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THE EFFECTS OF FAMILY AND EDUCATION BACKGROUNDS  
ON THE SELF-IDENTIFICATION OF  
DEAF AND HARD-OF-HEARING PERSONS IN UTAH

by

Petra M. Rose

A dissertation submitted in partial fulfillment  
of the requirements for the degree

of

DOCTOR OF PHILOSOPHY

in

Sociology

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Logan, Utah

2000

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## ABSTRACT

The Effects of Family and Education Backgrounds on the Self-Identification of  
Deaf and Hard-of-Hearing Persons in Utah

by

Petra M. Rose, Doctor of Philosophy

Utah State University, 2000

Major Professor: Gary Kiger  
Department: Sociology

This study examined the effects of family and educational background factors on three dimensions of social identity among 35 deaf and hard-of-hearing respondents in Utah. Three dimensions of social identity were distinguished: self-definition (i.e., the degree to which a respondent defined himself or herself as deaf), self-evaluation (i.e., the degree to which a respondent attached value and emotional significance to identifying himself or herself as deaf), and group introjection (i.e., the degree of commitment, belonging, and loyalty a respondent attached to membership in the Deaf community). Semi-structured, videotaped interviews were conducted with 35 deaf and hard-of-hearing individuals in Utah. Respondents were recruited via snowball sampling techniques. The results of the qualitative data analysis showed that the respondents identified themselves as: (a) non-deaf (i.e., little identification with a Deaf identity or with the Deaf community), (b) marginalized (i.e., identifying with neither a hearing identity nor with a Deaf identity), and (c) big "D" Deaf (i.e., strong identification with a Deaf identity and



the Deaf community). Strong family support, for example, family members who used sign language, was associated with strong self-identification as Deaf, positive self-evaluation, and strong group introjection. Similarly, supportive educational experiences, for example, attendance at a residential school for deaf students, were associated with strong self-identification as Deaf, positive self-evaluation, and strong group introjection. Policy implications regarding parent education, school teacher in-service training, and medical services were discussed.

(188 pages)

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Petra M. Rose

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# CHAPTER I

## INTRODUCTION

Identity development of deaf and hard-of-hearing individuals is embedded within the personal experience and social climate of deafness. Because members of the hearing world and of the Deaf world,<sup>1</sup> whose perspectives differ, play a role in family and education institutions, these institutions have different effects on the communicative, social, and educational needs of the deaf and hard-of-hearing. Thus, these individuals have varied family and education backgrounds, which may complicate their identity development.

In 1994, special education administrators in the United States place 70% of the deaf and hard-of-hearing children in public schools, 22% in residential schools for the deaf, and 8% in separate day schools (Schildroth & Hotto, 1994). At least 90% of these children are born to two hearing parents (Schein, 1989). As a result of the educational initiative to place more deaf and hard-of-hearing children in public schools, deaf and hard-of-hearing children enter into a predominantly hearing environment with little or no exposure to American Sign Language<sup>2</sup> (ASL) and Deaf culture (Lane et al., 1996; Padden

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1. Deaf and hard-of-hearing people who use ASL as their primary communication mode, socialize with one another, and participate in the activities of the Deaf community usually consider themselves belonging to the Deaf world (Lane, Hoffmeister, & Bahan, 1996; Padden & Humphries, 1988; Sacks, 1989). Deaf world signifies a group of individuals who see deafness as a different way of living and celebrate deafness. They share values, beliefs, traditions, and folklores. Typically, capitalization of "D"eaf denotes belonging to an ethnic group — Deaf culture. In this dissertation, the capitalization of Deaf generally refers to individuals who associate with members of the Deaf community.

2. American Sign Language (ASL) is developed and used by deaf people in North America (Stokoe, 1980). It is a visual-gestural language with its own grammatical rules, syntax, and lexicon, consisting of signing, fingerspelling, and non-manual markers (Baker-Shenk & Cokely, 1980; Klima & Bellugi, 1979; Padden & Humphries, 1988).

& Humphries, 1988; Schein, 1989). The remaining 10% of deaf and hard-of-hearing children born to two Deaf parents, however, remain in an all-Deaf environment, where ASL becomes the language *au fond* for communication and Deaf culture is celebrated (Lane et al., 1996; Padden & Humphries, 1988).

When Deaf parents have a deaf or hard-of-hearing child, they depend naturally on ASL for family communication. Such a family also interacts with the Deaf community in numerous settings, sharing the Deaf way of life with its deaf or hard-of-hearing child. These parents frequently place the child in a residential school for the deaf or a separate day school for the deaf. Consequently, the child assimilates the varied aspects of Deaf culture and receives the message that deafness has its own value. Subsequently, the deaf or hard-of-hearing child's self-esteem is enhanced. This may have a positive effect on the child's identity.

On the other hand, hearing parents often struggle to raise their deaf or hard-of-hearing child. They may use spoken English or Manually Coded English<sup>3</sup> (MCE) in the home to communicate with the child, but the hearing way of life dominates in the family. Thus, hearing parents pass elements of the hearing culture to their deaf or hard-of-hearing offspring. Also, although special education attempts to provide placement and

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3. Manually Coded English (MCE) is a sign variety formulated by educators of the deaf to teach English to the deaf (Baker-Shenk & Cokely, 1980; Johnson, Liddell, & Erting, 1989). MCE uses prefixes, suffixes, endings, articles, and morphemes in English word order. There is a wide array of MCE systems, such as Signing Exact English, Seeing Essential English, and Signed English. The signer typically uses his or her voice while signing simultaneously.

communication options,<sup>4</sup> public school education using English as the language of instruction has often shaped educational goals in a child's individualized educational plan (IEP).<sup>5</sup> As a result, the deaf or hard-of-hearing child perceives that to function and succeed, one must speak and master English (spoken or signed) and interact with the hearing. Goals in the child's IEP further communicate to the child that if he or she used ASL or showed poor speech skills, he or she lacked self-worth.

According to U.S. law, in special education, all deaf and hard-of-hearing children are grouped with other disabled children. Laws affecting special education also apply to the deaf and hard-of-hearing. In 1975, the United States Congress enacted PL 94-142: the Education of all Handicapped Children Act, later known as Individuals with Disabilities Education Act (Moore, 1996). PL 94-142 mandates both an appropriate education and one in the least restrictive environment. From the beginning of the implementation of the act, special education administrators interpreted the least restrictive

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4. Communication options are championed under the Individuals with Disability Education Act (IDEA) 1997 in that the child's preferred mode of communication must be taken as education placement is being determined (EDLAW, 1999). Communication options for the deaf and hard-of-hearing include, but are not limited to, American Sign Language, Total Communications (in practice, the use of signing and speaking simultaneously), speech and listening, Cued Speech, and Manually Coded English. Prior to the implementation of IDEA 1997, parents were frequently uninformed of various communication options and tended to accept what was presented to them.

5. Individual education plan (IEP) is an annual meeting to discuss the disabled child's educational needs, goals, and placement. The IEP team consists of a school administrator, teacher, audiologist, speech therapist, psychologist, child's parents, and sometimes the child. The team writes up a plan (Moore, 1996; Moore, Cerney, & Garcia, 1990; EDLAW, 1999). The plan describes the child's current academic performance, presents educational objectives, and specifies evaluation procedures. It helps determine an educational placement for the child (e.g., special school, public school, hospital program).



environment for deaf and hard-of-hearing children to mean that a wide range of placement options should be available, such as instruction in regular classes supplemented by special services, classes, schools, and instruction in homes, hospitals and institutions (Moore, 1996).

In 1997, the U.S. Congress reauthorized the Individuals with Disabilities Education Act (IDEA) with special attention to the communication needs of deaf and hard-of-hearing students (EDLAW, 1999). This new legal provision meant that the IEP team must take the unique communication needs of a deaf or hard-of-hearing child into consideration when determining the child's educational placement. The child must have opportunities for direct interaction with his or her teachers and peers, and receive education in his or her preferred communication mode. These legal considerations allow deaf and hard-of-hearing children to have the most accessible education possible in an environment where they can freely learn, and communicate and interact with their teachers and peers.

### Statement of the Problem

Despite the good intentions of PL 94-142 (that deaf and hard-of-hearing children enjoy the same educational opportunities that their hearing counterparts have), education in public school might be a restrictive environment to many deaf and hard-of-hearing children. Typically, these children have no strong linguistic foundation, no cultural ties with either the hearing world or Deaf community, and experience superficial relationships with their peers and family members, and low self-esteem (Sacks, 1989). Conversely, in residential schools for the deaf or separate day schools, deaf and hard-of-hearing children

develop the *sine-qua-non* of Deaf culture, ASL (Rose & Kiger, 1995), and acquire Deaf culture, which leads to a sense of belonging that encourages high self-esteem and self-confidence.

From the perspective of many hearing parents and educators, however, mainstreaming these children should bring about a more positive self-esteem and self-confidence as the youngsters obtain the best communication and education possible. Also, some parents and educators believe that efforts to mainstream the children create the opportunity for diverse social interactions. Further, they are convinced that mainstream schools bring these children closer to hearing culture “in which they will need to participate if they are to have economic mobility and political power” (Rose & Kiger, 1995, p. 526).

Although the residential and mainstream school environments have common goals to promote personal and social development, such as positive self-esteem and motivation for school and work, there appear to be differences in emphasis (Foster & Emerton, 1991). Residential schools contain a critical mass of peers and adults with whom students can interact easily and from whom they derive a variety of positive social experiences, benefitting the children’s social development. Mainstream schools provide deaf and hard-of-hearing students with the best opportunity to develop skills and personal resources to function effectively in a hearing world.

Furthermore, hearing and deaf families share common desires with respect to the upbringing of their deaf and hard-of-hearing family members. The wish to bond, love, and communicate influences both kinds of family groups. However, there seem to be discrepancies in communication and child-rearing approaches (Lane et al., 1996).

Hearing families tend to utilize one of the English-based sign language forms or an oral system, and they spend hours and much effort in learning a new language system and/or in training their children. Deaf families in most cases automatically use ASL and raise their children like any others.

There is a wealth of literature that acknowledges the possible effects of communication and education placement on deaf and hard-of-hearing children's intellectual, emotional, and social development. However, there is a surprising paucity of literature illuminating the different effects of family and educational backgrounds on these children's self-identification as deaf and hard-of-hearing persons. Although Sheridan's (1996) dissertation study concerns deaf and hard-of-hearing children's perceptions of self and their lifeworlds, this study focuses on deaf and hard-of-hearing adults' self-perceptions of their personal and social identities, and how their family and education backgrounds play a role in their identity development.

### Social Structure

This dissertation study acknowledges the effects and importance of social structure on identity. There is a connection between culture and social structure, which is found in the concept of role (Goffman, 1973; Williams, 1970). A person occupies a position within a group, which is a status. Roles are attached to each status, and it is through these roles that culture enters the picture. The manner in which roles are actually carried out is role performance through social interaction. Social interaction that is based on roles is observable as patterned relationships, which make up social structure. In turn, existing social structure affects the creation of and changes in culture and identity.

Regarding Deaf identity, social structure is important because power relations between deaf and non-deaf groups, and individuals are shaped by social structural forces in society. Status relations, distribution of wealth, and political influence are all examples of social structural factors that shape patterned interactions between deaf and non-deaf groups, and individuals. It is in this social structural context that an individual develops his or her Deaf identity.

However, this dissertation is a social psychological study concerning Deaf identity. Personal identity comes from a person's self-concept, which is shaped by self-perception and interactions with others, whereas social identity describes one's membership of a social group together with the value and emotional significance attached to that membership (Tajfel, 1981, 1982). Deaf and hard-of-hearing persons with Deaf identity perceive themselves as members of a lower-status minority group that lacks power and access to the mainstream American society. They, in turn, engage in intergroup evaluation favoring their group, and its values and traits (Rose & Kiger, 1995).

Those with strong Deaf identity realize themselves in society — that is, they recognize their identity in socially defined terms and these definitions become reality as they live in society (Berger, 1966). It can be assumed that these individuals tend to remain members of the Deaf community, even if the Deaf community does not satisfy aspects of their social identity. Leaving the Deaf community is impossible sociopsychologically or it conflicts with important values that are themselves a part of these individual's acceptable self-image. Then reinterpretation of the attributes of the group takes place, so that its unwelcome features (e.g., low status) are either justified or made acceptable. Or the individuals accept the situation for what it is and engage in

social action which leads to desirable changes in that situation. In other words, the positive aspects of identity and the reinterpretation of attributes and engagement in social action only acquire meaning in relation to, or in comparisons with, other groups (Tajfel, 1981). Thus, this study concerns social psychology in the area of personal and social identities of deaf and hard-of-hearing persons.

### Objectives of the Study

The present study represents an attempt to understand the effects of family and educational background on the self-identification of deaf and hard-of-hearing individuals, using the ethnic self-identification and social context approach (Kinket & Verkuyten, 1997). Although ethnicity typically refers to a commonly shared identity among people who have a common “ancestry” that is bounded by territory (e.g., ethnic Albanians in Kosovo, ethnic Chinese in Vietnam), the concept ethnic is adapted in this study to mean deaf and hard-of-hearing individuals’ personal and social identities. For example, ethnic Chinese in Vietnam feel a strong attachment to their culture in China. In a similar vein, Deaf people in America sense a deep belonging to their culture in the Deaf community. Although Deaf identity is not exactly ethnic identity in the usual sense, individuals receive subtle or overt messages from families, schools, and community that in turn elevate their self-conception, self-esteem, and group membership as deaf and hard-of-hearing individuals. The effects on the self-identification formulation of these deaf and hard-of-hearing persons thus may be applicable to other minority-group members.

The term minority is a group with special physical or cultural traits which are held in low esteem by the dominant group (Tajfel, 1981). In American society, examples of

lower-status and less powerful minority groups include Hispanics, Chinese, and African Americans. Deaf and hard-of-hearing people identifying themselves with Deaf culture are considered as members of a minority group because they are less powerful than members of non-deaf groups. Minority group does not refer to numerical figures but to power relations.

The notion of the Black civil rights model to abolish segregation of the Blacks and Whites as “separate but equal” may be similar to the views of many educators. Many educators view residential schools for the deaf as “segregated” from the community, allowing the children almost no exposure to hearing culture (Moores et al., 1990; Van Cleve & Crouch, 1989). This view had an impact on the implementation of PL 94-142 in 1975. The law ensures that the parents and the child enjoy a variety of educational options.

In 1970, another major innovation emerged with the school program’s permission for deaf and hard-of-hearing students to use sign language in a philosophy called “total communication” (Gannon, 1980). Since 1880, the use of sign language was effectively banned from most classrooms (Lane, 1999; Van Cleve & Crouch, 1989). Theoretically, total communication refers to the teacher’s use of whatever communication method that the child uses in the classroom (e.g., speech and lipreading, Manually Coded English, Cued Speech, or American Sign Language). However, in practice, the teacher typically uses a form of MCE and his or her voice simultaneously (Johnson et al., 1989). Consequently, there has been little or no exposure to ASL, Deaf culture, and Deaf adult role models for the deaf and hard-of-hearing students. Subsequently, the current educational practices, coupled with the fact that 90% of these deaf and hard-of-hearing

children are born to hearing parents, presents a possible complication in the development of the students' personal and social identities (Stinson, Whitmire, & Kluwin, 1996). Deaf and hard-of-hearing children's communication with hearing families is typically difficult, sending a message to the children that they are "different." This may play a role in the ramification of these children's identities.

The major objective of the current study is to assess how personal and social experiences within the contexts of family and education affect the deaf and hard-of-hearing persons' self-identification. More broadly, the objective of the study is to illuminate how the perception of the self as deaf and hard-of-hearing persons affects self-conceptualization, which leads to either a more positive or negative self-image and group membership. The questions guiding the inquiry in this dissertation are concerned with the effects of family and educational background; social interactions in the home, in the school, and in the community; and perceptions and conceptualizations of self.

Objectives of the study are assessed using Kinket and Verkuyten's (1997) levels of ethnic self-identification and social context approach. The ethnic concept is adapted for this study to examine deaf and hard-of-hearing individuals' identities. Such an approach allows the researcher to assess patterns of deaf and hard-of-hearing persons' personal and social identities. The levels of ethnic self-identification, which are self-definition, self-evaluation, and group introjection, measure personal and social identity. Self-definition is one's conceptualization of self as a member of the Deaf group, and self-evaluation is one's perception and assessment of his or her roles in the society. Group introjection is one's response to the perceived stereotypes of his or her group. Group introjection is the highest level of the three levels of ethnic self-identification and is less

dependent on social context. Social context assesses diversity in the respondents' school and family experiences. Demographics questions concern deaf and hard-of-hearing individuals' family and education backgrounds.

Because the researcher of this dissertation study is deaf herself, she can better assess and understand the social nature of personal and social identities of deaf and hard-of-hearing respondents. The researcher selects the respondents through her personal networks and respondents' referrals, and then conducts one-to-one semistandardized videotaped interviews to learn of their Deaf self-identification. Since this area of study is new, the findings should be considered as a groundbreaking work to provide deaf and hard-of-hearing individuals with more positive personal and social identities.

Research findings from this dissertation are of sociological importance in that the study allows the researcher to learn of the role of education and family backgrounds in the development of deaf and hard-of-hearing persons' identities. Also, the findings are useful for deaf and hard-of-hearing individuals, family members, and educators in understanding the personal and social identities of deaf and hard-of-hearing people. Such knowledge may assist various institutions (e.g., family, educational, medical) in providing more complete information about deafness to families and schools.



## CHAPTER II

### REVIEW OF THE LITERATURE

#### Introduction

Objectives of this study include exploration of common patterns in personal and social identities of deaf and hard-of-hearing persons, which are associated with experiences in school and family. Kinket and Verkuyten's (1997) levels of ethnic self-identification and social context approach are utilized in this study. This literature review demonstrates the sociological importance of understanding how family and education backgrounds are associated with identity development.

Although there exists a small, albeit growing body of literature on family and educational experiences, including interactive relationships with deaf and hard-of-hearing children (Foster, 1988; Gregory, Bishop, & Sheldon, 1995; Henderson & Henderschott, 1990; Lane, 1999; Meadow-Orlans, 1990, 1996; Meadow-Orlans, Greenberg, & Erting, 1990; Mertens, 1989; Moores et al., 1990; Reagan, 1990; Sheridan, 1996; Vernon & Andrews, 1990; Viccari & Marschark, 1997), the effects of family and education backgrounds on identity of deaf and hard-of-hearing children largely have been ignored by researchers. Although Sheridan (1996), in her dissertation study, discusses emerging themes in the study of deaf children, it is not concerned with inquiry into how deaf and hard-of-hearing people view themselves in terms of their personal and social identities. While there is much evidence that suggests some important discrepancies in the family and educational experience of deaf and hard-of-hearing individuals, little is understood

about the effects of family and education backgrounds on deaf and hard-of-hearing individuals' personal and social identity development.

Given the paucity of research specific to self-identification of deaf and hard-of-hearing people, it is particularly important to develop a greater understanding of deaf and hard-of-hearing identity within the broader perspective of personal and social identity literature. Thus, there are sections in this chapter that discuss identity theory, social identity theory, and self-categorization theory. Also, it is crucial to include a section that addresses this study's use of levels of ethnic self-identification and social context to understand its theoretical usefulness for this dissertation study. Further, it is necessary to incorporate sections concerning the histories and perspectives of the hearing and deaf worlds to illuminate their role in, and impact on, the identity development of deaf and hard-of-hearing persons.

### Identity Theory

To learn deaf and hard-of-hearing individuals' identity development, this dissertation study uses the postulates of identity theory. Identity theory explains social behavior in terms of the reciprocal relations between self and society (McCall & Simons, 1978; Stryker, 1968, 1980, 1987; Stryker & Serpe, 1982; Turner, 1978). It is strongly associated with the symbolic interactionist view that society affects social behavior through its influence on self (Blumer, 1969; Mead, 1934). Symbolic interactionists such as Mead (1934) and Cooley (1902) consider the self to be a product of social interaction, in that people come to know who they are through their interactions with others. In this perspective, a core mechanism is "taking the role of the other." Because humans tend to

interact in groups, it is perhaps not surprising that people may have as many distinct selves as there are distinct groups whose opinions matter to them (James, 1890/1950). These two ideas come together in identity theory, which views the self not as an autonomous psychological entity but as a multifaceted social construct that emerges from people's roles in society: variation in self-concepts is due to the different roles that people perform. A person's role identities may include being a mother, wife, daughter, social worker, and blood donor.

The following examples should help to clarify the significance of different roles for the individual's self-concept. School-aged children spend most of their time in school, friendship, and family networks; thus, the identities of student, friend, and son-daughter (and perhaps sibling) are central for self-definition (Hoelter, 1985). Adults who become parents, for example, are likely to experience changes in their roles. As parents, men tend to become more masculine and women more feminine; however, as husbands and wives, men tend to become more feminine and women more masculine (Burke & Cast, 1997). In selecting family/work activities, people may select those tasks that allow them to affirm the affective meanings of their identity (Kroska, 1997). If economic or social constraints force family members to do work that is not consistent with their identity, the discrepancy between identity and work patterns may create distress. Consequently, they may change the meaning of some element of their family work arrangement to try to reduce distress.

Thus, such self-descriptions derive from self-concept, which is "developed out of an individual's reflective, social, and symbolic activities" (Gecas, 1982, p. 4). Various roles in everyday activities may revolve around their statuses, hobbies, preferences, and

relationships. Role-identities are self-conceptions, self-referent cognitions, or self-definitions that people apply to themselves as a consequence of the positions they occupy in the social structure and through a process of labeling or self-definition as a member of a particular social category.

From an identity-theory perspective, a role is a set of expectations prescribing behavior that is considered appropriate by others (Simon, 1992). Satisfactory enactment of roles not only confirms and validates a person's status as a role member (Callero, 1985) but also reflects positively on self-evaluation. The perception that one is enacting a role satisfactorily should enhance feelings of self-esteem, whereas perceptions of poor role performance may engender doubts about one's self-worth, and may even produce symptoms of psychological distress (Hoelter, 1983; Stryker & Serpe, 1982; Thoits, 1991). Distress may arise if feedback from others — in the form of reflected appraisals or perceptions of the self suggested by others' behavior — is perceived to be incongruent with one's identity. To reduce distress, people modify their behavior to achieve a match with their internalized identity standards.

The following examples should help to clarify the power of perceptions of others on one's self-esteem. In a sample of high school boys and girls in New York state, it is found that high self-esteem is related to parental interest in the child, in his/her friends, academic performance, and contribution to mealtime conversations (Rosenberg, 1965). In another study of 10th-grade boys, high self-esteem is found to be positively associated with "good" family relations, which are characterized by such things as affection between and among family members, sense of shared activities, perception of fairness, and inclusion of children in family decision-making (Bachman, 1970).

Studies investigating racial self-esteem have assessed the effects of segregation and desegregation on Black children (Fox & Jordon, 1973; Hraba & Grant, 1970; Katz & Zalk, 1974; Porter, 1971; Roberts, Moseley, & Chamberlain, 1975; Simon, 1974). In the days of segregation, Black preschoolers are found to show a preference for whiteness, indicating low racial self-esteem (Porter, 1971). However, when desegregation becomes the norm, a majority of Black children express own-race preference and identification (Fox & Jordon, 1973; Hraba & Grant, 1970; Katz & Zalk, 1974; Roberts et al., 1975; Simon, 1974).

Stangvik (1979) has found that social acceptance is significantly related to educational grouping. Low-ability pupils in special classes are consistently found to be more accepted socially by their classmates than low-ability pupils in regular classes, thus promoting more positive self-esteem among the former group than the latter. Beane and Lipka (1984) have studied a group of adolescents and found that they may describe themselves as good students, but they have low self-esteem because a majority of their peers devalue school success. This leads to a change in their self-concept as good student, so that they are better accepted by their peers.

Identity theory further proposes that the salience of a particular identity will be determined by the person's commitment to that role. Commitment is defined as the "degree to which the individual's relationships to particular others are dependent on being a given kind of person" (Stryker & Stratham, 1985, p. 345). It reflects the extent to which important significant others are judged to want the person to occupy that particular role position. Commitment to a particular role is high if people perceive that many of their important social relationships are predicated on occupancy of that role. The

consequence of vacating such a role is loss of a psychologically important social network for the self-concept and for self-esteem (Hoelter, 1983).

The more strongly committed a person is to an identity, the higher the level of identity salience will be. In terms of network relationships, the more fully a person's important social relationships are based on occupancy of a particular identity, in comparison with other identities, the more salient that identity will be. In a similar vein, Hughes (1945) has discussed the master status concept, which serves to distinguish people who "belong" from those who do not. The larger the number of persons included in such a set of social relationships, the more salient the identity (Stryker & Serpe, 1982). An identity that is salient to the person's self-concept is likely to be spontaneous — that is, a person, whose role as a mother is more salient than other roles, is likely to say she is a mother. Thus, this person's spontaneous self-concept is her role as a mother.

Studies have examined the salience of a particular identity as determined by a person's commitment to that role. McGuire, McGuire, Child, and Fujioka (1978) have assessed the salience of ethnicity in the spontaneous self-concept as a function of one's ethnic distinctiveness in the social environment. The researchers have found that children whose ethnicity differs from the majority mention this as their spontaneous self-concept, demonstrating the salience of their ethnic identity to their self-concept. Another study has examined a hundred boys and a hundred girls at each of the five grade levels — 5th, 7th, 9th, 11th, and 12th — on six characteristics: height, weight, hair color, eye color, birthdate (age), and birthplace (McGuire & McGuire, 1981). They have found that distinctiveness plays a role in determining the salience of one's physical characteristics. For example, those who are born out-of-state make birthplace more salient to their

identity than other characteristics. Thus, birthplace, due to its distinctiveness, is more likely to be mentioned as part of the spontaneous self-concept. Finally, Haines (1987) has studied adoptees and found that upon discovering that they are adopted, these individuals in high percentage make adoptive status their foremost identity and begin to spend time searching for their natural parents to learn of their origins. The discovery of their adoptive status leads to a reformulation of their life histories and the need to know as fully as possible, their backgrounds.

By acknowledging the impact of social networks on people's self-concepts, identity theory links the wider social structure (in terms of role positions) and the person's more intimate social networks (through levels of commitment to different role positions) to the self-concept, and also connects social structure to the development and maintenance of social relationships (Serpe, 1987).

In summary, identity theory postulates that self reflects the wider social structure insofar as self is a collection of identities derived from the role positions occupied by the person. Society in the form of role positions provides a person with a sense of self-meaning and influences social behavior through these role-related components of self. Hence, the impact of society on behavior is mediated by self-referent role identities. Central characteristics of identity theory are that: (a) it represents a social psychological model of self in that social factors are seen to define self; (b) the social nature of self is conceived as derived from the role positions that people occupy in the social world; and (c) in an enduring sense, these role identities are proposed to vary in regard to their salience.

## Social Identity Theory

To understand the deaf and hard-of-hearing persons' self-identification, this dissertation study also invokes the posits of social identity theory. Social identity theory is a social psychological theory of intergroup relations, group processes, and the social self. It examines the influence of social factors on perception (Tajfel, 1959, 1969a) and on cognitive and social beliefs on racism, prejudice, and discrimination (Tajfel, 1963, 1969b, 1970). The key concept, social identity, is defined as "that part of an individual's self-concept which derives from his [or her] knowledge of his [or her] membership of a social group (or groups) together with the value and emotional significance attached to that membership" (Tajfel, 1978, p. 63). Examples of social categories include national origin, political affiliation, and athletic team. People have a repertoire of discrete category memberships that vary in relative overall importance to the self-concept. Each of these memberships is represented in the individual member's mind as a social identity that both describes and prescribes one's attributes as a member of that group — that is, what one should think and feel, and how one should behave.

