

CONNECTIONS

A publication of the Center for the Deaf and Hard of Hearing Education

The Center of Deaf and Hard of Hearing Education Mission: To promote positive outcomes for all Deaf and Hard of Hearing children in Indiana through information, services, and education.

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From the Director

An Update on HEA1484: Indiana Deaf Education & Assessments of Language (IDEAL)

An advisory committee was formed last summer to assist the Center in the creation of a parent document and list of tools and assessments, in accordance with HEA1484. This diverse group is providing their time and expertise on behalf of deaf and hard of hearing children and their families, and their participation is key to this process.

The Center's staff is also hard at work on all aspects of the bill: gathering a wide range of tools and assessments for consideration; providing sample resources related to topics within the parent document, including language and literacy milestones; and creating technical assistance resources as well as an assessment reporting portal.

The importance of parental knowledge and engagement in conjunction with progress monitoring, particularly in relation to language and communication of young deaf and hard of hearing children cannot be overstated. The creation of this parent document and forthcoming annual progress monitoring reports can help improve outcomes for young deaf and hard of hearing Hoosiers.





**Center for the
Deaf and Hard of Hearing
Education**

STAFF SPOTLIGHT



The Center for Deaf and Hard of Hearing is pleased to have Justin Perez join our staff in September 2019 as an Educational Consultant!

Justin was born and raised in Texas, a fifth-generation product of a Deaf family. His seven-year-old son is also deaf. He graduated from Texas School for the Deaf and earned his bachelor of science degree in Deaf Studies, Communications and Media Technology from Rochester Institute of Technology.

His past opportunities include working as a media director for Seek The World, traveling to 20+ countries to gather information about the Deaf Community. Other past opportunities include being a teacher at Texas School for the Deaf, an ASL tutor at National Technical Institute of the Deaf, an ASL language model and expert with TRUE+WAY ASL curriculum, and many more. His specialty is Visual Vernacular, a theatrical art form of physical expression, storytelling with a strong sense of body movement, iconic signs, gestures, and facial expressions.

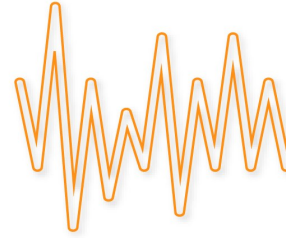
Justin has always been fascinated with American Sign Language (ASL) performance art and storytelling. Since refining his storytelling techniques using sign language expressions, he uses avenues of social media, workshops, and schools to share his stories.

**Next Edition: Meet Kristi Etter,
Educational Consultant...**
WELCOME KRISTI!



SOUND ADVICE

Audiology



Listen Up—I'm Tired !

Although there are many definitions, fatigue is often thought of as a mood or state—a feeling of tiredness, sleepiness, exhaustion, or lack of energy (Bess, et. al. 2014). Research findings suggest that some deaf and hard of hearing children are at an increased risk for listening-related fatigue compared to their typically hearing peers. These students may expend increased mental effort to detect, process, and understand speech in the typically fast-paced and often demanding acoustic environments encountered in today's classrooms. This increased effort results in fewer cognitive resources available to complete other important tasks and may lead to difficulties maintaining attention to teacher instruction, learning and remembering new information, and ignoring classroom distractions. Students at even greater risk include deaf or hard of hearing students with additional special needs and students with poorer language abilities.

Potential effects of fatigue in the classroom :

- Reduced academic performance
- Memory problems
- Increased school absences
- Inability or unwillingness to engage in usual daily activities
- Changes or struggles in social relationships



Common behaviors reported by teachers and parents of students that may indicate listening-related fatigue as well as the potential need for intervention:

- Tiredness; falling asleep in the car or bus on the way home from school and/or taking naps after school
- Changes in mood or behavior following a long day of listening (especially cranky, short tempered, frustrated)
- “Zoning out” or distracted during school; may make frequent careless mistakes on schoolwork
- Decreased attention and motivation; may give up easily if tasks become difficult
- Removing devices upon returning home from school
- Difficulty following instructions
- Changes in classroom participation and contributions

Suggested school accommodations/modifications:

- Classroom acoustic modifications and consistent use of personal amplification and FM/DM system to optimize auditory access
- Provide notes ahead of class to reduce the need to multi-task
- Provide “down time” for listening breaks without auditory tasks
- Consider the class schedule order and timing of auditory tasks including therapies and other pull-out sessions



For more information about listening and fatigue in children with hearing loss, visit the Listening and Learning Lab website at <https://my.vanderbilt.edu/listeninglearninglab/> and the Supporting Success for Children with Hearing Loss website at <https://successforkidswithhearingloss.com/>.

