



**Deaf Kids Are Quiet, Right?
Individual and Family Adjustment
to Deafness**

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Goals

- Obtain an overview of individual and family issues affecting psychological development and adjustment in deaf children.
- Look at the deaf child's adjustment from a stress-coping perspective.
- Suggestions on helping children and families will be presented.
- Discuss the thorny issue of what is “normal” behavior in deaf children.



Ground Rules

- Discussion can evoke strong emotions and opinions, so please...
- Have respect for divergent opinions.
- Ask questions or share comments as the class proceeds.
- Warning: I have biases based on my experiences and who I am. So do you!



Cognitive and Social Development

- Affected by access to language and cultural identification.
- How do hearing children develop this? Deaf?
- How does the deaf child/adolescent describe him/herself? Culturally hearing, marginal (estranged), deaf, or bicultural? (Glickman, 1996)
- How is identity shaped by the medical model?
- Vygotsky: development hinges on person's interaction with environment. How is this same or different in the case of a deaf child?



Individual Adjustment Issues

- The Coping- Stress Balancing Act.
- Understand it from when the deafness was discovered.
- Depends on child's age, how much social language is on board? How has the family responded? What kind of professional guidance has been sought or received?
- The child's individual characteristics (e.g. temperament)?
- Amplification? Speech services? Mapping the CI?
- Other complications? Family stresses?
- What coping methods have been used? What school, familial, or community supports are available to the student? To the family?



Factors that Enhance Coping

- Sign language used @ home (Mapp and Hudson, 1997)
- Peer/school accepts (less stigma, bullying)
- Student accepts deaf identity (Jambor and Elliott, 2005)
- Bicultural abilities are a coping- enhancing factor (Jambor and Elliott, 2005)
- Ethnic differences can be supportive (Mapp and Hudson, 1997) but...
- Ethnicity impacts family willingness to seek help; self-advocacy varies by culture.

Factors Negatively Influencing Coping

- Stigmatizing issues- hearing peers applied negative attributes to D and HH kids (Blood and Blood, 1983).
- Pathologizing labels, e.g. sign language is viewed as inferior so signers are less intelligent (Moore, 2001).
- Skeletons in the Closet- when deafness was preventable, e.g. a result of drug use, domestic violence that led to premature birth, etc.
- Shame brought on to the parent for having a “less than perfect child”? Higher divorce rate when children are different or have a handicap? The deafness can be resented...



More Coping Barriers

- In clinically-referred (residential treatment) populations, one study found an extremely high % of sexually abused deaf clients (Willis and Vernon, 2002) vs. hearing sample.
- Might impact coping (won't tell, won't be believed).
- Many deaf don't have access to recovery treatments so they "live in silence." This can embitter them about being deaf.



“Mixed” Influences

- Higher levels of hovering OR disengaged parents (polar opposites). Awareness beats hovering.
- Intrusive Parenting leads to limits on independence and increased personal anxiety (Barber, 2002).
- Increased behavioral turmoil is often an outcome of extreme laissez faire parenting (Baumrind). Behavior monitoring beats neglect.
- Cochlear Implants- can provide a reasonable communication link; can also heighten denial of parents. Can be undersold by militant deaf position or oversold by proponents. Comes down to an individual adjustment, which can be poor to excellent!



Constructing a Picture of Stress/Coping

- What are the child's known stressors/ support system?
- Parent stressors/ support system?
- What resilience factors are present?
- What supports are feasible to tip the balance in a positive way?
- Coping strategies can be adaptive or maladaptive. Adaptive strategies lead to higher levels of adjustment, progress, & independence.



What is Normal Deaf Behavior?

- Start with environmental factors. Children thrive in conditions that contain 5 features. These are provided by caregivers.
- Most important: **safety** and **communication**.
- Important: **relationships**, **consistency**, and **positive authority**.
- How are these features expressed to deaf children in different home and school environments?
- Keep the variables in mind for case discuss'n



A Case To Discuss

- Hector is a 10 year old boy from a hearing family. His bilateral profound deafness was discovered when he was 18 months old. The cause of the deafness is not known. He received his first amplification at 4 years old. Because this didn't work, he received a cochlear implant at 6 years old. Despite receiving mapping and intensive speech services, his progress in speech and audition have both been very slow.



