Engaging Deaf Professionals in the EHDI System
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- [Christy] Welcome everyone to today's course. Thank you so much for joining us on AudiologyOnline. I am so pleased to welcome two new presenters, Sheri Farinha and Dr. Julie Rems Smario. We also have two interpreters with us today. Thank you so much for joining us. And at this time I will hand it over to you.

- Hello.

- [Interpreter 1] Hello everyone and welcome. I'd first like to acknowledge our disclosure, so if you have a moment, please review them. Welcome. My name is Sheri Farinha. I am the CEO of NorCal Services for Deaf & Hard of Hearing. I am also the principal investigator for our HRSA grant, our federal HRSA grant here in California to provide early start referrals. Now I will allow Julie to introduce herself.

- [Interpreter 2] Yes, hello. My name is Julie Rems Smario and I'm the co-coordinator for the program here that we have with Sheri. And I'm involved with the LEAD-K program. Also, I have a focus on early language and education. That's my specialty for children, zero to five years old.

- [Interpreter 1] And for those who are listening in, I am an older woman with gray hair. I am wearing dark rimmed glasses. I'm wearing a black blouse with a striped scarf. In the background, you could see a picture with trees and there are red Christmas decorations as well. My pronoun is she, her and hers.

- [Interpreter 2] Yes. And this is Julie here speaking now. I have salt and pepper hair with a black and white top. I have a collar with mom sleeves. My background, you can see three or four pictures, different pieces of art. And the same as Sheri, I'm she, her, hers.

- [Interpreter 1] I hope that you will enjoy today's podcast. We are using American Sign Language, which otherwise known as ASL. We do have two speakers, two interpreters speaking for us in the background. One for myself and one for Julie. The first slide speaks to our learning objectives for today. These are the takeaways we hope that you will go away with. We hope that you're able to identify five out of seven areas deaf professionals can contribute towards HRSA's 1-3-6 goals for your state's early hearing detection program, serving deaf and hard of hearing infants and toddlers. The second objective is we hope that you're able to identify two strategies on how to involve deaf and hard of hearing professionals in your state's EHDI programs.

Learning outcome number three is we hope that you're able to identify three ways to collaborate with deaf and hard of hearing professionals in your state's EHDI program in systems. So I hope everyone here understands what EDHI stands for. The acronym, which is Early Hearing Detection Intervention Programs. And every state within the United States has an EHDI coordinator and all of us are under the federal HRSA grant, which is Health and Human Services Division.

- [Interpreter 2] So we would like to start this fab with this fabulous quote by Fred Schreiber. His quote is really the soul of our presentation and it says, "We are your children already grown. And we can, in many instances, tell you things that your child would like to tell you if your child had the vocabulary and experience to put their feelings and needs into words." And so Sheri and I are here to let you know and share with you what deaf children would say to you if they had both the vocabulary and the experience to do so. So why deaf leadership is so vital in the EHDI system. Is that families, that the many families that are out there when it is identified by professional deaf people, that those deaf families have identified that those professional deaf people are the most important people in the, they've expressed over and over again that the deaf professional is the person who's the most helpful in their journey in raising a deaf child.

And the JCIH coordinating council's focus on infant hearing. Their goal number 11 is that all children who are deaf and hard of hearing, that their families have access to support, mentorship and guidance from individuals who are deaf and hard of hearing themselves. And so formally deaf children, Sheri and myself, are deaf professionals now and experts in the field. And we have lived the experience of being deaf.

- [Interpreter 1] Now, there are various benefits of working with deaf professionals. We try to put a positive frame on the various benefits so that you can see how critical it is to have deaf professionals to work closely with your deaf and hard of hearing professionals in your state to really take advantage of the knowledge, expertise of the educational medical systems based on years of providing services to real life experiences. Those experiences that deaf professionals have really matter when it comes time to speak with parents and to explain to parents what their child may or may not be experiencing. There are also many deaf individuals who are researchers on linguistics, language, and brain use, when we speak to using ASL and English, whether English is written or spoken.

