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BILINGUALISM WITH DEAF AND HARD OF HEARING PRESCHOOL CHILDREN^a

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SUMMARY

Bilingualism of a deaf child means the knowledge and regular use of sign language, which is used by the community of the deaf, and the spoken language, which is used by the majority who can hear. Knowing and using sign and spoken language, deaf and hard of hearing children will realize their full potential in intellectual, speech and social development.

The knowledge of sign language from the earliest age helps deaf children acquaint with the world, develop their cognitive abilities, communicate with their parents and the surroundings.

The creation of suitable early intervention programmes focusing on the family which offer the possibility of choice for parents and deaf and hard of hearing children is necessary.

At preschool age, the task of a nursery school is to enable children to continue to learn the language which they started learning in the family (sign or spoken language). Children will learn both linguistic modalities the best though the interaction with other fluent speakers (adults and children).

The aim of the research was to examine the level of knowledge of sign and spoken linguistic expression with deaf and hard of hearing preschool children within 5 lexical areas: family, food and drinks, professions, home, travels. Stimulus pictures were used in the research. The sample comprised 11 children attending preschool classes at schools for deaf and hard of hearing children.

Sign language with preschool children was more developed and richer in comparison to their spoken linguistic expression. On average, deaf and hard of hearing children used more signs (gestures) than spoken words.

The best results were achieved within the lexical area of Food and Drinks, while the poorest results were achieved in the area of Professions.

There are great individual differences in the number of used words within different lexical areas. The deficiency in sign and spoken linguistic expression within the width of vocabulary and lexical readiness as well as within the understanding of the meaning of words was observed.

The development of the entire personality of a deaf child (emotional, social and cognitive development) is to a great extent determined by auditory deprivation and difficulties in language acquisition. As a result, difficulties in using and understanding terms occur.

Key words: bilingualism, sign and spoken linguistic expression, deaf and hard of hearing preschool children

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INTRODUCTION

Early bilingualism in hearing impaired children (knowledge of sign language and spoken / written language) is invaluable for their development.

Appropriate and effective early communication, regardless of within which linguistic modality it takes place (signed or spoken), together with the acceptance of the child and its impairment is the basis of successful cognitive development and the development of the child's personality, which is the basis of communication and of building the language skills (Ann, 2001; Meir, 2002; Perniss, Pfau & Steinbach, 2007).

Sign language is a language that deaf children spontaneously adopt and learn, like normal hearing children adopt the spoken language of their environment. The adoption of sign language eliminates the problems of limited receiving of messages and limited communication.

When communicating with a deaf child, speech that is followed by a gesture-sign should be used until the child learns a spoken word and understands its meaning.

Communication of a deaf child in the family

It is necessary to detect hearing impairment in a child early and to implement the Early Intervention Program as early as possible.

The local community, the state, as well as health and education projects must focus their goals towards early detection of hearing impairment and early intervention (ASHA, 2001), according to (Pribanić, 2004).

The family of a child with impaired hearing should have access to all the information on the general development of the child, information on hearing loss, communication abilities and language development in deaf children.

About 90% of deaf children were born in families with two hearing parents, 7% have one deaf parent, and only 3% have two deaf parents (Marschark, 1993). Approximately 5-10% of deaf children adopt sign language from their deaf parents (Mitchell & Karchmer, 2004). Most deaf children grow in a completely normal hearing world in early childhood. Also, most of the hearing parents of deaf children have no knowledge, or have poor knowledge of sign language, which has significant implications for the development of the deaf child.

The deaf child requires to be included in the process of rehabilitation of hearing and speech early, which is a prerequisite for the child's progress in language development and speech development, as well as in psychosocial and emotional development. It acquires its experience in various ways, but its most influential and most responsible teacher is its parent. Parents should be educated about hearing loss, its consequences and communication, upbringing and education of the deaf child.