Further, social identity theory recognizes the existence of a badly defined or marginal social situation of a group (Tajfel, 1981). This group presents the individuals involved with difficulties of defining their place in a social system. The marginalized people, who move from one group to another, may well interact in their new setting in many ways that are "free of group constraints." Yet, the marginalized people often have not been fully accepted by the majority. This stems from the paradox that they are regarded by the majority as still typifying in some important ways the unpleasant



characteristics attributed to their group and at the same time as “exceptions” to the general rule (Tajfel, 1981).

However, when a specific social identity becomes the salient basis for self-regulation in a particular context, self-perception and conduct become in-group stereotypical and normative; perceptions of relevant out-group members become out-group stereotypical; and intergroup behavior acquires competitive and discriminatory properties to varying degrees depending on the nature of relations between the groups (Tajfel, 1982). Social identities are not only descriptive and prescriptive, they are also evaluative (Tajfel, 1982; Rose & Kiger, 1995). They furnish an evaluation (generally widely shared or consensual) of a social category, and thus of its members, relative to other relevant social categories. Because social identities have these important self-evaluative consequences, groups and their members are strongly motivated to adopt behavioral strategies for achieving or maintaining in-group/out-group comparisons that favor the in-group, and thus, the self.

The following examples illuminate the impact of social identity on evaluative consequences. Jackson, Hymes, and Sullivan (1986) have examined the effects of positive information on evaluations of black and white targets by black and white subjects. They have found that black targets are evaluated more favorably than comparable white targets by blacks. White subjects are more influenced by the target's gender than by his or her race, favoring male targets over equally qualified female targets. Ichiyama, McQuarrie, and Ching (1996) have evaluated the effects of the Hawaiian students' attitudes and length of residence in the mainland United States on ethnic identity and affiliative behavior. They have found that: (a) an internalization of perceived

attitudes of mainland students toward Hawaiian students has a strong effect on their affiliative behavior; (b) there is a strong association between Hawaiian students' attitudes toward their own group and affiliation with other Hawaiian students; (c) there is a marked reduction in the perceived favorability of attitudes of mainland students after the first year of mainland residence; and (d) Hawaiian students experience a decline in Hawaiian identification with increasing years of mainland residence. Finally, a study concerning Latin American populations' panethnic identification (Jones-Correa & Leal, 1996) has demonstrated the complexity of using panethnicity as a primary or secondary identification. Panethnicity is a part of a constellation of individuals' multiple identifications and that individuals may manage these identities in very different ways. For example, Latin Americans may choose Hispanic panethnicity rather than Latino panethnicity when there is a need for cross-national coalitions in response to a common material need (e.g., bilingual education, government services in English and in Spanish).

These studies have suggested that "minimal" social categorization exerts its discriminatory intergroup effects because it provides a way to enhance positive in-group distinctiveness. This is done through the creation of favorable comparisons with the out-group for which these minority group members use the dimensions of comparison which are available to them. Self-esteem tends to increase when there is an opportunity to engage in intergroup discrimination. Members of nonminorities also strive for positive social identity, for example by discriminating against an out-group (Sachdev & Bourhis, 1984). However, nonminority members, who are more positive about their self-esteem, are more motivated to demonstrate the great extent of individuality within the in-group.

To account for social-identity phenomena, social identity theory invokes the operation of two underlying sociocognitive processes: categorization and self-enhancement (Hogg & McCarty, 1990). Categorization sharpens intergroup boundaries by producing group-distinctive stereotypical and normative perceptions and actions, and assigns people, including self, to the contextually relevant category. It is a basic cognitive process that operates on social and nonsocial stimuli alike to highlight and bring into focus those aspects of experience which are subjectively meaningful in a particular context. Self-enhancement guides the social categorization process such that in-group norms and stereotypes largely favor the in-group. It is assumed that people have a basic need to see themselves in a positive light in relation to relevant others (i.e., to have an evaluatively positive self-concept), and that self-enhancement can be achieved in groups by making comparisons between the in-group and relevant out-groups in ways that favor the in-group.

The following research illuminates the process of categorization and the need of self-enhancement in favor of in-group membership. Many studies have reported that being in a minority poses a threat to a person's self-esteem (Festinger, 1954; Gerard, 1985; Sachdev & Bourhis, 1984). One study of 330 Black, Hispanic, Asian, and White high-school students has found that compared with other groups, White students are significantly more likely to be mainstream (Rotheram-Borus, 1990). Across groups, students reporting a strong ethnic identification hold separatist attitudes, report more ethnic pride, engage in less cross-ethnic contact out of school and more cross-ethnic conflict, and use English significantly less often than other groups. These minority members, then, are motivated to counteract the threat to their self-esteem by accentuating

their social identity. Discrimination against a relevant out-group is one means to achieve that goal. Thus, comparisons are made on stereotypical dimensions favoring the in-group rather than on those that are less flattering to the in-group.

To explain group members' behavior, social identity theory formally articulates two basic sociocognitive processes, categorization and self-enhancement, with subjective belief structures. These beliefs (which often are ideological constructs) concern the stability and legitimacy of intergroup status relations and the possibility of social mobility and/or social change. Social mobility refers to psychologically passing from one group to another, and social change refers to psychologically changing the self-evaluative consequences of existing in-group membership (Rose & Kiger, 1995). For example, a group that believes its lower-status position is relatively legitimate and stable but that it is quite possible to pass psychologically into the dominant group (i.e., acquire a social identity as a member of the higher-status group) will be unlikely to show much solidarity or engage in much direct intergroup competition. Instead, members will attempt, as individuals, to disidentify and gain psychological entry to the dominant group. In contrast, a group that believes its lower status position is illegitimate and unstable, that passing is not viable, and that a different social order is achievable will show marked solidarity and will engage in direct intergroup competition.

### Self-Categorization Theory

Social identity theory is not complete without self-categorization theory. Self-categorization theory (Oakes, Haslam, & Turner, 1994; Turner, 1985, 1991; Turner, Hogg, Oakes, Reicher, & Wetherell, 1987) is a recent development that elaborates in

detail the operation of the categorization process as the cognitive basis of group behavior. It is a process accentuating both perceived similarities between stimuli (physical objects or people, including self) belonging to the same category and perceived differences between stimuli belonging to different categories. This accentuation effect occurs on dimensions that the categorizer believes are correlated with the categorization.

The following example illustrates the accentuation effect. As a result of the categorization process, within-group differences become minimized and between-group differences become exaggerated (Taylor, Fiske, Etcoff, & Ruderman, 1978). For example, when feminists who believe that men are more aggressive than women categorize themselves as feminists, they tend to exaggerate men's aggressiveness, to see all men as more aggressive than all women, to see little difference in aggressiveness among men, and to see little difference in nonaggressiveness among women (including self). Simon and Brown (1987) have suggested that in their search for positive social identity, minority members, who identify more strongly with their in-group, assume greater in-group than out-group homogeneity in contrast to nonminority members. Thus, the categorization-accentuation process serves an important function for the individual. It highlights intergroup discontinuities, ultimately renders experience of the world subjectively meaningful, and identifies those aspects that are relevant to action in a particular context.

Categorization of self and others into in-group and out-group defines people's social identity and accentuates their perceived similarity to people's cognitive representation in terms of prototypes of the defining features of the group (Fiske & Taylor, 1991). A prototype is a subjective representation of the defining attributes (e.g.,

beliefs, attitudes, behaviors) of a social category, which is actively constructed from relevant social information in the immediate or more enduring interactive context.

Because members of the same group generally are exposed to similar information from the same perspective, their prototypes usually are very similar — that is, shared. Because prototypes define groups as distinct entities, they are constructed as a dynamic balance between competing cognitive pulls to minimize intracategory differences and to maximize intercategory differences. For this reason, prototypes are influenced strongly by which out-group is salient.

Social identity and self-categorization theories have a number of important features in common: (a) they are general theories of the social group; (b) they incorporate the role of both the immediate and the more enduring intergroup context in group behavior; (c) they account for the range of group behaviors, such as conformity, stereotyping, discrimination, and ethnocentrism; (d) they are basically sociocognitive; and (e) they do not construct group processes from interpersonal processes. The process of self-categorization depersonalizes perception, feelings, and action in terms of the contextually relevant self-defining in-group prototype. Thus, behavior is influenced by the categorical structure of society via the mediation of social identity and the accompanying process of self-categorization. The contextual salience of specific social identities rests on the extent to which they render a particular context maximally meaningful, and contextual factors influence the form taken by identity-contingent cognitions and behaviors. Because social identities are attached to value, a complex social dynamic exists in which groups vie for relatively positive social identity. Intergroup relations and social identity thus are dynamically intertwined.

## Identity and Social Identity Theory Summary

Both identity and social identity theories address the structure and function of the personally and socially constructed self as a dynamic construct that mediates the relationship between social structure or society and individual social behavior. Reciprocal links between society and self are acknowledged by both theories. Behavior is considered to be organized into meaningful units that are subsumed by specific self-definitions: identity theory discusses the organization of behavior in terms of roles, while social identity theory employs concepts like norms, stereotypes, and prototypes. Just as behavior is organized into discontinuous clusters, the self is structured into discrete identities that are interrelated in various important ways. Both theories also discuss the way in which identities are internalized and used to define self: social identity theory speaks of social identification and the process of self-categorization, while identity theory discusses the process of labeling or naming oneself as a member of a social category, or of commitment.

### This Study's Approach

In conducting this dissertation study, the researcher has used the approach of ethnic self-identification and social context because of the approach's theoretical usefulness. Kinket and Verkuyten (1997) have used the approach of three levels of ethnic self-identification and social context to assess identities of Dutch and Turkish children in their study. The approach is cumulative, utilizing identity, social identity, and self-categorization theories. The three levels of ethnic self-identification are self-definition,

self-evaluation, and group introjection. Social context involves diversity issues within the contexts of school and home.

The first level, self-definition, is a more cognitive form of self-identification. Identification with a group involves the cognitive act of categorizing and defining oneself as a member of an ethnic group. In this ethnic description, one recognizes membership of an ethnic group and uses an accurate label to define the group and oneself. Social identification as conceptualized in self-categorization theory refers mainly to identification of oneself as a member of a social category (Turner et al., 1987). According to self-categorization theory, social categories influence behavior when individuals define themselves in terms of those categories because self-definition in collective terms involves self-stereotyping in terms of how one's category is defined in relation to other categories. Identity theory also may be regarded as addressing this level of identification where role identities are considered as self-definitions, and where the focus is on the process of labeling or naming oneself as a member of a social category (McCall & Simons, 1978; Stryker, 1980).

The second level of self-identification is self-evaluation. Defining oneself as a member of an ethnic category does not necessarily mean that one identifies with this category. A person may recognize and accept an ethnic group as self-defining, but does not have to consider this definition as personally important. Identification with a category means that ethnic identity constitutes an important part of the self-concept, which has evaluative and emotional meaning. In social identity theory, a person's social identity is viewed as deriving "from his knowledge of his membership of a social group (or groups) together with the value and emotional significance attached to that



membership” (Tajfel, 1978, p. 63). Social identity theory assumes that the group member is motivated by a need for positive self-esteem as a group member. Identity theory employs the concept of identity-specific self-esteem (Stryker, 1980).

The third level of ethnic self-identification, group introjection, concerns the person’s feelings of oneness with the group as a whole. Introjection, coined by Rosenberg, is

...the degree to which the group is experienced as an integral and inseparable part of the self. Introjection...refers to the “adoption of externals (persons or objects) into the self, so as to have a sense of oneness with them and to feel personally affected by what happens to them.” For the group identifier, the distinction between me and my group is unclear; the fate of the group is experienced as the fate of the self. (1979, p. 179)

In identity theory, affective commitment refers to the level of emotional costs attached to the potential loss of social relationships (Stryker, 1987). According to the psychocultural approach of De Vos (1995), ethnic identity involves a sense of belonging and commitment, and defines the group to which one’s loyalty belongs.

There is, of course, a connection between group identity and social structure. The relative status and power of one’s group in society, among other structural factors, influences the degree to which one might identify with that group (Tajfel, 1978). For example, an individual is more likely to develop a positive social identity if he or she identifies with a group that is well regarded in society. It is more difficult to maintain a positive social identity when one identifies with a stigmatized group.

The distinction of three levels of ethnic self-identification also refers to psychological levels of identification (Kinket & Verkuyten, 1997). Introjection is psychologically less superficial than self-definition because of the high level of

commitment, emotional involvement, and feeling of belonging. This level of self-identification, thus, is less dependent on context. In contrast, ethnic self-definition is probably affected strongly by social context because the definition of who one is depends on the way the context is defined. Thus, introjection is guided more by psychological needs and factors and therefore should be affected less strongly by context.

### The Hearing World: Perception of the Deaf

This dissertation study concerns the association of family and education backgrounds, and the identities of deaf and hard-of-hearing persons. Therefore, it is of importance to discuss the histories and perceptions of the hearing and deaf worlds as perceived by deaf people. Although the ability to see encompasses the hearing world, the world also consists of people who have a sense that functions — that is, the ability to hear. The ability to hear dominates every aspect of their lives. These people are known to the deaf people as “hearing people.” Hearing people depend largely on sounds to get through their everyday lives (Higgins, 1980), and tend to feel lost without sounds (Stephenson, 1999). Thus, sounds become the heart of the hearing world.

Higgins has given a detailed account of how sounds predominate the lives of hearing people:

Our day begins with sound, is regulated by sounds, and is interrupted by sounds. We awaken to alarm clocks, change classes according to bells, and are distracted by ringing telephones. Sirens and alarms warn us of potential danger. Yet, so does an odd-sounding automobile engine or heartbeat. Sounds please us as well as irritate us. Young children’s laughter, the crashing of waves on a beach, and our favorite songs give us joy. Barking dogs, thundering airplanes, and noisy neighbors annoy us. Sounds fill up our day. (1980, p. 21)

In addition, the hearing world relies primarily on sound for communication. Of course, it communicates through other means. For example, hearing people also communicate by writing letters, reading books, winking or smiling, pointing and painting, body language, and gestures. In spite of the nonverbal aspect of the hearing life, the main communication mode is sound based. Hearing people communicate by means of talking or listening with telephones, radios, intercom systems, loudspeakers, and televisions (Higgins, 1980). Thus, sounds encompass the lives of hearing people. Because of the high value the hearing world places on sound to function and live, it is a puzzle to many hearing people when some cannot hear.

To hearing people in general, the inability to hear is a violation of an expectation. They have defined the ability to hear as “normal.” So when a person cannot hear, he or she has violated a social norm — that is, the ability to hear. When a social norm is violated, such violation is viewed as a stigma. People who cannot hear have the appearance of being essentially normal. However, when they behave as not being able to hear, they are being stigmatized. Stigma is an attitude and an action that the hearing world has toward a person with hearing loss. Goffman has stated:

We construct a stigma-theory, an ideology to explain his [or her] inferiority and account for the danger he [or she] represents, sometimes rationalizing an animosity based on other differences, such as those of social class. We use specific stigma terms such as cripple, bastard, moron in our daily discourse as a source of metaphor and imagery, typically without giving thought to the original meaning. (1963, p. 5)

Hearing people, upon meeting those with hearing loss, tend to associate a wide range of imperfections on the basis of the original one. For example, a family doctor when treating a hearing woman, who has worked with deaf people on a professional basis

and socialized with the deaf after work hours, has asked if deaf people read Braille (J. Kelley-King, personal communication, March 15, 1997).

The inability to hear is therefore deviance in the view of the hearing world. There are variations in the definition of deviance, but of particular interest to this study is a less simple but much more common view of deviance. It identifies deafness as something essentially pathological, revealing the presence of a so-called disease. Articulating the medical analogy used by the functionalist, Becker has stated:

The human organism, when it is working efficiently and experiencing no discomfort, is said to be “healthy.” When it does not work efficiently, a disease is present. The organ or function that has become deranged is said to be pathological. (1963, p. 5)

Consequently, people who cannot hear are labeled “deviants” in the hearing world. They are in a sense “outsiders” in a world largely created and controlled by those who can hear.

Becker has coined the concept “outsider” to refer to an individual whose behavior violates a social rule. In his definition of “outsider,” Becker has explained:

When a rule is enforced, the person who is supposed to have broken it may be seen as a special kind of person, one who cannot be trusted to live by the rules agreed on by the group. He is regarded as an *outsider*. (1963, p. 1)

People in the hearing world, like in other groups, create rules, thereby creating their own reality (Higgins, 1980). One of the social rules concerns the ability to hear. Therefore, when a person cannot hear, that individual is assumed to be incompetent. This belief is applied primarily to those born deaf or deafened early in life, and often to those who become deaf later in life after an accomplished life in the hearing world.

Early Greek and Roman philosophers related hearing ability to that of thinking (Sacks, 1989). The argument was: Without language, there was no thought. Without

speech, there was no language. Without hearing, there was no speech. Therefore, those who could not hear could not think. This argument was so powerful that early Greeks and Romans applied it to those born deaf. They believed that those deafened later in life retained their speech and language, and thus, thinking abilities.

Historically, so prominent was this argument that it promulgated in many cultures. Educators and doctors in the eighteenth century conducted various experiments on profoundly deaf children in Paris, France, hoping to find a cure for deafness (Lane, 1984). A physician, Marc Itard, at the Institute of Paris became so intrigued with the search for a cure that he experimented with deaf students' ears by inserting various objects into that orifice. One extremely painful experiment involved Itard's pounding a pick into the skull just behind the ear. Despite such extreme measures, the "cure" was nowhere in sight. Around the same period, a deaf man, Alessandro Graf Volta, apparently having a strong desire to put an end to his outsider status, put a metal rod in each of his ears, connected the rods to some batteries, and reported that the experiment had caused him to hear sound (Ling, 1990).

In addition to the medical efforts, teaching the deaf to speak was also part of the effort to "cure" deafness. Alexander Graham Bell, prominent because of his invention of the telephone, endorsed oralist teaching strategies with the deaf (Gannon, 1980; Higgins, 1980; Lane, 1984; Sacks, 1989). The fame he acquired from his telephone invention gave him credibility in his educational approach with the deaf.

Bell's obsession stemmed from a strong heritage of teaching speech within his family (Lane, 1984). His father, Alexander, taught reading and corrected speech problems at the school he founded in St. Andrews, England. He also married a deaf

woman. Bell and his brother Melville acquired their father's love for speech teaching. As children, they attempted to teach their family dog to say, "Mama" and "How are you grandmama?" They even took extreme measures in learning how to build a talking machine consisting of palate, larynx, and other parts of the human mouth by killing their pet cat and dissecting a lamb's head as guides to building the contraption. As an adult, Bell continued his father's work in his pursuit of making the deaf talk. He also married a deaf woman, Mabel Hubbard, who viewed her own deafness as a serious human defect (Lane, 1984; Van Cleve & Crouch, 1988).

Beginning in the 1880s, Europe and America saw the emergence of the oralist and pro-hearing movement (Gannon, 1980; Sacks, 1989; Van Cleve & Crouch, 1988). This movement effectively labeled deaf people as outsiders whose sign language, their primary communication mode, was viewed as deviance. Measures taken to assure that the inability to hear and speak would be alleviated included the passage of the Milan Resolution by enforcing oralism and the eugenics movement by criminalizing deaf intermarriage.

The Milan Resolution was articulated in Milan, Italy, in 1880. It decreed that the language of instruction in schools for the deaf should be that of the mainstream — that is, the hearing society (Gannon, 1980; Lane, 1984; Sacks, 1989; Van Cleve & Crouch, 1988). The implications were that: (a) the deaf should be taught to talk; (b) deaf education had no place for deaf teachers, thus releasing nearly all deaf teachers from their teaching posts; and (c) sign language should be banished. Interestingly, only one deaf teacher was invited to attend the conference in Milan. The Milan Resolution therefore proved to be a reflection of the hearing norm.

In addition, the eugenics movement served to heavily popularize “social Darwinism” in America in the late nineteenth century and early twentieth century. Social Darwinism applied the view of the “survival of the fittest” to humans in a society: “[It] suggested that nature would provide that the best competitors in a competitive situation would win, and that this process would lead to continuing improvement” (Hofstadter, 1955, p. 6). So when applied to societal “misfits,” social Darwinism was a mass-cleansing of these social undesirables, such as the insane, the lame and the deaf (M. Malzkuhn, personal communication, June 21, 1999). Various measures were taken against the deaf to ensure that the “deaf race” would become extinct through genetic engineering (Biesold, 1999; Lane, 1984; Van Cleve & Crouch, 1988).

Bell was a prominent leader of the eugenics movement concerning the deaf. He proposed a law should be passed outlawing deaf marriage. Instead, the deaf should only marry the hearing. Bell theorized that deaf couples would reproduce deaf offspring; however, the facts indicated that only 10% of deaf children were born to deaf parents. His theory failed to gain sufficient support for passage into law.

In addition, the idea of “mainstreaming” emerged as early as the 1870s, when Bell began his involvement with the affairs of the deaf (Lane, 1984; Van Cleve & Crouch, 1988). He and his proponents felt that deaf people could be “normalized” if they were educated in public school with their hearing peers. They felt that through socialization the deaf could learn to talk, act, and think like hearing people. Bell argued that residential schools for the deaf impeded the ability to learn to speak and promoted deaf norms — that is, sign language and association with other deaf people. His views

and practices continue with today's oralist educators and members of the Alexander Graham Bell Association (Ling, 1990).

Furthermore, deaf people were excluded from some activities that other people took for granted (Gannon, 1980; Higgins, 1980). Before the middle of the twentieth century, because the deaf were viewed as incompetent, they were not encouraged to participate in voting. After the invention of the automobile, the deaf were not allowed to obtain a driver's license. The contention was that one must be able to hear oncoming traffic to maneuver a vehicle safely. Insurance companies would not allow the deaf to purchase insurance on the basis that the deaf's inability to hear already posed a safety issue (Gannon, 1980).

In summary, the hearing world consists of norms that include the ability to hear and speak. Members of the hearing world find it difficult to imagine life without sound, as sound plays an important role in their daily functioning. They also believe that speech and thought are closely associated. Therefore, without speech, it is assumed that one cannot think.

### Hearing Parents with Deaf Children

Many members of the hearing world have children, and some of them parent deaf children. However, among these hearing parents, many have never known a deaf person until their own children were born. Upon discovery of their children's deafness, many hearing parents are wrought with conflicting emotions. The impact of deafness on the family is profound. Parents have to deal with communication problems and education



issues, as well as family relationships. Almost always, they seek the advice of hearing professionals, namely doctors, audiologists, and educators, concerning such issues.

Parents' attitudes toward visual language and evaluation of the deaf experience play an important role in determining approaches to the rearing of their deaf offspring. The actual mode of communication employed by hearing parents varies from complete reliance on speech (speech reading and speech production) to the use of signs only, that is, signs without lip movements or other speech-based nonverbal techniques (Nash & Nash, 1981). Evaluations of the deaf experience by hearing parents range from accepting it as a unique, but normal, way of life to placing a stigma on not hearing (Meadow & Nemon, 1976). There are two basic types of hearing parents: oralists and signers (Nash & Nash, 1981).

Oralist parents regard various forms of manual communication (sign language) as irrelevant to their own personal and family environments (Nash & Nash, 1981). They interpret the status hierarchy of the society as a system allowing upward movement and accumulation of wealth. Their children's language is judged by how closely it resembles the speech of hearing people and whether or not the child can "talk to anyone." Their children's behavior and general social performance are evaluated by the same criteria they would employ for children they consider "normal" (i.e., not deaf). The deaf children must therefore approximate "normality," and full normality depends on the restoration of hearing at some future time. The end result is that these children have become "poor imitations of hearing people" (Schowe, 1979).

Signer parents espouse the use of some type of manual communication system whether it be a form of Manually Coded English or American Sign Language (Nash &

Nash, 1981). They begin from an acknowledged, sometimes tacit and at other times calculated, understanding of the social dimensions of deafness. Not hearing means other sets of experiences, other ways of interpreting, “otherness,” “outsider and insider perspectives,” and “separateness.” Some signer parents may consider the deaf experience to be not only different but also less desirable, one that carries a stigma.

The acknowledgment of signs frequently involves “mixing styles,” putting incompatible qualities together — that is, ASL signs in English word order, speaking and signing at the same time, or English-based signs (Baker-Shenk & Cokely, 1980). For the last 10 years, there has been an increase in the number of hearing parents learning ASL, supporting their deaf children’s bilingualism-biculturalism — that is, knowing two languages (ASL and English) and two cultures (Deaf and hearing), and acknowledging and celebrating their children’s deafness (Fletcher, 1987; Schwartz, 1996).

Measures taken to alleviate deafness vary among hearing parents; however, the amplification of the children’s hearing loss has been the typical approach (Schwartz, 1996). Taking advantage of residual hearing (the amount of hearing left), parents invoke the use of hearing aids and cochlear implants. Hearing aids amplify sounds through the normal hearing channels, whereas cochlear implants, requiring surgical intervention, bypass the eardrum and convert sounds to electrical pulses stimulating auditory nerve fibers (Hasenstab & Laughton, 1991). Hearing parents frequently have two goals for amplification, that (a) their children may be able to communicate orally; and/or (b) their children may be able to hear environmental sounds.

Psychological implications of parents’ attitude towards children’s deafness have shown to have a profound impact on the children’s self-esteem. Altshuler (1978) has

discussed the psychology of deafness and suggested the altered life experience imposed by early profound hearing loss may result in personalities that are different from the norm. These children have been characterized as socially immature, emotionally immature, with ego rigidity and having a difficult time with impulse control. Attachment behaviors, separation, and individuation fall behind compared to hearing children. Behavioral problems associated with school conduct are more prevalent among deaf children whose parents are hearing (Schein, 1979). Vaccari and Marschark (1997) have found support for the argument that parent-child communication plays a central role in social growth, just as it does in other domains of development. Age-appropriate social and emotional development in deaf children, whose hearing parents depend on spoken communication, is less likely the higher the degree of hearing loss.

Parental communication and interaction further play a role in the children's perception of their deafness and self-esteem as demonstrated in the following studies. Desselle (1994) has found a positive relationship between the family's communication method and the deaf children's self-esteem. Parents who use total communication (speech, fingerspelling and sign) have children whose self-esteem scores are higher than those of children whose parents use an oral-only method of communication. Another study has assessed the impact of hearing parents on the children's perception of their deafness (Stone & Stirling, 1989). These children express anxiety about being deaf because their parents grieve over their deafness. As a result, these children prefer to be hearing and to go to public school with other hearing children. Bertling's (1984) and Biderman's (1998) autobiographies have each noted one hearing parent and one deaf parent, who are primarily oralists, and have demonstrated a profound anti-deaf sentiment.

Bertling and Biderman typically prefer to be with the hearing, to be educated in public school, and/or to be able to hear. Biderman even has taken measures to receive a cochlear implant, to rely exclusively on oral-aural means of communication, and to refrain from having children because she carries the deaf gene. It has also been shown that deaf and hard-of-hearing people with hearing family backgrounds view themselves as living in two cultures (Meyerson, 1955), or in a marginal position where they do not belong entirely to either of the two cultures (von der Lieth, 1978).

Finally, studies have shown that the inability to hear can bind a group of persons together in a sociopsychological community, developing its own standards and habits which gradually come to constitute Deaf culture (Lane et al., 1996; Padden & Humphries, 1988; Meadow, 1972; Schein, 1968; Stokoe, Casterline & Croneberg, 1965; Vernon & Makowsky, 1969).

