child will bring books and assignments from school to home and return them to school.	Your child will begin to move from "learning to read" to "reading to learn" (by third grade).	



Create a family story on a large piece of paper based on a silly picture. Take turns writing a part of the story to help your child learn to write better



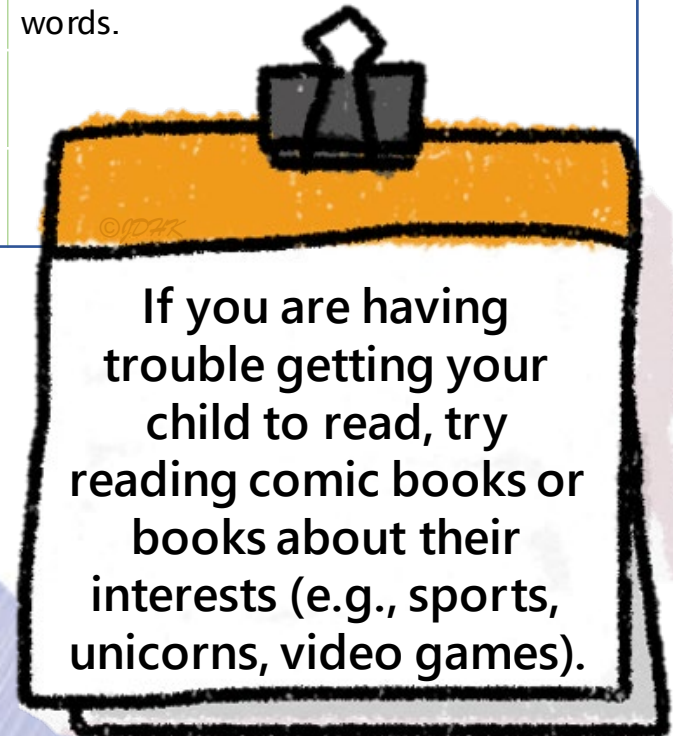
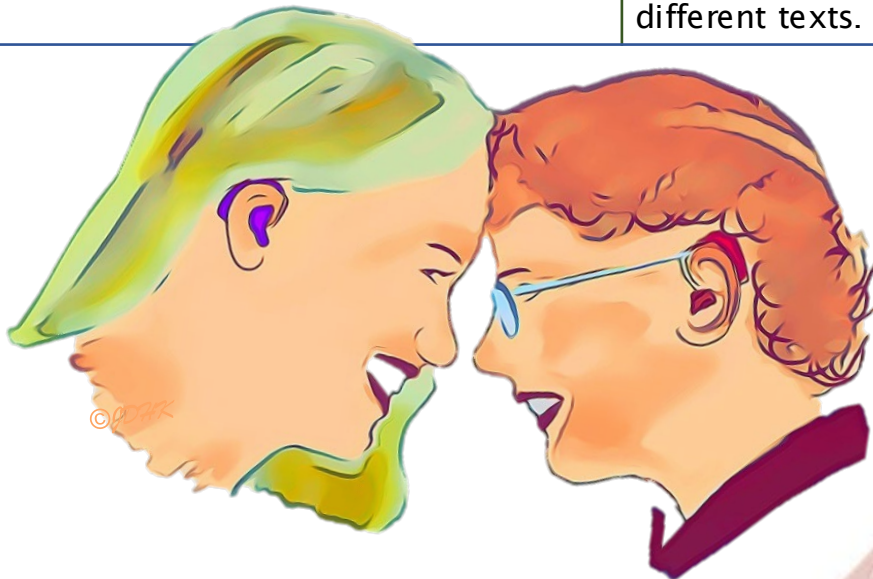
9-10 Years