Greater support of the community is required, especially of its professional services: of special education and rehabilitation, medical, social and educational. It is necessary to improve communication within the family system, as well as the cooperation of the family and professionals in various specialties who are involved in the rehabilitation and education of deaf children (Vujasinović and Slavnić, 2008).

Bilingualism in deaf and hard of hearing children of preschool age

“Bilingualism is the knowledge and regular use of two or more languages. Bilingualism of the “sign language – spoken language” type is the only way for the deaf child to meet its needs, i.e. to, from an early age, communicate with its parents, develop its cognitive ability, get to know the world, communicate fully with the environment and acculturate into the world of those who hear and the world of the deaf” (Grosjean, 2001).

Bilingualism in a deaf child implies knowledge of sign language used by the deaf community and the spoken language used by the hearing majority.

When linguist William Stokoe began studying the structure of American Sign Language in the fifties and when, in 1960, he published the book “Sign Language Structure, Studies in Linguistics” in which he points out to the value and richness of sign language, valuing that system of communication, which has its own syntax and grammar and is independent of oral (spoken) language, began again all over the world.

Bilingualism of the hearing is different from the bilingualism of the deaf.

Bilingual normal hearing children, as well as deaf children, learn two languages. The difference is that they learn L2 through auditory means, in the same modality as L1 (Knight & Swanwick, 2002).

Deaf children learn two languages in two modalities, which is considerably more complex.

When normal hearing children learn L2, it is completely available to them and it is not limited by any physical factors. Deaf children can not fully hear their L2. In the mode of adoption of L1, there are also differences.

Adoption of sign and spoken language in deaf and hard of hearing children

Sign and spoken languages include various perceptual and productive systems. While spoken languages include mechanisms of auditory processing and speech production, sign languages are perceived visually, and their articulation involves the systematic use of parts of the body and space (Kovačević, 2013; Plaza-Pust, 2005).

Deaf children who are exposed, from the earliest age, only to sign language go through the same basic levels of language acquisition as normal hearing children who learn to speak in their environment (Bonvillian & Folven, 1993; Drasgow, 1998).

To be able to, in a proper way, study the language development in hearing impaired children, as well as the deviations that occur in this development, one must be familiar with the speech development of normal hearing children. Only in this way one can detect and understand all the side effects of hearing impairment and their impact on the process of developing speech (Đoković, 1997).

The natural process of speech and language development takes place under the influence of speech-language environment.

Anderson (2006), points out to the data obtained by Anderson & Reilly (2002) in their study. The obtained data points out to remarkable similarity of the first signs and words in ASL – American Sign Language and English spoken vocabulary. These authors point out that it is evident that from the age of 18 – 23 months, the productive

vocabularies (of signs or words) of deaf and normal hearing children, when compared, are more or less the same.

The list of the first words, or gestures-signs that children adopt, points out to very strong similarities between the early lexical contents in deaf and normal hearing children.

The first signs-gestures of deaf children are semantically similar to the first words that are produced by normal hearing children.

In the phase of single-element statements, deaf children also use isolated signs or words – nouns or verbs (for example: mother, father, baby, eat, drink, milk, ball, dog ...), just like normal hearing children do.

Deaf children at the age of 12 months produce the first 10 signs, they produce 50 signs at the age of 20 months (Mayberry & Squires, 2006).

Deaf mothers, sometimes move or hold the hand of their deaf child in order to form a certain sign (Erting, Prezioso & O'Grady Hynes, 1990).

At the beginning of adopting sign language deaf babies make similar mistakes in producing signs as normal hearing children make in the articulation of vocals in spoken language. In the natural interaction of deaf children aged 19–24 months with their deaf mothers a total of 1018 signs was analyzed. In the production of the first signs, the children made mistakes in the first hand shapes, substitution, and they often repeated the same signs (Morgan, Barrett-Jones & Stoneham, 2007).

Deaf children (usually of hearing parents) who are beginning to learn sign language after the critical period for language acquisition (until the end of their fifth year of age) have, on average, worse language skills in sign language.

