

# Cued Speech

Babies & Toddlers



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This document is to be read following 'The Basics' information sheet



Similar results can be achieved with hearing-impaired babies, if the supplementary visual input of CS (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.

## 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.

## 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.

## 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, CS 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 CS 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 CS 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.

### References:

- 1: Dr Ruth Campbell, Ph.D Foreword, 'Cued Speech and Cued Language for Deaf and Hard of Hearing Children' Plural Publishing 2010
- 2: Berlin, C. I., et. al. 'Multi-site diagnosis and management of 260 patients with [ANAD]', International Journal of Audiology, 2010; 49: 30-43
- 3: Nicholls, G. H., & Ling, D. (1982). Cued Speech and the reception of spoken language. Journal of Speech and Hearing Research, 25, 262-269
- 4: Santana, R. (1999). Papel de La Palabra Complementada en el desarrollo y uso de las representaciones fonológicas en el sordo [Cued speech role on the development and use of deaf's (sic) phonological representations]. University of Las Palmas de Gran Canaria.
- 5: LaSasso, C., Crain, K. L., and Leybaert, J. 'Cued Speech and Cued Language for Deaf and Hard of Hearing Children', Plural Publishing 2010.

## Learn Cued Speech in about 20 hours

Parents and professionals can learn Cued Speech in various ways:

- One- or two-day Workshops
- Bespoke courses
- Free e-learning website at: [www.learn2ocue.co.uk](http://www.learn2ocue.co.uk)
- Our annual cueing weekend
- 'Skype' sessions for yourself or a small group. The first session is FREE.

Training for professionals is low-cost and can be adapted to your needs.

Please enquire about our bursary fund for parents.

'The importance of Cued Speech is that it opens up the world of spoken language to the deaf child in a clear and simple way...'

'Children exposed consistently to Cued Speech gained and maintained a head start over deaf children of similar intelligence and skill who did not have Cued Speech.'

## With a deaf baby or a young child, you use Cued Speech just as you would use ordinary speech with a hearing baby!

Since it only takes about 20 hours to learn to cue, the twin problems of early communication and language development can be immediately solved. Use CS to give babies and toddlers full, easy access to language so that they can start to think in language, and order their own world.

Although, with modern hearing aids or cochlear implants, many deaf children can now learn the English language by listening, using Cued Speech can be invaluable...

**Before an implant** - even if deaf children are implanted 'early', before the age of one year old, that's still up to a year when they are not learning language and not understanding you. In order not to lose linguistic progress, there is increasing pressure to implant before one. When you learn to cue, and use it as you talk, your deaf child's understanding need not be delayed; they can learn sound-based English whether or not they are implanted. Because Cued Speech is visual English, it allows deaf children (even those with no hearing) to understand the same sound-based language that they later hear through their implant. After their implant the cues will help them make sense of the words they hear – and help as they learn to listen.

**Some children can't be helped by implants or hearing aids**, for example they may have absent auditory nerves, but with Cued Speech children can learn English and you can talk to them without ambiguity, even if they hear nothing.

**A hearing aid may not give access to all of the sounds of speech**; some of the quiet ones (e.g. 's' and 't') may be not heard, particularly if they are at the end of a word where they are especially quiet. Even not hearing a few sounds can be quite a problem, for example 's' at the end of words shows both plurals and possessive, and is therefore very important for the grammar of English. It is necessary to hear (or see,

through CS) all the sounds of English to fully learn the language.

**With an implant or hearing aid** your child may make good progress learning English in quiet listening conditions, but hearing aids and implants are inefficient in situations where background noise is a factor, and when the listener is any distance from the speaker. So in some situations (nursery, school, and noisy play conditions) your child may struggle to hear, and they will be unlikely to over-hear; understanding only language that is aimed directly toward them. Using CS will make sure that they can see all the 'sounds' regardless of whether they can hear them.

Of course Cued Speech will also be invaluable for the many times when the aid or implant is not worn (bath, bed, swimming etc.)

**If implantation is delayed** for any reason, Swiss research shows that CS will still prime the child or young person for success.

