DEAF EDUCATION AND THE CLAIMS OF THE DEAF

by

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Deaf Education and the Claims of the Deaf

Abstract

Historically deaf education has been dominated by an ongoing struggle between interest groups regarding methods of communication. It is a context where the claims of different groups have had disparate influence on policy. The claims of the Deaf, the linguistic minority group, have been silenced in this historical context. Adopting a theoretical perspective of claimsmaking this qualitative study explored the process by which professionals reached their respective beliefs regarding communication policy. Nine professionals representing the three major communication methods used in deaf education (auditory/oralism, total communication, and bilingual/biculturalism) were interviewed. It was found that the participants' processes of reaching their respective views were subjective, being influenced by such factors as their view of deafness, their personal identity as hearing or deaf, their world view, their life experiences and their educational philosophy. This finding points to the importance of professionals examining how their own culture, experiences and history influence their beliefs which in turn influences practice. In addition the findings highlight the reality that the Deaf are the only ones in society with firsthand knowledge and experience of what it means to be deaf in a hearing society. Therefore, the Deaf can offer valuable insight about the needs of deaf children and should be critical actors in the process of policy development.
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Deaf Education and the Claims of the Deaf

Eight years ago I was introduced to a community of people with a rich heritage, a beautiful language and a remarkable culture - the deaf community. As my contact with this community has increased, my desire to learn more about this community has been cultivated. Thus, eight years ago, I began an ongoing journey of expanding my understanding about the deaf community, their language and their culture.

My initial contact with members of this community took place when I began volunteer work at the Manitoba Provincial School for the Deaf. It was at this time that I began studying American Sign Language (A.S.L.) taught by Deaf adults. Then, in 1989, I became a residential counsellor at a school for the deaf in Ontario. This introduction to A.S.L., the deaf community, deaf culture and the education system, brought to my attention an ongoing controversy regarding the language of the Deaf: whether Sign should be used in the education of deaf children.

I quickly became aware of conflicting positions. There were those who asserted that deaf children should be taught to speak and lipread, the auditory/oral method; those who advocated the use of all methods (i.e., gesture, ASL, signed English, speech, lipreading), the "total communication" method; and those who advocated for the "natural" language of the Deaf, American Sign Language (ASL), to be used in deaf education, the inclusion of deaf culture in curriculum and the hiring of deaf staff as important role models, the bilingual/bicultural method.
This led me to questioning why professionals serving deaf children and their families arrive at such dissimilar and divided positions? How do these professionals arrive at their respective beliefs? And furthermore, what influences professionals' beliefs about deaf education, particularly beliefs regarding communication methods? These questions contributed to my motivation for this present research study which investigates the factors influencing the beliefs of professionals involved in the education of deaf children.

In addition, as my contact with Deaf people has increased and my study of the literature has expanded, I have become aware of a further ongoing struggle underlying the situation of the Deaf in society, which motivated my desire to undertake this research. This conflict centres around the identity of Deaf people.

My contact with this minority group in society has introduced me to a new view of hearing loss, one held by the Deaf. I was surprised to learn that the Deaf do not consider themselves disabled, but view hearing loss as a difference. Consequently, the Deaf do not view themselves as a disability group but as a cultural and linguistic minority group. This claim is rooted in a socio-cultural model of deafness and advocates co-existence and integration, not assimilation. The Deaf desire to integrate in society, and be respected as different. As Doe (1994) explains, "Deaf culture wants hearing people to be sensitive to and accommodating of differences" (4).
Deaf people do not want to be fixed (Doe, 1994; Carver, 1993; Bienvenu, 1989).

However, a conflict exists. The claim of the Deaf that they constitute a linguistic and cultural minority group, co-exists with a competing view of deafness. This rival position is held by the hearing majority who view hearing loss as an impairment, a deviation from the normal, healthy state: hearing. Emphasis, therefore, is placed on remediation and normalization - on overcoming hearing loss to restore "normal" functioning.

This emphasis manifests itself in the education of deaf children. In fact, the competing constructs of deafness are at the core of the methods of communication debate (Lane, 1992; Gregory and Hartley, 1991). This ongoing controversy represents the various and competing claims of interest groups historically involved in deaf education. Different claims have different actors; and I wanted to gain a clearer understanding of the rival claims in deaf education. Also, the apparent magnitude of this controversy highlighted the importance of gaining a clearer understanding of the various positions involved. Furthermore, as a hearing professional I believed that engaging in this research process would encourage me to look at my own beliefs on this issue. For these reasons, I directed the enquiry of this research around the methods of communication debate.

This study is particularly relevant to the social work profession. History demonstrates that the deaf community's
claims regarding the education of deaf children have had little, if any influence in the historical process of policy development (Lane, 1984; Sacks, 1989). Furthermore, this cultural minority group charges that the education system has failed to educate deaf children equitably (Johnson, Liddell and Erting, 1989). The deaf community views the transformation of the existing education system as integral to the welfare of their community (Lane, 1992). Thus, social work's professional commitment to enhancing or restoring individuals', groups' or communities' capacities for social functioning and to create societal conditions favourable to their goals (NASW, 1973) is applicable in this situation. This research considers the voice and goals of the deaf community. Lastly, social work has a role in the planning, development, analysis and implementation of policy which has a potential impact on different groups in society (BCASW Code of Ethics). This research addresses questions related to policy which directly affects the welfare and well-being of deaf children, their families and the deaf community.

The benefits of this study are many. This thesis contributes to the field of social work research and to research about deafness. It highlights the fact that policy, developed at a macro level, impacts individuals and communities. In addition, this exploration encourages the reader to reach for an understanding of differences which is a valuable practice for social workers. Also, shaped by a claimsmaking approach, this investigation encourages a questioning of which actors should be
influential in the development and implementation of policy. The deconstructive aspect of a claimsmaking perspective allows for a constructivist critique of claims, stressing that multiple meanings and interpretations of events, behaviours and phenomena exist (i.e. hearing loss).

Social constructivism views knowledge as temporary, inscribed in a developmental context, and socially and culturally mediated. It is a view which recognizes that multiple and competing "truths" exist (Grennon Brooks and Brooks, 1993). Constructivism focuses on the process by which people construct knowledge and beliefs. Thus, if the way beliefs are constructed is subjective and culturally mediated, then this work highlights the importance of questioning how our beliefs, biases, and assumptions shape our views which influence the individuals, groups and/or communities we work with. Thus, this thesis is a qualitative research study which investigates the factors which have influenced nine professionals beliefs about communication policy in deaf education. It focuses on beliefs, and how beliefs become constructed.

For the purposes of this study, I will use a capital to signify the difference between deaf, an audiological hearing loss which obstructs an individual's ability to hear or understand speech, with or without the use of a hearing aid (Story, 1989), and Deaf, an individual who identifies with the Deaf, cultural minority group (Sacks, 1989). This distinction is valuable for there are those deaf individuals (the oral deaf)
who identify with the hearing culture for any number of reasons: maybe they lost their hearing later in life, after language and speech had been acquired, or perhaps they were raised orally, integrated with hearing children. Furthermore, there are those Deaf individuals who audiologically may be classified as hard of hearing, who however, may identify themselves as culturally Deaf and view themselves as part of the deaf community.

It is important to note that this study is concerned with the claims of the Deaf cultural minority group. Thus, the claims of the Deaf discussed in this paper cannot be generalized to include all people with a hearing loss. In addition, as with any group in society the deaf community does not represent a cohesive, homogeneous group. In fact the deaf community is heterogeneous and therefore, the findings should not be generalized to represent the views of all deaf individuals who view themselves as part of the deaf community.

The first chapter of this thesis will provide a summary of the history of deaf education. It is an area where the claims of the hearing professionals and the Deaf clearly manifest themselves (Lane, 1984; 1992).

The second chapter of this thesis will present a theoretical framework of claimsmaking as developed by Drover and Kerans (1993). The philosophical assumptions of this theory will be presented; the strengths and weaknesses of a claimsmaking approach will be discussed; and finally, the applicability of this theory to understanding the situation of
the Deaf in society will be explored.

The third chapter of this thesis will present a qualitative research project which investigates the factors influencing the beliefs of nine professionals about the methods of communication used in deaf education. This chapter will present an overview of related literature and present the methodology used in the study. Different claims have different actors. Thus, this study, in exploring the factors which influence professionals' beliefs about communication methods, explores the process by which the beliefs of the various actors have evolved.

The fourth chapter will present the findings of the research study. The themes which emerged through the process of data analysis will be presented and supported with verbatim quotes from the nine qualitative interviews.

Finally, the fifth chapter will discuss the findings and implications of this study. The findings relationship to the literature and to the theoretical perspective of claimsmaking will be examined. Finally, this chapter will explore the implications of this research in relation to policy, practice considerations, and future research.
Prior to 1750, the Deaf were treated by law and society as imbeciles because of their inability to speak, and they were thought to be incapable of reason. By law, the deaf were denied all legal rights and in the Middle Ages, they were thought to be barred from heaven because they could not say the sacraments (Baynton, 1993). In addition, society viewed the deaf as uneducable (Plann, 1993).

During the Middle Ages, Aristotle's teachings were generally accepted as authoritative (Pahz and Pahz, 1978). Aristotle was said to have equated deafness with an incapacity for reasoning (Carver, 1988). "Since Aristotle's writings were generally accepted as authoritative throughout the Middle Ages, those who were deaf were considered unreachable, for no educated man would waste his time on an acknowledged impossibility" (Ibid, p. 5). It should be remembered, however, that education, even for the general population, was limited. As Kenneth Hodgson (1954) pointed out, "a world which saw nothing wrong in abandoning most of its population to untutored ignorance naturally did not remark the neglect of the deaf. The idea of abandoning the deaf was not only tolerated, any other notion would have seemed absurd" (Pahz and Pahz, 1978, p. 6). It is clear, however, that society, the law and the church all had a role to play in the exclusion of the deaf from society.

In the 16th century, a revolutionary declaration was made by Girolamo Cardono of Milan. He stated that "we can accomplish
that a deaf-mute [sic] hear by reading and speak by writing" (Pahz and Pahz, 1978, p. 6). This proclamation directly contradicted the position of Aristotle and a movement to consider the deaf as educable was under way.

The establishment of education for the deaf, however, was a slow process. In the earliest times, education was only accessible to the wealthy (Ibid). Because enduring laws recognized persons who were deaf but could speak, education focused on teaching speech (Pahz and Pahz, 1978). Thus, the education of the deaf in the 16th and 17th centuries was primarily concerned with teaching speech as a means of ensuring the legal rights and property of aristocracy who were deaf (Lane, 1984).

The 18th century saw the establishment of the first permanent schools for deaf children. A French Catholic cleric, l'Abbe de l'Epée, founded the first public school for the deaf, which accepted both the wealthy and the poor, in 1750. It is held that the Abbe was motivated by his concern for the salvation of his deaf pupils (Lane, 1984; Pahz and Pahz, 1978). Unlike others before him, however, he considered sign to be the "mother tongue" of the deaf and saw no reason to teach them articulation [speech] (Ibid). He therefore studied and systematized the gestures of his deaf pupils and used this mode of communication to educate them (Lane, 1984).

The success of this method quickly spread and before his death, in 1789, de l'Epée had started 21 schools for the deaf in
France. It was at these schools that many Deaf discovered communication for the first time. One of l'Abbé de l'Epée's students, Desloges, has written about Sign:

[it] made our ideas accurate, extending our comprehension by getting us to form the habit of constant observation and analysis. This language is lively; it portrays sentiment, and develops the imagination. No other language is more appropriate for conveying strong and great emotions. (Sacks, 1989, p. 20)

Another hearing man of this time, after observing a gathering of Deaf men at a banquet, has written this about Sign:

It seems [wrote the chronicler, obviously dazzled], that 60 men deprived of hearing and speech should have constituted a painful and grievous sight; but no, not in the least. The human spirit so animated their faces, most of which are truly beautiful, it shines forth from their lively eyes, it blazes its way so rapidly to the tips of their fingers, that instead of pitying them, one is tempted to envy them. When, in the courtroom, in the pulpit, in the theatre, and in society, we so often hear words without thoughts, it is rather agreeable to see, at least once a year, thoughts without words.

It is no exaggeration to say that none of the orators we most admire could even remotely compete with Berthier, Forestier, or Lenior for the grace, the dignity, and the correctness of their gestures. In truth, seeing the speeches that these three young men deliver is enough, I think, to make us wish we could unlearn speech. (Mottez, 1993, p. 35 - 36)

The successes of the Abbé's method began to become visible and Sign began to gain the approval of educators and others.

In 1816, Abbé de l'Epée's method of educating the deaf spread to the United States. One of his former students who was Deaf, Laurent Clerc, came to the U.S. with Thomas Hopkins Gallaudet and, together, they established the first U.S. school for the Deaf in Hartford in 1817 (Lane, 1984). At this school,
all the teachers were fluent in American Sign Language (ASL) and many of the teachers were themselves Deaf (Ibid).

"The rise of deaf literacy and deaf education was as spectacular in the U.S. as it had been in France, and soon spread to other parts of the world" (Sacks, 1989, p. 24), including Canada, where the first school was established in 1856. This period in time, from 1750 to 1880, saw the emergence of the Deaf from neglect and obscurity, their emancipation and enfranchisement, and their rapid appearance in positions of eminence and responsibility - Deaf writers, Deaf engineers, Deaf philosophers, Deaf intellectuals. What was thought previously inconceivable was suddenly a reality (Sacks, 1989).

It was during this early period in deaf education when nearly all educators (many of whom were Deaf) considered sign language indispensable (Baynton, 1993). "They [educators] respected and admired sign language, cultivated their signing skills with care and pride, and wrote learned treatises on its nature and proper use" (Ibid, p. 93).

However, a late-nineteenth-century movement to prohibit sign language in the schools dramatically transformed the education of deaf people (Ibid). Sloss Luey (1987) suggests a few possible reasons that contributed to the growing counter-current to manual approaches. One contributing factor may have been growing reports of successful oral programs in Europe (Ibid). Secondly, Sloss Luey (1987) proposes that in order to provide education to younger deaf children, day schools were established. In these
Another factor argued by Baynton (1993) was the growing prominence of evolutionary theories. He states:

The reasons for the turn against sign language were many and complex, but among them was the influence of the new theories of evolution. Evolutionary theory fostered a perception of sign languages as inferior to spoken languages, fit only for "savages" and not for civilized human beings. (p. 93)

Sign language had been superseded by speech long ago, so it was necessarily inferior and deserving of extinction (Ibid). An example of this theory's influence is demonstrated by the following quote of an oral proponent:

Articulate language is superior to sign, because it is the method employed by nature. Modern science teaches us that what is natural ends up with the upper hand... No doubt signs are often animated and picturesque but they are absolutely inadequate for abstraction. (Lane, 1991, p. 119)

This thinking had implications for education policy. "Just as sign language had been supplanted by speech in the advance of civilization, so too was the use of sign language in deaf education - like all the ideas of a cruder and less advanced age - being rendered unnecessary by progress" (Baynton, 1993, p. 101).

Related to the growing prominence of evolutionary theories, the oralist approach began to gain the support of prestigious, powerful men whose claims were rooted in evolutionary theories (Baynton, 1993; Sloss Luey, 1987; Lane, 1984). Advocates of the oral approach claimed that the goal of educating the deaf should
be teaching the deaf to speak. They insisted not only that training in oral communication be offered, but also that all classes be conducted solely by oral means.

Oralists charged that the use of sign language damaged the minds of deaf people, interfered with the ability of deaf children to learn English, and reduced the motivation of deaf students to undertake the difficult but, in their view, crucial task of learning to communicate orally. (Bayton, 1993, p. 93 - 94)

The oralists argued for the overthrow of the "old fashioned" Sign Language Asylums and for the introduction of "progressive" oralist schools (Sacks, 1989).

Laurent Clerc (a prominent Deaf leader) was well aware of this movement to undermine his efforts.

I know what's going on. Important people, distinguished gentlemen, are repudiating the cause to which I have devoted my life. Endowed with the sacred trust of my people's welfare, they seek, without consulting us, to prevent our worship, marriage, and procreation, to stultify our education, and to banish our mother tongue simply because our way and our language are different from theirs. (Lane, 1984, p. 3)

One of the "important people, distinguished gentlemen" to whom Clerc refers was Alexander Graham Bell; and it is argued that the scales of the debate between oralism and sign were finally overbalanced and tipped when Alexander Graham Bell threw all the weight of his immense authority and prestige into the advocacy of oralism (Sacks, 1989).

Alexander Graham Bell was an influential advocate of oralism and "eugenics". Backed up by his wealth and fame arising from his telephone invention, he campaigned against sign language and intermarriage among the deaf, pushing for
compulsory sterilization in deaf girls (Carver, 1988, p. 84). Alexander Graham Bell spoke at conferences proclaiming the superiority of oralism (Lane, 1984). As Alexander Graham Bell put it, to "ask the value of speech, is like asking the value of life" (Bell, 1884, p. 178). In fact, he predicted that through the process of natural selection and the free competition of methods, oralism would prevail as the "superior" method (Bell, 1898). As a result of Alexander Graham Bell's efforts many deaf teachers lost their jobs in schools for the deaf, legislation was enacted in some states providing for compulsory sterilization of deaf girls and an oral communication regime imposed on deaf students for many years (Carver, 1988; Lane, 1984; Mitchell, 1971).

One of the most infamous congresses on deaf education occurred in 1880 in Milan. At the International Congress of Educators of the Deaf in Milan, a vote was held to settle the oral/manual debate. Many speakers had an opportunity to voice their positions. One Deaf man speaking for the Deaf section shared:

We have no objection to the search for improvements in the oral method. Why would we?...we ask only one thing: that our natural language, the language of signs, be not sacrificed for spoken language.

A bird am I!
Behold the wings by which I fly,
Nor, cruel, them to me deny.

(Lane, 1984, p. 410)

Despite the chorus of voices which decried the suppression of signs in the education of the deaf, the oral method overwhelmingly won. Prior to holding the vote it was decided
that the Deaf, whom comprised an estimated 41 percent of teachers of the deaf worldwide, were to be excluded from the vote (Sacks, 1989). Thus, the claim of the oralists (hearing educators), that the goal of deaf education should be teaching the deaf to speak, won.

