COMMUNICATION CHALLENGES OF DEAF CHILDREN WITH THEIR HEARING FAMILIES IN SOME SELECTED SCHOOL OF ADDIS ABABA

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Communication Challenges of Deaf Children with their Hearing Families in Some Selected School of Addis Ababa

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Communication Challenges of Deaf Children with their Hearing Families in Some Selected School of Addis Ababa

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Abstract

This study investigated communication challenges of deaf children with their hearing families. In order to obtain relevant information in depth, semi-structured interviews were conducted with ten deaf children and their hearing families. Those who are learning in special deaf schools in regular classes, and used sign language from an early age had negative communication experiences at home. It was found that they could not achieve communication either in ESL or orally with their hearing families. The results of the study indicated that parents expressed different reactions as a result of having deaf and hard of hearing children. The stigma held by the family about the causes and consequence of communication influenced the children to feel embarrassed and disgraced. This may be one of the causes for deaf children’s to develop negative attitude towards their hearing families. The beliefs held by families of the deaf about the causes of their children’s deafness varies from real cause to sin, evil eye, curse, misdeed in previous life by parents and misfortune. The types of treatment sought by parents to get cure for their children varies from modern medical center to traditional healer, witchcraft, prayer, and holy water. Some parents believed that their children have less communication potential, unable to participate in families discussion, and unable to talk interact like hearing siblings. Those families who are in better educational level have positive perception about their deaf children and play positive role in the overall personality development of their children. This study suggests the importance of an early and mutual mode of communication between family members and the deaf children, regardless of the communication modality to ensure pleasant family communication interchanges and experiences. This could be taken into consideration by people involved in deaf education, including service providers, educators, parents, and deaf association etc.
ACRONYMS

PWDs – Persons with Disabilities
ENAD – Ethiopian National Association for the Deaf
ESL – Ethiopian Sign Language
UNCRPD – United Nation Convection on the Rights of Persons with Disability
NGO – Nongovernmental Organization
CBO – Community Based Organization
GOs – Governmental Organizations
# Table of contents

<table>
<thead>
<tr>
<th>Contents</th>
<th>page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgement</td>
<td>i</td>
</tr>
<tr>
<td>Abstract</td>
<td>ii</td>
</tr>
<tr>
<td>Acronyms</td>
<td>iii</td>
</tr>
<tr>
<td>1. Introduction</td>
<td>1</td>
</tr>
<tr>
<td>1.1. Background</td>
<td>1</td>
</tr>
<tr>
<td>1.2. Statement of the problem</td>
<td>3</td>
</tr>
<tr>
<td>1.3. Objectives of the study</td>
<td>5</td>
</tr>
<tr>
<td>1.3.1. General objective</td>
<td>5</td>
</tr>
<tr>
<td>1.3.2. Specific objective</td>
<td>5</td>
</tr>
<tr>
<td>1.4. Significance of the study</td>
<td>6</td>
</tr>
<tr>
<td>1.5. The scope and limitation of the study</td>
<td>6</td>
</tr>
<tr>
<td>1.5.1. The scope of the study</td>
<td>6</td>
</tr>
<tr>
<td>1.5.2. Limitation of the study</td>
<td>7</td>
</tr>
<tr>
<td>1.6. Glossary</td>
<td>8</td>
</tr>
<tr>
<td>2. Review of related literature</td>
<td>10</td>
</tr>
<tr>
<td>2.1. Introduction</td>
<td>10</td>
</tr>
<tr>
<td>2.2. Understanding and making sense of deafness</td>
<td>13</td>
</tr>
<tr>
<td>2.2.1. Deafness, language and communication</td>
<td>13</td>
</tr>
<tr>
<td>2.2.2. Implications of sharing or not sharing information and communication with deaf children</td>
<td>16</td>
</tr>
<tr>
<td>2.3. Convention on the rights of persons with disabilities</td>
<td>20</td>
</tr>
<tr>
<td>2.4. Impact of communication on deafness with hearing families’</td>
<td>21</td>
</tr>
<tr>
<td>2.4.1. The impact of deafness on early communication skill</td>
<td>22</td>
</tr>
<tr>
<td>2.4.2. The impact of deafness on early social interaction</td>
<td>22</td>
</tr>
<tr>
<td>2.5. An overview of deafness on early communication skills and social-cognitive development</td>
<td>23</td>
</tr>
<tr>
<td>2.6. Communication, attachment, and control</td>
<td>23</td>
</tr>
</tbody>
</table>
3. Methodology .................................................................................................................. 25
   3.1. Introduction ................................................................................................................ 25
   3.2. Research site and sampling method .......................................................................... 25
       3.2.1. Research site ...................................................................................................... 25
       3.2.2. The participant ................................................................................................. 25
       2.2.3. The variables .................................................................................................... 25
       3.2.4. Population and sampling technique .................................................................. 26
       3.2.5. Instrument ......................................................................................................... 26
           3.2.5.1. Semi–structured interview .......................................................................... 27
           3.2.5.2. Focus group discussion .............................................................................. 27
           3.2.5.3. Observation .................................................................................................. 27
       3.2.6. Recruitment and orientation of the field staff and field work .......................... 27
   3.3. Pilot study .................................................................................................................. 27
       3.3.1. Pilot site ............................................................................................................. 28
       3.3.2. The main study .................................................................................................. 28
   3.4. Procedure of data organization and analysis ............................................................ 29
   3.5. Summary ................................................................................................................... 30

