

Communication Skills

I. Highlights

- A. “Bathe the child in language.” Talk to every child throughout the day, even if they’re too young to talk back. This is how they learn language.
- B. Comprehension precedes production. (We understand a new language before we can speak it.)
- C. Language develops in stages, from babbling to single words to telegraphic speech to short sentences that get longer over time.
- D. Five strategies to encourage language development = motherese, recasting, expanding, labeling, echoing.
- E. Receptive language = listening/ comprehension. Expressive language = speaking/ production.
- F. Language is a system of symbols (words, signs, written words, etc.) used to communicate with others according to a rule system.
- G. Rules of language = phonology (sounds), morphology (meaningful pieces of words), syntax (word order), semantics (word meaning), and pragmatics (social rules for using language appropriately).
- H. Hearing impairment can be total or partial, either from birth or because of an injury or illness. Hearing aids or cochlear implants can help.
- I. Children with autism often have trouble with both language and social skills.
- J. Speech disorders include articulation problems, stuttering, voice problems, and word-finding problems.
- K. Children who are deaf can often go to mainstream schools with the right support.

II. Homework

- A. Read Chapter 9 for next week (Nov. 12)
- B. Community Resource Project due in 2 weeks (Nov. 19)
- C. Presentations in 3 weeks (Nov. 26)
- D. Presentation summary due in 4 weeks (Dec. 3)
- E. Final exam in 5 weeks (Dec. 10)

III. Discussion

- A. Parent-teacher conferences can be as stressful for families as for us. They want to hear they are good parents and their child is great, but they don't know what they're going to hear.
 - 1. When talking to parents, follow the "sandwich rule." Start with a positive, share your concern/negative, then finish with a positive. Then they don't feel so badly about it.
 - 2. In the beginning, don't talk so much. Ask parents to tell you about themselves or their child.
- B. Circle time should be like an expensive restaurant: leaves you and the kids wanting more when it's over. Don't draw it out too long!

IV. Assignments remaining this semester

- A. Community Resource Project = description on syllabus
 - 1. Focus on my immediate community / neighborhood / city, not the whole Bay Area. Don't talk about San Jose if you live in Cupertino.
 - 2. The syllabus says there will be a "report form." That's wrong. There is no form.
 - 3. Figure out what's available in my community.

4. Go for a walk to explore public places: go to the grocery store, public library, movie theater, park near home, etc. Check out the bathrooms, theater seats, etc. Would it be accessible if I were in a wheelchair? Does the crosswalk have a chirp sound to help the blind? Are the classrooms and bathrooms on campus at school accessible? Are there braille signs by each classroom door? Do the city busses have lifts and tie-downs? Is it doable to get on and off the bus safely if I'm on crutches? If it's a publicly-funded program, it needs to be ready to serve everybody, but that's not always reality. Would a person with a disability be able to get around here?
5. 1.5 to 2 pages. Write in detail what you find.
6. When you're in the store, do you see any special cases (such as a mom trying to contain a child with autism who is acting out)? If so, share the story. Do you see a willingness to work with people with special needs, or does the storekeeper side with the complaining customers?

B. Group Presentation

1. 45 points
2. Time = 30-35 minutes per group. Every member talks 5-6 minutes. (Each can talk longer if there are fewer group members.)
3. 4 groups, all presenting on the same night.
4. Visuals required: PowerPoint or poster, etc. with information for everyone to look at while you're presenting.
5. Handout required. Bring 20 copies. Include:
 - a) Names of group members
 - b) Name of agency
 - c) Information on agency: history, funding, services provided, whom do they serve, contact information (address, telephone, website, a person's name or email if you have that)

d) So everyone will go home with information on four different agencies so if you have a student whose family needs help, you can share the information. This is why she said it can't be a private center that charges families for services. Families who can pay will find what they need. Families who don't know what to do are often the immigrants or poverty-stricken families, maybe mom doesn't drive, maybe they don't speak English. They will need your help finding services.