For the deaf children of hearing parents, their first language will be spoken language. If hearing parents choose sign language, it will not be adopted in the same way as is the case with the deaf children of deaf parents.

Hearing adults use spoken language simultaneously with sign language, and in addition to that, their skills of emission and reception of sign language are often incomplete and are under strong influence of the structure of spoken language.

Vigotski (1996) points out that the experience of a child who can hear is richer, because oral speech is directed at auditory signals. A child with impaired hearing encounters insurmountable difficulties in acquiring experience because it should receive oral speech in a visual way, which is incomplete and limited, and it is very difficult for the child to generalize the experience and express himself or herself verbally.

The vocabulary volume, the character of the words, the frequency of words' use are conditioned by the development of children's abilities, the domain of their interests, the influence of the social environment, as well as the program contents that are applied in the educational work with children of preschool age (Kovačević, 2012).

Kristal (1996) describes the contents of the first vocabulary.

Young children talk about what is going on around them – about here and now – and quickly build vocabulary in several semantic fields.

People – relatives and visitors to the home (dad, grandma, man, postman, grandfather). *The actions, the way things are moving* (to give, to jump, to kiss, left), and *routine activities in the children's home* (bye-bye, goodbye, hello). Food, time for meals, as well as products (lunch, milk, juice, beverage, apple). *Body parts* – the words that are

usually learned first are those that describe the face (mouth, nose), and then the other parts of the body (fingers, hands) and bodily functions. *Clothes*- everything that you wear and put on your body (diaper, shoe, coat). *Animals* – whether real, in pictures or on TV (doggy, cat, horse, lion). *Vehicles*- objects and the sounds that they emit (car, beep-beep, vooRRR, vooRRR, vooRRR). *Toys and games* (ball, cube, book, doll, hide and seek). *Objects in the house* – everything that is related to their daily routine (glass, spoon, brush, clock, light). *Locations*- several general words (there, to watch, inside, above). *Social words* – voiced reactions (aha, yes, no, thank you). *Descriptive words* – the first adjectives (beautiful, big). *Situational words* – several “demonstrative” words (deixis) – (that, my, they).

In developing the child’s vocabulary, not only developing its ability to understand, but also to actively use larger and larger numbers of words have an important place.

Daniels (1993) points out that the hearing children of preschool age who are learning ASL as a first language (the normal hearing children of deaf parents) can be in an advantageous position during the adopting of the vocabulary of the English language. Testing was carried out with PPVT (Peabody Picture Vocabulary Test). The study included 14 normal hearing children of deaf parents. The children had early sign-linguistic communication and in the pictorial vocabulary test they achieved significantly better results than were the anticipated norms for that age group. The author finds that being exposed to spoken and sign language at an early age facilitates the adoption of an active vocabulary.

The basic problem in the development of speech in deaf children is a matter of active vocabulary (words that are used in everyday speech and everyday life situations). The process of enriching the vocabulary is primarily based on associating words with objects, things and phenomena that children correspond with, or which they perceive.

Deaf and hard-of-hearing children of preschool age acquire concepts by direct observation of objects and phenomena. Children learn to observe things, to observe changes that occur, to analyze, compare, find the common and the different, remember the properties and qualities of objects and use them in games. For preschool children, it is especially important to develop certain concepts and categories of words that appear in related situations, such as the notion of color; shape and characteristics; the notion of space; the notion of self; the notion of time; the notion of numbers and quantities, and other notions. It is about perceptions, creating the notion and categories of words that express that notion, or kinds of words with which that notion can be expressed.

Through taking part in a series of independent, focused and combined activities in all fields of educational work, deaf and hard of hearing children have contact with toys, obvious means of teaching and other items and objects, and learn their names, recognize the similarities and differences between them, that is, learn their properties (Kovačević, 2013).

WORK METHOD

The aim of the study

The aim of this study was to examine the level of acquisition of sign and spoken language expression in deaf and hard of hearing children of preschool age, within five lexical fields.

