

Cued Speech use with deaf children



Complete spoken language
through vision

Information Sheet 3

The optimum age to start to use Cued Speech is with children under three. Such children can learn to understand spoken language in much the same way as hearing children but through vision rather than listening. Early and consistent use in the home can eliminate the delayed and incomplete language which is common amongst other deaf children of hearing parents.

Cued Speech can also be used successfully with older children. However, they have slightly different needs because:

- ◆ they already have some language delay
- ◆ the optimum age for learning language has passed.

There are many cases where children who have started using Cued Speech later have made very good progress, sometimes making up all the ground they lost within a few years.

Anthony was the first boy in the UK to use Cued Speech (in 1971) and was introduced to it at the age of 7½. With no hearing in one ear and over 80dB loss in the other, even his very early diagnosis (at 3½ months) and a mother who was a Speech and Language Therapist were not sufficient to enable him to understand English and tests showed that he had

a very low level of language. As an adult looking back on the way he learnt language he said:

'The structure of the English language became more apparent, phonetically and lexically, while I was learning Cued Speech.....The confusion of the written format was solved, with the help of the visual patterns of cueing. In an 18-month period my spoken language had increased by 5½ years and this was within 2 years and 5 months of being introduced to Cued Speech.'

I grasped the lipreading difficulties and phonological memory of sounds very quickly, like many other deaf people using Cued Speech. Learning a language (both spoken and written) was natural and subconscious, as it is for my hearing peers. It is possible for deaf people to learn [spoken] language visually, not just by audition. This has been proved in research.'

He went on to say that Cued Speech supplements, but never duplicates or replaces what is said. It shows accents, phonemes, patterns, rhythms and stresses. It has no vocabulary of its own, but clarifies whatever is said.

The inside pages contain some tips on how to use Cued Speech at home and at school.

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.

Contact us at:

Cued Speech Association UK
Tel, voice and text: 01803 832 784
Fax: 01803 835 311
E-mail: info@cuedspeech.co.uk
Web: www.cuedspeech.co.uk

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

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

Starting with an older deaf child

'We are using the term *older child* to designate a child who is beginning exposure to Cued Speech enough after the optimal period from birth to 3 years, that significant adjustments in the way Cued Speech should be introduced are necessary. Children receiving Cued Speech consistently from the age of 2 years typically make up any existing language deficit by the age of 3 to 5 years and are ready for reading at the usual time of 6 or 7 years of age. Children starting at 3 years with little or no language can usually make up the deficit by age 6 if conditions are very favourable...'

'Simple arithmetic attests the urgent need for accelerated language development in a child who starts CS late and is several years delayed in language. If a 6-year-old child is three years delayed in language, he needs to learn language approximately twice as fast as the average hearing child in order to close the language gap in three or four years. The miracle is that children as old as 8 or 9 years, with vocabularies below 50 words, have closed the language gap, through their own abilities and motivation, and the patient, consistent cueing and remedial support of parents and teachers.'

Begin at the right level

'Parents should begin on the child's level. At home or school, or both, the child has developed some competency in communication, using natural gestures, signs, picture language, written language, speech, speechreading, and combinations of these. He or she should be approached through language already understood. Remember that every concept for which the child has an identifying symbol (gesture, sign, written word) is valuable, because:

1. he/she already understands the concept and thus doesn't have to be taught it;
2. he or she knows a symbol that can be used to pair it with its equivalent in Cued Speech.

This means that the more language (in any form) an older deaf child already knows, the more rapidly he or she can pick up or be taught language through Cued Speech. Of course, the

conversion process is most rapid for any written language he/she knows.'

'Gesture or picture language can be converted into verbal language by associating each gesture or picture with the verbal equivalent in speech and cues.

'For students with an aural/oral background, simply add cueing to make the oral message clear. Understanding should increase rapidly since there is no change of language to bring about, only clarification. For children with a formal signing background, cue with speech, then sign or fingerspell, then repeat the cued form. Of course, this method applies only to items already familiar to the child in his manual modality.'

'Keep in mind that securing rapid language acquisition through pairing known written words with spoken words through Cued Speech can last only until the child's existing vocabulary of written words is "used up". Then emphasize teaching new language with Cued Speech through the usual methods of discourse, discovery, explanation, interaction, games, and presentation of formal lesson materials.'

'As the child begins to make rapid progress in language acquisition through Cued Speech, it is critically important that speech therapy be used for the twin goals of developing speech production and tying all new language to speech as it is picked up through Cued Speech. There is a desperate need also to develop use of residual hearing as a base for speaking and for aural/oral reception.'

'In most cases [older] children will learn Cued Speech much more rapidly than younger children, so that within a few months they can repeat accurately anything that is said to them with cues (assuming that they can make most sounds).'

The need for accelerated language development

'Profoundly deaf children who start Cued Speech late, at ages such as 5 to 9 years, are usually severely delayed in verbal language. If this were not the case the parents would probably not

Tips taken from: The Cued Speech Resource Book for Parents of Deaf Children (continued) and additional ideas

consider a change. As soon as such children have learned the basics of the system they should [ideally] be exposed in school to an intensive (two or more hours per day), structured program for accelerated language development, conducted or guided by an expert in remedial language development who can use Cued Speech, and who will guide parents in their support of accelerated language development.

