

Annual Report of Language Assessment Program-Deaf/Hard of Hearing

For 2019

**In accordance with K.S.A. 75-5397e which created a language
assessment program for children who are deaf or hard of hearing**

Submitted to:

Kansas Commission for the Deaf/Hard of Hearing

Senate Committee on Education

House Committee on Education

Report Date: January 28, 2020

This report is submitted in compliance with K.S.A. 75-5397e which requires Kansas Commission for the Deaf/Hard of Hearing (KCDHH) to "publish a report that is specific to language and literacy developmental milestones of children who are deaf or hard of hearing for each age from birth through the age of eight, including those who are deaf or hard of hearing and have other disabilities, relative to such children's peers who are not deaf or hard of hearing. Such report shall be based on existing data reported in compliance with the federally required state performance plan on pupils with disabilities. KCDHH shall publish the report on its website."

INTRODUCTION

Early fluent communication is critical and essential to typical cognitive, social, and emotional development and should be pursued vigorously by any mean or mode that is effective for each individual child. The purpose of K.S.A. 75-5397e is to ascertain and monitor the acquisition of language by young children who are deaf/hard of hearing, which will provide the data needed to determine whether current interventions are effective and should be continued or whether alternative interventions should be considered.

The Language Assessment Program-Deaf/Hard of Hearing (LAP-DHH) is being implemented in phases for practical reasons. Beginning in July 2018, LAP-DHH specialists began assessing children who were currently being seen through Kansas School for the Deaf's (KSD) Sound START (ages birth-three). In August 2019, children who were in KSD's Early Childhood were added to LAP-DHH. Children who were seen through KSD's Outreach Program were also added. Future phases will be implemented pending funding, staffing, and logistics of the program.

METHODOLOGY

As of December 20, 2019, 61 children who were deaf/hard of hearing were enrolled in LAP-DHH. Forty children in the program were ages birth to three, 15 children were ages three to five, and six children were ages five to eight. Nine children attended Kansas School for the Deaf's Early Childhood program, 12 children attended early childhood classes in their home school district or at a private early childhood center, and the remaining 40 children were in Sound START.

