

**Module: Communication and Emergent Literacy:
Early Intervention Issues**

Session 5: Interventions to Facilitate Emergent Literacy

Handout G: Making Print/Braille “Talk” to Children

EIVI Training Center. (2005). *Making print/braille “talk” to children*. Chapel Hill, NC: Early Intervention Training Center for Infants and Toddlers With Visual Impairments, FPG Child Development Institute, UNC-CH.

Adapted from Weitzman, E. (1995). Making literacy part of every day in child care [Electronic version]. *Interaction*, 9(1), 15-20.

Young children who observe caregivers interacting with print or braille learn that

- printed or brailled words and spoken words are related to each other,
- print or braille has diverse uses and is a common feature of the environment, and
- printed or brailled marks on paper and elsewhere can carry meaning.

To make print in the environment “talk” to young children, caregivers should expose children to print/braille used

- during everyday routines,
- for pleasure,
- in social interactions,
- for communication,
- for record keeping, and
- for information retrieval.

Caregivers should expose children to print/braille during everyday routines.

- Signs and labels should be placed at children’s eye level. Caregivers of children exposed to braille should label common sources of environmental print, such as food containers, with braille.
- Children can be encouraged to “autograph” artwork with their names. Caregivers should praise children for their attempts to sign their art. Even children with visual impairments should have the opportunity to sign their name in print since they will need this skill throughout their lives.
- Caregivers can include children when writing grocery lists, to-do lists on dry-erase boards, dates on calendars, etc.

Caregivers should expose children to print/braille used for pleasure.

- Children should be read to by caregivers.
- Children should have paper, crayons, pencils, markers, chalk and chalkboards, braillewriters, slate-and-styluses, etc., readily available.

Caregivers should expose children to print/braille used in social interactions.

- Caregivers and children should scribble on the braillewriter, fingerpaint, share books together, cook dinner following a brailled or printed recipe, etc.
- Caregivers can make object books with children about the interactions they share.

Caregivers should expose children to print/braille used for communication.

- Children can participate while caregivers write letters and greeting cards.
- Caregivers can write letters that children dictate to grandparents and other relatives.

Caregivers should expose children to print/braille used for record keeping.

- Calendars, adapted with braille and objects when appropriate, on which birthdays, holidays, and other special dates are recorded should be kept at children's eye or finger level.
- Caregivers can record information in print or braille about the weather, meal schedules, announcements, songs, poems, and stories on charts placed at children's eye or finger level. For children with visual impairments, objects can replace or be used in addition to visuals.

Caregivers should expose children to print/braille used for information retrieval.

- Advertisements, maps, magazine and newspaper articles, nonfiction books, and reference books are examples of print/braille sources of information that caregivers can share with children.

Well-stocked writing centers, at home and at child care centers, help children develop their writing and reading skills. Writing centers can be stocked with

- braillewriters and braille paper;
- slate-and-styluses;
- screen boards to put under paper when drawing with crayon to create raised drawings;
- lined and unlined paper, cardboard, postcards, and cards of various sizes, shapes, textures, and colors;
- fingerpaint with additives (e.g., sand) for texture;
- crayons, pencils, pens, and markers;
- chalk and chalkboards;
- magnetic or foam letters;

- stickers, stamps, and envelopes;
- ink stamps, tape dispensers, staplers, glue, and scissors; and
- typewriters and computers.

Alana

Alana was a 30-month-old girl with Stage 4 retinopathy of prematurity. Her mother, Jonette, noticed that much of the environmental print at Alana's child care center was located high up in the room. For instance, the cutout letters of the alphabet were taped in a line to the wall above a whiteboard, 10 feet from the ground. A poster promoting a picture book about whales was placed over the door. A mobile of different-colored cardboard balloons, with each color labeled in large letters, hung in the center of the room, high enough so that an adult could walk underneath it. Jonette was concerned because, while the children with normal vision at the center could see the cardboard letters, the poster, and the mobile, Alana probably could not.

Jonette read to Alana every day and had made print/braille resources such as books, crayons, and paper available to her at home. Jonette understood that incidental exposure to print, at daycare as well as at home and outside, is important for children learning to read and write.

Jonette approached Alana's teacher, Virginia, and explained her concern.

"It never occurred to me that Alana might be missing out," Virginia said. "We'll have to do something to fix that."

Virginia and Jonette discussed strategies for rearranging elements of the daycare center. They moved the cut-out letters to beneath the whiteboard so that they were at eye level to the preschoolers. They also had Alana's TVI make alphabet braille labels. The whale poster was moved to a lower section of the wall near the door, where the children could see it up close. The mobile was moved from the center of the room to a corner where it would be out of the way of adults, and hung low enough that it could be explored by the children. The cardboard balloons were replaced with different real objects, and braille was added.

Virginia enjoyed seeing Alana engage with the mobile and explore the braille letters. She was excited to learn more about Alana's needs and make more adaptations. Jonette was pleased with the improvements in her daughter's daycare center. She was sure that the additional daily exposure to braille in the environment would contribute to Alana's learning to read and write.

Reference

Weitzman, E. (1995). Making literacy part of every day in child care [Electronic version]. *Interaction*, 9(1), 15-20.