



USING SIGNING TIME[®]
WITH CHILDREN IN SPEECH
AND LANGUAGE THERAPY



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USING SIGN LANGUAGE IN EARLY CHILDHOOD SETTINGS

Using American Sign Language (ASL) in speech and language therapy can open up the world of communication for a child. In this guide you will learn:

- **What is a Speech and Language Pathologist?**
- **What is a speech and language disorder?**
- **Common challenges for children with speech and language disorders**
- **How signing helps children with speech and language disorders**
- **Signing Time resources for therapists**
- **Helping parents support therapy at home**

WHAT IS A SPEECH AND LANGUAGE PATHOLOGIST (SLP) OR SPEECH THERAPIST?

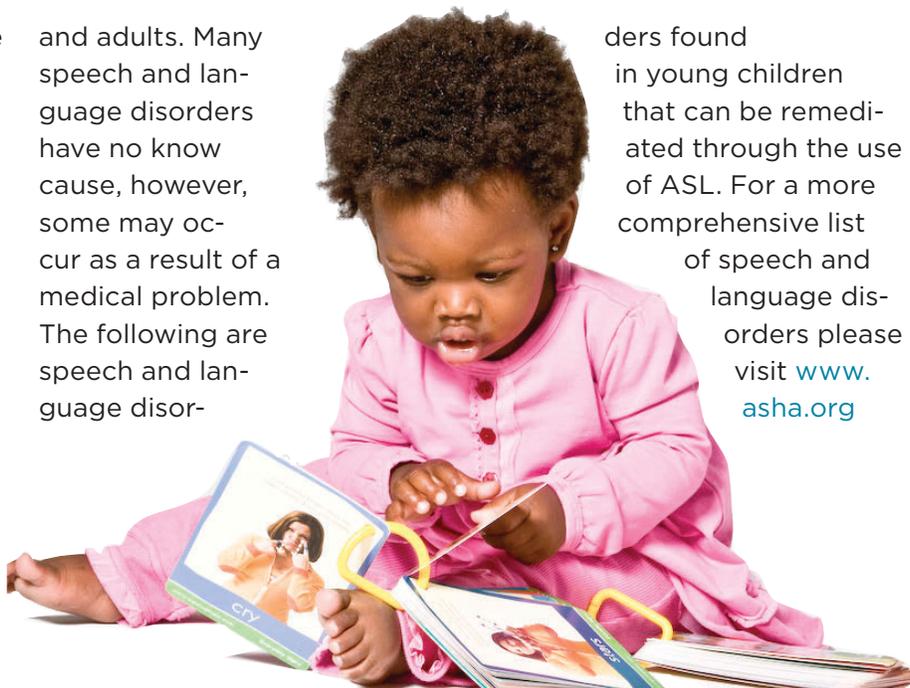
According to the American Speech, Language and Hearing Association, “Professionals who are educated to assess speech and language development and treat speech and language disorders are called speech-language pathologists (sometimes informally referred to as speech therapists).”

WHAT IS A SPEECH AND LANGUAGE DISORDER?

If a person is unable to produce speech sounds correctly, has difficulty with fluency, or has problems with his voice, he has a speech disorder. If a person has difficulty understanding others, sharing thoughts ideas, and feelings, then he has a language disorder. Speech and language disorders can be found in both children

and adults. Many speech and language disorders have no known cause, however, some may occur as a result of a medical problem. The following are speech and language disorders found

in young children that can be remediated through the use of ASL. For a more comprehensive list of speech and language disorders please visit www.asha.org





COMMON CHALLENGES FOR CHILDREN WITH SPEECH AND LANGUAGE DISORDERS

Children with speech and language disorders have difficulty communicating their wants and needs, which leads to high levels of frustration. Children become frustrated when they can't be understood. Parents get frustrated when they cannot decipher the message and meet their child's needs. Often, the parent starts to play the "guessing game" checking the diaper, offering food or milk, finding a favorite toy or comfort item. When parents can't pinpoint the problem, frustration increases even more, causing the parent or the child to simply give up. This scenario, if repeated often enough, could negatively affect a child's self-esteem and confidence.



