

# Cued Speech use with deaf babies



Complete spoken language  
through vision

## Information Sheet 2

### A parent's view

'Our son, Will, was about nine months old when he was diagnosed as profoundly deaf. He is now two and a half, and although he hasn't had any useful hearing for most of his life, he has nearly age-appropriate comprehension of English, good signing, and, now, a couple of months after the switch on of his cochlear implant, he is recognising a number of vocal sounds, understanding a few simple spoken phrases, and he's trying to speak for the first time.

Right from the beginning, our main priority was for him to learn a full, grammatical language, since, without that, we knew that he wouldn't be able to think properly, let alone communicate. Supporting his aural and oral skills was also a priority for us – we made sure he had his hearing aids on all of the time and we did loads of talking to him about everything all day long, but tests showed that he could hear virtually nothing.

Our teacher of the deaf and his deaf co-worker encouraged us to think positively about all the communication methods that we could use, including signing. They started teaching us some sign, and they demonstrated how we could try to make sound and speech interesting and meaningful for Will.

But while we enjoyed using sign, we couldn't help feeling dissatisfied with the prospect of relying entirely on signing to communicate with Will in the long term. We also found it very frustrating that we couldn't speak to him in our own

language, especially since we didn't yet know how to sign most of the things that we wanted to say.

We then read an article about Cued Speech which is a very simple system of assisted lip reading, based on using eight hand shapes in different positions around the mouth as you talk to clarify visually (phonetically) everything that you are saying with your natural speech. If a deaf child is cued to consistently from an early age, they should be able to learn English relatively easily and naturally as a first language, irrespective of whether they have any hearing or not. It has been used in France, Belgium and Switzerland and parts of the USA for the past twenty years or so as a mainstream tool for educating and communicating with deaf children, with stunning results. Within a month we were trained up (by the Cued Speech Association UK – free of charge) and had started to cue everything we said to Will. Instantly, we felt confident and in control again as parents.

Cued Speech has allowed Will to understand English fully, despite having no hearing. It has been hard work, but being able to stop Will having a tantrum by explaining to him, in English, that he can go and play in the sand after we've found his buggy and changed his nappy, so why doesn't he come and help me find his buggy? ... Or that he will be able to have his biscuit as soon as I have put the shopping in the car and got him in his car seat ... is worth everything!

**Sarah Collinson, London**

*Cued Speech is a simple sound-based system comprising eight handshapes used in four positions near the mouth together with the lip patterns of normal speech so as to make all the sounds of spoken language fully comprehensible to deaf babies, children and adults*

### More information?

Video, booklet and more information sheets available.

### Learn to Cue

Regular courses (some residential) are arranged, with low cost or free tuition.

**Call an experienced user now to discuss the benefits of Cued Speech**

### Contact us at:

**Cued Speech Association UK**  
Tel, voice and text: 01803 832 784  
Fax: 01803 835 311  
E-mail: [info@cuedspeech.co.uk](mailto:info@cuedspeech.co.uk)  
Web: [www.cuedspeech.co.uk](http://www.cuedspeech.co.uk)

## Tips taken from: The Cued Speech Resource Book for Parents of Deaf Children

### It is never too soon to start

'It is never too soon to start cueing to a hearing-impaired baby. Maximum early benefits of natural language development can be achieved by naturally talking and cueing to a hearing-impaired baby, just as a mother does to a hearing baby. Each day of delay may be one additional day behind the optimum in language development and mental stimulation. The "cue maxim" is: "Do and say the same things with your hearing-impaired baby that you would say with a hearing baby."

With our hearing babies we begin communication and the magic process of language input immediately after birth, talking and verbally caressing them even as we do our initial inspection, counting fingers and toes, and conveying our love to our newborn.

Similar results can be achieved with hearing-impaired babies, if the supplementary visual input of Cued Speech (to deliver a clear visual representation of the language) and specific auditory training (to enhance awareness of sound and increased use of residual hearing) are included. Of course those interacting with hearing-impaired babies must learn the techniques of managing to cue and speak when the baby is watching, leading the child to form the habit of looking and listening.

