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## ABSTRACT

In this study, four hearing mothers with deaf children (ages 3-10) were interviewed about the process of choosing a mode of communication and school placement for their children. All of the children attended local public schools. The mothers' responses were examined in order to identify any common factors that contributed to the choice of public school placement rather than residential school placement, and common factors that indicated level of satisfaction with placement and communication mode. Results indicated a recurring theme of conflict, particularly in three major areas relevant to the deaf child: (1) the grieving process; (2) the cultural versus medical view of deafness; and (3) the school system. Results further indicated that the primary factor influencing decisions about school placement was location, and the child's apparent strengths were the leading factors in the choice of communication mode. All of the mothers were cautiously satisfied with the placement of their child, but were not against change if something better came along. The fundamental goals the mothers had for their children were for them to be able to make their own decisions about what they want to do in the future. (Contains 38 references.) (CR)

### Parental Attitudes Toward Public School Education for Deaf Students and Issues Effecting Placement Choices

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In this study four hearing mothers with deaf children were interviewed about the process of choosing a mode of communication and school placement for their children. All of the deaf children attended local public schools. The mothers' responses were examined in order to identify any common factors that: a) contributed to the choice of public school placement rather than residential school placement. b) indicated level of satisfaction with placement and communication mode.

This study focused on the insights of hearing parents whose deaf children attend public schools. This population was chosen because ninety percent of deaf children have hearing parents and there is a trend toward public school placement in deaf education. Furthermore, a majority of deaf students tend to graduate high school with approximately a fourth grade reading level. These facts indicate a need for research on the situation and needs of deaf students who attend public schools and whose parents are hearing. Exploring parental viewpoints provides an important perspective on the situation.

Letters requesting interviews were sent to thirty parents whose children were receiving deaf education services. Four mothers responded. The researcher conducted one interview with each mother at a location of the mother's choice. Each interview was audio recorded and lasted approximately one hour and thirty minutes.

Results indicated a recurring theme of conflict, particularly in three major areas relevant to the deaf child: the greiving process, the cultural versus medical view of deafness, and the school system. An unexpected, though not surprising finding pertains to the code-switching skills of the deaf children. Results further indicated that the primary factor influencing decisions about school placement was location, and the child's apparent strengths were the leading factor in choice of communication mode.

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# **Parental Attitudes Toward Public School Education for Deaf Students and Issues Effecting their Placement Choices**

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## **Introduction**

Parents want what is best for their children, and parents with deaf children are no exception. Unfortunately, they routinely encounter choices, which are surrounded by conflicts that lack straightforward answers. How do these parents decide what language and mode of communication to use with their children? With whom do they consult? How do they decide where their children will go to school? Are they satisfied with the choices they make? Providing answers to these questions may assist future parents with deaf children. In addition, by identifying strengths and weaknesses in service delivery, we can improve the outreach programs and educational resources that are available. Families with deaf children must be aware of their rights, their options, and the long-term effects of their choices. Well-designed family outreach programs and effective educational plans can be extremely helpful for all family members.

When exploring the reasons behind the choices that hearing parents make regarding their deaf children, several issues must be discussed. The first involves stress and the grieving process. The second deals with professional advice and outreach programs. A third area of concern entails points of legality and interpretation of the law. The fourth and fifth issues include trends in the education of the deaf, and the reasons behind them. Often in hearing families, the discovery of a child's deafness is not unlike a trauma or death in the family. Thus, the family experiences the process or stages of

grieving. Many parallels have been drawn between the grieving process after death of a family member and the grieving process after the discovery of a child's disability. During this stressful and sensitive time, the family must also meet with a variety of professionals, many of whom have strong opinions about what is best for deaf children. Parents often receive conflicting advice about what they should do and decide. Laws concerning special education have contributed to setting in motion several trends involving the education of deaf students. Other factors have also influenced parental decisions to follow the recent trends in deaf education. In the review of literature, each of these issues are discussed at length.

