



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

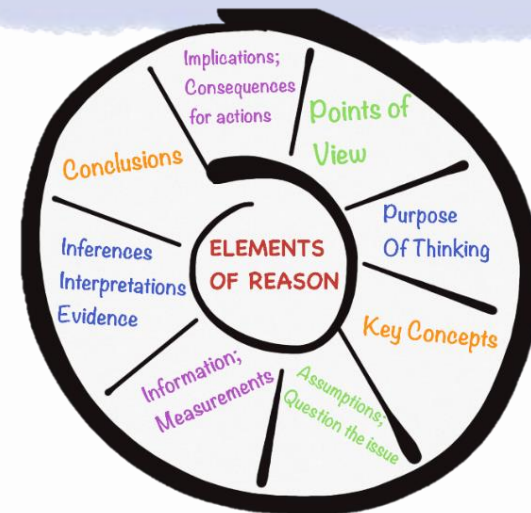
- <https://www.asha.org/Practice-Portal/Clinical-Topics/Spoken-Language-Disorders/Language-In-Brief/>
- Laurent Clerc National Deaf Education Center. (2020). *K-12 ASL Content Standards*. www.gallaudet.edu/k-12-asl-content-standards/standards.
- <https://handsandvoices.org/fl3/resources/toolbox.html>
- 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, <http://www.iteachilearn.com/cummins/bicscalp.html>: University of Toronto.
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- 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

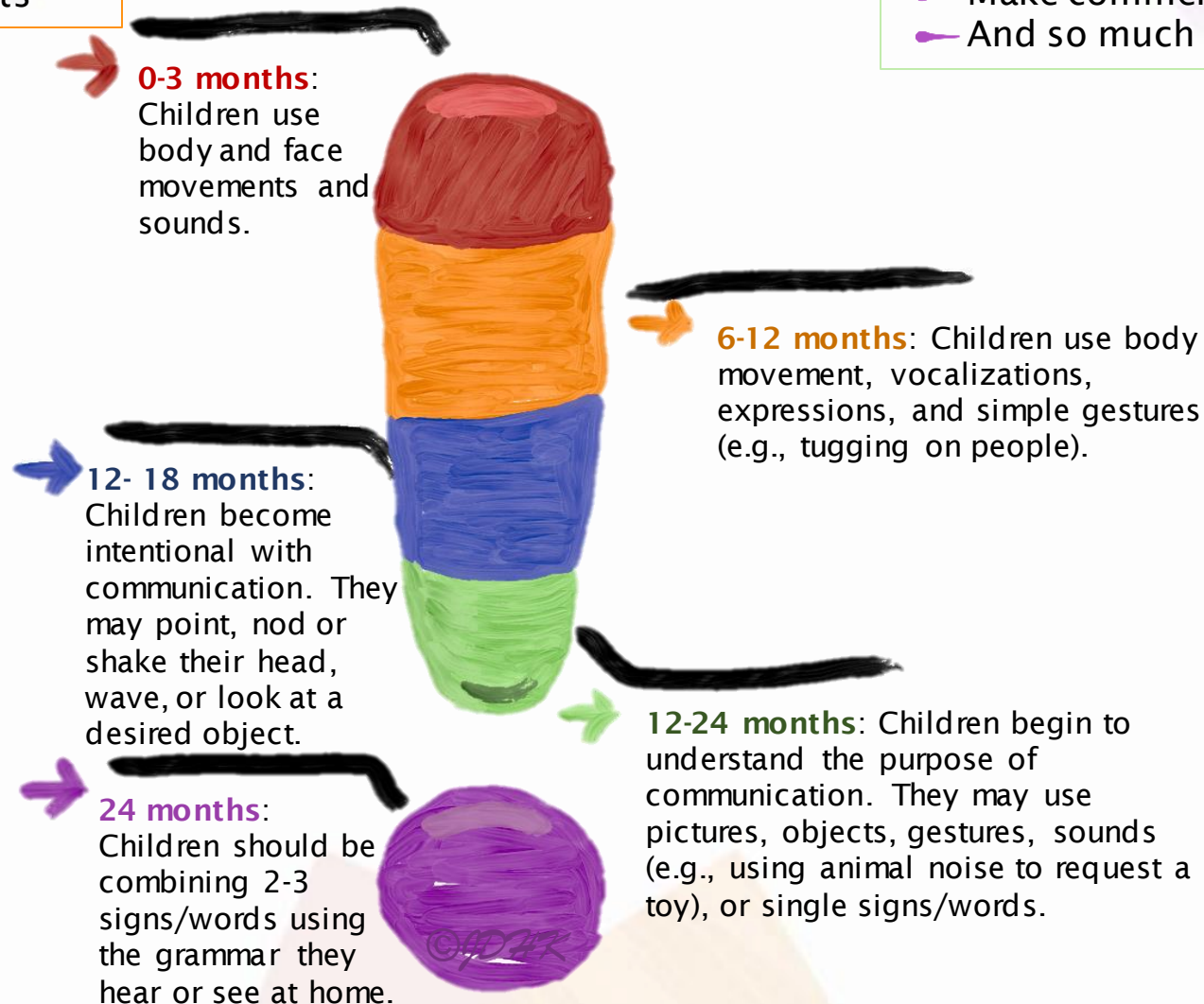
- Refuse or reject
- Request more action
- Request new action
- Request more objects
- Make choices
- Request new objects