In summary, hearing parents fall into two categories: oralist and signer. Regardless of the categories, hearing parents continue to exhibit hearing norms, which are hearing and speaking. Deaf and hard-of-hearing children typically pick up their parents' attitudes. Literature has shown that a majority of these deaf and hard-of-hearing children experience a sociopsychological impact of having hearing parents — that is, they express the desire to share the same characteristics as their parents or to bind with members of Deaf culture, complicating their personal and social identities as deaf and hard-of-hearing persons. Further, it has been illuminated that many of these children face three choices: (a) living in a hearing world where the major part of the cognitive communication takes place orally; (b) living in a marginal position between the hearing world and the silent

world; or (c) asserting themselves as different from their parents and joining in forces with other members of the Deaf community.

Sociopsychologically, should the children choose to live in a hearing world, they may act like hearing people but think like deaf people. This may be a constant struggle for these children to try to fit in the hearing world. Communication and interaction can be difficult. Should the children choose to be in a marginal position, they may live in both the hearing and the deaf worlds. However, they may face situations where they are not fully accepted by both worlds. They may seem to be able to socialize with members of both worlds, but people in either world may perceive them as “different.” If these children choose to be part of the Deaf community, they may find a sense of belonging and cultural pride. They also may be viewed as “separatists” by the hearing world.

### Deaf Experience in Public School

The values of the hearing world are also found in public schools. Public schools that provide a small deaf program, offer mainstreaming experience, or practice complete inclusion of deaf and hard-of-hearing children represent the hearing norm in that such settings provide the experience of “normality” to deaf children. The language of instruction is almost always English, whether it be spoken or signed. The cultural mores and beliefs practiced in public school are that of the hearing world.

Public schools offer two major educational patterns for deaf students: a regional program and a local neighborhood school (Moore, 1996). A regional program includes resource rooms that are part of a local public school. Deaf and hard-of-hearing students receive special instruction in self-contained classes or resource rooms and typically attend

selected classes with hearing students. The size of these programs varies considerably from just a few to more than 100. A neighborhood school is one where all students are drawn from a local area. The students are generally placed in classes with hearing students, although they are visited by an itinerant teacher to provide special instruction, such as speech and listening and remedial English. There is much variation in how deaf students receive such instruction.

Those who advocate mainstreaming believe that the deaf and hard-of-hearing students, if educated in “regular” schools, will be able to blend in successfully with hearing peers and feel “normal” (Wixtrom, 1988). Support services (such as interpreters and notetakers) are offered to provide equal access to academic opportunities. Most public school teachers are willing to have a deaf student integrated into the regular classes, and some even arrange to have brief sign language lessons presented a couple of times a week within their classes to give the hearing students opportunities to learn to communicate with their deaf and hard-of-hearing classmates. These deaf and hard-of-hearing students are outgoing, bright, and eager to be part of the social mainstream (Lane et al., 1996; Wixtrom, 1988).

However, the situation often remains that these deaf and hard-of-hearing students have superficial relationships with their hearing peers. Below is a typical mainstream scenario:

The classroom door is open, and the hearing students are pouring in, greeting their friends and talking excitedly about their weekend experiences. The deaf student slips in silently, sits down alone and buries his head in a book as he waits for class to begin. He cannot hear the buzz of activity and conversation around him. He was not a part of the weekend activities. No one speaks to him. (Wixtrom, 1988, p. 14)

Classroom learning further distinguishes deaf and hard-of-hearing students from their hearing peers:

The hearing students settle into pseudo-attentive postures, reverting to subtle, subversive communications with those around them. The deaf student, in his front row, corner seat, turns his eyes on the interpreter. He keeps his focus there, working to grasp visually what other students are effortlessly half-listening to. (Wixtrom, 1988, p. 15)

Public school has a profound sociopsychological impact on these deaf and hard-of-hearing students. Their self-concept and self-esteem may be shown to be lower. This can seriously affect their learning, personal and social development, and socialization.

Research demonstrates the impact of public school education on these deaf and hard-of-hearing students. Two studies have assessed the impact of the integration of deaf and hard-of-hearing children in regular classrooms (Kluwin & Stinson, 1993; Reich, Hambleton, & Houldin, 1977). Results have suggested that although integration is beneficial to academic development, personal and social difficulties arise. In addition, three factors influence a better integrative experience: (a) these students must have highly developed oral skills; (b) students with greater degrees of hearing loss require more intensive specialized support services; and (c) students must also have at least average intelligence and supportive parents. Maxon, Brackett, and van den Berg (1991) have focused on the mainstreamed deaf and hard-of-hearing students' self-perception of socialization. Using self-reports, they have found that when compared to their hearing peers, these students perceive themselves differently on items relating to verbal expression of emotions, verbal aggression, physical aggression, and interaction. They manifest lower self-esteem, poorer social skills, and a higher degree of frustration.

One final point in the effects of public school education on deaf and hard-of-hearing students concerns the social integration of these students with hearing students. Lee and Anita (1992), in an overview of the relevant literature, have indicated that although the goal of mainstreaming is to integrate the deaf and hard-of-hearing students with the hearing peers, deaf and hard-of-hearing students, and their hearing peers resegregate during non-academic activities. This suggests that mere physical proximity within the classroom does not automatically foster improved intergroup relations.

In summary, public schools attempt to provide an atmosphere of normality to deaf and hard-of-hearing students through the means of integration and hearing-normed instruction. That way, these students will learn to think and act like the mainstream society — that is, the hearing world. However, studies have shown profound converse sociopsychological impacts of public school education on the self-concept, self-esteem and socialization of deaf students. Deaf students typically have poorer self-concept and self-esteem, and social experiences as persons who try to be hearing but are essentially deaf. However, few studies have examined the personal and social identities of the deaf as a consequence of their experience in public school.

### The Deaf World

Within the large hearing world is a small Deaf world containing members of the Deaf community. Although statistics show that in America there are approximately two million people with hearing loss, less than 500,000 of these people use sign language (Biderman, 1998). These signing people consider themselves as part of the Deaf world. The Deaf world, a term coined by members of the Deaf community, encompasses



individuals whose lives are regulated by their eyes. Their eyes compensate for their loss of hearing. To them, life without sounds is the norm. Members of the Deaf world do not feel a sense of loss due to the lack of hearing ability. They take pride in themselves as Deaf people (Lane et al., 1996; Padden & Humphries, 1988; Sacks, 1989; Stokoe, 1980). Sign language, in the linguistic form of American Sign Language (ASL), is the preferred mode of communication, for ASL relies on the face, hands, and body, complementing the social norm of relying on eyes rather than ears (Klima & Bellugi, 1979; Lane, 1984; Sacks, 1989; Woodward, 1978). Deaf culture includes using ASL, unifying with other Deaf people, attending Deaf community activities, joining Deaf organizations and social clubs, supporting deaf schools, and adhering to a set of beliefs, values, and norms (Lane et al., 1996). Because members of the Deaf world primarily use ASL for communication and practice the ways of Deaf culture, they consider the Deaf community as a linguistic minority in the larger culture (Bienvenu, 1992). Deaf people have argued that ASL is their first language and English their second language, and they are part of Deaf culture (Lane, 1999; Lane et al., 1996). Thus, in this sense, the Deaf world is an ethnic group and will be referred to as a group with Deaf identity in this study because of its status as a linguistic minority in American culture.

There are four avenues to Deaf community membership: audiological, political, linguistic, and social (Baker-Shenk & Cokely, 1980). Audiological refers to the actual loss of hearing ability. Political refers to the potential ability to exert influence on matters that directly affect the Deaf community on a local, state, or national level. Linguistic refers to the ability to understand and use ASL. Social refers to the ability to satisfactorily participate in functions of the Deaf community. Using the Deaf community

membership model, it is safe to say that deaf and hard-of-hearing persons, who have these characteristics, are core members of the Deaf community and part of the Deaf world.

However, research has found that another factor, attitudinal deafness, is more important than audiological deafness (Padden & Markowicz, 1976). Attitudinal deafness occurs when a person identifies him/herself as a member of the Deaf community; this means the individual supports the values of that group, and other members accept this person as part of the Deaf community. Thus, hearing persons who show respect for ASL and Deaf culture are considered as part of the Deaf world.

There are hearing people who are children of Deaf adults (CODA) and must face identity issues (Preston, 1996). They grow up in homes where ASL is the preferred mode of communication, their Deaf parents have Deaf friends and attend Deaf community functions, and Deaf social norms predominate. Some of these children view themselves as deaf until their parents inform them otherwise. Their identities become hyphenated and marginalized as a result. However, as adults, many of them enter deaf-related professions, becoming interpreters, teachers, and counselors for the deaf to maintain their identity as CODAs.

Some deaf and hard-of-hearing people deviate from the Deaf world norm. The two most common forms of deviation include: behaving and thinking like hearing people, and signing in English word order rather than ASL. Such deviant actions carry a stigma within the Deaf community. The term THINK-HEARING is used by Deaf people to label these deviants (Padden & Humphries, 1988). The capitalized phrase with a hyphen between “think” and “hearing” represents one sign “hearing on the forehead” to say that the deaf person is thinking like a hearing person. These THINK-HEARING individuals

are considered outsiders of the Deaf community, and there is a little social acceptance of these individuals, thus building a wall between them and ASL users (Gustason, 1990).

In other words, living a life without sound is the hallmark of the Deaf world. The Deaf world believes that the Deaf learn best through manual communication and writing. This consciousness dates to eighteenth century Paris, France, where a residential school for the deaf emerged from the efforts of interested priests (Lane, 1984; Lane et al., 1996; Padden & Humphries, 1988; Van Cleve & Crouch, 1989). This was the school that educated the highly intelligent Jean Massieu, who also had deaf siblings (Lane, 1984; Sacks, 1989). Prior to his matriculation, he and his deaf siblings shared a communication system consisting of home signs, so in the neuro-linguistic sense, he already had thinking abilities. In school, he was able to transfer his knowledge of home communication to an established French-based sign language system created by the hearing priests and make connection between signing and the written French. However, socially, he used French Sign Language (LSF) with his deaf peers. He learned all subjects at a rapid pace and eventually became the world's first recognized deaf teacher of the deaf. He became an example to many deaf students, including Laurent Clerc.

Clerc came from a hearing family background and lacked communication until his enrollment at the Paris Institute, where Massieu taught. Clerc learned much from Massieu, modeling himself after his instructor and eventually became a teacher of the deaf. However, it was in America that his work had a greater impact on today's education of the deaf (Gannon, 1980; Lane, 1984; Lane et al., 1996; Padden & Humphries, 1988; Sacks, 1989). In 1817, along with the minister, Thomas Hopkins Gallaudet, and a hearing father of a deaf girl, Mason Cogswell, Clerc helped found

America's first residential school for the deaf, American School for the Deaf (ASD), at Hartford, Connecticut (Gannon, 1980). The deaf school, like its French ancestor, used sign language as its language of instruction, but it abandoned a form of MCE (English-based sign system) in favor of ASL. The teaching approach was complementary to the norms of the Deaf world — that is, learning through the eyes, communicating in ASL, and using English as a written language. The school also employed many deaf teachers. Soon after 1817, many residential schools for the deaf emerged in New York, Pennsylvania, Massachusetts, and other states (Gannon, 1980). These schools initially modeled themselves after ASD in their pedagogical approach until after the Milan Resolution in 1880.

Due to a widespread misconception, educators of the deaf viewed sign language as broken English. Until the groundbreaking work in 1960 of a hearing linguist, William Stokoe, Deaf people were also led to believe that their sign language was merely a series of random gestures, a jumble of imperfect English (Sacks, 1989). In his study, Stokoe (1980) argued that Deaf people used a sign language with structures and lexicons distinct from English, and consequently, he coined the linguistic term, ASL. Stokoe further identified the existence of a highly complex social structure, namely the Deaf community. However, Deaf people and hearing people alike initially resisted Stokoe's research findings (Sacks, 1989).

In 1970, nearly a century after the wave of oralism, a deaf activist named Roy Holcomb attempted to bring sign language and deaf teachers back into the classroom. He proposed a philosophy called total communications (Moores, 1996). Total communications encompassed the teacher's use of whatever communication method

(e.g., speaking and signing at the same time, ASL, speech and listening, Cued Speech) that the students used in the classroom. In practice, however, the teachers typically speak and sign at the same time. In spite of this, total communications effectively brought sign language, however English-based, back into the classroom. Initially, in the view of many Deaf people, any form of sign language was better than nothing, because it allowed them to utilize their eyes rather than their ears.

. In the 1970s and 1980s, the Deaf world experienced many social changes that altered their attitudes toward English-based signing and their deaf selves. Deaf pride gradually made its way into the Deaf community in the late 1970s through community awareness (Rose & Kiger, 1995). In 1980s, colleges and continuing education programs began offering ASL and Deaf culture classes. People, both Deaf and hearing, became aware of ASL, Deaf culture, and the Deaf community. In 1988, students at Gallaudet University, the world's only liberal-arts institution of higher education for the Deaf, made their assertion as a group in protest against the selection of a hearing person to become the school's president (Christiansen & Barnartt, 1995).

After 1988, core members of the Deaf community began to increasingly affirm their Deaf consciousness, self-concept, self-esteem, and identity. Some members became militants, rejecting and stigmatizing anyone deviating from the Deaf world norms. Some further asserted the norms of the Deaf world in the realm of education by recognizing the teaching methods of Massieu and Clerc in the form of bilingualism-biculturalism (Lane, 1999; Lane et al., 1996; Moores, 1996; Schwartz, 1996). More than ever before, Deaf adults made efforts to associate with hearing parents who have children with hearing loss

to teach them about deafness and the ways of the Deaf world (Lane et al., 1996; Schwartz, 1996).

In summary, the Deaf world norms, specific to communication and deafness, are very different from those of the hearing world. The use of eyes dominates the lives of Deaf people. Sign language, in the form of ASL, is the preferred communication mode and membership in the Deaf community is valued. The Deaf carry the view that they do not need “repair” or “improvement” because they are culturally Deaf. Those deviating from the norms of the Deaf world, such as speaking rather than signing, signing in English word order while speaking, or socializing with the mainstream hearing rather than with the deaf, are stigmatized and labeled as THINK-HEARING. The THINK-HEARING label has a negative connotation, and those with that label are viewed as outsiders of the Deaf world.

### Deaf Parents of Deaf Children

Parents who cannot hear and use sign language are typically members of the Deaf community. Because of the purpose of this section, approximately 1,500,000 deaf and hard-of-hearing people (Biderman, 1998), who deviate from the norms of the Deaf world because of their oralist stance and/or adulthood deafness, are not considered for discussion. Obviously, Deaf parents following the Deaf world norms are signers. Due to their affiliation with the Deaf community, celebration of Deaf culture, and preference for ASL for communication, many of them welcome a deaf child (Lane et al., 1996). However, they also welcome hearing children and raise them according to the norms of the Deaf world and the hearing world (Schein, 1989).

As opposed to hearing parents, Deaf parents upon the discovery of their children's deafness, after an initial disappointment, adjust rapidly and begin raising the children like themselves (Lane et al., 1996; Padden & Humphries, 1988; Schein, 1989). Some parents under the pressure of the school system and/or audiological services give their deaf children the opportunity for amplification of their hearing, but amplification has rarely become a central issue in the raising of their children. If their deaf children have shown some signs of discomfort or stress when wearing hearing aids, Deaf parents typically allow them to stop wearing the devices. Very few Deaf parents choose cochlear implants as a form of amplification for their deaf children because they feel compelled to offer their deaf offspring another option (S. Ashburn, personal communication, June 10, 1999). ASL as the choice for communication, positive parental attitudes toward the children's deafness, and the parental interaction with children all point to the view of deafness as the way of life.

Such a view of deafness among Deaf parents has a positive sociopsychological impact on deaf children's self-concept and self-esteem. Studies have consistently shown that deaf children of deaf parents do relatively better than deaf children of hearing parents with regard to personal and social development (Meadow-Orlans et al., 1990; Schein, 1989; von der Lieth, 1978). These deaf children exhibit attachment to and independence from their parents. Their interaction with their parents is similar to that of hearing parents with hearing children, demonstrating the normal sociopsychological development in these deaf children.

In the view of the Deaf world, positive self-concept implies that these children are "well-adjusted" (Bienvenu, 1992). Characteristics of a well-adjusted deaf person include,

but are not limited to, positive self-concept and self-esteem, positive psychological acceptance of deafness, ability to effectively compensate for deafness, and effective interpersonal relationship and social skills. These characteristics are common among deaf children of Deaf parents. It can be argued that “because the deaf child is a component of the family system, the deafness belongs not just to the child but to the entire family” (Henderson & Henderschott, 1990), thus perpetuating a more positive self-concept as deaf and hard-of-hearing persons.

In summary, Deaf parents celebrate deafness, embrace the use of ASL, and are part of the Deaf world. Instead of trying to alleviate deaf children’s deafness through amplification, speech, and imposition of the hearing world norms, Deaf parents accept their children’s deafness and begin immediately to raise them as Deaf children through the means of sign language and to teach them the ways of the Deaf world. Their positive perspective of deafness, therefore, plays an important role in a more positive personal and social development of their deaf offsprings. As a result, these children frequently achieve a great sense of belonging and pride in their deafness.

### Deaf Schools

The values of the Deaf world are also found in residential schools for the deaf and day schools for the deaf. Residential schools for the deaf and day deaf schools provide the total experience of the Deaf world, implying the normality of deafness. The language of socialization is ASL. However, with the exception of oralist residential/day schools for the deaf, the language of instruction has been either in the form of MCE or ASL. The cultural mores and beliefs practiced in deaf schools are that of the Deaf world.



Although there is much diversity in residential/day schools for deaf children, the prototypical school has 150-200 students (Moores, 1996). Deaf and hard-of-hearing students learn side by side, and a high percentage of teachers are Deaf (Schein, 1989). In residential schools, high-school students tend to reside at the school. In both types of schools, there may be a number of students who have transferred from a mainstream program. There is generally an excellent range of special services, such as those provided by audiologists, counselors, and psychologists. There is a variety of academic and vocational courses, and a wide range of athletic and social programs. Students are a part of after-school activities, and they participate in weekend activities through the means of “sleepovers” and visits.

Ironically, these deaf schools rarely provide courses in Deaf history, and ASL is almost never taught in such schools (Schein, 1989). The curriculum found in deaf schools is frequently monolingual and monocultural. As a result, students learn ASL from each other and from Deaf adults who are employed at the deaf schools in various capacities (e.g., teachers, dormitory houseparents, and janitors). Because of the effects of the Milan Resolution, deaf teachers are usually found only in the upper grades, where they hold typically positions in vocational, not academic, departments (Lane, 1999; Lane, et al., 1996).

Only recently, a few residential schools for the deaf and newly created charter schools, abandoning total communications, provide bilingual-bicultural (BiBi) instruction to compensate for the previously mentioned deficiencies (Nover, 1995; Schwartz, 1996). The BiBi approach offers ASL and Deaf history courses, as well as the usual curricula. The language of instruction is exclusively in ASL, and English is taught as a second

language in the form of print. Speech and amplification are offered as an option to the students.

Contrary to the perspective of the hearing world and the provisions of PL 94-142, it is the view of the Deaf world that these deaf schools afford the least restrictive environment. It has been argued that the absence of Deaf teachers in the education of deaf children found in mainstream public schools can have the effect of depriving deaf children of appropriate role models, perpetuating lower self-concept as deaf persons, and reducing their motivation to achieve (Lane, 1999; Lane et al., 1996; Schein, 1989). Instead of the goal of inclusion as championed by PL 94-142, the effects of mainstream public schools have been an experience of exclusion for these deaf children. As a result, Deaf parents and hearing parents who embrace the values and norms of the Deaf world typically enroll their children in deaf schools to ensure them the least restrictive environment.

In addition, Deaf parents and members of the Deaf community argue that deaf schools are the least restrictive environment. These schools contain a critical mass of peers and adults with whom students can interact easily and from whom they derive a variety of positive social experiences that benefit the children's social development (Foster & Emerton, 1991; Lane et al., 1996; Padden & Humphries, 1988). These schools have a special role in fostering and maintaining the language of the Deaf world. ASL is maintained and transmitted to succeeding deaf generations primarily because students in these schools meet other students from deaf school backgrounds and marry each other (Rainer, Altshuler, & Kallman, 1963). Deaf schools also function as the linguistic and cultural model for deaf and hard-of-hearing children from hearing families (Supalla,

1989). Thus, deaf schools have apparently provided a congenial environment for socializing children into the Deaf subculture as a linguistic minority.

The following account, from a deaf man, illuminates the positive personal and social environment in deaf schools:

I never met a deaf adult when I was a kid, so I always assumed that I would be able to hear when I grew up. I was shocked when I started at a school for the deaf and saw teachers and houseparents with hearing aids! Wow! They were just like me! It really changed the way I thought of myself and about being deaf. (Marschark, 1997, p. 42)

Individuals who have attended residential school have commented on how one of their special benefits is the development of close, long-lasting friendships (Foster, 1989).

Thus, the environment of deaf schools may be said to perpetuate a more positive self-concept and self-esteem in deaf and hard-of-hearing children.

In summary, deaf schools reflect the norms of the Deaf world. ASL is maintained through socialization, and increasingly, has become the language of instruction in schools using the BiBi approach. There is a critical mass of deaf peers from whom deaf and hard-of-hearing children can derive ethnic and social pride as Deaf people. Deaf adult role models who are employed in deaf schools provide a means of socialization into the Deaf world, perpetuating a more positive self-concept and self-esteem as Deaf persons.

### Summary

Both the perspectives and norms of hearing and Deaf worlds have been discussed in depth. The norms of the hearing world are dominated by life full of sounds, whereas the Deaf world norms consist of the use of eyes and communicating in ASL. Hearing parents who are part of the hearing world typically impose the values and norms of the

hearing world on their deaf offsprings through various means: oral communication, English-based signing, and/or enrollment in public school. Deaf parents as members of the Deaf community are most likely to assert the Deaf world values and norms in their raising of deaf children by communicating in ASL, fostering Deaf pride and awareness, and/or enrollment in deaf school. These diverse approaches are believed to have an impact on these children's identity as persons with hearing loss.

. A particularly useful theoretical context in which to view the association of family and education backgrounds, and the Deaf self-identification of deaf and hard-of-hearing persons is provided by identity and social identity theories, whose emphasis on identity is especially relevant to self-concept, self-esteem, and intergroup relations studies. This dissertation borrows the approach of Kinket and Verkuyten (1997) to examine levels of ethnic self-identification and social context. The concept of ethnicity is adapted for this study to examine deaf and hard-of-hearing persons' levels of identity. Although Deaf people do not have a territory, those having Deaf identity tend to experience profound attachment to Deaf culture within the Deaf community.

Briefly, there are three levels of Deaf self-identification: self-definition, self-evaluation, and group introjection. Self-definition is where identification of oneself takes place. Self-evaluation concerns the person's self-esteem as a member of a group. Group introjection is the highest level of self-identification where affective commitment to a group comes into play. The model of levels of Deaf self-identification and social context is expounded in the following chapter. In the exploration of common patterns, the purposes of the present study are (a) to examine three forms of Deaf self-identification: self-definition, self-evaluation, and group introjection, and social context among deaf and

hard-of-hearing persons of various family and education backgrounds in Utah; and (b) to assess the association of these backgrounds and their self-identification.

Based on the literature review and theoretical constructs of personal and social identities, the researcher expects that those with hearing-family and public-school backgrounds are more likely to have non-deaf or marginalized identity, and to experience lower self-esteem and little group introjection than those from deaf families and with residential school experience. The researcher also predicts that these respondents will be more likely to have dissonance with their personal and social identities as deaf and hard-of-hearing persons. On the other hand, the researcher expects that those with Deaf-family background and residential-school background are more likely to have a strong Deaf identity, and to enjoy positive self-esteem and high group introjection than those from hearing families and with public school experiences. In addition, the researcher predicts that the respondents with high group introjection experience in-group solidarity and engage in intergroup competition. Those with Deaf identity are likely to sustain in-group/out-group comparisons that favor the in-group to maintain in-group legitimacy and stability. Regarding social context, the researcher expects that respondents with hearing-family background and public-school background receive little or no support from their parents and teachers when faced with situations of prejudice and discrimination. Conversely, the researcher predicts those with Deaf families who attend residential school for the deaf receive encouragement for self-advocacy from their parents and teachers in situations of prejudice and discrimination. The specific questions to be addressed are enumerated in the following chapter.

## CHAPTER III

### METHODOLOGY

#### Introduction

The goal of this study is to grasp the personal and social phenomenon of self-identification of deaf and hard-of-hearing persons in Utah, using the approach of three levels of Deaf self-identification and social context, and demographics. It is the intent of the researcher to explore patterns of the individuals' personal and social identities, which are associated with their family and education backgrounds, and experiences. Through inquiry, the respondents can share their perception and interpretation of reality and how these relate to their identities. Their perception of reality turns on their ongoing interpretation of the social interactions in which they and others participate. This then depends on their use of symbols in general and language in particular (Schwartz & Jacobs, 1979). Thus, the researcher can begin to understand the association of such backgrounds and experiences, and their self-identification as deaf and hard-of-hearing individuals.

In this study, the researcher uses the theoretical perspective of identity and social identities, within the framework of symbolic interaction. Kinket and Verkuyten's (1997) three levels of ethnic self-identification and social context approach permit the researcher to understand the personal and social identities of deaf and hard-of-hearing respondents through videotaped interviews. Because the researcher is deaf and uses sign language to communicate with deaf and hard-of-hearing respondents, videotape is used to record the interviews. Also, because never before have deaf and hard-of-hearing persons' "voices"

been recorded in sociological studies, this method allows them to be “heard.” The method of one-on-one semistandardized interviews (Berg, 1995) used in this study is one of the methods typically used by symbolic interactionists (Schwartz & Jacobs, 1979). The interview data are descriptive and intentionally coupled with the theoretical perspective linking method to theory (Lofland & Lofland, 1984). Thus, the study is qualitative in nature.

### Sample

Interviews were conducted between November 1998 and September 1999 with 35 respondents. These respondents include persons who are deaf and hard-of-hearing and have deaf or hearing parents, and who either attend the residential school in Ogden, Utah, or a public school program serviced by the Utah Schools for the Deaf and the Blind between 1975 and the present. The rationale for using respondents who attend programs serviced by the Utah Schools for the Deaf and the Blind between 1975 and present reflects the implementation of PL 94-142 in 1975. The mandates of PL 42-142 concern an appropriate education and the least restrictive environment for the education of deaf and hard-of-hearing children (Moores, 1996). It is, thus, of interest to learn about the association of the respondents’ education backgrounds, as well as their family backgrounds, and their self-identification.

To increase heterogeneity of the sample, the individuals are selected from four groups. The first group consists of persons who have one or two deaf/hard-of-hearing parents and have attended the residential school in Ogden for most of their formative years. The second group consists of persons who have one or two deaf/hard-of-hearing

parents and have attended a public school, serviced by the Utah Schools for the Deaf and the Blind, for most of their formative years. The third group includes persons who have hearing parents and have attended the residential school in Ogden during their formative years. The fourth group includes persons who have hearing parents and have attended a public school, serviced by the Utah Schools for the Deaf and the Blind, during their formative years.

Table 1 shows the number of respondents for each group. The total number of respondents with hearing family and public school backgrounds is 17. Those with hearing family and residential school backgrounds total 10. There are four respondents with one or two deaf/hard-of-hearing parents and public school experience. Finally, the total number of respondents with one or two deaf/hard-of-hearing parents and public school experience is four. All but two respondents continue to live in Utah. The two respondents who as adults have relocated out-of-state are siblings with deaf-family and residential-school backgrounds.

