

## Session One, Part I: Introduction to Early Literacy

Web course on Early Literacy for WSDS

Spring 2012

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Resources for content:

*On the Way to Literacy, 2<sup>nd</sup> ed., APH*

*Project EDIN, Chapel Hill, NC*

*Project VIISA training materials*



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### Contact Information, Readings and Assignment

#### Readings to do before February class

- Chapters 1-2 in *On the Way to Literacy* from APH
- The following on Project EDIN website: [www.fpg.unc.edu/~edin/](http://www.fpg.unc.edu/~edin/) select "Resources", then Communication and Emergent Literacy module, then select Session 1, scroll down to Session Content and read the Major Points section; you may wish to look at some of the readings under handouts—excellent articles
- Look over the major points article in sessions 2 and 3 as well; handout B in Session 2 is very helpful; handout I on Echolalia is excellent

#### Assignment due by the February class

- Choose **one** of the three emailed to you to do; email to Bess for feedback and she will email it back
  - Activity A: Case Story About Child with Prelinguistic Communication
  - Activity B: Encouraging Communication in Daily Routines
  - Activity E: Case Story, Johanna

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### Literacy

- The ability to read, write, and understand written language
- Involves connecting written words to meaning
- Requires understanding of spoken language and how it is represented using written symbols, print or braille
- Reading formats include print, large type, and braille.
- Writing includes handwriting, braille, and/or the use of a computer, word processor, or other assistive technology to produce written language.



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## What is Early or Emergent Literacy?

- Period from birth to when child begins to learn to read/write
- Knowledge, skills and attitudes built during this time that lead to reading and writing
- May extend to kindergarten/first grade; not defined by age
- Some children with severe disabilities may:
  - > learn to read/write much later
  - > learn to read key words in daily activities (e.g., read a shopping list, daily schedule, menu)
- We may not know how far a child will travel along the road to literacy
- All children can make progress and benefit from positive expectations and support of parents and teachers

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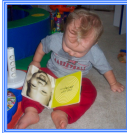
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## When Does Literacy Begin?

- It begins at birth and includes the settings and experiences that encourage literacy
- Emerges as the child learns about language, written and spoken
- Experiences help the young child understand the world around them and give meaning to words they learn
- Literacy is nurtured by adults who model reading and writing and involve the child in using written language (print or braille) for many purposes in positive ways
- Gradually, the child begins to imitate the reading and writing of those around them
- They learn about sounds in words and their relationship to letters as they bridge to reading and writing



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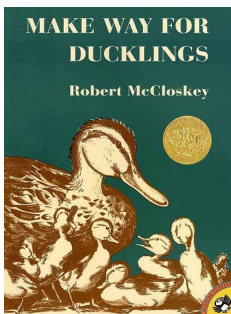
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## Our Early Memories of Literacy Experiences



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## Differences for the Visually Impaired

- Must learn through first hand experiences since learning by visual observation is more limited
- Must learn by touch and use hands for literacy
- Must explore and use all senses for learning
- Child with low vision must learn to use it along with accommodations (lighting, material that is highly visible with good contrast, magnification)
- Some children will need skills for reading through both touch and vision (braille and print); literacy medium may not be obvious at first
- Children with significant challenges may need to use a different symbol communication system (visual or tactile) so that they can make choices, express needs, and share information about daily activities and routines

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## Challenges

- Visual impairments may prevent young children from experiencing the same richness of emergent literacy activities that sighted children experience
- They may not have:
  - incidental exposure to literacy events (e.g., observing caregivers in daily activities such as opening the mail, making a grocery list)
  - opportunities to observe print or braille
  - access to appropriate literacy artifacts such as braille books, braille writers
- Caregivers may not know how to provide meaningful early literacy experiences that are less visually based



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## Development That Undergirds Literacy

- *Communication and Language*-ability to understand others and to let them know your needs and desires
- *Attachment and Social*- trusting and meaningful relationships motivate a child to want to be with and learn from others
- *Concepts*-understandings, formed through experience, that give meaning to communication or language
- *Tactile skills*-the ability to learn through touch; identify, discriminate, match, sort, follow a line of braille, etc.
- *Visual skills*-the ability to learn through vision; to fix, follow, identify, imitate, discriminate, match, sort, etc.
- *Fine Motor skills*-the ability to manipulate objects, finger dexterity and strength, use hands as tools to complete tasks
- *Knowledge about written language*-awareness of how and why it is used and valued; tools used to create it; and knowledge about its rules, including letters and their sounds