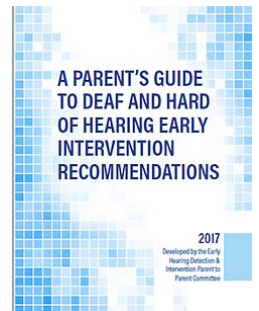


BRAIN BUILDERS CORNER EARLY INTERVENTION

Early Intervention: A Specialized Network

We know that experiences in the first few years of a child's life are critical to acquiring language. The CDHHE Early Intervention (EI) Network is a statewide First Steps agency fully dedicated to providing families with specialized providers. This network is made up of early intervention specialists who are employed or contracted through the Indiana State Department of Health's Center for Deaf and Hard of Hearing Education (CDHHE) or St. Joseph Institute for the Deaf Indiana Service Corporation (SJIISC). Together, we work to ensure that children and families are receiving timely and appropriate high-quality services that are a match with the parents' desired outcomes for their child.

A Parent's Guide to Deaf and Hard of Hearing Early Intervention Recommendations (https://www.handsandvoices.org/resources/pubs/Final_8-30-2017.pdf) summarizes the goals from the Joint Commission on Infant Hearing (JCIH), which include having access to providers with professional qualifications, core knowledge and skills such as those in our CDHHE EI Network. The CDHHE EI Network follows this recommendation of having providers of services that include teaching of American Sign Language (ASL) be native or fluent in ASL as well as providers of services to develop listening and spoken language skills to have specialized skills and knowledge of LSL practice.



All of our service providers help families monitor their child's language development—aligning with another goal in the JCIH document: *All children should have their progress monitored every six months.*

A free resource with references to tools for monitoring language development is available through the Gallaudet University Laurent Clerc National Deaf Education Center in *Setting Language in Motion*, module 6 (<https://www.gallaudet.edu/clerc-center-sites/activity-guide-for-professionals-setting-language-in-motion>). This module includes assessments being used by many of our providers.

We are looking for specialists working with deaf and hard of hearing children to work as certified SKI HI Parent Advisors in our CDHHE EI Network.

Training begins in early February—contact the Center's Early Intervention Coordinator if interested:

Cindy Lawrence, clawrence@isdh.in.gov 317-232-0899



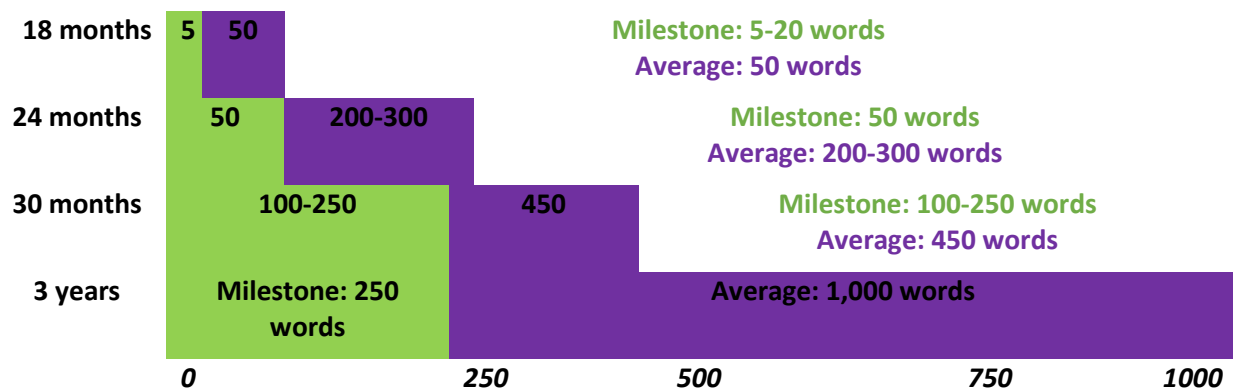
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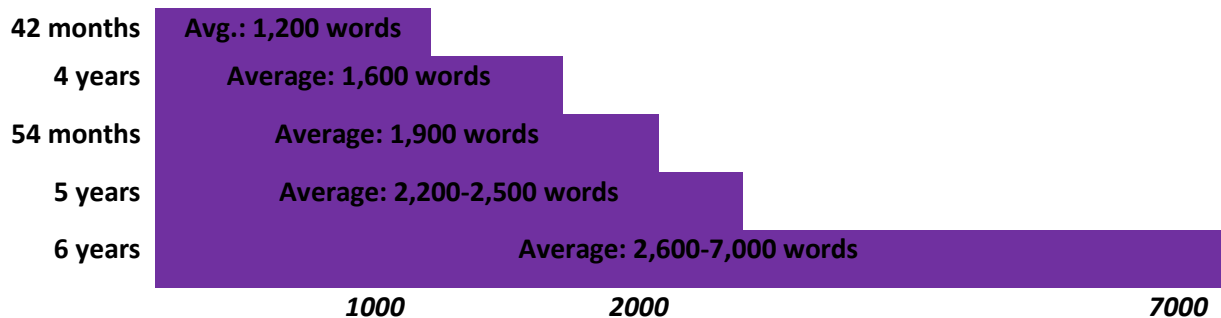
LANGUAGE AND LITERACY CORNER

