

## Frequently asked questions:

- How will we communicate with our child?
- What are the different ways to communicate?
- What is different about all of them?
- How will my child learn to read?
- What special training will we need?
- Will our child have to go to special schools?

The following chart shows the communication approaches, expected outcomes and some goals for children with a hearing loss or deafness.



Image provided by the National Cued Speech Association



	Visual approaches		Combined approaches		Spoken language approaches	
<b>Definition</b>	Visual communication uses sign language as the primary communication.		A combined approach is using sign language and speech to communicate.		Spoken language approach is teaching speech, listening and using language skills through hearing.	
<b>Goals</b>	<ul style="list-style-type: none"> <li>• Develop a positive self image and identify with the deaf community culture.</li> <li>• Use ASL as primary language. Spoken and/or written English may become a second language.</li> <li>• Use ASL successfully at school.</li> <li>• Use written English.</li> </ul>		<ul style="list-style-type: none"> <li>• Participate in both the hearing and deaf communities.</li> <li>• Offer communication between the child and family, teachers and peers with sign language.</li> <li>• Use sign language as a bridge for the very young child to develop spoken language.</li> </ul>		<ul style="list-style-type: none"> <li>• Find hearing loss as soon as possible.</li> <li>• Fit child with amplification as soon as possible. Early hearing aids or cochlear implants help children hear all speech sounds.</li> <li>• Wear hearing aids when the child is awake.</li> <li>• Go to general education classes.</li> <li>• Join in activities in the hearing community.</li> <li>• Use hearing skills for learning, listening and talking.</li> <li>• Active family participation in therapy sessions.</li> <li>• Partner with professionals to work as a team.</li> </ul>	
<b>Types</b>	<p><b>American sign language (ASL)</b> ASL is a visual language made with hand signs. ASL has unique sentences and language codes. Many people who are deaf only use this language and they do not use speech. Written English is learned as a second language.</p>	<p><b>Conceptually accurate signed English (CASE) or pidgin signed English (PSE)</b></p> <ul style="list-style-type: none"> <li>• Uses signs from ASL in order of English sentences.</li> <li>• Uses CASE or PSE in combined approaches.</li> </ul>	<p><b>Total communication (TC) or simultaneous communication (Sim-Com)</b></p> <p>TC or Sim-Com may use many forms of communication: sign language, voice, fingerspelling, lipreading, amplification, writing, gesture, visual imagery (pictures).</p> <ul style="list-style-type: none"> <li>• Sign language in TC or Sim-Com is more like English than ASL.</li> <li>• Language is understood through sign language, listening and lip reading.</li> <li>• Language expression is through sign language, speaking and writing.</li> <li>• Families learn sign language so they can use it on a daily basis.</li> <li>• Families are also taught how to help their child learn language.</li> </ul>	<p><b>Cued speech:</b></p> <ul style="list-style-type: none"> <li>• Uses both auditory and visual information.</li> <li>• Helps children develop a language base built on speech sounds for conversation, reading and writing.</li> <li>• Promotes speech, speechreading and listening skills.</li> <li>• Uses hand shapes that work with natural mouth movements. Match each speech sound and teach what the speech sound is when someone is talking.</li> </ul>	<p><b>Auditory-verbal (AV)</b></p> <ul style="list-style-type: none"> <li>• AV does not use sign language or lip reading.</li> <li>• Children wear hearing aids and/or cochlear implants for the best access to speech sounds.</li> <li>• Family learns how to teach their child to listen and talk.</li> <li>• Family works with their child at home to carry over skills from therapy.</li> <li>• Therapy focuses on listening, speaking and language.</li> <li>• Family joins in therapy with the child and therapist.</li> <li>• Hearing is the basis for understanding and learning to speak.</li> </ul>	<p><b>Auditory-oral (AO)</b></p> <ul style="list-style-type: none"> <li>• Use hearing and lipreading.</li> <li>• Wear hearing aids and/or cochlear implants.</li> <li>• Attend small, self-contained classrooms. Teachers in those classes have special training to work with them.</li> <li>• Stress therapy and education during the school day.</li> <li>• Learn to listen and talk from family.</li> </ul>
<b>Responsibilities</b>	<ul style="list-style-type: none"> <li>• Seek out fluent users of the sign approach chosen as a role model for your child.</li> <li>• Family members should become fluent in sign.</li> </ul>		<ul style="list-style-type: none"> <li>• Consistently use sign and spoken language strategies.</li> <li>• Learn to cue fluently.</li> <li>• Always wear amplification.</li> <li>• Cue at all times.</li> </ul>		<ul style="list-style-type: none"> <li>• Focus exclusively on teaching speech and language through hearing.</li> <li>• Communicate verbally to allow your child to develop listening skills and spoken language.</li> <li>• Wear amplification while awake.</li> </ul>	