Bell, commenting on the Milan proceedings, agreed with excluding the deaf from the congress deliberations: "It goes without saying that those who are themselves unable to speak are not the proper judges of the value of speech to the deaf" (Lane, 1984; 410). On the other hand, Gallaudet, a proponent of the simultaneous method\(^1\), referred to the conference as a "stacked deck", where the vote for oralism was preordained (Winefield, 1987, p. 35).

After Milan, support for the oral method grew among hearing professionals. By the end of the 19th century, oralism was the officially preferred method of instruction for deaf children (Pahz and Pahz, 1978). "By 1900, nearly 40 percent of American deaf students sat in classrooms from which sign language had been entirely banned; over half were taught orally for at least part of the day. By the end of World War I, nearly 80 percent of deaf students were taught entirely without sign language" (Baynton, 1993; 94). In addition there was a dramatic decline in the number of Deaf educators (Sloss Luey, 1987). The disappearance of Deaf teachers from deaf education was a symptom

\(^1\) the method which promotes signed English and spoken English simultaneously.
of and a contributing factor to the suppression of Sign
language.

In North America, the period of time between 1900 - 1970
was characterized by oral domination (Sloss Luey, 1987).
Contributing to the steady growth of oralism were the
technological developments of amplified sound at the turn of the
century (Pahz and Pahz, 1978). Technological inventions opened
opportunities for students to use their residual hearing for the
acquisition of oral language (Sloss Luey, 1987). This faith in
technology to remedy or diminish the effects of hearing loss
was/is congruent with the growing predominance of and faith in
the medical profession in North America.

Something akin to a mythology has accompanied the
increased social prominence of biomedicine, an
optimism founded on an unwavering faith in
technological or invasive solutions to infirmities and
other mortal "failings." (Bickenbach, 1993, p. 46)

Thus, a predominance and reliance on technological breakthroughs
penetrated the pedagogy of the deaf beginning at the turn of the
century with the discovery of amplified sound. In fact, the
20th century has been referred to as "the era of electrical
amplification" in deaf education (Pahz and Pahz, 1978).

Throughout this same time, assimilation policies and
practices were prominent in North America. One example of these
practices is the experience of First Nations Peoples. Congruent
with assimilation practices, educational polices relating to
deaf children have "centred on what means of communication
should be implemented or inspired in deaf children in order for
them to match more closely the normative and behavioral
expectations of hearing children" (Johnson, Liddel and Erting,
1989, p. 3).

Despite objections from the deaf community and their few
hearing advocates the oral approach dominated from the 1900's to
the 1970's. Those supporting the use of sign language in deaf
education predicted a dramatic deterioration in the educational
achievement of deaf children and the literacy of the deaf in
general (Sacks, 1989). They claimed that Sign was the natural
language of the deaf, and pointed out that
deaf people show no native disposition whatsoever to
speak. Speaking is an ability that must be taught to
them and is a labour of years. On the other hand,
they show an immediate and powerful disposition to
Sign, which as a visual language, is completely
accessible to them. (Sacks, 1989, p. 31)

As Lane (1984) asserts the claims of the deaf are epitomized by
the words of Robert P. McGregor, deaf orator, writer, school
principal, and first president of the National Association of
the Deaf:

By whom, then, are signs proscribed? By a few
educators of the deaf whose boast is that they do not
understand signs and do not want to; by a few
philanthropists who are otherwise ignorant of the
language; by parents who do not understand the
requisites to the happiness of their deaf children and
are inspired with false fears by the educators and
philanthropists.

These few have banded together and, backed up by
unlimited wealth, send forth men and women who travel
all over the country from Maine to California the year
round, insidiously creating and fostering everywhere a
false, a forced, an artificial sentiment against
signs. They also have access to the public press and,
making use of impecunious and sensational writers,
seek to make what is old appear new and convince the
uninitiated that what is white is black. And worst of

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all they ignore the deaf themselves in their senseless and mischievous propaganda against signs. Professing to have no object in view but the benefit of the deaf, they exhibit an utter contempt for the opinions, the wishes, the desires of the deaf!

And why should we not be consulted in a matter of such vital interest to us? This is a question that no man has yet answered satisfactorily.

The utmost extreme to which tyranny can go when its mailed hand descends upon a conquered people is the proscription of their national language, and with the utmost rigor several generations are required to eradicate it. But all the attempts to suppress signs, wherever tried, have most signally failed. After a hundred years of proscription in German and Austria, they still flourish, and will continue to flourish to the end of time.

What heinous crime have the deaf been guilty of that their language should be proscribed? (Lane, 1984, p. XVI - XVII)

Despite these ongoing claims of the Deaf, the manual position was/is met with resistance. One example of the severity of response to the claims of the Deaf occurred when the editor of the Silent Worker, George Porter, printed controversial stories countering the oralist agenda during the 1928 - 1929 school year (Buchanan, 1993). At the school in New Jersey where the Silent Worker was published, the superintendent, Pope, asked Porter to retire, accusing the 61-year old Deaf teacher of "slipping" in his job (Ibid). In addition, five other Deaf teachers were fired (Ibid). At the close of the school year in 1929, no deaf teachers remained in the school's academic departments (Ibid). Lastly, Pope ended publication of the Silent Worker (Ibid). Clearly, there have been costs associated to levying claims against those with power; and despite the protests of the deaf community to the oral method, the oral approach continued to dominate.
In the 1970's, however, the educational use of manual communication began to grow. There were many historical factors which contributed to this change in momentum. The educational achievement of deaf students, as a group was extremely poor despite the large monetary investments by government to improve the situation (Johnson, Liddell and Erting, 1989). Consequently, in the early 1960's, the United States government commissioned Dr. Homer Babbidge to conduct a study of deaf education across the United States. His research pointed to the failure of the oral method sparking a debate over communication methods (in personal communication, Carver, November, 1994). In addition the first book on Sign was published promoting American Sign Language as a natural language (Stokoe, 1965). Also, "the civil rights movements led to increased acceptance of human differences of all kinds, and encouraged deaf people to become assertive about their rights and opinions" (Sloss Luey, 1987; 3). These factors provided the impetus to find new methods of educating deaf children.

The system that was developed has become known as total communication. "The hope was to develop a system which would offer the advantages of both manual and oral systems: the benefits of knowledge of English combined with the accessibility of a visual system" (Ibid).

In the beginning, total communication had the support of the deaf community. One leader in the deaf community explained his experience this way:
At first I supported sign supported speech [total communication], then signed English. But you have to remember that at that time research about ASL was very, very new... and at that time many deaf people supported signed English, total communication. It was the first step to acceptance of sign language. Before that time you were not allowed to sign. Period. So people felt good about being allowed to communicate with their hands. It didn't matter whether it was ASL or signed English. It was signing. It was the beginning of a process. (in personal communication, February, 1994)

Total communication continues to be the predominant method of communication used in deaf education at present. Although in theory this method proposes the use of all methods (i.e. gesturing, signed English, auditory skills, oral skills, ASL) the predominant method used in practice is sign supported speech. A method where the teachers speak and sign in english word order simultaneously.

Since the mid-1980's, however, a movement supported by many advocates in the deaf community has emerged - the bilingual/bicultural method. This method calls for the introduction of ASL as the language of instruction and the introduction of deaf culture in school curriculum. This method is based on the assumption that ASL is the natural language of deaf children. It also stresses that learning the content of the educational message is what is important, not the form used to express the message.

Numerous factors have contributed to the emergence of the bilingual/bicultural proposal among the Deaf. First, the continued ineffectiveness to the education system despite the implementation of total communication is one contributing
factor. Paul (1988) explains,

Since the 1970's, most deaf students have been educated in T.C. programs in which some form of signing and speech is used simultaneously for communication and instructional purposes. Despite improvement in the development of tests, early amplification, and the implementation of early intervention or preschool programs most students are still functionally illiterate upon graduation from high school. (p. 3)

Second, research studies have repeatedly demonstrated that deaf children of deaf parents perform better academically than do deaf children of hearing parents (Stevenson, 1964; Stuckless and Birch, 1966; Meadow, 1968; Vernon and Koh, 1970; Corson, 1973). One major difference in the experience of the better performing group was early exposure to ASL (Sloss Luey, 1987). In addition, research (Supalla, 1986; Johnson, Liddell and Erting, 1989) has demonstrated that signed English used in the majority of deaf education programs is not comprehensible. The research has demonstrated that when a teacher signs and speaks at the same time, the auditory sense dominates while the signed portion of the message suffers. Thus,

it is not an exaggeration to say that the signed portion of the [message] in virtually all of deaf education is only partially comprehensible, even to skilled native signers. It is also not an exaggeration to say that often the signed portion of the sign supported speech in classrooms is largely unintelligible. (Johnson, Liddell and Erting, 1989, p. 5)

Another factor, which has contributed to the momentum and support for a bilingual/bicultural model among the Deaf is the growing international recognition that sign languages are the natural languages of the Deaf. For example, Sweden was the
first country, in 1981, to declare Swedish Sign Language as the first language of Deaf people (Carbin, 1993). This has led to the requirement that Swedish schools for the deaf use Swedish Sign Language (SSL) in the classroom (Ibid).

The deaf community's growing political actions and visibility is another factor influencing the support for a bilingual/bicultural method. One political action of the Deaf occurred in 1988 when the Deaf students of Washington, D.C. walked out of classes and effectively shut down Gallaudet university for a week (Carbin, 1993; Sacks, 1989). This action captured the attention of the World (Carbin, 1993). The revolt was a protest of the appointment of a hearing president at the university. Upon resigning, the hearing president is quoted as saying, in reference to the Gallaudet uprising: "It's unique, a civil rights moment in history for Deaf people" (Sacks, 1989, p. 153).

The Gallaudet event sparked uprisings to protest the education situation in many regional communities (Carbin, 1993). In fact, in July of 1989 marches for deaf education rights took place all over Canada in the major city centres. In Ontario, for example, the "Deaf Ontario Now" movement began in its infancy (Ibid). The protests and lobbying of the Ontario Government placed the issue of deaf education in the political arena (Ibid). In Ontario on July 29, 1993, the provincial government recognized and authorized, in law, the use of American Sign Language (ASL) and Langue des Signes Quebecois.
In analyzing the revolt at Gallaudet, one sees that there has been a growing consciousness in the deaf communities: an appreciation of their unique culture, a sense of Deaf pride, a strong value placed on ASL. Some claim this growing movement was propelled forward by the research of William Stokoe (1960's) who argued that ASL is a language and who drew connections between the language of the Deaf and culture. Another influential person has been Barbara Kannapell, a prominent Deaf woman who founded an organization dedicated to deaf-consciousness raising in 1972 called Deaf Pride (Sacks, 1989).

It may be argued, however, that this movement of Deaf pride started in the 18th century with great leaders like Laurent Clerc, but the majority of the hearing world refused to hear the voice of the Deaf. Finally, in March of 1988, hearing people were forced to take notice. The strike at Gallaudet has been a political statement to those who think they are in power. One Deaf professor explains,

> It's very simple. No Deaf president, no university. It is the first time Deaf people ever realized that a colonial client-industry like this can't exist without the client. It's a billion-dollar industry for hearing people. If deaf people don't participate, the industry is gone. (Sacks, 1989, p. 156)

Clearly, there is a growing movement in the regional deaf communities to lobby governments to hear their claims.

Despite the emerging voice of the Deaf in this historical context, the adoption of American Sign Language (ASL) and the bilingual/bicultural method is met with resistance. In fact,
this is an intensely debated issue and most hearing professionals in positions of power and influence are resistant to introducing ASL as a language of instruction (Lane, 1992). In fact, the majority of education programs in North America continue to utilize total communication models. In addition, there continues to be a few strong oral programs. These methods continue despite the ongoing claims of the deaf community and the present ineffectiveness of deaf education to educate deaf children equitably.

Conclusion

In conclusion, the methods of communication debate is an ongoing struggle which has persisted since the beginnings of deaf education. It is a controversy which has been at the heart of all discussions about the pedagogy of deaf children (Johnson, Liddell and Erting, 1989; Pahz and Pahz, 1978), a history of political struggle between interest groups and their respective claims. In examining this struggle, the power imbalance between these groups begins to manifest itself more clearly. In fact, when exploring the history of the deaf within society, the method of communication debate takes centre stage and it becomes clear that the views and beliefs of the hearing majority have played the dominant role in deaf education policies (Lane, 1992; 1984).
Chapter Two
Claimsmaking and the Deaf

This next chapter examines the theoretical framework guiding this present study. In light of the previously discussed historical context, a theoretical framework of claimsmaking provides an alternative conceptual approach to understanding the competing claims of interest groups in deaf education. This theoretical perspective is rooted in the notion of social action and specifically focuses on claimsmaking (Drover and Kerans, 1993). An overview of the theory's major assumptions will be discussed; the strengths and weaknesses will be explored; and the applicability of this approach in understanding the history of the deaf will be examined.

Welfare Theory and Claimsmaking

A claimsmaking approach assumes that individuals in communities are aware/become aware of the needs and goals necessary in developing their human capacities. Thus, it is an approach which takes as its starting point the claims of individuals and communities. In addition, it is an approach which views welfare not only as relating to the distribution of resources, but in fact entailing three stakes: identity, resources and relationships (Drover and Kerans, 1993; p. 5). The next part of this chapter will examine Drover and Kerans'(1993) approach to welfare. It will discuss this framework of claimsmaking and response by outlining its view of human agency and knowledge; by examining how this approach views society and institutional accountability; by discussing the
ethical and moral criteria; and lastly, by exploring the
dynamics of claimsmaking.

View of Human Agency and Knowledge

**View of human agency.** The claimsmaking approach to welfare
attends to the most basic issues of knowledge and being. In
regards to its ontological assumptions, this theory moves from
viewing our nature as fixed and unchanging to a concept of human
agency: human beings as self-transforming agents, capable of
self-reflection (Drover and Kerans, 1993). In relation to human
welfare and well-being then, welfare is viewed as the
development of human capacities (Ibid, p. 6).

In conjunction with Benhabib (1986, p. 340), Drover and
Kerans (1993, p. 6) assert that the development of human
capacities entails two levels: self-actualization which points
to the range of capacities which people seek to develop, and
self-determination which is grounded in critical reflection
which enables people to understand who they really are by
developing a genuine autobiographical narrative. Thus, an
important aspect of the process of claimsmaking is the
development of the social identity, both individually and
collectively.

Another assumption of human agency is that individuals are
interdependent and require relationships of mutuality,
reciprocity and trust when formulating and articulating claims
relating to their social identity and identified needs (Ibid).
View of knowledge. Epistemologically, the claimsmaking approach moves away from an empiricist, positivist tradition and embraces a hermeneutic paradigm. Drover and Kerans (1993), however, do not reject objectivism, but attempt to integrate objectivist and subjectivist accounts of human welfare based on everyday practice and social struggle (Ibid, p.29), embracing a theoretical framework of claimsmaking and responses.

In starting with claims, the claimsmaking approach legitimates that human capacities can best be understood and articulated within the cultural context in which people name their needs (Ibid, p.12). Thus, Drover and Kerans (1993) utilize the thin-thick concepts of needs developed by Fraser (1989): a thin notion of need is abstract, objective and universal; and a thick notion of need is rooted in the particularities of people's everyday experiences, their cultural context and historical situation (Drover and Kerans, 1993, p. 11-12). Rather than being in opposition to one another, these concepts are complementary, constituting a continuum.

By embracing a thick notion of needs as the starting point, however, the claimsmaking approach focuses on the politics of need interpretation (Ibid, p. 13). The struggle of need interpretation then is the ongoing process by which claims become formulated, articulated and then responded to, the "dynamics of claimsmaking".

One important assumption of this theoretical framework of claimsmaking and response "presupposes a stable civil society,
protected by a state which is recognizant of diversity and of rights" (Drover and Kerans, 1993; p. 249).

**View of Society and Institutional Accountability**

In the claims-making approach society is viewed as a system comprised of opposing groups with respect to interests, values and expectations (Mullaly, 1993). Competition between groups for resources and power is considered natural. What is unnatural is the way in which the hierarchical structuring of power shapes whose interests, goals, values and expectations dominate (Pfohl, 1985). Thus, society consists of relations of domination and subordination, structured patterns of inequalities which are perpetuated by structures of legitimation and signification (Drover and Kerans, 1993, p. 15).

Claimsmaking, therefore, occurs in an hegemonic context where the response to claims is to preserve the hegemonic order (Ibid, p. 13).

In identifying a hierarchical structuring of relations where the hegemonic discourse dominates, this approach recognizes the constraining and oppressive nature of institutions. However, a liberating element is also acknowledged (Drover and Kerans, 1993, p.16). Drover and Kerans (1993) point out that institutions provide structure which potentially offer "rules and resources on which knowledgeable agents can draw creatively to modify established social practices" (p. 16).

Yet the claims-making approach begins with the experience of
those who experience the oppressive effects of institutions (Ibid, p. 16) and presents a framework where "those without power are heard out as carefully as any other" (Ibid, p. 13). This starting point highlights the importance of acknowledging the damaging and oppressive nature of many institutions in the everyday lives of people.

The approach, therefore, is concerned with societal transformation (social action) which results in emancipatory participation and freedom from domination (Mullaly, 1993). Emancipation is not so much an end-state to be achieved as it is a demand to put an end to practices that can be shown to be exploitive and oppressive (Leonard, 1990). Thus, one goal of welfare, emancipation, is an activity that must be constantly renewed as new 'limit situations' emerge (Freire, 1970).