### **Literature Review**

Ninety percent of deaf children have hearing parents, most of whom have little or no previous experience with deafness due to its low rate of incidence. It is well documented that families, often including extended family members, go through the grieving process (shock, denial, guilt, anger, depression) when a child's deafness is discovered (Seabrook & Rodda, 1991; Watts, 1995; Konstantareas & Lampropoulou, 1995; Fisiloglu & Fisiloglu, 1996; Nybo, Scherman, and Freeman, 1998). The stress on the family has been found to be even greater if the child is prelingually deaf (Konstantareas & Lampropoulou, 1995). According to the family systems theory, the family is viewed as a system in which all components are interdependent. If a change, such as deafness or the discovery of deafness occurs in one member, all members are affected (Fisiloglu & Fisiloglu, 1996). Similarly, if one member of the family

experiences an extended period of denial, the progress of other members may also be slowed (Nybo, Scherman, and Freeman, 1998).

Individuals in the family develop different strategies for coping with the stages of grieving. A common first response for a mother is to assume the role of leader, gathering information for self-education and becoming the primary caregiver. She may benefit most from a family outreach group that can provide emotional and social support. A study to determine sources of stress for hearing parents with deaf children indicates that fathers may benefit more from informational support, learning about future and present options available to the deaf child (Meadow-Orlans, 1995). Not surprisingly, a father's attitude toward deafness is related to the language development of the deaf child (Hadadian & Rose, 1991). This relationship is important because even though their scores on the attitude to deafness scale in this study were related to the mothers' scores, fathers often assume a more passive role in rearing the deaf child. According to family systems theory, the functioning of the entire family can improve if fathers become more active participants.

With a little careful planning, parent/family outreach groups have the potential to provide enormous benefits for parents and children. Professionals and parents have similar ideas about which topics are most important to address in such groups. Both groups consider communication, education, and child management/discipline top priorities (Bernstein & Barta, 1988). Every outreach group must be customized to meet the needs of its participants, but some common considerations are time constraints and childcare. Outreach groups should also educate and encourage parents to become advocates for their children.

Over the years families have been assigned a variety of roles related to the special needs child. These roles have included: parents as the cause of the child's exceptionality, as part of the problem, as passive bystanders, the predominant importance of mother-child dyad, and the family as a single, general unit. The trend today includes viewing families as individuals with diverse needs and differences who influence each other and collaborate with professionals to address the challenges of the exceptionality (Turnbull & Turnbull, 1997). The more support families receive, the more time and energy they will be able to devote to the child's educational needs. Three broad themes: social/emotional support, informational support, and links to other services encompass the needs of most families.

There are some guidelines and topics that are important specifically for families with deaf children. Misdiagnoses and negative prior experience with professionals are common. Although these events cannot be altered, parents can be prepared for and supported in IEP conferences. In the IEP process, a specific sequence should be followed (Luetke-Stahlman & Hayes, 1994). First, an appropriate assessment should be conducted and the child's needs documented. Then the necessary support services should be planned, and finally, an appropriate placement is recommended and discussed. The recommendation is based on the child's needs. The popularity of full-inclusion may tempt some school officials to begin the process with a discussion about placement. However, an appropriate education is risked when the proper sequence is not followed.

A policy statement from the U.S. Department of Education (1992) directed school personnel to interpret the LRE (least restrictive environment) clause of IDEA (Individuals with Disabilities Education Act) with an emphasis on an appropriate

education, and act with caution before placing a single deaf child with hearing peers (Luetke-Stahlman & Hayes, 1994). Parents with deaf children should know that it is against the law for children to be placed at sites where their needs cannot be met. They should understand what their rights and options are regarding IEP conferences. Because local school personnel are not always knowledgeable about the specific needs of deaf students, parents must become the experts if they are to be effective advocates.