4. Findings and discussion ................................................................................................. 31
   4.1. Introduction ................................................................................................................. 31
   4.2. Findings ....................................................................................................................... 31
       4.2.1. How do deaf children communicate with their hearing families? .................. 31
       4.2.2. Do deaf children assume that their family members understand them easily and exactly? .............................................................................................................. 37
       4.2.3. How do hearing families of deaf children equally share their knowledge, information and attitude with their deaf children? ................. 40
   4.3. Discussion .................................................................................................................. 43
5. Conclusion and recommendation .................................................................50

5.1. Conclusion ..........................................................................................50

5.2. Recommendations ..............................................................................52

List references

Appendix A: Semi-structured interview for Deaf children
Appendix B: Semi-structured interview for hearing families of Deaf children
Appendix C: Observation checklist on communication challenges of Deaf children’s with their hearing families
Appendix D: focus group discussion guide for hearing parents
CHAPTER ONE

1. INTRODUCTION

1.1. BACKGROUND

The overwhelming majority of deaf children (90 – 95 %) are born to hearing parents (Moores, 2001). Most of deaf children who are born to hearing families are likely to have had little or no experience with the norms, values or language of the Deaf community (Hindley, 2005). Because of the absence of any previous experiences with hearing loss, hearing parents experience a lot of challenges with upbringing of their children, especially with regard to their language, their social and emotional development (Hindley, 2005). Communication difficulties are among the major challenges hearing families of deaf children encounter every day.

According to Tirussew et.al.(1995), hard-of-hearing and deaf persons in Ethiopia account around 14.9% of the total population of PWDs. When we see the percentage that of persons who are deaf and unable to communicate with their hearing families, we can assume that, much emphasis and measures are not been taken by the concerned bodies to minimize communication gap between deaf children and their hearing families.

Loss of the sense of hearing negatively affects not only the person who suffers from it but also families who have a deaf child. It is imperative that professionals study impact of deafness on the family as well as the child (Felekech, 2000 cited in Moges 2003).

People with mild hearing loss are able to function with little adaptation in group and individual conversations. People with severe hearing impairments usually have difficulty understanding speech from a distance and may not be able to follow group conversations without the aid of an amplifier. People with profound hearing impairments cannot understand spoken language and speech by ear alone, even with amplification and must use other methods for communication (Martin, 1991).

When a child is unable to hear sounds clearly, significant language and communication problems may develop. For example, if a child has a problem of hearing certain speech sounds, he/she will not be able to produce those speech sounds later in life. This can have a direct and adverse effect
on communication interaction, which eventually leads to many problems. A child who is deaf may have difficulty in communicating with peers, developing relationships with friends, and accessing the social interaction is critical to communication development (Gearhert, 1988).

From the above facts, it can be said that deaf children lose not only their ability to use spoken language, which is a basic means of communication, but also their ability to hear sounds. This makes the situation for deaf children very difficult to have effective interaction with the hearing families, which in turn may bring about a feeling of inadequacy and confusion.