Case Study (continued)

- Hector's parents invested heavily in an oral/aural approach during his first 3 years of formal education (k-2). A teacher recommended that they consider a total communication program where he could learn sign language to assist him. They enrolled him at FSDB in 3rd grade and he was retained after failing the FCAT test (mandatory). He is now in 4th grade.



Continued

- Hector's triennial evaluation is now due. We know from his file that he reads at the beginning of the 2nd grade level and his math computation is about 3 years 6 months. But what is Hector like?
- He is a likeable boy who is energetic. He is often off task and playful in class. His teacher thinks he is immature for his age. He responds well to correction but can't maintain the corrected behavior for very long.



Continued

- He sometimes teases girls and makes an occasional sexually tinged remark to them.
- He is very good working with one partner if it's a male partner.
- If his parents are consulted, they are supportive of the school's efforts They are receptive to suggestions most of the time but can become defensive for their son.They still cannot sign well.



Analysis Questions

- What are Hector's strengths/ assets?
- What aspects of his life are sources of stress for him?
- What personal deficits or problems might he have that could interfere with his education?
- What are his parents' strengths, stresses and problems?
- How can the IEP team help?
- As a team member, what role would you play?



Analysis Questions

- In Hector's case, how can you positively affect the 5 categories in the school and home settings?
- Safety?
- Communication?
- Relationships?
- Consistency?
- Positive Authority?



...a note from Parents

- Do not assume the parents are knowledgeable about deafness (there is a lot to learn)
- Build from the basics to help teach the parent to make informed decisions.
- Parents rely heavily on professionals for guidance. Be careful to present all options and not narrow the advice to personal beliefs. Let the parents go home and mull over the information.
- It's a lot to digest... many decisions should not be, and do not need to be, rushed.



General Suggestions for Enhancing Coping/ Overcoming Parental or Student Denial

- Avoid “taking to heart” (personalizing) criticisms directed at you or the educational system. This helps you listen for the themes and concerns more accurately- Can’t listen while you are on the defensive!
- The parent or student might view you as either the most knowledgeable or the most ignorant person when it comes to deafness and everything in between!
- Keep your center- that is what you know to be true about yourself and don’t get tugged in either extreme direction.
- “Oh Lord it’s hard to be humble...” but being humble is the ticket in many cases. We are all still learning.
- Put yourself in the parents’ shoes- it’s confusing!



Suggestions (cont'd)

- Take the time to research novel situations. This is how you can become more knowledgeable.
- Don't compete with the parent for expert status because you almost always lose!
- I try to emphasize that I have the general knowledge and background and the parent has the specific knowledge of their child
- For hearing parents, accepting deafness is often like a grief process but not always.



Suggestions (continued)

- Readiness to change (e.g. cope better) depends on timing and the environment. If the time is right and the environment supports the change, it will happen. Advice is sometimes “stored” and not acted upon immediately.
- A parent might accept something about the deafness at a time you weren't prepared for!
- The profession can sometimes inhibit the normal grief process. How might this happen?



...continued

- Rule of thumb: a person who is not coping cannot help another person with coping...if you are having trouble coping, get help from others: teachers, supervisors, consultants, friends, counselors.
- With strong denial, focus on factual, irrefutable information, be assertive (repeat yourself as needed), and document everything.

“Normal” Behavior (Time permitting)

- Depends greatly on etiology and learning history. All people are individuals.
- Consider effects of “information deprivation”. How would that change you?
- Communication access: You Do the math: Deaf student w/o signing home and full comm at school:
- $7.5 \text{ hrs} \times 190 \text{ days} = 1425 \text{ hours with signed communication per year} \times 8 \text{ yrs sch} = 11,400$
- Hearing child awake 13 hours per day
- $13 \text{ hrs.} \times 365 \text{ days} = 4745 \times 8 \text{ yrs} = 37960 \text{ hours}$
- $37960 - 11,400 = 26560 \text{ hours over 8 years.}$



Review of Behaviors Chart

- Column 1: Are these behaviors often attributed to deaf students? Why?
- Column 2: from student's standpoint, why would they act this way (deaf or hearing)
- Column 3: what might specifically be involved if the student is deaf?
- The table was a product of deaf and hearing experts at our school and is not just a representation of my opinion.



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