The sample

The sample consisted of 11 children who attend pre-school groups in schools for deaf and hard of hearing children in Serbia. Five children had cochlear implants, and six children wore hearing aids. 4 out of the 11 surveyed preschool children were girls and 7 were boys.

The instrument

For the children of preschool age, stimulus pictures of terms from five lexical fields (family, food and drink; professions; house; travels) from the book "My first Picture Dictionary of the Serbian language" (author V. Babić) were used. The book is intended for children of preschool age. At the time when they get to know the world around them, this book can help them to become familiar with an array of words by which we name beings, objects and phenomena from the environment, near and far, and to learn to interconnect these words into thematic units.

The obtained linguistic materials were quantitatively and qualitatively processed.

In the paper, descriptive statistics (mean with its corresponding standard deviation, as well as minimum and maximum) was used. The qualitative analysis of the obtained responses was performed and the kinds of mistakes that had been made were analysed.

THE SURVEY RESULTS WITH DISCUSSION

Table 1 *Results of deaf and hard of hearing children of preschool age within the sign and spoken language expression, within five lexical fields: Family, Food and Drink, Professions, Travel, House*

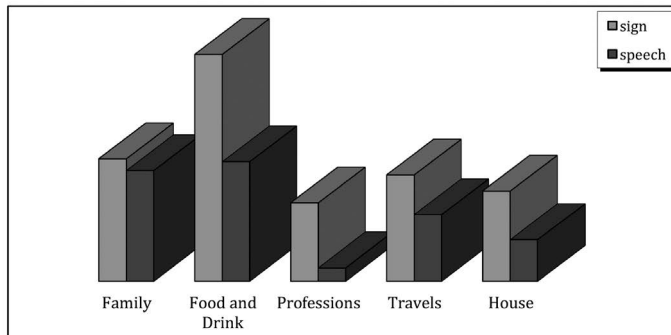
	AS	SD	Min.	Max.
Family sign	7.55	1.440	5	10
Family speech	6,82	1.834	3	9
Food and Drink sign	14.00	7.141	3	24
Food and Drink speech	7.36	5.887	1	19
Professions sign	4.82	3.920	0	11
Professionsspeech	0.82	1.834	0	6
Travels sign	6.55	2.583	2	11
Travels speech	4.09	3.300	0	11
House sign	5.55	3.446	1	12
House speech	2.55	3.205	0	8

Preschool children included in the survey achieved the best results within the *Food and Drink* field within sign language. The average value of correctly used words is $AS=14.00$, $SD= 7.141$. The largest number of used words is 24. A much smaller number of words was used in the lexical fields: *Family*, *Travel* and *House*.

The worst results were obtained in the *Professions* field within speech. The average value of correctly used words is $AS= 0.82$, with the standard deviation of 1.83. The largest number of correctly used words is 6.

The obtained results indicate better acquisition of sign language expression, in comparison to spoken linguistic expression.

It is characteristic that some children did not use any words properly within the lexical fields: *Professions* (sign – gesture and speech); *Travels* (speech) and *House* (speech).



Graph 1 The number of words that the deaf and hearing impaired preschool children of preschool age used within the lexical fields: family, food and drink, professions, travels, house within sign language expression and spoken linguistic expression

Deaf and hearing impaired children of preschool age used a total of 423 words, within five lexical fields, within sign language expression, 38.45 words on average. Within spoken linguistic expression, they used a total of 238 words, 21.63 words on average.

Preschool children with cochlear implants and hearing aids, used the largest number of words within the *Food and Drink* lexical field, within sign language expression – the total number of words is 154. 14 words on average; 81 words within spoken linguistic expression, 7.36 words on average.

A significantly smaller number of words was used within the lexical fields: *Family*, *Travel*, *House*.

The smallest number of words was used within the *Professions* lexical field. Within sign language expression – the total number of words is 53; 4.82 words on average.

Within spoken linguistic expression – the total number of words is 9; 0.82 words on average.