C. Final Exam

D. Will do an in-class write-out tonight in class too. (Participation points.)

V. Communication Skills: PowerPoint on typical language development

A. Why do babies cry? To communicate a need (hungry, tired, bored/lonely)

1. In PITC, we say to "bathe the child in language."

a) From the moment the child enters the center, you start talking, no matter how young or how old the child is. This is a big shortcoming of most teachers: we're bubbly in the morning, lose energy by 4 pm.

b) Children are in our care 12 hours a day. They go home, eat dinner, and go to bed. If we don't talk to them, where will they learn to talk?

c) When babies are home with mom full-time, they hear mom talking. When babies are in front packs or backpacks all day in other countries, they hear adult language all day. In a classroom in a center, we have to provide the language.

2. We evaluate people's intelligence by their use of language: vocabulary, correct grammar, elegant sentences, proper voice, etc. When people mumble and talk quietly and slowly, other people assume they're not as smart. We want to give our kids strong language for their future success.

3. It is our responsibility to help children develop language to the fullest possible extent.
 - a) Important to make sure we say all the sounds of each word. Enunciate!
 - b) Vocabulary is very important. Every day, aim to teach them three new words. Make a conscious effort to use these three words in different contexts throughout the day. Without a wide vocabulary, how can they build good sentences and get their point across? Keep building vocabulary throughout life, not just in babies.
 - c) When and how much children learn to talk depends a lot on the language around them. Kids who are around a lot of rich language will usually talk earlier and more fluently.

B. Comprehension precedes production. (We understand language long before we can say it ourselves.) This is also true of second-language learners.

C. Stages

1. Babbling
2. Individual words
3. Telegraphic speech = 18-24 months
 - a) 2-word combinations
 - b) Vocabulary increases (50 words at 1st birthday, 200 by this time)
 - c) Rapid understanding now
 - d) Depends on good language exposure
4. Early sentences (1 word, then 2, then 3, then 4 and full sentences)
 - a) 18 months = "See Holly look!"
 - b) 27 months = "Holly likes us." "I go get a pencil and write."
5. Fast mapping = connecting a new word with an underlying concept after only a brief encounter. (Ex: read a book about a peacock for the first time, and

after that one book, they start drawing peacocks in art. They learned that vocabulary in one try.)

6. Groups of words: between age 2 and age 4, child begins to group words into more expressive sentences:
 - a) Spiders
 - b) Big spiders
 - c) I have spiders
 - d) I have spiders under my bed.

D. Language strategies are used to facilitate and enhance language development.

1. Facial expressions, eye contact, nod of the head, unspoken exchanges about who is talking and who is listening. These are the same around the world.
2. Some cultural differences in whether or not it's okay for children to interrupt adults.
3. Helps to repeat the important words a lot. "Here is a book. Look at the book. I'm reading you a book. There's a picture in the book."
4. Five strategies:
 - a) Motherese = high-pitched voice, exaggerated sing-song voice and enunciation, short sentences. (Now sometimes called "parentese" to include dads.) Not "baby talk" because motherese uses real words, real sentences, just shorter. Baby talk is fake words and "gagaga" sounds.
 - b) Recasting = rephrasing a statement a child has said, perhaps turning it into a question. Ex: Child says, "The bird was chirping." Mother says, "When was the bird chirping?" Shows you are listening to what the child is saying. Parent elaborates on the child's comments.
 - c) Expanding = adding more detail to what you said or what the child said. Restate it in a more sophisticated. Child says, "My green shoes." Mom

says, "I see the green sandals on your feet!" Mom is turning the child's short statement into a complete sentence with proper grammar.

