This paper describes the current state of education for deaf children in Central America and the Caribbean (with some mention of parts of South America), focusing on a historical description of events and forces impacting these regions; current educational philosophies; adult associations of deaf people; intra/intercountry networking; educational and medical aspects; and visions for the future. The countries included are: Guatemala, Honduras, Nicaragua, Costa Rica, Panama, Dominican Republic, Jamaica, Antigua, Dominica, and the Bahamas, with mentions of Argentina, Venezuela, Ecuador, and Colombia. The historic importance in deaf education of individual visionary educators or international organizations in particular countries is noted. The role of the International Center on Deafness at Gallaudet University (Washington, D.C.) is also noted. The influence of the "total communication" philosophy and the development of Associations of the Deaf are briefly discussed. The lack of professional training programs in this area is illustrated by a table showing training possibilities across Central America. Effects of the ownership of teacher preparation centers by otolaryngologists are also noted (such as a medical pathology approach to deafness). (DB)
A Comparative Overview of the Education of Deaf Children in Central America, the Caribbean and Parts of South America

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Abstract

The study is based on international data gathered by in region editors, updated and verified by the writer. These data will include: a historical description of events and forces which have impacted the regions; educational philosophies in place; adult associations of Deaf people; intra/intercountry networking; educational and medical tendencies; regional visions for the future. The study will portray a panorama of the education of Deaf children in a unique and large section of the world.
Introduction

In the mid-1980s, the writer gathered very comprehensive information regarding education and services provided to Deaf children and adults from virtually every country in the world. This information was intended to be part of a book. The project was approved by the Gallaudet University Press. Later, it was dropped.

Integral to this presentation is the role of the International Center on Deafness at Gallaudet University and its role in assisting countries in Central America, the Caribbean and South America. The primary purpose of the I.C.D. was to improve the education and services to Deaf persons. The I.C.D. served as a catalyst in bringing teachers, parents, Deaf adults, medical and other professionals together in various countries in the regions as well as in Washington, D.C. This paper, then, is a comparison of education and services over a 20 year period — 1975-1995.

Regions

In Central America the countries to be included are: Guatemala, Honduras, Nicaragua, Costa Rica, Panama and the Dominican Republic. Jamaica, Antigua, Dominica and the Bahamas constitute the Caribbean group. Time may not allow for parts of South America, however Argentina, Venezuela, Ecuador and Colombia will be mentioned.
Historically, the beginnings of work with Deaf children in the regions can be attributed to a visionary well-recognized educator from a particular country or an international organization such as the Commonwealth Society for the Deaf, founded by Lady Templar. Lord Templar, Lady Templar’s husband, was a distinguished diplomat and government official in Great Britain. Lady Templar started schools for the deaf in colonies of several continents. Other examples include: Dr. Fernando Centeno Guell a psychologist from Costa Rica who started a large institution to serve all types of disabled children and who influenced other countries in Central America to provide an educational system for their own children; the Asociacion Pro-Educacion De Los Sordomudos, Inc., was formed in 1968 in the Dominican Republic by a group of parents; Doña Christina Valentine de Martinez (a Deaf lady), organized the first school in Honduras and was supported by the Rotary Club; the Rotary Club in Nicaragua also lent strong support to programs for the disabled.

It is worth noting that often parents having a Deaf child or children became organized, found private or public sources of funding and moved forward with the education of Deaf children. Many of the Central American countries have experienced political unrest in the past. In spite of unsettled internal circumstances the majority of schools and programs for Deaf and other disabled children continue to function.
As previously discussed, Gallaudet University through its International Center on Deafness has played a key role in support and development of services for Deaf children and adults in these regions. Educational Resource Centers for the Deaf were established for Central America and the Caribbean in conjunction with the University of Costa Rica (Central America) and the University of Puerto Rico (the Caribbean).

Through these respective centers numerous congresses, workshops and other training sessions have occurred. Also, the I.C.D. conducted month-long annual seminars on the Gallaudet campus bringing together numerous colleagues from various regions. Through these activities many liaisons were formed which developed into networks which will be discussed later.

Programs in the Spanish-speaking countries were strongly influenced by the educational philosophies adhered to in Spain, Venezuela, Argentina, and Mexico. As an example, in Costa Rica, parents of means sent their children to a private oral school in Spain. Later, they established a private school in San Jose bringing a teacher with his family from Spain. This school was the only program for Deaf children for many years and was strictly oral and exclusive. Later, a school in Cartago modeled after the John Tracy Clinic was started. Argentina's early programs were strongly influenced by Italian educators and were consequently purely oral. The Instituto Oral Modelo trained many leaders from Latin America and strongly impacted the entire southern hemisphere.
Similarly, to the north, the Instituto Mexicano de Audición y Lenguaje in Mexico City, trained many teachers in the oral-only methodology.