Through an analysis of the obtained results in preschool children within five lexical fields (*family*; *food and drink*; *professions*; *travels*; *house*), it can be concluded that a larger number of words was used within sign language expression, in comparison to the spoken language expression.

Sign vocabulary of preschool children is more developed and with more content in comparison to the spoken vocabulary. There are large individual differences in the number of words used within different lexical fields. The results obtained in preschool children, indicate that the number of used words is different in each of the five surveyed fields.

Within sign and spoken forms of expression, the children gave the highest number of words within the *Food and Drink* lexical field.

In the analysis of the obtained words in the *Food and drink* field, the following distinctions could be made: food-drinks, sweets, fruit, vegetables, prepared food items or foods like bread, and the like.

The study by Kovačević-Gavrilović and Mitić (2004), confirms the obtained results. The authors examined the specifics of lexical development of preschool children with regular speech and language status. The research results indicate that children most often name body parts, games and toys, food and drink.

The children with preserved hearing are the ones to adopt, at the earliest, and produce numerous nouns that denote animals and food. Children rarely use nouns that signify people's professions (i.e. fire-fighter) (Fagan & Pisoni, 2010).

The obtained conclusions were confirmed by the results of the study by Kovačević (2005) in the study of lexical aptitude of deaf and hard of hearing children within different lexical fields.

The most frequently used words in sign and spoken expression, within the *Food and Drink* lexical field are: *meat, eggs, bread, salt, cheese*; fruits: *apples, lemon, grapes, banana, strawberry*; vegetables: *potato, paprika, onion*; beverages: *water, milk, juice*; sweets: *chocolate and bonbon*.

Certain words are given only within the sign mode of expression: *frankfurter, yogurt, grapes, orange, paprika, carrot, pear, sugar, salami, jam, chocolate, bonbon, mineral water, coffee*.

Since images were used as an incentive, it is characteristic that a small number of terms was perceived inadequately: *frankfurter – banana*; tea in a box on which there is a picture of flowers (*flower*).

The smallest number of words was provided by deaf and hearing impaired children within the *Professions* lexical field. There is a visible difference between the obtained sign vocabulary (53 words) and spoken vocabulary (9 words).

The obtained results indicate, like the results of Mayberry (2002), research, that, for deaf children, adopting and learning spoken language is very difficult and it requires extraordinary effort by the deaf child and its parents (Hermans et al., 2008).

Key elements in adopting and learning the language in deaf children are: early detection of hearing impairments, early involvement in the education system and early contact with fluent sign language users (Goldin-Meadow & Mayberry, 2001).

Normal hearing three year olds have adopted speech vocabulary that includes an average of between 1,000 and 2,000 words. In a study authored by (Sainsbury & Loyd-Evans, 1986), deaf five-year-olds had speech vocabulary that included less than 29 words (Ross, Storbeck & Wemmer, 2004).

The results listed by Lach et al. (1970), according to Mayberry (2002), in the course of early intervention during intense learning of spoken language, within a period of 15 months, a 30 month old deaf child, could only learn one word in a month.

Some differences were observed in certain lexical fields, in relation to the total number of words and different ways of expression in preschool children.

The obtained results were confirmed by the results obtained in studies by Kovačević, Isaković and Dimić (2010); Dimić, Kovačević & Isaković (2011); in which the deficiency of sign and spoken language expression; the level of lexical aptitude of deaf and hard of hearing preschool children were examined, as well as differences in certain lexical fields and sign and speech mode of expression in deaf and hard of hearing children of preschool age.

Through qualitative analysis within the five lexical fields: *Family, Food and Drink, Professions, Travels* and *House* in deaf and hard of hearing children of preschool age, the most frequently used terms were obtained, as well as specific and inadequate responses.

The most frequently used words within the *Family* lexical field are: *mom, dad, grandma, grandpa, brother, sister, baby*. Within the *Family* lexical field, one term was used inadequately: *dog*. All the terms were given in sign language expression and spoken language expression.