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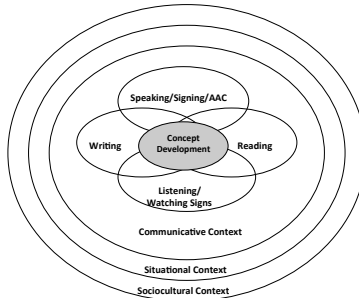
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## A Contextual Perspective of Communication and Literacy



Adapted from Koppenhaver, D.A., Pierce, P.L., Steelman, J.D., & Yoder, D.E. (1994). Contexts of early literacy intervention for children with developmental disabilities. In M.E. Fey, J. Windsor, & S.F. Warren (Eds.), *Language intervention in the early school years* (pp. 241-274). Baltimore: Paul H. Brookes. Used with permission.

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## A Contextual Perspective

- The four interrelated modes of communication,
  - Listening/watching signs
  - Reading
  - Writing
  - Speaking/signing/using AAC devices, depend heavily on concept development
- Three contexts influence communication development:
  - Communicative context-linguistic and nonlinguistic interactions among children and adults
  - Situational context-physical characteristics of children's living and learning environments
  - Sociocultural context-societal and cultural values, expectations, beliefs, and resources




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## Case Story: Viridiana

Maria smiles as she browns the hamburger in the skillet in preparation for her family's dinner. Juanita, Maria's mother-in-law, is taking the rest of the dinner ingredients out of the refrigerator and the pantry. Roberto, Maria's husband, has just arrived home from his job at the university and is playing with their four children in the living room. The three older children have abandoned their homework to climb on their father on the floor, laughing and screaming as they play. Maria and Roberto's youngest child, Viridiana, is sitting against the couch tilting her head and watching the activity. The children's homework is lying next to Viridiana.

Roberto crawls across the floor toward Viridiana with his 6-year-old son still clinging to his back. "Viridiana, Viridiana," Roberto calls in a teasing voice, "I'm coming to get you." Viridiana smiles and giggles. Roberto reaches his daughter and begins to tickle her belly. Viridiana laughs and squirms, then reaches out to her father. Roberto picks Viridiana up and tosses her into the air. "That's my big girl. Did you have a good day today?" Leaning very close to her father's face, Viridiana reaches out her right hand and strokes her father's mustache. "Down you go," he says as he plops her onto the couch. Viridiana rolls to the edge of the couch and slides carefully to the floor. She crawls toward her brothers and sisters, who are all talking at once as they tell Roberto about their day. Viridiana's 9-year-old sister picks her up and cuddles her gently as they all move toward the kitchen for dinner.

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## Language and Literacy

- The young child learns to communicate first with cries and gestures, and later using words
- Responding to these early attempts nurtures early language
- The child learns language by talking to caregivers who know her and can interpret her early words
- As the child grows older, conversations with adults helps her form more complex sentences and learn new words
- Vocabulary built in these early years helps her find meaning in words she reads
- During these early years, she also sharpens her ability to hear sounds within words
- Noticing rhyming words and words that begin with the same sounds shows she is developing phonemic awareness
- When she begins to read, this awareness helps her link sounds to written letters



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## Early Attachment

- Disabilities can influence both the parents and the child as social/communication partners:
  - Parents may be depressed or experiencing grief
  - Infants' cues may be subtle and difficult to interpret
  - Extended and repeated hospitalizations due to medical issues further isolate parent and child from each other
- Infant temperament style that differs greatly from the caregiver can make attachment more of a challenge
- Reciprocal communication requires interaction; therefore, communication delays may be associated with delays in social development

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## Vision Impairment and Attachment

- Children with visual impairments may not give the caregiver eye contact or turn to their voice
- They develop compensatory skills, such as quieting to listen intently, that serve functions that vision serves for sighted children
- Parents may interpret lack of eye contact, head turn and "attentive stillness" as unresponsiveness and may think that the child is not interested in interacting with them
- Consequently, parents may be unsure of how to interact with their children with visual impairments



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## Concept Development

- Without an understanding of their world children cannot develop their abilities to communicate and to engage in literacy events
- Children with visual impairments may have difficulty developing concepts involving
  - Body awareness and body image
  - Objects, people, activities, space, distance, etc.
  - Comparisons and classification
- They need planned experiences guided by an adult (e.g., plant a seed and examine it at different growth stages)
- Networks of related concepts are very important
- They need to explore the environment freely and safely
- They need to touch, hear, taste and smell things as they are named and described as well as experienced



