**Module 2 Lesson 2 Part 1 Descriptive Transcript**

**Narrator:**

“Teaching Children Who Are Deafblind: Professional Development for Educators”

Module 2: Early Intervention for Children Who Are Deafblind

Lesson 2: Connecting with Others

Part 1: Understanding Early Communication

**[Visual Description]** A woman holds a baby boy on her lap. She encourages him to explore a rattle with his mouth.

**Woman:** Do you want to have him feel it with his mouth? See if he will put that near his mouth so he can feel it with his lips? Cause that is one way they explore, see if he wants to try.   
[mom speaking in Marshaellese in background]

That’s okay with us. Oh he likes it!

**[Visual Description]** A woman holds a young girl on her lap. They look at each other.

**Narrator:** In this lesson, we’ll focus on early communication for infants and toddlers who are deafblind, how connections with others can be encouraged, and the foundations of concept development.

Before we begin, let’s check what you know…

True or False?

1. Infants and toddlers who are deafblind need to be intentionally taught the words, expressions, gestures, sounds, and signs that typical hearing-sighted children learn incidentally.

2. Because children who are deafblind are easily distracted by sensory information, it is important to limit the amount of time you give them to respond during learning activities.

3. You should instruct the caregiver of a child who is deafblind to limit the child’s exposure to authentic experiences outside the home until they have developed accurate concepts of their home environment.

We’ll revisit these questions at the end of this lesson.

Lesson 2 has three learning objectives:

1. Compare the ways early communication development for infants and toddlers who are deafblind differs from that of their peers with typical hearing and vision
2. Describe strategies that can be used to encourage an infant or toddler who is deafblind to communicate and make connections with others
3. Explain what early intervention providers can do to encourage the concept development of an infant or toddler who is deafblind

**[Visual Description]** A woman holds a young girl on her lap. The woman pats the girl's stomach and the girl wiggles and waves her hands happily.

**[On Screen Text]** Kari Harbath, Sloan’s Mom

**Kari Harbath:** For Sloan, she shows a lot of communication through her body language, too. So like if you do something that she loves, she wiggles a lot, so you'll see her like, get really hyped and wiggly. If, right now she's really good at, if you're touching her, or doing something she doesn't like, she will pinch, she'll take her little pincer grasp, pick you up and just drop you off somewhere else. She's really uninterested in something, she'll make it very clear.

**[Visual Description]** A series of images and videos of young children who are deafblind communicating with their parents or providers.

**Narrator:** Infants and toddlers who are deafblind communicate in many ways. Some are similar to those of children with typical hearing and vision, and some are not. Often a child who is deafblind will communicate in more subtle ways. And nearly always their communication develops much more slowly.

**[Visual Description]** An infant sits in a hospital car seat and makes gurgling noises. A nurses adds additional padding to the car seat.

**(**infant gurgling noises)

**Narrator:** Emerging communication–sometimes called presymbolic or prelinguistic communication–begins right away for all infants. For example, they use vocalizations, facial expressions, and body language when they’re hungry, happy, or want attention. This type of communication is mostly unintentional–it happens automatically.

**[Visual Description]** A medically fragile toddler looking up at the caregiver.

As the child grows, their communication becomes more intentional. For example, they start to realize that if they cry, someone will comfort them.

**[Visual Description]** A very smiley infant wiggles around.

For infants and toddlers with typical hearing and vision, communication continues to develop naturally as they observe and overhear things

**[Visual Description]** A series of videos of young children communicating in ways such as rolling and pointing to a ball.

Because of what they see and hear, children with typical hearing and vision begin to develop “symbolic communication” between about 12 and 18 months. They start to realize that objects, pictures, signs, and words can be used to represent people, places, and things.

For example, that the word “ball” is used for that round object they like to play with. And they’ll develop gestures, so if the ball is out of reach, they might point to it. They start to make important connections!

**[Visual Description]** A series of images:A young girl who is deafblind holds a ball. A young boy sits in front of items lined up by color.

For children who are deafblind, these connections won’t happen automatically. Infants and toddlers who are deafblind need to be purposefully taught the things that hearing-sighted children pick up incidentally.

To begin, it’s important to assess the extent of a child’s functional hearing and vision as well as how they use touch, and build communication support strategies based on those abilities.

**[Visual Description]** A young child lies on the floor. An adult rubs the child’s chest with their hand. The child grasps the adult’s hand and vocalizes in response to the adult’s touch.

(child vocalizing) **Woman**: Who is it… it’s miss Heather?

**[On Screen Text]** Nancy Hatfield, Early Childhood Consultant Deafblindness, Former Director of the Washington State Deaf-Blind Project

**Nancy Hatfield:** To start building the communication system with the child, we, there's a lot of information that we have to gather ahead of time.

Even before we meet a family for the first time, hopefully, we have access to audiological evaluations for the child, so we have an idea of what their, their hearing situation is. We have eye doctor reports, hopefully, not always, and so we get information from those sources. But even more important is observing how the child uses their hearing and vision functionally, and what seems to be their preferred sensory modality.

**[Visual Description]** A young boy sits on the floor. He pats the floor and waves his hands.

**Narrator:** Often, caregivers don’t recognize that a child who is deafblind IS communicating. You can help them identify how their child communicates by asking questions such as “How does your child get your attention?”