We ask that you have presentations provided by deaf professionals on early language acquisition, so that they're able to explain from their experiences on language, early language acquisition and what that looks like. There are advisory stakeholders which are also critical to have deaf professionals be able to speak to the universal language milestones of expressive and receptive signed language. And that ties with legislative actions of LEAD-K services. And that I'm speaking specifically to a bill here in California that was passed that requires milestones to be established. And those milestones are provided to parents of deaf and hard of hearing children. Not every state has the legal requirement, but it is important that you do share the milestones with the parents of deaf and hard of hearing children.

We also have a statewide deaf coach curriculum that was developed by deaf professionals working with deaf children in infants and children. Parents and guardians who have a deaf coach or family deaf coach can give examples of successes and language successes. And the challenges that they experienced when they didn't have access to a deaf coach. We find that deaf children pick up language and acquire language at a better pace when learning directly from a deaf coach. Parents themselves can learn ASL and learn how to speak to and interact with their children. The language milestones that we use here in California are universally applied. And it doesn't matter which language of choice the family uses, whether that's ASL or English.

And also deaf coaches can provide a different unique perspective on visual early language skills. The other benefit also is to learn about the other deaf professionals in the United States. We have various EHDI, when we look at the very EHDI coordinators, only Julie and I are the only deaf professionals that provide these services. There is Karen Hepburn who runs a program in Maine. There's also co-EHDI coordinators, of course, Julie Rems Smario and myself in the state of California. Here in California we have the California EHDI Program, which includes services and referrals for early start services. Once an infant is identified, they're referred to us and we will get them connected to the right local education agency.

Of course, California is huge. There are various educational agencies, so we make sure that we match up the family with the appropriate LEA. We work with various state departments and we work collectively. We work work with California Department of Healthcare Services. We work closely with Department of Social Services, the California Department of Education, as well as the California Department of Developmental Services, DDS. And they are the lead agency for California. Our stakeholders also include a variety of representatives. We have parent representatives, we have teacher representatives, audiologists from, we have different professionals

from various hospitals. We have medical professionals. We have EDHI pediatrics. AP as part of our stakeholder group. And our state departments are also working with us.

So collaboratively we work together. And this group, stakeholders, consists of both deaf and hearing individuals. As you know, the goal of every EHDI program is 136. So at one month infants are screened by the time they're one month old. By three months there's a professional diagnosis and the child is identified deaf or hard of hearing. And then by six months, hopefully that child has already been enrolled in services. Here in California, we have additional milestones. We have another six month milestone, by six months or before. We have parent mentors who work with LEAD-K Family services. And the goal is to get them connected with the family to provide supports and to provide resources and to help parents find the right places that they need to go to get connected to their local education agency.

And then by nine months, typically that's when we have families that will start asking about deaf coaching services. Here is a visual flow chart of what that looks like here in California where we give, where a child is identified, then they're referred to us, LEAD-K Family Services, and referred to early start. And then from them they're referred to their local education agency and their local regional services to begin services. So that's generally the process that occurs. And Julie.

- [Interpreter 2] Yes, so now you can see that LEAD-K, the family services is embedded in the California EDHI system. And LEAD-K, the family services itself is run by two deaf EHDI coordinators. So that's the reason why it's just so very important to have deaf leadership in EHDI. And yes, we do agree and acknowledge that there's language needs for deaf children and we know that because we've been through that we've been there ourselves as former deaf children. But at the end of the day, the language we've realized is more than just language, but also it has to do with our deaf

community, our culture and the wealth that we have as deaf people that we live every day as deaf people in the world.

And so it's so important to have resources that include education and educational capital, our knowledge about teaching deaf children, the kind of education set up that works the best and what doesn't work and our experience, we can share that with families. We also have a language knowledge and what our experience is like in grasping and learning and picking up language. And also the lack of picking that up and what that feels like and not having access or having access to language in general. We also have the social capital where we can network with both deaf community members and the hearing community. And we're experts in knowing who's who and meeting with those people every day. We also have aspirational capital.

