

The Canadian Hearing Society Position Paper on Access to Language and Language Acquisition for Children who are Deaf and Hard of Hearing

The Issue

To ensure the development of language and communication competencies, it is essential that all infants and young children are provided with uninhibited and unimpeded access to language. In Canada, such language acquisition and development opportunities are readily available to typically hearing infants and children through normal interaction with their environments and the people in their environments. However, that is not the case for children who are deaf or hard of hearing. Many infants and young children who have been identified as having hearing loss encounter considerable challenges and barriers to accessing and acquiring languages through their natural form (i.e. auditory and/or visual), something that is essential for their cognitive development and eventual success in life. In addition, these infants and young children face a lack of public services that would enable them to access and acquire American Sign Language (ASL) or la langue des signes québécoise (LSQ). In many contexts, children who receive cochlear implants and/or auditory-verbal (AVT) intervention services face restrictions on exposure to and acquisition of ASL or LSQ. (Please refer to "Terms Key to Understanding the Issue" in this paper to understand ASL, LSQ and AVT more fully.)

There is a critical distinction to be made between language and how we produce or articulate language. In spoken language, gestures of the vocal cords, the mouth, and the tongue, etc. are used to "produce" language. In signed language, gestures of the hands, the body, and face, etc. are used to "produce" language. Language itself is something of the mind (or the brain). It can be used to think about things, plan arguments, and even practice telling a joke, etc., without ever being articulated in speech or sign.

It is important to make the distinction between language (e.g. English, French, ASL, LSQ) and approaches to teaching language (e.g. auditory/oral approaches, immersion, bilingual strategies and techniques).

In addition, academic literature on typically hearing children notes that "it is widely acknowledged that linguistically rich home environments contribute more powerfully to the early development of these critical abilities" necessary for later literacy success (Jordan, Snow, & Porche, 2000). Clearly, deaf and hard of hearing children who do not have early access to language – signed or spoken – are put at high risk for difficulties with literacy development.

The Canadian Hearing Society (CHS) Position on the Issue

The right to language access and language acquisition is a necessary prerequisite for exercising the right to human dignity, freedom of expression, and all other human rights. Deaf children and children with hearing loss have the right to barrier-free access to language acquisition during the early years when language is readily acquired. They have the right to acquire signed language in addition to spoken language.

It is the position of CHS that barriers within policies that limit these children's access to language acquisition environments need to be removed. In addition, publicly funded early intervention programs should not require families to choose between communication service options that restrict children's access to the bilingual or multi-lingual learning of a signed and a spoken language.

For these reasons, early intervention programs for deaf and hard of hearing children should be designed and implemented to support, and not pose limits to, bilingualism in a signed and a spoken environment.

The removal of inhibitions and impediments, along with the provision of appropriate services, will provide a greater chance for the development of age-appropriate language in the language(s) of choice, greater chance for the development of age-appropriate social, emotional and cognitive skills, and greater chance of development in the spoken language, including intelligible speech (Yoshinaga-Itano, 2008).

The intention of this position paper is to advocate for the removal of barriers and restrictions impeding or inhibiting a deaf or hard of hearing child's access to a language, and to help parents in making informed choices about the languages and communication options that are available.

The Prevalence of Hearing Loss in Children

Approximately four in 1,000 Canadian babies are born with some degree of hearing loss or will develop early progressive childhood hearing loss. Statistics from the Infant Hearing Screening program in Ontario are consistent with the national statistics (Ontario Ministry of Children and Youth Services, 2007).

Terms Key to Understanding the Issue

In Canada, there are two main signed languages: American Sign Language (ASL) and la langue des signes québécoise (LSQ).

American Sign Language (ASL): a language with complex grammar and syntax. It is distinct from spoken languages and other signed languages and it uses signs composed of movements of the hands and arms, eyes, face, head and body. ASL is used by Deaf people primarily in Canada and the United States.