**Ethical and Moral Criteria of Claimsmaking**

One of the requirements of a framework of claimsmaking and response is the "capacity of self-reflection, whereby a subject articulates an abstract need" (Drover and Kerans, 1993, p. 8). Furthermore, this framework requires a "capacity to take the standpoint of another, to savour the differences and then to be able to bridge that difference with apt communication" (Ibid, p. 8). Thus, mutual recognition, communicative competence and reciprocity whereby each recognizes the other as equally an agent, are important moral criteria for developing autonomy and striving for emancipation (Drover and Kerans, 1993, p. 8).
Dynamics of Claimsmaking

Claimsmaking is a dynamic, social process. In fact, Drover and Kerans (1993) maintain that "people learn to name their needs, both individually and collectively, and that claims are made at the everyday level of experience" (p. 22). Furthermore, "people become critically aware of their needs through social action, and particularly collective action" (Ibid, p. 23). Thus, the process of claimsmaking, interpreting needs and making these claims public, is a social process and an ongoing political struggle.

One important aspect in the process of claimsmaking involves the identifying and formulation of the claim. Drover and Kerans (1993) suggest claimants come together in groups in order to name their needs and to make their claims public. It is in the social sphere, networks of relationships characterized by mutuality and reciprocity, that individuals and groups come together in a safe space and formulate their claims (Ibid). Formulating claims in community involves a process of refining claims, in order to present rational claims that have a chance of being heard (Ibid). Another aspect of claimsmaking entails making the claims public. However, because claimsmaking takes place in a hegemonic context where structured inequality is legitimated, claimant groups, in considering their needs and purposes, must become aware of their experiences of oppression and formulate objective strategies to transform the existing relations (Ibid). Thus, the process of claimsmaking entails a
subjective element of reflection as well as an objective element of planned action. The process of making claims public is difficult. Because of the hegemonic context of claimsmaking, "the needs of claimants will be expressed inevitably as a criticism of the institutional order" (Ibid, p. 23). The responses to claims which challenge this order are essentially to preserve the hegemonic order (Ibid, p. 13). Thus, the claims which challenge and attempt to change the existing social order will probably not receive outright rejection but will be reframed or co-opted in order to maintain the claimant as a subordinate member of society (Ibid, p. 13). Thus, "there is a filtering process in response to the public claim of a group" (Ibid, p. 25).

Another important aspect of claimsmaking rooted in social action is the collective action of claimants. As Drover and Kerans (1993) assert, "collective action is a principal means by which, in modern society, cultural norms are contested and new claims asserted" (p. 25). This facet of claimsmaking involves social action by groups who strategize ways to have their claims heard and modify the social relations which block them from developing their human capacities. Lastly, this process of collective action enhances the social identity, individual and collective, of the groups involved in the social action (Ibid).

In summary, the process of claimsmaking is complex and dynamic. Individuals and groups may become aware of new needs as they engage the process of claimsmaking. The struggle for
needs interpretation is an ongoing one, and a difficult one when acknowledging the hegemonic context of claimsmaking.

**Critical Discussion**

One criticism of the claimsmaking approach is that it leads to a dangerous level of relativism, which leads to simply an account of a struggle over interests (Soper, 1993, p. 72). This allegation is powerful, if kept to the abstract; however, the requirement for the "sublation of theory to practice" embedded in the notion of social action helps to refute this criticism (Leonard, 1990).

Clearly, every claim cannot be realized, and not every claim should be realized. Therefore, one is always driven back to actual practice as the ground on which knowledge claims are to be verified (Leonard, 1990). Judgements of which claims are heard will depend upon the claims' quality and defensibility, while keeping in mind the availability of resources in determining action (Drover and Kerans, 1993). In addition, decisions must be made in terms acceptable to those who live the consequences of domination (Leonard, 1990). Furthermore, those who are without power must be heard out as carefully as any other (Drover and Kerans, 1993).

A further criticism of this approach refers to the difficulties in bringing about societal transformation as a result of claimsmaking. There is an optimistic assumption in this approach to welfare that if a group articulates its claim in a coherent and defensible way - if a claim has legitimacy -
and in "an ideal speech situation", then other groups will support social change in order for this claim to be met. However, in a society where resources and power are in the control of the few, the realization of such a goal is arduous. Mullaly (1993) has explored the difficulty of implementing theory in practice. He discusses the danger in challenging dominant groups who have vested interests in maintaining the status quo (Mullaly, 1993). The criticism about the difficulties associated with the claimsmaking approach is valid and needs to be considered; however, does such a criticism mean that one should not challenge a system of structured inequalities that perpetuates the subordinate position of many in society? Although claimsmakers have to face many challenges before accomplishing their goals, adherents of this theory recognize that striving for autonomy and emancipation are necessary, laborious and ongoing processes towards human welfare and well-being. As Freire (1970) contends, it is through solidarity of individuals within groups and amongst other oppressed groups that emancipation as a process may be undertaken.

One of the strengths of the claimsmaking approach is that it avoids the danger of paternalism and elitism which is admittedly found in a needs-based approach to welfare (Drover and Kerans, 1993, p. 5). Drover and Kerans (1993) do not reject the notion of universalism in understanding welfare. In starting with the claims of individuals, however, their approach
acknowledges that people know their needs best and that the
process of identifying and authoring one's own narrative is
related to human welfare and human well-being. This position
recognizes that needs are culturally and historically
contingent. This is a strength in light of emerging claims of
various groups (i.e. feminists, ethnic minority groups) against
the state in denying these citizens full participation in
society (Gilligan, 1982). These claimants have argued that
universalist policies reflect inherent bias and treat them
inequitably in practice (Gilligan, 1982). Universal policies,
although having advantages, do not respect the diversity of
needs of groups in Canadian culture. These surfacing claims
highlight that claims arise out of the particularities of
people's experiences and culture.

A related strength of the claimsmaking approach is that it
serves to highlight how the dominant hegemonic discourse
furthers the hierarchical structuring of society which
perpetuates the marginalization of various groups in society.
The deconstructive aspects of a claimsmaking approach offer
resources to critique the existing structure of relations. In
acknowledging that needs, claims, are culturally and
historically contingent, a claimsmaking approach encourages a
questioning of how the majority culture and values, reflect
themselves in policies purportedly serving minority groups in
society.

Lastly, a claimsmaking approach emphasizes the importance
of putting forward the voices of those groups in positions of subordination as the most relevant ones. It recognizes that the claims of those who live with the experiences of oppression and exploitation reveal ways that can enhance the welfare and well-being of both those in positions of privilege and subordination (Freire, 1970). This assumes that the unequal structuring of power and resources hinders the development of human welfare for both the oppressor and the oppressed.

Claimsmaking and the Deaf

A framework of claimsmaking and response rooted in social action lends itself to historical analysis. An investigation of the history of the deaf reveals a history of oppression and silencing by the hearing majority (Lane 1984; 1992). Throughout this history, however, the Deaf have continued to make claims against the institutions which strive to serve the Deaf but, in practice, perpetuate their subordinate position. The Deaf have made claims regarding the authoring of their own identity. In addition, they have articulated claims against educational practices regarding the cultural and educational need to implement their "natural" language, Sign, in educational settings. Their claims, however, have gone unheard. Thus, this theory of claimsmaking has applicability for the situation of the Deaf.

The Emergence of "Deaf" Identity

One integral component to the process of claimsmaking is the coming together in groups and the development of a social
identity. For the Deaf, the development of a social identity has been a long and ongoing process.

Prior to the 1800's, the deaf were isolated from one another. The establishment of schools for the deaf, however, (starting in 1817 in North America) played a significant role in bringing deaf individuals together in community (Sacks, 1989). "These schools acted as foci for the deaf community, passing down deaf history and culture from one generation to the next" (Sacks, 1989, p. 136). Thus, not only did language and literacy spread, but also a body of shared knowledge, shared beliefs, cherished narratives and images - a culture (Ibid). "Now, for the first time, there was an "identity" for the deaf, not merely a personal one, but a social, cultural one" (Ibid, p. 136-137): one intimately tied to the community's language, Sign.

"Sign for the deaf is a unique adaptation to another sensory mode; but it is also, and equally, an embodiment of their personal and cultural identity" (Ibid, p. 137). One leader in the deaf community, Barbara Kannapell (1980), has stated, "my language is me": For in the language of a people resides its whole thought domain, its tradition, history, religion, and basis of life, all its heart and soul (Lane, 1984). This is true for American Sign Language (ASL). Sign is central to the communal identity of the Deaf (Kannapell, 1980).

\[^{2}\text{The term "Sign" is used to denote the language of the Deaf (i.e. American Sign Language, French Sign Language, British Sign Language). It excludes signed forms of spoken languages (i.e. signed English) which are mere transliterations and lack the structure of genuine Sign languages.}\]
Sign is biologically and unsilenceably the voice of the Deaf (Sacks, 1989).

The deaf community is the place where deaf individuals enhance their understanding of their social identity as "Deaf". These communities are formed

partly by exclusion (from the hearing world), and partly by the formation of a community and a world around a different centre. Its own centre. To the extent that the deaf feel excluded, they may feel isolated, set apart, discriminated against. To the extent that they form a deaf world, voluntarily, for themselves, they are at home in it, enjoy it, see it as a haven and a buffer. In this aspect the deaf world feels self-sufficient, not isolated - it has no wish to assimilate or be assimilated; on the contrary, it cherishes its own language and images, and wishes to protect them (Sacks, 1989, p. 128).

This is a community where language, culture and communication are shared, where there are relationships of mutuality and reciprocity. This is the social place where the claims of the Deaf are formulated and articulated.

Since its first beginnings, the deaf community has been a place where deaf individuals became aware of their Deaf identity; however, there has not always been a conscious awareness of their identity as linguistic minority group (Sacks, 1989). There was a recognition that Sign, as a mode of communication, distinguished them from hearing people; however, since the first days of deaf education, "hearing experts", who were not native users of the language, declared that Sign was an inferior form of communication to speech and was not a legitimate language (Lane, 1984a; 1984b; 1992; Sacks, 1989). This view of people with privilege was internalized by the Deaf
Revolutionary research (Stokoe, 1965) in the 1960's which demonstrated that Sign was in fact a language with its own grammar and structure (Ibid) began to raise awareness that the deaf constituted a linguistic minority group. Since these first studies on the grammar of ASL, other researchers (i.e., Bellugi, 1980) have executed further linguistic studies on the Sign of the Deaf. Thus, there is a growing consciousness among the Deaf that they are a linguistic minority group. They are rejecting the label of disability, and claiming an identity as a linguistic minority group (Lane, 1984, p. 2). One leader in the deaf community has put it this way,

We need to stop and think. We need not accept any label other than Deaf. We can succeed, as we have shown in the past, on our own or by joining with other minority language groups. Our goals for education are similar; our concerns about oppression and lack of understanding are similar. Most important, we are similar because although our numbers are small, we are proud of our language, culture and heritage.

Disabled we are not! (Bienvenu, 1989, p. 1)

One result of the growing consciousness of the deaf community that they constitute a linguistic minority group and of the growing awareness of ASL as a legitimate language has been the Deaf's increasing commitment to see ASL implemented as the language of instruction in the education of deaf children. This claim based on their firsthand experience with deafness and various education methods (Jacobs, 1974) has been articulated in a hegemonic context where the voice of the Deaf meets resistance.
The Claimsmaking Context

The context in which the Deaf have articulated their claim has been dominated by hearing professionals who adopt a biomedical model. The biomedical model views hearing loss as a physical deficit, a disability (Lane, 1992).

For over a century our nations have sought to address the social problems of deafness with a model that pathologizes all consequences of deafness, tidily placing the blame for the ills of the deaf on a cruel nature and invoking the health establishment to deal with them while disturbing the rest of society as little as possible (Lane, 1984, p. 2).

In reducing hearing loss to merely a physical reality the biomedical view places the issue within the individual and denies alternative interpretations.

Such reductionism is congruent with the way North American societies have dealt with social problems.

The United States (and Canada) has a long history of grappling with the ills of the body politic by construing them as illnesses of the individuals concerned (Lane, 1984, p. 2).

The source of the problem is located in the individual - i.e. the source of poor educational achievement in biological deficit, the source of criminality in psychiatric disorder, the source of deaf underemployment in cochlear malfunction (Lane, 1992, p. 209).

The medical model assumes that there is an objective and transcultural norm of human well-being and ability. However, the reification of the idea of normality ignores the subjective issue of what normality actually is. Bickenbach (1993) points out that the activity of defining what is 'normal' depends on...
one's frame of reference and is inherently subjective. The failure to recognise the situational and cultural relativity of normality is a serious omission in an international scheme (Oliver, 1990). Lane (1992) argues that normality and in this case, "illness," depends upon one's cultural frame of reference. To attribute sickness is to imply the existence of another state, which is more desirable (Lane, 1992, p. 210). However, if a physical condition is widespread enough in a community and does not interfere substantially with the community achieving its goals, it will be seen as an illness only by outsiders with a different frame of reference and different goals (Ibid, p. 210).

The dominance of this medical paradigm has resulted in many disastrous effects: one effect has been the establishment of a social order where decisions of intervention are left to professionals (hearing "experts") adopting such a medical view of deafness (Lane, 1992). Decisions, therefore, focus on strategies aimed at minimizing the effects of disability and impairment, a rationale provided for the adoption of oralism in deaf education at the turn of the century (Lane, 1984; 1992; Winefeld, 1987). The dominance of this view has resulted in a disease-centred bias reflected in policies and practices which have had tragic consequences in the lives of deaf children and their community (Lane, 1992).

The dominance of the medical model creates a context where the claims of the culturally deaf minority regarding their identity and welfare are not legitimated and not heard. The tyrannizing control of the medical paradigm in the systems meant
to serve the deaf, has meant that the "disabled", "impaired" deaf are placed in a position of subordination. The professionals are attributed status of "expert" and therefore, supposedly, know what is best for the deaf. They are allocated a position of authority to determine the needs of the deaf and strategize ways to meet these needs. This structured relationship manifests itself in the educational institution and in other domains - i.e. in employment counselling (Sacks, 1989). Sacks (1989) has argued that a client industry has been established with the deaf as client and the hearing professionals as expert.

In conclusion, there exists a system of structured inequality where the views of professionals in positions of authority (hearing professionals) dominate despite the ongoing claims of the Deaf. Thus, a theory of claimsmaking offers an alternative conceptual framework for weighing the claims of hearing professionals and the claims of the Deaf. A theory of claimsmaking rooted in social action accounts for issues of power and it puts forward that the claims of those who live with the consequences of oppression are relevant and integral to the process of social action, which has the development of human welfare and capacities as its goals.
Chapter Three
Research Project

This chapter presents a research project which explores the factors which have influenced the views of nine professionals involved in deaf education regarding methods of communication. In particular, it investigates how these professionals, representing the three major communication methods - oralism, total communication and bicultural/bilingualism - have arrived at their respective beliefs.

Literature Review

Passionate controversy permeates the history of the education of deaf children. An overview of the literature demonstrates various factors which have influenced views about

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3 Oralism is a philosophy of communication which advocates the use of auditory and oral skills in educational settings. It is a method which discourages/forbids the use of signs. It promotes that a goal of education should be teaching deaf children speech and lipreading, and teaching deaf children how to use their residual hearing.

4 Total communication (T.C.) is a philosophy of communication which embraces all methods of communication in theory (speech, lipreading, auditory skills, gesturing, signed English, pidgin signed English, American Sign Language...). However, in practice the dominant method used in educational settings is the mode of communication that the teacher feels most comfortable with. Historically, the method that has dominated in T.C. settings is sign supported speech: Spoken English with manual English signs.

5 Bilingual/biculturalism is an approach to deaf education which advocates the implementation of American Sign Language as the language of instruction. This philosophy assumes that ASL is the natural language of the deaf. It promotes the inclusion of deaf culture and heritage in curriculum, and it sees Deaf role models as beneficial to the deaf child's development of self-esteem and identity. Other communication modes are perceived as valuable "tools"; however, the priority of this approach is on making curriculum easily accessible to the student.
communication policy in deaf education. Therefore, the ensuing
discussion describes some literature and research pertaining to
the education of the deaf focusing on the implications for this
present study.

In the field of psychology, the literature depicts many
views of deafness. For example, the early 1900's were marked by
a position of optimism. Deaf children were viewed as having the
same intellectual potential as their hearing cohorts (Arnold,
1985). In the 1920's, however, a shift in perspective occurred.
A researcher, Pitner, claimed that the "deaf were retarded" and
"brain damaged". This view dominated until the 1960's when
researchers (Mycklebust, 1964; Vernon, 1968; Vernon and
Makowsky, 1969) began to look at the social and psychological
effects of deafness. These researchers showed that "the deaf
were members of a minority and that the negative attitudes
amongst the hearing majority affected a deaf person's confidence
and self-image" (Arnold, 1985). This marked a shift in the
literature to explore how the system outside the individual deaf
person influences her life.

Each of these perspectives had an influence on policy
makers in various ways. For example, the view in the 1920's
that the deaf were viewed as "brain damaged", provided a
justification for deaf children's poor academic results placing
the problem within the individual child while excluding
competing explanations (i.e. the curriculum being inaccessible)
(Sacks, 1989). In fact, Mycklebust (1964) recommended
industrial training and a restricted school curriculum based on his view of the deaf as "retarded". Thus, conflicting and changing views of deafness have historically played a role in the development of education policy.

In the 1980's a new name emerged in the literature about the deaf, Harlan Lane (1984; 1984; 1988; 1992). Lane (1988) contributed an important critique of the psychological research. By exposing the poor sampling designs and culturally inappropriate measures, Lane demonstrated that the research findings which have influenced policy decisions and clinical practices have poor validity and reliability. He concluded that the results of the research he critiqued shed more light on the ethnocentric stereotypes of the researcher conducting the study than on persons who are deaf.

In addition, the literature of the 1980's and 1990's demonstrates a growing recognition of an alternate view of the Deaf, the deaf as a linguistic minority group (Lane, 1992; 1984; Ross, 1990; Padden and Humphries, 1988; Evans, 1988; 1987; Nash, 1987; Reagan, 1985). Padden and Humphries (1988) explore two contrasting perspectives of hearing loss. They introduce the idea that people approach hearing loss from different "centres": a hearing centre which views deafness as a disability or the Deaf centre which views deafness as a difference. These authors suggest that an individual's perspective about hearing loss influences the type of intervention she supports. For example, if one views hearing loss as an impairment, then a possible
intervention may be "invasive surgery" to correct the infirmity (Lane, 1992). Thus, Padden and Humphries (1988) suggest that an individual's view of deafness is an influential factor in the method of communication they choose.

