

The Speech and Language Development of Internationally Adopted Children who are Deaf and Hard of Hearing

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Abstract

In order to better understand how international adoption influences the speech and language development of children who are D/HH and how parents and professionals can help support their development in this area, parents and professionals were interviewed regarding their experience with these children. Through their answers and current literature on the subject, professionals can implement several strategies to support parents and their children. Although each case is different, professionals can take several steps in order to ensure that internationally adopted children who are D/HH and their families receive the support that they need.

Methodology

To explore how international adoption influences the speech and language development of children with hearing loss and how professionals can be better prepared to serve this population and their families, current literature related to the topic was reviewed. Additionally, adoptive parents and professionals who have worked with internationally adopted children with hearing loss were interviewed.

12 professionals and parents were interviewed. They include:

- Four speech-language pathologists (SLPs)
- One audiologist
- One adoption agency coordinator
- Six parents

These parents and professionals were asked questions regarding intervention, prognosis, and potential difficulties of internationally adopted children's families.



Topic	Professional	Research
Intervention	"They need twice as much language stimulation as other children because they've likely been deprived of direct language and the reinforcement of using language to get what they need." -Speech-language pathologist	Internationally adopted children who are D/HH require an even more enriched language environment not only because they are often delayed in receiving hearing technology, but also because of their limited exposure to English (Snedeker, Geren, & Shafto, 2007).
	"Although there is no specialized treatment, these children may also need to work with psychologists who specialize in trauma, attachment disorders, and disinhibited social engagement disorder, which may all occur in children who are internationally adopted." -Speech-language pathologist	Some children may also present with Cognitive Cumulative Deficit, a decreased ability to benefit from related services (ST, reading recovery, resource room, etc) because they are having difficulty cognitively catching up to the increasing academic demands of the classroom resulting in a "chronic mismatch between a child's learning capacity and his/her academic placement , teaching style, and level of instruction" (Gindis, 2006)
	"Full-time device use and immersing in a language-rich environment is recommended for all children with hearing loss to allow for the opportunity to develop age-appropriate speech/language skills as possible." -Audiologist	The current results provide evidence that children's language development benefits from consistent hearing technology use. Nonusers are at risk in areas such as vocabulary and grammar compared with other with hearing loss who wear use their devices regularly. (Walker et al., 2015)
Prognosis	Adopted children can be at a greater risk for lasting speech/language and reading delays (among other social/emotional issues) depending on the length of time they remained in the orphanage and the level of social/language stimulation received, as well as the degree of hearing impairment. -Speech-language pathologist	Research has shown that children who are severely deprived during early childhood can be delayed in the acquisition of spoken language and continue to show impairments in adult life (Barke, 2007).
	"It's important to be aware of co-existing disorders that affect their treatment and prognosis. For example, the little boy I saw had a cleft palate and the little girl had ADHD." -Speech-language Pathologist	Research on internationally adopted children indicates that these children are at increased risk of decreased physical growth, infectious diseases, and developmental delays (Hwa-Froelich & Matsuo, 2010).
	"Early access to sound is vital for spoken language development. For children with severe to profound hearing loss, early amplification with cochlear implants or hearing aids increases their chances of age-appropriate spoken language outcomes." -Speech-language pathologist	With respect to age at the time of adoption, research has shown a trend in language outcomes, favoring children who were adopted at younger ages (Scott, Roberts, & Glennen, 2011).

Parental Concerns

"The country or origin does sometimes affect the diagnosis. There are certain countries that are less developed; in these countries, especially in the rural regions, children may have very significant difficulties which go undiagnosed, especially in respect to medical diagnosis. In those countries, it is almost always the case that hearing loss is not diagnosed or noted."

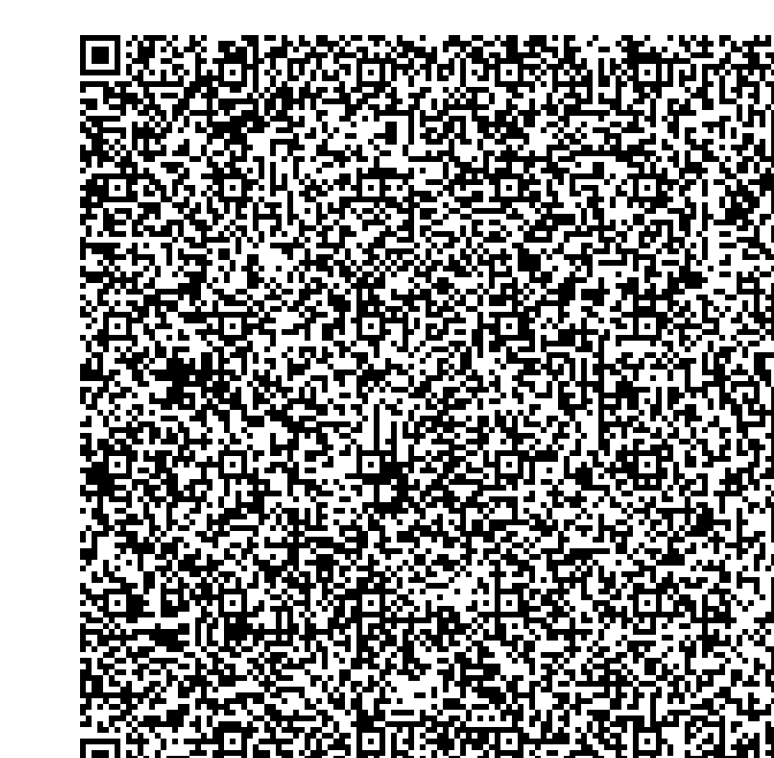
"We used sign to help bridge the language gap with our daughter since she was 27 months. I think that would help when adopting any older child, regardless of hearing status. Parents also need to be told to get their child's hearing re-tested once back in the US, and to not depend on any medical information received from the birth country. Adoptive parents are NOT given enough information on ESL development and what is "normal", when adopting older children."

"Parents who adopt from countries such as China should be aware that, in the last decade or so, have taken it upon themselves to adopt out only children with very significant disabilities."

Clinical Implications

- Examine amount of intervention the child received prior to adoption.
- Be mindful of concomitant disorders which may influence prognosis.
- Present parents with information about all communication modalities and educational settings.
- Support parents by giving resources about support groups and other information they may find helpful.
- Encourage adoptive parents to continue to fostering language.
- Consider cultural background of the child and family and adjust counseling and intervention accordingly.

References



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