Table 1

Number of Respondents Interviewed in Each Group

Education	Hearing parents	One or two deaf/HH parents
Public school	17	4
Residential school	10	4

Note. N = 35



## Data Collection

Snowball sampling was used (Berg, 1995). The researcher used her special knowledge about deaf and hard-of-hearing people in Utah to select subjects representing this population. She relied on her personal network to find the respondents. The networking system included, but was not limited to, referrals from respondents, respondents' families, respondents' friends, acquaintances, and members of the Deaf community. For instance, when contacting respondents from hearing families with residential or mainstreamed public school backgrounds, the researcher asked them if they knew others who are oral or were oral but learned sign language later or who have used sign language all their lives. In another instance, the researcher, through a respondent, met an individual who is a regular user of cochlear implant. Following the interview, she asked the individual for names of other cochlear implant users for the study. Although the Food and Drug Administration approved childhood cochlear implantation in 1990 (Lane, 1999), cochlear implantation is still considered a "natural experiment," and the number of cochlear implant recipients is quite small. Yet, information from respondents with cochlear implants may show possible association between their family and education backgrounds, and their self-identification.

To ensure heterogeneity, the researcher attempted to balance the number of the respondents in each of the four groups. The goal is to find approximately 10 respondents for each group. However, as snowball sampling progressed, it was not possible to meet this goal largely due to the statistical fact that 90% of deaf and hard-of-hearing children are born to hearing parents (Schein, 1989) and 70% of these children are placed in public

schools (Schildroth & Hotto, 1994). The researcher was left with one option, which was to be selective in accepting and rejecting referrals. In accepting and selecting referrals, the researcher attempted to balance between those raised orally and those raised signing. Through snowball sampling, a more heterogeneous group of respondents was achieved.

To ensure that the university research code of ethics is followed, the researcher developed an informed consent form for the respondents to review and sign (see Appendix A). The Institutional Review Board-approved consent form informs the respondents of the purpose, benefits, and potential risks of the study, the interview technique, their rights as respondents, and confidentiality. The rights of respondents include their right to ask the researcher for more information about the study before, during, and after the interview, and their right to withdraw their participation from the study at any time. Measures of confidentiality include: securing data in a locked filing cabinet accessible only to the researcher and the dissertation committee, and the use of pseudonyms in reporting the research. The researcher protects the identity of the respondents by using caution in giving names of the locations and individuals in reporting the findings (Gibbons, 1975).

Semistandardized one-on-one videotaped interviews were conducted in the homes of the respondents, in the Utah Community Center of the Deaf and Hard-of-Hearing, and in the researcher's residence. The researcher and the respondents were videotaped during the interview. The interview consisted of predetermined questions followed by the researcher's probes (Berg, 1995). These questions were asked of each respondent, but the interview allowed the researcher the freedom to probe far beyond the answers to her prepared and standardized questions. This type of interview is deemed most appropriate

for reality reconstruction as interviews are commonly used for studies using the framework of symbolic interaction (Schwartz & Jacobs, 1979). Interviewing respondents allows the researcher to study the respondents' identity using the approach of the three levels of ethnic self-identification and social context, and demographics. Afterwards, the interviews are transcribed into field notes.

### Research Questions

For deaf and hard-of-hearing persons, questions are formulated for each of the three levels of Deaf self-identification: self-definition, self-evaluation,<sup>1</sup> and group introjection, and social context. Because members of the Deaf community see themselves as a linguistic and cultural minority, ethnicity, as a concept, is adapted for Deaf identity. Questions about demographics are also developed concerning the respondents' and their families' backgrounds. Open-ended semistandardized questions are asked in five categories: self-definition, self-description, self-evaluation, introjection of group, diversity, and demographics (see Appendix B for interview schedule). Variables include individual-level, social-context in the area of diversity, and demographic measures.

Self-definition, self-evaluation, and group introjection are the dependent variables. Self-definition concerns defining oneself in terms of his or her group membership. Self-evaluation assesses how a respondent described and evaluated oneself. Finally, group introjection analyzes the internalization of a respondent's group as part of the self. These levels of self-identification permit the researcher to assess a respondent's self-concept, self-esteem, and group membership.

Independent variables include measures pertaining to diversity in various social contexts, such as home, school, and social life. Diversity issues include percentage of deaf and hard-of-hearing students in class, discussion of hearing and Deaf cultures, discrimination, discussion of hearing and deaf habits, teasing by the hearing, and cochlear implantation. They allow the assessment of the patterns of experiences with family, school, and friends on self-concept, self-esteem, and intergroup relations.

- Demographic characteristics, which are also independent measures, provide background information about the respondents and their families. Information on family's hearing, signing ability, education background and occupation allows the researcher to assess the association between family background and the respondents' self-identification.

### Operationalization of Variables

#### Dependent Variables

First, self-definition is assessed by asking the respondents what they call themselves. Kinket and Verkuyten (1997) used Phinney's (1992) assessment method: "In terms of ethnic group, I consider myself to be..." which is an open-ended question. The researcher modified it to "what do you call yourself?" To avoid influencing the respondents, examples were given, such as "American," "Deaf woman," "White person." Then the researcher probed further to learn why the respondent defined himself or herself that way. Studies (Carty, 1989; Kannapell, 1989; Stone & Stirling, 1989) have shown that individuals who view their deafness positively choose a label that does not correspond to the parents' identity. Respondents whose self-definition is big "D" Deaf

have high Deaf self-definition. Those who self-define themselves as small “d” deaf have medium Deaf self-definition. Examples of medium self-definition include “deaf...never thought of which ‘d’ or ‘D’,” “half-hearing and half-deaf,” and “deaf.” Respondents with self-definitions that make no mention about their deafness have low Deaf self-definition. Therefore, in this study, the researcher reasons that when individuals view themselves positively as deaf and hard-of-hearing persons; they are likely to assert that they are Deaf.

Second, self-evaluation is assessed by first asking respondents to describe themselves in terms of their roles and then asking them to evaluate themselves in their various roles. The self-description assessment was borrowed from Kinket and Verkuyten’s study (1997). They use the TST, which typically asks respondents to give 10 self-descriptions in response to the question, “Who am I?” The TST has been employed successfully with respondents from various ethnic and cultural backgrounds (Hurstfield, 1978; Rotenberg & Cranwell, 1989; Verkuyten, 1990). In this study, the researcher modified the self-description question to an open form in which the respondents give ten descriptions of themselves in whatever terms they like. For example, a respondent may describe him or herself as “student, pilot, Deaf advocate,....” Then the researcher asked a follow-up question that asks the respondents to choose one self-description that is important to them and explain why. This indicates the salience of identity in relation to other self-descriptive categories and attributes. According to several studies, members of minority groups are more likely than members of the majority group to refer to their ethnicity when asked to describe themselves (Hutnik, 1991; McGuire et al., 1978; Verkuyten, 1990). Respondents who do not mention their deafness in their self-descriptions are said to have neutral self-description. Conversely,

respondents referring to their deafness in their self-descriptions are expected to have positive self-description. Thus, the researcher reasons that persons defining themselves as Deaf are more likely than others to refer to their deafness when asked to describe themselves.

Self-evaluation is a semi-open form in which the respondents evaluate their 10 self-descriptions. Kinket and Verkuyten (1997) used Luhtanen and Crocker's (1992) private subscale of the Collective Self-Esteem Scale. The researcher modified it to three evaluative statements for each self-definition: "I am satisfied to be...", "I am sorry to be...", and "I feel good being..." Then the researcher probed the respondents further on their self-evaluations to learn of their perspectives of the self. Several studies have demonstrated that people who perceive themselves and their role performance positively are said to have positive self-esteem (Hoelter, 1983; Stryker & Serpe, 1982; Thoits, 1991). In this study, respondents self-evaluating positively have positive self-evaluation, and those evaluating themselves negatively have negative self-evaluation. Respondents whose self-evaluation is either positive or negative have neutral self-evaluation. An example of neutral self-evaluation is respondents' expression of satisfaction with their 10 self-descriptions that make no reference to their deafness. Therefore, the researcher reasons that those who perceive themselves positively as deaf and hard-of-hearing persons are likely to evaluate themselves more positively.

Third, group introjection is assessed by asking respondents questions about positive and negative stereotypes of their group. Kinket and Verkuyten (1997), for example, used Rosenberg's (1979) question, "If someone said something bad about [Turkish/Dutch] people, would you feel almost as if they had something bad about you?"

The researcher splits the question into two questions: (1) "Suppose someone said positive things about \_\_\_\_\_ people, would you feel almost as if they said something positive about you?" and (2) "Suppose someone said negative things about \_\_\_\_\_ people, would you feel almost as if they said something negative about you?" Then, the researcher asked the respondents to elaborate on their responses. According to social identity theory, being a member of a minority group poses a threat to one's self-concept; that threat can be counteracted by accentuating positive distinctiveness (Tajfel & Turner, 1986). Minority-group members are thought to evaluate their group membership more positively in situations where group boundaries are perceived as impermeable and intergroup status as relatively stable (Ellemers, 1991). In addition to reaction to negative stereotypes, it is also related to characteristics of the ethnic minority groups themselves (Kinket & Verkuyten, 1997). Most ethnic minority groups are endowed with their own rich culture, tradition, and structure, which provide members with a sense of dignity. Respondents expressing strong feelings about their group membership have strong group introjection. Respondents expressing wavering feelings about their group membership have weak group introjection. Those with some emotional attachment to their group have medium group introjection. Thus, the researcher reasoned that individuals who view and pride themselves as culturally Deaf express a more positive group introjection. Respondents, for example, who have positive group introjection tend to exaggerate by providing more information about their group in response to positive and negative stereotypes.

### Independent Variables

A number of social context measures assess the respondents' experiences in school, and with family and friends to obtain perceptions of their interactive experiences with family and friends, and in their school. Kinket and Verkuyten (1997) used six questions measured on a 5-point scale ("never" to "frequently") concerning perceptions of multicultural education and practices, and the perceived extent to which classmates talk about the culture of Turkish and Dutch people. The researcher modified the questions appropriate to the social experiences of deaf and hard-of-hearing respondents. Questions concern: (a) percentage of deaf and hard-of-hearing students in class; (b) talking about hearing and Deaf cultures in classroom; (c) talking about discrimination in school, with family, and with friends; (d) talking about hearing and deaf people's habits in school, with family, and with friends; (e) teasing by or seeing their deaf and hard-of-hearing friends being teased by hearing children; and (f) cochlear implantation in children and adults as perceived by the respondents, their family, and their friends.

Deaf and hard-of-hearing children through socialization may consider themselves as part of either the hearing world or the Deaf world; however, it is often argued that those born deaf, by birthright, need native sign language and exposure to deaf adult role models (Lane et al., 1996; Lane & Bahan, 1998; Nover, 1995). Thus, when those deaf and hard-of-hearing children are in a school, the school should be practicing multicultural education. Multicultural education typically tries to foster understanding and appreciation of ethnic diversity, to promote positive interethnic interactions, and to combat racism and discrimination (Kinket & Verkuyten, 1997). In practice, however, many school programs pay no attention to ASL and Deaf culture or treat them marginally



as many programs work implicitly from a monolingual and monocultural American perspective (Erting, 1985a, 1985b; Lane, 1999; Lane et al., 1996; LaRue, 1995; Nover, 1995). Subsequently, these deaf and hard-of-hearing children are typically viewed as disabled children within the mainstream American culture. The researcher, therefore, reasons that repressed diversity is likely in the social context of respondents attending programs serviced by the Utah Schools for the Deaf and the Blind. Those respondents are expected not to have high Deaf self-definition, positive self-evaluation and strong group introjection.

Studies have shown that hearing and deaf families teach their deaf and hard-of-hearing children differently (Lane et al., 1996; Preston, 1996). Deaf and hard-of-hearing children who are in hearing families typically learn the ways of the hearing world through implicit and explicit teachings from family members. Hearing parents do not fully understand the plight of their deaf and hard-of-hearing children concerning oppression, discrimination, and teasing by the hearing (Koester & Meadow-Orlans, 1990). These hearing parents also are not familiar with the ways of deaf people, which differ from the ways of hearing people. For example, to get attention, a person needs to either tap on the deaf person's shoulder, wave in the deaf person's peripheral vision, or flick the lights (Smith, Lentz, & Mikos, 1988). Conversely, deaf children in deaf families learn the ways of the Deaf world through socialization, and if they have hearing family members within the deaf family, they also learn the ways of the hearing world through discussion with hearing family members. Deaf parents share the same life experiences as their deaf and hard-of-hearing offsprings, and empathize with them. In that respect, the researcher reasoned mutual diversity in the social context of respondents with deaf families. These

respondents are expected to have high Deaf self-definition, positive self-evaluation, and strong group introjection.

### Demographic Characteristics

Demographics are assessed by asking the respondents about themselves and their family. Questions about respondents include their educational background and occupation. Questions concerning their family consist of their family's hearing status, sign language skills, education background, occupation, race/ethnicity, and socio-economic status. With this knowledge, the researcher can begin to understand the relationship between family and education backgrounds on the personal and social identities of deaf and hard-of-hearing individuals.

### Data Analysis

The researcher established a filing system of transcribed interviews to maintain and index coded data and sort data into coded classifications (Lofland & Lofland, 1984). In doing so, the three steps are performed: (1) open coding, (2) coding frames, and finally (3) pattern interpretation (Berg, 1995). For example, during open coding, the researcher wrote notes about the respondents' education backgrounds and their parents' hearing status. During coding frames, the researcher classified together all respondents who mention "deaf" in their self-definition. The researcher paid no attention to whether or not their "deaf" self-definition made reference to small "d" or big "D." The researcher then coded responses to dependent variables whether or not the respondents' self-definition is high, self-evaluation is positive, and group introjection is strong. For example, high self-

definition is “Deaf”; positive self-evaluation is satisfaction and happiness with Deaf self-descriptions; and strong group introjection is profound feelings in response to positive and negative stereotypes about in-group. Next, the researcher split the “deaf” self-definition into two categories: those with small “d” and others with big “D” based on the coding of their levels of Deaf self-identification. Then during pattern interpretation, the researcher assessed patterns within the independent variables in the area of diversity. Finally, the researcher looked at the respondents’ demographic characteristics to analyze the relationship between family and education backgrounds, and the respondents’ self-identification.

During open coding, Berg (1995) explained that early conclusions may appear contradictory during the coding of interview transcriptions. Strauss (1987) suggested four basic guidelines: (a) ask the data a specific consistent set of questions, (b) analyze the data initially, (c) frequently interrupt the coding to write a theoretical note, and (d) never assume the analytic relevance of any traditional variable, such as age, sex, and social class until the data show it to be relevant.

In following the first guideline, the researcher used questions relevant to the objectives of her study. These questions include: (a) what are the patterns of these respondents’ personal and social identities? (b) what are the patterns in their school and family experiences? and (c) what are their family and education backgrounds? For example, patterns in personal and social identities may be “deaf” for those attending public school and from hearing family backgrounds. Patterns in their school experiences may concern heavy emphasis on English instruction and oppression, and patterns in their home experiences may involve incidents of disaccord.

In analyzing the data initially, the researcher conducted initial coding procedure with repetitious codes indicating patterns. Berg (1995) explained that it is like the traditional funnel used by many educators to demonstrate how to write papers. So the researcher began with the inclusion of many categories, incidents, and interactions. Examples of categories included Deaf, deaf, American, and White. Instances of incidents consisted of oppression, discrimination, and cultural conflict. Examples of interactions included, but were not limited to, family interactions, interactions with classmates and teachers, and interactions with friends.

While analyzing data initially, the researcher interrupted the coding to write theoretical notes. This directs the researcher closer to grounded theory because often in the coding process, a comment in the transcription triggers ideas (Berg, 1995). The researcher has to keep a record of where in each transcription similar comments that seem to convey the same elements are located. For example, respondents in residential schools and in self-contained classrooms make the very same comments concerning the teachers' attitude about amplification use, speech, and ASL. They have theoretical grounding as they concern social context and group introjection. If some of these respondents experienced a strong commitment to their Deaf culture membership, then group introjection as a level of self-identification is shown to be less dependent on social context, although these respondents report to have experienced anti-Deaf culture sentiment in school.

In doing the next step, the researcher avoided looking at the respondents' parents' education background and social class as possible determining factors to the respondents' self-identification. Strauss explained that these more mundane variables must "earn their

way into the grounded theory” (1987, p. 32). The researcher reminded herself throughout her open-coding process to check to see if parents’ education background and social class were pertinent to the study objectives. For example, the researcher began to note a pattern among those respondents, whose parents are high school graduates and blue collar employees; they tend to identify themselves as “deaf.” Then the researcher can include their parents’ educational background and social class as possible relationship to the respondents’ self-identification.

After the process of open coding, coding frames are used to do a content analysis through organization of data and identification of findings. The first coding frame is often a multileveled process requiring several successive sortings of all cases under examination (Berg, 1995). The researcher begins with a general sorting of cases into some specified special class. Special classes are those labels used by members of certain communities to distinguish among the things, persons, and events within their limited group (Schatzman & Strauss, 1973). For example, the researcher initially sorted her respondents based on their family and education backgrounds. Then the researcher sorted the respondents further by general identities, such as “Deaf,” “deaf,” “American,” and “White.” Next the researcher further sorted the respondents by specific identities. For example, the “Deaf” identity is then sorted into “Deaf White,” “Deaf American,” and “Deaf.” After completing this sorting, the researcher carefully read the responses to the semistandardized questions asked in the course of each respondent’s interview.

Having sorted and organized her data, the researcher was ready to interpret the patterns apparent from both the organizational scheme and the details offered in response to interview questions. At this point of analysis, relevant theoretical perspectives are

introduced to tie the analysis both to established theory and to the researcher's emerging grounded theory (Glaser & Strauss, 1967). These theoretical considerations and sociological constructs lead the researcher to analyze several other detailed responses to interview questions, such as detailed knowledge of hearing versus deaf habits, hearing culture and Deaf culture. To preserve the linkage throughout the entire analysis process, each subsequent analysis of responses was performed against the newly created typological scheme of subjective identification labels (e.g., "Deaf all my life," "Deaf convert," "uncertain if Deaf or deaf").

#### Limitations of the Data

Unfortunately, this study has limitations that need to be taken into consideration. Limitations concern: (a) the sampling procedure, (b) the sample size, (c) the interviewer effect, (d) the use of videotape in the interview, (e) the respondents' recall of events, and (f) the generalizability of the data.

A major limitation is that the sample is not randomly drawn; thus, those interviewed are not necessarily representative of the deaf and hard-of-hearing population in Utah. Whenever a study is based on a group of people selected in any other way than the strict random sample, there is always the question as to how representative that selection is (Luker, 1997). However, time and financial constraints preclude overcoming this limitation.

A second major limitation is the size of the sample. Instead of the initial plan to sample 40 respondents, 35 respondents are sampled. Due to time constraints, the researcher was able to interview only 35 respondents. Also, due to the statistical fact that

90% of deaf and hard-of-hearing children are born into a hearing family, the researcher was forced to decrease the sample size from 40 to 35 to achieve data heterogeneity. The task of finding more respondents with deaf parents is difficult. So, if the researcher used 40 as the sample size, the sample would appear more homogeneous with only 8 respondents having deaf parents. Further, some of the respondents' self-definitions are unique, making pattern analysis difficult. For example, only one respondent self-defined as "half-hearing and half-deaf," and only two respondents referred themselves as "Deaf converts." However, the researcher feels that these data can serve as a starting point for future study.

A third limitation concerns the interviewer effect. Because the interviewer is deaf herself, there is always a possibility that the interviewer effect on respondents may have biased their answers to the open-ended semistandardized questions. Also, some of the respondents are acquainted with the interviewer. It is possible that the interviewer's deafness and/or her previous relationship with some respondents may have influenced answers to the questions and prevented interviewees from being totally candid. To reduce bias, the interviewer made attempts to probe to elicit further responses. However, there are also some advantages to having a deaf interviewer. Such advantages include the interviewer's ability to communicate with the respondents in their language and the interviewer's extensive background knowledge about deafness.

A fourth limitation is the use of videotape to do one-on-one semistandardized interviews. It is possible that some respondents feel uncomfortable being videotaped, and this influences their interview responses. It is also possible that some put up a good show expressing only socially acceptable responses for the videocamera. To resolve possible

problems with the use of videotape during the interview, the researcher treated the videocamera as another form of recorder. The researcher discussed with the respondents the purpose of using videotape, which includes the ability to record conversations in sign language.

A fourth limitation concerns the respondents' recall of events. The respondents are recalling from the past, so their memories are influenced by time. Family and education experiences influence their respondents, but also, adolescent culture influences their experiences. However, the researcher used the approach of cross-check in her line of questioning to probe responses further if they appeared contradictory to previous responses.

A fifth limitation is the generalizability of the data. The deaf and hard-of-hearing respondents are primarily raised in Utah and educated in the programs offered by Utah Schools for the Deaf and the Blind, suggesting questions about whether or not these findings apply in any other settings. Luker (1997) faced the same problem in her study of pro-life activists in California. She combatted this limitation by cross-checking the data with historical accounts of state abortion reform movements and found that they are similar to the one in California. In a similar fashion, this researcher conducted an extensive review of the literature concerning family interactions with deaf and hard-of-hearing children, and deaf educational practices in other states. The researcher found that they are similar.

Despite these limitations, the study serves the purpose of grasping the personal and social phenomenon of Deaf self-identification, understanding the relationship between family and educational backgrounds, and personal and social identities of the



deaf and hard-of-hearing persons. Further, the study provides groundwork for future studies that can be generalizable. Therefore, in the judgment of the researcher, it will be extremely desirable to conduct another study able to overcome these inadequacies in methodology.

### Predictions

Deaf and hard-of-hearing respondents of various family and education backgrounds were interviewed to learn of the association between such backgrounds and their Deaf self-identification. Dependent variables, self-definition, self-evaluation, and group introjection, measure the respondents' self-identification. The association of social context variables with levels of self-identification is examined.

Regarding self-definition, the researcher reasoned that respondents whose families communicate, interact, and accept them experience high Deaf self-definition. Conversely, respondents who have poor relations with their families are predicted to have low Deaf self-definition. Those with "Deaf friendly" school experience will be likely to have high Deaf self-definition. On the other hand, respondents attending schools that do not provide deaf and hard-of-hearing students with the environment that is "Deaf friendly" are more likely to have low Deaf self-definition.

Regarding self-evaluation, respondents with families that accept their deafness are more likely to have positive self-evaluation. On the other hand, respondents whose hearing families do not fully accept their deafness are more likely to have negative self-evaluation. Respondents attending schools that recognize and celebrate their deafness are more likely to express positive self-evaluation. Conversely, respondents from schools

with unsupportive attitudes of deafness are more likely to express negative self-evaluation.

Regarding group introjection, respondents whose families and schools encourage and support their Deaf identity development are more likely to have strong group introjection. Conversely, respondents with families and schools that disregard the development of Deaf identity experience weak group introjection. Those whose group introjection is strong are likely to be less context dependent. Thus, the researcher reasoned that it does not matter if social contexts were not “Deaf friendly,” the respondents would still have strong group introjection. On the other hand, those with weak group introjection are highly dependent on context. Thus, their level of group introjection is highly associated with their experiences in various social contexts.

## CHAPTER IV

### ANALYSIS OF DATA

#### Introduction

Kinket and Verkuyten's (1997) levels of ethnic self-identification and social context approach are used to analyze the responses. Demographic variables are also included as background information to illuminate the effects of family and education backgrounds on the respondents' personal and social identities. Excerpts from the videotaped one-on-one semistructured interviews are used to illustrate the respondents' levels of self-identification and experiences in diversity. Pseudonyms are used when discussing respondents' accounts, and names of their teachers, classmates, and schools (except nationally known schools, such as Gallaudet University, National Technical Institute for the Deaf, and Model Secondary School for the Deaf) are not disclosed for confidentiality purposes.

The chapter is subdivided according to analyses performed. Descriptive information on variables used in the analyses is reported. Demographic characteristics are incorporated into the appropriate sections of this chapter. Regarding dependent variables, "self-definition" refers to how respondents define themselves in terms of their group membership. "Self-evaluation" assesses how the respondents describe and evaluate themselves. "Group introjection" analyzes the internalization of the respondents' group as part of the self. Independent variables concerning social context in the area of diversity examine various social contexts, such as home, school, and social life. Social contexts include percentage of deaf and hard-of-hearing students in class,

discussion of hearing and Deaf cultures, discrimination, discussion of hearing and deaf habits, teasing by the hearing, and cochlear implantation. They allow the assessment of patterns of experiences with family, school and friends on self-definition, self-evaluation and group introjection. Demographic characteristics provide the researcher background information about the respondents and their families. Information on family's hearing and signing ability, and respondents' education allow the researcher to assess the effects of family and education backgrounds on the respondents' self-identification.

### Dependent Variables

#### Self-Definition

In this study, respondents offer a variety of descriptors in the way of self-definitions. Surprisingly, 11 out of 35 respondents make no mention of their status as persons with hearing loss in their self-definition. Three respondents define themselves as Whites, and eight respondents view themselves as Americans. Interestingly, only one respondent defines himself as half-hearing and half-deaf. Six respondents conceptualize themselves as small "d" deaf. Three respondents define themselves as deaf and admit that they never have thought of distinguishing between the small "d" and the big "D." A small "d" deaf implies a lack of strong identification with Deaf group membership. A big "D" Deaf indicates Deaf culture membership. Fourteen respondents view themselves as big "D" Deaf but in various terms. Two of them explain that they change from small "d" to big "D" in adulthood; thus, for the purpose of analysis, they are classed as Deaf converts. Three respondents define themselves as Deaf Whites, and four respondents

conceptualize themselves as Deaf Americans. Only five respondents view themselves as Deaf.

Self-definition assesses the respondents' self-conceptualization as deaf and hard-of-hearing individuals. This level is psychologically superficial. Since "ethnicity" has been adapted for this study to mean Deaf identity, the data analysis assesses the respondents' level of self-identification using the concept of Deaf identity much as other researchers use "ethnicity." With this adaptation, the researcher has found three levels of Deaf identity: low, neutral, and high.

Low. These respondents make no reference to their deafness in their self-definition. They discuss how alike they were with other people, even though deaf. Below are some responses to illuminate their low level of Deaf identity.

Tawnya: Just a normal white woman.

Interviewer: Okay, why a normal white woman?

Tawnya: Why?...I'm nothing different from everyone else.

Interviewer: Even if you are deaf, you still feel....

Tawnya: The same as others physically and mentally, except for my hearing. That's all.

Although recognizing that they are deaf, these respondents, in viewing themselves, feel that they are primarily like everyone else.

Jerry: American cuz I feel we are equal to each other, like, even though I'm deaf, I'm still part of America.

These respondents, although recognizing deafness as an integral part of the self, report that they are equal to others.

Neutral. Respondents, who identify themselves as half-hearing and half-deaf, small “d” deaf, Deaf...never thought of which “d” or “D,” and Deaf converts, have a neutral level self-definition as Deaf. The respondents in these classes mention their deafness but do not express a strong level of Deaf identity in their self-definition.

Jackie: Probably small “d” deaf because I’m hard-of-hearing and I feel big “D” Deaf is for people who all their lives have been deaf. But all my life, I grew up with a Deaf father and a deaf twin sister and a hard-of-hearing brother. So I feel like I’m a small “d.” I feel proud to be involved and supported by my family. They accept who I am no matter if I’m hard-of-hearing, hearing or deaf. But I feel involved in the Deaf community and hearing community both. So I feel big “D” is for those who are exclusively involved in the Deaf community.

The respondents say they are marginal, between two worlds, the hearing and the Deaf.

Betty: Umm, I’m in the middle between Deaf and deaf.

Interviewer: Why?

Betty: Because my family is hearing and my friends are deaf. Also I attended a public school, and I was the only one deaf there.

Based on the respondents’ self-definitions, family and education backgrounds are associated with their neutral level of Deaf identity.

High. Respondents identifying themselves as Deaf White, Deaf American, and Deaf have high levels of Deaf identification. All respondents mention Deafness in their self-definition. Respondents with a high level of Deaf identity in their self-definition experience strong psychological attachment to Deaf culture. From a hearing, signing family background, Karen explains how she obtains a high level of Deaf identity.