Stewart (1988) surveyed the adult Deaf (members of the cultural minority group) and documented their viewpoints on appropriate methods of communication for deaf children. Similar to Padden and Humphries' (1988) suggestion that an individual's view of deafness influences the method of communication they choose, Stewart found that, by and large, the deaf community of the Lower Mainland supported the use of Sign Language in the education of deaf children (Ibid). He found correlations between the participants background and their support of sign language, and he suggested that further research should be done to explore whether personal background plays a role in one's preference of communication methods.

Another researcher, Winefield (1987), did historical research to explore the factors which influenced Alexander Graham Bell, a proponent and advocate of oralism, and Edward Miner Gallaudet, a proponent and advocate of the manual method. He found that their family backgrounds, their respective expectations for the deaf and their attitude toward deviance were crucial factors in determining these men's ideas and actions regarding the education of the deaf. Winefield also interviewed teachers and parents of deaf children about their educational choices. He found that both teachers and parents
reported having no previous experience with deaf people or with the education of the deaf prior to being involved in deaf education. Moreover, Winefield found that education background was influential for the teachers. He also found that the parents' and teachers' views of normality were influential in their educational choices. Lastly, the teachers' goals for educating deaf children played an influential role in which educational method they supported.

In summary, a brief overview of the literature and research about the deaf reveals many potential influential factors influencing a professional's view about communication policies in deaf education. One recurring theme in the literature was that an individual's view of deafness influences the method of communication she/he supports. The review of literature suggests that one's personal background may be another influential factor. In addition, the findings of Winefield's (1987) research with parents and educators are particularly relevant to this current study. In particular his findings that a professional's education, view of normalcy, and goal for the education of deaf children, may emerge as factors influencing the nine professionals in this present research. The review of the literature also provided a reminder that culturally sensitive measures are important when interviewing participants from another culture.

In conclusion, a review of the literature demonstrated that most of the research relating to methods of communication has
focused on outcome. While such research is helpful, it seems to have contributed to the entrenchment of positions. This research focuses on the process by which professionals come to support one position over another. Thus, it contributes insight into the beliefs of professionals regarding their views of methods of communication. An exploration of the factors which influence educator's views of communication policy is important because educators have played an influential role in the lives of families with deaf children. In addition, the beliefs of professionals are instrumental in informing and implementing policy (Lane, 1992). This connection becomes increasingly relevant in light of the fact that hearing professionals have been the dominant actors in policy development, while the claims of the client group, the deaf community - those who have firsthand experience with deafness - have been silenced in the historical context (Lane, 1992; Stewart, 1988).

Methods

I wanted to investigate how professionals involved in the education of deaf children arrive at their beliefs regarding methods of communication in deaf education. In conjunction with my theoretical perspective of claimsmaking, I believed that different claims have different actors. Therefore, I felt that exploring these nine participants' various claims would contribute insight about professionals beliefs.

I designed an exploratory study to get a preliminary overview of these issues. Qualitative interviews were chosen as
the method of enquiry because I believed that interviews provided the best context for obtaining in-depth and information-rich data. The next section focuses on the methods used in this research project. Sampling and recruitment, data collection and data analysis will be discussed.

Sampling and Recruitment

This study used purposive criterion and snowball sampling. Because of the desire to obtain a range of views representing the various positions in the communication debate, the selected sample was heterogeneous. Nine individuals were interviewed based on particular inclusion and exclusion criteria.

The participants in this study were all professionals involved in the field of deaf education who work in the Lower Mainland of Vancouver, B.C. Three of the individuals interviewed were professionals who identify themselves as culturally Deaf and support a bilingual/bicultural approach. Three of the participants were hearing educators who are proponents of the total communication method; and three of the individuals interviewed were hearing professionals who support the auditory/oral method. These three groups represented the spectrum of views about communication methods in deaf education. Because of the ongoing intensity of this debate, it was believed that these professionals would be familiar with the debate and willing to discuss their views, thus, providing data rich in information.

The audiological status of the 9 professionals interviewed
was an important consideration. Ideally, there should have been at least one hearing and one deaf professional in each orientation category: the auditory/oral, the total communication and the bilingual/bicultural. However, it has been my experience that professionals working in the auditory/oral method are overwhelmingly hearing. In fact, I consulted professionals in the Lower Mainland and no one had ever heard of a deaf professional in the auditory/oral field. Similarly, the majority of adherents of total communication, since support for the bilingual/bicultural movement has grown, are hearing professionals. Likewise, it has been my experience that the majority of supporters for the bilingual/bicultural model are Deaf. Thus, the audiological status of the nine participants was representative of the population of professionals from which the sample was drawn.

I began the recruitment process by contacting the directors of various Lower Mainland agencies involved in the education of deaf children. The purpose of the study was outlined and the directors were mailed copies of the contact letter [see Appendix A]. Interested staff were encouraged to contact the researcher.

This process yielded 4 participants: 1 supporter of the Auditory/Oral method, 2 supporters of the Total Communication method and 1 supporter of the Bilingual/Bicultural method. Appointments were made with the participants. Following the interview, the participants were asked if they knew of any other potential participants. The participants were asked to refer
colleagues to the investigator. This process of snowball sampling accomplished the desired number of interviews. Three participants of each of the three communication methods were interviewed.

Data Collection

Data collection instrument. An interview guide was drafted, which allowed for a range of perspectives to emerge. The guide provided focus, supplying a framework or map while at the same time allowing flexibility (Gorden, 1992). In addition, it allowed the participants to frame their views, an important consideration because the participants represented various cultures. In particular, three of the interviews were conducted with professionals who identify themselves as culturally Deaf. The interview guide [see appendix B] was developed in consultation with an advisor and several colleagues. The questions were developed with the research question in mind: what are the factors which influence professionals' views regarding the method of communication used in deaf education? Careful consideration was given to create a logical flow in the order of questions. The interviews did flow smoothly which contributed to the credibility and soundness of the data collected.

Interview procedure. Prior to beginning the interviews, I obtained approval from the UBC Ethics Committee.

The interviews were conducted in various locations throughout the Lower Mainland accommodating the participants'
circumstances. Eight of the interviews were conducted at the
participants' place of work, and one was conducted at the
participant's residence. All of the interviews were recorded.
I asked each participant for permission to record the interview
prior to setting an appointment. All nine participants agreed
to the recording of the interviews. As opposed to field notes,
recording the entire interview ensured that all data were
collected and ensured consistency in collecting the data. This
enhanced the credibility and soundness of the data collected
which has implications for the findings of this study.

Because of the technical set-up needed, I allowed for
appropriate time to set up and prepare. The equipment was set
up and tested prior to the appointment time. These
considerations helped facilitate a smooth introduction period to
the interview process.

One potential limitation of the interview procedure was
that my own cultural identity as a signing hearing person may
have influenced the answers of the participants. I attempted to
address this limitation by sharing my own background in deaf
education, indicating my experience in ASL settings and
providing them opportunity to ask questions. This openness
seemed to be appreciated by the participants who reciprocated in
the interview. However, the extent to which my identity as a
hearing person influenced the interview process is an unknown
variable and a limitation of this research.

After the introductions, the consent form [see Appendix C]
was discussed and signed, and the interview started.

The nine interviews ranged from 50 to 80 minutes, and the average length was 63 minutes. The participants appeared relaxed and open in sharing their beliefs. One indication of this was the fact that the initial participants recommended colleagues for the research.

**Soundness and credibility.** Several further steps were taken to enhance the soundness and credibility of the data collection and findings. For example, a single interviewer was used in the collection of the data which increased the likelihood of a similar style and presentation of questions to each participant. In addition, the interview questions were discussed with a research advisor, several colleagues, and an educator of the deaf, to ensure that the questions were clear and relevant to the research question. Also, in focusing on how the participants arrived at their beliefs, the interviewer assumed an open, nonjudgemental position in the interview. This focus shifted the attention away from the value-laden beliefs to an enquiry of how the participants reached their views regarding methods of communication. In addition, the researcher attempted to maintain a nondirective position during the interview by asking open-ended questions and allowing the participants to frame their responses from their position. These considerations helped facilitate a positive rapport which contributed to participants feeling comfortable to share their views openly.
Data Analysis

Grounded theory was the procedure used to extrapolate major themes from the data. This analysis process was chosen because it examines meaning in context and allows for a range of perspectives to emerge.

The analysis began with the transcribing of the completed interviews. To ensure the confidentiality of the participants, all information identifying individuals was stripped from the transcripts and the recordings were kept in a safe place accessible only to the researcher. Recordings were erased after the research was completed.

The next step of analysis involved line-by-line open coding. The open codes were recorded in the margin to the left of the data. Codes were developed which took each line or lines, to the next level of abstraction while still representing the meaning intended by the participant. The following quote is an example:

There are those people like myself who prefer to think of children with a hearing loss, children with hearing impairments, using it as a generic term, meaning from the mildest loss to the most profound.

This participant was referring to the concept "Deaf". This statement was coded as: deafness not a label, deaf = audiological state, deaf = degree of hearing loss. The right margin of the transcript was used to record memos and document emerging themes.

Lastly, interview topics were highlighted with a colour pencil in the transcript.
After coding the document once, a colleague was consulted about the open codes. Her analysis confirmed some of the open codes while exposing issues that were overlooked. This consultation contributed to the credibility of the open codes, to their clarification and to a greater confidence that the codes portrayed the intended meaning.

Once the coding of the transcripts was completed, the process of axial coding/clustering began. The topic/question was recorded at the top of a paper, and the open codes were listed. Different coloured pens were used for the individual interviews to distinguish between interviews. In addition the line numbers of the codes were recorded to facilitate finding verbatim quotes used for supporting the findings. Once listed, the codes were clustered into emerging themes and descriptive names were given to the themes.

The procedure of data analysis was a process of constant comparisons and of continual revisions and modifications. The findings of this analysis were supported with verbatim quotes to add to the credibility and soundness of the findings. However, these findings were not meant to be generalized. Although elements of the findings may reflect that of other professionals, the purpose of these interviews was to understand these nine participants' views and the process through which they arrived at their respective beliefs. The results, therefore, are only applicable within the parameters of this study.
Chapter Four
Findings

This next chapter will focus on the findings of the study, and on a presentation and discussion of the themes that emerged through the process of data analysis. The themes are elements which have influenced the participants' positions regarding methods of communication in deaf education. The themes are supported by quotes from the transcribed interviews. The six interviews with hearing professionals are verbatim quotes. The three interviews with Deaf professionals were interpreted by me from ASL to English, thus, any grammatical errors are a result of the interpretation process and not an indication of the participants' English competency. Chart 1 [Appendix C] outlines the various themes which were extrapolated from the data, and presents them in groupings. The first section to be explored is the pre-involvement profile.

Pre-involvement Profile

No previous background relating to the deaf. One theme that emerged throughout the interviews was that all six of the hearing professionals interviewed had no previous background relating to the deaf\(^6\). For example, all six participants stated at some point in the interview that prior to becoming

\(^6\) Through the process of data analysis, I found some themes common among the 6 hearing professionals. There were also themes shared among the three hearing professionals supporting total communication and the three Deaf professionals supporting a bilingual/bicultural model. For the purposes of presentation, therefore, where there is agreement between groups, the findings will be linked together.
involved with deaf education, they didn't know any individuals who were deaf. One participant shared,

Well, I did not come into this field because of a family member or anyone having a hearing loss. (interview #001)

Another participant in articulating how she became involved in deaf education said,

It wasn't contact with deaf people growing up. I didn't have any contact with them. (interview #006)

In addition to not knowing any deaf individuals prior to their involvement, the three professionals supporting an auditory/oral approach alluded to the fact that they entered this career uninformed and unaware of the issues and entered auditory/oral training programs by chance:

I don't know where it came from because I think if I had to look back I would probably say that um, I don't even know why I went into this to begin with. I think some guy talked me into it. (interview #002)

Another respondent put this in the following way:

I went into Deaf education very naive about the whole political arena surrounding deaf education...I chose the McGill [oral] program only because I wanted to go to Montreal ... So, I went in, not knowing what the oral approach was all about, and not knowing a single deaf person personally. (interview #003)

Apparently, being unaware and uninformed of the issues relating to deaf education and not having any prior contact with deaf individuals influenced these professionals to the extent that they initially happened upon an oral philosophy in educating deaf children.

The three professionals who support a Total Communication method all stated that they "fell into" the profession:
I fell into it. Fluke. (interview #004)

So it's something that I sort of just fell into. (interview #005)

However, all three of the professionals supporting total communication worked in signing environments prior to pursuing their training in deaf education. Thus, this early exposure to Sign influenced their future decisions regarding the education of deaf children. All three participants stated that they never considered an auditory/oral approach and stated their initial involvement in signing environments as the reason for their choice.

The pre-involvement profile of the three Deaf professionals was similar in many ways. They all had/have firsthand experience in deaf education and deafness. They all were exposed to oralism in their education, as well as signed English. Now, as adults, all three participants consider themselves culturally Deaf and their preferred mode of communication is American Sign Language (ASL). Seemingly, this firsthand experience and their personal Deaf identity influence their beliefs and involvement in the education of deaf children.

Personal interests as a motivating factor. It appeared that personal interests of the six hearing participants were also motivating factors in their pursuit of a career in deaf education. Two participants (#002 and #004) were teachers prior to becoming involved in deaf education. One of the others was also interested in teaching.
I went because I thought it would be neat to be a teacher of the deaf. And um, I also wanted to be a teacher. (interview #003)

Two of the participants (#005 and #006) had interests and background in special education. And lastly, one of the participants (#001) stated that her fascination with speech was a motivating factor in her choice of careers:

I guess I have always been and still am fascinated by speech. (interview #001)

**Personal investment as a motivating factor.** Although the deaf professionals interviewed in this study may have been influenced by their personal interests, personal investment in the future of their community emerged as a motivating factor influencing their decision to pursue a career in deaf education.

For example, one of the participants (#009) stated:

When I think about the education of deaf children, they will grow up to be our next generation of Deaf leaders. That means that their education is very valuable to me. (interview #009)

One of the Deaf participants (#008) shared that her involvement in deaf education was intensified when her deaf children entered the education system. Thus, in addition to her investment in the future of her community, this participant's involvement was also an investment in her children's education.

Once the decision had been made to pursue a career in deaf education, there appears to be several factors which influenced the nine participants' views about which method to support. One of the factors which appeared to influence the professionals' beliefs was their view of deafness. There were five themes
which supported this finding.

**View of Deafness**

The hearing and Deaf professionals did not view deafness in the same way. Three themes emerged in the view of the hearing professionals: deaf equals a medical term, hearing loss as a disability, and deaf is not the person's identity. The Deaf professionals talked about only one theme: Deafness is not a disability.

**Deaf equals a medical term.** One of the themes common among the three interviews with the auditory/oral participants was that these professionals viewed the concept "deaf" as a medical term. For example, one of the participants stated regarding the use of the term deaf:

> When I use the term deaf, it's not a term I use very often, I'm using it to signify really, really hearing impaired. (interview #002)

Another participant pointed out:

> The hearing loss is just audiological information. (interview #001)

The data seemed to demonstrate that the term deaf was viewed as a medical term signifying audiological information, a degree of hearing loss. This theme did not emerge from the other six participants.

**Hearing loss as a disability.** A second theme which emerged relating to the participants' views of deafness, was that the six hearing professionals viewed hearing loss as a disability. Throughout the interviews several patterns emerged which supported this theme. For example, it became clear that hearing
loss was seen as a barrier and a disadvantage. One of the participants who supported Total Communication stated,

It is a disability, a physical disability in the sense that you cannot hear. I think that because the deaf community has formed a very strong culture as opposed to blind people, it's unique ... Because of the language barrier that has affected deaf people, um, in general the language level is lower, the reading level is lower. Um, that to me is a bit of a disability because the job opportunities are not there. The education opportunities are not there. So there isn't that broad range of any choices they want to make. With blindness yes, there's a few things you can't do, but as far as education, the language is still there for them. They're hearing it all and able to take it in. All that language that makes other learning possible. With deafness the language isn't there all the time. And so, I see that as a disability as far as um, job skills and education because you have to have an interpreter with you when you're deaf. I mean you cannot go to any form of learning unless the person who you're talking to signs or unless they have an interpreter...But, in that respect I see it as a disability, because it's a limitation as far as how they can progress. (interview #004)

Similarly, for the auditory/oralists, it became clear that hearing loss was a barrier and a disadvantage in learning, in acquiring oral skills, and in developing a "natural language". One participant stated,

Children have the innate ability to learn to talk. We know that. Children do it. The only thing that inhibits a child with a hearing loss from doing it as easy as a child with normal hearing is that hearing loss. (interview #001)

Another participant said,

Deafness isn't a disability. Well, of course it is. That should be minimized. Well, from my point of view, if you were having a child, would you prefer it to be deaf or hearing? (interview #002)

These examples support the theme that some participants viewed deafness as a disability.
Deafness is not the person's identity. A third theme emerged from the interviews with the six hearing professionals. For all six hearing participants, deafness was not the individual's identity. For the auditory/oralists, the deafness was "audiological information": deafness referred to the degree of hearing loss, not the child's identity. For example, the participants said,

I don't just see deafness or hearing loss as the primary thing. Um, see you have to consider a lot of things ... It's definitely one of the main things that you have to look at and consider. But once you get over a few stumbling blocks ... After that I think that deafness can be put back and let's move on to other important things for this child. (interview #003)

The hearing loss is audiological information. It's not the overriding factor...We really don't see the child as the deafness is who they are. (interview #001)

The other participant had this to say about the deaf community's view of deafness:

I think it becomes, hearing impairment or deafness in that culture, the deafness is um, almost a badge. It's almost their being. (interview #002)

This same professional articulated her view in the following way:

I would like to think that I see them as just a kid. This is just a kid. The hearing impairment is really way, way down. Yeah there are some things that we got to do. There's no doubt about it, because of that. But for God's sake this is a person. And we can accommodate that because we have the skills to know what to do with it. But it's the total being that's important. (interview #002)

Similarly the professionals who support Total Communication did not view deafness as the individual's only identity; however,
for these professionals the deafness may be one of an
individual's identities. For example, one participant stated:

Just because you've lost your hearing doesn't mean you're Deaf. (interview #005)

She added,

Naturally I would like to see all kids gain a good sense of identity. They can have various identities. They're not just Deaf. That's just one aspect of their culture, because they may be Polish, and they may be Catholic, and they may be vegetarian. Deaf does not make them whole. It's just a part of who they are. (interview #005)

These examples demonstrate the finding that the professionals interviewed did not view deafness as related to the individual's whole identity.