In view of this, Meadow and Schlesinger, (1971) noted that the basic deprivation of deafness is not the deprivation of spoken language for the acquisition requires fluent communication between children and mature language users, as well as intact sensory mechanisms to transmit linguistic information to the brain for smooth interpersonal relationships. The deaf person greatest effect on the developing child occurs with regard to language, both with receptive and expressive system. Children with hearing difficulty lag in vocabulary skills when compared with “normal” hearing children of comparable age (Meadow and Schlesinger, 1971).

This slow development of spoken language may be attributed to lack of necessary stimulation for the deaf to develop language skills, which directly affects the interaction to the families as well as with the society. Meadow (1980) is also of the opinion that deaf children are often viewed as lagging behind their peers in their linguistic development. This implies that deaf individuals are at a great disadvantage in acquiring the basic elements of spoken language for effective communication. This brings about serious difficulties in laying the foundations for positive and effective family interaction and developments. The deaf often feel rejected, less able and different from their hearing peers (Meadow, 1980).

Subsequently, such children perceive their communication styles as inefficient and inadequate. This affects the development of communication styles as inefficient and inadequate. Regarding this, Bench (1992) stated that hearing loss seriously affects the communication behavior of the deaf. This makes them feel isolated from their hearing peers.

Through communication, we perceive and understand our surroundings. It is learning to understand other people, and to talk to them, that are the real area of difficulty (Gregory, 1976). The deaf child with limited or even no understanding of what is said to him or her and not being able to take himself or herself can be cut off in many ways from what goes on around him or her.
and Gregory (1976) explained that in essence, this is the problem of communication. In a similar way, Best and Nilson (1984) supported this idea in that just as stairs can make a building inaccessible to the physically disabled individual in a wheelchair, the lack of accessible language communication makes the world of family, friends, and social relationship with other people inaccessible to the deaf.

Much more than just a loss of hearing is involved, the families’ whole world changes and feeling of guilt, confusion, and helplessness and both common and natural. The reciprocal nature of parent-child and child-child interactions cannot be overemphasized. The deaf child, hence, presents the family with specific problems that may result in shame, parental recriminations, denial, and restricted communication if adequate counseling is not received (Martin, 1991).

Parents’ intense and confused feelings culminate at times in withdrawal, rejection and anger, towards the child (Shapper, 1980; as cited in Sinkkonen, 1994). At this time, the deaf child develops unexpected behavior of fear, rejection, frustration, and depression.

The focus of this study, therefore, is mainly on the communication challenges of deaf children with hearing parents, people with the possible measures to be considered to overcome the problems.

1.2. STATEMENT OF THE PROBLEM

Children with a hearing loss have the same fundamental human right to equal access as any other child, regardless of the degree of their hearing loss, their financial circumstances or their preferred method of communication (Equal Status Act 2000).

At an appropriate stage, children need to be involved in decision making concerning the choices available to meet their communication, personal development and educational needs (UNCRC, 1989, Article 12).

It is partly through hearing that the human child acquires information and knowledge of the outer world and about the happenings within the immediate physical environment. Since hearing impairment tends to isolate the individuals, hearing impaired students are likely to face a number of communication challenges.
Research findings also suggest that the age at which hearing loss occurs affects the communication of deaf children with hearing families. Children with congenital hearing loss (present at birth) do not have the opportunity to practice the listening skills essential to develop speech and language which are basic for a person to have somehow good communication with his/her hearing families. Inevitably, congenital impairment affects every aspect of communication development from birth onwards (Sanders, 1988). Children with advent hearing loss (those who acquired hearing loss after they develop speech and language) may find it easier to develop communication skills; hence, they are socially adjusted to the hearing world. The later in life deafness occurs, the greater, the child’s linguistic capabilities are likely to be developed.

In an attempt to assess the communication challenges of deaf children, many researchers conducted on deaf children of deaf parents and it was found out that approximately ten percent of babies with hearing loss are born to deaf parents. Deaf children with deaf parents may have higher achievement levels as a direct result of close exposure to other deaf people. Because their parents are fluent in sign language, they usually experience language acquisition and family interaction earlier and at a greater rate than other deaf children. This prevents frustration for both parents and children and assists the child’s communicational development.