Within the *Travels* lexical field, the most frequently used words are: *car, plane, bus, boat, train*. The terms that were given only in sign language expression are: *helicopter* and *kayak*. Inadequately used terms are: *balloon, rocket* and *bird*.

Within the *House* lexical field a large number of inadequate or specific responses was given by the deaf and hard of hearing children of preschool age. The most frequently used words within the *House* lexical field are: *window, door, table, room, roof*. The words *window, door*, are as a rule, in the first or second place on the lists by all respondents. The terms that were given only in sign language expression are: *kitchen, bathroom, TV-set, terrace, door handle, stairs, fence*. Inadequate responses are: *bedroom – room sleeps; bathroom – bathed; water bathes; kitchen-water eats; roof – red*.

The specificity of the response of preschool children within this lexical field is specifying the actions that take place in certain rooms in the house. For example: *bedroom – sleeps; bathroom-bathes; kitchen- washes; living room-looks*. The responses were given in sign language expression and spoken language expression. Specific answers are: *stairs- above; armchair – sits*.

Two children used the term *mailbox* in sign language expression.

One child with a cochlear implant used onomatopoeia for certain terms. A sign-gesture was used together with pronunciation. For example: *bath- shhh, sss; washing machine – boo, boo; stove- shh*.

There is also a number of terms that were inadequately used and that the deaf and hearing impaired children of preschool age tied to the *house* and *parts of the house*: *road, grass, mom, tree, smoke, sister, rabbit, cat*.

Within the *Professions* lexical field the smallest number of words was used. The most frequently used words were: *painter, bricklayer, cook, hairdresser*. Within this field, a large number of words within sign language was given. Words that were given only in

sign language expression are: *policeman, fireman, singer (female), paintress, seamstress, driver, baker*.

It is specific that some children with cochlear implants named terms in sign – gesture, with pronouncing the sentence. For example, seamstress (the term given in sign – gesture) with the pronunciation *mother sews*; singer (female) – *woman sings*; driver – *dad drives*; paintress – *woman paints*; hairdresser – *boy cuts hair*; carpenter – *boy cuts wood*; shoemaker – *grandfather repairs shoes*.

The given replies are typical for particular children with cochlear implants, in whom spoken linguistic expression is more developed.

Cochlear implant has a significant advantage over conventional hearing aids in increasing the successfulness of development of speech in deaf and very hard of hearing children.

Research shows huge diversity in the ability to understand speech in children with cochlear implants. Children who, before the installation of implants, did not adopt speech and language require intensive rehabilitation (Kovačević, 2012).

There are huge individual differences in gaining speech and language skills in pre-lingually grown deaf children who use a cochlear implant. Some children use their cochlear implant very well, while others make only minimal progress (Blamey et al., 2001; Hodges et al., 1999; Kirk et al., 2000; Pisoni et al., 2000; Sarant et al., 2001; according to: Đoković, Ostojić and Kovačević, 2012).

Specific and inadequate responses were also given, depending on how children perceived images. The replies were given by both children with hearing aids and cochlear implanted children, in sign and spoken language expression. For example, carpenter – *strong – wood*; baker – *I eat, stove, bread*; seamstress – *woman-shirt; mom learns trousers*; teacher (female) – *aunt 5 + 5*; writer – *girl looks at a computer*; fireman – *sss, shhh, water*; carpenter – *dad – rrr*; fireman – *dangerous, dad, fire, water*; policeman – *prison dad*; singer (female) – *aaa-grandmother*; baker – *has lunch, fish, dad*; goldsmith – *eye hurts*; cook (male) – *uncle beans*; actress-monkey.

Testing the adopting of sign and spoken language in an extensive longitudinal study that included 110 deaf children, whose parents are deaf, and their origins are from 16 different states in the US, indicates that deaf children learn sign language in a natural environment, in the same way as normal hearing children learn spoken language (Anderson & Reilly, 2002).