As mentioned, some of the schools in English-speaking countries of the Caribbean were founded by organizations such as the Commonwealth Society for the Deaf (Lady Templar), the Red Cross, Rotary Clubs, etc. Because most schools in Great Britain were oral, the oral philosophy prevailed.

Thus, it was not until after 1974 that "another way" was introduced in those regions. That is, the "Total Communication" philosophy entered the scene, largely due to Gallaudet University. Gallaudet believed in the need for collaboration between teachers, parents, and Deaf adults. Regardless of their educational background, Deaf adults were by-and-large communicating manually. Teachers, parents, and other professionals had long been aware of this natural phenomena, but due to training, indoctrination and lack of information on total communication, they were reluctant to change. The Gallaudet I.C.D. initiatives soon provided a comprehensive philosophical and pedagogical base which caused a great deal of change throughout this part of the world.

Of significance in these changes was the inclusion of Associations of the Deaf in the process. Deaf adults were finally consulted as to their needs as well as those of the children. They played a role in training teachers in the use of their particular language of signs. They were authors and collaborators in the development of sign language.
books. Thus, their organizations became not solely social in make-up but educational as well. As an example, the Jamaican Association of the Deaf, operated three schools on their island. This empowerment of the Deaf consumer is still prevalent in most of the countries we are discussing. Costa Rica, Jamaica and Colombia, all manifest a strong Deaf presence due to well-organized Associations of the Deaf. Still, Deaf persons have not been evident on the "professional level." The reason is that most Deaf students leave school at 14-16 years of age. Very few complete a secondary school program. Also, opportunities to attend a college or university are almost non-existent.

The following table illustrates the situation in Central America in deafness-related professions.

**Professional Training**

<table>
<thead>
<tr>
<th></th>
<th>Guatemala</th>
<th>Honduras</th>
<th>Nicaragua</th>
<th>Costa Rica</th>
<th>Panama</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teachers (Deaf)</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>x**</td>
<td>x(OAS)</td>
</tr>
<tr>
<td>Audiologists</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Speech Pathologist</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>x</td>
<td>No</td>
</tr>
<tr>
<td>VR Counselors</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>School Couns &amp; Psychologist</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>x</td>
<td>No</td>
</tr>
</tbody>
</table>
As can be noted, Costa Rica has developed a preparation program. At least 2 Deaf persons are now teachers of Deaf children, perhaps more by now.

It seems, teachers, parents and Deaf adults through the 1970's recognized the shortcomings of a single approach to educating Deaf children. Children from higher socio-economic families, placed in a highly intensive, private oral, programs succeeded. The results of previous practice could now be viewed more objectively or at least with other options.

It should be mentioned that some of the resistance to considering other options was not entirely pedagogical. The key teacher preparation centers were owned and operated by medical doctors — otolaryngologists. The centers were generally family-owned and proprietorship inherited. Consequently, deafness was viewed as a pathology. Everything centered around defective hearing and how to repair it. The goal was to "fix deaf people up" and return them to society. Deaf children were not viewed as complete. The only measure of success was the ability to speak and speechread well.

Coupled with a pathological outlook was the constant search for the latest technological or surgical development that would be the panacea, the miracle, that would eliminate deafness entirely. Hence, a school or center in many of these countries would, often at great expense, obtain equipment developed in Europe, Canada, and the United States
which touted results which often were exaggerated. However, utilizing an "exotic" piece of equipment or technique attracted many parents still seeking the miracle.

With the emergence of cochlear implants, again, the shift to repair or to eliminate the disability received much attention and emphasis. Conferences in these regions were highlighted by otolaryngologists and researchers concerned with pathology — not people. Unfortunately, the microscope, audiometer and scalpel tells you very little about the person.

The Future — A Perspective

Significant changes have occurred in Central America, the Caribbean and South America in the past 20 years. These include:

- utilization of total communication in many schools;
- development of national sign language books;
- organized and active associations of the Deaf;
- accepting Deaf people as people;
- teachers, parents, students and Deaf adults working together.

Though this paper did not elaborate on South America, it should highlighted that in Ecuador the Fundacion Melvin Jones is alive and well, providing diagnostics, training,
conferences and also support to the Association of the Deaf. This is one example of "acceptance." Others can be found in Colombia, Argentina and Venezuela.

Finally, though there is a diminished interest and support for these regions coming from Gallaudet, key individuals in many countries have continued to provide leadership from within the region. The new movement is a bit analogous to colonialism. Though countries in the regions are often referred to as "developing countries," from my perspective they have "arrived." They are developed such that the future of Deaf persons is now in their hands and they can continue their excellent work without dependence on outside support.
References