- d) Labeling = pointing to pictures/ objects and saying the word for each one. Touch what you see in the book and say the name of the thing. Helps build vocabulary. Naming/ identifying objects or people. The game, "What's that?" Label parts of the body, toys on the shelf, things in the yard, etc.
- e) Echoing = repeating back, saying what the child says. Child may copy what you say. Creates conversation pattern and helps them learn correct pronunciation. Especially important if they're saying an incomplete sentence or phrase. Instead of telling the child they're pronouncing it wrong, we just say it the right way. (Frequently correcting them in a negative way makes them tune you out. Always present it as a positive conversation, not a criticism.)

E. Two categories of language: Receptive (listening/ comprehension) and Expressive (speaking/ production)

1. When children have problems with language development, is often in just one of these areas.
 - a) If they are cognitively delayed in their development, they will also have receptive language problems. Often receptive language problems come with other, bigger problems, so they're harder to fix it.
 - b) Sometimes children are fine cognitively but still have expressive language problems, either trouble finding the words or not making the sounds correctly. Speech therapists can help with this.
2. Sometimes if we don't understand what kids say, we're afraid to hurt their feelings by asking them to repeat it. Actually they're more frustrated when

we don't understand them / they're not getting their point across, so it's more respectful to ask them to repeat so we can understand and meet their needs.

F. What is language?

1. A system of symbols
2. Used to communicate with others
3. Has a rule system
 - a) English is very scattered, not a lot of rules
 - b) Latin-based languages or Asian languages often have more rules, so once you know a few, it's easier to learn the others

G. The rules of language

1. Phonology (sounds of the letters or groups of letters that make up words)
 - a) Some sounds are possible (such as "ba")
 - b) Some sounds are not possible (such as "qp")
 - c) "Phonemes" = the sounds ("k" sound in kiss or cat, "th" in this or that)
2. Morphology (rules for changing the form of individual words, such as adding -s or -es, walk / walks / walking, etc.)
 - a) "Morpheme" = smallest unit of meaning within a word
 - b) In the word helper, "help" is a morpheme and "er" is a morpheme (because it means the person who does the helping)
3. Syntax (putting words in the right order to make sentences)
 - a) Grammar of phrases and sentences
 - b) "Bob slugged Tom" or "Bob was slugged by Tom" is different. How you say it changes the meaning.
 - c) Children are sensitive to adult conventions for ordering words.
 - (1) Young children say, "Me fall" (not "Fall me") or "Car go vroom" or "Mommy go outside."

4. Semantics (meanings of words, vocabulary)
 - a) "The horse talked the boy into buying a candy bar." It's grammatically correct, but only semantically correct if you know this is a fantasy story. Otherwise horses can't talk so this sentence would be wrong.
5. Pragmatics (rules for how language is used in different situations, including nonverbal behaviors)
 - a) Use of appropriate words
 - b) Turn taking
 - c) Listening to others
 - d) Stay on topic
 - e) State message clearly (some people talk on and on, using word you understand, but you have no idea what they're saying. This is bad pragmatics.)

H. Stages and rule systems

1. Jean Berko's study of the use of plurals and ability to say the word correctly
 - a) Children learn the plural of dog is "dogs"
 - b) Hop is "hopped" in the past tense
 - c) Children say "I goed there" instead of "went" because they've learned "ed" is past tense.
 - d) Wug experiment. There is one "wug" (a made-up word), children will say there are two "wugs." It shows they've learned the rule of how to plural words, not just that they're repeating familiar words.
2. Piaget's egocentric speech: age 2-4, child speaks about their own experience, often oblivious to others
 - a) Monologue = talking to self. Collective monologue = taking turns like a conversation, but each talking about their own thing.

b) Socialized speech

- (1) Vygotsky says language is socially based.
- (2) There is also private or inner speech, where kids are talking themselves through things to organize their thoughts or figure things out.
- (3) Speech is part of cognitive development, very much related to the culture, depends on a responsible adult conveying the language to the child.