Because deaf parents understand their children’s condition, they seem better able to cope with any negative feelings that accompany diagnosis. Hearing parents of deaf children use spoken language as their primary mode of communication. The children’s first exposure to language is oral, whether comprehensible or not. Hearing parents are much more likely than deaf parents to view their child’s diagnosis as a tragic crisis. Hearing parents often express feelings of incompetence, self doubt, and sorrow. In some cases, the birth of a child with a hearing loss threatens family integration and destroys the balance of family relationship which in turn brings about adverse effects on the social development of deaf children (Meadow, 1980).

Taking the above into account there is a need to conduct studies on communication challenge of deaf children with their hearing families to identify the specific problems of children’s with hearing impairment. This study will attempt to explore the communicational challenges of deaf children with hearing families at Victory special class in regular school (Victory deaf school, now a days, students are learning in rental classes at “Tsehaye Chora regular school” until they
wind up the construction of their own buildings) and at Yekatit 23 Special class in regular school. The study, more specifically, tries to find answers to the following basic questions.

1. How do deaf children’s communicate with their hearing families?
2. Do deaf children assume their hearing family members understand them easily and exactly?
3. How do hearing families of deaf children equally share their knowledge, information and attitude with deaf children?

1.3. OBJECTIVES OF THE STUDY

1.3.1. General Objective

The objective of this research is to find out communication challenges of deaf children through their daily life; these difficulties may bring back effects on the child on day to day basis and activities development.

1.3.2. Specific objective

This research will focus on the following ideas to benefit the Deaf child and his family in their progress on communication. The specific goals are:

- To show the clear cause and the hardships that the Deaf children are facing in the daily life because of their communication gap with their families.
- To show what kind of communication consequences that the Deaf face by being unable to communicate with in their families.
- To assess communication challenges of children with hearing families in selected schools for the deaf.
- To look into parental feelings about the hearing loss and how it affects the communication and language development of deaf students.
- To examine deaf students perception about themselves regarding to inaccessible communication.
• To suggest possible solutions to the communicational challenges that children with hearing impairment face in home setting.

1.4 SIGNIFICANCE OF THE STUDY

Since the study focuses on communication challenges of deaf children with their hearing families, it inevitably leads the researcher into residents, as to examine relationships, and discuss with families as well as observing different communication methods. Therefore, the results of the study are expected to:

• Provide the necessary assistance for family members to understand the children’s with hearing impairment so that they can improve their communication method.
• Contribute to the understanding of environmental factors affecting communication and bring about relevant information for designing viable and home based intervention for better communicational and language development of the deaf.
• Provide the necessary assistance for parents to understand their deaf children so that they can create conducive communication settings for healthy family interaction and intimacy.
• Provide basic information for the concerned bodies like policy makers and interested groups to realize and overcome barriers, which operate against the communication and language development of deaf children.
• Serve as a stepping-stone for further research in the field.

1.5. THE SCOPE AND LIMITATION OF THE STUDY

1.5.1 The Scope of the Study

This study is delimited to Victory school for the deaf, which was originally established in 1995 E.C and Yekatit 23 special classes in regular schools, was established in 1997 E.C as a deaf school. Shortly after wards, following the trend of special school education, the school also admitted hearing students. Presently, there are 53 and 60 deaf students’ enrolled in each school respectively. From those hearing impaired students 10 of them are randomly selected, 5 from each school and 10 families of the deaf children were selected for this study.
1.5.2 Limitation of the Study

The scope of this study is limited to 10 deaf children and 10 hearing families this may cause the results to be less generalizable to the national. The data was mainly collected using an in-depth interview, formal observation and focus group discussion. The researcher believes, this instruments help to get further information about communication challenges of deaf children with their families.
1.6. Glossary

**Families**: refer to a people living together, a group of people living together and functioning as a single household, usually consisting of parents and their children.

**Challenge**: refer a difficult situation, to prove something difficult, and call on someone to fight or do something difficult.

**Communication**: refers to the act of sharing or exchange of information.

**Oral Method of communication**: it also called the oral-aural method, children receive input through speech reading (lip reading) and the amplification of sound, and they express themselves through speech (Moores 1996).

**Total communication**: it is a combination of the oral method plus the use of sign and finger spelling (Moores 1996).

**Deafness**: means a hearing impaired that is so severe that the child is impaired in processing linguistic information and communication through hearing with or without amplification, which adversely affects communication ability.

**Prelingual deafness**: refers to onset of hearing loss before the individual develops speech or language (Brill and Newman, 1986).

**Postlingual deafness**: refers to hearing loss which occurs after the individual has developed speech or language (Brill and Newman, 1986).