Speech and Language Disorders Found in Children

Speech Disorders

difficulties producing sounds correctly or fluently

Childhood Apraxia of Speech (CAS)

A motor speech disorder affecting the ability to sequence sounds, syllables, and words.

Articulation Disorder

A speech disorder affecting the ability to make sounds correctly.

Phonological Process Disorder

A speech disorder affecting the ability to produce patterns or groups of sounds correctly.

Stuttering

A speech disorder affecting the ability to produce speech fluently.

Language Disorders

difficulties with age-appropriate communication, reading, spelling and/or writing

Expressive Language Disorders

A language disorder affecting the ability to communicate thoughts verbally and in writing.

Receptive Language Disorders

A language disorder affecting the ability to understand spoken and written language and the ability to organize thoughts. It often co-exists with an Expressive Language Disorder.

Central Auditory Processing Disorder (CAPD)

A language disorder affecting the ability to understand and process auditory information.

Medical and Developmental Disorders

difficulties with speech and/or communication secondary to a medical condition or disorder

Cleft Palate

A medical disorder affecting the hard and/or soft palate that may be repairable surgically. Children with Cleft Palate are commonly diagnosed with Speech Disorders.

Autism

A developmental disability affecting several areas: communication, social skills and reacting to the world around them. Children with Autism commonly diagnosed with both Speech and Language Disorders.

Down Syndrome

A genetic disorder affecting intellectual and physical growth, resulting in varying degrees of communication delays. Children with Down Syndrome are commonly diagnosed with both Speech and Language Disorders.



HOW SIGNING HELPS CHILDREN WITH SPEECH AND LANGUAGE DISORDERS

Often the goal of therapy is to improve a child's overall ability to communicate through functional communication strategies. Functional communication is a "by any means necessary" approach which does not limit a child to using verbal communication. It allows children to get their messages across using spoken words, printed words, gestures or pictures on a communication device. The use of ASL as a functional communication strategy has grown in popularity in recent years because both parents and professionals appreciate the convenience it affords. With signs, there is no communication device or book to tote, no charging or replacing batteries, no forgetting it at home. Your hands are always with you!

In addition to providing a convenient form of functional communication, signing helps children with speech and language disorders improve both their receptive and expressive language skills:

Receptive Language

Signing contributes to the development of receptive language skills - the ability to understand what is being communicated. For children with receptive language disorders, parents and therapists

must help children connect the printed words, spoken words, signs and pictures with their meanings.

Children learn best when their senses are engaged, by *doing* and experiencing life. By adding ASL to a child's communication options, you are giving them the opportunity to hear the word (when spoken), see the word (on both the lips and hands) and "do" the word by signing it. This multi-sensory form of communication helps children acquire vocabulary more quickly and efficiently.

Expressive Language

Signing is also useful for helping children develop expressive language- the ability to effectively communicate thoughts and feelings to others. It is especially helpful for children who have good receptive language skills and can formulate their thoughts, but lack the oral skills to speak clearly. A child may choose to only use signs, or may mix signs and spoken words to form their first phrases. With signs, children can overcome barriers to spoken language and successfully communicate. This success gives them a sense of empowerment, which can lead to increased self-esteem and confidence.

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Speech and Language Bundle
SigningTime.com/speech-language



HOW TO USE SIGNING IN SPEECH AND LANGUAGE THERAPY

Using ASL signs is an extremely useful tool and will help your speech and language therapy sessions go from good to GREAT! Here are some specific tips for using ASL signs with children who have speech disorders, language disorders and medical/developmental disorders:

Speech Disorders

Use signs as a visual prompt to elicit spoken responses.

Teaching the ASL vocabulary to go along with your target words will help you to illicit “spontaneous” responses when no verbal imitation is present. For example, during a therapy session in which final /k/ at the word level is the target, the therapist can begin the session with a vocabulary lesson in which all of the signs for the target words are introduced. As the session(s) continue and the child begins feeling comfortable with the signed vocabulary, the therapist can use the sign instead of the spoken word to illicit the target words from the child. As the sessions progress and move to phrase- or sentence-level work, the therapist can use a sign to illicit a “spontaneous” verbal response. Suppose a therapist wants a child to say the sentence “I see a book” aloud. She can say, “I

see a...” and then make the sign for BOOK, allowing her to elicit the target word without saying it aloud. Carrier phrases and whole sentences could also be signed as a prompt to elicit verbal responses in therapy.