Milestone vs. Average Expectations

Milestones are the guidelines parents and professionals use to track development in children to determine when a child should be referred for services or if a child needs intervention. Milestones are presented by many resources and/or professionals as the skills listed are average at a given age, when in fact, the skill indicated is when 90% of the children at the given age achieve it. This means milestones are a minimal expectation of a child's developmental progress. A better measure of your child's/student's skills would be to use resources that provide the typical or average skills, or what 50% of the children demonstrate at a specific age. While any developmental skill can be utilized for illustration, the graph below compares vocabulary milestone expectations versus average vocabulary development for typically developing children.



As illustrated by the graph, a child who is meeting milestone expectations is significantly delayed in comparison to their typically developing peers. Professionals can assist parents with understanding the difference and maintaining high expectations for all deaf and hard of hearing students, regardless of their language of communication. Looking closer at typical vocabulary development, parents and professionals should expect:



The average 12-year-old is able to express 50,000 words!



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For more information on vocabulary and other language milestones, see *LinguiSystems Guide to Communication Milestones* at <https://bit.ly/2WRfiKo>.



TACKLIN'

Assessment

Therapists Actively Consulting & Knowledgeably Leading INdiana

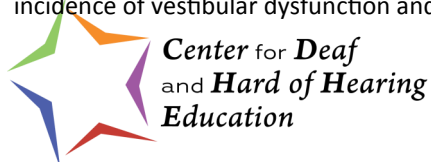
Function of the Vestibular System

In our Fall 2019 newsletter we identified the three main roles of the vestibular system: 1.) Identify the position and direction of movement of the head, 2.) Maintain balance, and 3.) Keep vision clear while the head is moving. How does the vestibular system accomplish these roles?

The vestibular system is a fluid-filled system. As the head moves, fluid moves within the structures of the vestibular apparatus. In the semicircular canals, hair cells line the receptor area and have a small extension or “hair” sticking out beyond the surface of the cell. As the fluid moves in the canals, these small “hairs” move (similarly to how your hair blows in the wind), and the information about which direction the “hairs” are moving is sent to the brain to be analyzed. The brain then knows if you are turning, shaking, nodding, or tilting your head. In the utricle and saccule, a small layer of tiny crystals (called otoconia) sits on top of the hair cells instead of a “hair” extension. The crystals are firmly embedded in a gel-like substance so they cannot move around individually—they move as a unit. As the head moves through space, and as gravity pulls on the head, the crystals shift on the gel and this information is sent to the brain to be analyzed. The brain then knows if you are moving up and down such as when you are in an elevator or jumping up and down, or if you are moving in a straight line such as walking forward or backward. Your brain will also recognize if you are upside down because gravity then pulls some of the crystals in the other direction. You may know someone who has experienced extreme vertigo or dizziness. This is often caused when a crystal breaks loose from the gel and ends up floating around, thereby sending inaccurate information to the brain. This rarely happens in children, but is quite common in older adults. If a child is experiencing dizziness, there is usually a different cause.

The vestibular system works together with the somatosensory system (touch, joint position) and the visual system to maintain balance. This process begins at a very early age when the vestibular system prompts the infant to lift the head. The baby then also uses vision to sustain and orient that head position to the environment. The baby gains control in increasingly more complex positions such as sitting, hands and knees, and standing, which require the somatosensory system to become more involved. The vestibular system also has connections to the central nervous system (brain and spinal cord) to help muscles be appropriately responsive to changes in position so the baby can maintain balance. So, if the baby is sitting and starts to fall to the side, the baby will extend an arm out to catch itself. This is an automatic response or reflex—not a conscious choice. The vestibular system, somatosensory system, and visual system continue to work together during the early years of development, and balance is considered to be adult-like by 7 years of age, though refinement of the process continues up until approximately 15-16 years of age.¹ The “critical period” for the development of balance is 4-6 years of age.¹ This is the time when the three systems are learning to work together to produce efficient balance responses. Any type of injury or irregular development of one of the systems prior to this time (birth to age 4) will affect the efficiency of the balance process.

In our next newsletter, we will discuss the third role of the vestibular system—gaze stability. Gaze stability (keeping vision clear while the head is moving) is a critical function in our daily lives. We will also discuss why children with hearing loss have a higher incidence of vestibular dysfunction and how that might affect their daily activities.



1. Woollacott M, Debu B, Mowatt M. Neuromuscular control of posture in the infant and child: is vision dominant? *J Mot Behav.* 1987;19(2):167-186.



TEACHERS' DEN

Deaf Educator's Network

How Long Is Too Long?