The study was not focused only on the number of words (signs) that deaf children acquire at a certain age, but also on the contents of these words.

The first sign vocabulary of deaf children and spoken vocabulary of children with normal hearing are characterized by the use of nouns, especially names of people, animals and food. It is specific that in normal hearing children onomatopoeia (sounds which mimic animals, vehicles or certain actions such as feeding and sleeping) appears, which is not characteristic for the vocabulary of growing children who are deaf (Anderson, 2006).

Nouns are generally easier to learn than verbs (Bornstein & Cote, 2005). Nouns tend to occur before the verb and to dominate early in children's spoken vocabulary of English (McDonough et al., 2011).

Although in some deaf children of hearing parents the first word appears at the same age as in normal hearing children, when it comes to expanding their vocabulary, deaf children lag behind their normal hearing peers (Easterbrooks & Baker, 2002).

Children of orderly development learn vocabulary indirectly as well as directly (Armbruster, Lehr & Osborn, 2003). Most of the vocabulary knowledge is acquired indirectly, through everyday interactions with grown-ups, siblings and peers through everyday conversations, games, verses, songs and reading (Burns, Griffin & Snow, 1999; Landry & Smith, 2006).

Work on enriching children's vocabulary includes determining the quantity and quality of every child's vocabulary in terms of its linguistic status – development. Enriching of children's vocabulary represents expanding children's experience and development of their opinions which we form in speech and sign (gesture) (Kovačević, 2005; Kovačević, 2013).

Numerous studies indicate that the vocabulary of children who are deaf and hard of hearing is quantitatively reduced in comparison with that of their normal hearing peers. Deaf and hard of hearing children form vocabulary later and learn new words more slowly (Coppens et al., 2010; Cole & Flexer, 2007; Easterbrooks & Estes, 2007; Lederberg, 2003; Lederberg & Spencer, 2001; Montgomery, 2007; Marschark & Wauters, 2008; Paul, 2009; Rose, McAnally & Quigley, 2004; Schirmer, 2000; Trezek, Wang & Paul, 2010, according to Luckner & Cooke, 2010).

In developing a child's vocabulary, an important place is held not only by developing the child's ability to understand, but also to actively use an ever larger and larger number of words.

CONCLUSION

The results obtained in preschool children, point out that the number of used words is different in each of the five surveyed areas.

Deaf and hearing impaired children of preschool age used, on average, a larger number of signs (gestures) than spoken words. The active vocabulary obtained through sign mode of expression is the most advanced. Sign vocabulary is the vocabulary in use, which deaf and hearing impaired children of preschool age use in their everyday communication.

Certain differences are evident in certain lexical fields, in relation to the total number of words and different ways of expression in preschool children.

Within sign and spoken forms of expression, children achieved the best results within the *Food and drink* lexical field, and the worst in the *Professions* lexical field.

Deaf and hard of hearing children adopted and produced best the numerous nouns that signify food and drink, and rarely used nouns that signify people's professions.

Through qualitative analysis within the five lexical fields: *Family, Food and Drink, Professions, Travels and House*, in deaf and hard of hearing children of preschool age, the most frequently used terms were obtained, as well as specific and inadequate answers (depending on how children perceived images).

Some lexical particularities of each lexical field were observed: certain terms were given only in sign-gesture; some children with cochlear implants named terms through sign – gesture with onomatopoeia or pronunciation of sentences; some children perceived notions wrongly.

Sign language expression in preschool children is more developed and with more content in comparison to spoken expression. The level of development of sign and spoken language expression depends on linguistic experience, the time that passed from the beginning of amplification, individual treatment, length of stay and participation of children in spontaneous and directed activities carried out in the preschool group, as well as methods used in working with children.

It is necessary primarily to show a deaf child how a particular word is used in speech and make reference to its daily use in speech, because that is the first level of getting to know words.

Mastery of a particular word, notion, by the deaf child, means its practical use in active speech, i.e. its use in everyday life, its use in precisely the appropriate situations, ease of its frequent use.

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