The three deaf professionals who were interviewed had a very different view of deafness. In fact, one of the themes that emerged through their interviews was that deafness is not a disability.

**Deafness not a disability.** All three Deaf professionals articulated this view of deafness, that it is unique and not a disability. One participant stated it this way:

When you put Deaf people together, disability disappears. They're normal. You have no sense of disability. Disability is a qualitative concept. If you have a hearing person who doesn't know how to sign, and you put that person in a group of deaf people the hearing person is disabled, the person feels lost. It doesn't work the same way with other disability groups. If you put a regular person with wheelchair people, they still feel disabled and the regular person doesn't feel disabled. The deaf community is very unique, a unique group. The rules of disability don't apply to them. However, because of the way the world is, the Deaf must say they're disabled to get services, money ... So, often Deaf
people have to swallow their pride and say yes to disability. They know if they say "no we're not. We are a cultural minority group", society won't accept that. So, disability is a label that is forced upon us by society ... The point is that if you allow Deaf people to be more in control, what would happen to their life. If they had the ability to control how they are labelled, I suspect that problems would diminish, the problems of disability would disappear. That's my opinion. (interview #007)

Clearly, this theme of deafness as not a disability differs from previously discussed three themes, yet all the themes highlight that how one views of deafness is a factor when it comes to beliefs about methods of communication. For example, if one views hearing loss as audiological information and a disability, then the intervention chosen will focus on minimizing the effects of disability. Furthermore, the degree of hearing loss becomes an integral variable in determining the appropriate method of communication. One participant stated,

The child who lost their hearing at age 2 is not the same as the child who was born deaf. So um, a child who is hard of hearing is not the same as a child who is profound. You can't just - I mean I've heard "if you're deaf, you're Deaf. Learn ASL." ... If all the material was presented in ASL, I mean if you're talking to a profoundly deaf group of children who use ASL as their primary language, then fine. But if you take a hard of hearing child then that would not be helpful for them. (interview #005)

For this participant the degree of hearing loss, onset of hearing loss, etc. is a consideration in the method of communication. On the other hand, the view of the Deaf professionals that deafness is a difference and not a disability supports the utilization of American Sign Language, the language of the North American deaf community. One of the deaf
Participants stated,

ASL is the language that most naturally fits with deaf people's needs ... ASL is clearly designed for deaf people. It's their, it fits their needs, and it's the language that deaf people feel comfortable with. It's good for their self-concept. They can focus on substance, not form. Most of the time education programs focus on form, but not on substance. (Interview #007)

Apparently, how these nine participants view deafness plays an influential role in their beliefs about methods of communication.

Another factor which emerged as shaping the participants' beliefs about methods of communication were influential experiences. Four themes in the data supported this finding. 

Influential Experiences

Under the heading of influential experiences there were four themes which emerged: educational background, personal experiences, experiences with key people, and professional experiences. Hearing professionals were particularly influenced by their educational background, experiences with key people and their professionals experiences, while the major sources of influence for the Deaf professionals were their personal and professionals experiences. It is also interesting to note the difference between the oralists and total communication professionals' experiences with key people. The first group's experiences were marked by contact with hearing "experts". The second group pointed to their relationships with Deaf people as influencing their beliefs about Sign.

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Educational background. The professionals who support an auditory/oral approach all made reference to their training and education as a factor which influenced their beliefs in the auditory/oral method. Two of the participants were trained in strict auditory/oral programs. They both stated this training as a factor which influenced their beliefs. For example,

I was trained orally...because I was in the oral program I naturally became a supporter of that option. (interview #003)

Sure, of course coming from McGill and the oral program that I did, we read a lot of literature on the oral approach, and we saw on paper how successful it can be. (interview #003)

The other participant was trained in an oral approach and a manual approach. She also inferred that her education influenced her, although she stated that she was turned off the manual approach because of her negative experience with it. In reference to her manual experience she said,

It was like a horror film. And the older it got, the worse it got. It's okay to see these cute little kids running around signing, but as they got older I realized that they were literally doing grade one primary stuff in my mind and they were 14. (interview #002)

The three professionals who support a Total Communication method, all knew prior to pursuing their training, that they would use sign in the classroom. However, they all stated that the emphasis on signed English in the University influenced their beliefs about what kind of manual communication to use. For example one participant shared:
The university at the time, signed English was definitely more of the focus. That influenced me. (interview #006)

In addition, one of the hearing professionals who supports Total Communication expressed that her training, professional development in American Sign Language, influenced her beliefs about ASL and its importance as one of the methods used in educating deaf children.

In Montreal, I took a course with [name], an instructor of American Sign Language, and that had quite an influence on me... It was a great course, but a very hard course because we were studying the linguistics of another language. And I couldn't quite understand what ASL was, and it was hard to really change my mind frame and come at it from studying the grammatical aspect rather than falling into it with the signing. However that did change my course of thinking and signing...The more you know about the language, you know, the more it makes sense to use it. (interview #005)

Therefore, the education experience of these participants were factors that influenced their beliefs about methods of communication used in deaf education. The three deaf professionals did not express that their professional training had influenced their beliefs; however, their personal experiences were emphasized as being highly influential in their present beliefs.

Personal experiences. One aspect of the deaf professionals' personal experiences which have influenced their beliefs about communication methods is their firsthand experience in the education system. For example,

I think my experiences growing up have influenced me. Being exposed to different school systems, different ways of communicating and various classes.
This same participant shared,

Some children are successful with the oral method. That's fine, but really they're going to miss out on a lot. I'm a victim of that. One year of school I went to a private school ... I was the only deaf student. There was no interpreter, nothing. That one year of school was a waste for me. I didn't understand anything ... Even for those people who have good oral skills, can speak well, they still miss out on a lot.

Another participant shared his experiences in various settings with different systems when discussing his beliefs about communication methods.

So I had some exposure to both oralism and ASL when I was growing up. At age 10, I was mainstreamed and really "bought into" oralism. I started to pity those deaf children who were stuck in the deaf school ... But when I left school to go to university, I once again began to question my perspective. When I went to university, I couldn't understand what the teachers were saying... Well, I started to question myself - Why am I going to class? Because I couldn't understand anything that was being said in the class. So, I asked my professors if rather than going to class I could do my assignments, show up for exams, and they could give me extra readings. They said fine no problem. You don't have to come to class. And I started to ask myself- what am I doing in that university? ... Well, also, at the same time I had deaf friends outside of the university who used Sign language. And they started to well, question me, and the more I socialized with them, the more I started to realize that I was missing something. I had some hearing friends, but at the same time I was a very lonely person ... At that same time my deaf brother, he was at Gallaudet University. He asked me to come and visit him ... Anyways, my brother took me to his classes to see and to visit. Well, I went into the class and I really felt like I belonged. I could understand what the teacher was saying. I could follow the class discussion. Everyone was signing ... And then after, all the deaf were socializing. And at that point I felt like I belonged there ... So, I went back and applied for a transfer and I went to Gallaudet. And I started to change how I viewed
communication methods. (interview #007)

Other personal experiences were also influential. One woman shared that watching her deaf children mature has been influential:

Personal experiences have influenced my beliefs about ASL. I have 2 children of my own. Now they're [ages]. But at the time they were babies I would go through books with them. At first I introduced the concepts then related them to Sign. They understood so quickly. It was so different from my experience. They picked things up quickly ... really my own experiences growing up and then my own kids have been the greatest influence on me. (interview #008)

Also, one of the deaf participants talked about his personal experiences with hearing people as contributing to his beliefs about communication methods:

The attitude of hearing people. Whenever I meet hearing people they always, they don't look at me as [name]. They look at me as a deaf person who can talk ... Most of the time when I meet people and talk with them, they always say, "Oh [name], you have such wonderful speech." And I feel like, yes, but what about what I said, not how I said it? They only look at the form, they don't look at the substance, what I said. And I start to feel - the whole thing is just appearance. And now when I look back I realize that the oral approach is just a sham. They're only interested in the appearance. They're not interested in what's happening in the deaf child's mind. How the deaf child is thinking. How the deaf child's feeling. And that's how I feel now. (interview #008)

Apparently, the personal experiences of the three Deaf professionals were factors that influenced their beliefs about methods of communication used in deaf education.

Experiences with key people. Interestingly, all three participants who support an auditory/oral approach discussed individuals who had influenced their beliefs. Thus, experiences
with key people seemed to be an emerging theme. For example, one participant stated,

I've met some very influential people in the auditory/verbal field as well. Professionals who are well published. And I worked with one for six weeks in Ottawa. And she definitely influenced me. (interview #003)

Another of the auditory/oral participants pointed to one of her professors.

The professor who headed up the department was known internationally as a pioneer in the field for the fact that children who had a hearing loss could learn to talk. (interview #001)

Thus, it appears that role models played a role in the three auditory/oral participants' views regarding methods of communication used in educating deaf children.

The three professionals who support a Total Communication approach all mentioned contact and relationships with deaf adults as influencing their views about communication methods. For example one participant said in response to enquiry about what has influenced her beliefs,

Deaf colleagues that I've worked with ... Deaf adults, their experiences and I think the frustrations that they've had by being forced to communicate in a certain way that isn't necessarily the best way for them. (interview #004)

Similarly, another of the T.C. participants stated,

And just contact with Deaf people and sort of - I guess it's a matter of respect for their language. (interview #005)

Lastly, one of the T.C. participants shared,

I think my contact with deaf adults again has very much been a factor. I think that when you're separated from the deaf community or that contact with Deaf people, it's very hard to get that experience or
that exposure. And um, you just, it's just like dealing with anybody, if you've got that contact then you learn more. And you understand better. So it's like prejudice. If people are not in contact, you know, you're not sure about "those people". If you understand why they do the things they do, or you know what's common about their culture, then you understand more. So yeah, contact with Deaf adults helps a great deal. (interview #006)

Among the deaf professionals interviewed, two of the three participants mentioned role models who influenced their thinking about methods of communication. For example, one participant said,

I can remember 2 people in particular who have had a lot of influence on me and how I view myself as a deaf person. First, there was a Deaf woman ... She started me thinking about myself as a deaf person. At that time I was very oral ... I remember talking with her about how wonderful Oralism was. She would correct me and explain to me that for some deaf children, it can be wonderful, but for most, it's not. She explained her experience and what she had seen up to that point as a teacher. She explained that most deaf children who start out oral, they tend to be messed up later on. She explained that many deaf who signed did well. She told me about Gallaudet. She started me examining myself, and I began to change, and feel disconnected to oralism. Before that time I did not question oralism. I just accepted it. I didn't analyze it. She started me thinking about it, challenging it. She taught me to start questioning. Another person was a man I met in [city] ... Anyways, when I first moved to [city], I was not Deaf - big D Deaf. I was still small d deaf. But he started me thinking about myself as a big D Deaf. The two of us would discuss, debate what was best for deaf children, what was good for them. He would challenge my views. And he started me thinking about deaf people as a group. The identity of deaf people. Because of him I became more involved with the deaf community and deaf culture. (interview #007)

Professional experiences. The last theme that emerged as an influential factor in the participants' views of methods of communication was their professional experiences. All three of
the participants supporting an auditory/oral method stated throughout the interview, "I see the results." One professional said,

I have seen the results. In the children's lives and in their parents, in their growth as parents of a child with a hearing loss...And the results in the children: that they can do it. They can get out there. And I always say the proof is in the product, if you want to put it in those blunt terms. Not that we think of our children as products, but if people want to come see what we're doing they're welcome. We say it's achievable. (interview #001)

In addition, they discussed their professional background.

One participant related:

Through my professional experience at the ---- for the deaf, I saw a lot of very successful kids going through there. (interview #003)

Another participant recounted her experience as an auditory/oral professional.

Um, my background in dealing with hearing impaired children started back in [name of city]. And then I taught the babies. And then moved out here and became involved in the [organization]. (interview #002)

This participant went on to describe her present employment responsibilities and then pointed out that she "sees the results." It seems that these employment experiences, being exposed to "successful oral children", has played a role in their views regarding the potential and possibilities of the auditory/oral approach.

Similarly, the three professionals supporting a total communication method referred to their professional experience as influencing their views of methods of communication used in deaf education. For example, one participant stated,
I think mostly my experience working with kids who have come from oral programs. Where they've been put in an oral setting and are getting absolutely nothing out of it, and um, have been switched over. And I've seen how the lights have come on all of a sudden. They realize that there is a way to communicate, to express their thoughts and to learn. I guess that's what's kept me going. (interview #004)

Another participant said,

Just because of my experience over the years of seeing children who, uh, who are even quite auditory. One graduated from our program last year. You can have a conversation with her, but she relies on signing for a lot of her information and to make the message clear. (interview #005)

She added later in the interview,

I look at the children that I've worked with or who have gone through our program in our method and the children that we graduate. And that to me is proof of something working, but I don't know what. (interview #005)

Lastly, the three Deaf professionals also cited their professional experiences as influencing their beliefs about communication methods. One of the professionals shared,

When I see the kids in our program communicating with their parents at that level, I feel envious of them. I feel that if the deaf can communicate fluently, smoothly, clearly with their parents, that's wonderful. I don't think oralism is the way to go with deaf children. We should give them a language, communication that can be used the fastest and easiest way ... I've seen too many deaf children starting in an oral program and by the time they're 4 or 5, they don't have a useful language. They have only words. Maybe some vocabulary, maybe 30 - 40 words, but they don't have sentences. (interview #007)

These examples demonstrate that professional experiences in the education of deaf children play a role in influencing these nine professionals' views about methods of communication.
 Upon reflection of the data collected, it appeared that the educational philosophies of the participants also played a significant role in their views of methods of communication. Their views of language and forms of communication, their views of technology in deaf education, and their views about the goal of deaf education are all themes which support the finding that the professionals' educational beliefs influence their position regarding which method they support.

Educational Philosophy

The educational philosophies of the participants influenced the professionals' beliefs about methods of communication. Three themes emerged in relation to the participants' educational philosophies: their view of language and forms of communication, their view of technology in deaf education, and their view about the goal of deaf education. The auditory/oralists and the two other groups, the total communication and the bilingual/bicultural supporters, differing views about the goal of education are particularly noteworthy. The three auditory/oral professionals expressed the view that integration is achieved by deaf children acquiring the communication mode of the hearing majority, speech. Therefore, Sign increases barriers and is a disadvantage. The other professionals asserted that developing literary skills, knowledge and good self-esteem provides deaf children with the resources necessary to participate and integrate in society. Thus, the content of education is important not the form.
View of language and forms of communication. All nine participants interviewed discussed the different forms of communication used in deaf education and disclosed their beliefs about them. The three professionals who support an auditory/oral method stressed their view that the method of communication has implications for both literacy and participation in society. They expressed that speech enhances literacy and enables "integration". One participant said in regards to spoken English versus manual communication:

You have to have language. It's [oralism] a very functional language and it's not stilted. It's taught in an environment where the language is functional, where it works. And an auditory environment does all these things and they just come out with some beautiful, beautiful language, rather than this sort of "I go store." That doesn't make it. (interview #002)

Another participant stated:

I also do have strong beliefs about the literacy skills of children who have better English skills, um speech, oral kind of skills. I believe that in terms of literacy they have an advantage over the children that are manual. (interview #003)

Thus, these participants apparently view oral skills as positively influencing the development of language and literacy skills.

Conversely the three professionals supporting an auditory/oral approach communicated the view that manual communication increases barriers to achieving integration. One participant said,

They don't have verbal communication skills, so they're much limited in being able to communicate in a meaningful way which does have implications for jobs
that they can do. It does have implications for their
social activities, who they're going to be able to
interact with and be comfortable with and be able to
relax with. It depends on others being able to
communicate via the method that they use. The
majority of the world is hearing. (interview #001)

This participant in reference to oral skills went on to state:

If you can give the children the advantage of doing
that, of making speech and language develop in them
like hearing children and apply special techniques as
needed for that particular child, it has to be for the
child's advantage to be able to use the most commonly
used form of communication in the community.
(interview #001)

These quotes are examples which demonstrate that these
professionals see a positive relationship between oral skills
and participation in society.

The participants also shared a common view that Sign
language is not the "natural language" of deaf children. For
example, one of the participants stated,

They don't have it, they have to learn it. And they
have to practice it. And it's not something they get
immediately. And many parents don't learn it
effectively. So there's a barrier and that's not
natural. (interview #001)

The remaining six professionals interviewed differed in
beliefs from the auditory/oralists. The professionals
supporting Total Communication as well as the Deaf professionals
all explained that communication was the priority not the form.
For example one Deaf participant shared:

For the young deaf child, I don't care if ASL is used
or not. What is really important, valuable is that
the parents and the child have good clear
communication. Where both feel comfortable and
communicate freely. ASL, signed English, whatever.
(interview #007)
However, these six professionals all agreed that some form of signing was essential to the development of early communication and early language. One deaf professional described his beliefs this way,

The biggest disadvantage of oralism is that it uses the weakest sense of the deaf child to develop language. It's not logical. When a deaf child appears, to make use of their weakest sense, is not logical. If you had a blind child, you don't focus on improving their vision... Again there's a difference between deaf and blind children, and that's language... For the deaf child I prefer to use their strongest abilities to develop language. With the oral approach, it's like you're trying to build a house with the weakest substances. When you finish the house there are many gaps. It's not finished. I wouldn't want to live in that house. It's a lousy building, lousy construction. But with Sign language, visual communication, you're giving the deaf child complete and better building materials. That house would look different from the other house. It's still very liveable, very useful. And it's more safe to live in than the other house. (interview #007)

In addition, all six participants emphasized the importance of literacy skills for integration as opposed to oral skills. For example, one participant who supports Total Communication explained her views as,

I would rather be teaching them how to read and write, to understand written language, how to read and write it because that's how they're going to succeed in later life, if they can read English. Because let's face it, that's what the world is all about when it comes to reading and writing. If you can read and write in English then you can look after yourself. (interview #004)

Thus, these six participants articulated the importance of emphasizing reading and writing, English literacy skills; and disagreed that auditory/oral skills were important for
integration:

Throughout the years many, many deaf people have had successful jobs. Speech is not important. It's the attitude of the person that's important. Not the speech. (interview #009)

These six professionals, however, differed in their views about how to teach these important English skills.