La langue des signes québécoise (LSQ): (Québec Sign Language) a language with complex grammar and syntax. It is distinct from spoken languages and other signed languages and is used by Deaf people primarily in Quebec and other French Canadian communities. Signs are composed of movements of the hands and arms, eyes, face, head and body.

Auditory Verbal Therapy (AVT): therapy that focuses on the application and management of hearing aid/cochlear implant technology (assistive listening devices), strategies, techniques and procedures to enable children with hearing loss to learn to listen and understand spoken language in order to communicate through speech.

Rationale for CHS's Position

Access to language is crucial for all children's cognitive, educational, and social development. In many cases, deaf and hard of hearing children face difficulties in acquiring a first language because of limited access to language through the auditory channel and/or limited access to proficient native signers. If young children do not have adequate exposure to a fully accessible first language, they will experience language deprivation and may never develop proficiency in any language.

Both spoken and signed languages have equal biological status in language acquisition and brain organization (Petitto, 2000). As many of these children will benefit from regular and

frequent exposure to an accessible, visual signed language from birth onwards, restrictions to exposure to a signed language should not be imposed.

Restricting access to ASL or LSQ because they are visual languages and believed to interfere with the development of speaking and listening skills is a practice unsupported by research. There are no studies or empirical research supporting the need to limit a deaf or hard of hearing child's exposure to a signed language; however, there is insurmountable evidence that if children are not exposed to an accessible language from infancy, they will experience life-long negative effects. Parents who choose to pursue an auditory or "spoken language" approach to their child's language acquisition and want to have their child exposed to two accessible languages, a spoken language and a signed language, should be encouraged to do so.

In addition to clear scientific and ethical grounds, existing legislation, significant legal decisions and independent research reports support CHS's position:

United Nations Convention on the Rights of the Child (1989), United Nations Convention on the Rights of Persons with Disabilities (2007), The Canadian Charter of Rights and Freedoms (1982), Canadian Human Rights Act (2005), Ontario Human Rights Code (1990), Ontario Human rights Commission's Policy and Guidelines on Disability and the Duty to Accommodate (2000), and the Accessibility for Ontarians with Disabilities Act (2005). See Appendix A for a summary of these decisions.

Frequently Asked Questions

• I am a parent of a newly identified deaf (or hard of hearing) infant. Is it a fact that learning a signed language interferes with the development of speech and residual hearing skills?

There is no evidence to support the position that learning signed language hinders the development of spoken language or residual hearing skills. Existing research that addresses the matter of the learning of a signed and a spoken language by children with hearing loss suggests that learning a signed language has a positive effect on the development of spoken language (Preisler, Tvingstedt, & Åhlström, 2002; Yoshinaga-ltano, 2006). See also the document <u>Sign Language Use for Deaf, Hard of Hearing and Hearing Babies: The Evidence Supports It</u> at

http://www.deafchildren.org/resources/49_Sign%20Language%20Use.pdf

Approximately 90% of these children are born to hearing parents who generally have little knowledge of or experience with early childhood hearing loss. Thus, it is crucial that parents of young deaf and hard of hearing children receive accurate, research-based information about the advantages that bilingualism in a signed and a spoken language hold for their children (Kushainagar, Mathur, Moreland, Napoli, Osterling, Padden, et al., 2010).

There is a growing body of literature that concludes that acquiring ASL or LSQ from infancy onwards has exactly the same outcomes as acquiring a spoken language from infancy onwards - it is fundamental to optimal first-language acquisition and cognitive, social, and emotional development in children with hearing loss (Cummins, 2006; Goldin-Meadow & Mayberry, 2001; Grosjean, n.d., Malloy, 2003; Petitto, 2009 and Snoddon, 2008). In all cases, this research shows that exposure to signed language must begin early (from birth if possible) to achieve optimal language, cognitive and brain growth.