9-10 Years Receptive and Expressive Language Skills

Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will base opinions on facts.</p> <p>Your child will use details from a speaker to support their viewpoint</p> <p>Your child will summarize major ideas and details from text read aloud.</p>		<p>Your child will use language for many reasons in different situations.</p> <p>Your child will retell information in the right order.</p> <p>Your child will give an organized speech in front of a group of people.</p> <p>Your child will join group discussions. Your child will add to others' ideas and express their own ideas.</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will know when to use formal and informal ASL .</p> <p>Your child will understand sign families (e.g., index finger signs often mean line of thought [WONDER, THOUGHT+DISAPPEAR]).</p>	<p>Your child will listen for key details in conversations and stories.</p> <p>Your child will know the psychological meaning of double - function terms (e.g., sweet).</p> <p>Your child will solve second-order analogies (e.g., hot: cold :: warm: cool).</p>	<p>Your child will link opinion and reasons (e.g., ALSO, IDEA-SAME, ADD).</p> <p>Your child will link ideas information using signs (e.g., OTHER, ALSO, RH-Q WHY, list referents).</p> <p>Your child will use role-shifting and description to tell events or show the emotion of characters.</p>	<p>Your child will use figures of speech (e.g., it's raining cats and dogs).</p> <p>Your child will explain the meaning of common idioms (e.g., skating on thin ice).</p> <p>Your child will use complex conjunctions (e.g., because, before).</p>

9-10 Years Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
Your child will sign/tell complex and interactive stories.	Your child will read for different purposes (e.g., for enjoyment, to learn something new, to get directions).	Your child will write narratives and descriptive texts.
Your child will understand jokes and riddles based on signs/words that can have different meanings.	Your child will make inferences (read between the lines) by using clues from the text and prior knowledge.	Your child will learn to write in challenging genres (e.g., expository, persuasive).
Your child will inhibit responses.	Your child will answer questions by looking at information in the text.	Your child will spell long, complex words.
Your child will show mature attention.	Your child will tell fact from opinion in text.	
	Your child will compare and contrast different texts.	



If you are having trouble getting your child to read, try reading comic books or books about their interests (e.g., sports, unicorns, video games).

10-11 Years Receptive and Expressive Language Skills

10-11
years



Language your child understands		How your child expresses thoughts/feelings	
<p>Your child will attend/listen and make conclusions about school concepts.</p> <p>Your child will know the meaning of 20,000 words.</p>		<p>Your child will summarize a speaker's points and show how claims are supported by reasons and evidence.</p> <p>Your child will tell about details gathered in group activities.</p> <p>Your child will give a clear and organized presentation.</p>	
ASL	Spoken English	ASL	Spoken English
<p>Your child will contrast different forms of ASL (e.g., regional accents, registers).</p> <p>Your child will be able to determine the theme of a signed story, drama, or poem.</p>	<p>Your child will know the meaning of common prefixes and suffixes (e.g., un-, -er, pro-).</p> <p>Your child will understand sentences that may have more than one meaning (e.g., The duck was ready to eat).</p> <p>Your child will explain some jokes and riddles that contain idioms.</p> <p>Your child will use context and nonverbal clues to understand sarcasm.</p>	<p>Your child will sign complex sentences.</p> <p>Your child will use role-shifting, description, and pacing to share personal stories.</p> <p>Your child will link opinion and reasons (e.g., THEREFORE, HAPPEN, SPECIFICALLY).</p>	<p>Your child will use inviting gestures and voice when presenting.</p> <p>Your child will understand and use proverbs (e.g., A leopard cannot change its spots.).</p> <p>Your child will use adverbial conjunctions (e.g., also, then, so, besides).</p>

10-11 Years Social and Print Skills

Your Child's Social and Play Skills	Your Child's Print Skills	
	Reading	Writing
<p>Your child will adjust politeness of request based on the age and status of the listener.</p> <p>Your child will negotiate with peers to resolve conflicts.</p> <p>Your child will give specific, clear route-finding directions.</p> <p>Your child will know that their partner may not understand the message.</p> <p>Your child will explain rules of game or sport in an accurate but simple way.</p>	<p>Your child will quote from a text and draw inferences of meaning.</p> <p>Your child will determine the meaning of content-specific words.</p> <p>Your child will explain how a narrator's point of view influenced the events.</p>	<p>Your child will learn to write in stages by doing outlines and multiple drafts.</p> <p>Your child will start writing at a level equivalent to their own speech.</p>



Humor is a fun way to improve your child's language skills. Think about taking time to chat about why an advertisement or part of a movie was funny.

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