In that we have a network of role models. Both Sheri and I both are great sources for aspirational role models as individuals and aspirational capital, you know. And so when parents meet Sheri and they meet me, they can't believe it. They say, wow, you're deaf and that makes me feel like my baby is gonna be okay in the future. This is a powerful thing to be a deaf role model. And we also have resistance capital in the sense of how we can fight for our rights and how we can advocate for ourselves and how we can become policy makers and change the system of laws. For example, with LEAD-K, the campaign itself was separate from LEAD-K Family Services, but the LEAD-K campaign it was a movement to pass a law in the state of California to have early language access for ASL and English for zero to five year old children, deaf children so that they arrive in kindergarten ready to read and write.

And that's an example of our resistance capital. Another example of resistance capital is in California we have the newborn hearing program, which is law. And the law passed in 1998 and that was because of deaf people. So deaf people, the movement, the resistance capital in changing the laws, you know, there are many audiologists who

have their job today because of that. So it's very important that we work together. And there's also family capital. We know what works in the home, at dinner time to not make the child feel left out during gatherings of the family, to make sure that the child feels included when you watch movies and play games, especially during the holidays. We have a lot to share in that area.

And then we also have navigational capital, in the sense that we've gone through the world ourselves and it's designed for hearing people. And so we've learned how to, you know, simply order something at Starbucks to get our latte just the way we like it or something complicated like getting a home loan. We have those skills, those life skills because we've lived in the world as deaf people and that it's not necessarily friendly to deaf people. and so they can watch us and how we navigate the world and how we figured it out daily in our daily lives. Also too, we have trauma knowledge, trauma knowledge capital. And we call that TKC. We have a lot of trauma from language deprivation to not having access to education, to feeling isolated at home and in school and society in general.

And so there's a quite a bit of trauma as deaf children and we've grown up through that and we know how and what not to do in providing services to lessen the experience of trauma. Society can cause quite a bit of trauma for deaf children, but we can let you know what works and what doesn't work. To sum it up, I wanted to say that we do offer all of the EHDI system as a deaf adult. And that is what I wanted to say back to you. Oh, actually I do wanna talk about the medical model versus the cultural model. And so it's important to have a medical professional involved to help to identify a deaf baby, right?

And we need audiologists to help identify deaf babies as well. But it's also important too to have a social cultural perspective. So the medical perspective focuses on hearing, the ear itself, and speech, which is great, but we also need to focus on the

whole child. And that would be the cultural social perspective of a child. For example, with the medical perspective, the vocabulary tends to be we're sorry, your baby failed her hearing tests. Another thing is the communication option is either this or this, either spoken language or assigned language. And oh, your baby has a hearing loss and if they're born it as though they've lost something. And in early intervention, these are the things that are said.

The word early intervention also can be very intimidating to parents. And they also say that the child's been diagnosed and that they need to fix the ear, be it with a hearing aid or cochlear implant. The other word is hearing impair that they use, we don't use hearing impaired to deaf people or they'll say your child will be vocationally limited. Or the grief process with audiology and technology. That would be the perspective that they have. But the social cultural is that your baby's been tested that shows that we need to refer them to an audiologist. And we explained to them why rather than saying that they failed the test and your baby seems to have some hearing loss, maybe they're hard of hearing.

We're gonna refer you to an audiologist to clarify that. Also all of the language acquisition opportunities are provided. You can say, hey, they can learn American Sign Language, they can use English. It isn't this or that. It is both. And that's a discussion from the beginning is that you can have it all. Also with the hearing level, instead of saying hearing loss, they'll say hearing level. And then that talks about a spectrum instead of just a loss. And then there's family support and collaboration rather than saying early intervention. Family support and collaboration is warmer and more community-based. We identify. What that means is we've identified that your child is deaf and we can use listening devices for deaf and hard of caring children and that there's unlimited opportunities for them in the world.

We also use that there's a transitional journey, not a grief journey, but a transitional journey. A transitional journey in life when you find out that, oh, I don't have a hearing child, my child is deaf or hard of hearing. And so that's a transitional journey. Also, there's visual technical technology. It's visual technology that they can use as well as just hearing technology. So that's the difference between a medical model and a social cultural model. And with the social cultural model, deaf adults can offer that. Next. So here's another quote from one of the parents that I've worked with. We have so many parents who share their experiences and sometimes I like to write it down so that you can hear it directly from those parents.