The three hearing professionals supporting Total Communication all agreed about the importance of American Sign Language as one method of instruction; however, they asserted that it was not the only method. For example,

Well, I certainly feel there's more room to use ASL as a language of instruction. I think that part of the thing that has hindered myself and a lot of other people as well, is not having enough background in ASL...I think more ASL could be added, but I'm still not convinced that strictly ASL is the way to teach all deaf children. (interview #004)

Another participant stated regarding ASL,

Not as the only language but it's an important language in there too. (interview #006)

The three Deaf professionals all agreed that ASL is an integral part of school communication policies. However, one participant shared her belief that signed English is important in teaching reading and writing. The other two deaf professionals articulated the view that ASL become the language of instruction in schools for the deaf. They communicated a strong emphasis on English literacy skills, and advocated that ASL become the language of instruction in the classroom.

ASL makes the information accessible. The deaf child should not have to struggle to get at the information. And that is the advantage of using the language of the deaf. (interview #007)
I prefer to use the communication system that is most widely used by the deaf community. That means ASL. (interview #007)

Lastly, all three Deaf professionals expressed that they were not opposed to individuals developing their oral skills, but they emphasized the importance of choice. For example one participant stated,

It's a good tool, oralism. "A" tool, not "THE" tool. So, if a deaf person wants to develop oral skills, they can, for whatever reason. Go ahead. There's nothing stopping them. (interview #007)

Although the nine participants interviewed expressed different views about language and modes of communication, it became clear in the analysis of the data that their respective views influenced their positions regarding methods of communication used in deaf education. Furthermore, these professionals' views regarding language and the method of communication supports the fact that the participants' educational philosophy influence their views on communication.

View of technology in deaf education. One theme which emerged related to the three auditory/oral participants' educational philosophy was their view of technology and its role in deaf education. The three participants all pointed to the improvements, wider applicability and benefits, as being influential to their views of an auditory/oral approach. It seemed that they pointed to technology as a form of intervention in deaf education which diminished the negative effects of hearing loss, making oral skills achievable. One participant
said this,

You know another thing around when you asked that question about what might influence my position, well, there has been such improvement in technology that gives children with hearing losses access to sound that previously they could not have had. (interview #001)

The other two participants articulated similar viewpoints about technology. Thus, technology and its use in the education of deaf children plays an influential role in these professionals' views about methods of communication.

The two other groups of professionals, the Deaf professionals and hearing professionals supporting Total Communication did not mention technology as something which influenced their beliefs about communication methods in deaf education. However, the three Deaf professionals did articulate an objection to cochlear implants on deaf children. For example, one participant shared,

I'm really opposed to cochlear implants. Suppose a deaf child is born and given an implant. That child is naive and innocent. Who makes the decision? The professionals. I prefer that the child be able to grow to 16, 17 years old, mature and learn about deaf culture. Then if they decide to have a cochlear implant, fine. I support that. But a small child? I don't agree. (interview #008)

View about the goal of deaf education. One predominant theme which emerged in the data was that the participants' views about the goal of deaf education was a factor in their beliefs about communication methods. The three professionals supporting an auditory/oral method expressed that an important goal of deaf education was the development of speech, and oral skills in
order to assimilate deaf children into hearing society. For example, one of the participants explicitly stated:

Well, my philosophy is that to enable a child to function in the hearing society, the auditory/oral method is the one that gets them to listen, to get them to focus and get them to have natural language. And my goal is to integrate them successfully: socially, academically, emotionally and all that kind of thing. (interview #002)

Another participant eluded to this goal when discussing the advantages of the auditory/oral approach. She stated:

Why not give them the facilities to use (speech) like any other people? Secondary to all that, it does have implications for jobs, what work you can do...So, it opens up the door to job opportunities. It opens up a wider range of social interactions, it's going to have an impact on them psychologically, how they see themselves and how they get information. And it's going to impact them academically...We've talked about the fact that it is the most commonly used tool of communication. If they can have that tool then why not? Can anybody think of a reason why not? You know, if they can have it. And therefore, the implications for the rest of their lives. (interview #001)

Clearly, assimilation is a goal of deaf education. These professionals view conforming to the communication method and language of the majority, spoken English as a priority in achieving integration.

The other six interviews, in reference to the goal of deaf education, focused more on equipping the children with language and knowledge, not on form of communication. It was through developing a good self-concept, literacy skills and knowledge that deaf children would best integrate in society. For example, one Deaf professional expressed,
Because for the deaf child the important thing is getting the information available to them, when they're small and as they're growing up. When they're born into a hearing family they miss out on a lot of the information around them, information from friends, radio, T.V. It's important for us to give them the language to get the information. Reading and writing are necessary too, to get information. For example, from the newspaper. So the bilingual/bicultural method argues that ASL makes content most accessible for the deaf child. They should have the same opportunity as hearing children in getting information. If you had a bunch of hearing children and you did not allow the teacher to use their voice, just sign, those hearing children would be missing a lot of facts. They'd have to struggle to understand what the teacher was saying. The same thing for the deaf child. ASL makes the information accessible. The deaf child should not have to struggle to get at the information. And that is the advantage of using the language of the deaf. The children can easily understand without the struggle. Bi/bi also gives the child self-esteem, a good self-concept. Research already shows that a positive self-esteem is the most crucial factor for a good education. (interview #007)

One of the hearing professionals stated the following:

I want to meet the needs of that child. Not to please the deaf community but meet the needs of that child and help them learn in the best way that they can. Getting the information across as clearly as you can. And if that means straight ASL then I guess you go that way. But it might mean for some that you have to go quite English. So it's using a sign method but not a strict must be certain way. (interview #004)

Another one of the hearing professionals explained:

My attitude is to really help some of these kids to feel proud of themselves and that they are to be out there, and create job opportunities. My job is to provide them with as much rich language exposure as possible so that they can function as much as possible without a deficit. Everybody may not understand them by signing but it's just like the oralists, not everybody understands their speech either. And they probably have to communicate a lot by writing. These kids will be able to write and read and all kinds of stuff. (interview #005)

It appears that an important goal of deaf education for these
six professionals is to equip the children with language and knowledge to succeed in society. They did not articulate the view that oral skills were a necessary part of integration for functioning in society.

World View

Through the interview process and upon further reflection through the data analysis process it became clear that an integral factor influencing these participants' beliefs was their world view. In fact, it seems that this factor is linked to many of the previously discussed themes and groupings.

Again, one of the auditory/oral participants provided a clear example of the importance of her world view in her beliefs about oralism. She explained,

I think it depends very much on how you view the whole society thing. I think that if your ultimate aim or goal, is to the best of your ability allow this youngster or provide the skills necessary for this youngster to live in the hearing community. And certainly deaf culture wants them to live within the confines of deaf culture, which is fine, but my goal is to integrate them successfully. (interview #002)

She later added,

I hate segregation of any kind of group. I think it's ridiculous. I mean, and the deaf culture says that, would say that oral hearing impaired people are elitist. I think it's almost the other way around, that they really shut everyone else out. And that, to me is an elitist society, when you enclose yourselves and prevent others from entering in and out of your community. (interview #002)

Two themes which emerge from these quotes which were shared by the other two auditory/oral professionals were a preference for assimilation and an antipathy for segregation. Such a
perspective influences how these individuals come to understand the goals of deaf education as well as potential interventions.

One of the participants recognized that her world view and values played a role in her beliefs. She stated,

The deaf community, I think it's really nice that they've joined together, and they have their community. I think it's really nice. I don't think that a child just because they're deaf, I don't think that automatically means that they have to be part of that community. I know it goes against what I believe. (interview #003)

The other two groups of professionals similarly were influenced by their world views. For example, the deaf professionals beliefs embraced diversity and difference. Similarly, the three hearing professionals supporting Total Communication, while articulating a desire for deaf children to integrate in society, expressed an appreciation for deaf culture and equality. For example, one of the Total Communication professionals maintained,

It's never been my goal to make deaf kids like hearing kids. (interview #005)

She also articulated,

It's just that everybody is equal. (interview #005)

Apparently, the world view of the nine participants seemed to play an overarching role influencing the other factors influencing the participants' beliefs regarding the method of communication used in deaf education.
Personal Identity

The last theme which emerged from the data was that the participants' personal identity as a hearing or Deaf person, played a role in their views about methods of communication. This was particularly evident with the three Deaf professionals. For example, all three Deaf participants, in relating their views regarding methods of communication went back to their personal experiences as a way of communicating their views. Also, they explicitly talked about their identity as culturally Deaf adults. One participant stated,

Really I prefer ASL. I support ASL. You know why? Well, I was born deaf and my first language is ASL. (interview #008)

Another participant said when explaining his growing awareness of deaf identity and the connection to ASL,

At that time, deaf people, including myself, began to develop an increased awareness of who we are, and we began to look more closely at ASL. Now I'm comfortable with ASL. It's the language of the deaf community. That's who I am. (interview #007)

Clearly, the three Deaf participants' firsthand experience of deafness and their personal Deaf identity influence their views of methods of communication.

Only two of the hearing participants articulated an consciousness that their hearing identity or lack of deaf identity influenced their beliefs. For example, one participant said,

I'll never know unless I become deaf to truly understand the, how it is being deaf. (interview #006)
Another participant expressed,

I admit that I'm ...I mean it would be impossible for me to be completely unbiased about the deaf community just because I'm not deaf. And I don't have really deaf, I don't know anyone in the deaf community personally. I've met people, you can't help but meet people in this field. But I don't have any deaf friends and family involved. So it's, I'm definitely uninformed, and...All I know is what I know about the hearing world and the kinds of advantages that I feel that I've had because I've been able to be a part of that world. I understand that so, it's easier for me to support it. (interview #002)

Thus, it appears that, for five of the participants, personal identity plays a profound role in their choice of method of communication. The other four hearing participants may also have been influenced by their personal hearing identity, but this theme was not present in these interviews.

In conclusion, the themes that emerged seemed to group naturally in the previously mentioned clusters. Their relationship to one another, however, is not linear. In fact it appears that the groupings of themes are very inter-related and overlapping.
Chapter Five
Discussion/Implications

This study was designed to gain insight into the process by which nine professionals in deaf education arrive at their respective beliefs regarding methods of communication used in deaf education.

Throughout the course of this study two overarching findings emerged. First, through the interview and data analysis processes it became evident that all nine participants involved are caring professionals, committed to the children and families they serve. All nine individuals expressed a desire to see the children they serve grow into healthy, functioning adults, able to participate fully in society. What differed among the participants was how they see this goal being achieved.

The second encompassing finding was that the process by which the nine participants arrived at their respective beliefs was subjective. The expressed beliefs of the participants regarding methods of communication were influenced by their pre-involvement profile, their personal identity - hearing or deaf, - their world view, influential experiences, their educational philosophy, and their view of deafness. Despite these similar factors influencing their beliefs, the participants arrived at differing and competing positions regarding methods of communication used in the education of deaf children. This points to the subjective nature of beliefs: that beliefs are relative to people's experiences, values,
This next chapter will examine the findings of the research project by discussing the various themes. In addition, the findings in relation to claimsmaking will be explored; policy and practice implications will be highlighted; and lastly, suggestions for further research will be offered.

1. Discussion of Themes.

Pre-involvement profile. The pre-involvement profile of the nine participants was found to be a factor influencing the professionals' beliefs. As in Winefield's (1987) study, the hearing participants had no previous background with deaf individuals prior to becoming involved in deaf education. Consequently, it is safe to assume that before pursuing a career in deaf education these hearing professionals had little, if any, knowledge about the deaf community as a cultural minority group or about American Sign Language (ASL). Winefield (1987) asserts that "prospective teachers frequently come to the field without an intelligently developed opinion about communication methods. Rather than choose a training program to fit a philosophy, many develop a philosophy that the fits the norms of the training program" (p. 104). This finding points to the necessity for professionals to critically examine their beliefs and professional ideologies, for these have a direct influence on practice and client groups.

Unlike the six hearing professionals, the three Deaf participants entered the profession acutely aware of the debates
in deaf education. They have lived them. All three have firsthand experience of deafness and various communication methods in their own education background. This firsthand knowledge and experience with deafness is a recurring factor influencing these three Deaf professionals' views regarding communication methods to be used in educating deaf children.

**Personal identity.** The participants were influenced by their personal identity. Each participant entered the field of deaf education with a particular identity as hearing or Deaf, and it became clear through the process of data analysis that this variable was one of the factors influencing the participants' beliefs.

Lane (1992) argues that this identity is an ongoing factor influencing how individuals view hearing loss and communication methods. Padden and Humphries (1988) point out that hearing and Deaf people approach hearing loss from different "centres". Each "centre" influences how one experiences the world, how one views hearing loss, and inevitably, how one views deaf people (Ibid). For example, Padden and Humphries (1988) relate the story of Howard, a Deaf man whose family - his parents and brother as well as aunts and uncles - are Deaf. Howard told an audience that his early childhood was spent among Deaf people. However, his world changed when he was six. His parents took him to a school for Deaf children. 'Would you believe,' he said, 'I never knew I was deaf until I first entered school?' Padden and Humphries (1988) explain,
Howard certainly knew what 'deaf' meant. The sign DEAF was part of his everyday vocabulary; he would refer to DEAF people whenever he needed to talk about family and friends...When Howard arrived at school, he found that teachers [hearing] used the same sign he used for himself at home, DEAF. But it did not take long to detect a subtle difference in the ways they used the sign.

The child uses DEAF to mean 'us', but he meets others for whom 'deaf' means 'them, not like us'. He thinks DEAF means 'friends who behave as expected', but to others it means 'a remarkable condition' (p. 8).

Not hearing for this boy was not an impairment needing to be minimized or fixed, rather it was part of his everyday experience: his culture.

For the three Deaf professionals in this present study, their personal identity as Deaf emerged as a factor influencing their beliefs. All three Deaf participants kept going back to their personal experiences as a Deaf person and to what it means to be deaf in a hearing world. The hearing participants were likewise influenced by their hearing identity.

World view. The world view of the professionals also emerged as a factor influencing the participants' beliefs. A few themes emerged in relation to the participants' world view. One theme expressed by some of the participants was an abhorrence to the concept of segregation. The alternative concept seemed to be either assimilation or integration. The last theme which emerged in relation to the participants' world view was that their personal values played a role in their beliefs.

The three auditory/oral professionals who were interviewed
communicated that they did not value segregation, but valued "integration." They used the word "integration"; however, I felt they were communicating a concept of assimilation, of making the deaf children like the hearing majority. The goal of teaching oral skills to deaf children is, in effect, to conform to the form of communication and language used by the hearing majority, spoken English. Thus, the goal is to minimize the effects of "hearing impairment". In addition, the auditory/oral participants expressed their view of the deaf community as a segregated and insulated community. In fact, one participant stated, "I hate segregation of any kind." This was on the heels of expressing her views of the deaf community.

The view that the deaf community is an "insulated, segregated" community is not congruent with the lives of Deaf people in society. The majority of deaf people do not live in a deaf community. They have hearing neighbours, hearing colleagues at work and hearing family members; they live, as it is commonly said, in a "hearing world" (Hynes, 1988, p. 5). However, in a hearing world, deaf people are constantly reminded of their status as "outsiders" (Higgins, 1980, p. 79). It should not be surprising, therefore, that the deaf community forms the central focus of many Deaf people's lives. This community consists of people who share a common language, a common culture and common experiences.

The three Deaf participants in this study expressed a view that the deaf community is a resource, personally and for deaf
children and their families. Furthermore, the three Deaf participants see the deaf community advocating acceptance of difference and promoting co-existence and integration, not segregation (Doe, 1994). As Doe, a Deaf woman, explains,

the basic premise of most multi-cultural advocates is not assimilation, but co-existence and integration ... Minority groups (they) want what majority (we) Canadians have. Power. Money. Pride? ... Multi-culturalism involves making people in general aware and accepting of differences. Deaf culture wants hearing people to be sensitive to and accommodating of differences. Deaf people want to have their own schools where Deaf teachers and Deaf students can communicate and learn not only an education, but an identity. Multi-culturalism promotes the learning of "minority languages" (Doe, 1994, p. 17).

Congruent with Doe (1994), the three participants supporting bilingual/biculturalism value integration, but view integration from a multicultural perspective which embraces difference, including hearing loss. Thus, hearing loss is not an impairment needing to be fixed, but a difference.

The three professionals supporting a total communication approach also value integration and expressed the view that Deaf role models, deaf culture and American Sign language are positive resources for deaf children. However, they also expressed a fear about the growing power/influence of the deaf community. All three participants supporting total communication shared that they find the views of the deaf community "extreme", and that they fear the "pendulum" swinging too far - i.e., the adoption of ASL as the language of instruction in deaf education.

Lastly, the participants' values, which are related to
their world view, play an influential role in the professionals' beliefs. As stated previously, the six hearing professionals all value hearing. In contrast, the three Deaf professionals value not hearing. It is part of their identity and how they experience the world. These values play an integral role in shaping how these nine professionals view hearing loss.