I. Ways to encourage language

1. Families read to children. (Read to young children, read together when they're older, let the older ones read to you.)
2. Teachers should read to children at least 4-5x per day for full-day kids. If we don't, who will? They go home, eat dinner, go to sleep. This is how children develop a love of books, literature, and learning. Especially helpful for English language learners to gain new vocabulary.
3. Start normal conversations. "My son is coming over tonight. What should I make for dinner?" Go through the conversation with kids. Listen to their suggestions, talk about what we would need to buy to cook those things.
4. "Raising a Reader" Program = send home a red tote bag with books and an activity every week. Is in the majority of the public schools in elementary school.
5. Idea: can have a mom come every Wednesday to read books from the library to each classroom. Kids get so excited about the "book lady" coming!
6. Jokes and riddles hold kids' attention

J. Pre-K guidelines

1. Literacy begins in infancy
2. Have a print-rich environment (children's names, labels on shelves)

3. Literacy program for 4-year-olds
4. City of Santa Clara asks parents to read to their kids. A lot of parents don't speak English, so they said okay, read in your own language. It turns out a lot of them are not literate in their own language. We have funding for second-language learning children, but no funding to help their parents learn English. This is a huge problem for parents who want to support their children's learning! These kids are at high risk for moving through school without learning to read well. Suggestion is to still have the child sit on your lap, turn the pages together, and talk about what you see in the pictures.

K. The course of language comprehension

1. Birth = responds and attends to voice (at this time, make sure children can hear you properly, now are testing this in the birthing room in the hospital, because if they can't hear language, they won't learn to produce it.)
2. 3-4 months old = vocalizes/babbles
3. 5-6 months = knows angry vs. friendly voice
4. 9 months = understands bye-bye gesture and words
5. 10-12 months = simple commands (Ask them to show you their nose, they can point to their nose.)
6. 16-20 months = "No!"
7. 18 months = questions, why?
8. 19-23 months = names of pictures "dog"
9. 20-21 months = repeats whatever you say
10. 23-25 months = knows two prepositions (in, under, on, etc...)

VI. Textbook Chapter 9: Language & Communication Problems

A. Sensory requirements for language

1. Hearing is important
2. It helps if they can see so they learn the nonverbal eye contact parts of conversations, and so they can see what you're pointing to when you're naming things in the environment.

B. Hearing impairment

1. Can be partial or completely deaf.
2. Problem with ear infections before 12 months of age.
 - a) When a child has an ear infection, there is fluid behind the ear drum, so they can't hear all the sounds of words properly. If they can't hear it, they can't produce it later right.
 - b) We give them antibiotics for ear infections, but it often takes 2-3 rounds before it cures the infection because we have tolerance from all the antibiotics in our food.
 - c) If a child has 3 ear infections, that's at least 2-3 months out of the year they can't hear you properly. A lot of children with ear infections end up with language delays because of this.
 - d) Surgery to put tubes in the ears = poke a little hole in the ear drum, put a tube in so the fluid can drain and infection doesn't fester back there.
Important because chronic infections in the inner ear can spread infection to the brain or nose/throat/other parts in there.
3. Often children who are completely deaf are born that way. Other times, children can lose some or all of their hearing due to infection, injury, etc. (Can be from poking things too far into ears, rupturing ear drums.)

4. Hearing aids
 - a) In the old days, it was a big bulky thing in the ear, with a wire coming to a big box in the pocket. Now they're so small they're nearly invisible.
 - b) Help if they have some residual hearing in one ear or both ears. Useless if they're totally deaf.
 - c) Can use an "FM system" where the teacher wears a microphone around her neck and it transmits directly to the hearing aids.
 - d) Problem: when the batteries run low, the hearing aid squeaks in their ear. Annoying! Often they turn it off instead of telling you it needs a new battery. Just like wearing glasses, hearing aids can be uncomfortable for kids, they don't want to wear it.
5. Cochlear implant is different from a hearing aid.
 - a) Cochlear implant is surgically implanted, suddenly able to hear great!
 - b) Doesn't go into the brain. Goes just under the skin in the right part of the head to send signals to the brain.
6. Children with autism have language and social problems because these things to together.
 - a) If you don't have enough language, you separate from other people because you don't know how to interact.
 - b) If you don't interact with people enough, you won't pick up language. It's a vicious cycle.
 - c) The first step is to help them with the language. Once they have some language, you can introduce one friend. Then add more children gradually while social skills build.
 - d) It's essential that teachers find a way to communicate with every child. One child Aime had couldn't stand to make eye contact, so she would stand next to him and touch their heads, check to check/ear to ear, and