Karen: Deaf American in the United States with a big “D.” I sign, I’m deaf, I have a Deaf identity. I grow up having different experiences with Deaf culture.

Their families communicate with them in sign language and allow them constant exposure to Deaf culture since childhood.

Marcia: A big “D.” I’m very Deaf!

Interviewer: OK, why do you call yourself a well-liked Deaf person?

Marcia: I have a very strong Deaf heritage in my family. I like to be with Deaf people. I hardly have enemies as I like to be with friends. That’s me.

With her grounding in family history, Marcia reports that she enjoys a positive self-perception as a popular Deaf person. Feeling a strong pride as Deaf people in the hearing world, these respondents also exaggerate their Deaf group membership.

### Self-Evaluation

Self-evaluation, a higher level of identification than self-definition, requires the respondents to provide 10 self-descriptions and evaluate their self-descriptions. The evaluation of their 10 self-descriptions concerns their role-set satisfaction and happiness. Self-evaluation allows the researcher to learn of their self-esteem as deaf and hard-of-hearing persons. Then the respondents are asked to choose a self-description that is the most important. Identity theory discusses role salience to personal and social identities. By choosing a role-set from the ten self-descriptions, the respondents are self-evaluating which role-set is salient to their identity. By knowing which self-description is the most important, the researcher then can assess their role salience to their self-identification.

Categories have been created to analyze the respondents' levels of self-evaluation. Three categories, negative, neutral and positive, reflect the respondents' self-evaluations as deaf and hard-of-hearing persons. Family and education backgrounds are incorporated in the analysis to illuminate the effects of such backgrounds on their ethnic self-evaluations.

Negative. Respondents in the half-hearing and half-deaf, small "d" deaf, Deaf...never thought of which "d" or "D," and Deaf converts make some references to their deafness in their self-descriptions, and they evaluate themselves negatively. Based on their accounts, the respondents experience struggles around inclusion in two worlds and frustrations with communication. This can be difficult for their self-esteem as deaf and hard-of-hearing persons.

For example, Terri, who was initially educated orally but eventually transferred to the total communications program, chooses a self-description, "operation to be hearing," as most important. She is married to a hearing husband, and he and his parents push for cochlear implantation to make her "hearing."

Terri: Because I had a problem with my hearing husband wanting me to become hearing by an operation. I was not comfortable not knowing how and what to do. It was hard for me and my husband kept on telling me to try and keep trying. But I felt stupid having the cochlear implant operation and being in the middle of "deaf" and normal deaf. I don't want it.

Interviewer: Why was it hard for you?

Terri: I like to be just deaf. I don't like to become "hearing" communicating like hearing people. It's embarrassing. I don't want that.



Terri reports that she is comfortable with her deafness, but oppression precipitates constant hardships as a deaf person in the hearing world. However, eventually, she has the internal parts of the cochlear implant removed with the help of her hearing brother.

Betty is a cochlear implant user, and she expresses loneliness in her public high school. Living in a rural town with her hearing family and being the only deaf person in her school, she reports experiencing daily struggle.

Interviewer: Satisfied being a student?

Betty: Really, I didn't like school, but that's life....

Interviewer: Why didn't you like school?

Betty: Because...sometimes I felt left out kind of. I felt having to go through all the motions because I was the only deaf in a hearing school. I had superficial friends and I had no one to really hang out with. I wanted more than that, but....

Typically, these respondents experience low self-esteem. Being in both worlds and the effort to communicate like hearing people create a daily conflict for them, thus promoting negative self-esteem as deaf and hard-of-hearing persons.

Heather is also a cochlear-implant user since she is four years old, and in her interview, she expresses self-confidence anxieties as a child.

Interviewer: Satisfied being confident in yourself?

Heather: Yes. At first, when growing up, I had ups and downs on confidence. Sometimes I felt intimidated and negative. Then I started telling myself I need to start again and work on believing in myself. Then I got to get involved in more things and things got a little better but I wasn't fully confident in myself. Now I'm more confident in myself and it's on rise.

Interviewer: Why did your self-confidence have its ups and downs when growing up?

Heather: Sometimes people were rude to me, intimidating me and making fun of me. I felt like I was worthless, and whenever I tried to do things, I just wasn't successful, so I felt low. Sometimes they didn't include me or try to help me. They looked at me and judged me.

Interviewer: Who were those people that did those things to you?

Heather: Well, I was educated in a mainstreaming setting, and some of the boys were really mean to me and made fun of me. They threw rocks at me several times....

In her response, Heather experiences difficulties being in both worlds, trying to fit in with others. Respondents with negative self-evaluation report to experience hardships as deaf and hard-of-hearing persons, thus, become salient to their identity.

Neutral. Among respondents who make almost no reference to their deafness as salient to their identity, their self-esteem is neutral. Tawnya in her interview has several self-descriptions that are people oriented and chooses "enjoy personal interactions" as most important to her.

Tawnya: Like I said before, it's that I enjoy learning their culture, I enjoy...even athletics do include socializing. Like I went to California for the basketball tournament, and I did get to socialize with people. That's most enjoyable and the learning and the language and everything.

Although the basketball tournament in California is a deaf regional basketball tournament hosted by the Northwest Athletic Association of the Deaf, Tawnya makes no mention of it as a deaf tournament. This manifests the respondents' lack of Deaf identity saliency. In addition to role-identities as self-conceptions and self-definitions, role-identities are self-referent cognitions that people apply to themselves as a consequence of the positions they occupy in the social structure. For example, Jerry's role salience is his church membership.

Jerry: Mormon cuz it helps me know who I am, help others, helps me find what I need.

In their self-descriptions, the deafness of these respondents emerges as not salient to their role-sets. In addition, these respondents' self-descriptions reflect neutral self-evaluation.

Positive. Respondents in the big "D" Deaf groups make references to their deafness as salient to their role-sets. Their self-esteem is positive as deaf and hard-of-hearing persons.

For example, when Tim transfers from the oral program to the total communications program, he reports that he discovers his Deaf identity. In his discovery, he is committed to affirming his Deaf identity because he says he has the perception that he is a linguistic and cultural minority at home and school.

Interviewer: Which one is the most important to you?

Tim: Belonging/being part of the Deafie group.

Interviewer: Why?

Tim: I feel good as a Deaf person and it's to...I think being part of the Deafie group is important to me because of communication, more friends, knowing each other better, comparing our experiences, sharing. That's what I like.

Tim's profound in-group preference reflects strong self-enhancement. Tim has the basic need to see himself in a positive light in relation to hearing family members and people (i.e., to have an evaluatively positive self-concept), and he uses self-enhancement by making comparisons between the Deafie group and hearing people in ways that favor the Deafie group. Ken Glickman (1986) coined the term "Deafie" to mean "culturally Deaf

person.” That is one extreme in using Deaf identification, the use of the big “D” Deaf identity. The other pole is not using Deaf identification.

Respondents in this group have quite positive self-esteem. By feeling they are in the minority, they affirm their Deaf self-identification by including Deaf identity in their self-descriptions. However, because feeling they are not in the minority, those with Deaf family and residential school backgrounds make no reference to their Deaf identity in their self-descriptions.

Marisa:           Because my kids are my life. If it weren't for them, I can't imagine my life without them. Kids make me the way I am and I enjoy life with my kids.

Because of the perception that she is not in the minority, Marisa, thus, chooses being a mother as the most important self-description. In addition, the respondents are content with themselves and enjoy various life roles as Deaf persons. They also report a high level of confidence in themselves as Deaf persons.

### Group Introjection

Group introjection, a higher level of identification than self-evaluation and self-definition, is less psychologically superficial than self-definition because of the high level of commitment, emotional involvement, and feeling of belonging. Through asking questions about others stereotyping in-group people, the researcher can assess the respondents' group introjection. The respondents may or may not feel personally affected by stereotypical comments. Stereotypes can be positive and negative. Those feeling personally affected by both positive and negative stereotypical comments are said to have positive group introjection of their group and to be less context dependent. Three

categories, weak, medium, and strong, are created to analyze the levels of group introjection.

Weak. Respondents in half-hearing and half-deaf, small “d” deaf, Deaf...never thought of which “d’ or “D,” and Deaf convert special classes express weak group introjection. Typically, people who perceive they are between two groups tend to experience weak level of commitment, emotional involvement and feeling of belonging. For example, Jackie, who is hard-of-hearing, perceives that others do not view her as deaf. Her family is a mixture of deaf, hard-of-hearing, and hearing members, and thus, she feels she is personally connected to deaf people. Yet, because others view her as “hearing,” she struggles with her group membership status.

Jackie: I don’t know. Because many people look at me differently. Hearing people and deaf people look at me very differently. Hearing people look at me as someone who can talk, hear on the phone and stuff like that. They say I’m hearing. They are looking at my abilities not at me. They refuse to accept that I’m hard-of-hearing and that I don’t hear very well.... But the deaf look at me as a person being able to use the phone, to talk, and they say I’m hearing. So it’s either “you are hearing or deaf.” It’s not anything in the middle. I’m really in the middle, in the middle ground, and it’s not easy.

Interviewer: Why isn’t it easy?

Jackie: Because it’s hard...you see, I accept who I am, but these two groups: the hearing and the deaf have hard time accepting who I am.

Jackie’s responses are not atypical of Children with Deaf Adults (CODA) responses. CODAs are known to experience marginalized identity because of their strong deaf family background and their hearing ability (Preston, 1996). They feel they know the

Deaf community, and yet, feel they are not part of the Deaf community. Consequently, they struggle with identity throughout their lives.

Because they report that others do not perceive that they are truly deaf, their group introjection is highly dependent on context. Although Nancy, raised orally, fully converted to the ways of Deaf people by refusing to use her speech to communicate with her hearing family and people, she continues to face identity struggles.

Interviewer: Since you're now culturally Deaf...suppose someone said positive things about Deaf people, would you feel almost as if they were talking about you?

Nancy: No. Hearing people tend to talk to me as if I'm hearing, and I politely inform them I can't hear. I don't use the word "deaf" because that scares many hearing people. Instead I use "can't hear." Some hearing people would use pen and paper and some simply left. Utah is really worse and I get frustrated while California people are pretty open-minded and interested and willing to use pen and paper.

Interviewer: Suppose someone said negative things about Deaf people, would you feel almost as if they were talking about you?

Nancy: No. Because they simply don't understand. So why bother?

Because the respondents are raised as "hearing" in a family setting and/or educational setting, they self-identify as not deaf. As adults, they begin to immerse themselves in Deaf culture, but they continue to have the self-perception that they are "hearing" based on how others treat them. Thus, their group introjection is highly context dependent.

Medium. Respondents who do not mention Deaf identity have medium group introjection. If the comments made about their groups were positive, they generally felt the remarks concerned them. However, if the comments were negative, they generally felt their reactions would depend on situations.

Moe's parents are hearing, and he had been signing since childhood. His education takes place in various states before he completes high school at a public school in Utah. His father is in the military. His responses reflect his moderate group introjection, but also show his limited expression in English.

Moe: Yeah. I feel good and positive they are talking about me and their ideas and plans.

Interviewer: What ideas and plans?

Moe: Good citizenship, community. I have many good ideas and I suggest them to people only to be disagreed. Oh well.

Interviewer: Suppose someone said negative things about Americans, would you feel almost as if they were talking about you also?

Moe: Awful. But I'd personally feel not connected unless it's spoken really bad. But generally I'd say it's not my problem. It's America's problem.

Merry, deafened at age 4 from spinal meningitis, is raised orally and gains exposure to ASL and Deaf culture as an adult. Her response to negative stereotypes is representative of the moderate group introjection.

Merry: Yes, it all depends on if it was something that I feel personally connected to, then I'd ask if I did something wrong. Is it something I can do to help influence people? If it's something I'm not connected to, I'd say "sour grapes."

Interviewer: Give me an example of "personally connected to."

Merry: Well, with the current trial of the president, that's something I don't feel connected to. I don't believe in sex outside of marriage, so if someone said that all Americans commit adultery, I'm like, "I don't!" It doesn't bother me because I don't get involved in those kinds of things.

Interviewer: Give me an example of you being involved in something that people say negatively about.

Merry: Voting. A lot of people are really lazy to vote. And I'm one of them. So if people said, "It's your fault that the leadership is lousy," I'm like, "Maybe you're right." Maybe my one vote could make a difference. So if it's something I know I should be doing, then I'd feel guilty telling myself I better change.

The respondents' responses illuminate their moderate group introjection. Their identification is context dependent.

Strong. Big "D" Deaf groups experience strong group introjection. The respondents generally experience in-group commitment, emotional attachment, and belonging. When positive things are spoken of their people, the respondents feel the comments reflect them and feel good about them. When negative things are said, they comment they will come to their defense but feel the comments do not concern them, indicating self-esteem and self-enhancement.

Ralph has an exclusive Deaf culture upbringing in the home and in the school.

His group introjection is strong and not context dependent.

Ralph: Yes. I am proud to be Deaf because that is where I come from. I have a strong Deaf culture background, and so if people talk positive things about Deaf American people, that makes me feel good because I know I'm part of them. I would talk to add more positive information about Deaf American people.

Deafened at age 2 from spinal meningitis, Victor finds his family begin signing with him and allow him to self-advocate his educational needs and goals throughout his years whether the school be in a mainstreamed setting or a residential setting. He also has a Model Secondary School for the Deaf (MSSD) experience, and thus, gains exposure



to Deaf culture from that location. MSSD is a campus adjacent to Gallaudet University, which is a liberal arts university for the deaf in Washington, DC.

Interviewer: Suppose someone said something negative about Deaf Americans, would you feel almost as if they were talking about you?

Victor: Yes. Suppose they say that Deaf person doesn't know about anything and I identify myself with that Deaf person, I'd tell them off as being ignorant. I'd show them that they are ignorant. If they're negative about a specific way, I'd have to see it for myself first before invalidating their comment as ignorant. I'd be straightforward and be involved to help Deaf Americans as I identify with them.

Respondents express a very positive group introjection. Regardless of the context, they feel identified with their group enough to elaborate on positive comments and come to their defense when the comments are negative.

From an all-deaf family background with residential school experience, Marcia demonstrates high confidence in herself as a Deaf person. Her self-confidence makes her more aggressive when others say negative things about Deaf people.

Marcia: No! I would say I'm not part of that group! Ha, just kidding. I would be concerned and change my actions or talk with that person to correct his/her view.

Interviewer: Why would you attempt to talk to that person?

Marcia: I'm aggressive. I always do that to anybody talking about anybody. If it's about somebody else that has no relation to me, I'd just listen and say nothing.

Marcia reports that people in her group are family, too, and thus feels responsible for them to come to their defense. Marcia's responses are representative of the respondents with strong group introjection. Thus, their group introjection is not context dependent.

## Findings and Discussion

This section provides summary information for dependent variables: self-definition, self-evaluation, and group introjection. Then, self-definition is compared with self-evaluation, followed by comparing self-evaluation against group introjection.

Table 2 shows family backgrounds for each level of Deaf self-definitions. Most respondents with low and neutral levels of Deaf self-definition are from hearing, oral family backgrounds. In the low and neutral level categories, hearing signer families use mostly home signs, fingerspelling, and/or MCE. Families do not consistently sign; the respondents consistently encourage them to sign. Some families do not sign very well; they get by with what they know to communicate with the respondents. Those from one-deaf-parent families use home signs and/or MCE to communicate. Two respondents in a one-deaf-parent family are twin sisters. In the high level category, one hearing-signer family uses sign language consistently in the home.

Table 2 indicates that there is an association between family backgrounds and the respondents' self-definitions. As opposed to 41.6% respondents in the high category, there is a relationship between 72.7% families in the low level and 58.3% families in the neutral level, that are not congenial to the respondents' deafness in providing a "Deaf" home environment, and the respondents' levels of Deaf self-definitions. For example, Lisa with low Deaf self-definition reports that her family always leaves her alone, so she plays by herself and with her friends while her family talks. When she asks what her family is talking about, her family invariably tells her to never mind. Respondents perceive they are either treated like hearing people or marginalized between two worlds. These self-perceptions then materialized in their self-definitions.

Table 2

Percentage Distribution for Relationship Between Family Background and Self-Definition

Deaf self-definition level	Family background				All
	Hearing (oral)	Hearing (signer)	One deaf <sup>a</sup>	Both deaf	
Low	72.7%	27.3%			100% ( <u>n</u> = 11)
Neutral	58.3%	16.6%	25%		100% ( <u>n</u> = 12)
High	33.3%	25%		41.6%	100% ( <u>n</u> = 12)

Note. N = 35

<sup>a</sup> "One deaf" is family with one deaf parent and one hearing parent.

Table 3 presents the percentage of relationship between education backgrounds and the respondents' self-definitions. For example, 81.8% respondents with low and 66.7% respondents with neutral levels of self-definition are educated in public school. It should be noted that six out of eight respondents in the low and neutral level categories with residential school backgrounds do not attend residential school either consistently or until high school. This may account for their low and neutral ethnic self-definitions. Conversely, 33.3% respondents with high Deaf self-definition from public school backgrounds have intensive exposure to Deaf culture in high school, likely heightening awareness of Deaf identity. Five out of eight respondents with residential school backgrounds also attend residential schools out of state, such as the Model Secondary

School for the Deaf (MSSD) and California School for the Deaf, Fremont (Fremont). In addition, 8 out of 12 respondents go to Gallaudet University, a liberal arts university for the deaf in Washington, DC. For example, Mario has reported that discussion about Deaf culture is intense at MSSD because Gallaudet University is right next to MSSD. He and his friends at MSSD talk about Gallaudet and its fraternity, Kappa Gamma. Mario also has said that the Deaf community and Deaf culture are within MSSD's reach. Because of the profound Deaf culture socialization in these institutions, respondents acquire high levels of Deaf self-definitions.

Table 3

Percentage Distribution for Relationship Between Education Background and Self-Definition

Self-definition level	Education background		
	Public	Residential	All
Low	81.8%	18.1%	100% ( <u>n</u> = 11)
Neutral	66.7%	33.3%	100% ( <u>n</u> = 12)
High	33.3%	66.7%	100% ( <u>n</u> = 12)

Note. N = 35

Table 4 reports family backgrounds of these respondents with negative, neutral and positive self-evaluations. Self-evaluation is a higher level psychologically, and there is a relationship between family backgrounds and self-evaluation. As opposed to 23 respondents in the neutral and positive categories, 12 respondents with negative self-evaluations report to experience more dissonance with their self as deaf and hard-of-hearing persons because of family interactions. For example, Lee has explained that when his parents learned of his deafness, they spent money on doctor visits, trying to “fix” his deafness, and enrolled him in an oral program at the residential school. When he learned to speak and use his residual hearing, his parents transferred him to a public school. Their families typically treat them like hearing people who happened to be deaf. As a result, respondents self-evaluate negatively. Twelve respondents in the positive category report to have a more harmonious interaction with their families, apparently because their families give them permission to be deaf. For example, Karen has explained that when her parents found out that she was deaf, they immediately began learning sign language. Then when her hearing sister was born, her parents signed to her sister consistently, even if not talking with Karen. Karen’s parents also encouraged her involvement in the Deaf community since childhood. Thus, there is an association between families and their level of self-evaluation.

The experiences of the respondents clearly demonstrate a strong relationship between parental attitudes about deafness and respondents’ self-evaluation. If parental attitudes are more positive about the respondents’ deafness, the respondents experience positive self-evaluation. If not, then the respondents self-evaluate negatively.

Table 4

Percentage Distribution for Relationship Between Family Background and Self-Evaluation

Self-evaluation level	Family background				All
	Hearing (oral)	Hearing (signer)	One deaf <sup>a</sup>	Both deaf	
Negative	58.3%	16.6%	25%		100% ( <u>n</u> = 12)
Neutral	72.7%	27.3%			100% ( <u>n</u> = 11)
Positive	33.3%	25%		41.6%	100% ( <u>n</u> = 12)

Note. N = 35

<sup>a</sup> "One deaf" is family with a deaf parent and a hearing parent.

In Table 5, education backgrounds are shown to illuminate the relationship between educational experiences and the respondents' self-evaluations. Twenty-three respondents in negative and neutral categories are more likely to come from public school backgrounds than from residential schools. Two thirds of the respondents with positive self-evaluations attend residential schools. In the interviews, 23 respondents report that public schools tend to give them the hearing experience in that they are perceived by others as hearing who happen to hear "a little bit" with "okay" speech. Conversely, the respondents with residential school backgrounds recall that Deaf identity is recognized. Therefore, there is a relationship between education backgrounds and the respondents' different levels of ethnic self-evaluations.

Table 5

Percentage Distribution for Relationship Between Education Background and Self-Evaluation

Self-evaluation level	Education background			All
	Public	Residential		
Negative	66.7%	33.3%		100% ( <u>n</u> = 12)
Neutral	81.8%	18.1%		100% ( <u>n</u> = 11)
Positive	33.3%	66.7%		100% ( <u>n</u> = 12)

Note. N = 35

Table 6 shows the association between the respondents' family backgrounds and their levels of group introjection. For instance, 58.3% respondents with weak and 72.7% respondents with medium levels of group introjection are from hearing oral families. They report that they receive little or no support from their families as deaf and hard-of-hearing persons in terms of identity. For example, Nancy, who immerses herself in Deaf culture as an adult, explains that it is easier for her to interact with deaf people because she feels her family does not accept her deafness. Also, she feels she does not have any close relationship with her family. Her family does not know any sign language, and there is no communication between her and her family. Thus, their group introjection is

context dependent. Deaf identity is learned through socialization. With few socialization opportunities in Deaf culture, the respondents may experience medium and weak group introjection levels. But with plenty of socialization opportunities and support from families, the respondents are likely to experience strong group introjection. Those 41.6% respondents from Deaf family and 25% from hearing signer family gain acceptance and support from their families. This shows an association between their family backgrounds and strong group introjection. Their group introjection is less context dependent. The respondents feel personally affected by both positive and negative stereotypical comments. They express strong sentiment about stereotypical comments and make efforts to add more information and/or come to their group's defense.

Table 6

Percentage Distribution for Relationship Between Family Background and Group Introjection

Group introjection level	Family background				All
	Hearing (oral)	Hearing (signer)	One deaf <sup>a</sup>	Both deaf	
Weak	58.3%	16.6%	25%		100% (n = 12)
Medium	72.7%	27.3%			100% (n = 11)
Strong	33.3%	25%		41.6%	100% (n = 12)

Note. N = 35

<sup>a</sup> "One Deaf" is family with a deaf parent and a hearing parent.



Table 7

Percentage Distribution for Relationship Between Education Background and Group Introjection

Group introjection level	Education		
	Public	Residential	All
Weak	66.7%	33.3%	100% ( <u>n</u> = 12)
Medium	81.8%	18.1%	100% ( <u>n</u> = 11)
Strong	33.3%	66.7%	100% ( <u>n</u> = 12)

Note. N = 35

Table 7 demonstrates the relationship between education backgrounds and the respondents' levels of group introjection. This table is identical to Table 5, indicating a strong relationship between education backgrounds and levels of Deaf self-identification. For example, 66.7% respondents with strong group introjection attend residential school. It must be noted that 8 out of 12 respondents with high group introjection also attend Gallaudet University after high school. Gallaudet University has been considered to be the educational Mecca of the Deaf world. Deaf people from all over the world go to Gallaudet University to receive their education. The environment is predominantly deaf with ASL as the language of communication and Deaf culture is heavily observed. In addition, 23 respondents with weak and medium levels of group introjection attend public

school and/or USDB residential school, indicating an association between these education backgrounds and the respondents' weak and medium levels of group introjection. The respondents report that Deaf culture exposure is either superficial or nonexistent. Many respondents begin learning Deaf culture and socializing with the Deaf community after high school.

In comparing self-definition with self-evaluation, it is found that although 12 respondents mentioned their deafness in their self-definition, they have negative self-evaluation. There is a relationship between their family and education backgrounds, and neutral Deaf self-definition and negative self-evaluation. It may imply that these respondents experienced some type of low self-esteem and identity dissonance as deaf and hard-of-hearing persons. They report they struggle with their identity. For example, Frank's parents want him to be able to speak and hear, so they suggest that he receives a cochlear implant. After his surgery, his family stops signing with him. In school, his teachers consistently remind him not to sign in class, although they allow him to sign in the hallway. The respondents recognize their deafness but report that they receive treatments from their families and schools that they are "hearing who happened to be deaf." Eleven respondents, who make no reference to their deafness when self-defining themselves, have neutral self-evaluation. It can be said that they perceive themselves as psychologically able to pass as hearing persons. Because of their predominantly hearing, oral family, and public-school backgrounds, they have low self-definition as Deaf and neutral self-evaluation. Thus, they report they experience mild dissonance with their self-identification. For instance, Mary does not feel that her family and school have problems accepting her deafness but do not encourage her involvement in the Deaf community.

Respondents with high level of self-definition and positive level of self-evaluation report they enjoy “Deaf friendly” family and education backgrounds. Regardless of some families being hearing and schools being public, the respondents say they have some type of intensive exposure to Deaf culture since childhood. They are able to feel good about themselves as deaf and hard-of-hearing persons because they feel that their families and schools allow them to be deaf. Eight out of 12 respondents also explain they are socialized into Deaf culture outside of Utah, at out-of-state residential schools and/or Gallaudet University. There is a relationship between their backgrounds, and their high Deaf self-definition and positive self-evaluation.

As self-evaluation is compared with group introjection, 12 respondents with negative self-evaluation also experience a weak level of group introjection. Thus, their self-identification is highly context dependent. There is a relationship between their experiences in the home and school and their marginalized identity. Marginalized people tend to assimilate the ways of the out-group, namely the hearing society, but are not accepted fully by either the out-group or the in-group. Eleven respondents with neutral self-evaluation also have a medium level of group introjection, indicating some context dependency. Although their self-evaluation is neutral and they are able to psychologically pass into the hearing society, their identity is dependent on the social contexts in home and school, indicating non-deaf identity. Non-Deaf people typically recognize their deafness but do not experience strong emotional attachment to their in-group. Twelve respondents with positive self-evaluation report strong group introjection. They feel they are not psychologically able to pass into the hearing society, and thus feel strong emotional attachment to the Deaf society, showing high level of attachment,

commitment, and belonging to their in-group, and thus, not context dependent. Regardless of the contexts in the home and school, the respondents continue to experience harmony with their Deaf identity. Thus, this group is shown to have strong Deaf identity.

### Independent Variables: Diversity

To analyze the effects of family and education backgrounds on respondents' self-identification, the researcher assessed the impact of various context variables in the area of diversity on the respondents' self-evaluation and group introjection. The respondents are now referred to as: (a) non-Deaf, (b) marginalized, and (c) Deaf based on their levels of self-identification. Context variables include: percentage of deaf and hard-of-hearing students in classroom, hearing culture, Deaf culture, discrimination, Deaf and hearing habits, teasing by the hearing, and cochlear implantation.

#### Percentage in Classroom

This "percentage of deaf and hard-of-hearing students in classroom" variable refers to deaf and hard-of-hearing students in each respondent's class in his or her elementary, junior high and high school. It is expected that those who are in the "minority status" in classes typically do not enjoy exposure to deaf adult role models, ASL and Deaf culture. This is related to the deaf and hard-of-hearing respondents' identity development.

Non-Deaf. Respondents who have low Deaf identification in their self-definitions, a neutral level of self-evaluation, and a medium level of group introjection

are said to be “non-Deaf.” The percentage of deaf and hard-of-hearing students may manifest the association of school background and their levels of self-identification. Most of the respondents with hearing family backgrounds are mainstreamed as children. The percentage of deaf and hard-of-hearing students in the same self-contained classroom in elementary school is 100%. A self-contained classroom is a deaf and hard-of-hearing classroom with a teacher for the deaf in a public school. In junior high school, the deaf and hard-of-hearing respondents have mostly inclusive education setting with the average of 1% to 5% deaf and hard-of-hearing students in the classroom, and when in the self-contained classroom, they are all deaf and hard-of-hearing students. In high school, the number remains the same, but the time in the inclusive setting increases.