Use signs to help with fluency.

Signing may help a child overcome dysfluency – the repetition of sounds and/or pauses between words. During a structured conversation, specific words that cause dysfluency in the child’s speech can be targeted. The therapist can then teach the signs for these words. Secondary movement often helps a child through a dysfluency, so it may be useful for the child and/or therapist to sign that word when it occurs in the structured conversation.

Use signs to reinforce wanted behavior.

Therapists can teach children signs such as GREAT JOB, WONDERFUL, YES, TRY AGAIN, AWESOME, GOOD WORK and use them to praise, reward or encourage a child when working in a class room, small group or individual setting. This highly-visual, non-verbal form of praise is fun and exciting, and can help a therapist keep a child engaged, motivated and focused during the session.

Use letter signs as a visual cue for speech sounds.

Therapists can teach children the manual alphabet. When working with specific sounds or multiple sounds, use the manual alphabet as a visual cue to help children remember each sound and produce it correctly.

Language Disorders

Use signs to help build vocabulary.

Teach signs that go along with your lesson/activity themes to teach and reinforce the meanings of target words. As we mentioned earlier, using signs and words together creates a multi-sensory experience for children that facilitates learning. In addition, ASL signs are often iconic, meaning that the hand shapes and/or movements of signs physically represent distinguishing features of the objects or concepts they represent. For example, the sign for GIRAFFE involves moving the hand up the neck. This sign helps children learn how giraffes are different from other animals by pointing out the physical feature that makes it unique – its long neck!

Use signs to clarify messages.

Signs can be used to clarify your verbal statements, or they can be used to help clarify the child’s messages. If a child has



HOW TO USE SIGNING IN SPEECH AND LANGUAGE THERAPY

word-finding issues or is learning to use new groups of words, provide him with the sign for the target vocabulary so that when the word is required of him, he is still able to communicate.

Use signs to help a child learn to say a word.

Oftentimes signing facilitates the development of verbal communication. When a child learns to sign a word, he or she is more likely to learn to say that word. So teach the signs for target words in your therapy sessions and encourage children to use the sign and its corresponding spoken word together whenever possible.

Use signs to help a child feel empowered.

Oftentimes a child with a language disorder is limited to no spoken words or vocabulary. Using ASL signs is a quick way for him to gain vocabulary and control of his world. Teach the signs for frequently-used words such as EAT, MORE, ALL DONE, YES, NO, HELP, PLEASE, THANK YOU, WANT and SLEEP. Using these basic signs in his everyday communication will allow the child to more easily communicate – and connect – with the people he loves.

Medical and Developmental Disorders

Use signs to both facilitate speech production as well as two-way communication.

Research shows that using ASL as a part of the therapy process can provide benefits for children with a variety of diagnoses. Read these online articles for more information about using signs in therapy sessions with children who have:

Apraxia of Speech

Using Sign Language With Children Who Have Apraxia of Speech by Sharon Gretz, M.Ed.
<http://bit.ly/apraxia-kids>

Down Syndrome

The Use of Signs by Children with Down Syndrome by Marita R. Hopmann, Ph.D.
<http://www.csdsa.org/artsigns.asp>

Teaching Sign Language by Claire Donovan, S-LP(C)
<http://www.csdsa.org/arttsl.asp>

Using Signing Time with Children who have Down Syndrome by Annie Young, M.Ed. and Colleen Brunetti, M.Ed.
<http://www.signingtime.com/down-syndrome>

Autism

Signed Speech or Simultaneous Communication

by Stephen M. Edelson, Ph.D.
<http://legacy.autism.com/families/therapy/sign.htm>

Using Signing Time with Individuals on the Autism Spectrum by Kimberly Fries MA, CC –SLP and Brenda Gardner-Jones MA, ECSE /Autism

<http://www.signingtime.com/autism>





SIGNING TIME RESOURCES FOR THERAPISTS

Signing Time programs and products have been developed for children of all abilities and can be used in a variety of ways to support your therapy goals.