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## Skills for Learning Through Touch

- Strong skillful hands and the ability to use them in a purposeful way are important for learning as well as reading and writing
- The child who is blind will need to learn how to use hands:
  - Together as well as separately
  - To explore objects, books, braille, tactile symbols and braille writing tools
  - Notice small differences in texture, temperature, shape of objects and later in braille words and letters
  - To explore in an organized way, using the best strategy in each situation
  - To fit together pieces of information to form a more complete "picture" of things
- Unlike vision, touch cannot provide information about things at a distance or whole objects unless they fit in the hand



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## Knowledge About Written Language

- Children with vision impairments are not able to see all the print that surrounds them or to easily observe family members engage in reading and writing activities
- They need:
  - To be actively involved when others are reading/writing
  - Opportunities to use written language in meaningful ways (e.g., make a shopping list for favorite foods) by braille scribbling or scribbling with bold crayons/markers
  - Opportunities to be read to and talk about stories
  - Exposure to books that contain both braille and large print
  - Exposure to books with bold, simple pictures as well as tactile pictures
  - Exposure to or the use of related objects with a given story



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## Children With Multiple Disabilities

- Children with multiple disabilities may face challenges in developing communication and literacy because of:
  - Frequent doctors' appointments
  - Feeding and nutrition concerns
  - Different sleeping schedules
  - Multiple medications
- Motor and cognitive delays can impede concept development
- They may be limited in their independent exploration, manipulation, and interaction with their environment
- Caregivers may not understand the child's communicative attempts, and thus may limit both communication and literacy opportunities



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## Role of the Teacher of Visually Impaired (TVI)

- Help families and other members of the early intervention team understand how visual impairments may affect attachment, communication, and emergent literacy
- Implement family-centered practices to provide effective early intervention
- Serve as a member of the early intervention team
- Complete specialized assessments such as functional vision assessments and developmentally appropriate learning media assessments
- Assist in planning and implementing interventions that fit into families' daily routines and that address their priorities through functional outcomes

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## Family-Centered Practices

- To provide effective early intervention, TVIs develop alliances with families and other professionals that:
  - Recognize family and child strengths
  - Promote family choice
  - Promote collaboration with families and other professionals while respecting and honoring diversity
- TVIs:
  - Help families understand that attachment, communication, language, and concept development form the foundation for emergent literacy
  - Collaborate with families to identify opportunities to facilitate development in all of these areas during daily routines and natural learning opportunities



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## Working With Teams

- TVIs provide expertise regarding the impact of visual impairments on communication and emergent literacy
- Speech-language pathologists provide important expertise regarding communication and language development
- TVIs work closely with eye care specialists to assess vision
- Physical therapists (PTs) and occupational therapists (OTs) may identify motor, positioning, and sensory needs and strategies that affect emergent literacy
- Part C requires that professionals from more than one discipline assess young children and develop the IFSP
- Early intervention team must collaborate with families to identify children's current level of functioning and goals for the IFSP
- Families direct the assessment of their resources, priorities, and concerns

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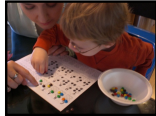
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## Critical Importance of Early Literacy

- Children who enter kindergarten with:
  - a limited vocabulary
  - little experience with conversation
  - inadequate concepts
  - limited exposure to written language... often remain behind throughout their school years
- Early literacy experiences are important for all children as it reaches beyond reading and writing
- Early literacy experiences:
  - help the child understand their world
  - offer opportunities to build knowledge and confidence
  - provide occasions for sharing fun



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## Communication

- *Communication*: the ability to meaningfully exchange ideas, thoughts, wants, and desires with others
- *Receptive communication*: the ability to understand someone else's ideas, thoughts, wants, and desires
- *Expressive communication*: the ability to share one's ideas, thoughts, wants, and desires

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## Nonlinguistic/Prelinguistic/Presymbolic Communication

- The use of facial expressions, gestures, and nonspeech vocalizations to support interactions
- Precedes the development of language
- Used throughout childhood and into adulthood
- All children communicate but not all children use language (linguistics) to communicate

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## Prelinguistic Communication and Social Development

- In infancy, nonlinguistic/prelinguistic communication and social development are closely related
- As children become increasingly competent at this level of communicative exchange, social interactions increase and become even more reinforcing
- Example: mothers who hum lullabies to their infants while rocking them to sleep promote attachment and provide a communicative model
- Research suggests that prelinguistic communication predicts later language