The respondents report that the teachers for the deaf generally seem unsupportive. Despite support from parents, the respondents feel they are looked down by the teachers for the deaf.

Tawnya: Yes. In elementary school, I was mainstreamed for two classes only. In junior high, I was mainstreamed for more classes because my parents said in the IEP meeting that Tawnya isn't that stupid, she can do better than that in terms of grade level. Like when I was in ninth grade, they put me in eighth grade English, and I got an A, so you see. My parents really advocated for me. It's really funny because my class...my teacher was so afraid to teach us because she heard that our classmates' parents were so involved.

For the most part of their years, two respondents, Rob and Merry, are in an inclusive setting, as the only deaf and hard-of-hearing persons in their schools. They say they never have any interpreter services when fully mainstreamed. Rob is hard-of-

hearing, and his perception of others on how his hearing ability is perceived is associated with his view of the self.

Interviewer: Did you have an interpreter?

Rob: No. I have a very good hearing.

Interviewer: So you are hard-of-hearing.

Rob: Right. I am not deaf. I was not born with a hearing loss. I lost some of it when I got really sick.

Interviewer: How old were you when that happened?

Rob: I was 3 years old.

Like Rob, Merry lost her hearing at age 4. She is profoundly deaf and relies heavily on lipreading in her inclusive public classroom without an interpreter. Various experiences as shown here have relationship with their neutral self-evaluation, and group introjection is, thus, context dependent.

Marginalized. Respondents in this group experience neutral identification in their self-definitions, and demonstrate a negative level of self-evaluation and a weak level of group introjection. There is a relationship between their education backgrounds and their marginalized identity. A majority of the respondents are initially educated orally, only to transfer to the total communications program. Only two respondents are educated in residential schools all their lives. But they are also initially educated orally. The percentage of deaf and hard-of-hearing students in residential school classroom is 100%. Those in the mainstreamed programs typically are placed in all deaf and hard-of-hearing self-contained classrooms in elementary school. In junior high school, they continue to be educated in self-contained classrooms. In high school, however, they have some

inclusive settings with an average of 1% to 5% deaf and hard-of-hearing students in the same inclusive classrooms.

As twin sisters, Jackie and Suzy are the only respondents in this group with a total inclusive setting as the only deaf/hard-of-hearing student. Because of her hard-of-hearing status, Jackie is educated without interpreting services. They are never educated in the same classroom. In high school, another respondent, Betty, transfers to a neighborhood school and is the only deaf person in her public school.

Almost unanimously, the respondents experience some sort of struggle in school. They perceive that the teachers treat them as hearing people who cannot hear. For example, Terri's comments are typical of a child who is an oral failure in the public school and transfers to the total communications program in the residential school (Kluwin & Stinson, 1993).

Terri: When in oral program, I had a hard time understanding and communicating because I am deaf. Everything was very oral and I couldn't understand my teacher's lectures. The teachers kept moving around as they talked.... They asked me questions and I just couldn't answer them because I didn't understand any of it. I can't hear speech.

Interviewer: Was there an interpreter?

Terri: No interpreter at all. It was all oral and I didn't understand what they were talking about, so I played around not paying attention. Also, well, my teacher also beat up my head in school!

Interviewer: Exactly what did they do to your head?

Terri: To keep me paying attention to the class, they slapped my head to attention.... I became frustrated and decided to run away to home. I saw my mom and asked her questions about why they hit my head. I told her I don't understand them at all, so I don't want homework. I don't understand

it and I don't care. So finally my mom thought about it and decided to talk about me to the residential school.... My mom insisted and said there'll be signing in the classroom. But I didn't want. I wasn't interested in the deaf and the signing because all of the people I've seen are hearing and it's stupid to sign. Mom disagreed and tried to explain to me til I finally gave in.... I went there and saw people signing "hi" to me. I wasn't accustomed to it because I was exclusively oral all my life and suddenly I'm in the signing environment. But I went ahead with it and starting meeting people there. Before I know it, I was drawn to it. It was really wonderful! I like it much better than oralism. I could learn a lot through signing.

Such self-perception and experiences in public school, even in the total communications program, are associated with their marginalized self-identification, for they express the pro-hearing attitude.

Although Suzy recalls her mainstreamed school education as more positive and educational than the residential school, she is treated as a hearing person who needs sign language.

Suzy: I worked with the special education teacher through an interpreter. I really caught up nine months' worth of education in three weeks! I was really hungry to learn what I missed when at USDB. I learned almost nothing at USDB. I was frustrated and got into trouble a lot.... So I taught some sign language and the ripple effect took place. Soon enough the kids began teaching others how to sign. That was how we could communicate. My sister, who is my twin, also helped teach. She is hearing. She also interpreted a lot for me and taught others sign language.

It is interesting to note that Suzy reports her twin sister, Jackie, as hearing. This also explains their marginalized self-identification. Although the respondents make reference to their deafness in their self-definitions, their experiences are "all-hearing." This is



related with their negative level of self-evaluation. Their group introjection is, thus, context dependent.

Deaf. Respondents in the Deaf group refer to their deafness in their self-definition, experience positive self-evaluation, and enjoy strong group introjection. School backgrounds are associated with their Deaf identification. A majority of the respondents are educated in the total communications program and attend a residential school for the deaf. Only four respondents are educated orally and mainstreamed. In elementary school years, those attending public school are in the all deaf and hard-of-hearing self-contained classroom. In junior high and high school, they are mainstreamed in classrooms with 1% to 5% deaf and hard-of-hearing students and have one or a few self-contained classes. In high school, four respondents transfer to Model Secondary School for the Deaf (MSSD). There, they are educated in a classroom with other deaf and hard-of-hearing students. Incidentally, eight respondents have Gallaudet experience.

Respondents' group introjection is clearly not dependent on context. Victor's recollections about USDB and refusal to return to USDB after MSSD illustrate the lack of context dependency in the respondents' identification. Although the public school is not all-Deaf, Victor is already socialized into Deaf culture with the support of his hearing family before he gets into trouble at MSSD. As a result, he feels he can cope as the only deaf person in a public school, demonstrating positive self-evaluation.

Victor: You see, when I couldn't go back to MSSD because I got into a mega trouble at MSSD, my mom asked me if I wanted to go back to USDB or go to a public school at (name of the school). I told mom I wanted to check with USDB to see if it had improved and it didn't. So I decided to go to (name of the school) because it's more challenging and has more freedom.

Lynn has attended Gallaudet University and received her bachelor of arts degree there.

Lynn: As I was growing up, I had a hard time with my identity, you know, but I sort of started to know of my identity in high school. My identity was more pronounced at Gallaudet. I learned a lot about Deaf culture at Gallaudet and it was overwhelming.

Thus, education sources are also associated with their Deaf self-identification.

They feel they are in a minority in their schools in Utah. Their minority status also may explain why they tend to exaggerate their deaf identity. But when at MSSD, Fremont, or Gallaudet, the respondents report they experience a strong sense of belonging, attachment and commitment, increasing their level of group introjection.

### Hearing Culture

Hearing culture is a subject area that may be implicitly or explicitly taught in the class to transmit a variety of values, norms, beliefs, and attitudes to children (Feldman & Newcomb, 1969; Hyman & Wright, 1979). Implicit teaching includes discussions about the way popular culture permeates student conversation and learning. Explicit teaching consists of English instruction, speech and listening therapy, and MCE usage.

Non-Deaf. Respondents in this group report that hearing culture is implicitly and explicitly taught among classmates in the public school. They feel that hearing culture is almost overemphasized. Speech and listening are regularly drilled, with English taught and used all the time. This has relationship with the respondents' self-evaluation. Flavia is in a mainstreamed total communications program, and yet she feels that speech is overemphasized.

Flavia: Yes, that's what I hate the most. When I was growing up, speech was the main focus in my class, ignoring the three Rs. I feel that if you live in America, you have to learn to write English. If you want a good job, you have to be able to write well. But USDB always focuses on speech, speech, speech. There were a lot of voicing and hearing tests. I really hate hearing aids because lots of people forced me to wear hearing aids. I really don't want hearing aids because I'm stone deaf! My hearing is zero! But they still think and hope that I'll become hearing. That's my feeling and I despise them.

Interviewer: Were you in an oral program or a total communications program?

Flavia: Total communications.

Flavia's responses manifest context dependency in the respondents' group introjection. They express lack of support for hearing culture and yet are taught to observe hearing culture. Clint, also in a mainstreamed total communications program, reports that hearing ways are necessary and explicitly taught. He feels that hearing norms are more appropriate and acceptable than deaf norms.

Clint: Yeah because we have to learn how to respect the hearing.

Interviewer: What do you mean by respecting the hearing?

Clint: Like we eat and we need to keep our mouths closed, so it won't be noisy. We need to be careful. And just be nice to them as I don't want them to think we're "not good people." So we need to be careful.

The respondents share the perception that deaf norms are devalued and inappropriate.

For example, Rob feels hearing culture as superior to Deaf culture.

Rob: Yes, we talk about talking orally because it is what we believe that it is a lot faster than Deaf culture. We'd catch on more that way. There are barriers within Deaf culture. They don't look out of their world. Someone who is deaf I don't consider a friend. When I talk orally with my friends,

a deaf person thinks I'm stupid. But they don't realize there's more in hearing world than in deaf world. Hearing people are more progressive.

According to the respondents, hearing culture is more celebrated than Deaf culture in these respondents' school experiences. Speech and listening, English, and hearing ways are explicitly taught in their classes. This factor is associated with their non-deaf self-identification.

• Marginalized. Marginalized respondents report that hearing culture is implicitly conveyed during the sharing of hearing jokes and puns. They also recall English as the only language in the classroom, with speech being overemphasized. Hearing manners are stressed in efforts to teach them to fit in the hearing world. The general feeling the respondents give is that they feel alienated when hearing culture is taught and/or discussed because the approach becomes almost inaccessible to them. Although Jackie is able to succeed in an inclusive setting without an interpreter as a hard-of-hearing student, she still feels that anything related to hearing culture is difficult and inaccessible to her. So she fakes it trying to fit in. The concept of "passing" is addressed by Goffman (1963). Those who experience stigma for being "abnormal" are in a position to pass because of the great rewards in being considered normal.

Jackie: Yes. I had a hard time because when people as a group were chatting, I couldn't be that involved because I don't hear well enough to be involved. I was afraid to make any comment only to realize I'm off the point and get embarrassed. I tended to sit, nod my head, acting like I was understanding everything. But I know they were talking about music because they turned the volume up and danced.... But with jokes, I wasn't very good because I don't think like a regular hearing person who hears words and understands jokes. I hear the words and then translate them into what I could understand through visualization....

So I always kept quiet because I didn't want to try to figure the joke out and then 5 minutes later, I laughed making others wonder what I was up to.

Their experiences are marked by difficulty, indicating association with their negative self-evaluations.

Debbie's experiences in the mainstreamed school and in the residential school make her feel she has to reorient herself after her transfer to the residential school.

Debbie: Yes. For example, they'd say, "Be quiet. Be considerate of others." I'd go, "Oh, please. We can't help it if we can't hear." They'd tell us to chew our food with our mouths closed. We had to think of hearing people's needs all the time. Kowtow to them and not disturb them.

Interviewer: That was in the mainstreamed school? What about the residential school?

Debbie: Yes, that was at the public school. In the residential school, we could be ourselves. When I first got there, I was so careful about shutting the door in the dorm. The next room someone shut the door really loud and I ran to the girl to tell her to be quiet. They looked at me like why the hey. I said we needed to be quiet. They said, "There are no hearies here. As for the hearing counselors, well, too bad for them...."

Interviewer: You were confused?

Debbie: Yes, I had to reorient myself all the time as to which world I'm in....

The respondents' accounts demonstrate that it is expected for the deaf and hard-of-hearing students to act and think like hearing people. That can be confusing to the deaf and hard-of-hearing in terms of their identity, thus showing relationship with their self-evaluation and weak group introjection.

Deaf. The respondents with Deaf identification report that hearing culture is explicitly taught in school in the form of speech and signed English. Music is always the subject of conversation among students outside of class. However, the respondents exhibit their ability to self-advocate, thus illuminating their positive self-evaluation and strong group introjection.

Ralph's experiences at the residential schools in USDB and MSSD reflect the strong imposition of hearing culture values in the curriculum. However, at MSSD, involvement in that culture is more the students' choice, not the school's, a fact that Ralph, from a Deaf family background, appreciates.

Ralph: Well, I remember USD(B) required individual speech therapy and I used to go there to learn speech.... Speech, I remember them always calling me out of class for speech, and I wasn't interested. I was irritated and sick of it. Pa, pa, ba, ba, with all the saliva coming out of the teacher's mouth and on my face. I was so disgusted by it. It went on and on before I finally decided to talk with my father about it.... Then one day I had a really bad experience with speech. It was when we went to McDonald's to apply what we learned. We spent a long time practicing our orders. I knew it from the start that no stranger can understand my speech. The teacher of course can because we worked together one-on-one on my speech and so she's familiar with my speech.... So I came to McDonald's prepared with a note with my order written down. Then I spoke my order. The woman didn't understand me and started to smile saying, "I don't understand." I looked at my speech teacher glaringly and she urged me still to try it again. So I did and the woman started to laugh saying, "I still don't understand." I lost my cool and pulled out my note from my pocket and gave it to her. After that I told my father about it and asked him to pull me out of speech therapy, which he did. In MSSD, in the communications class, they offered me speech and I had the option to say no....

English, on the other hand, is not to be an issue when it appears as a written form.

Karen's response represents the perceptions of the respondents about written English as a part of hearing culture taught in school.

Karen: We had to read to be able to write as English is necessary to communicate with the hearing, for jobs, etc. But it wasn't all negative as well as all positive. "English...I have to learn..." was the general feeling. But for me, I love English. My parents work with me on my English to ensure I get the language to read and to write. I really enjoy English, no negative feelings about it. So it's important to access it to communicate with the hearing world, to obtain job, etc. I really love English.

Accessibility is the issue here. Speech appears inaccessible and English in the written form accessible to respondents with Deaf self-identification. Also, it is apparent that their families, when able to communicate in sign language, are able to work with the respondents on English skills, making the experience and hearing culture more positive. There is a relationship between these factors, and their positive self-evaluation and strong group introjection.

Although the respondents' experiences with hearing culture as part of the school curriculum are generally negative, their experiences do not to affect their identity, demonstrating low context dependency. Tim's experiences illustrates this.

Tim: Yeah, during my senior year at that time, the hearing was more aural-oral based, and the four of us tried to teach them sign language to communicate with us. Some did and some didn't. So we really struggled with them. Only three actually learned to sign, and I was impressed with them. It was also the year that the school began offering ASL class, so we're gradually spreading ASL. We also set up an ASL Club, and it's the catalyst of the ASL class.

The respondents' tendency to exaggerate their Deaf-culture affiliation, to teach hearing people ASL and Deaf culture, and to self-advocate in school plays a role in their identification. There is an association with their profound identification and their positive Deaf self-identification.

### Deaf Culture

Deaf culture is a subject area that may be implicitly or explicitly taught in the class. Instances of implicit teaching include discussions about Deaf friends in the Deaf community, and Deaf events and Deaf organizations among students. Examples of explicit teaching consists of Deaf pride, ASL, Deaf culture, and Deaf history.

Non-Deaf. Respondents do not recall any teachings of Deaf culture in class; however, they remember learning pieces of Deaf culture through friends after school. Examples of Deaf culture discussions among friends after school include accounts of the Ogden residential school and Junior National Association of the Deaf (Jr. NAD). Jr. NAD is a youth program by the National Association of the Deaf (NAD), a political organization headquartered in Washington, DC. Some learn Deaf culture through other sources, such as the Deaf church, college ASL classes, and the Deaf community.

Tawnya's interview accounts best represent the non-Deaf group's perception of Deaf-culture discussions. Her accounts, although negative, demonstrate the educational system's lack of incorporation of diversity in the school curriculum.

Tawyna: Not in elementary school, no. In junior high school, we had a club, Jr. NAD. I was the president during my freshman year. Then I moved and it dissolved. I was involved in sports and that's why. Oops. But I was involved in Jr. NAD for two years then.



Interviewer: Did you learn about Deaf culture through Jr. NAD?

Tawyna: No, it was more of activity-related, getting together to have fun and to socialize. One time I went to the (Jr. NAD) conference in Tucson, Arizona, and it was fun and enjoyable....

Tawyna's vague understanding of Deaf culture is typical of respondents educated in a monolingual and monocultural program, such as the oral program and the total communications program.

Flavia is educated in the total communications program. Again, although sign language is used in a total communications classroom, Flavia reports that Deaf culture is ignored by the teacher.

Flavia: Not as children because we were really clueless about Deaf culture...our teacher focused fully on hearing things. Music...I really hated it...my teacher always encouraged us to sign to songs.... The teacher explained that it's how we express ourselves, and we found it incomprehensible....But recently 2 years ago, I started learning a lot about Deaf culture.

Interviewer: How did you start learning Deaf culture?

Flavia: Through the Deaf ward, and Lynn at the Seminary class. She was our teacher, and we were always asking her about Deaf culture. Sometimes we would talk about Deaf culture, forgetting about Seminary class, but we always catch up on the lessons and finish the lessons as quickly as we could, so that we could spend more time talking about Deaf culture.

Flavia's response to learning Deaf culture is typical. Many deaf and hard-of-hearing persons upon exposure to Deaf culture hunger for it, wanting to learn more about it.

Flavia's teacher's perception about the importance of instruction on hearing culture aspects is a typical total communications approach.

Deaf culture, as an unimportant curriculum aspect in class and as an important aspect outside of class, is associated with the respondents' medium level of group introjection. Their minimal Deaf culture exposure propels them to see themselves with a non-deaf identity because of their education backgrounds.

Marginalized. The respondents report that Deaf culture is never taught as a subject. One respondent, however, says her teacher encourages her and her class to use *Deaf Heritage* (Gannon, 1980) to learn about famous deaf people. Other respondents recall teaching the hearing about what the deaf can do. Some respondents have exposure to Deaf culture outside of class. When asked about learning ASL, the respondents explain they learn it through social interaction. These superficial Deaf culture experiences create some kind of inner conflict, indicating relationship with their marginalized self-identification.

For example, Frank, a cochlear implant user since age 11, is in an oral program throughout his school years. Although a successful oral student, he expresses his desire to be allowed some exposure to anything that is "Deaf culture."

Frank: Not really because the teachers would tell us not to sign but talk. Some teachers were flexible, but in class, it was all oral. I would continue to sign outside of class. And for a year, teachers would tell me not to sign, and I didn't like that. It's like inferring with my Deaf culture. I like to sign for communication ease as opposed to being forced to be oral.

Frank and other respondents report oppression in their public schools. This contributes to their negative self-evaluation. Like them, Debbie feels she is oppressed until she begins learning about famous deaf people from the teachers and her classmates at the residential school. Then she feels almost "liberated."

Interviewer: How did you feel?

Debbie: I was thrilled! I shared what I learned with my mom and she enjoyed learning those things from me. She admitted she heard of them but never thought of telling me. I became upset. Mom didn't think it was that important.

Their families also disregard Deaf culture as unimportant.

Nancy explains how she begins to realize there are deaf adults. When she was 15 years old, her mother introduced her to the Deaf Latter-day Saints (LDS) ward. There she had her rude awakening that she will always be deaf.

Nancy: Yes, and my mom told me about the deaf church with the LDS. But I was too scared to go because I grew up attending the hearing ward with my parents.... Anyway, when my mom told me about the deaf ward, she told me to give it a try and if I didn't like it, I could always come back to the hearing ward. I told her just once and mom agreed. When I got to the deaf church, the first thing I saw was deaf adults signing. I walked up to a deaf adult in awe, "Are you deaf?" That person said, "Yes." I asked another and another becoming increasingly shocked that there were deaf adults. I thought only children were deaf and they'd be hearing as they reached adulthood. Then I looked at myself and rapidly accepted who I was and started attending the deaf church. I became really happy then.

Based on the respondents' accounts, monoculturalism in the home and in the school is associated with their negative self-evaluation and weak group introjection. Their ethnic self-identification is context dependent.

Deaf. Respondents report that in Utah, Deaf culture is not formally taught in school but discussed outside of school among friends. Those with out-of-state residential schools and Gallaudet experience remember Deaf culture being offered as a course and widely discussed throughout the school.

Marisa: I don't remember much about Utah, but at MSSD, Deaf culture was discussed a lot because there were so many Deaf people there and we all were so proud of being Deaf. Deaf culture was heavily emphasized, and they had captioning, and all of the technology. Deaf needs and accessibility were readily available.

Interviewer: What about USDB?

Marisa: It's not accessible to the Deaf.

Interviewer: Did USDB kids ever talk about ASL or things like that?

Marisa: No, nothing at all. Really, I never realized how proud I am of being Deaf. I was never grateful for being Deaf. I took my deafness for granted until I started going to MSSD. MSSD really changed my outlook. I met so many students from Deaf families and felt so connected to them. This and that really developed my Deaf pride. It really made me feel good. In Utah, there was nothing like that. I know that some of my friends from hearing families stayed at my place a lot because my parents are Deaf... I didn't really understand why they felt that way at that time. Now I do and am so thankful I have a Deaf family.

Marisa's perception is consistent with respondents from a Deaf family background. Their heightened awareness of Deaf culture makes them more critical of Deaf culture discussions taking place in school. In addition, the respondents' experiences with and exposure to Deaf culture as Gallaudet University students are related with their positive self-evaluation and strong group introjection.

On the other hand, coming from a hearing family background, Victor has to go on his own by going against the norms of his home world, which is hearing.

Victor: Yes, we primarily talked about the happenings in the Deaf community with adults. I started interacting in the Deaf community when I was 14. I ditched from home to socialize with the Deaf community all the time and my mom always caught me. The reason why I did that was that I felt like I identified myself with these deaf adults. Well,

the next day in school, I would share stories with my friends about deaf adults and what they did. Some of the things were inappropriate and my friends would be curious, so I invited them to ditch with me to see dirty movies and do illegal stuff. But we also did legal stuff.

Victor's accounts represent the identity experiences of the respondents in this group.

Since childhood, they feel connected to Deaf culture and want to be with people in the Deaf community. When opportunities are blocked, they feel compelled to break the rules to be with the Deaf community and be in Deaf culture. Their feelings have an effect on their positive self-evaluation and demonstrate their strong group introjection.

Because Marcia comes from an all Deaf family background, Marcia's experience teaching her schoolmates Deaf culture demonstrates the perception that Deaf culture is almost nonexistent in the school curriculum, even in the residential school classrooms at USDB.

Marcia: I mostly talked about it to my classmates and friends than the other way around because I'm from a Deaf family. All my deaf friends were clueless cuz they're from hearing families. I told them about the Deaf church, Deaf events, so forth. They came to our home a lot to get "Deaf culture" education. Nowadays they are part of Deaf culture, thanks to me.

Apparently, the respondents, after acquiring their Deaf identity, feel they need to teach others Deaf culture after school to encourage Deaf identity. This illuminates their Deaf self-identification.

### Discrimination

Discrimination comes in various overt and covert forms. For example, a deaf person may not be hired because he or she cannot use the telephone. A deaf person may

lose his or her turn at McDonald's because of the need to write the order. Awareness of discrimination allows deaf and hard-of-hearing persons to become better prepared for possible incidents and ways to combat them. Discrimination may or may not be discussed in school, in home and with friends.

Non-Deaf. Respondents report that discrimination is not explicitly taught nor widely known in school. However, there is a consistent pattern of acts of discrimination in school and/or home. In addition, they view their friends as extremely supportive, teaching them how to handle discrimination at work. Their perceptions of discrimination are associated with their low level of Deaf self-definitions and a medium level of group introjection.

Although Tawnya has good relations with her family, her family has a hard time with her use of ASL. When asked about discussing discrimination with her family, she mentions ASL as an issue for argument with her mother.

Tawnya: Well, yea, because we didn't talk about discrimination, but my mom was a little against ASL, and I tried to explain. Now she's OK about it. But before then she.... My mom didn't like the idea of different word order. Well, I was against ASL before.

Interviewer: Why were you against ASL before?

Tawnya: Because I had to, well, some students who used ASL and their English was so bad and when they talked they made no sense. My mom taught me English as she thought it was so important. So I really learned English word order before learning ASL. But now that I've taken some ASL classes at [name of university], and they really revolutionized my viewpoint dramatically.

Apparently, Tawnya has some misconception about ASL. Her misconception is similar to the majority of hearing population who remain uninformed about ASL and Deaf

culture. Contrary to research findings (Klima & Bellugi, 1979; Stokoe et al., 1965), it has been the view of the majority that ASL is a broken English and not a language (Padden & Humphries, 1988; Sacks, 1989). Also, due to misconception about ASL, educators of the deaf typically perceive that ASL impedes deaf children's English acquisition (Johnson et al., 1989; Lane, 1999; Lane et al., 1996; LaRue, 1995; Lucas, 1995; Nover, 1995).

However, through heightened awareness of discrimination as adults, respondents are able to combat it. Resisting discrimination comes in various forms. Education, lawsuits, and peer support are common forms undertaken by the respondents. Knowing more about discrimination as adults manifests the monolingual and monocultural educational practices in their schools and attitudes within their families, showing association with their medium level of group introjection.

Merry, an oral student, feels she is treated unfairly at her school.

Merry: Oh, yes, I remember during my junior and senior year in high school, everyone was going to the Close-Up program in Washington, DC, and I wanted to go! So I wanted to go, but there were two problems: money, and also someone said, "Oh, you'd not enjoy that. Everyone'd be talking and you'd not understand...." Also, when I was a freshman in high school and we were in the geography class, we were supposed to research our topics and present them in class. My teacher excused me from that because I was deaf.

Instead of recognizing her abilities as the only deaf student in the public school without interpreting services, Merry feels that teachers doubt her ability to function independently in these two events. This and other accounts are examples of the relationship of family and education backgrounds, and self-identification.

Marginalized. Many respondents report their teachers and schools discriminate against them in the areas of their language, intelligence, and employability. They share

their feelings with their families, who in turn either lend their support by going to the schools to complain or ignore their feelings. Some respondents feel belittled by their families. Also, they discuss academic and job discrimination with their friends to solicit help and support from them. They receive more support from their friends. Their experiences are associated with their neutral level of self-definition, negative level of self-evaluation, and weak group introjection.

One of the factors of Jim's self-identity confusion stems from his school experiences. One of his experiences consists of his teacher telling him what he cannot do because of his deafness and being disregarded by his family.

Jim: Yes. I wanted to be the U.S. President and the teacher said I can't because I'm deaf. I felt puzzled and hurt, insulted. I also wanted to be a doctor and the teacher said the same thing. There were other occupations I wanted to do, but the residential school kept on saying I can't! I felt intimidated and worthless.

Interviewer: Did you sometimes talk about discrimination with your family?

Jim: My family was a good support but listened to the counselor and then discriminated against my ability. For example, I wanted to work with the police, FBI, or the likes of them. My family checked with the counselor who told them I can't. I got really angry at them. We got into an aimless argument.

Although Jim's family initially lends support to him, they listen more to the system, propelling Jim's marginalized self-identification. Jim's example also represents some of the respondents in this group. Ellen shares a similar discriminatory experience in which she receives overwhelming support from her deaf and hard-of-hearing schoolmates to oust a teacher.

Interviewer: Did you sometimes talk about discrimination with your friends?