One parent had said, "I thought that my daughter would not need ASL, because she had a moderate hearing level. And through the deaf specialist I was relieved to hear that ASL was encouraged for her spoken English acquisition. And I believe that all babies with any hearing level can learn American Sign Language. And I wish that all doctors would share this information with new parents so that we are not so scared." So that's the reason why like with parents, we want them to feel relieved. We want them to see their child, their whole child, not just the the hearing loss or the hearing issue, but as an entire being. And it's the difference between being and overcoming.

The medical model of deafness. The definition gives the family the impression that the child has to overcome their deafness, but really we don't have to overcome anything. We work in collaboration as a community, sharing the medical model as well as the deaf community professional model to provide our deaf culture and the wealth of resources so that we can become a deaf child's model and embrace their multiple deaf identities and just let them be okay by being. Next, please. So Sheri.

- [Interpreter 1] Here's another quote I'd like to share from a parent. It says, as parents we do our best with what we have. Parents of deaf children have the deaf community. As parents, we need to capitalize on the opportunities to socialize and interact with

professionals in our deaf community. Deaf children and families need deaf professionals. And the deaf community needs to embrace young deaf members of our community. Parents coupled with deaf professionals make a perfect marriage, a family and community, working as a team to prepare our deaf students for a successful future. And that marriage is important. And I think that it's important for audiologists to know that there are many people that we work with. We do work with many audiologists who are a part of the team and parents can see that we work jointly, we work collectively together.

And that's really important to show that there's no divide and conquer, there's no us versus them. It's really important that we share that concept of collaboration and we show that collaboration. As deaf professionals, we can provide, we can provide infants and those who work with children who are deaf or hard of hearing to refer them to their local education agency or refer them to the regional center for early intervention services. As deaf professionals, we can provide support for parents with LEAD-K family mentors, encourage them to connect with their local education agency for enrollment, for early start services. And again, I had mentioned that we work closely with our Department of Healthcare Services and we have two hearing coordination centers here in California who will receive the newborn infant screenings from the hospitals.

The hearing coordination centers do have some audiologists who work closely with us. They also encourage families to enroll in Early Start Services. LEAD-K family services, which, of course, administers our EHDI program. We also provide other supports for families by providing referrals to LEAs and also encouraging the LEAs to refer families for deaf coaching and deaf services. And it's very helpful when we have local education agencies that will provide that support and work with families to make sure they have access to deaf coaches. Deaf professionals also collaborate with deaf education administrators at schools for the deaf. And here in California we have option schools as well. There are private and public deaf and hard of hearing programs.

So the option schools will provide spoken and listening services for their infant or child. They have various programs for deaf and hard of hearing children and families that use spoken and listening language. And then we also have schools that have deaf and hard of hearing programs. We don't work with one versus the other. We work with all programs. We host monthly stakeholder meetings with various state department representatives from the California Department of Healthcare Services, the coordination centers, the California EHDI Pediatric Doctors Association, the California Department of Education, the California Department of Social Services, and of course the California Department of Developmental Services, which is the lead agency for Part C. We train and supervise staff who are parent mentors and also those who we subcontract with for deaf coaching services.

And we provide those services statewide and we provide training and curriculum statewide so that there's unified services and of course we go through the proper background vetting. We also clicked data and we get data from Department of Healthcare Services. And we share that data with HRSA. And the bottom line is to remember when it comes to deaf services, there's nothing about us without us. We are here to be at the table to work with all of you. So these are the types of employment that you'll see deaf people in. We have deaf audiologists such as Sarah Sparks. We have Nancy Hilbok who is the new director of the California Department of Education State Special Schools and Services. There's a deaf superintendent. Her name is Glennis Matthews.

- [Interpreter 2] Yeah, and this is Julie. We were gonna take turns introducing the different deaf adults that impact our EHDI system in a really positive way. We work closely with deaf researcher Dr. Wyatte Hall and he is at the University of Rochester, mid central focus on language deprivation. And he has fabulous information that we can use to develop our programs to prevent language deprivation. We also work

closely with Dr. pardon the interpreter, Dr. Michelle McKee who is a medical doctor, Michael McKee, and he's in Rochester, he's moved to Ohio now. Anyways, a very knowledgeable doctor about the impact of early language acquisition for zero to five year olds. And I have met him through the EHDI Conference.