### But my baby may manage without Cued Speech!

What if all or part of this effort is wasted? Suppose it is found later that the child doesn't really need Cued Speech? The inescapable problem is that if you have a profoundly hearing-impaired baby and do not assume that he/she *may* need all this extra effort and input, you may wake up after a year or two to the fact that he/she needed it desperately, and that it is now too late for those early benefits.

Do it, and if it turns out to be an insurance policy you didn't have to collect on, you will rejoice in the knowledge that your child has more auditory potential than you could be sure of in the beginning. Most of what you do is needed by a baby with normal hearing: the input just needs to be stepped up a bit and supplemented visually for a hearing-impaired baby. Cued Speech won't hurt

a child; in fact, there is increasing evidence that it is beneficial for children with normal hearing, especially if they have certain learning problems.

### Be natural

Try to be natural when interacting with your hearing-impaired child. As a beginning cuer you may lack confidence or worry about your child's attentiveness. Don't! As the cued words become meaningful you will see a positive change. Are you wondering what to say, or how to say it? When in doubt, think *hearing*. Do you speak in complex, sophisticated sentences to a hearing baby? Of course not. Baby talk is natural and cue-able! However, do not linger at the baby-talk level too long. Use varied expressions and vocabulary as receptive vocabulary grows. Talk with your child about anything and everything of interest to him/her.

### There's more to Cued Speech than cueing

By Marylou Barwell

A common saying among oralists is: "Oralism is not an academic exercise, it's a way of life." Much the same thing could be said about Cued Speech. At the outset, the task of learning the system and becoming fluent may be so absorbing as to make parents forget that fluency is really the beginning of the rainbow, not its end. The stories of many Cued Speech children and their families reveal a common, sometimes overlooked thread. In the end, it is not the children's remarkable achievements that stand out, though certainly these are important. Rather, it is how the experience of raising a child on Cued Speech has enriched and changed the parents' lives, turning disadvantage into advantage.

The children who are successful on Cued Speech have parents who – whether they learned quickly and easily, or slowly and laboriously – *learned*. These parents incorporated Cued Speech into their daily lives.

A philosophy of how to use Cued Speech has evolved – a philosophy rooted in parents' and professionals' conviction that a child needs (and indeed deserves) a happy and satisfying childhood, in which the emphasis is not on teaching language, but on experiencing it.

## Tips taken from: The Cued Speech Resource Book for Parents of Deaf Children

Parents want and need more than to be taught how to cue. They want to be shown how to make it work. At the very center of parents' approach to anything is their attitude. Parents of successful deaf children somewhere along the way, manage to do four things:

- ◆ They show respect for their child, and the child knows it.
- ◆ They treat the child as any other child, insofar as possible.
- ◆ They believe in themselves, in Cued Speech, and in the child.
- ◆ They find the balance between too much and too little.

Ultimately, to treat the child as any other child is to develop a quality of communication equal to that with the hearing children (if any) in the family. It is necessary to expose the hearing-impaired child to the depth and breadth of language given to other children – not that this is easy to do. It is to expect of the child the same behaviour and level of achievement (if possible) as others, and it is to be willing to give him/her the freedom to develop self-confidence and independence, by “letting go” an inch at a time.

### How much should I cue?

Beyond what determines how high a plane will fly, is there a “minimum daily requirement” without which it won't even get off the ground? Yes, indeed. Though Cued Speech can achieve substantial benefits in a school program of good quality with no cueing support at home, particularly with a good language curriculum and skilled therapy, it can achieve far more with cueing and auditory support at home. The available research (Hage, Alegria, & Périer, 1989) indicates clearly that use of Cued Speech at home has a substantially greater benefit than its use at school. The optimum, of course, is maximum support in both the home and the school.

The acceptable minimum at home, ultimately, is to cue consistently casual conversation and communication that is age-appropriate for the child, and to cue it accurately and fluently, in the

course of everyday living. Everything beyond that, such as conscious vocabulary building, specific language-development and enrichment effort, and auditory practice will help the child progress further and faster.

### Make the meaning clear

The principle to remember is this: What you mean must coincide with what the child thinks you mean. If you hold something up as you cue and say its name, the child eventually catches on that what you are saying is its name. This doesn't usually happen at first. Many opportunities must be provided before the child understands that everything has a name, and that what you are showing him/her with your mouth and your hand relate directly to what you are doing. When the child begins to make this connection, things start to happen very rapidly (and you get a golden glow!).