Ellen: Yeah. We talked about discrimination with each other and others that weren't involved in the discussion, we asked them for help. They were taken aback until they started looking back. Then they started to realize by observing the actions of the teacher in the classroom. So they helped us by supporting us to oust that teacher. I am happy they listened to us and understood us. If no one tried to listen to us, we would've spent a whole year until our graduation struggling with it with no success only to graduate from high school or something.

Apparently, experiencing discrimination first hand in school and out in the world has been the hallmark of the respondents in the marginalized group. As a result, they feel marginalized and incapable, affecting their negative self-evaluation. †

Suzy's experience of discrimination concerns the perception of others in her school that she is not supposed to marry a deaf person.

Suzy: Not really.... Oh, yes, there was a time when the coach encouraged me to marry hearing, not deaf. I stared at her like it was the most discriminating thing she ever said to me. I dated a lot of hearing boys, yes, and I also went out with a deaf boy [name of the boy] who went to Gallaudet. We were really serious for five years and then we broke up. Anyways, I brought him to the school and my coach appeared to be totally displeased with the idea I was going out with a deaf guy. I was frustrated. She told me I needed to marry a hearing man, and that really hit me and bothered me a lot. That was in high school.

Such reaction by others of them is related with their self-identification. Their experiences in home and school, in addition to their friends, explain their neutral self-definitions, negative self-evaluation, and weak group introjection.

Deaf. The respondents have varied experiences with discrimination as a topic of discussion or an occurrence in school. In addition, their perception of discrimination is acute. Many demonstrate that although they experience discrimination themselves, they

continue to have high self-definition, positive self-evaluation, and strong group introjection. Thus, their group introjection is less context dependent.

For example, there are incidents of discrimination experienced by the respondents when they are children. Marisa recounts how her Deaf father tells her to stop signing in public when she is a child, only to change his perception as she becomes older. She then explains how her parents prepare her and her deaf brother, Ralph, to combat discrimination. Her experiences are associated with her Deaf self-identification.

Marisa: My father...wow. I remember when I was little, I went to a restaurant with my family. I was signing in public and my father would tell me to stop. That was back then and nowadays I notice my father is being himself signing all he wants. He sees me and Ralph growing up as two Deaf people and he feels proud of us. That helps him to be proud of our world....

Interviewer: Did your parents ever inform you of the possibility of being discriminated against?

Marisa: Oh yes, they always tell us that there may be obstacles when we grow up. Like getting a job we wanted only to be rejected cuz of our deafness. They told us not to give up, fight back and get what we want.

The respondents' acute awareness is consistent with their strong Deaf self-identification.

There is a relationship between their family and education backgrounds and their positive self-identification.

Their self-confidence and independence are apparent in their accounts when dealing with discrimination. Victor's accounts best represent their ability to confront discrimination and help others overcome it.

Victor: Yes. With deaf friends, we discussed many, many times. Like one friend complained that a company won't let him work on a machine. I would ask my friend questions about

the machine and if safety is not dependent on sound, then go and fight back! Because I work on machines and I have fought hard for it. I suggested to the company to simply install a light that would inform me of its safety needs. Sometimes I would go with my friends to their workplaces as their advocate.

Victor's apparent independence and self-confidence are common among the respondents in this group. They report that their family and education backgrounds are amicable to them as deaf and hard-of-hearing persons, to encourage them to flourish as persons with Deaf culture, and to allow their independence, illuminating their Deaf self-identification.

As residential school students, Lynn and Marcia share two forms of discrimination taking place in the residential school. Lynn's account is in the Ogden residential school setting.

Lynn: In high school, I could see other hearing teachers and staff oppressing deaf teachers,.... I saw hearing teachers acting like deaf teachers can't handle the students. Hearing teachers were doing all of the disciplining and they were telling deaf teachers they gotta discipline the students. But deaf teachers kept telling hearing teachers that they know what they were doing as they were products of residential school themselves. Also, I saw students tricking hearing teachers and they were gullible, BUT they still claimed they were more on top of things than deaf teachers. We felt the whole thing was unfair.

Marcia's account is about her experiences in the Ogden residential school and in CSDF, and in the public school in another state. Note the sharp contrast in her perceptions.

Marcia: Oh yes. The teachers and counselors were so alike! They had the same "uninterested in us" attitude, except for two good teachers. Others were just interested in the money. They didn't have people above them to tell them to be interested in us. They didn't realize of their "wrong doings." It wasn't their fault, really. The administrators were more interested in the oral program.... I feel that way. USD[B] is like that. In Louisiana, there was no

discrimination between the hearing and the deaf. There were lots of racial discrimination going on however. Louisiana is really different from the West. Race is the issue in Louisiana. Deafness is not a thing to discriminate there. They open their hearts to deaf people. They sign. They are not obsessed with oralism. It seems like (another state) doesn't have an oral program. I don't know.... In California [CSDF], however, we were more of discriminatory against the hearing. For example, at lunch, deaf staff would eat together, excluding the hearing and stuff like that. I asked my friend [name of friend] and he said, "Yes, even in the dorms, deaf counselors would try to exclude the hearing counselors." That's Fremont!

Generally, the respondents have acute perceptions of discrimination in their environment, whether it be in school, home, or community, and are able to overcome discrimination. Their heightened awareness and low context dependency are consistent with their positive self-identification.

### Deaf and Hearing Habits

Deaf and hearing habits are ways that deaf people and hearing people behave on an everyday basis. Examples of deaf habits include slamming a door, closing drawers loudly, hugging friends in greeting, chatting in the well-lit kitchen, talking while eating, and using attention getting manners that include touch. Instances of hearing habits consist of not banging the door, not flushing the toilet at night, and not talking while eating. Awareness of diverse habits demonstrate diversity within their social contexts, demonstrating individual's Deaf self-identification.

Non-Deaf. Respondents report that they are always being told by the hearing to keep quiet and reduce the noise level. They also remember helping other deaf and hard-of-hearing people by teaching them hearing habits to show manners to the hearing. As

adults, however, they do most of the teaching about deaf habits to their families and other hearing people. Mary's comments about how her family teaches her the hearing habits are also representative of the experiences in the non-deaf group.

Mary: Mom and I went through a lot of challenges together cuz I'm deaf and she's hearing. For example, I can't hear my daughter screaming and my mom could, so she would tell me to calm my daughter down and keep her quiet as her screaming is so loud. Sometimes my mom would criticize me and my ways, and I would object to that. I remind her I know what I'm doing. I also tell her I don't meddle with her affairs with her friends, so leave me alone with my doings with my deaf friends. That's all.

The need to teach their hearing families about deaf habits demonstrates the families' lack of cultural awareness of the deaf.

Clint's response to the question about habits discussed in school best demonstrates the typical experience that the respondents have as deaf in a public school.

Clint: In junior high school and high school, I think they did explain about them. For example, on the touching thing, I was playing with hearing kids and they were bothered by my touching, so I had to be careful. And I needed to leave them alone and respect their culture whenever I'm around them. But when I'm within my culture with the deaf, I was told to do whatever I can.

This is a manifestation of lack of sensitivity towards diversity in the school.

Veronica's response about discussing deaf and hearing habits with her friends reflects the experiences of the respondents with peer groups. As adults, they are more aware and able to reciprocate with their friends about deaf and hearing habits.

Veronica: I let them know. When I'm around deaf and hearing friends, I let them know the differences. I thought they are interesting and funny. I don't know how much they know about the hearing or the deaf. There are huge differences between hearing and deaf cultures.

Interviewer: Give me an example.

Veronica: Waking up in the morning to the alarm. The hearing use sound while we use vibration or lights. They found it interesting. Also, it's funny. Sometimes the hearing eat, they have to finish chewing before they can talk. But the deaf can chew and talk at the same time. So I always tell the hearing that it's one reason why they should learn to sign. They laugh.

As adults, they have a heightened appreciation of self. Yet, their education and family backgrounds give a general sense of being monolingual and monocultural, showing association with their non-deaf self-identification.

Marginalized. Deaf habits are briefly discussed in terms of cultural behaviors (hugging and rules of social interaction) among friends in school. In the family, however, hearing and deaf habits are frequently the topic of discussion to maintain family harmony and to resolve cultural conflicts. Among friends, the respondents report they are always criticized by their deaf and hearing friends for some of their deaf habits. They feel they have to defend themselves and the deaf habits because they feel deaf, too.

Lewis' recollection about habits discussed in school, in the home, and with friends best summarizes the experiences of the respondents in this group.

Lewis: Well, we did superficially discuss how quiet the hearing is and the deaf can be very assertive, noisy, sharing/giving, wild unlike the hearing. The hearing tends to be calm. Sometimes these two worlds collide as we both are different. You see?

Interviewer: Yes. So you discussed these with your friends in school?

Lee: Yes.

Interviewer: What about with your family?

Lewis: I've experienced the differences cuz of all my family is hearing. Sometimes they'd tell me to be quiet, and I'd go, "OK, fine." I tried to listen, yet I'm assertive and talkative and noisy. My family learned the deaf ways from me and realize we're different. They were worried about what others would think of me signing "wildly." But I'd say "sorry." They'd learned to get accustomed to me and I'd learned their ways. I love my family and I understand they're hearing. I feel fortunate to have a hearing family cuz if I'm from a deaf family, where do I learn the ways of hearing people? It's challenging, frustrating, yes, but we support each other well.

Interviewer: Ever discuss deaf and hearing habits with your friends?

Lewis: My hearing friend thought the deaf's habits are identical to hearing culture, and I told him, "No, no, no." He himself had hard time communicating with the deaf and I pointed that out to him. I told him the same is true for the deaf. They have hard time communicating with the hearing. But we all behave like people, except it's the attitudinal thing that differs between two cultures.

Lewis' responses are well articulated and represented well the perceptions of the respondents in this group. The respondents are knowledgeable about both the hearing and the deaf habits through socialization and discussion. They also try to respect the hearing and yet affirm their deaf habits as acceptable.

Interaction in the home is also difficult for those in families with both hearing and deaf members.

Debbie: Yes, we did all the time when my [deaf] father was alive. I would complain to him about my siblings' ignorance and they would complain to him about my being noisy. He would tell us to quit all the bickering, start loving each other regardless, and accept one another. But he would also tell us to understand and respect each other's needs. He tried to keep things in peace.

Cultural conflict also emerges in interaction with even deaf friends as recounted by Frank, a cochlear implant user.

- Frank: Yes. My friend was always criticizing my eating mannerism. I eat and make noises, and my friend was always telling me, "Manners!" I honestly don't care if I make noise when eating. When I forget to say, "Excuse me," my friend would remind me to do so. I told him I'm part of Deaf culture, so I don't care.
- Interviewer: Is that friend hearing?
- Frank: No, deaf. I even told him he's deaf, too, so why care. He defended himself that we have to care when around hearing people. I'd shrug.

Based on Frank's and others' accounts, these respondents are in a marginalized environment, affirming their negative self-evaluation and weak group introjection. Such marginalization appears in their self-identification, even though the respondents repeatedly affirm their comfort at socializing with deaf and hearing people.

Deaf. Respondents report that teachers in the USDB residential school exclusively teach them hearing habits to help them think and act like hearing people. Those with out-of-state residential school experiences, however, recall that deaf habits are taught exclusively. Respondents in "Deaf friendly" home environment feel that both hearing and deaf habits are discussed to expose them to both worlds. In social situations, all respondents say both hearing and deaf habits are addressed as a way to compare notes with their hearing and deaf friends.

Marisa's accounts best represents the respondents' experiences about hearing and deaf habits taught in schools in Utah and at MSSD.

- Marisa: Yes. It was one teacher actually who I remember was very courteous and polite. We were eating at a table in cafeteria



with the classmates and she was always teaching us manners. Also told us not to open our mouth while chewing food. Utah taught us a lot of that compared to MSSD.

Interviewer: Was the teacher deaf also?

Marisa: Yes, she was deaf.

Interviewer: That's interesting. What about MSSD?

Marisa: No. It's all Deaf way. When I go in the cafeteria, it's all noisy, clanging, banging. MSSD is a 24-hour noise.

The experiences are positive and "Deaf-friendly." Karen's account about hearing and deaf habits discussed in the home with her hearing signing family members is also positive.

Karen: Sometimes. Family would tease me about how I make noise when eating. But nothing offensive. Just tease me sometimes.

Interviewer: Do you tease back?

Karen: Yes. Like me talking forever with the deaf and I would tease back they talk forever, too. Or sometimes I would tease back that they're too quiet. So it depends on situation and everything.

The respondents' experiences with hearing and deaf habits are positive. Such positive feelings are associated with their positive self-esteem and self-identification.

Billy's diverse friendships are also related with his self-identification when it comes to hearing and deaf habits.

Billy: Yes, with my good friends in groups, all deaf. A very little with hearing friends, mostly with deaf. My hearing friends sign also. Not in school. Always in clubs, church, events. In my home, too.

Such camaraderie between the deaf and the hearing is a common experience among the respondents in school, at home, and/or with friends, demonstrating their positive Deaf self-identification.

### Teasing by the Hearing

The hearing teasing persons with hearing loss is a common experience. Teasing comes in various forms. Teasing typically concerns speaking ability, use of sign language, and/or use of some type of amplification. Respondents' reaction to the teasing and the perceived attitude of their teachers and families are indications of diversity within their social contexts and their levels of self-identification.

Non-Deaf. Although the respondents report they experience the teasing by other hearing children, they generally do nothing about it. Some inform their families, who give them emotional support but demonstrate some lack of empathy. When they are children in elementary school, their teachers and families intervene by telling the teasers to cease; as teenagers they perceive their teachers and families probably will not do anything. Lisa's responses were typical experiences of the respondents in this group.

Lisa: Not a lot. For example, hard-of-hearing kid saying something wrong (speech error).

(later)

Interviewer: Did you do something about it?

Lisa: No.

Interviewer: Suppose you did inform your family, what do you think your family would do?

Lisa: Family has too much problems and would say "forget it"...

Interviewer: What about your teacher? What do you think your teacher would do?

Lisa: They probably would help.

Although respondents feel their families care about them, they generally do think they will not get much help from their families and get only superficial help from their teachers. This demonstrates little sensitivity to the experience of being deaf in the hearing world, and thus, is associated with their self-identification.

Jerry's recollection of teasing and then sharing his pains with his parents demonstrates the typical experiences of deaf and hard-of-hearing persons in public school and with hearing family background.

Jerry: Sometimes I'd get home crying.... I had deaf friends who teased me and also my hearing friends teased me. Sometimes I'd get home and say, "I have no friends. They tease me and so forth." My parents do things like calling the teacher about it. Sometimes the problem is solved and sometimes not.

Interviewer: Your parents understand your feelings....

Jerry: Yeah. They tried to help, but it's hard for them to understand how I feel. They understand about childhood meanness, but I am deaf...they are very understanding and patient. Umm...they would talk with me and tell me I'm a good person and to ignore them as it's their problem. Sometimes. But they're patient with me.

(later)

Interviewer: OK, so did your deaf friends mock you for THINKING-HEARING, being with hearies?

Jerry: Back then only when I'm with the deaf. But now no problem. I socialize with the deafies and can shut the door to the mockery. They understand that. I feel that when I transfer to [name of the university] in January,...I feel that

I'd be involved with the hearing but also with the deaf. I think my deaf friends would call me THINK-HEARING, but I don't care because I can communicate, no problem. But if I can't, it's their problem, not mine.

As adults, they learn to handle the teasing themselves. They also continue to socialize with the hearing after high school indicating their low ethnic self-definition, neutral self-evaluation, and medium group introjection.

Marginalized. Respondents experience the teasing themselves and fight back in various forms, such as engaging in food fights, throwing things, and arguing verbally. Most of them do not inform their teachers because they perceive their teachers as uncaring and/or inactive on their behalf. Some of them inform their parents and only receive empathetic responses from their parents. Terri's experiences are typical of respondents in public school.

Terri: Yes. I was really mean to them because I am deaf and they should not make fun of me. My parents tried to calm me down and keep me separate from them, but I complained to them about their teasings. They threw at me, so I had to throw back at them. My parents tried to stop me from retaliating back at them.

Interviewer: Did your teacher do something?

Terri: Never. She didn't care. She never tried to stop me or the kid.

Interviewer: Did you inform your teacher?

Terri: Never. I only informed my friends and asked them if I should hit them back. They told me to do it. So I did. I won't tell my teacher because she would just punish me by twisting my ear or putting me in a room. The teacher was mean.

Interviewer: Were other deaf and hard-of-hearing kids being teased also?

Terri: Oh yes.

Interviewer: What happened?

Terri: I got really upset and came to their defense by telling them off. I also encouraged my friends to throw back at them out of fairness to show them we ain't dummies.

Apparently, those in the public school have to support and defend each other without the help of the teachers and parents. Respondents in the residential school also feel compelled to defend each other by throwing things back at the hearing on the other side of the fence. They say they cannot inform the teachers because the hearing youngsters will flee. The respondents report that there is emotional support from other deaf and hard-of-hearing students. Their experiences are associated with their negative self-evaluation and weak group introjection.

Although Lee expresses that he is never teased by the hearing, he sees incidents of his deaf and hard-of-hearing friends experiencing this unpleasantness and comes to their aid. He also reports that his teacher is helpful by telling the teasers to stop their behavior. The researcher then makes the teasing hypothetical and learned more about his perception of what his family thinks of him.

Lee: Yes, I would. They would talk with me to make me feel better being deaf with an okay speech. They would help me to ignore it but would not go to the person to tell him to stop.

His poor perception of self is representative of the respondents in this group, indicating their identity struggle, indicating high context dependency in their self-identification.

Deaf. Respondents and their friends are teased, and in response, the respondents invariably use verbal means to inform the teasers to cease the teasing, to stare back at the

teasers, and/or sign back at them. They feel they have to resolve the teasings themselves because they have the perception that their teachers will not understand. Although many inform their parents and their parents provide them emotional support, they primarily take care of it themselves, indicating self-independence.

Marisa's parents' response to the teasing is typical of deaf parents teaching their deaf children independence and self-coping skills.

- Marisa: I was a very independent person when growing up. I played and dealt with them on my own, but of course, I told my mom about it. My mom told me to ignore her, to stand up to her and not to let her bother me. Really I was never bothered by it. I was never ashamed of my deafness.

Such maturity and self-independence have a relationship with their positive self-esteem, indicating their Deaf self-identification.

Dina's response to the teasing demonstrates a strong identity that is typical among the respondents with Deaf self-identification.

- Dina: I wanted to approach and tell them it's not nice because that's their culture and ask them how they feel if the deaf came up to them and teased them. But I wasn't able to say those things because they left before I was able to.

Another example of a profound Deaf identity among the respondents emerges in Lynn's account. Lynn is in the Idaho School for the Deaf and the Blind (ISDB) for one year when she is in elementary school. It is common that the majority of deaf and hard-of-hearing students be observed by visitors in classroom. As a result, many of them feel they are being harassed. In response, those with strong identity strike back.

- Lynn: In the Idaho residential school, there's a building that circles around, and there are rooms with dark glass windows and in the middle of the circle is a library...it's a

one-way glass window...designed for visitors to take a peek into our classroom activities, and it annoyed us. I knew there were visitors observing us, and when the teacher left the room, we decided to act like a zoo just to scare the hearing visitors away because some hearing children visitors would look into our doorway showing their faces and laughing at us. So we knew they were making a mockery out of us and it bothered us. To spite them, we acted like a zoo, giving them the impression we were weirdos. The teacher would tell us to stop as she wanted to give them the good impression. She would also put up the "great teacher" act. It's really ridiculous...she should just be herself! We would immediately know from "her act" that visitors were here again.

Apparently, respondents with profound in-group preference and Deaf identity handle being teased by the hearing by exaggerating their in-group boundaries. Such exaggeration comes in two forms: teaching others about respect for Deaf identity and exaggerating the stereotypical characteristics of their in-group to confuse the out-group, demonstrating their positive Deaf self-identification.

### Cochlear Implantation

Cochlear implants (CI) are a new technology approved by the Food and Drug Administration as a safe surgical intervention for deaf people as young as 18 months old (Lane, 1999). Cochlear implants have been the subject of often heated and emotional debates between the hearing and the deaf (Balkany, 1995; Balkany, Hodges, & Goodman, 1996; Lane & Bahan, 1998). Deaf and hard-of-hearing persons with strong Deaf identity generally are opposed to the technology for several reasons: (a) cochlear implantation is akin to oralism as the deaf child is being coerced to learn to speak and hear; (b) cochlear implant teams tend to discourage the use of sign language, eradicating the deaf child's

right to sign; and (c) cochlear implants are viewed as a form of genocide to Deaf culture (Lane, 1999; Lane & Bahan, 1998; Lane et al., 1996). Hearing people, on the other hand, typically perceive cochlear implantation as advancement for the deaf, allowing them integration into the society, such as being educated with hearing peers in a neighborhood public school, receiving better employment opportunities, and learning English (Balkany, 1995; Balkany et al., 1996). The subject of cochlear implantation is asked of the respondents to learn of their self-identification as deaf and hard-of-hearing persons.

Non-Deaf. Although these respondents do not overtly identify themselves as Deaf, they do not generally support cochlear implantation in children. They contend that the children must make the decision themselves. They also agree that it is acceptable for adults to receive a cochlear implant because as an adult, the person is able to make the decision him or herself. Incidentally, many of their parents do bring up the subject of implanting them with a cochlear implant and respect their wishes that they do not want one. Many respondents also report their hearing friends want them to have one and perceive that their hearing friends have no understanding of what it is like to be deaf. Also, they feel that their deaf friends have mixed feelings about cochlear implant. Some respondents have friends with cochlear implants.

Tawnya's response about CI for children and adults represents the perceptions of the respondents in this group.

Tawnya: I think with the children, they should make the choice when they're older. Because they'd be making an informed decision knowing that their lives'd change and they'd be expecting all kinds of sounds. Whereas, with the children, they weren't expecting them. The children'd be constantly



confused, so I disagree with that til they're older to make the decision.

Some of their friends have cochlear implants. This may have had an effect on their perception that it is an acceptable technology. Those, whose friends do not have one, however, are generally opposed to cochlear implantation.

Flavia: Not really for small children, but when they're old enough to decide for themselves, then it's fine with me. I don't like the idea of being invasive, ummm, I don't know. And children are children of God, and we should accept the way they are.

Interviewer: What do your friends think about it?

Flavia: [Name of a friend] wants a surgery to fix her nerves to hear again. Her husband wants it for her, but they receive a lot of criticism from deaf people. They love to hear. Her husband had a very bad and rough life because people made fun of him and his deafness, so deafness became frustrating for him. Also the surgery will make his life at work easier. I think it's really up to them and none of the deaf people's business, but it shows that deaf people have a great self-esteem as deaf people, and that's good. But they should respect their feelings.

Although many of the respondents are not bothered about others receiving cochlear implants, they still feel that receiving one should be a person's decision, not that of someone else. The respondents clearly feel that if cochlear implants help some people to have a better life, they will support the procedure, illuminating their low ethnic self-definition, neutral self-evaluation and medium group introjection.

Marginalized. Although some respondents are opposed to cochlear implantation, many have the perception that cochlear implantation is a great technology to help deaf people hear and talk better. Many will not want one for themselves because they are

either unsure of the technology or feel pressured by their deaf friends not to have one.

All respondents report that their deaf friends are opposed to the technology, while their hearing friends find it an acceptable pursuit.

Lee: Well, I don't need CI because I can hear better. But my friend, I'm happy, before she could hear well but then her hearing deteriorated. She got a CI and she can hear a lot better and we talked. I'm happy. I think CI is a good thing for the deaf to hear.

Apparently, Lee experiences negative self-evaluation as a hard-of-hearing person. He reports that being able to hear is a positive thing, demonstrating his marginalized self-identification.

Betty got her cochlear implant when she was 9 years old. Due to complications, she has three surgeries to make it function. Her perception about whose decision cochlear implantation should belong to is a general reflection of all respondents.

Interviewer: Did you make the decision yourself or did your parents make that decision?

Betty: Well, really, I didn't know what CI is because of the poor education I received in the [name of school]. I wasn't learning or understanding things. Then my parents thought a CI was best for me and I went along with it. I got CI, got used to it, and then started to love it because it helps me a lot.

(later)

Interviewer: Does it help you with your speech?

Betty: Sometimes. It depends on if I really am focused on my speech therapy. If I get lazy, then it won't work.

(later)

Interviewer: Cochlear implant for children...what do you think of it?

Betty: People are different. For example, my friend really loves it while my other female friend doesn't like it.... So people vary in terms of liking it or not. It depends on people if they can get used to it or not.

Interviewer: So you feel that CI is the child's decision or parents'?

Betty: The child should make the decision.

Interviewer: Why?

Betty: Because parents don't know if the child likes it or...they need to learn like if the hearing deteriorates to need a CI and the person wants to hear enough to want one. It depends on the child, not the parents' desires. Parents tend to want the child to hear, so I think the child needs to make the decision first to see if he really wants to hear or just feels fine with deafness.

(later)

Interviewer: Did you have a hard time making the decision?

Betty: I was really profoundly deaf already, so I didn't know any different. I just listened to my parents and ask the parents if it's really good. They said they heard it's supposed to be really good, so I said, "Oh, OK, fine." I kind of went along with it.

Betty and Terri's accounts demonstrate that the respondents in this group feel marginalized. External factors, such as the desires of parents and hearing people, tend to propel many to receive a cochlear implant or to refuse having one. There is a relationship between perceptions of the others and their marginalized self-identification.

Heather: It's hard for me to answer. The children are too small to be able to make the decision, even if I was happy with it, it didn't mean all children are happy with it, too. It's an individual thing. It also depends on the situation if the child is in a town with a few or almost no deaf people and the parents don't know any sign. Maybe a CI is then recommended. Well, it's really sticky. Sometimes I

support that and sometimes I don't. It depends on individual situations....

Heather also explains that since she is in both worlds and a cochlear implant may help, although perhaps not.

Heather: Sometimes I feel accustomed to hearing things with CI, and then sometimes I just forget about it and not use it because of the silence that I am so used to. I don't know why. Sometimes I want to use speech and sometimes not. I sign exclusively with the deaf and use speech with the hearing. It's really up and down. Sometimes I get annoyed by the noise in the classroom and I can't focus that way. So I simply turn CI off.... The older I get, the more I use it. The internal parts are of an old kind, a single channel, not multi-channel. And it still works!....

(later)

Interviewer: Suppose the internal parts break down, what is your plan?

Heather: Well, it depends. Sometimes CI really helps me function in the hearing world in school and at work, but I'm still involved in Deaf culture. So if the internal parts break down, I'll evaluate my involvement in hearing world as whether or not I'm very involved in it. Right now I think I'm more likely involved in the Deaf community. So it depends on the situation.

The general impression the responses gives pointed to weak group introjection, indicating high context dependency. Some of their friends are not opposed to the procedure, perhaps because they have friends with cochlear implants and thus are exposed to that technology. Other friends oppose the idea because they see it as "fixing" a person's deafness, illuminating their marginalized self-identification.

Deaf. The respondents in this group are vehemently opposed to the concept of cochlear implantation. They contend that a cochlear implant changes a person's life,

making the person lose his or her Deaf identity. They also view cochlear implantation as painful, a nuisance, and a technology that is likely to fail. They further perceive that being deaf does not imply they are missing out on something. Respondents with deaf family backgrounds perceive their parents as anti-cochlear implanters. Those with hearing parents either raise the issue or are perceived as unaware about the technology. Their friends are primarily against cochlear implantation, and they feel that their hearing friends merely go along with their perception about cochlear implantation.

Patty's experience and perception about cochlear implantation as the hearing way of curing deafness and the medical profession's way of marketing the technology are consistent with the views of culturally Deaf people.