Padden and Humphries (1988) point out that the language we use to talk about hearing loss reflects these values. For example, they share that the term "a-little-hard-of-hearing" has different meanings depending upon one's "centre", deaf or hearing. The hearing majority values hearing, therefore, this term reflects this value. The term means one who can hear, but has some hearing loss. In deaf culture it is just the opposite. "A-little-hard-of-hearing" means closer to deaf: someone who is closer to no hearing. Similarly, the language choices used by the participants in this study at times reflected the participants' values, culture, and personal identity as either hearing or Deaf. For example, the Deaf professionals spoke of children with hearing losses as Deaf, a socio-cultural term. The three auditory/oral professionals, when using the term deaf, used it to signify "really deaf children", signalling a degree of hearing loss. All six hearing professionals used, to varying degrees, the term "hearing impaired", a term often utilized by the hearing majority in Canadian society but rejected by the Deaf linguistic minority group.

In conclusion, the finding that the participants' world
views influenced their beliefs, is interconnected to all the other findings of this study. A person's values and views of society play an integral role, influencing one's beliefs.

**Influential experiences.** The participants all had influential experiences which contributed to their beliefs about communication methods. As in Winefield's (1987) study, the nine participants' personal background and education background played significant roles in determining the communication system they supported.

One notable difference between the six hearing professionals was that the three participants supporting total communication all mentioned contact with deaf colleagues as influencing their commitment to a manual system in deaf education. They disclosed an awareness of their Deaf colleagues' negative experiences in oral environments, and a growing appreciation for deaf culture and American Sign Language. On the other hand, the three auditory/oral participants expressed that they do not have contact with the deaf community or persons who consider themselves culturally Deaf. They were influenced, instead, by prominent hearing professionals.

This finding suggests that contact with others can lead to increased awareness of others' experiences and culture. This is congruent with literature addressing the topic of "unlearning racism" (Sawyer, 1989; Bolaria and Li, 1988). This literature suggests that understanding the position of others through contact and exposure promotes consciousness raising and can
facilitate unlearning racist beliefs (Sawyer, 1989; Crompton and Galloway, 1989).

Another striking theme which emerged under the heading of influential experiences was personal experiences. The three Deaf participants, in addition to having firsthand experience with deafness, all had directly experienced the auditory/oral method in their childhood education. It was in reference to these factors that the participants discussed their current beliefs which did not include auditory/oralism as the method of educational instruction. Like other bilingual/bicultural advocates (Lane, 1992; Erting, 1992; Aschenbrenner, 1992; Johnson, Lidell and Erting, 1989; Paul, 1988; Reagan, 1985) the three Deaf participants emphasized the importance of early communication with family, a method of communication which makes content easily accessible, Deaf role models, exposure to deaf culture and literacy skills.

Interestingly, none of the Deaf participants were against auditory and speech training. However, they viewed oral skills as a communication tool to be developed outside of educational instruction, if the child and family so choose. This position echoes the early views of the Deaf at the Milan Congress when the Deaf did not protest the progress in oral methods, but objected to the exclusion of Sign from the classroom (Baynton, 1993; Lane, 1984).
Educational philosophy. The educational philosophies of the nine participants emerged as factors influencing their beliefs about communication methods. All nine professionals desired to see the children they work with develop into healthy adults with a positive self-concept. How they saw this happening, however, differed.

The three individuals supporting the auditory/oral method argued that success is achieved by the child developing the communication system used by the majority (Lane, 1992; Gregory and Hartley, 1991). As one participant stated, in developing auditory/oral skills "there are increased opportunities" (interview #002). In addition, this position asserts that oral skills enhance literacy skills and facilitate integration. The problem with this position is that it assumes success and research demonstrates that not all children raised in oral environments "succeed" (Lane, 1992). In fact, the three participants supporting total communication and the three participants supporting bilingual/biculturalism all pointed to their professional experiences working with children who had moved from oral environments to manual environments as influencing their beliefs regarding the importance of manual communication. They talked about troubled children who could not communicate and whose frustration lessened upon discovering communication. In addition, the three Deaf participants shared their personal frustrations in oral environments.

The auditory/oral participants all expressed the view that
Sign is not the natural language of the deaf and is a "concrete" language. One participant gave an example of how Sign is concrete. She stated "'I go store' doesn't cut it" (interview #002). This view of Sign was a factor in their beliefs regarding methods of communication. However, this understanding of American Sign Language is based on transliteration. Lane (1992) argues that educators with passing familiarity with ASL have thought it primitive.

They have been misled by word-for-word transcriptions of signed utterances; the substitution yields a series of words that necessarily violates the rules of the reader's language and makes the source appear primitive and ungrammatical. For example, the American Sign Language for "a bear killed my father's geese; father shouldered his gun and went to look for it" is, word for word: GEEOSE, FATHER HIS, BEAR CATCH EAT; FATHER, GUN SHOULD-ER-ON, GO-LOOK-FOR BEAR. That this is no more evidence for primitiveness than the corresponding transcription from Latin - "Bear, Father's geese my killed; gun shoulder leaned against and went so bear might search for" - should be obvious but is not, given the educators' bias against the very idea of manual language (p. 121).

Furthermore, this view of ASL contradicts the increasing amount of research (Stokoe, 1965; 1987) which demonstrates that American Sign Language is a legitimate language with its own grammar and syntax.

Lastly, the auditory/oral position emphasizes the desired long-term goals of parents. All three auditory/oral participants stated that "the long-term goals are what's important." One participant stated:

That is why I keep on coming back to what is your long-term goal or goals? Not the short term. We are not trying to advocate that when using an auditory approach that the
child will have as much language as possible in those first few years. That's not our goal. They can't have good language in those early years, but we're not looking just at those years. We're looking beyond that to where you want to get, and how to get there (interview #001).

Oralists maintain that the deaf child's language acquisition has to be delayed (Wallin, 1993, p. 3). This view however, may overlook the importance of early communication in the social, psychological and cognitive development of deaf children.

One researcher, Schum (1991), explores the implications of delayed language development in deaf children. He argues that language is a crucial variable in the developmental process of deaf children. The major thesis in applying this model is that because of their communication limitations, some deaf children do not receive the full environmental experience necessary to construct higher levels of interpersonal understanding (Schum, 1991, p. 321). He suggests that a language system is imperative to enable the child to process, code and manipulate experiential information. "If a deaf child shares an early communication system with her parents, and if the child is able to develop a full and complex language system as she grows up, then it is unlikely that she will fixate at one of the earlier stages of social interaction" (p. 326).

It is argued that young deaf children need to have the communication tools to deal with complex issues that confront them as they develop (Carver, 1994). For example, as described by Carver (1994), two 3-year old Deaf boys in a local preschool
program who had recently lost one of their parents were observed saying (ASL presented in English glosses):

Boy 1: MY DADDY LIKES GRAPES
Staff: DO YOU LIKE GRAPES?
Boy 2: MY DADDY GONE.
Boy 1: MY MOMMY GONE.
Staff: THAT'S RIGHT. MOMMY'S GONE.
Boy 1: MOMMY HAS WINGS. SHE FLIES.
Staff: HIS DADDY HAS WINGS, TOO.
Boy 2: MY DADDY WALKS UPSTAIRS (pointing skyward).
    GOD TOOK MY DADDY.
Boy 1: YES GOD TOOK MY MOMMY. MY MOMMY DIED
    (pointing also skyward)

Carver (1994) asserts that "there is no way that young Deaf children without access to sign language would be able to discuss such issues, even among themselves and at the age of three" (p. 2). In support of this statement research (Williams, 1993) comparing the interactions of oral deaf preschoolers and signing deaf preschoolers, revealed that the oral children interacted infrequently with one another as they participated in a school task. The signing children, in comparison, interacted freely and frequently among themselves (Williams, 1993, p. 267).

The oralist view may have serious consequences for the child's upbringing:

During the first years of a child's life the need for a means of expression increases steadily. If this need is not met the child will become restless, disharmonious, frustrated and have frequent tantrums. This is something that a great many deaf people remember vividly. Without access to a language the child will experience difficulties in communicating feelings. It will be hard to tell the parents the reasons for feeling sad or happy, and it will be equally hard to receive answers to all questions. If the parents become happy or angry the child will frequently not understand why. When e.g. the child has done something wrong there will be no or very meagre explanations as to what was wrong (Wallin,
Communication in a natural language, Sign, empowers parents of young deaf children in the sense that they can express themselves to the deaf children and understand what the children are trying to say (Carver, 1994).

Research indicates that emotional and behavioural problems are much higher among deaf children than among hearing children (Meadow and Trybus, 1979). Carver maintains that at the root of this problem is the inability of the deaf child to make himself [herself] understood. Interestingly, research indicates that there is a lower incidence of emotional and behaviour problems among deaf children whose families communicate in natural sign language (Carver, 1994; 1984; Meadow and Schlesinger, 1972; Corson, 1973). The prevalence of emotional and behaviour problems among deaf children of deaf parents is far lower than that among deaf children of hearing parents in general (Schum, 1991). One of the striking differences between these populations is the clear, shared communication system between deaf children and deaf parents. Intriguing is the finding that deaf children of hearing parents who communicated with them in signs, in addition to speech, showed better mental health than deaf children whose hearing parents used only the oral approach (Meadow and Schlesinger, 1972). Thus, although some deaf children raised in oral environments will develop oral skills, the early developmental costs associated with delayed language acquisition may be great.
The similarities regarding the goals of education between the participants supporting total communication and bilingual/biculturalism were surprising to me. Both these groups expressed a commitment to accessible communication. In addition, they both emphasized early, accessible communication as imperative to the psycho-social, and cognitive development of deaf children. Furthermore, they view integration being achieved through the development of positive self-esteem, intellectual growth and literacy skills.

One way these two groups differed was that the participants supporting total communication viewed signed English as important to the development of literacy skills. In addition, they commented on their view that signed English fits families' needs better. It follows English word order; therefore, it is easier for families to learn and use. However, supporters of bilingual/biculturalism argue that signed English is confusing to deaf children. It breaks the rules of natural language (Lane, 1992). In addition, research (Supall, 1986; Johnson, Liddell and Erting, 1989) has demonstrated that signed English used in the majority of deaf education programs is not comprehensible. The research has demonstrated that when a teacher signs and speaks at the same time, the auditory sense dominates while the signed portion of the message suffers (Johnson, Liddell and Erting, 1989; 5).

Bilingual/biculturalism, in response to both oralism and total communication argue that deaf children should not have to
struggle to get at the curriculum in deaf education. One participant demonstrated how unequitable such an arrangement is. He explained how ridiculous it would be to place a group of hearing children in a room where a teacher conducted a lesson on science without using her voice (interview #007). Thus, these participants advocate the importance of ASL in the classroom. One participant stated about Sign,

One advantage is that ASL is really a content rich language. Also, ASL is the language that most naturally fits with deaf people's needs. ASL is clearly designed for deaf people. It's theirs, it fits their needs, and it's also the language that deaf people feel comfortable with. It's good for their self-concept. They can focus on substance not form. Most of the time education programs focus on form but not on substance. (interview #007)

The three Deaf participants recognized the importance of learning the language of the hearing majority, but their emphasis was on making curriculum accessible. Lane asserts (1992),

The members of these language minorities are usually realistic about language and power; they recognize that their children need to know the majority language to get ahead. They generally favour an education for their children in their most fluent language, the language of their minority, but an education that will make the children bilingual (p. 103).

In conjunction with other bilingual/bicultural advocates, the three Deaf participants argued that ASL is the natural language of the deaf (Carbin, 1993; Johnson, Liddell and Erting, 1989). ASL has developed in a community of users sharing a common culture and common communication needs. Thus, it has developed over time to match the communication needs of the deaf and makes
View of deafness. The results show that one's view of deafness is an influential factor contributing to a person's beliefs regarding communication methods. As in recent literature (Lane, 1992; Gregory and Hartley, 1991; Padden and Humphries, 1988; Winefield, 1987), this study found that the professionals' construction of hearing loss as a disability or difference played a significant role in the type of intervention they supported. Gregory and Hartley (1991) explain that there are basically two constructs of deafness: the audiological perspective and the other, the Deaf perspective.

Interestingly, the six hearing participants involved in this present study all articulated the view that hearing loss is an audiological disability. This position finds its roots in a biomedical model of disability - one that emphasizes an individual's audiological status. Thus, it is a model which assumes that illness is objective truth which is knowable and testable; and it assumes an objective norm exists against which normality or ability can be determined (Bickenbach, 1993; Oliver, 1990).

The biomedical model of disablement has both strengths and weaknesses. First, the biomedical model, in its pursuit to discover physical causes for deafness, has replaced moral innuendos about people with disabilities - that they were tainted and ill-fated sinners, being punished by vengeful gods for unknown sins - with the (putatively) value-free and
A second benefit of this theory has evolved from the emphasis given to making one's life as 'normal' as possible. This emphasis has led to technological developments, enhancing the lives of individuals who are deaf (i.e. TTY's, flashing lights, and closed captioning machines).

A third strength of this theory according to Bickenbach (1993) is the claim that this theory reflects the benevolent impulses of humanity: its manifestation in public policy designates those who occupy the 'sick role' as deserving of charity and care. This claim, however, has been challenged by critics revealing the devastating impact and injustices that have been carried out in the name of benevolence, or arguably self-interest. Lane (1992) argues that it has been the oppressive benevolence of hearing "experts" adopting the biomedical model who have disabled the deaf community. In addition, Gregory and Hartley (1991) argue that within social welfare an ideology of disability has led to a focus on inadequacy and has generated a caring paternalistic model of welfare.

This theory lends itself to further negative criticisms. One such critique lies in the fact that this model is deficit-centred and individualistic. By fixing the 'problem' within the individual, this theory ignores the social environment, thus establishing expectations that can have disastrous personal and social consequences (Bickenbach, 1993). As Lane (1992)
explains,

By locating the source of the problem in the individual - the source of poor educational achievement in biological deficit, the source of criminality in psychiatric disorder, the source of deaf underemployment in cochlear malfunction - medical discourse mystifies; it screens the social origins of these problems. It also provides a reassuring aura of professional competence to solve them. Medicalization is the tranquillizer we take to put our social problems out of mind. (p. 209)

This theory medicalizes the problem and treats it as a pathology needing to be fixed. This disease-centred bias is reflected in deaf education policy (Lane, 1992).

A second critique of this model is directed at the assumption that there is an objective and transcultural norm of human well-being and ability. The reification of the idea of normality ignores the subjective issue of what normality actually is. The failure to recognise the situational and cultural relativity of normality is a serious omission in an international scheme (Oliver, 1990) and has far reaching implications.

Scholarship does not provide reliable guides on where to draw the line between valuable diversity and treatable deviance. In the course of history, health practitioners and scientists have labelled various groups biologically inferior: these include women, Southern Europeans, blacks, gay men and lesbians, and culturally deaf people. (Lane, 1992, p. 28)

This quote highlights the ethical dangers in assuming an objective concept of normal. Lane (1992) also asserts:

When the powers-that-be succeed in applying the infirmity model to any one cultural and language minority, all minorities are in greater danger: if members of the deaf community can be declared defective, it is much easier to do the same to
African-Americans, gays, Jews (p. 28).

Unless one measures up to the defined measuring stick of normality, then one runs the risk of stigmatization. Clearly, despite the historical benefits of the medical model, the potential for many negative consequences exists in the application and domination of this perspective.

Gregory and Hartley (1991) point out, however, that "few professional ideologies of deafness are based wholly on audiological considerations, most take at least some account of social factors" (p. 2). This is true for the six hearing participants in this present study. They articulated an audiological view of hearing loss, but all took into account some social factors, some more than others. However, Gregory and Hartley (1991) continue to point out that the social factors which are considered are influenced by the persons' perspective, whether they are hearing or deaf.

From the point of view of the majority of hearing people in society, deaf people have been perceived as disabled, impaired which has implications for intervention (Lane, 1992; Gregory and Hartley, 1991; and Padden and Humphries, 1988). All six hearing participants emphasized minimizing the effects of disability when working with deaf children. Gregory and Hartley (1991) assert that educationalists who have adopted a disability model have emphasized the need for deaf people to acquire the language which is the vehicle of socialization and participation in society; most clearly seen in the development of an oral
approach (p. 2). The emphasis is on the assimilation of deaf people into a hearing-dominated world. Lane (1992) argues that it is the monopoly of a disability and audiological perspective which drives a medical emphasis in deaf education. However, an alternative construction exists, underpinned by a pluralistic view of society.

The alternative construct of deafness, held by the three Deaf participants in this research study, is the Deaf perspective, rooted in a socio-cultural model. This construct poses that hearing loss is not a disability when viewed from the Deaf perspective. "It advocates a bilingual model of integration resulting from a construction of deafness which attempts to incorporate ideas of cultural diversity" (Gregory and Hartley, 1991; p. 2). Hearing loss is viewed as a difference, not an impairment. The Deaf are viewed as a cultural, linguistic minority group, sharing a common language, values, norms, and experiences of the world: a shared culture. This cultural model of deafness can be seen to underpin bilingual approaches to deaf education and the empowerment model of social work (Gregory and Hartley, 1991, p. 3).

Related to the cultural perspective of the Deaf is identity. All three Deaf participants pointed to their own Deaf identity as influencing their beliefs about communication methods. They argued that the development of a positive self-concept, identity, is important in the development of the deaf child. The identity to which they referred was a Deaf identity.
Human development theories see identity formation as a crucial aspect of human development (Gilligan, 1982; Erikson, 1973). The story of a Deaf woman, [Liz], which was recounted to me recently by a Deaf colleague directly relates to this issue of identity formation:

[Liz] grew up in [a major city centre]. She had a twin deaf sister and they both were raised orally. At the age of 11 her sister died. Through her teenage years [Liz] was integrated in a hearing school and she never saw any Deaf adults. [Liz] shared that she grew up thinking she was going to die at age 18 because she had never seen a Deaf adult (in personal communication, November 1, 1994).