There was a time when most deaf children attended residential schools for the Deaf. Traditionally, this is where American Sign Language and Deaf Culture have been passed on from generation to generation. In recent years, however, the number of students enrolled in residential schools has decreased dramatically. Between 1982 and 1990, enrollment in 81 residential schools for the Deaf dropped from 13,545 to 9,210 (Craig, 1992). According to the final report to the National Institute on Disability and Rehabilitation Services (Moores, 1991), this trend toward non-residential school placements has occurred across the nation. The shift in enrollment coincides with the passage of PL 94-142, PL 99-457, and PL 101-476. These laws require that all children, ages 6-18 and 3-5 respectively, be provided with a free and appropriate public education in the least restrictive environment.

In the field of deaf education, a major concern is that the noncategorical provisions included in PL 99-457 will result in misplacement of professionals. In other words, personnel who are not qualified to meet the needs of the deaf are being placed in positions designed to provide services to deaf children. Furthermore, funding issues have become more complex. "In particular, because different agencies are responsible for funding children 0-2 years old and 3-5 years old... a very troubling gap in services

[exists] at a very critical age, between ages 2 and 3” (Craig, 1992). As a result, more children are receiving fewer services. There has been a major increase in the number of children receiving part-time services, and in the number of children receiving instruction primarily in the home. Children receiving individual instruction at home receive far fewer hours than those attending school-based programs do. Studies have been conducted to determine the advantages for deaf children with hearing parents who have participated in early home intervention programs. Results have shown slight, short term increases in receptive language skills. Long term results have been inconclusive. (Musselman, Wilson, Lindsay, 1988; Watkins, 1987).

A more recent study (Prendergast & McCollum, 1996) indicates that early intervention results may be improved by helping hearing mothers develop strategies for facilitating language that meet the needs of visual learners. For example, signing without speaking prevents the mother from assuming that the deaf child is receiving spoken input. Videotaping interactions and playing them back without sound shows what was available to the child visually. Early interventionists must be aware of these techniques and the logic behind them in order to support and educate hearing parents about the needs of their deaf children. They must also continually re-evaluate and adjust as the parents’ skills improve. With improved skills and increased knowledge parents will be better prepared to assist in the educational planning of their children.

The laws concerning special education services provide the opportunity for parents to become more involved in making educational and developmental choices concerning their child. In practice, this means that local public schools are required to consult and work with parents to determine the most appropriate educational program for



the student. Every local public school must provide students and their families with special education services when necessary. For many hearing parents with deaf children, this has been interpreted to mean that an alternative to sending their child away to school is available. They can place their child in the least restrictive environment at the local public school. However, it is argued that the least restrictive, or most appropriate, environment for deaf students, will not be found in most local public schools due to the lack of communication and socialization opportunities available to the deaf student. In addition, many parents have found that the path of least resistance (in obtaining services) will not be found in most local public schools either.

Yet, the trend toward local public school education continues. What factors influence the choices that parents make concerning the education of their child? My hypothesis was that awareness of available options and amount of prior experience with deafness would be the two main influences. Both of these factors were contributors, but not necessarily in the way that I had suspected.

A review of the available literature indicates that few studies have focused on factors influencing parental choice of educational placement and mode of communication for their deaf child. A few surveys and questionnaires provide some insight into the topic. It has been suggested that socioeconomic status may be a contributing factor in the choice of communication mode (Lerman, 1984). The sample in this study consisted of Hispanic Deaf families who were unemployed or low wage earners in a large city. Economic survival was a major contributing factor regarding the options available to these families. For families living in extremely impoverished conditions, the struggle for economic survival takes precedence over all other factors. Another consideration faced

by these families is maneuverability across three cultures: Deaf, Hispanic, and Hearing (mainstream American Hearing).

Another study suggests that residential school placement is often chosen because of communication and socialization opportunities (Bernstein & Martin, 1992). The researchers sent surveys to English speaking parents who had placed their children in residential school programs for the deaf in eight regions across the country. Another factor that influenced parents to place their child in a residential school was that the child would receive a better education at the residential school or that the public school program was inadequate. Many parents indicated that the information presented to them about primary advantages and disadvantages turned out to be of lesser importance based on their actual experiences. For example, “better education” was presented as a primary advantage, but parents indicated that socialization and the ability to communicate turned out to be more important advantages. More detailed information was not available from the surveys.