**ANAD** - Your child or pupil may be one of the children, approximately 10% of deaf children, diagnosed with Auditory Neuropathy Spectrum Disorder (ANAD). Hearing aids are not usually helpful and, because some children recover from ANAD spontaneously, it would be wrong to implant early – and possibly unnecessarily<sup>2</sup>. Also, ANAD children may sometimes understand speech and sometimes not (this can be because they have more problems in noisy conditions and/or also because the quality of the sound they hear can vary from day to day and even hour to hour). Cued Speech will give clear access to English so that:

- they can build on what they **do** hear
- if their hearing fluctuates, they can use Cued Speech for the times when they can't hear
- if they hear no speech, Cued Speech will still enable them to learn full English, visually.
- if they are implanted later, they will be able to take advantage of already knowing English to get the best from the implant.

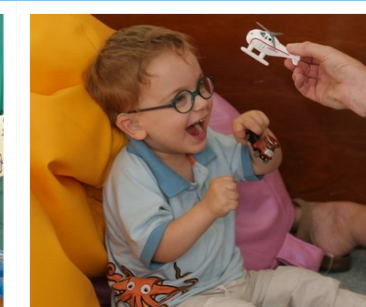
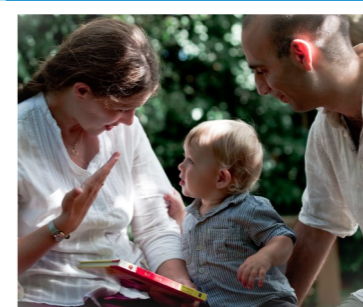
In the USA, ANAD specialists recommend Cued Speech.

For training and more information about the use of Cued Speech contact:

Cued Speech Association UK (CSAUK),  
The Forces, Forces Cross, Blackawton, Devon TQ9 7DJ  
Tel: 01803 712853  
Email: [info@cuedspeech.co.uk](mailto:info@cuedspeech.co.uk)  
Webs: [www.cuedspeech.co.uk](http://www.cuedspeech.co.uk) &  
[www.learn2ocue.co.uk](http://www.learn2ocue.co.uk)



CSAUK is a national charity run by users of Cued Speech (both professionals and parents).  
Company Shared Documents\Information Standard\IS Version 2.00\IS Products V2\2014 CSA Babies and Toddlers - v1  
Designed March 2015. Reviewed September 2015. Next review June 2016.



### What about Lip-reading?

Only 30 – 40 % of language can be lipread, so this is of limited help<sup>3</sup>. So the message coming through the hearing aids or implant can be incomplete (because of background noise etc) AND the message being seen through lip-reading is incomplete. As a result, the deaf child will perceive less language (less quantity) in fewer situations (less variety) than a hearing child, and what he does perceive is incomplete (poor quality)<sup>4</sup>. This incomplete access to English causes incomplete understanding and can result in language which is both grammatically incorrect and delayed.

### Time is not on your side

Good language and effective communication skills are fundamental skills for life, and acquiring them is time-limited - children are 'hard-wired' to learn language as toddlers. Without language, communication can break down. But with Cued Speech all the simple things you say to a two year old (e.g. 'if you put your coat on we can go to the park') can help them make sense of the word.

**Our advice** - based on years of experience with parents and professionals: Don't delay in giving full access to English, don't wait to see if they are going to they fail, and don't wait (for more than a few months) because they 'will use their implant soon'. Don't believe anyone if they tell you that delayed language is OK for a deaf child – it may be common, but it's entirely avoidable and should never happen. Use CS now and if they thrive, if they have entirely age-appropriate language and can understand you all the time without speech-reading – use it less. In time, maybe they will only need it occasionally, and you will have avoided becoming one of the parents who tell us they wish they'd used CS earlier. If you use Cued Speech, deaf children can understand and use English even when, for whatever reason, they can't hear you and **you can get back on with the job of being a parent.**

### A Parent's writes:

“ My very profoundly deaf son was brought up with Cued Speech. Without it there's no doubt that he would have not have understood English because he has too little hearing, but with CS he understood us at home, all the lessons at school and had the English skills he needed to access lectures at uni. Now he's got a high level job. At work he usually just lip-reads his colleagues (except for big meetings) and I hardly ever cue when we meet because day-to-day he doesn't need it. But the last week we went together to a builders merchant (he's buying a flat) and he didn't know what someone was saying when they were using the word, 'skilsaw' - I cued it and he said 'Ahhh..... skilsaw; I'd never have got THAT by lip-reading'. CS was life-changing by giving full access to language in childhood - and it's not essential now but I expect it to come in handy forever! ”

### Frequently Asked Questions:

#### How soon can I use Cued Speech with a deaf baby?

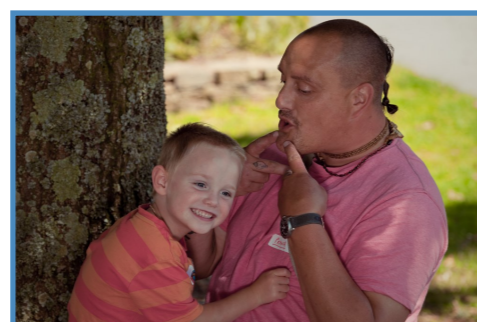
The sooner the better!