**Interpreter**: A person who uses sign language and/or finger spelling to translate spoken communication so deaf individuals can understand it.

**Sign language**: the natural language of the deaf (“hearing through the eyes and speaking through the hand”).
**Special Class:** is a class located within ordinary schools compound were hearing impaired students are attending their education in separate room.

**Disability:** Any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered “normal” for a human being.

**Hard-of-hearing:** means a hearing impairment, whether permanent or fluctuating, which adversely affects a child’s communication as well as family interaction performance, but it is not included under the definition of “deaf”.
CHAPTER TWO

2. REVIEW OF RELATED LITERATURE

2.1. INTRODUCTION

Most of hearing families of the deaf are likely to have had little or no experience with the norms, values or language of the deaf community (Hindley, 2005). Because of the absence of any previous experiences with hearing loss, hearing parents experience a lot of challenges with the upbringing of their children, especially as regards their language and their social and emotional development (Hindley, 2005). Communication difficulties are among the major challenges of hearing families of the deaf and deaf children themselves they encounter every day.

Eleweke and Rodda (2000) identified different factors that influence hearing parents’ selection of a communication mode to use with their deaf children, the major one being the kind of information provided to them, their perception of assistive technology, the philosophies, practices, preferences and attitudes of different educational authorities and professionals, as well as the quality and availability of support services. Gravel and O’Gara (2003) stressed that the main factors that impact the selection of a communication approach for use by families with deaf children are the child’s age of identification and intervention, the family involvement, the child’s residual hearing, the use of hearing aids, as well as the presence of additional disabilities.

The current research suggests that hearing parents are more likely to use spoken language as the primary mode of communication with their deaf children (Gravel and O’Gara, 2003) and to socialize with hearing people (Bat-Chava, 2000; Leigh et al., 1998; Maxwell-McCaw, 2001). A number of researchers have reported that deaf children with hearing parents communicate in a manner not conducive to their optimal cognitive, psychological, or social development (Hadadian and Rose, 1991; Spencer and Gutfreund, 1990; Wedell-Monning and Lumley, 1980). In some other studies, where hearing parents were signing with their children, positive results regarding family interaction and acceptance, deriving from the use of sign language by their hearing parents, were highlighted. Specifically, in the study carried out by Hintermair (2000) it was shown that parents who were signing with their child, and who were also maintaining frequent contact with Deaf adults, showed evidence of a strong sense of competence in regard to
their child’s upbringing and highly significant acceptance of him/her. Bodner-Johnson (1986) also found that the parents’ signing skills were correlated with better interaction within the family.

As far as Deaf parents with deaf children are concerned, Myers and Hulsebosh (1997) stress those Deaf parents raising deaf children bring to the child-rearing years of implicit as well as explicit experience, knowledge, and attitudes about what it means to be Deaf. Deaf parents intuitively think in visual ways, which is the best way to convey information to young deaf children who are just forming a language base.

Deaf parents may be in a position to establish basic pre-linguistic skills necessary for the later language development of their children (Powers, 2003), as well as for providing more fluent communication at home (Ritter-Brinton, 1993).

Culturally Deaf parents use sign language with their children (Gravel and O’Gara, 2003) and have contacts with the Deaf community (Bat-Chava, 2000; Leigh et al., 1998; Maxwell-McCaw, 2001).

Much of the research related to communication of deaf children and their families, apart from making comparisons between communication and outcomes of deaf children raised in Deaf families with those brought up in families with hearing members, has also focused on the communication options that are available for use within families of deaf children on the criteria for the selection of specific methods of communication by the family, as analyzed above and on early interactions between parents and deaf babies to enhance communication.

In contrast to available research data on the family communication issues described above, much less is known worldwide about the communicative experiences shared within the family between deaf children and other hearing or deaf members. However, without deep and meaningful communication with parents, siblings in the deaf child’s life, there are no shared meanings, no shared experiences, no development of identity, and adequate transmission of world knowledge suffers, often irreparably’ (King, 2006).

Regarding the experience in families with hearing members, deaf people described the feelings of loneliness and some level of frustration in interactions with hearing family members, as a
result of communication barriers. Some participants also felt cut-off from incidental learning experiences at home (e.g. overhearing conversations of others) that their hearing siblings enjoyed (Moores 1996).