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## Seven Levels of Communication

**Level I: Preintentional** (pre-symbolic)  
 -reflexive or reactive behaviors that reflect a state of hunger, pain, comfort  
 -parent interprets the behavior

**Level II: Intentional** (pre-symbolic)  
 -infant operates directly on objects/people  
 -does not know they can control others  
 -parents interpret behaviors as communication  
 -infant does not establish eye contact with adult or wait for them to respond

**Level III: Unconventional** (pre-symbolic)  
 -body movements, actions, sounds used to get caregivers to continue a desired activity  
 -critical stage

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## Seven Levels of Communication, cont.

**Level IV: Conventional** (pre-symbolic)  
 -use of gaze, point, gestures and vocalizations  
 -acts on and orients to person or topic  
 -child without sight may not develop many of these behaviors

**Level V: Concrete Symbolic**  
 -use of symbolic gestures (bye, mine, pick me up)  
 -Tangible Symbols: object cues, picture cues  
 -symbols resemble the referent (sound, looks, touch)  
 -children with severe disabilities; stay here or transition from here



**Level VI: Abstract** (symbolic)  
 -speech, manual signs, print, braille  
 -uses these one at a time, not in combinations

**Level VII: Language**  
 -2-3 symbol combinations used according to grammatical rules and syntax

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## Communicative Function

### WHY INFANTS AND YOUNG CHILDREN COMMUNCIATE



Maintain contact with the world  
 Express emotion  
 Get attention  
 Accompany actions  
 Get permission



Get action or help  
 Greet  
 Request information  
 Answer or supply information




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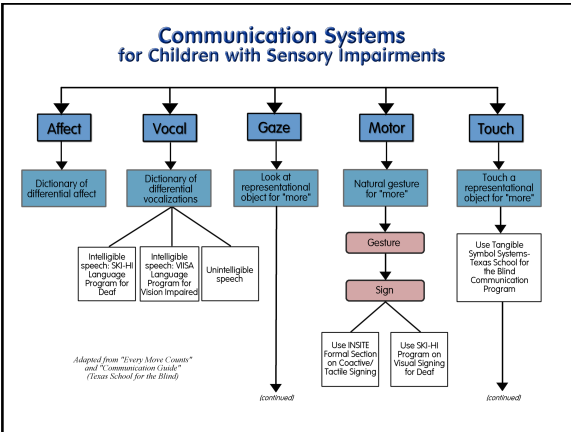
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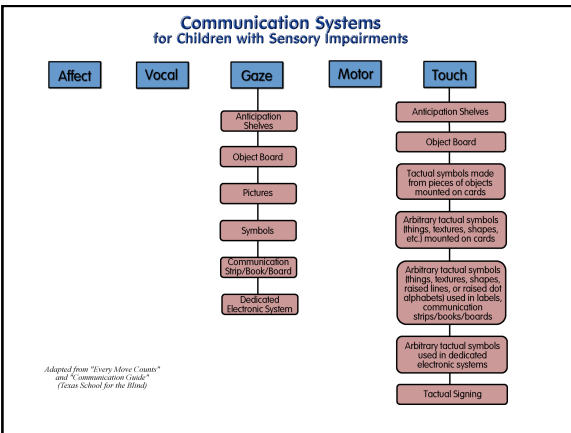
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### Impact of Vision Impairment on Early Communication

- Signals are more subtle, harder to read, often misinterpreted (more hand and body movements)
- Rapport and reciprocity is jeopardized by caregiver's feelings of loss and withdrawal from baby
- Caregiver's visual gaze and gestures may be of little value
- Infant smiles less; smile to voice may diminish with time
- Baby is still when attentive, opposite of sighted baby

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### Differences in Communication

- Some children with visual impairments display differences in their communication and communication development
- Any distinction between the development of children with visual impairments and that of typically developing children should be interpreted as differences, not as deficits

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### Impact of Added Motor Problems on Early Communication

- Abnormal tone, lack of coordinated muscle action and inability to maintain normal postures affect verbal and nonverbal patterns
- Communicative behaviors are not consistent; not easy to read intent
- Caregiver has difficulty interpreting the child's behaviors and responding to them appropriately
- Child often misses turn in interactions as caregiver does not wait long enough and is more verbally and physically directive or controlling
- Child may be less responsive, more compliant and dependent
- Child may be seen as younger, so is treated young longer