**[Visual Description]** A young girl who is deafblind sits beside a large drum. Her hands rest on the top of the drum.

Other good questions to pose are

* How does your child let you know she doesn’t like something? Parents often know right away the answer to that!
* How do they let you know they’re hungry? Tired? Overstimulated? And so on…
* Does your child do anything to let you know she wants something to happen or wants more of something? For example, if your baby loves to be rocked, what happens when you *stop* rocking?
* And how does the child let you know what she likes?

**[Visual Description]** A young girl who is deafblind sits beside a large drum. Her hands rest on the top of the drum. An adult uses a drum stick to beat the drum. At first the child doesn't respond but then she smiles and indicates she enjoys the activity.

Sometimes, parents might initially respond to this question with “Oh, she doesn’t like anything.” But they may be thinking solely in terms of *toys*.

When you encourage them to think about this a bit more, they’ll probably realize there are lots of things the child likes! For example, being held, stroller walks, hearing their siblings play close by, and feeling the vibration of a drum.

**[Visual Description]** An infant who is deafblind sits up (supported by their caregiver), smiles and wiggles his arms.

Questions like these can help caregivers realize that, far from being uncommunicative, their child has already learned how to express themselves in *many* different ways.

**[Visual Description]** A young boy who is deafblind uses a sippy cup to drink. He laughs and drinks again from the cup.

(childlaughing)

**Narrator:** Up to now, we’ve been talking about how a child expresses themself in ways we can interpret, or what’s called *expressive* communication.

How do you assess the *receptive* communication of a child who is deafblind? That is, how do we know what “messages” the child *understands*?

**[Visual Description]** A young child sits on her mother’s lap. A service provider touches the child’s chin with her finger.

Often parents think of receptive communication only in terms of *language*; that is, “Does my child understand what I say?” You’ll want to remind them that children who are deafblind can “receive” and understand information in many ways. And touch can be the most effective and reliable way.

**[On Screen Text]** Sundie Marx, Teacher of the Deaf-Blind, Utah Schools of the Deaf and the Blind

**Sundie Marx:** Two ways to support children with deaf blindness, and their receptive language is through object cues and touch cues**.** For example, an object queue may be spoon that is always paired with the routine of eating, and so, before the child ever eats, you would hand them the spoon and let them touch the spoon, let them explore the spoon. Because we know, touch is the way that most of these little ones get most of their information so by touching it, and then immediately pairing it with that activity or routine of eating, they learn that, oh, a spoon is representative of that. And then a touch cue, for example, may be touching the child three times behind their shoulders before ever picking them up. So then they also understand. Oh, that touch queue represents. Oh, I'm going to be picked up.

**[Visual Description]** A mother bends down towards an infant in a bassinet swing. She touches the infant behind both shoulders and then picks her up.

**[Visual Description]** A baby in the NICU being fed through a G-tube. The baby has a pacifier in their mouth.

**[On Screen Text]** Kari Harbath, Sloan’s Mom

**Kari Harbath:** from the minute she was born whenever she was getting a G-tube feed, which was pretty constant at first, but over time, you know. Then we were doing like, you know, just intermittent feeds. We would try to give her a binky at the same time to show her that she was using her oral muscles, and her stomach was filling up. So there was a connection there somehow. And it took a lot of diligence on our part.

It was exhausting sometimes, especially at night, but we kept on it, no matter what. And while we did that we would sign “eat” tactile, like a tactile sign, by touching her face, sign “eat,” give her the binky, you know, she’d be eating for her G-tube, and we did that, starting in the NICU day one for as long as I can remember.

**[Visual Description]** A baby is held by her father and eats from a bottle.

Then we got home, and her speech therapist came in and suggested one day that we just try giving her a bottle. We had been cleared in terms of, you know, any like swallow study concerns or anything along those lines, and so we gave her a special bottle because she had a cleft palate. And we could cut off all of her G-tube feeds for a while, so she was hungry. And next thing you know, Sloane just starts tapping her face. We hand her the bottle. She eats completely, and she was never on the G-tube again. And that was just like boom! I mean. It was immediate.

**[Visual Description]** A young boy sits on the floor and plays with a stuffed toy. Service providers sit nearby and sign to him about the toy.

**Narrator:** Always encourage caretakers to be *deliberate* and *intentional* when communicating with their infant or toddler. And, provide frequent opportunities for the child to both express themselves and receive messages from others.

**[Visual Description]** A young boy lies on the floor. His nurse sits nearby. She hands him the syringe used for G-tube feeding. She encourages him to push on the syringe plunger.

Let’s watch how this child and his nurse communicate as he learns how to help with tube feedings.

**Woman:** Yeah there you go. Push. Nice job.

**Narrator:** Let’s take a break and check what we’ve learned...

For infants and toddlers with typical hearing and vision, communication develops naturally as they observe and overhear things. How is this process different for infants and toddlers who are deafblind?

Feel free to pause the video if you need time to think.

Because children with deafblindness have limited access to incidental information–casually hearing and seeing things and people around them–their communication development is much slower. They’ll need to be purposefully taught the things that hearing-sighted children pick up incidentally.

This ends Part 1 of Lesson 2. In Part 2, we’ll take a closer look at strategies to encourage communication and connections.

**[On Screen text]** National Center on Deaf-Blindness  
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