Haualand (2003a, 2003b) youths whose parents signed with them experienced personal as well as linguistic acceptance at home. Others who were not exposed to sign language during an early age at home, mainly because their parents felt that their children could hear so well that they did not need sign language, stressed that they felt they were left out of their own family.

Parent-child communication plays a central role in social growth, as it does in other domains of development. Over ninety percent of deaf children, however, have hearing parents who frequently do not have a fully effective means of communicating with them. Hearing parents and their deaf children are found to develop alternative, often nonverbal, interaction strategies. Of primary interest is the extent to which those strategies have impact comparable to the strategies of hearing parents with hearing children or Deaf parents with deaf children (Gregory, 1976).

Most of deaf children have hearing parents, the majority of whom either do not know sign language or have relatively little skill in that domain. Many deaf children who are unable to benefit substantially from spoken language thus may be at a decided disadvantage in early development. In fact, there is abundant evidence indicating that those deaf children who are most competent in social, cognitive, and language development are those who participate actively in linguistic interactions with their parents from an early age (see Marschark, 2002, for a review). Their parents may be deaf them-selves, or they may be hearing parents who have acquired good signing and/or other communication skills that allow them to have meaningful interactions with their deaf children at a variety of levels. From those interactions, deaf children not only gain facts; they gain behavioral and cognitive strategies, knowledge of self and others, and a sense of being part of the world. Lack of such interactions raises the risk of deaf children not being able to reach their full potentials.

Deaf people’s struggle for a positive identity rest on a re-framing of the disadvantage they experience; the disadvantage results from the negative attitudes of a hearing society which fails to communicate effectively with deaf people in either sign or spoken language.
One of the central mediums of socialization and cultural reproduction – routine family life with a shared language – is thus compromised (see Beasley and Moore 1995, Corker 1998). Parents, especially those from minority ethnic groups, may see Deaf culture in opposition to their own cultural and religious norms, while the young person somehow has to negotiate between Deaf identity and other identities.

2.2. UNDERSTANDING AND MAKING SENSE OF DEAFNESS

Having a deaf child has social and psychological consequences for hearing parents (see also Chamba et al. 1998, Gregory et al. 1995). These include feelings of guilt, frustration, anxiety, helplessness, isolation, notions of unfairness and resentment. These responses mirror those of parents of children with chronic illnesses and disabilities (Beresford et al, 1996).

Many viewed the birth of a deaf child as a tragedy, difficult to comprehend as well as threatening in terms of its consequences for the child and families.

Chronic and disabling conditions have an important impact on personal biography and identity (Schou and Hewison 1999, Atkin and Ahmad 2000) and the parents’ own response to deafness affected the young persons’ views about being deaf.

2.2.1. Deafness, Language and communication

Language is symbolic of culture, ethnicity and heritage and a central vehicle for constructing shared identities and defining out-groups. Minority ethnic communities have struggled hard to maintain their linguistic heritage and to share it with their children. Such linguistic heritage also connects generations and countries and plays a crucial part in sustaining community and religious ties (Anderson 1983, Ahmed 1992). This is why any perceived threat to home language may also be seen as a threat to family and community relationships, cultural reproduction and religious adherence. This represents an important part of the background for understanding the use of language between deaf children and their families.

Communication is the essential tie that binds children to their parents and to society. Communication also breeds communication, as the language produced for and by young children fosters subsequent language development as well as social and cognitive development. Indeed,
all available evidence indicates that "normal" development requires the ability of young children to communicate effectively with those around them (see Marschark, 2002; Stinson, 1996, for discussion). The obviousness of this situation notwithstanding, there remains a large group of children who frequently do not have a means of communicating effectively with their families or siblings.

In our country, communication remained limited between most young people and their families, there was no common language. Two reasons explain this. First, few hearing family members knew ESL and most parents saw ESL as a threat to, rather than a vehicle for, enhancing family relations. Second, many family members had limited access to the child’s other language, English, and few children who used spoken language, had skills in or were supported in developing their home spoken language.

A few families had begun to use ESL, usually with support from the child’s school. Mothers and siblings, especially sisters, were more likely to learn ESL than fathers. Learning ESL, however, was not seen as easy. Many mothers felt that their ability to learn ESL was compromised by their Limited skills. Siblings had greater success in learning ESL than mothers and thus became important mediators between parents and deaf children. The fact that mothers and sisters make greater efforts to acquire the skills to communicate with the deaf young person is also reflective of the importance of women as ‘careers’, keepers of tradition and in holding families together (Anwar 1979, Atkin and Ahmad 2000).