This body of research on the benefits of learning ASL or LSQ from birth supports earlier research demonstrating superior academic performance of deaf children with deaf parents using signed language as compared to deaf children with hearing parents not using signed language (Israelite and Ewoldt, 1992). An examination of that earlier literature also reveals that "reading abilities are not solely linked to having deaf or hearing parents. Early diagnosis, early access to language and exposure to English are critical. Having a mother who signs, regardless of her hearing level, appears to be more important" (Marschark, 1997). Proficiency in a signed language has also been shown to have a strong positive correlation with literacy in English and French (Prinz & Strong, 1998; Dubuisson, Parisot, & Vercaingne-Ménard, 2007).

• Where can I find information about what approach I should take to my child's language development?

We're here to help! The Canadian Hearing Society's has published <u>Starting Point: A Resource for Parents of Deaf or Hard of Hearing Children</u> that provides a reassuring introduction to what, for many parents, is brand-new, uncharted territory. As with any new terrain, there are lots of bumps and turns, and roads to choose from in the landscape before you. It's our goal to provide a handbook that describes what lies ahead and gives direction to the many other resources that exist to help you on your journey. We invite readers to download our free handbook at www.chs.ca, or to contact us about CHS programs and services available to you.

In addition, CHS and the Canadian Cultural Society of the Deaf have co-published Questions Parents Ask, (Small, A and Cripps, J., 2003), also available at www.chs.ca.

For more information please contact The Canadian Hearing Society.

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Appendix A: Legislation and Legal Decisions

<u>United Nations Convention on the Rights of the Child [1989]:</u> Canada and 139 other Member States signed this convention, which entered into force in September 1990. The Convention aims to eradicate all forms of discrimination and abuse against children in all areas of life including education and health care. The Convention requires States Parties to recognize that a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance, and facilitate the child's active participation in the community.

<u>United Nations Convention on the Rights of Persons with Disabilities [2007]:</u> Canada and 141 other Member States and the European Community signed this landmark new convention, which entered into force in May 2008. Canada ratified the convention on March 11, 2010. The treaty aims to eradicate discrimination against persons with disabilities in all areas of life including education, health services, and access to justice. The Convention requires States Parties to recognize and promote signed languages, facilitate the learning of signed language and promote the linguistic identity of the deaf community in the education system.

<u>The Canadian Charter of Rights and Freedoms [1982]:</u> The Charter is a bill of rights entrenched in the Constitution of Canada. The Charter protects the political and civil rights of all Canadians, and supersedes all provincial human rights codes.

<u>Canadian Human Rights Act [1985]:</u> This Act extends the laws of Canada to uphold the principle that "all individuals should have an opportunity equal with other individuals to make for themselves the lives that they are able and wish to have and to have their needs accommodated...without being hindered in or prevented from doing so by discriminatory practices based on...disability."

Ontario Human Rights Code [1990]: The Code protects Ontarians from discrimination based on disability or other characteristics (e.g. race, ancestry, family status, sexual orientation, etc.) and calls for a "climate of understanding and mutual respect for the dignity and worth of each person so that each person feels a part of the community and able to contribute fully to the development and well-being of the community and the Province".

Note that other provinces and territories have legislation, policy and/or guidelines on the duty to accommodate persons with disabilities that embody the principles of the Ontario Human Rights Code. For links to these sites please visit us at www.chs.ca.

Ontario Human Rights Commission's Policy and Guidelines on Disability and the Duty to Accommodate [2000]: The Ontario Human Rights Code explicitly states that everyone has the right to be free from discrimination. The Policy and Guidelines outline the details and give practical measures for workplaces, public transit, health and education services, restaurants, shops, and housing to provide Ontarians with disabilities equal treatment and barrier-free access.

Accessibility for Ontarians with Disabilities Act [2005]: Passed unanimously in the Ontario Legislature, this Act commits the government of Ontario to create, implement, and enforce standards of accessibility with respect to goods, services, facilities, accommodation, employment, buildings, structures and premises for the 16 per cent of Ontarians with disabilities, including people who are culturally Deaf, oral deaf, deafened, and hard of hearing.