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### Children With Multiple Disabilities

- Children with multiple disabilities have delays in communication and language
- They may use systems including
  - Touch and movement cues
  - Tangible symbols (object or picture)
  - Augmentative communication devices (high- and low-tech),
  - Signing or hand-in-hand signing
  - Tactile Symbol systems

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## Keys to Facilitate Early Communication

### Predictability

Let baby know from experience  
how caregiver will respond



### Reciprocity

Back and forth interaction  
Requires trust in partner  
Based on predictability

### Consistency

Predictable feedback  
Intent is interpreted appropriately and consistently

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## IDENTIFYING CHILD'S EARLY COMMUNICATION SIGNALS

THE INFANT OR CHILD MAY:



Cry, use facial expressions, gaze



Touch and grasp



Reach and point



Use movements, gestures



Try to talk babble, vocalize



Quiet to listen

It is important to respond to these early communication signals!

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## RESPONDING TO YOUR CHILD'S COMMUNICATION

RESPOND TO YOUR CHILD'S SIGNALS!

1) Respond back with communication.



2) Interpret your child's signals and behaviors as accurately as possible. If you can't figure out your child's signals, act as if they have meaning and respond back.



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## Tune in to Likes and Dislikes

- Caregiver should fit their responses to the child
- Ask the following questions:
  - Is child very active or not?
  - Are sleeping and eating patterns regular or unpredictable?
  - Does child react quickly to stimuli such as loud noises or is he not easily startled or excited?
  - Does child accept or pull back from new situations and people?
  - Does child intensely express his moods or are these less obvious?
  - Is the child's mood usually positive or often not?
- Accepting the child for the individual he is allows the best relationship to develop with him

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## Caregiver Style

- Frequently interact with the young child
- Gently invite child to play and relate instead of giving commands
- Follow the child's lead, noting what interests him instead of imposing activities and toys
- Give encouragement and use a positive tone
- Talk often with the child about things that interest him, using nouns, descriptive words and connecting words to experiences



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## Communicating with a Young Child BVI

- Get the child up and moving about with you as much as possible (carry on your body)
- Make the environment "message friendly"
  - eliminate noise distractions like TV and radio
  - child needs to hear important auditory cues about who and what is happening around him
  - consider visual factors (lighting, glare, clutter)
  - reduce unpleasant textures or touch
  - adjust temperature
  - adjust uncomfortable position or one that takes effort to maintain in a social interaction
- Interact with child at when rested, alert and comfortable



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## Eye-Contact, Face-to-Face, Facial Expressions

- Even if the baby is blind, it is important to give eye-contact and face them when interacting as your voice projects more directly to them
- Get close and encourage the baby to touch your face and mouth as you talk to them
- Play kissing games on their hand
- If they have some vision, sit so that light from a window or lamp is highlighting your face
- If the caregiver's facial features provide little contrast, they may wish to wear more makeup to be more visible
- Smiling and using facial expressions with intonation make the voice more interesting to listen and attend to



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## Parentese

- Young children respond better to voice and speech that is:
  - slightly louder
  - slower
  - more distinct
  - higher in pitch
  - exaggerated in tone
  - that stretches words out, especially vowels
  - "You are suuuch a cuutie"
- Parentese sentences are short and place more emphasis on nouns
- Key words are often repeated, in slightly different sentences ("Here's your shoe...Let's put on your shoe.")
- Talking with a young child "primes the pump" for early language learning and promotes awareness of speech

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## Rhymes

- Young children tune in to rhythms in poetry, songs and rhymes more than to ordinary talk
- Familiar songs and rhymes offer a way to turn-take, listen, and repeat rhyming words, building phonological awareness (Pat-a-cake bakers man...as fast as you can)
- These provide awareness of the sounds that make up spoken language, from the syllables in words to the smallest units of sound called phonemes (Ted-dy bear)
- Clapping to rhymes/chants draws attention to syllables
- Let baby grasp finger and move his arms in rhythm with a song or chant; hold feet and help kick to the rhythm; rock, sway or gently bounce to the rhythm
- Make up songs or silly phrases with rhyming or same-sound words as you go about daily activities ("Eat your peas please!")

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**STEPS TO USE IN CUEING DURING ACTIVITIES AND INTERACTIONS**

- 1) Let your child know you are there.
 