When to Consider Changing Interpreter/Student Pairings

Assigning an educational interpreter to a deaf or hard of hearing student is a complex matching process. Language, personalities, communication styles, and interpreter-use competency all come into play. An educational team may hesitate in making a change once a good pair is established. However, interpreter/student pairings may not always mesh well over time. How can an educational team identify a need for a change? New Mexico's School for the Deaf has an informative outline of the progression of the student/interpreter relationship in its publication *The Interpreted Education, A Guide for Educational Teams*, 2009.

- ◆ **First year:** Interpreter and student are becoming familiar with each other's communication styles. In addition, the interpreter should be getting a feel for the student's study habits and competency in working with an interpreter.
- ◆ **Second year:** Interpreter and student are building on what was created in year one. The student is able to begin a new year without the added burden of working through a new communication style. Signs for various academic concepts and individuals in the setting have been established.
- ◆ **THIRD YEAR:** Interpreter and student are very familiar with each other and know how to elicit responses from one another. If the student is a teenager, he or she may find working through an adult annoying. The interpreter may be working with the student as if he or she was the same student from two years ago, and paternalistic feelings about the student's success may develop.
- ◆ **Fourth year and beyond:** It is recommended that interpreters only remain with a student beyond three years if making a change would cause an undue hardship on the student. For example, it is unadvisable for an interpreter to remain with a child unless the child is moving from one school setting to another.

As with all educational decisions, staff changes must be thoughtfully discussed as they relate to each student. Being aware of the benefits and risks of the interpreter/student pairing over time will ensure optimal matches for deaf and hard of hearing students.



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To see more of New Mexico's guide for educational teams, go to:

<https://webnew.ped.state.nm.us/bureaus/special-education/technical-manuals/>



Family & Community

SAVE THE DATE!

Indianapolis Zoo!

SAVE THE DATE!

PLAY

Parent & Child PLAYGROUP!



Sunday, March 22, 2020

The Indianapolis Zoo invites us to attend the Butterfly Exhibit season opening and explore the Family Nature Center!

The day of the event families must sign-in at 9:00 a.m. for Playgroup in order to stay and explore the Indianapolis Zoo at 10:00 a.m.

RSVP System goes live on 02/22/2020 at 8:30 a.m. and closes 03/02/2020 at noon.

Preview Indianapolis Zoo:
<https://www.indianapoliszoo.com/visit/faqs/>

Come together to meet with other families who are raising a deaf or hard of hearing infant, toddler, or young child, ask questions, and, of course, have fun! All family members involved in your child's life are welcome.

White River Gardens & Indianapolis Zoo

**1200 West Washington Street,
Indianapolis, IN 46222**

9:00 a.m. to 10:00 a.m.

DHH Littles ages birth to 5 years old & siblings of any age

RSVP required due to limited space. RSVPs honored on a first come first serve basis as received via the Eventbrite RSVP system until maximum capacity met. Families that RSVP will be granted no-cost parking and Indianapolis Zoo entry thanks to the Indianapolis Zoo!

To RSVP:

<http://parentandchildplaygroupatindianapoliszoo.eventbrite.com>

CONNECT

LEARN



Indiana Hands & Voices Coffee Chats

Parents and caregivers of deaf and hard of hearing children are invited to join us for coffee and conversation. No sitter? No problem! We will bring supplies for a kid-friendly craft.

February

Where: Starbucks in Seymour

When: Saturday, February 1, 2019

Time: 1:00-3:00 p.m.

March

Where: Red Roaster Coffee & Eatery in Madison

When: Saturday, March 7, 2019

Time: 1:00-3:00 p.m.



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For all IN H&V Coffee Chats, please RSVP to Laura: lryan@isdh.IN.gov or 502-528-0119 (cell)

The Center of Deaf and Hard of Hearing Education

PRESENTS

Topics in Pediatric Audiology

March 13, 2020

10:00 AM to 5:00 PM

Hamilton East Public Library - 1 Library Plaza, Noblesville, IN 46060

Cochlear Implant Update

Indiana University Riley Hospital Cochlear Implant Team

- **Current pediatric candidacy criteria, factors beyond the audiogram, special populations such as children with ANSD, Single-sided deafness**
- **Current evaluation process and post-implantation follow-up**

Vestibular System Considerations in Children with Hearing Loss

Jeanine David Goldner, PT, DPT, MHS, PCS

Contract Physical Therapist, Center for Deaf and Hard of Hearing

Technology in Educational Environments

Sarah Kiefer, MA Ed.

Deaf Education Coordinator, Center for Deaf and Hard of Hearing

Indiana Early Hearing Detection and Intervention (EHDI)

Suzanne Foley, M.A., Au. D., CCC-A

Director, Indiana EHDI Program

To register for this event, go to

<https://www.eventbrite.com/e/topics-in-pediatric-audiology-tickets-88068564447>



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