Patty: What for try to fix the deaf to help them hear better? For one thing, I feel if implanted, the person loses the Deaf identity. I remember around in 1974 or 1975, I got a letter from south California that I'm one of the persons who can try it out...free hotel, Disneyland, so forth. They came to Utah to demonstrate, showing a film of a deaf person hearing music and bird after the surgery.... So anyway, I watched that film with the woman happy to hear the birds singing. I wasn't even inspired, no, and I turned down the offer. But because I was so satisfied with what I am, I don't need to become hearing with a CI. I wish they would stop trying to come up with more technology...they seem to try to fix the deaf's medical problem. That's more of medical view than cultural view. It's like if they do that, why not try to make the blind see. Yes, I know they try, but it's impossible, so why not say the same about the deaf? I have nothing further to discuss. I'm totally against it, period.

Interviewer: What does your family think about it?

Patty: Funny thing, they never discussed it. They said the case is open and then closed. That's it. They don't want to discuss it. Why fix, fix, fix? Even my [hearing] brothers

thought the inventors of CI are just trying to make money, that's all.

The emotions are so profound and powerful. Their feelings about cochlear implantation apparently represent the respondents in this group. Such strong feelings are consistent with their positive self-esteem as deaf and hard-of-hearing persons and their strong group introjection.

Ralph's perception about cochlear implants best represents the feelings of the respondents in this group.

Ralph: I am against the idea of having cochlear implant. Because deaf is fine. I am deaf myself and I don't feel I am missing out something. We have services and everything, and accessibility for the deaf has increased. So I don't feel I am missing out something. I have what I need and I'm satisfied with my life. I don't need a CI. I don't like that idea and I don't support that idea.

Respondents in this group are familiar with their rights as Deaf and felt that their society is able to provide them with their communication needs, such as closed captioning, interpreting services, and TTY. Thus, they feel that having a cochlear implant is not necessary. Their positive self-esteem and self-confidence are consistent with their Deaf self-identification.

Scott: I disagree. Children born with deafness are normal! Signing is better than trying to be hearing. CI is so costly and the children suffer. But if the person himself wants to be hearing, fine. But not me as I disagree.

Their perception is that if a person wanted one, then that person probably is an out-group member, as in-group members will never want the device. This is an illustration of Deaf self-identification.

## Summary

In this chapter, the 35 respondents are grouped into categories based on their ethnic self-identification. Variable-to-variable pattern analysis is made for each group. Dependent variables are self-definition, self-evaluation, and group introjection. Independent variables addressing diversity issues include percentage of deaf and hard-of-hearing students in classroom, hearing culture, Deaf culture, discrimination, hearing and Deaf habits, teasing by the hearing, and cochlear implantation.

Pattern analysis consistently illuminates the effects of family and education backgrounds on the respondents' self-identification as delineated by the identity theory and social identity theory within the framework of symbolic interaction. The analysis also demonstrates that there are three types of identification: non-Deaf, marginalized, and Deaf. Respondents not referring to their deafness fall in the non-Deaf type. Half-hearing and half-deaf, small "d" deaf, Deaf...never thought of which "d" or "D," and Deaf converts are the marginalized type. The Deaf type includes the big "D" Deaf. The final chapter includes a summary, discussion, and conclusions on three types of self-identification from the theoretical perspectives of personal identity and social identities.

## CHAPTER V

### SUMMARY AND CONCLUSIONS

#### Introduction

This study attempted to understand the consequences of family and education backgrounds on the Deaf self-identification for deaf and hard-of-hearing persons. The methodology is qualitative, in which personal semistandardized interviews were conducted with 35 deaf and hard-of-hearing respondents in Utah. Using Kinket and Verkuyten's (1997) three levels of ethnic self-identification approach, the researcher explored patterns of personal and social identities of the respondents. The theoretical perspective of identity and social identities within the framework of symbolic interaction was used to analyze the respondents' self-identification as deaf and hard-of-hearing persons.

Many of the findings of this study lend support to the theoretical and empirical findings discussed in Chapter II and the research expectations as outlined in Chapter III. The findings are summarized in this chapter. Based on the identity and social-identity findings in this study, the researcher categorizes respondents into three group types: non-Deaf, marginalization, and Deaf. The first type are respondents who do not name "Deaf" as an identity. Half-hearing and half-deaf, small "d" deaf, Deaf...never thought of which "d" or "D," and Deaf converts fit into the second type, "marginalization." Although Deaf converts identify themselves as having Deaf identity, their levels of ethnic self-identification indicate marginalization. Those with big "D" Deaf identification are



categorized as strong in their Deaf identity. Finally, this chapter addresses social policy issues that follow from the findings of this study.

### Non-Deaf Group

These respondents recognize they had hearing loss, but their identity is not expressed in terms of being deaf. All of the “non-Deaf” identity respondents come from hearing family and public-school backgrounds.

Although some of their parents (primarily mothers) use sign language, none of their siblings knew sign language. So communication and interaction in the home are primarily oral-aural. Nine of 11 respondents attend public schools. In the public school, educators typically increase the person’s time in the inclusive setting as the person progressed in his or her education. This sent a message that they are categorized with hearing children. Thus, the respondents self-categorize themselves as “normal,” not Deaf in their identification.

Respondents further describe themselves in various roles that have no reference to their deafness. Thus, their deafness has little salience for their identity. Although the respondents exhibit some struggles with their role-sets, they demonstrate overall neutral self-esteem, but as non-Deaf persons. Their non-Deaf self-evaluation is associated with their hearing family background and public school background. An all-hearing environment provides the respondents with a life meaning, endearing the nonsaliency of their deafness to their role-sets.

The respondents’ level of commitment, emotional involvement, and feeling of belonging to non-Deaf groups shows uninvolved. They are not personally affected by

stereotypical comments of their non-Deaf contacts. The respondents generally feel that the stereotypes do not reflect on them. Thus, the respondents demonstrate medium group introjection. The implication of being deaf and hard-of-hearing in an all-hearing environment appears to shape their self-perception. Although they know they are deaf, they apparently perceive that they are able to pass psychologically into the hearing group. Their self-perception may explain their medium level of group introjection. Thus, their group introjection is shown to be context dependent.

Although their experiences with diversity issues in school, at home, and with friends all indicate immense socialization into the ways of the hearing world, they continue to acknowledge that they are persons with hearing loss. In school, the respondents indicate that they are explicitly taught to either speak orally or use a form of MCE. They socialize mostly with hearing people, such as hearing family members, hearing teachers, and hearing peers. Although the respondents are exposed to the hearing world information, they still do not show the shared perspectives of the hearing world, demonstrating very little in-group solidarity. After high school, most of them begin learning ASL and participating in the Deaf community.

Their experiences also illustrate the respondents' hardships with their teachers, families, and hearing peers. Examples of hardships include their family and school's attempts to make them think and learn aurally, and intense demands on them to depend on and respect hearing people. Instances of images of difference from their hearing peers concern being discriminated against and teasing by the hearing. Their experiences may explicate their seeming lack of motivation to adopt behavioral strategies for maintaining in-group/out-group comparisons that favor the in-group, and thus, the self.

Although their self-identification is non-Deaf, they lack the shared perspectives of hearing people. Their position on cochlear implantation illustrates their dissimilarity from the perspectives of the majority of hearing people. Contrary to many hearing people, the respondents feel that the decision to receive a cochlear implant belongs to the deaf person. The respondents further attest they do not want one for themselves, demonstrating disaccord with the views of the hearing world. This has a social-identity implication in that the respondents do not show much solidarity with their in-group.

This study finds the social group of the respondents in the non-Deaf group to be primarily hearing; however, the respondents still experience dissonance with the hearing world. Their daily struggle with oralism, difficulty in the home and in the school, and job discrimination demonstrate discord with their personal and social identities. Yet, their extensive socialization into the ways of the hearing world in the home and at school apparently are associated with their non-Deaf self-identification.

### Marginalized Group

Four special classes, half-hearing and half-deaf, small “d” deaf, Deaf...never thought of which “d” or “D,” and Deaf converts, perceive themselves to be deaf. They acknowledge a Deaf identity but face issues of marginalization. They have the perception that others treat them as deaf persons who can talk or act like hearing people. Their family composition is primarily hearing with four out of twelve respondents having one deaf parent. Those, whose families have one deaf parent, use speech, MCE and/or home signs to communicate with them. Others with hearing families have siblings who know some sign language. Their education background is primarily in public school. Four

respondents have some years of residential school experience. There is a relationship between their family and school's perception of the respondents as deaf and hard-of-hearing persons, who can talk or act like hearing persons, and their marginalized self-identity.

The respondents' self-esteem is negative in terms of their inner conflict as deaf and hard-of-hearing persons. They feel they are perceived as "hearing" by others. Their daily struggles as deaf and hard-of-hearing persons are, thus, salient to their identity when describing their role-sets. The "hearing" treatment from their families, schools, and friends is associated with their marginalized self-evaluation.

The marginalized respondents' level of group introjection is found to be typically context dependent. Because they feel they are deaf but are generally perceived as "hearing," they experience an inner conflict about stereotypical comments about in-group. Thus, their social identity has not become the salient basis for self-regulation. The respondents also do not demonstrate a strong motivation to adopt behavioral strategies for achieving in-group/out-group comparisons favoring the in-group and the self.

Their diversity experiences in the home and in the school provide the respondents with the sense of belonging to two worlds. Although hearing culture is prevalent in their environment, the respondents generally feel it is almost inaccessible and oppressive to them. They also perceive that the attitudes of their families and schools about anything pertaining to the realities of being deaf are discriminatory. They have the recollection of being constantly told to act and think "hearing-like" to show respect to the hearing and to be well-mannered. In response, they go along with the social rules, yet do not feel

connected to them. When they come into contact with Deaf culture, they feel “emancipated,” enjoying the ways of the Deaf world in the areas of ASL usage, deaf habits, and social interaction. However, the Deaf culture acculturation, albeit superficial, typically takes place outside of the home and school in their teenage years and sometimes in their adulthood. Their experiences, thus, have relationship with their marginalized self-identification.

When teasing by hearing persons occurs, the respondents, in response, become violent, angry, and aggressive. The respondents make little effort to verbally resolve the teasing and/or educate the hearing about deafness. Their responses manifest the respondents’ low level of categorization of self and others into in-group and out-group. The respondents demonstrate to have a badly defined self-concept, for they report they can move from one group to another and interact in their new setting in many ways. Their group membership shows to be “free of constraints.” Yet, they express feelings of not being fully accepted by the majority. Thus, their low level of categorization conforms to their marginalized identity, accentuating their perceived dissimilarity to people’s cognitive representation, such as prototypes of the defining features of the group. The respondents perceive that they are deaf and hard-of-hearing but also hearing, demonstrating that their sharing of beliefs, attitudes, and behaviors of the in-group are not well defined. Their marginalized world is associated with their low level of categorization.

Despite the perceived attitude of others that they are “hearing who happen to be deaf also,” the respondents do not generally share the perspectives of Deaf and hearing people. Except for one respondent, those who do not have a cochlear implant are

opposed to it and do not want one. However, those with cochlear implants attest that a cochlear implant helps them function in the hearing world but argue that the decision of cochlear implantation must be the deaf person's. Their positions on cochlear implantation apparently illuminate their difference with the views of the Deaf world and the hearing world. Their responses show a low solidarity with their in-group, explaining their marginalized identity.

The respondents typically experience disaccord with the Deaf world and the hearing world. Their inner conflict as deaf and hard-of-hearing persons, who are typically treated as "hearing" by their families, schools, and friends, is associated with their marginalization. They feel liberated when in the Deaf community, and yet, members of the Deaf community treat them as "hearing-like." Many respondents get along well with hearing people but do not feel connected to them. They also perceive that the hearing world is inaccessible to them. Thus, there is a relationship between their perceptions of self and their social world and their marginalized self-identification.

### Deaf Group

Respondents with strong Deaf identification are classified as Deaf persons. They have the perception that they are Deaf and enjoy discussing the Deaf experience. Their "Deaf-friendly" family background and "Deaf" school background are associated with their Deaf self-definition.

Although slightly more than half of the 12 respondents have hearing families, nearly all their families communicate with them in sign language. So communication and interaction in the home accommodate the respondents' visual orientation. Their families'

attitude towards the respondents as deaf and hard-of-hearing persons is sensitive. The use of sign language makes the home “Deaf friendly.” This has a positive relationship with their Deaf self-identification.

Eight out of 12 respondents also have residential school experience. Four of the eight respondents have attended a secondary residential school on Gallaudet University campus, and one has attended a public school and a residential school out of state. Four respondents also attend Gallaudet University. Their out-of-state school and Gallaudet University experiences give the message to the respondents that they are categorized with other Deaf people. The remaining four respondents, having attended public school all their lives, receive intensive exposure to Deaf culture outside of the classroom. All respondents have numerous socialization opportunities with members of the Deaf community in their junior high and high school years. They receive the message from others that they are perceived as Deaf persons.

The respondents with residential school experience describe themselves in various roles that have little reference to their deafness. It demonstrates that these respondents perceive themselves as being in the “Deaf majority.” Being in the Deaf environment provides them with the perception that they are not in the minority, and thus, the Deaf role has little identity salience. However, the respondents with public school background make numerous references to their deafness when self-describing their role-sets. Apparently, these respondents perceive that their Deaf identity differs from the hearing majority. Thus, they mention their Deaf identity as their spontaneous self-description.

Regardless of their self-descriptions, the respondents demonstrate positive self-esteem as Deaf persons. Their family’s unconditional acceptance of them as persons with

hearing loss by communicating with them in sign language is associated with their positive self-esteem. The respondents' socialization with the Deaf community during their formative years also is related with their positive Deaf self-esteem.

Because the respondents' Deaf self-identification places them in the minority status, the level of commitment, emotional involvement, and feeling of belonging to their Deaf in-group is excessive. The respondents are personally affected by both positive and negative stereotypical in-group comments, showing strong group introjection. The life experience of being deaf and hard-of-hearing in a "Deaf friendly" environment augments their Deaf self-perception. As a result, they believe they cannot pass psychologically into other groups. Consequently, they furnish a widely shared evaluation of their group and of its members, relative to other relevant social categories. Because their social identities as Deaf persons have these important self-evaluative consequences, they are strongly motivated to adopt behavioral strategies to maintain in-group/out-group comparisons favoring the in-group, and thus, the self.

The respondents' experiences and exposure to diversity issues are extensive. Although all respondents contend that hearing culture is ever-present in the curriculum, their comments about hearing culture as an integral part of the curriculum are negative. They express stereotypical perceptions about hearing aids and speech, demonstrating their out-group evaluation to be consensual of Deaf culture. However, they share a positive evaluation of written English, which is accessible visually. The accessibility of written English is widely supported by the Deaf community, and this explains their positive perception of learning written English. Their stereotypical and discriminatory comments show relationship with their intensive exposure to Deaf culture in the



residential school, at Gallaudet University, and/or in the Deaf community.

Their considerable exposure to Deaf culture allows the respondents to have acute perceptions about discrimination, teasing by the hearing, and hearing and deaf habits. They recognize subtle discriminatory acts against their deafness and teasing by the hearing in school and in the public. Also, they have keen knowledge about both hearing and deaf habits, which are learned through socialization. In response, the respondents create favorable in-group comparisons with the hearing people by stereotyping and/or educating the hearing. Their “minority” social categorization explains their favorable in-group comparisons. Such social categorization tends to exert its stereotypical intergroup effects because it provides the respondents a way to enhance positive in-group distinctiveness. Also, the act of self-enhancement guides the social categorization process in making comparisons between the Deaf and hearing norms and stereotypes that favor the Deaf group.

When discussing cochlear implantation, the respondents’ perception of the stability and legitimacy of intergroup status relations is illuminated through their responses. Their anti-cochlear implantation perception implies that they believe that the Deaf in-group’s lower status position is illegitimate and unstable, that passing was not viable, and that a different social order is achievable. This explains why the respondents demonstrate much solidarity and engage in much direct intergroup competition. Through categorization and self-enhancement processes, the respondents favor the in-group by identifying themselves with the in-group with their caricatured anti-cochlear implantation position.

The respondents, thus, experience harmony with the Deaf world. Their sharp

perception and acute knowledge about Deaf culture and diversity issues illuminate conformity to their personal and social identities. There is relationship between their socialization into the ways of the Deaf world in the home, in the school, and/or in the public and their Deaf self-identification.

### Conclusions

The salient identity issues are monolingualism versus bilingualism, and monoculturalism versus biculturalism as found in the family and education institutions. Although the family goals have typically been to raise well-rounded deaf and hard-of-hearing individuals, hearing families are found to be primarily monolingual and monocultural and deaf families to be typically bilingual and bicultural. The types and availability of information may be factors to their interaction with their deaf and hard-of-hearing children. Contrary to urban families, many rural families do not have access to information about deafness and the Deaf community. Internal family conflicts about how to raise a deaf/hard-of-hearing child often occur due to differing perspectives of what is right for the child. This may have contributed to slowing of the process of establishing a strong positive self-identity. Family rearing approaches apparently play a large role in the deaf and hard-of-hearing persons' self-identification. Further, the education goals as enacted in Public Law 94-142 (also known as Individuals with Disabilities Education Act) have been to integrate deaf and hard-of-hearing children into the hearing society in addition to the Deaf society. The findings of this study have shown this may not be the best solution. Nonetheless, the respondents report there are some school personnel who attempt to make the school experience positive for deaf and hard-of-hearing children, yet,

the overall system prevents major changes in the deaf experience. Curriculum and teaching methods found in schools are typically monolingual and monocultural, promoting the anti-Deaf atmosphere. The teacher training program and insufficient information about deafness and Deaf culture may have an impact on their approach to education. Monolingualism and monoculturalism may explain the respondents' levels of ethnic self-identification and social context.

If the integration of the deaf and hard-of-hearing into the hearing and Deaf societies is the goal of families and schools, then the bilingual and bicultural approach must be championed in the family and education institutions. School personnel need to receive appropriate information to integrate the medical and cultural models of deafness into the curriculum and in the language of instruction. Families need to have access to information to acquire both the medical and cultural models of deafness upon detection of their children's deafness to achieve a bilingual and bicultural atmosphere in the homes. Consequently, the effects of bilingualism and biculturalism in the family and education institutions on the self-identification of deaf and hard-of-hearing individuals may be more positive.

#### Recommendations for Future Research

Although the findings are consistent with the literature on various ethnic groups, there are limitations inherent in this study. The limitations concern the sample size and diversity of the respondents, and the effects of cochlear implantation on the self-identity of cochlear implant recipients. Future research efforts in this area should increase the sample size and include respondents from diverse backgrounds.

The findings regarding the respondents' experiences in the residential schools and public schools out of state consistently point out the value of the integration of biculturalism in the curriculum. It may be of interest to learn more of the experiences of deaf and hard-of-hearing persons and their school backgrounds in other states, especially those with bilingual-bicultural education background, and how their backgrounds may have a relationship with their self-identification. In addition, this study includes only four cochlear implant recipients, so the findings on their self-identification should be considered preliminary. Thus, future research efforts in the self-identification of cochlear implant recipients should be undertaken. Cochlear implantation and its effects on self-esteem, self-confidence, and self-identity are quite unknown. Therefore, it is of sociological interest to learn more of the consequences of childhood cochlear implantation on deaf and hard-of-hearing persons' self-identification, and their integration into the hearing or the Deaf world.

This research uses the approach of personal interviews with deaf and hard-of-hearing respondents by a deaf researcher. This approach is groundbreaking because it opens communication of deaf and hard-of-hearing subjects within a scholarly structure. Sociological information on deaf and hard-of-hearing subjects is often quantitative, giving the subjects limited "voice." Also, sociological studies on deaf and hard-of-hearing people are often conducted by hearing researchers, who have limited experience in deafness and knowledge of sign language. Future research on deaf and hard-of-hearing persons should continue with this approach, giving "voice" to deaf and hard-of-hearing respondents.

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APPENDICES

Appendix A. Informed Consent Form

**Informed Consent**  
**The Effects of Family and Educational Experiences**  
**on the Personal and Social Identity of**  
**the Deaf and Hard-of-Hearing Persons**

Dear Study Participants:

Thank you for agreeing to participate in a study for a doctoral dissertation research project from Utah State University. The Utah State University code of ethics for research requires that all participants in a study be informed of the project's purpose and benefits, the research methods that will be used, the potential risks that participating may incur, and the right of the participants to have more information at any point during the study process. You are a voluntary participant, and as such are free to withdraw from the study at any time without any consequences by submitting a letter to that effect to the Principal Investigator. Your signature at the end of this consent form will signify that you voluntarily consent to participate in this study.

This project is a study of deaf and hard-of-hearing people's personal and social identity. The purpose is to develop an understanding of identity on the basis of family and educational backgrounds. Never before have the implications of family and educational backgrounds on Deaf persons' identity been studied empirically. This information will be useful for guiding parents, teachers, and the community to instill and enhance positive identity among deaf and hard-of-hearing young persons. This study is descriptive, not evaluative; it will look at how family and educational experiences influence personal identity. The study is grounded in scholarship and will not make subjective, personal evaluations about individual deaf or hard-of-hearing respondents.

In order to complete the study, I (Petra M. Rose) will interview each participant for about one to two hours. During the interview, I will ask questions about family and educational backgrounds; feelings about sign language, Deaf culture, deafness as disability, and deaf people; and how the interviewee views himself or herself as a deaf or hard-of-hearing person. This will be accomplished entirely at the convenience of those interviewed.

Interviews will be videotaped, so that I can review them. To maintain confidentiality, for the purpose of the study, only pseudonyms will be used in reporting the research. All videotapes and interview notes will be collected solely by Petra M. Rose and will be kept in a locked room. Only Petra M. Rose, Dr. Gary Kiger, and the dissertation committee members have access to the videotapes and notes. After the study and professional publications are completed, videotapes and notes will be kept by Petra M. Rose.

Two copies of this consent form have been given to you. Please sign one of them and return it to Petra M. Rose. The second copy is for your personal records. If you have any questions, please contact either Dr. Gary Kiger or Petra M. Rose. Thank you.

Sincerely,  
 Dr. Gary Kiger (Principal Investigator)  
 Department: Sociology  
 Sociology  
 435-797-1235 (V/TTY)

Petra M. Rose (Investigator)  
 Department: Sociology  
 Sociology  
 435-797-1235 (V/TTY)

\_\_\_\_\_  
 Participant's Name

\_\_\_\_\_  
 Participant's Signature

\_\_\_\_\_  
 Date

Appendix B. Semi-Structured Interview

## SEMI-STRUCTURED INTERVIEW

**Self-Definition:**

*(The questions are open-ended. When needed, I will probe for more explanation.)*

What do you call yourself? For example, I may call myself as an American. Or I may call myself as a Deaf woman. Or yet I may call myself as a white person. So what do you call yourself to be? Can you explain why you call yourself that way?

**Self-Description:**

*(Again, it is an open-ended question and I will probe as needed.)*

Give ten descriptions of yourself. For example, I may describe myself as a mother. I may also describe myself as a Mormon. What are the ten descriptions of yourself?

Then tell me which one is most important to you. Why?

**Self-Evaluation:**

*(Depending on the respondents' self-description, the questions asking about their feelings being what they consider themselves to be are answered by "agree" or "disagree." Then open-ended questions are asked for further explanation.)*

I am going to ask you some questions. Answer if you agree or disagree. Then, for each statement, please tell me more about your agreement or disagreement with the statement.

I am satisfied to be...*(For example, I first described myself as a mother, so this one will be phrased as "I am satisfied to be a mother." I then described myself as a Mormon, so the next one will be phrased as "I am satisfied to be a Mormon." And so forth)*

I am sorry to be...*(Ditto here.)*

I feel good about being...

**Introjection of Group:**

*(Depending on the respondents' self-definition, the questions are answered by "agree" or "disagree." Then open-ended questions are asked for further explanation.)*

I am going to ask you some questions. Answer if you agree or disagree. Then, for each statement, please tell me more about your agreement or disagreement with the statement.

If someone said something positive about...people, would you feel almost as if they had said something positive about you?

What about if someone said something negative about...people, would you feel almost as if they had said something negative about you?

**Diversity:**

*(The following open-ended questions attempt to draw some more self-identification information based on social context.)*

About what percentage of deaf and/or hard-of-hearing students were in your class when you were in elementary school/junior high school/high school? *(This is a recall question.)*

Hearing culture is where English is used, music is the thing, sounds are more important than what you see with your eyes. Did your classmates talk about the culture of hearing people? Please tell me more. *(This is a recall question.)*

Deaf culture is where ASL is used, eyes are more important than sounds, music is not as important, and deaf schools and clubs/organizations are central. Did your classmates talk about the culture of deaf people? Please tell me more. *(This is a recall question.)*

Here are examples of discrimination, some overt and some more subtle. A deaf or hard-of-hearing person might not be hired to be a receptionist because he or she could not answer voice calls. Or a deaf or hard-of-hearing person might lose his or her turn in ordering food at a fast food restaurant because he or she was writing his or her order on a paper and the worker, instead of waiting for the person to finish writing down the order, asked the next person in the line to go ahead and place the order before the deaf or hard-of-hearing person.

1. Did you sometimes talk about discrimination against persons who are deaf or hard of hearing in school? Please give me an example and tell me more about the situation. *(This is a recall question.)*

2. Do you or did you sometimes talk about discrimination against persons who are deaf or hard of hearing with your family? Among friends? Please give me an example and tell me more about the situation. *(The question is about the past and the present.)*

Did you sometimes talk in school about the habits of people who are hearing versus persons who are deaf or hard of hearing? Please tell me more about the situation. *(This is a recall question.)*

Do you or did you sometimes talk about the habits of people who are hearing versus persons who are deaf or hard of hearing with your family? Among friends? Please tell me more about the situation. *(The question is about the past and the present.)*

Were you or was someone from your class being teased because he or she is deaf or hard of hearing? Did your teacher do something about it? Did your family do something about it? Did you inform your teacher about this? Please tell me more about the situation. *(This is a recall question. If it never happened, then it would be a hypothetical question. If hypothetical, "what do you think your teacher or family would do?" and "what would you do?")*

Were/are you being teased because he or she is deaf or hard of hearing? Did/do you inform your family about this? Did/do you inform your friends about this? Please tell me more about the situation. *(The question is about the past and the present. If it never happened, then it would be a hypothetical question. If hypothetical, "what do you think your family or friends would do?" and "what would you do?")*

Today more and more deaf and hard-of-hearing children receive cochlear implant. Cochlear implant is a surgical procedure to put in electrodes with multichannels representing frequencies of sounds in the deaf person's cochlea behind the ear. What do you think about this? What do your family think about this? What do your friends think about this? Tell me more about this. *(The question is about the present. If it never happened, then it would be a hypothetical question. If hypothetical, "what do you think your family or friends would say about this?" and "what would you say about this?")*

### **Demographics:**

Is your mother/father deaf, hard-of-hearing, or hearing?

Does your mother/father sign? How well? How did she/he learn sign language?

Is any of your brother/sister deaf, hard-of-hearing, or hearing?

Do(es) your brother(s)/sister(s) sign? How well? How did she/he learn sign language?

What is the education background of your mother/father?

What is the education background of your sister/brother?

What is your education background?

What is the occupation of your mother/father?

What is the occupation of your sister/brother?

What is your occupation?

What is your family race/ethnicity?

## CURRICULUM VITAE

Petra M. Rose  
(March 2000)

## EDUCATION:

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## EXPERIENCE:

AMERICAN SIGN LANGUAGE PROFESSOR, University of Utah Communicative Disorders Department, Salt Lake City, Utah (starting date 8/00).

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AMERICAN SIGN LANGUAGE INSTRUCTOR, Weber State University, Ogden, Utah (9/98-Present).

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## PUBLICATIONS:

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