



**ASHA**  
American  
Speech-Language-Hearing  
Association

March 3, 2021

The Honorable Michael Benedetto  
Chairman  
Standing Committee on Education  
New York Assembly  
LOB 835  
Albany, NY 12248

The Honorable John Mannion  
Chairman  
Committee on Disabilities  
New York Senate  
172 State Street  
Albany, NY 12210

RE: A. 3866/S. 1930 – Language Equality and Acquisition of Deaf Children

Dear Chairmen Benedetto and Mannion:

On behalf of the American Speech-Language-Hearing Association, I write to comment on A. 3866/S. 1930, which would require the New York School for the Deaf (NYSD), with the New York State Education Department (NYSED), to select language developmental milestones for children who are deaf or hard of hearing (D/HH), create a parent resource, and select existing tools and assessments for educators to assess language and literacy development of children who are D/HH. The bill would also create an NYSED Advisory Committee to recommend milestones. The goal of this legislation is to ensure that children who are D/HH are ready for kindergarten using either American Sign Language (ASL) or English.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 19,000 ASHA members reside in New York.<sup>1</sup>

ASHA strongly supports the intent of A. 3866/S. 1930, which is to ensure young children who are D/HH have a strong language foundation for kindergarten readiness and academic success. Additionally, ASHA supports a family's right to decide the most appropriate language(s) (e.g., American Sign Language, spoken language, or both), communication mode(s) (e.g., augmentative and alternative communication), and education plan for their child. ASHA does not support A. 3866/S. 1930 as currently drafted given provisions in the bills that create unnecessary and burdensome requirements that interfere with the decision-making authority of the Individualized Family Service Plan (IFSP) and Individualized Education Program (IEP) teams required under the Individuals with Disabilities Education Act (IDEA).<sup>2</sup>

### **Current Services for Children Who Are D/HH**

As it stands now, children who are D/HH may receive services through New York's early intervention program, which includes a variety of communication methods that suit the individual child's needs and the family's preferences. Those methods may include ASL, but it may also include listening and spoken language (with assistance from a hearing aid or cochlear implant), cued speech or language, or another communication method with appropriate educational supports.

Having several evidence-based communication options to choose from is critical for parents. Over 90% of children who are deaf are born to parents who hear.<sup>3</sup> While ASL may be the most appropriate choice for some children, **ASHA recognizes that there are several evidence-based communication options that should be made available to families.**

## **IDEA**

### *Importance of a Comprehensive Assessment*

IDEA requires early intervention programs and schools to administer a comprehensive assessment to students who are suspected of having a disability. The assessment team must include qualified providers who are trained to assess the full range of the suspected disability, including communication disorders. Evaluators must administer appropriate assessments and recommend interventions and supports based on the child's needs and their family's priorities.

### **Specification of English as a Preferred Language/Communication Mode**

The proposed legislation, A. 3866/S. 1930 establishes English, defined in the bill as "spoken English, written English or English communicated with or without the use of visual supplements," as the preferred term for spoken and written language. ASHA supports the use of the term "spoken language" to include native and non-native English speakers.

### **ASHA Opposes the Creation of an Advisory Committee**

ASHA recommends eliminating the proposed advisory committee, which would advise the Department of Education on the selection of appropriate milestones for the parent resource and language assessment program. Creating an advisory committee is burdensome, unnecessary, and costly and may undermine the decision-making authority of the IFSP/IEP team, which must include professionals knowledgeable about the assessment and services needed for children with disabilities, including those children who are D/HH and their parents.

### **ASHA Supports a Parent's Right to Decide and the Development of a Comprehensive Parent Resource**

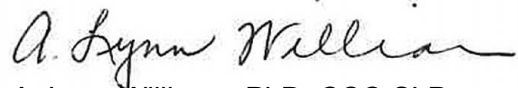
ASHA has model language that:<sup>4</sup>

- emphasizes a parent's right to decide the language(s) and communication mode(s) that are best for their child and family;
- requires the state lead agency to create a comprehensive and balanced parent/family resource that includes existing developmental milestones, assessment information, and education options for children who are D/HH and encourages the lead agency to utilize experts in the state to advise them on the creation of the resource;
- strengthens existing federal IDEA legislation that requires a comprehensive assessment and the development of an intervention plan that utilizes the full complement of qualified providers to ensure that all children who are D/HH receive the services they need to develop a strong language foundation for future academic success; and
- requires the state lead agency to widely distribute the parent/family resource to families, medical specialists/facilities, parent resource centers, early intervention and preschool programs, as well as school districts throughout the state so that families have the tools and resources they need to fully participate and impact decision making in IFSP and IEP meetings.<sup>5</sup>

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Thank you for your consideration of ASHA's position on A.3866/S.1930. If you or your staff have any questions or would like additional information on ASHA's model language, please contact Janet Deppe, ASHA's director of state affairs, at [jdeppe@asha.org](mailto:jdeppe@asha.org).

Sincerely,



A. Lynn Williams, PhD, CCC-SLP  
2021 ASHA President

cc: Assembly Member Inez Dickens  
Senator Robert Jackson

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<sup>1</sup> American Speech-Language-Hearing Association. (2020). *New York* [Quick Facts]. <https://www.asha.org/siteassets/uploadedFiles/New-York-State-Flyer.pdf>.

<sup>2</sup> Individuals with Disabilities Education Act, 34 U.S.C. § 300.320 et seq.

<sup>3</sup> Mitchell, R., Karchmer, M. (2002). *Chasing the Mythical Text Percent: Parental Hearing Status of Deaf and Hard of Hearing Students in the United States*. Gallaudet Research Institute. [https://research.gallaudet.edu/Demographics/SLS\\_Paper.pdf](https://research.gallaudet.edu/Demographics/SLS_Paper.pdf).

<sup>4</sup> American Speech-Language-Hearing Association. (n.d.). *ASHA LEAD-K Model Bill* <https://www.asha.org/siteassets/uploadedfiles/LEAD-K-Model-Bill-ASHA-Version.pdf>.

<sup>5</sup> American Speech-Language-Hearing Association. (n.d.). *State Issue Brief: Language Equality and Acquisition for Deaf Kids (LEAD-K) State Legislation*. <https://www.asha.org/siteassets/uploadedFiles/LEAD-K-Issue-Brief.pdf>.