### The ‘snowball effect’

Keep in mind that a hearing child can simultaneously listen to what you are saying and continue playing with what you are talking about. A hearing-impaired child must stop playing and look at you to receive your message, or to learn language. You must watch for opportunities. The ability of a child to watch seems to develop with a “snowball” effect. The more s(he) watches, the more s(he) begins to understand. The more the child understands, the more s(he) is motivated to watch. Parents and others working with the child must learn to judge when the child has played with something long enough to be willing to pause for language input. Once you reach this point, you will find it easier to adjust your input to your child's interests. Your improvement in this respect will result in increased attentiveness from him/her.'

*Taken from Chapter 18 of The Cued Speech Resource Book for Parents of Deaf Children, by Dr. R. Orin Cornett, Ph.D and Mary Elsie Daisey, M.Ed*

*There is much more information about the benefits of using Cued Speech and how to use it with your child, including descriptions of games and activities, in the Cued Speech Resource Book which is available to buy from the Cued Speech Association UK, price £29.00.*

## Early communication in the home with hearing parents

There is not normally a communication problem with very young deaf babies; so much so that parents often don't realise that their child is deaf. However the pre-verbal communication during the first months of life (made up of looks, smiles, caresses, etc.) do not fulfil the needs of an older baby who needs a real language, rich, precise and full of nuances - adapted to his ever-growing needs. He must be able to make himself understood precisely, to express his desires clearly, his questions, his reasoning and his needs. He needs this not only to communicate but also to order his thoughts and to allow his thought patterns to develop normally.

### How does a child acquire the language spoken around him?

A hearing child generally does not have any problem. The child uses the language (English, French, etc) he has heard around him naturally for many months and begins to speak spontaneously. All day long the hearing child is surrounded by a huge **quantity** of good **quality** language in **varied** situations:

### For the deaf child, it does not work the same way

In 90% of cases, deaf babies are born into hearing families who communicate through speech. Some moderately deaf, and a few severely deaf children may be able to hear all the sounds of speech with their hearing aids, and if this is the case they can acquire language naturally in the same way as hearing children. Such children do not normally need Cued Speech.

However, for many severely deaf children and all profoundly deaf children a hearing aid will not enable them to hear all the sounds of speech. They may hear few, occasionally no, speech sounds. Those they do hear may be heard imprecisely (e.g. they may hear a sound for M and B but not know which is which, or they may hear only vowel sounds). Only 30 – 40 % of language can be lipread, so this is of limited help. **Both the message coming through the hearing aids AND the message being seen through lip-reading is incomplete.** Often the deaf child may hear some speech in perfect listening conditions (face-to-face, no background noise) but not in normal situations. They will be unlikely to over-hear; understanding only language that is aimed directly toward them.

The result is that the deaf child perceives less language (**less quantity**) in fewer situations (**less variety**) than a hearing child and what he does perceive is incomplete (**poor quality**).

**This incomplete access to English causes incomplete understanding and results in language which is both grammatically incorrect and delayed.**

### What then should parents do?

If parents want their child to be well integrated in an English-speaking society and to reach their academic potential, then English must be mastered – if only in its written form. Hearing parents of deaf babies need to give access to language in sufficient **quantity**, **quality** and **variety**.

If a deaf child cannot hear the sounds of speech it does not make sense to communicate using the hearing route alone. Signing can provide a means of communication but most hearing parents of deaf babies cannot use sign language which is of good quality – because they have not yet learnt it – and signing will never give direct access to complete spoken English.

When used consistently by hearing parents of deaf babies and young children Cued Speech **will** give:

- ◆ a means of communication which is adapted to his needs as a deaf person
- ◆ easy mastery of the home and communal language without stress or 'forcing'.

The use of Cued Speech in the home from an early age will give access to language in good **quantity**, **quality** and **variety**. The addition of aural/oral methods to encourage the maximum use of residual hearing will give the best environment for spoken language to flourish. With Cued Speech hearing parents can cue rhymes, stories, nonsense words, animal noises - anything you say can be cued. All spoken language and its culture is available in an easily accessible form.

*The above is based on the theme of the introduction to a presentation by Professor France Branchi at Nancy, France in 2002.*

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