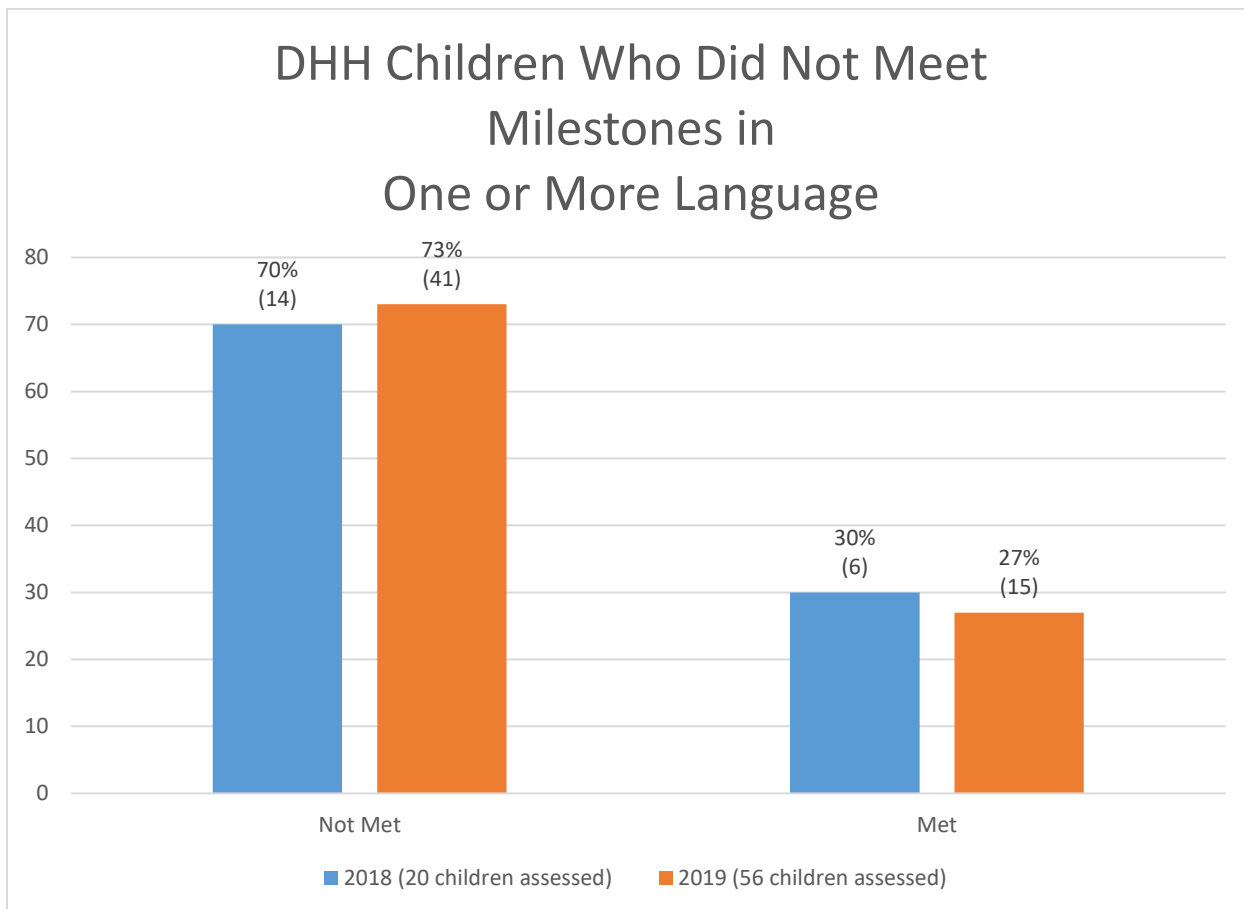
Children were assessed following a specific assessment protocol which included using one or more of the following assessments: *MacArthur-Bates Communicative Development Inventories-English*; *Visual Communication and Sign Language Checklist*; *Cottage Acquisition Scales for Listening, Language, and Speech*. These assessments relied primarily on provider observation and family/teacher input. The *Peabody Picture Vocabulary Test* and *Expressive Vocabulary Test* are more formal assessments and were given using standardized procedures. If a child had additional disabilities and used pre-linguistic communication, that child was assessed using the *Communication Matrix*. The assessments were administered and analyzed by LAP-DHH specialists trained in the administration of those specific assessments.

Children were observed in their home environment and/or their school setting. Using the results of the assessments, LAP-DHH specialists completed a *Language Milestones: American Sign Language and English* document for each child. The document indicated whether or not the child had met their age-appropriate language milestones. The results reported below are based on that document.

RESULTS

Of the 61 children who were enrolled in LAP-DHH, 5 children were not assessed as another language was used in the home, and the children had not been exposed to American Sign Language (ASL) or spoken English. Of the 56 children who were assessed, 41 (73%) did not meet milestones in either language. Fifteen children (27%) met age-appropriate milestones in one or both languages.

Of the 25 children whose ASL was assessed, 23 children did not meet the age-appropriate milestones. Of the 51 children whose English was assessed, 37 children did not meet the age-appropriate milestones. Two of the children who were assessed in ASL and/or English also used another spoken language in the home, ten children had an additional disability, and one child was assessed using the Communication Matrix.



EXISTING DATA/State Performance Plans

State performance plan data was not available at the time of publication.

CONCLUSION

Limited access to language (signed and/or spoken) is a primary factor causing the language delay of deaf/hard of hearing children (DHH), and the potential impacts of a language delay have significant, long-reaching effects. In fact, limited access to language and communication has been identified as a critical root cause for the gaps in postsecondary outcomes of people who are DHH. Language and communication are the basis for development in *all* aspects of life. Language delay can have a negative effect on an individual’s social-emotional well-being, disposition, cognitive ability, daily living skills, and the ability to be a contributing, tax-paying citizen. Without language, our DHH children will not have the same opportunities to reach social, academic, and employment success as their hearing peers.

The Language Assessment Program-Deaf/Hard of Hearing looks forward to continuing to work collaboratively with all stakeholders to implement and advance the program which will lead to positive language acquisition in Kansas’ children who are deaf/hard of hearing. Early language acquisition will result in early fluent communication, data-driven interventions, language without limits, and deaf/hard of hearing children with age-appropriate language facility.