Limited communication, typical of most families, allowed them to ‘get by’ although, as noted, deaf young people often felt excluded, and the lack of communication with certain family members hindered the development of strong ties. Deaf children specifically complain about their compromised ability to communicate ‘deep things’, being able to explore ‘deep things’ became more important with age (Hintermair, 2000).

The most salient fact of deafness is that it renders spoken language inaccessible in the normal fashion. This, and the fact that over 90% of deaf children are born from hearing parents (Moores, 2001; Marschark, Lang, & Albertini, 2002), has far reaching implications for many aspects of development including language acquisition, familial and social relationships, and access to information and education. While there is no reason to believe that deafness itself renders
children more prone to psychopathology (Marschark, Lang, & Albertini, 2002), deaf children and adolescents face a myriad of social, educational, and communication barriers in their daily lives that may contribute to an increase in the likelihood of experiencing communicational problems.

Language plays an important role in child development and cognition has long been widely accepted. Vygotsky (1986), proposed a complex model of language and cognition that emphasized the social nature of development and learning. He viewed language as the most important of the cognitive tools for transmitting information among individuals and from one generation to another.

The study of pre-lingually deaf children, however, affords us a unique opportunity to investigate these relationships because the communication and language development challenges faced by these children are not generally due to language or communication disorders per se, nor the result of general cognitive deficits.

Deafness may be present from birth or acquired at any stage in the lifespan. Although the vast majority of deaf children have no inherent impairment in their language learning abilities, the presence of a severe or profound degree of sensor neural hearing loss, experienced by approximately one third of prelingually deaf children (Davis et al., 1997), presents significant challenges to the perception and production of spoken language. This, in turn, has potentially far-reaching consequences for interaction with hearing people, educational attainment and a spoken language in terms of ages and stages of development (Mayberry & Squires, 2006; Morgan & Woll, 2002).

Another area of difference for children born into deaf families is that deafness is accepted, since it is perceived to be the norm and this, along with easy communication within the home, sets the scene for a positive ‘socialization climate’ (Meadow, 2005). Natural interaction between mother and child has positive benefits for a range of cognitive and socio-emotional developments (e.g. Moeller & Schick, 2006; Schick et al., 2007). Although there may still be issues relating to communicating with hearing speaking individuals, the availability of deaf role models can offer support in this area.
By contrast, deaf children of hearing parents will generally be exposed to spoken language, since this is the language used within the home. Although sign language may also be used, deaf children within hearing families rarely have early or optimal exposure to sign language since many hearing parents and professionals have poorly developed sign language skills (Calderon & Greenberg, 2000). A move towards bilingual education for deaf children in recent years has led to improvements in some areas, with deaf adults going into the homes shortly after identification of deafness to teach families sign language and act as language role models and mentors (Joint Committee on Infant Hearing, 2007; Swanwick & Gregory, 2007). An important consideration when working with people who are deaf is the likely co-morbidity of other conditions. It is estimated that up to 40% of deaf children have additional disabilities (McCracken, 2010), ranging from visual impairments to learning disabilities. Clearly, such conditions will compound the impact on language development.

2.2.2. Implications of sharing or not sharing information and communication with deaf children

At the most obvious level, deaf families share an effective mode of communication with their young deaf or hearing children whereas hearing families do not. Deaf families are thus more skillful than hearing families in communicating about a variety of topics with their school aged deaf children, and families-child interactions are smoother and more natural (Stinson, 1994). It would be surprising if such interactive fluency did not have long term consequences for development in several domains.

Compared to deaf children of hearing families, for example, deaf children of deaf parents have been found to demonstrate better academic performance, show greater proficiency in English, have a more positive self-image, and to be less prone to impulsivity (R. I. Harris, 1978).

Meadow (1980) suggested that the more positive self images of deaf children of deaf parents are, in part, related to the ease of parent-child communication, and both Montanini Manfredi (1993) and Scheetz (1993) have emphasized the importance of flexible communication modalities for the development of self-confidence in deaf children. How, then, do we encourage the development of adaptive and effective communication strategies between hearing parents and their deaf children?
A variety of early intervention alternatives now exist for deaf children and their families. One of the most important aspects of such programs is the fact that parents and children have the opportunity to learn sign language. Unfortunately, many hearing parents who begin to sign to their young deaf children with the best of intentions do not continue with any consistency or skill.