Speak. He began making sounds that way. Learn your individual child and learn what works: eye contact or not, touch or not, etc. Always connect to the parents for guidance; they know their child the best.

7. Different causes of hearing disorders

- a) Problems with outer ear shape
- b) Problems with the ear drum or bones that conduct the sound in inner ear
- c) Problems with the nerves required for sound signals to reach the brain
- d) May be a combination of these

C. Language problems are one of the most common special needs now.

D. Speech disorders

1. Articulation problems = not making sounds properly
2. Stuttering = stuck on one sound, repeat it "M m m m m mom said..." Worse when they're nervous, so helps if we relax and wait for them to get it out. Don't rush them or finish the sentence for them. That's disrespectful! (Same is true for second language learners, whether or not they're stuttering.)
3. Voice = problems with volume (always yelling or whispering), or very nasal voice
4. Ways for teachers to help
 - a) Read the body language, look at the child, look at the context of whatever's going on, see what they need
 - b) Use gestures, help them learn to gesture and learn to find other words if people aren't understanding the words they're using
 - c) Listen, give them time to get it out, then check to see if you understood right. "You want to go outside, right?"

VII. Video: *There's a new kid in school: She's bright, talks a lot, listens... and she's deaf.*

- A. Krista was born deaf. Uses hearing aids, learned to speak. Now goes to mainstream school.
- B. Lila was diagnosed with profound hearing loss. Couldn't hear or speak.
1. Hard for parents to find out: she won't have a first word, won't say "mama" or "dada"
 2. Now uses a cochlear implant, speaks well, goes to mainstream school. Tests about the middle of her class.
 3. Family set a goal of mainstreaming by kindergarten, because life is mainstreamed!
 4. Most successful mainstreaming happens when parents look at mainstreaming from the beginning and advocate for it. Parents understand they don't just drop the child off on the doorstep; parents are full partners.
 5. Got cochlear implant at 18 months. Long process of speech therapy to learn to speak after that. Age 3.5-5, huge progress.
 6. Works harder than the average kindergartener, but she plays after school with the other kids, has made tons of friends, many of the friends don't know she's deaf because her language is so strong.
- C. Christopher
1. Was premature, had other medical issues when he was little, couldn't hold his head up
 2. Got cochlear implant at 16 months. Then several more years of specialized oral and deaf education to learn to speak. Now speaks pretty well.
 3. This year (age 6) is transitioning from self-contained classroom at oral deaf school to mainstream kindergarten. Parents' question: if we do it too early and it doesn't work out, will it break his confidence and defeat the purpose? Was hard to decide to do that, but has been very successful.

4. Interacts equally with hearing peers on the playground.
5. Parents were told not to expect much of him when he was a baby. Message of his story is "Never underestimate a child." Love them, believe in them, give them the resources, and magical things will happen.

D. Andre

1. Severe-profound deafness, uses hearing aids.
2. Mainstreamed since kindergarten, now in second grade, doing well.
3. Teacher uses an FM system to amplify sound for him.
4. Successful example of transition model. Not just one student with one staff member; transitioned whole family with whole school.
 - a) Got administrators and specialists and teachers involved.
 - b) Wanted to make sure he wouldn't be overwhelmed by amount of noise, or number of people he'd encounter.
5. Lots of sports and friends, very social now.
6. Message to parents getting ready to mainstream: "Be brave. Challenge your fears." Even if you're tired, give it that little push and try it.