

Mirror Mirror on the Wall: Reflecting Language Growth for Deaf and Hard of Hearing Children

Joan V. Bippus and Nicole Hutchinson

Agenda:

The Science of Early Development

Why Mirrors?

Practical Tips for EI Providers

Application - IFSP Goals

Reflection Activity

Summary



Fact: Brains develop faster during ages 0-3 than at any other time in life

Rapid synaptic growth

Social interaction wires the brain.

Serve & return interactions build neural pathways.

Language is built through interaction, not isolation.



Fact: Over 90% of deaf and hard of hearing babies are born to hearing parents

Early language access = brain development

Visual access is critical

We need simple, accessible, evidence informed tools to support families with young DHH children



**Can something as simple
as a mirror strengthen
early communication?**

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as a mirror strengthen
early communication?**

Yes! Let's explore why.

Spatial Awareness

Mirrors can be used strategically around the home or classroom to provide visual access.

Babies can see their parents or siblings moving and communicating behind them while they are playing.

Provides visibility in hidden corners and reduces missed communicative cues



Imitation

Mirrors are an easy addition to play areas and can be used to practice imitation skills.

Common milestones like clapping, waving, or touching their nose are reinforced when they can see themselves in the mirror.



Eye Contact & Joint Attention

Mirrors can be used during natural play interactions with caregivers to strengthen eye gaze shifts, turn-taking, and joint attention.

Allows the child to see their caregiver and themselves simultaneously.





Self Recognition

Mirrors support the development of self-recognition throughout the early years.

Caregivers can play mirror games, like copying facial expressions and peek-a-boo to develop these skills.



Developmental Milestones for Self Recognition

Birth to 6 months: Infants are fascinated by faces and light in the mirror but do not recognize themselves.

6 to 12 months: They may smile, vocalize, and interact with the "other baby" in the mirror.

12 to 18 months: Toddlers begin to understand the reflection is their own, sometimes becoming shy or cautious.

18 to 24 months: Most children pass the "rouge test" (or "mark test") by touching their own face when they see a spot of red color placed on their nose or forehead in the reflection.



Emotions & Self Regulation

Babies and toddlers will smile, babble and make faces at their reflection. This helps them identify and practice different facial expressions and associate them with emotions.

Parents and caregivers can point out their expressions in the mirror to reinforce this skill. “I see your eyebrows are furrowed, you look angry”



Language Feedback for DHH children

Much like hearing babies who receive acoustic feedback when they hear themselves babbling, mirrors allow DHH babies who use ASL to see themselves signing.

This language play provides critical opportunities for self correction and fine tuning.

Mirrors support:

Handshape clarity

Movement orientation

Mouth and facial movements

Real-time imitation



Where should we put mirrors?

Walls

Floor

Back of furniture

Ceiling (or suspended)

Play areas

Blind corners

Self-help areas



Everywhere!

Application

How can we use mirrors to optimize IFSP outcomes for DHH children?

Self Help Skills

"When at the sink, Maya will rub her hands together under running water and rinse off soap with minimal physical guidance in 4 out of 5 opportunities."



Gross Motor Development

"Leo will hold his head up at a 90 degree angle and turn his head to look at a caregiver or toy for 3 minutes during supervised play, 3 times per day."



Shared Reading

"Max will engage with a caregiver while reading by pointing to pictures and turning pages for at least 2 minutes in 3 out of 4 opportunities."



Reflection

Turn to a neighbor (or reflect on your own).

Identify one new way you will use mirrors in your current work (home visits, classrooms, therapy sessions, family coaching).

Keep in mind ways to use mirrors to support IFSP and language development goals!

In summary...

Mirrors are:

Accessible

Inexpensive

Evidence informed

Effective across communication modalities

Easy to embed in routines

Small tool. Big developmental impact!

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For more information:

Visit our Website: KDES.gallaudet.edu

Contact Us:

Joan (JV) Bippus, ECE Program Manager
jv.bippus@gallaudet.edu

Nicole Hutchinson, Parent Infant Program Teacher
nicole.hutchinson@gallaudet.edu

REAL: REGIONAL EARLY ACQUISITION OF LANGUAGE

Ending Language Deprivation for All Children

Serving families, early intervention professionals, and the medical community with resources, training, and programming in their area.



90% of a child's **brain development** happens before age 5.



96% of deaf babies are **born** to non-signing hearing parents.



Early access to ASL leads to improved cognitive, linguistic, and socio-emotional development that continues through adulthood

REAL RESOURCES FOR LANGUAGE ACQUISITION

Setting Language in Motion

A free, web-based resource by the Clerc Center and Boston Children's Hospital that supports early language development in deaf and hard of hearing children for educators, professionals, and families.

clerc.cc/slim

Bilingual Stories Bookshelf

A free app with over 45 storybooks in ASL & English for children to watch, read, and learn!



clerc.cc/bsbapp

Top 10 Signs

A free kit provided to medical and early intervention settings that helps parents learn common signs.



clerc.cc/toptensigns

Language Acquisition Toolkit

A training kit breaking down 15 principles for reading to deaf and hard of hearing children.

clerc.cc/langtoolkit

Want more resources?

Deaf Education Connections

clerccenteronline.com





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Who should join?

Deaf Education Connections is a free online membership portal open to anyone who is passionate about improving educational outcomes for deaf and hard of hearing children.



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