Seventy percent of the parents who responded reported that they did not receive information about placement options, and many of those who were given the information were not satisfied with the delivery of information regarding PL 94-142 and educational options despite the field’s emphasis on early intervention. This study also reveals that most parents were relatively satisfied with the residential school, and indicates factors that led to the decision to place children there. The choice parents make regarding school placement influence the future of both the child and the family. Understanding parents’ motives and the factors that influence this decision can assist in parent-school partnerships, service delivery and program planning. Because of the trend toward

nonresidential school placements for deaf children, it is especially important to explore the circumstances surrounding the decision to place children in local public schools.

Another critical choice which parents make concerning deaf children is the selection of the mode of communication (oral, manual, or both) and language (English, ASL, or other) that will be used in the family. Kluwin and Gaustad (1991) sent a questionnaire about socioeconomic status, communication practices, and educational values to 325 parents whose children were involved in a longitudinal study. 192 parents responded. They found the child's degree of loss, the child's preschool program, and the mother's level of education to be the best predictors of mode of communication. In addition, they found that other family members usually followed the mother's mode of communication. These findings indicate that mothers may assume a "leader" role in situations regarding the child. Interviewing mothers can provide more in depth information about the decision-making process, and illuminate other aspects of the "leader" role that might be common across families.

These studies provide a base, a starting point for further research. However, conducting interviews with hearing parents of deaf children in public school placements has some advantages. Interviews can provide in depth information and areas of conflict can be explored. The reasons behind the current trends in deaf education, such as increased placement in local public school settings, may be discovered and discussed.

## **Methodology**

How do parents with deaf children make decisions concerning the variety of options that they encounter, particularly with respect to language use and educational

placement? Are they satisfied with the choices they made and the education their children are receiving? The purpose of the present study is to collect data beyond what a survey or questionnaire can provide. In this study, elements that effect choices regarding 1) language or mode of communication and 2) educational placement were sought.

Semi-structured interviews were conducted with hearing parents of deaf children in order to elicit data that will contribute depth of understanding, and insight into the decision-making process. Letters of introduction that described the intent of the study and asked for volunteer participants were distributed to all parents whose children receive deaf education services in St. Tammany Parish Schools. Each letter contained a self addressed stamped envelope for replying ease. Of the 30 letters distributed, 4 were returned, including one from a parent outside of the parish who volunteered to participate. All of the participants were quite similar in several ways: married, most are college-educated, outspoken, upper middle class, white, mothers with one or two other children, and they all had unique circumstances compared to the majority of hearing parents with deaf children. See Table 1.

Table 1 Student Profiles

<u>name</u>	<u>age</u>	<u>gender</u>	<u>deg. of loss</u>	<u>1<sup>st</sup> amp</u>	<u>mother's educ</u>	<u>fam income</u>	<u>fam ethn.</u>
Matt	10	male	profound 90+	3 yrs	graduate school	\$50,000 +	white
Adam	8	male	severe 60-80	5 yrs	high school	\$50,000+	white/hispanic
Myra	3	female	mod/sev 50-70	18 mo	graduate school	\$50,00+	white/biracial
Kevin	9	male	sev/prof 75-85	2 yrs	college	\$50,000+	white

All names are pseudonyms. Christine's son Matt is a 10-year-old deafblind child. Laurie's son Adam is 8 years old. She is the daughter of Deaf parents, a CODA (children

of deaf adults). Debbie recently adopted a 3-year-old biracial deaf girl named Myra. Megan's deaf son Kevin is 9 years old and has had additional medical complications since birth.