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

5-6 years

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

5-7 years

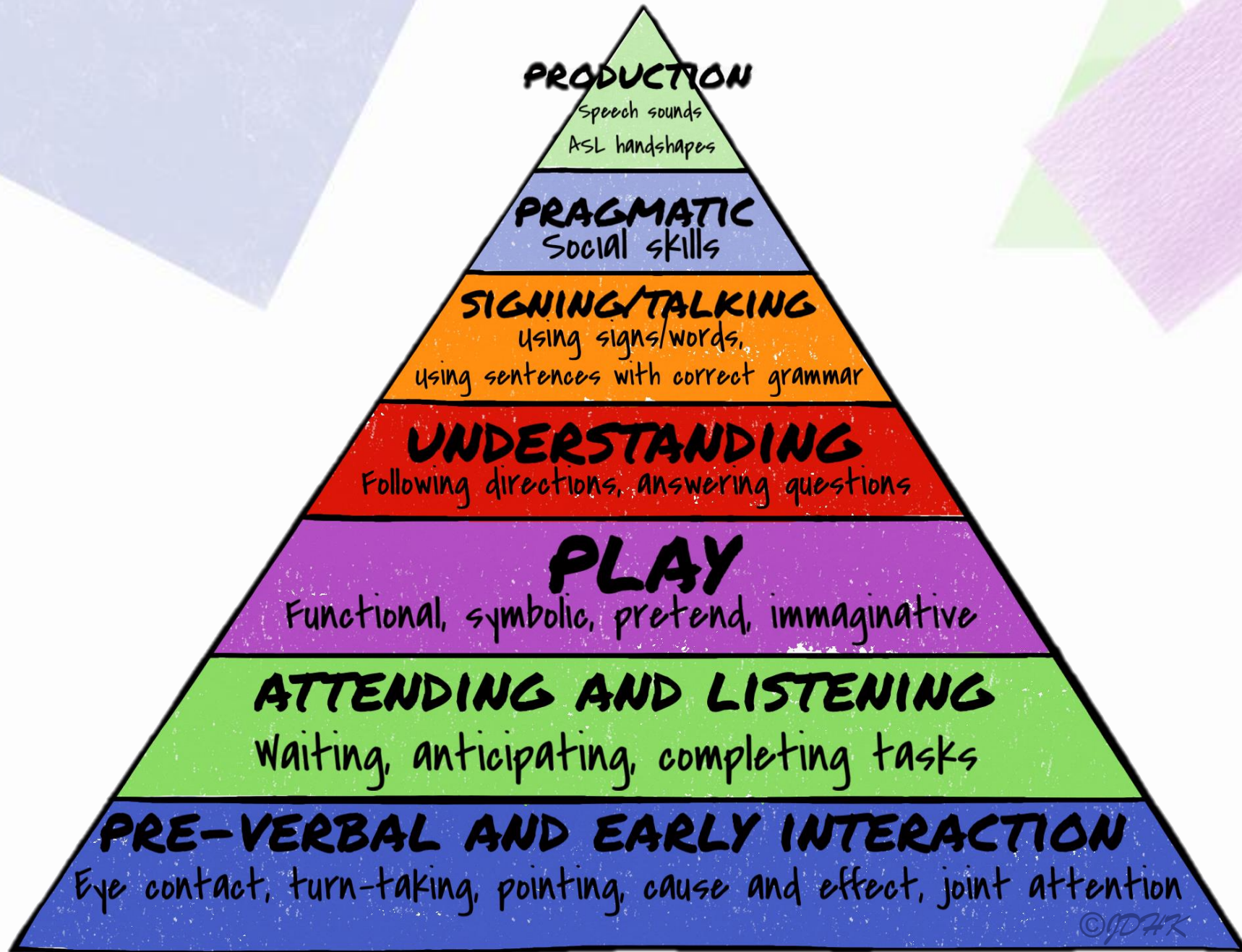
Stories follow a logical order with a problem and solution

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.

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://www3.gallaudet.edu/clerc-center/info-to-go/family-resources.html>

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 self-reliance
- 🧒 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.

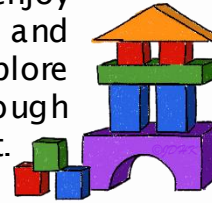


Smith, P., & Roopnarine, J. (Eds.). (2018). *The Cambridge Handbook of Play: Developmental and Disciplinary Perspectives* (Cambridge Handbooks in Psychology). Dancygier, B. (Ed.). (2017).

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.

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).

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://www3.gallaudet.edu/clerc-center/info-to-go/literacy/strategies-to-support-literacy.html>
- <https://www3.gallaudet.edu/clerc-center/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(5), 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 communicating*. 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/federal/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., & Crago, 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-ten-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.asha.org/PRPSpecificTopic.aspx?folderid=8589935334§ion=Key_Issues
- <https://www.doe.in.gov/sites/default/files/elme/chapter-1-an-introduction-to-english-learners.pdf>

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

https://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935225§ion=Key_Issues

- <https://www.colorincolorado.org/article/language-and-older-adopted-child-understanding-second-language-learning>
- <https://leader.pubs.asha.org/doi/10.1044/leader.FTR1.13172008.10>
- <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.charge syndrome.org/>
- Deaf with disabilities <http://deafwdisabilities.grou.ps/home>
- Gallaudet University <https://www3.gallaudet.edu/clerc-center/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-disabilityies/>
- Understanding Dad <http://understandingdad.net/research2>
- Understood <https://www.understood.org/en>