March 7, 2019

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

RE: Assembly Bill 5772

Dear Chairman Benedetto:

On behalf of the American Speech-Language-Hearing Association, I write to oppose A 5772, 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 NYSD Advisory Committee to recommend milestones. The goal of this legislation is to ensure 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 204,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Audiologists specialize in preventing and assessing hearing and balance disorders as well as providing audologic treatment, including hearing aids. Speech-language pathologists identify, assess, and treat speech and language problems, including swallowing disorders. Over 17,600 of our members reside in New York.

The Language Equality & Acquisition for Deaf Kids (commonly known as LEAD-K) is supported by the National Association for the Deaf and aims to promote the acquisition of ASL over all other forms of language or communication for children who are D/HH.

The bill language in A 5772 uses the terms ASL and “English,” rather than referencing “spoken language” as a modality and favors ASL in its terminology and focus on including deaf educators and “experts” who use ASL. ASHA is concerned that there is no mention of hearing assistance technologies in language acquisition, which many parents choose for their children.

ASHA opposes efforts—like A 5772—that would establish a new precedent of placing hearing disabilities ahead of others identified in the Individuals with Disabilities Education Act (IDEA) by
adding disability specific mandates and requiring additional resources only for children who are D/HH. ASHA recommends enforcing mandates included in IDEA that utilize talented professionals, including audiologists and speech-language pathologists (SLPs), who work with children who are D/HH every day, rather than implementing costly and redundant systems that violate the tenets of IDEA.

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

As it stands now, children who are D/HH can 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 could include ASL, but it could 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.

A 5772 will take away the family’s ability to choose which communication method is right for them. Having communication options to choose from is critical for parents. Over 90% of children who are deaf are born to parents who can hear. 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.

*Annual Assessments for Children who are D/HH*

Under IDEA, the individualized family service plans (IFSP) and individualized education programs (IEP) team of professionals is tasked with continually evaluating whether the child’s individual goals are being met and if he or she is making adequate progress. ASHA is concerned that requiring an annual assessment for children who are D/HH by professionals identified by the advisory committee is a costly and onerous expense that is already required under IDEA.

*Role of the IFSP or IEP Team*

An IFSP or IEP team consists of qualified providers, including audiologists and SLPs, and parents who meet to develop an individualized program to address the child’s needs. Families who are dissatisfied with their child’s goals or progress on their IFSP/IEP have the right, under IDEA, to request additional assessments or changes to the IFSP/IEP.
ASHA is concerned that A 5772 would undermine the statutory 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.

Thank you for considering ASHA’s position on A 5772. If you or your staff have any questions, please contact Susan Adams, ASHA’s director of state legislative and regulatory affairs, at sadams@asha.org.

Sincerely,

Shari B. Robertson, PhD, CCC-SLP
2019 ASHA President

cc: Education Committee
    Representative Inez Dickens