Use Cued Speech with a deaf baby just as you would use speech with a hearing baby. Cued Speech is only a visual mode of speech, so think of it in the same way as speech.

A baby or young deaf child will learn English through Cued Speech just as hearing babies learn English through speech – they are not specifically taught the Cued Speech system. (On the other hand, it is never too late to start to cue with a deaf child and older children benefit from being directly taught.)

#### How will my toddler or young child communicate?

Hearing children always have to understand language before they start to speak. Quite often there is a considerable time lag before their internal language (speech) catches up with their internal language (thoughts). Cued Speech children are the same. Almost all Cued Speech children, with some use of aids or implants, express themselves through speech (although their diction may be poor, particularly in the early stages) and do not cue themselves. Some children, usually those with no useful hearing, will use Cued Speech as a method of communication. Children who use Cued Speech as a method of communication in the early years often move to spoken communication later.



#### How much will my child continue to need Cued Speech?

This varies, but most families find that their child needs Cued Speech continually in the early years to acquire a thorough knowledge of spoken language. Later, most children understand some spoken language without the support of Cued Speech and families often use it less at this point. Many cochlear implanted children need Cued Speech less after they have learnt to listen with their implant. However, if a child cannot hear all the sounds of speech, families must continue to cue sufficiently to allow the child to see the full pattern of the English language. Regular cueing is sometimes dropped for every -day situations once full language has been established, but Cued Speech continues to be useful to introduce new vocabulary, to correct mispronunciation and in situations where both listening and/or lip-reading are insufficient.

#### What if it is found out later that your baby would have managed without 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. CS will help any deaf child – the effort is all with the parents or teachers.

### How does CS work?

Put simply, when sounds look the same on the lips (as they are spoken) an accompanying handshape or position will make each lip-pattern look different. For example the sounds /p/ /b/ and /m/ sound quite different to hearing people, but they are indistinguishable by watching the lips. So people who rely on lip-reading alone have no way of distinguishing words such as baby and maybe or pay, bay and may. When you use CS each consonant sound has a different accompanying handshape so each sound now looks quite different. Vowel sounds with confusing lip-patterns are clarified by positions.

When people speak they join sounds to make words. Similarly, with Cued Speech the handshapes and positions are joined to clarify a word. CS sounds complicated but in practice it's quite easy; there are only 8 handshapes and 4 positions in total. Cued Speech was devised by Orin Cornett in 1966.

#### My child has very little hearing - if I use CS will he learn to talk?

Speech is much more complex than the ability to make speech sounds. In order to speak, a child needs to know how:

- sounds combine to make words and phrases
- to build a sentence from the words they know

The consistent use of Cued Speech will allow a deaf child to build an understanding of spoken language – sound by sound. They can use this understanding to know how to build words, phrases and sentences and apply the rules of grammar. This will prime their speech.

Imagine that you have a deaf child who can't hear (all) the sounds of the English language and they've been taught how to say the /s/ sound even though they can't hear it – how can they then use it in language? They don't know it's at the beginning of the word 'city' or that it's not on the end of the word dogs ('dogs' ends in a z sound!). But a child brought up with Cued Speech **does** know - and if the CS child learns to say the /s/ sound they can put it on the beginning of 'city' when they talk. In fact the CS child knows how the whole sound-based language of spoken language is put together. For more information, take a look at the book, 'Cued Speech and Cued Language for Deaf and Hard of Hearing Children' by LaSasso, Crain and Leybaert<sup>5</sup> which shows a wealth of supporting research.

So, although we can't promise you that your child will talk, we know that using Cued Speech to support what hearing they have will put them in a very advantageous position - and that most do!

### Practical Advice:

Based on a presentation by Professor France Branchi at Nancy, France in 2002.

“ 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.