There are implications regarding this sample. It is necessary to put the results of this study into perspective by noting that the participants were self-selected and all of them have unique circumstances compared with other hearing parents of deaf children. I can only speculate about why the more parents did not choose to participate. Perhaps the majority of hearing parents with deaf children are still struggling with the grieving process, possibly still in denial. Of course there are many other factors that may be involved, but denial seems quite plausible. Nevertheless, despite their unique circumstances, these parents have experienced many of the same feelings and faced many of the same problems as their "more common" counterparts, hearing parents of deaf children who do not have other extenuating circumstances.

Another limitation of this study, which is related to self-selection, is the small sample size. This study can be improved by further attempts to recruit more participants. However, for the purposes of this project, a pre-dissertation pilot study, the small sample size is not a major concern. The findings from this study can be used to prepare for a larger study. A major delimitation is that only a single round of interviews was conducted. In addition, an expanded form for gathering demographic information can also include a question that addresses the reasons behind the participants' willingness to participate. Although a question of this type would not provide direct information as to why some parents did not participate, it could provide some pertinent data.

## **Results**

What perspectives do parents have about education for deaf students, and why did they choose to place their children in the local public school system? How did they decide on a mode of communication and language? What did parents say about the decision-making process? A recurring theme that arose from the data was conflict. All of the participants spoke of struggles in three major areas: the grieving process, the debate between the medical versus the cultural view of deafness, and the school system. An unexpected though not surprising finding pertains to the code-switching skills of the deaf children. Each of these areas will be discussed at length.

### The Grieving Process

Three of the mothers revealed that although they had emotional reactions to the confirmation of their child's deafness, they felt that they had to be strong for their husbands. Though these initial responses varied among participants, three out of four had powerful reactions. Debbie was aware of Myra's deafness before the adoption took place and did not have to contend with the shock or surprise of discovering it. Laurie had suspected for a while that Adam was deaf, but he was repeatedly misdiagnosed. When his deafness was confirmed, it was still a blow. "I cried on the way home. We knew he would have a healthy, normal life... That whole denial that some parents have to go through was never there for us... What I was upset about was kids being mean... knowing what I went through just having Deaf parents."

Christine said that at first she was relieved because she finally understood why Matt had been having severe behavior problems. "I wasn't even that sad at first because

we had something we could work on...but we were very depressed and sad. You feel guilty. My husband still feels angry.” Megan was devastated upon hearing the news because deafness is permanent. “Everything else, we could work around it. We could fix it.” Both Christine and Megan spoke of how they have progressed through the grieving process over the years. They are now able to look back on it, and feel that they are in a position in which they may be able to help others. They remember the pain and frustration, but have moved into a level of acceptance.

All of the mothers admitted to being the primary decision-maker about issues concerning their child, even though the fathers were concerned and contributed on occasion. Mothers took on the responsibility of meeting with professionals and gathering information. They also noted that they were the most proficient signers in the family, and thus, had become the primary communicators with the deaf child, often acting as interpreter for the rest of the family. The evidence of the “leader” role assumed by these mothers supports similar findings and factors in previous studies in the field of deafness (Kluwin & Gaustad, 1991; Meadow et al., 1981; Greenberg, 1980).

### The School System

Laurie, Megan and Christine all felt that they had to fight to get what they needed for their children at school. Megan reported, “Kevin has had 12 major surgeries and we’ve come close to death more times than I can count. And nothing has been as stressful as school.” This stress seems to arise from the feeling of battle lines being drawn at IEP meetings. “It’s like running the gauntlet,” Christine said.

Sometimes teachers were reportedly defensive, thinking that the parents wanted them to let the deaf students have it easier—other times the parents worried that the teachers were not helping the students reach their full potential. In general, all of the mothers feel that they must repeatedly struggle with teachers, administrators, or both. There have been more positive meetings, based on mutual respect and a focus on the child's areas of strength. One reported obstacle preventing positive meetings is that administrators are not knowledgeable about special education in general and deafness in particular. This lack of knowledge can easily lead to unsatisfactory practices and the absence of appropriate placements in the system for particular children. Megan told of administrators who questioned the number of hours her son spent with the itinerant "hearing impaired teacher." Why does he have so many hours with her, they asked. "Um, because he's DEAF," she replied. Megan and Christine are teachers and both wondered how parents who are unfamiliar with the system are able to cope.