Activities for Therapy

The Signing Time Classroom Edition has 16 units packed with themed activities for children from preschool to age 8. These fun activities help children learn signs and word meanings together in a fun and interactive way and are ideal for use in therapy. The Classroom Edition comes with a set of DVDs and music CDs to support the curriculum. For more information, visit <http://www.signingtime.com/classroom-edition>

Products for Therapy

Children learn best when they are engaged in multi-sensory learning. The Signing Time product line includes DVDs for your visual learners, music CDs for your auditory learners and books and flash cards for your hands-on learners. For more information on products, visit <http://www.signingtime.com>

HELPING PARENTS SUPPORT THERAPY AT HOME

A 30-60 minute therapy session once or twice a week can only take a child so far. Parents or caregivers need to be carrying over activities that support therapy goals at home. The carryover process is critical

to the success of any therapy. Parents want to do “something” to support their child’s development, but they often don’t feel qualified to do therapy-related activities at home. Signing Time materials are fun for children

and easy for parents to use – and they give parents familiar tools (books, DVDs, CDs and flashcards) that they can use to help their child gain functional communication skills.



Download progress charts from <http://www.signingtime.com/resources/support/>

Use the Signing Time Progress Charts to identify Signing Time products that feature the signs for specific target words – see link below. Parents can purchase these products at www.signingtime.com. If you are working with parents with limited income, ask your local library to order the products they need or create a lending library for your practice.



WHAT IS SIGNING TIME?

Signing Time is a family of products (DVDs, Music CDs, books, and flashcards) that teach American Sign Language (ASL) vocabulary. Signing Time products are created for children from infancy through age 8, but appeal to all ages and abilities. Signing Time DVDs feature children and adults who model each sign, original music, real-life scenes, and animated segments. The combination of visual, auditory, and kinesthetic teaching results in an effective, multi-sensory approach to learning. Each DVD in Series 1 teaches approximately 25-30 signs.

At the time of this publication, there are 34 DVDs available for purchase. The co-creator and host of Signing Time is Rachel Coleman, who is a mother to two girls: Leah, who is deaf, and Lucy, who has cerebral palsy and spina bifida. Rachel and her husband Aaron began signing with Leah when she was diagnosed as profoundly deaf at 14 months old.

Prior to learning that Leah was deaf, Rachel was a singer and songwriter. She has personally written all the songs in the Signing Time series and her fascinating life story has been featured in numerous national publications and media programs, including NBC's TODAY show.

Signing Time appeared on public television stations from 2006-2009, for which Rachel received an Emmy® nomination for the category entitled "Outstanding Performer in a Children's Series." Coleman co-created the series with her sister, Emilie Brown, who is the mother of two boys, Alex, and Zachary. (Cousins Alex and Leah are both featured in Signing Time along with Rachel.)

As the host of Signing Time, Rachel teaches each sign and then uses the signs in an original song, featuring video clips of infants, toddlers, young children and parents who sign the targeted words in a real-life context. The added visual component of the printed vocabulary word, along with an illustration, increases retention and comprehension of the new word and its sign. Verbal vocabulary often increases as ASL vocabulary increases.



The key mission of Signing Time is to make basic sign language simple and engaging, not only for the child, but for everyone in that child's life.



SUCCESS STORIES

We adopted our son from China at 18 months and he had never been exposed to English. We were told that he had a speech and language delay in Mandarin. He had lived in an orphanage for his entire life. Initially, the language barrier made it difficult for us to meet all of his needs. We began weekly speech and language sessions. He has a severe to moderate speech delay with the possibility of Apraxia and Velopharyngeal Insufficiency. At the suggestion of our speech and language therapist, we started signing, which ended up being the perfect vehicle for our son to communicate. Our son is not a fan of television, but we thought we would try the Baby Signing Time videos. He loves the videos and asks for them regularly. He will practice along with the video and has even taught us a couple of signs! Our family being able to communicate alleviated the frustration he had when he knew what he wanted but couldn't tell us. The best part about the signing is that it accelerated his language skills. After just a few months of our family signing, our son is understanding and speaking nearly as well as his same age peers. I recommend Baby Signing Time to any parent because I know how much it helped us.