Another one is Michelle Koplitz and she works before at HRSA and we both had collaborated. And so now Sheri is the person in that role. But they gave me the idea to transition the grant to NorCal. And so they got the grant and were able to do the LEAD-K family services through her idea so that families have the family network as part of the social capital network in the EHDI system. So it's a new idea of how to improve the EHDI system for families. Go ahead Sheri.

- [Interpreter 1] And this is Sheri speaking again. We also have an attorney, there are several deaf attorneys throughout the United States and one works with me here at NorCal. And her name is Alice McGill. We have many, many deaf professionals who are early language educators and hopefully you'll have the opportunity to meet the ones that are in your state here in California. One of them is named Rita Robera and she works at the California School for the Deaf in Fremont, California. And here's an example of who our deaf coaches are. For example, this is Stacy Abrams and she started a program I believe in, where they assisted starting programs in Minnesota and now I believe in Arizona.

- [Interpreter 2] Yeah.

- [Interpreter 1] And and my son was, oh, here's a quote that I heard from a parent. It said that, "My son was the first deaf person I ever met. And as a family, we embrace deaf culture, Americans Sign Language, deaf role models and deaf families early in his life. He grew to become confident, highly educated, tolerant, and a patient adult. I am

grateful and proud as I reflect on how enriched our lives have become." And that's a comment that we've heard from one of our parents.

- [Interpreter 2] Yes. And so this is Julie again. And you know the medical home in the US from the very beginning of this with deaf professionals are rarely invited to be at the table with those discussions. And so we can change that by looking out into your community to find deaf parents and deaf professionals in your area. And the way that you can go about doing that is the early detection with EHDI and contacting the Newborn Hearing Screening Program providers. And there is a list at the EHDI website. And you can contact those providers. Also the schools from the deaf in your area, they tend to have large programs. And you can contact deaf agencies and commissions for the deaf and hard of hearing.

They're out there at different states. We also have state associations for the deaf. Here we have the California Association for the Deaf in Ohio, they have the Ohio Association for the Deaf and so on. So your state agencies are out there. Also you can use the internet whenever you're stuck, right? We've always got Google. This is one of my families that I've worked with from the very beginning since the baby was four months old. The baby's name is Devika and the parents' names are Harshada and Sachin. And the quote is "Devika is now two. And in these two years we have learned to respect every deaf person's ability to survive in this strongly opinionated and prejudiced hearing world.

And destiny has chosen us to be her parents and we have chosen not to disappoint." How touching, yeah? Very, very powerful. So in closing, we have a closing note. And now we can answer your question.

- [Interpreter 1] This is Sheri and I'm gonna go back to speak to the way to find deaf people in your state. Maybe some of you are still unsure where to go and of course

there's a list and there are some places that you can find deaf professionals. But one that wasn't mentioned is that if you have an event for families, a family engagement event, of course invite a deaf person who are well known. We have influencers and other famous people such as Nyle DiMarco who is a famous deaf person, of course. He won America's Next Top Model. He also was on Dancing With the Stars and he won that competition, I believe in 2016 or 17. And now there's a new person that you'll see of course is Daniel Durant, who just recently was on Dancing With the Stars.

Of course there's Marlee Matlin And Marley of course is the deaf woman who won an Academy Award. There's Troy Kotsur who just recently won the Academy Award for the best supporting actor in a movie. And the list goes on and on. There are deaf celebrities, deaf role models, actors and influencers who would love to participate on your panels for parents and of course to engage with your professionals that you work with such as doctors and audiologists. So that you can get to know the various perspectives of deaf individuals. And most of these professional deaf people are well-known presenters. They're fun and engaging. Is there anybody that has some additional questions for us?

- [Interpreter 2] I also wanted to share a story with you about how I got involved with the EHDI system. I was not involved with it before. I was in a non-profit management position where it was an organization where we served survivors of domestic violence. And I met a person who was very involved in the EHDI system through that. And I witnessed that person saying, deaf people can't be stakeholders for the EHDI system because deaf people don't know what's best for deaf babies. And when I saw that, I was like, it was very troubling for me and it was definitely a turning point in my career, I did a change of jobs, I got involved in the EHDI system and I made sure that deaf people and our experience that it would be valued in the EHDI system. And so now it's been 12 years and so I've come a long way, and I have a long way to go still as well.