Harris and Stirling (1986) explored the concept of identity. They interviewed deaf students at the Kendall Demonstration Elementary School (KDES) regarding their self-concept and identity. Their research uncovers the following common perceptions of deaf students:

* They tend to label deaf teachers and professionals as hearing because they do not wear hearing aids.
* They identify anyone with good signing skills as deaf.
* They switch identities: deaf, hard of hearing, hearing impaired, or hearing, because they are often confused about their own identities.
* Some believe they will become hearing because their other hearing family members are hearing.
* Some believe that illness could reduce or restore their hearing.
* Most deaf children of hearing parents tend to focus on hopes or expectations that they will become hearing or hard of hearing as a part of the "moving up" process. (p. 43)

Harris and Stirling (1986) assert that "Deaf children need to know who they are first before they can participate effectively in non-deaf society" (p. 46). Related to this is the position of the National Indian Brotherhood (NIB) (1984): "It advocates
the establishment of cultural education centres which would provide for personal development necessary for social and economic achievement. The NIB explains: This personal development is achieved when an individual knows himself fully: His personal identity, dignity and potential" (in Carver, 1989, p. 65). Similarly, the three Deaf participants in the current study expressed the importance of a healthy self-concept and identity as related to education and human growth, and viewed bilingual/bicultural education as facilitating the development of a healthy self-concept and identity.

Conversely, the six hearing participants, to varying degrees, rejected the idea that deafness is the child's identity. What is striking, however, is that the labels given by the majority culture to the Deaf reflect that deaf people are "different from" the majority (Lane, 1992). For example, "hearing impaired," "hearing handicapped," and "disabled" presuppose a normal state of hearing. We label them as different from us and then say, that's not their identity. However, it has been argued that it is what distinguishes minority groups as different from the majority that becomes a major factor in their communal identity (Bolaria and Li, 1988). Schlesinger and Meadow (1972) note,

As in the case of blacks, or immigrants, the most successful identifications may occur in those individuals who accept the differences imposed by colour, language, or minority group mores. The successful individual may thus live in many worlds; the alienated individual may be a stranger in all (p. 115).
Of course, in any group there is diversity, and caution must be taken not to stereotype. However, a difference from the majority is a unifying force in communities, contributing to their collective identity and power. Moreover, this collective identity is particularly relevant to the ongoing social movement of the Deaf and its related claims (Drover and Kerans, 1993). Therefore, there are consequences in the position that deafness does not constitute the person's identity.

In conclusion, at least two views of deafness exist which influence one's beliefs about methods of communication. Additionally, one's view of deafness influences how one views the identity of deaf people and values this identity.

2. Findings and a Claimsmaking Approach.

The antithetical claims of the three groups of participants in this study point to the larger context of deaf education where an historical conflict regarding the education of deaf children has existed. When placed in this larger context, the variable of power becomes fundamental in understanding which claims and which actors have influenced and continue to influence the education of deaf children. For the right to define a problem and to locate it within one social domain rather than another - to construe it as a problem of medicine, education, rehabilitation, religion, politics - is decided by power (Lane, 1992, p. 25). The history of the deaf community is marked by a long history of struggle between deaf people and the hearing people who profess to serve them.

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The three positions discussed in this report are dissimilar and contradictory. Yet, one perspective, the Deaf perspective, previously and currently, has had little influence on policy decisions. One glaring example of this, was when the United States Federal Drug and Administration approved cochlear ear implants. Lane (1992; 1994) uncovers that not one Deaf person was consulted on the issue. In fact,

The panel which ruled on the fate of innumerable deaf children and adults in the decades to come, consists entirely of hearing people: five ear doctors, an audiologist, a representative of implant manufacturing, and a "consumer representative" - not a deaf person, mind you, or the parent of a deaf child, but a hearing educator of deaf children (Lane, 1992, p. 204).

"In America there is no place for deaf people where decisions about deaf lives are being made" (Lane, 1992, p. 204). This situation is the "coup de grace" for the deaf community (Stewart, 1988). Jacobs (1974) explains,

What makes this sadder and more infuriating to the deaf adults is that those educators [and representatives from the medical profession], who have not better than secondhand experiences with deafness, should be in a position of authority where they have influenced the development of untold thousands of deaf children...They together with their political superiors and parents, have consistently refused to listen to, let alone consult the only people who have been through the mill - the deaf themselves (p. 200).

A claimsmaking approach to welfare recognizes that society is a system comprised of opposing groups with respect to interests, values and expectations where the interests, goals, values and expectations of those with power dominate (Mullaly, 1993). Claimsmaking, therefore, occurs in an hegemonic context
where the response to claims is to preserve the hegemonic order (Drover and Kerans, 1993, p. 13).

The context in which the Deaf have articulated their claims has been dominated by an audiological construct of deafness, based in the biomedical model of disability (Gregory and Hartley, 1991). Thus, their claims have met resistance. Drover and Kerans (1993) point out that claims which challenge the existing social order will be responded to in such a way as to perpetuate the present relations of domination and subordination.

One response to the claims of the Deaf by those in positions of power has been to highlight the minority of deaf people who do not consider themselves part of deaf community - i.e. the oral deaf. These individuals view their hearing loss as an hearing impairment and view themselves as part of the larger hearing society. This response attempts to discredit the claims of the Deaf. A similar strategy is employed in response to a structural analysis of poverty: the minority who make it out of poverty are held up to demonstrate the possibility of overcoming poverty with "hard work". Such a response individualizes the social problem and negates alternative interpretations of the problem. These responses legitimate the continuation of the existing social order. One of the auditory/oral participants in the present research implemented this response. When I voiced a criticism that I have heard from members of the deaf community, she told me I should speak to
some of her former oral deaf students.

Another response is an institutional one. The current institutional arrangements dictate a scenario where organizations and agencies serving the Deaf receive government support, money, through government branches which serve communities with disabilities and special needs (Lane, 1992). This type of institutional arrangement places the Deaf in a position where in order to receive funding they must accept a label of disabled, therefore, perpetuating the social construct of deafness as a disability. This response has manifested itself internationally. For example, a recent Deaf article commenting on the Americans with Disabilities Act, ADA Gives Rights to Deaf People, comments that for the purposes of this Act Deaf people are defined as disabled (Lane, 1994). Likewise, the Deaf in Austria applied for funding for their national meeting. The government agreed but only if the Deaf group would take money from an umbrella disability group (Ibid).

Another response to the claims of the Deaf has been to activate the dominant values and discourse of society. In liberal societies, members value freedom of choice. Thus, one response to counter the claims of the Deaf community is to mobilize the language of choice. For example, auditory/oral approaches in deaf education employ the language of choice. They talk about the importance of the parents' "choice" in deciding what communication "option" is best for their child (interview #001). In activating the dominant discourse, the
claims of the deaf community are embraced partially for they constitute another "choice", however, they are placed in competition with the other available choices. Thus, in a hegemonic context, the dominant paradigm remains intact. A system of structured inequality continues to exist where the views of professionals in positions of authority (hearing professionals) dominate despite the ongoing claims of the Deaf.

The deaf community's claims regarding their collective identity - that they constitute a linguistic minority group, not a disability group - and their claims regarding the education of deaf children, are grounded in their personal firsthand experience of being deaf, of various communication systems in deaf education, and of living in a hearing world. A claimsmaking approach takes as its starting point the claims of individuals and communities who live the consequences of oppression and subordination (Drover and Kerans, 1993). A claimsmaking approach assumes that the Deaf are aware and are becoming increasingly aware of the needs and goals necessary in developing their human capacities (Drover and Kerans, 1993) and, consequently, can contribute valuable insight to the area of deaf education. Thus, the claims of the Deaf direct us to policy implications.

3. Policy Implications.

This research highlights the fact that formulated claims can be competing and contradictory. The three positions explored in this study point to this reality. The question then
becomes: on what basis are the various claims adjudicated? This study, placed in a claimsmaking framework, offers suggestions in grappling with this question.

First, the findings of this study pointed to the subjective nature of beliefs. There were numerous factors which influenced the participants' beliefs regarding methods of communication in deaf education. If the claims are relative, we are left with few resources to mediate the claims, and the resulting differences between the claims have diverse implications for policy. This research, however, supports the view that deaf individuals are the only group of people in society who have firsthand experience and knowledge of deafness. Thus, they are experts on the implications of hearing loss and can contribute valuable insight about the needs of deaf children. A claimsmaking approach, therefore, posits that the deaf - those with firsthand knowledge of deafness - should be significant actors in the process of policy development and implementation.

Based on their personal experience and knowledge of deafness, the three Deaf participants in this study articulated specific claims regarding policy. The first is that American Sign Language be recognized as the language of the Deaf and that the education of deaf children be conducted in American Sign Language. Secondly, deaf children should be taught in schools for the deaf. Thirdly, deaf children should be taught English, using ASL, written English and manual English. Fourth, deaf culture and history should be included in deaf education
Lastly, initiatives should be set in motion to increase the number of Deaf role models in deaf education, Deaf teachers, administrators and staff. This list is not comprehensive and is congruent with claims of other deaf leaders (Carbin, 1993; Bienvenu, 1989).

The other important actors who I believe should be influential in policy issues are the parents, the families of deaf children. The parents are the experts on their families' needs. However, a problem exists.

The current relationship between the parents of deaf children and the Deaf is not as it should be. This relationship has been infiltrated by the medical model and by hearing professionals who have initial contact with parents. Ninety percent of deaf children are born into hearing families.

Typically, a deaf child is the first deaf person that the members of his [sic] family have ever encountered. For such parents, having a deaf child is generally unexpected and traumatic. Furthermore, their first advice usually comes from a paediatrician or an audiologist, many of whom do not understand the importance of early sign language acquisition (Johnson, Liddell, Erting, 1989, p. 1).

The initial contact with significant professionals who do not know about or disregard the value of the deaf community to families with a deaf child, sets up a relationship where the potential resources of the deaf community remain unknown or overlooked. For example,

At the 1991 meeting convened in Boston by the Cochlear Corporation to promote childhood implants, a deaf leader asked an otologist at the rostrum whether his implant team informed parents, whose deaf children were candidates for surgery, about the deaf community
and ASL as alternatives to implantation. The otologist replied with admirable candour: "We tend to present things from our point of view." The parents meanwhile are in crisis and unlikely to be critical of that view. If the professional person does describe the deaf community, it may well be in terms that are so concise that the parents do not really grasp an alternative conception of their child's status and destiny (Lane, 1992, p. 24).

Furthermore, hearing parents share a value of hearing which influences their views, expectations, and natural dreams for their deaf child.

Most of us are not aware of the cultural premises that guide our lives; we are ethnocentric and naturally so, for social life would be impossible if every action required our reflection. We have an unconscious mental model of our culture that makes most of our choices for us, leaving us free to grapple with the ones that remain. Our ideas about wealth, family, sexuality, and disability, for example, all seem more or less given and appropriate. We know abstractly and vaguely that other people live in other ways; but we do not know the premises beneath those differences; we do not see the world from another vantage point (Lane, 1992, p. 161 - 162).

Thus, hearing parents' cultural values regarding hearing loss and disability play a role in the choices parents make for their deaf children (Lane, 1992).

The implication of this relationship between the deaf community and hearing parents of deaf children is that it needs to change. In order for the goal in policy development for the actors to be heard out as carefully as any other (Drover and Kerans, 1993), to occur, a relationship of mutuality and respect must be established between parents and the deaf community. This has implications for practice.
4. Practice Implications.

As described previously, hearing families are in a complex predicament. Most families have never met a deaf person prior to the discovery of their child's hearing loss (Johnson, Liddell and Erting, 1989). Thus, they are placed in a position of needing to know and access information quickly, in order to make informed decisions about their deaf child and their family. One recommendation regarding serving families of deaf children is to network them with Deaf people, the deaf community. Deaf adults can play a special role for hearing parents:

They can provide practical advice born of their personal knowledge of deaf people, and of their language and culture. They can get information about community services. They are a living example of how the child one day may be a knowledgeable adult and contributing member in society (Lane, 1993).

In addition, early intervention programs centred on the needs of the family should be available for families with deaf children. These services should include a home visiting program for the family while the child is an infant, family support services, specialized preschool programs with qualified teachers (including Deaf staff), and sign language instruction for the family (parents, siblings, extended family). Lastly, families should be offered counselling and support services to examine what this change will mean for the family and to work through the grief which is a normal response in hearing parents of deaf children (Johnson, Liddell and Erting, 1989).

During this early period in the child's life, professionals are significant influence in the family (Hynes, 1988). This
situation points to practice implications for professionals.

This study probes our commitment to tolerance by exploring how far we are ready to go in respecting the legitimacy of a linguistic and cultural minority that arises from a physical organization different from our own (Lane, 1992, p. xii). Furthermore, what place do we want to make in our society for the many distinct communities that constitute it? The findings, therefore, suggest the importance of professionals examining and reaching for understanding of difference. In congruence with Lane (1992) I assert:

For those who think we'd best get on with making the pluribus unum, measures that seem to acknowledge and even reinforce our differences, such as bilingual and bicultural education, appear dangerously divisive. For those who think, as I do, that the heterogeneity of our society is its most valuable resource, the growing use of technology from the biological and social sciences to minimize and even obliterate our differences is alarming indeed (p. xii).

These values are congruent with social work goals and values.

Another practice implication relating to professionals that these findings point to is the danger of "professionalism". One of the participants in the research pointed to the self-interest and agenda that professionals have in the area of deaf education. He stated,

Many professionals have a vested interest in continuing the disability status of the deaf. Suppose the system was to change overnight. Where Deaf people were looked upon as a cultural group, allowed to use ASL... Well then, many thousands of people would be out of work... Those people are in positions of power. They still are in control. They resist change. They resist the idea that Deaf people aren't a disabled group. The fact that these people are in control makes Deaf people more disabled. It increases the
disability of the deaf... I feel that if the system
was to change overnight thousands and thousands of
dollars would be saved. Money spent for remedial
approaches, to fix the problem... the list goes on...
The point is, if you allow Deaf people to be in more
control what would happen to their life? If they had
the ability to control how they are labelled, I
suspect that problems would diminish (interview #007).

An entrenched commitment to one ideology and perspective without
critical ongoing analysis can lead to professionalism where
individuals defend their position out of self-interest or
ethnocentric values and beliefs (Lane, 1993). The findings of
this study, therefore, suggest that professionals awareness of
how their own beliefs have been shaped by their experiences,
values, culture, and history, is important. Values, beliefs and
professional commitments do influence our practice.

These implications have relevance to the education of
professionals. They direct us to the importance of increasing
the awareness of professionals (social workers, audiologists,
speech therapists, doctors, teachers and others in deaf
education) regarding the claims of the deaf community. This can
be done in conjunction with efforts around multiculturalism and
unlearning racism. Thus, these findings point to the importance
of incorporating curriculum on deaf culture and the claims of
the Deaf in professional development and education. One
caution, however, that such education may undermine the ongoing
social movement of the Deaf to include such consciousness
raising tactics with issues of disability, a construct which has
had tyrannizing influence in the lives of Deaf people.
5. Future Research.

Some important areas emerged in the course of this research which point to future research ideas. One area of particular importance is around how parents make decisions regarding the future of their deaf child. Given the present barrage of contradictory information available to parents, research providing clarity about the needs of parents upon diagnosis of their child's hearing loss would be valuable. Thus, one suggestion for future research would be to establish a social action research group of parents to look at the needs of parents in accessing information and knowledge in order to make informed decisions for their deaf child and family. A further research suggestion related to this issue, would be to explore the factors influencing parents decisions regarding communication methods for their family.

Another area which would be advantageous is in examining the relationship between methods of communication and identity formation. In addition, an exploration of the connection between method of communication and quality of life would provide insight onto the method of communication debate.

Lastly, research relating to the education of professionals involved in serving the deaf would be useful. For example, a survey of curriculum including information about the Deaf, and how it has been used and received by students. Connected to this, investigating the kind of education material to be used in
teaching professionals about the claims of the Deaf would provide valuable information.


In conclusion, this study explored how nine professionals involved in deaf education come to support their position regarding communication methods in deaf education. The findings pointed to the fact that for these professionals many factors are influential, and the process of arriving at their beliefs appears subjective. Their pre-involvement profile, their personal identity, their world view, influential experiences, their educational philosophy and their view of deafness were all factors which emerged as influencing the professionals' beliefs regarding methods of communication used in deaf education. Despite the similarity of these factors, the nine participants arrived at diverse and conflicting positions.

This research did not address how all professionals come to view methods of communication, however, it did explore how the nine professionals in this study came to their respective views on communication methods. Elements of these findings may represent to varying degrees other professionals' processes, however, these results are not generalizable. The findings do, however, point to the need to examine how our own processes of beliefs and knowledge influence policy and practice. Furthermore, these findings point to the need to question the process of policy decisions in deaf education. This is particularly relevant when one recognizes that the Deaf, the
only ones with firsthand experience of deafness, have been largely silenced in the historical process of policy development.
References


Appendix B

INTERVIEW GUIDE

1) Given the many models of communication in Deaf education, which are you a proponent of?

   P: T.C., Oralism, Bi/Bi

2) Can you describe how your beliefs about _____________ have evolved throughout your career?

3) What has influenced your thinking regarding methods of communication?

   P: Experience, Education, Colleagues, Research, Event, contact with deaf community, world view

4) What do you think about other methods of communication?

   P: Advantages, Disadvantages
Appendix D

Chart One: The Factors Influencing Professionals’ Beliefs Regarding Methods of Communication in Deaf Education

<table>
<thead>
<tr>
<th>Types/Dimensions/Conditions (Themes)</th>
<th>Properties</th>
<th>Stages</th>
</tr>
</thead>
<tbody>
<tr>
<td>No previous background</td>
<td>Pre Involvement</td>
<td>Pre-Involvement Stage</td>
</tr>
<tr>
<td>Personal interest as a motivating factor</td>
<td>Pre Profile</td>
<td></td>
</tr>
<tr>
<td>Personal investment as a motivating factor</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Deaf = a medical term
Hearing loss is not the person’s identity
Hearing loss as a disability
Deafness not a disability

Education/training
Personal experiences
Experiences with key people
Professional experiences

View of language and forms of communication
View of technology in deaf education
View about the goal of deaf education

Integration valued
Segregation disadvantage
Personal beliefs/values

Belief in a Method of Communication
Educational Philosophy
World View
Personal Identity