Participants had mixed feelings about existing advocacy programs for parents with deaf children. A well-known support group is reportedly very negative, providing speakers who advise parents not to expect much from their deaf children. Another group is designed to assist parents in getting what they want at IEP meetings, but none of the participants had received services from it yet. All of the participants expressed interest in school-based family outreach programs for families with deaf children, but as far as they knew, only the deaf school provides them.

Overall, the participants reported that they are tentatively satisfied with the placement and progress of their children. "We're doing the best we can with what we've got right now." All of the mothers are open to change in the future if something better



comes along. Myra is attending the deaf school as a day student, while Adam, Kevin, and Matt attend public schools near their homes and are mainstreamed for all or part of the day. The primary reason given by the boys' mothers for not sending them to the deaf school was its distance from their home. There were other concerns about the residential school being able to meet the needs of the children, but they were not explored in depth because sending the children away to school was not an option any of the parents were willing to consider. Laurie, Megan and Christine all mentioned moving to be near a deaf school as a past consideration or a possibility in the future. The greatest advantage for the children attending the deaf school, of course, is socialization with other deaf children and Deaf adults.

### The Debate

Historically, the field of Deaf Education has been filled with dichotomies. A current issue is the cultural versus the pathological view of deafness. Both sides of this long-standing debate about the nature of deafness have strong supporters. Hearing parents of deaf children often feel stuck in the middle with each side battling for their loyalty. "You get bombarded from both sides... They're gonna swing you to their side," Megan said. Laurie, Christine, and Debbie shared this sentiment. Debbie relates, "I guess in retrospect, the reason we got a variety of information was because we were the educated user. The speech people we hooked up with... didn't really give us a whole lot of information on sign language. We sought out that information." Laurie shares a similar story. "The audiologist who told me about Adam's hearing loss did not know my background. He proceeded to tell me what school to put him in and was right off the bat

putting down sign language.” Megan noted that the Deaf culture supporters are often more “militant” than the speech people.

Despite the pressure felt from both sides, all of the mothers reported that their decisions were most influenced by their child’s natural communication tendencies. They were all more interested in communicating with their child than aligning themselves with a particular side of the debate. Christine summed up the disbelief and shock expressed by each mother about parents who don’t learn to sign. “I can’t understand parents of deaf children who don’t learn sign language. It’s just beyond me... I’ve heard they exist out there.”

Kevin started signing spontaneously, using home signs. Megan realized that they needed to learn formal sign language so others could understand him. Christine and Debbie reported that Matt and Myra soaked up sign language “like sponges” and their language development increased exponentially. Laurie said, “One of the main reasons I felt comfortable putting Adam in the mainstream atmosphere was because I knew I could bring him to Deaf culture events... He knows sign language but he was oral before we knew he was deaf. We just kind of left him alone and let him decide.” All of the participants stressed that they were striving to leave both doors open for their children, to let them make their own choice in the future.

### Code Switching

All of the participants spoke of, or at least touched on the ability of their deaf children to naturally adapt the complexity and mode of their communication to match the skills of the person with whom they are communicating. Megan relates, “It’s strange to

watch Kevin. He signs four or five word phrases with me. My husband signs, but not as much as I do, so when he signs with my husband, he signs very slow...just two or three signs". Even at the age of three, Myra seems to have similar skills or awareness. "If she is saying or signing something I don't understand, she will sign it very slowly and deliberately," recalls Debbie. This topic was not discussed in depth, but similar findings have been reported in other studies. Rodriguez and Lana (1996) conducted a study to assess interactions between deaf children and a variety of communication partners. They found that the deaf children in their study made every effort to adapt to their communication partners and they responded in the same mode of communication used to address them.