- [Interpreter 1] And I see now that there are a couple questions in the Q&A. One person, I believe it was from Jacqueline and she stated, I'd love to establish a connection with a deaf coach like Stacy Abrams. Do they have an association or a group that I can reach out to? And to answer that question, I'm not sure that there's an exact list of deaf coaches in the United States yet, but we hope to see that developed soon. But what you can do is you always can reach out to me directly and to Julie. If in your state you can't find a deaf coach, then certainly reach out to one of us and we will find a connection for you.

- [Interpreter 2] Absolutely. Then there's the next question here. How do you support families that decide that their child should learn listening and speaking and how we support that? Is it really important for the child to meet their milestones and there's the universal milestones that are out there in general for whether it's a signed language or a spoken language, whether it's English or Spanish or Farsi. But what's important is that we get support so that they meet those linguistic milestones. 'Cause if a child doesn't meet those early critical linguistic milestones with speaking and listening skills, and it's a good time to discuss perhaps adding American Sign Language as soon as possible so that they can meet those linguistic milestones and prevent the language deprivation.

And so whether it's with silence or spoken language, before the language milestone became law in the city of California, parents didn't even know that their child had language deprivation until they were maybe 12, 13, 14, even older. And so parents can find out early on because of those language milestones and then they can receive resources with language resources to supplement whatever it is that the child needs to then get on track.

- [Interpreter 1] And this is Sheri. I'd also like to add, we do have a referral list of various schools and programs who focus on listening and speaking language only. We work with option schools who focus with working with students who have cochlear implants

or various technical devices. And they've had issues that have come up as well. Primarily it comes to the issue where the local education agency is not getting information from the audiologist. Because everybody's working remotely due to COVID. And we have initially, of course, the audiologist will do the screening and they're the person that will identify the child as deaf or hard of hearing. And then provide that report to the LEAs so that they can start services.

We have one family though that really works, or that lives in a rural part of California and they live near San Luis Obispo. And in that area there was no audiologist or any services for miles around them. Their child had just gotten cochlear implants. And with that the child, the family was frustrated and unsure what to do. No one was able to provide follow up services. So in that case, we would reach out to one of our option schools in California just to get them connected with the family so they can provide services and explain next steps and what to do from there. So we have a wealth of resources here in California and we are very fortunate that we have a state department who collaborates closely with us. And one of us in our group will know the answer.

- [Interpreter 2] There was another person who had asked about a link to language milestones for all communication modes. And we don't say communication modes, we actually say language opportunities. That's different than communication. So it's important to look at it, to frame it as language opportunities. And I gave you the link for LEAD-K family services and in that, on that website, we do have how many different languages. I think there's eight or 10 different languages for parents' home languages. And you can find that there.

- [Interpreter 1] And this is Sheri. Now when we speak to babies, learning language, they need to learn language before they can communicate. And I think that's important to explain why we frame it this way. It's critical that we start with early language intervention services to support the family, to provide support to their deaf babies

because, of course, it's the family that has the deaf baby most of the time. So while that child is growing up. So it is critical that the families get more support, the more support the family gets, the more success the child will experience.

- [Interpreter 2] Yes, thank you. And Jacqueline, I'm sorry, language mode, that's where parents become confused and I appreciate that you brought that into the discussion. So I say ASL in English, but it can also be Spanish or any other spoken language that is used at home. But often I'm asked about huge speech or what about signed English and those are tools under English. So those are not a language, but they're, you know, so we use our language capital as deaf adults to reframe it in a better, more clear, with more clarity. And I see also, can you share more about what role early educators have? And so I can share for myself with an early language educator myself, the kinds of questions that I'm asked by parents typically are what does it feel like to be deaf?

And I think it is a natural question that parents have. They want to know what it feels like, what's the experience that their child is having. And so I share with them daily things. You know, I mean as deaf people we have the same feelings as hearing people do, but we can get frustrated with our hearing families sometimes because my hearing family, okay, don't misunderstand, they're wonderful, they're loving. I adore my parents, my brother, but sometimes they forget that I'm deaf. And during the holidays, I share my experiences with families about feeling less, you know, kind of diminished in my family. For example, they might be playing a game and so it's good to play a game that doesn't include a lot of talking.