Hi Andy, it's Daddy. I'm going to pet you up!
- 2) Let your child know who you are.
 

We're all done dancing. Mommy needs to go take a bath now. Play with your toys!
- 3) Let your child know what you are going to do.
 

Would you like to jump or dance?
- 4) Let your child be as independent as possible during the activity. Give him a choice as appropriate.
 

Let your child know what you are going to do.
- 5) Let your child know when the activity or interaction is over.
 

Let your child know when the activity or interaction is over.
- 6) Let your child know you are leaving.
 

Let your child know you are leaving.

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**Joint Attention**

- This is letting child know you are interested in the same thing they are interested in
- With sighted children, this is done by looking at what they are interested in, pointing to it, etc.
- With the child who is blind, this has to be done through touch; for example:
  - child is playing in water
  - caregiver places hand next to or under child's hand to let him know they are interested in the same thing
  - this can be used as a starting point for an interaction or conversation
  - as you explore together, give him words for what he is touching and experiencing; follow his lead
- Proximity to the child is very important

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**Turn-Taking**

- To encourage this, put words to what you think the child is noticing or feeling *at that moment* "You like to clap, don't you."
- **Wait** to see if he sends a message back
- His "turn" may be a sound, touch or movement
- Then it is your turn to do something that builds on his response
- Use sound and touch cues to signal that they take their turn; inflection in voice; a question
- Make sure you **pause** long enough
- Gradually build up to longer interactions that include more turns
- Many action games and rhymes are great to use in developing turn-taking games
- Watch for signs that the child has had enough of the "conversation" or needs a break; respect that

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### Word-like Sounds: Babbling

- First vocalizations may be “aah” and “oo”, and parents repeat the sounds back, playfully urging the child to imitate
- Soon, the infant adds consonant sounds to form sequences such as “bababa”, “dada”, “mama”, and again parents copy the sounds to encourage the infant to imitate
- Parents then change the sounds slightly and pause to encourage the infant to make new sounds, “wawa”
- Parents add meaning by connecting the babble to something meaningful and present: infant says “baba” and parent says “You want your bottle” and gives the bottle
- In time, the baby will use “baba” to ask for a bottle

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### Babbling with Hands

- For young children who are deafblind, encourage hand games (e.g., tapping on tray, drumming fingers, patting)
- Parents can imitate the child’s hand motion in close proximity so that the child can feel it; pause and see if the child takes their turn and imitates the motion (tap, tap)
- Parents then change the hand game slightly and pause to encourage the infant to imitate (tap, tap, tap)
- Parents add meaning by connecting the hand motion to an activity such as patting the therapy ball to request “bounce” when they are playing together on it and pause
- In time, some of these hand motions become gestures/signs

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### Words Gain Meaning

- The child begins to show signs of understanding that words are connected to real people and things
- He connects “mommy” and “daddy” with his parents
- He begins to be able to act upon simple commands such as “get the ball”, “Where are your feet?”
- By one year of age, some children understand less than 20 words and others many times more
- It is important at this time to give the child words for what they are attending to and for what interests them
- Watch the child’s spoken and unspoken messages (body language, gestures) to determine what he may be noticing, feeling or thinking, then supply words for those things and events (“You want the cookie.”)
- Narrate the day

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## Target Words and Vocabulary

- Young children must hear a word 100 times before it becomes a part of their receptive vocabulary and 100 times more for it to become a part of their expressive vocabulary
- Ask the parent to select 5 words they want their child to learn first; get joint attention in a meaningful activity the word is used in; use it over and over (“cup”, “get your cup”)
- Teach parents how to use a chart to target vocabulary; sample below (put this up on bathroom mirror as reminder)

| Date | Activity     | Target Vocabulary | Times Used |
|------|--------------|-------------------|------------|
| 1/12 | Washing face | Soap              | ////       |
|      |              | Face              | //         |
|      |              | Dirty face        | //         |
|      |              | Clean face        | /          |
|      |              | Warm water        | /          |

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## First Words

- First words are nouns (ball, daddy); then verbs (eat, go), next descriptors (red, soft), then pronouns (mine, she), adverbs, articles, endings (es, ing, ed, ly, etc.)
- **10 to 18 months:** first true word
- **10 to 18 months:** points to an object and uses word approximation
- **12 to 18 months:** vocabulary of 3 to 20 words; 50% of words are nouns
- **12 to 18 months:** uses phrases such as “All gone” and “Want more”; begins using verbs and adjectives

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