Angela Ludlum, Washington IL

My son was born with all kinds of issues (craniosynostosis, low muscle tone, heart valve problems, sensory issues, endocrine abnormalities among others). He has global developmental delays, echolalia, and we were encouraged not to sign with him, but to use a PECS board instead. In August of 2009, he

I honestly couldn't believe my eyes. I looked at my daughter and asked what she was doing. "I'm learning from Rachel," she explained, "and then I'm teaching Juju."

Carissa Martos, Portland, OR

wasn't able to initiate any words, could only copy three spoken words, and had no signs. He was 18 months old, and we hadn't made any progress with him (although we'd been signing a bit with him at home under the guidance of my mother, an SLP in California). That's when there began to be concerns that he might not ever speak, possibly due to damage to his brain either in utero or during surgery.

We had just moved to Oregon, and the first SLP we "officially" took him to was the one who told us to use a PECS board because of his low muscle tone. She said he wouldn't be able to form coherent signs, and besides that, we wouldn't want to learn a whole new language.

My husband and I looked at each other in disbelief. Yes, we would, if it meant giving a whole language to our son.

When we got home, I had a care package in the mail from a friend (Christine Fitzgerald, a Signing Time Academy Instructor). Inside, among other things, were 3 DVDs, Signing Time volumes 1, 2 and 3. I tossed them on a bookshelf and ignored them. When I finally called her to thank her for the box, she asked if I was using them yet. I reminded her that I didn't watch TV myself, and had kept my daughter from it until she was 2, and even after that, had only allowed a little of kid's TV in Spanish.

"Try them," she encouraged, "you'll like them. Besides, if nothing else, your daughter may start signing again." Like many parents of hearing kids who teach their children to sign, I'd taught her some words, a good 30 or 40, if I remember correctly, but they'd died out once she'd started talking. At Christine's urging, and because I was having to unpack the whole big house by myself, I put in one of the DVDs.



Less than a week later I was watching my kids play one of their favorite games. My daughter will stand at the top of the stairs and throw a ball down. My son will scramble down after it, and then laboriously carry it back up, to present it to her with pride. She smiles, and tosses it back down the stairs. Sort of sibling-fetch. Anyway, when Julian reached the top and handed her the ball, my daughter set it down and grabbed his hands, making him pat the ball. "Ball," she said. "It's just like you're patting a ball." Then she let go of him and signed it to him again, and kicked the ball down the stairs. The next time he brought the ball up, he plopped it in my lap, and signed BALL.

I honestly couldn't believe my eyes. I looked at my daughter and asked what she was doing. "I'm learning from Rachel," she explained, "and then I'm teaching Juju." Needless to say, I went in to watch the DVDs with them. The boy who had refused to sign with me, his grandmother or his father exploded into sign, learning nearly all the ones on the three DVDs in two months. We found a new SLP who was willing to work with his sign, not against it, and we progressed.

About three months after his first sign, he was banging on the fridge, signing MILK. I was ignoring him, because I was unpacking. Then I heard his voice, not echoing what I'd said, "Hang on, it'll be a second, but something altogether new.

"Che-che." My husband and I had been doing basic nouns in Spanish with him since birth, not knowing about the communication disorder, and so we'd continued reading to him the little Spanish books, and talking to his sister using the limited vocabulary I had. There stood my son, holding out his milk cup in one hand, signing MILK in the other, and trying to say "leche." That's how he's accessed language so far. Any spoken word he has, be it a color, the dog, food, yogurt, banana, doctor.... any concept he understands and has a spoken word for, he had an ASL sign for long ago. Most of the time he retains the sign, sometimes, like with "no" he's stopped signing it, but the learning all started with Signing Time and our belief that he could, indeed, make the signs he needed. His first spoken 3 word sentence was "That a Rachel!" when he saw one of our posters for the Seattle concert.

Now, at dinner, when he can ask for PIZZA MORE PLEASE, TEA ORANGE MORE PLEASE, I'm a happy mama, even if the only spoken word I get out of all of that is tea. His ASL grammar also improves as I take accelerated classes and come home and work with him, my husband and my daughter, so that this isn't something we lose. I went from earning my MAT to teach middle school language arts and social studies to getting my ASL interpreters license, all

because there was someone out there who believed that signing really was for all children of *all* abilities. A year later, he has easily two dozen spoken words, almost 100 signs, and can sing songs, too.

Carissa Martos, Portland OR

ABOUT THE AUTHORS

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