Sustained effort is necessary

Children who start Cued Speech at an early age and have the appropriate support in the home and at school during the early years usually become self-propelled learners who require less and less tutoring at home as time goes on. This is less often the case with children who start Cued Speech late, particularly if they do not close the gap in language and reading levels. Parents of late starters must remember that they must not ease up, either in providing support or in fighting for needed support at school, as the child grows

older....' 'As one parent reviewer points out: "The results are well worth the effort."

To speed up language acquisition, Cued Speech should also concurrently be taught analytically, as a system. This entails teaching the cueing of specific syllables and systematic coverage of all the handshapes and hand locations. In order to boost motivation, the child should be exposed to cueing in natural situations, such as the communication within other cueing families. Interaction with older, experienced Cued Speech students is also likely to help.'

Taken from The Cued Speech Resource Book for Parents of Deaf Children by R. Orin Cornett and Mary Elsie Daisey. Only a fraction of it is reproduced here, and parents who are using or considering using Cued Speech are advised to obtain a copy as an invaluable source of information and advice. The book is not designed to teach Cued Speech. It can be bought (price £19.95) or borrowed from the Cued Speech Association UK.

More ideas for home & school from a teacher of the deaf

General points

- Cue all names and aim to build up to be able to cue everything you say.
- Encourage children to cue back while learning new words - this helps them to remember the words and to pronounce them.
- Use a mirror for individual sessions. Sit side by side to compare mouth shapes and hand cues.

For children with some written language

Point out groups of sounds which look alike, e.g. /p/b/m/, /f/v/, /t/d/n/l/, and show how the handshape or position makes each sound clearly different.

Build on what you have and make 'word chains' with similar sounds, e.g.

- pete/peat, meat/meet, see/sea/c
- On, off, bomb, gone, job, top, was, wash, wasp
- l/eye, my, mind, find, kind, rind, right/write.

Look at words with the same beginning and vowel, e.g. bed, ben, bend, bent, bet; or with the same vowel and end, but different beginning e.g. head, red, led, said, Ted, wed.

Make your own dictionary or subject-based book using cuescript (a very simple system of noting the position and handshape of a cue under a written word). Examples could include names, meals (with all the different foods) and animals (including noises).

Accurate pronunciation and identification of technical and mathematical language is usually appreciated, e.g. triangle, square, circle, sphere, cylinder, prism, diagonal, circumference. Number work usually improves rapidly because so many numbers look identical on the lips (e.g. 4, 14, 40), but are quite different one from another with the cues.

Remember:

Whatever current language is around can be made available to deaf children: dinosaur names, slang, Harry Potter, current crazes - all are accessible through Cued Speech.

Does my child need Cued Speech?

It is difficult for the parents of deaf children to know what to do when faced with many choices about communication and education.

However it is probably useful to look at the progress of your child and ask the peripatetic teacher to test his/her understanding of English. Of course, late diagnosis will have an effect but once this is taken

into account your child should have age-appropriate language if the communication method you are using is suitable.

With Cued Speech deaf children can learn language at the same speed as hearing children - or faster - and if your child is not doing this then Cued Speech should be considered.

Case studies

A few observations made by a teacher of the deaf who used Cued Speech with children who were of school age when Cued Speech was introduced:

Age starting Cued Speech - 4 years

Two girls who were profoundly deaf from birth, both children of British Sign Language (BSL) using parents where the method of communication within the home was BSL. The families were happy to have Cued Speech used at school because they were interested in their children learning to speak. One mother (of A) had intelligible speech and the other (of B) did not. Both children did well and were very interested, particularly in the phonic aspect.

Child B joined the after school Cue Club with older children to do extra cueing outside class time and became a very good cue- and lip-reader. She could switch between English [through Cued Speech] and BSL and happily did so, e.g. if her mother came to school to see a teacher in the oral school.

Age starting Cued Speech - 5 years

A partially hearing boy from a large family with a few problems whose parents were interested in Cued Speech but never actually got round to learning. He had sufficient hearing loss that word endings were missing and many muddles made. 'Normal' schooling had not proved adequate but Cued Speech provided the extra help that was needed. He picked up rapidly and became a very clear speaker but didn't use Cued Speech for conversational purposes.

Age starting Cued Speech - 5 years

A boy for whom 'profoundly deaf' is not an adequate description; he appeared not to respond to sound. After he nearly died from meningitis at 3 years the parents were advised to learn a manual system. They learnt Makaton, Paget Gorman and BSL but still the child was getting more and more withdrawn and would not look at people. To cut a long story a bit shorter he was introduced to a class of Cued Speech oral children. Parents both learnt to cue while still using BSL and home signs but when a sign was not known cues were introduced. Gradually Cued Speech became the method of communication. His English improved to the extent that he moved to an oral/aural grammar school for the deaf. I met him in adulthood when he started a cued conversation in front of a group of deaf people and said something like: "It's not that I'm against signing but I wish more people would cue. Signing cuts you off too much from normal life and I'm nose-y. I want to know everything".

Severely deaf young adult - 20+, with good speech

Annoyed at continually getting words wrong, she decided to investigate Cued Speech. E.g. she thought somebody had "A job in Fiji" and said she had never been there; it turned out to be "A geography degree". She liked the way Cued Speech showed syllables and it also helped her to lipread more.

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