Maybe games that have to do with gestures, game, you know, what's that game where you, Sheri, what's that thing called where you put it on your forehead and you, it's like the head nod game. What's that thing? Anyway, there's games out there and that don't require a lot of talking. That can still be fun and you can play Scrabble with older kids in the titles so that it's visual. There's a lot of ways to make a deaf child feel included. And

so as a role model with early language, it's not only language but it also includes how the child feels at home, how they can connect also with the deaf community and how they can find role models in the deaf community. And to bring those folks, link them in with the families. That's what I do as a role model.

- [Interpreter 1] This is Sheri. We have also another comment by Kosha Chan. And it says, I am so happy that we are speaking about the difference between language and communication. As an educator and audiologist who works in deaf and hard of hearing programs at a high school, frequently we see such gaps in language that makes it very difficult for students to access school curriculum.

- [Interpreter 2] Yes. And if I could add to that about the language gaps. Often there's misunderstanding. They think of the child because they can speak well, right? It doesn't mean that they can hear well and they're still not getting access to the curriculums. Yeah. And so I see this more and more with deaf children who are mainstreamed and they speak really well, but they're dropped from getting services because they're speaking so well and then they start to fall behind and speaking well does not indicate that they can hear well.

- [Interpreter 1] Yeah. When we speak to early intervention educators and the various roles, often we speak to establishing services for the family, speaking with the family to find out what services that they would want and benefit from, getting them connected with a deaf coach who can provide them the information that they want and they can work with a deaf coach that will get information directly from the LEAs to support those families. The early intervention educator might also reach out to various resources to get the family connected so that they can get services. Sometimes that's in regards to equipment such as cochlear implants, it could be language, it could be ASL or English. But the most important thing for the early intervention educators is to really focus on language development and assessment.

That's their primary job here in California is to do language assessments. In California every six months we require them to do that screening and that child have a language assessment. And that could be informally monitoring them, seeing how the baby is progressing or that child is progressing from zero to five. I hope that's helpful.

- [Interpreter 2] Yes. And the next question I see too is there's parents who never have met a deaf person until they have their own child. Do you have any good recommendations and/or resources for people outside of the family, children, friends and teachers and yeah, really the deaf coach. That's the answer. And the deaf coach, when we say that, it doesn't mean that it's just like a deaf teacher. Often I see the schools trying to use their deaf teachers as a deaf coach and that's not the same thing. It should be a separate person. A deaf coach should be someone from the outside who can bring them to the community, visit your home, help you to use language so that you can use it and what you can look forward to with language development and encourage the families. And I just had given the website, the link to LEAD-K Family Services. And in there you will see the parent profile and if you check in parent profile, you can give that to the families. Thank you.

- [Interpreter 1] Hang on moment, let me look through these notes. So in closing, I hope today that you have learned a few things in regards to how to work with deaf professionals and the benefits of working with deaf professionals within the the EHDI system. Consider us as partners, we're collaborators, please work with us and bring us to the table when there are issues that come up. Certainly reach out to us. Let's have discussion with us. Because there are so many ideas and we've seen experiences, we've lived experiences, we've been on the front line with families. And that's critical that we can bring that experience and knowledge to share with you and maybe help you do your job more efficiently and effectively.

And I know sometimes as audiologists, you guys have a difficult job. You see things happening within the school system, you've seen maybe there's some challenges with administrators not providing services, et cetera. And we know that sometimes you need an advocate, so working with us, we can help make those changes as well. So the bottom line is we are thrilled to be here. We are thrilled to be able to be a part of our California EHDI system. We are thrilled to be a part of what's happening now in today's learning experience. So thank you for having us.

- [Interpreter 2] Yes, thank you for having us. And our email contact is there on the slide and so feel free to contact Sheri and myself. Our emails are right there for you to use.

- [Interpreter 1] Happy holidays everyone.

- [Interpreter 2] Yes, and see you guys next year hopefully. Invite us back.