1. **How can the goal of developing intelligible speech be accomplished?**

If the family goal for the early-identified (in intervention by 6 months) infant/child with significant hearing loss is the development of auditory skills and intelligible speech, several questions about the infant/child's capabilities must be answered. Does the child have language skills (particularly vocabulary) in the first and second year of life that are comparable to peers with normal hearing? Does the child have the adequate oral motor skills to produce intelligible speech? Does the child have auditory access to all of the sounds of the native spoken language? Does the child have the cognitive capability for communicating with verbal symbols?

2. **What issues are at the forefront of (this consideration)?**

The knowledge and technology exists for 75% of infants/children with all degrees of hearing loss to develop intelligible speech by five years of age. For infants/children with profound hearing loss, this 75% probability only exists with cochlear implantation.

For children with hearing loss in early intervention (first three years of life) intelligible speech can be developed in all methods of communication, but only with a strong auditory skills development program. While it is possible that communications methods that are visual or tactile/kinesthetic can interfere with the development of intelligible speech, it is not probable. It is more likely that strong language development skills through visual/manual language systems can accelerate the development of spoken English or other native language because it provides the child with the knowledge of a verbal symbol system.
3. What should every parent or professional know about the development of spoken language for a child with hearing loss?

Parents can assist in determining whether their infant/child has auditory access to all of the sounds of the native spoken language within a short period of time after the fitting of amplification. It is critical that the amplification is fit appropriately, allowing auditory access to all the sounds of the native spoken language within the first year of life, thereby increasing the probability of the development of spoken English or any other native spoken language.

4. Where else can I find information about this subject?


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Dr. Christine Yoshinaga-Itano is a Professor of Audiology in the Department of Speech, Language and Hearing Sciences at the University of Colorado, Boulder. She received her Bachelors degree from the University of Southern California in Psychology, her Masters degree in Education of the Hearing Impaired and Ph.D. in Audiology and Hearing Impairment from Northwestern University. Dr. Yoshinaga-Itano is both a teacher of the deaf and hard of hearing and an audiologist. She has conducted research in the areas of language, speech, and social-emotional development of deaf and hard-of-hearing infants and children for over thirty years. Her research has been funded by the National Institutes of Health, the Office of Education, Maternal and Child Health, the Center for Disease Control, the Colorado Department of Public Health and Environment, the Colorado Department of Education, and the University of Colorado. Over the last 15-20 years, she has focused on the impact of early-identification and early intervention on the developmental outcomes of children with significant hearing loss.

Communication Considerations A to Z™ is a series from Hands & Voices that’s designed to help families and the professionals working with them access information and further resources to assist them in raising and educating children who are deaf or hard of hearing. We’ve recruited some of the best in the business to share their insights on the many diverse considerations that play into communication modes & methods, and so many other variables that are part of informed decision making. We hope you find the time to read them all!