## **Discussion**

Despite all the conflict and regardless of the different choices these mothers made, the guiding force behind their decisions was to prepare their child to make his or her own choices in the future. This desire to ensure the opportunity for their children to eventually make their own decisions regarding language and culture may be interpreted as an allusion to the bilingual-bicultural (Bi-Bi) philosophy. The terms bilingual and bicultural were not used by any of the participants, perhaps because they were unfamiliar with the philosophy or because it is not available in any schools near them. Not surprisingly, residential schools have been the first to incorporate the Bi-Bi philosophy into their programs. The broad goal of a Bi-Bi program is to enable children to function in more than one culture, Deaf culture and Hearing culture for instance. This functioning, of course, includes literacy in the language of each culture. The teacher

plays the role of modeling a bicultural life, showing how to link the parts together and how to understand them relative to one another (Padden, 1993).

Each of the three areas of conflict appear to have the same rather obvious solution: more support and better communication. Experts and professionals in the field of deafness must provide unbiased information that includes the whole spectrum of options. This includes doctors, audiologists, speech therapists, ENT doctors, educators and advocates. Meetings between professionals and hearing families with deaf children should be based on mutual respect and accentuate the positive. Bernstein and Barta (1988) found that parents have definite preferences for the timing of delivery and the degree of specificity of information. Though parents and professionals reportedly have basically similar ideas about important topics, each family or parent group will be diverse. Early intervention services for families, mandated by PL 99-457, are best designed with the input of those families. Lynch and Hanson (1998), Watts (1995) and others offer many useful tips concerning effective family intervention. At the very least, families must be adequately and accurately informed of available options, and empowered to make appropriate decisions for themselves and their children.

Guidelines such as these are prevalent in the literature regarding cross-cultural communication and school-community partnerships. The struggle with the grieving process eases over time, but seems to be greatly reduced by preparation for the confirmation of deafness through prior knowledge and realizing that the deaf child can have a healthy, normal life. If parents who recently discovered their child's deafness had exposure to healthy, normal Deaf adults the grieving process might be expedited. A number of suggestions that may be of assistance have been published including

subscribing to publications produced by Deaf people and “adopting” an older Deaf individual as a grandparent (Luetke-Stahlman, 1993).

Also, with the technology available today, misdiagnoses should be a blunder of the past. The three deaf children in the study whose diagnoses were not clear from the beginning are all over the age of eight. The three-year-old was correctly diagnosed at 18 months. Auditory Brainstem Response (ABR) tests are reliable, non-invasive tests that can be performed on newborns. The conflicts involving the school system and the deafness debate could also be avoided if professionals followed the guidelines for effective cross-cultural communication.

To summarize the results, the primary factors influencing the decisions each mother makes are the specific strengths and needs of her child. Residential school placement was not considered as an option, mainly due to its distance from the home. All of the mothers are cautiously satisfied with the placement of their child, but are not against change if something better comes along. The fundamental goal they have for their children is for them to be able to make their own decisions about what they want to do in the future. Three major themes involving conflict were common to all participants. These themes are the grieving process, the school system, and the debates about deafness. And finally, the ability of each child to naturally match the register of their communication partners was briefly discussed by all participants. The results from this study suggest that family outreach services are presently not as helpful as parents would like. Further research can be conducted focusing on a single theme, such as the school system struggle. Observations and interviews could be conducted with parents, teachers, administrators, and students. These interviews could be streamlined even more by

focusing on a specific aspect of the school, such as the literacy development of deaf students, including home literacy practices.

Another area of interest and concern is outreach services for hearing families with deaf children. This issue may provide a nexus for two areas seldom linked in the past. Carol Padden (1999) discussed the reinventing of the Deaf school at the William C. Stokoe and the Study of Signed Languages Conference at Gallaudet University. As the boundaries of the Deaf community become more fluid, the traditional residential schools have suffered in enrollment. Perhaps, a dialogue regarding education for deaf students can include the needs and issues facing hearing parents with deaf children as well as the needs and issues of concern in the Deaf community. Collaboration among Deaf teachers and researchers and hearing parents with deaf children just might produce an improved educational solution that is satisfactory to all.

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