Although there is considerably variability (e.g. Kluwin & Stinson, 1993; Luetke-Stahlman & Moeller, 1990), many hearing parents typically have had so little formal sign training that they find it impractical for most day-to-day needs; they are uncomfortable signing, especially in public; and they tend to sign only when speaking directly to the child. This latter restriction represents a significant impediment for deaf children learning language, because much of language is learned indirectly from overhearing conversations of others, television exposure, and similar sources rather than by direct teaching. Similarly, the fact that most hearing parents who do sign are limited to relatively concrete conversation probably becomes increasingly important as their child matures and needs and wants explanations for more complex social and emotional issues. During this time, it is mothers tend who tend to take on the key role in family communication (Kluwin & Gaustad, 1991, 1994; Kluwin & Stinson, 1993), being more likely to learn to sign and thus more frequent than fathers in their communications with their deaf children (Gregory & Hindley, 1996; Marschark, 1997).

Lack of a sign language skill on the part of parents leaves both them and their children unclear about the needs, wants, and capabilities of the other (A. E. Harris, 1978; Kusche & Greenberg, 1983). Meadow and Schlesinger (1971) accordingly found that hearing parents of deaf children reported more feelings of frustration in child-rearing than did hearing parents of hearing children.

Those feelings derived from the perceived inability of parents to communicate effectively with their children, even about common, daily routines. The frustration led to a reduction in parents' responsiveness to affective cues from their children, a situation that, in turn, can influence the type and quality of parent-child interactions and the psychological development of the child (Hadadian & Rose, 1991).

Deaf children enrolled in language-oriented early intervention programs typically demonstrate significantly better social adjustment as compared to peers who are not involved in intervention
programs. The benefits are observed both in parent-child relations and in the patterns of social interactions within pre-school settings (Calderon & Greenberg, 1993; Marschark, 1993a, Chapter 4; Spencer et al., 1994).

Certainly, in the many cases where parents learn only rudimentary sign language and use it only inconsistently, they are unlikely to see many benefits to their deaf children in either signed or spoken language domains (Gregory & Hindley, 1996), even if it does allow some low level of interpersonal communication. To date, however, there has been no empirical research demonstrating that learning sign language as a first language impedes the learning of spoken language. In fact, deaf children who learn sign language as a first language generally have been shown to have better reading and writing skills than deaf children exposed only to spoken language (see Marschark, 1993a, Chapter 11, for a review). Children who learn to sign fluently often do favor it over their typically non-fluent speech. This preference makes intuitive sense given the fact that their use of speech tends to elicit speech that they are unable to hear and the fact that deaf individuals are generally unable to read spoken language on the lips (e.g. Conrad, 1979). Such preferences may be difficult for some parents to accept, but most deaf children go on to learn sign language anyway, even if they are not exposed to it during their pre-school years. Marschark (1997) thus argued that it is better to use sign language as a bridge to spoken and written language (through a variety of strategies) than to expose a young deaf child only to one mode of communication.

What seems to be neglected in most arguments on the issue is the importance of early linguistic stimulation of children in any mode. A variety of studies have documented the difficulties in Amharic use of deaf children exposed exclusively to spoken language, and others have indicated that deaf children who learn to sign as their first language surpass their peers who experienced only spoken language on a variety of linguistic, academic, and social domains. Early exposure to sign language should not be interpreted to be a linguistic panacea, however. The issue is complicated, and all of the relevant variables have not yet been disentangled (e.g. parental hearing status, education methods, amount and range of residual hearing, parental involvement, number of siblings, birth order).
The decision by parents to select one mode of communication for their child over another is more than just a decision about an instructional philosophy; it will determine how their deaf child will function within the family as well as beyond (Marschark, 1997). Foremost among these will be family attitudes toward hearing loss, the acceptance of an apparently handicapped child, and parental expectations for the child's role in the family (Kluwin & Gaustad, 1991) and in social and educational endeavors. Unfortunately, hearing parents' selections of the form of communication to be learned by their deaf children are most often made with insufficient understanding of their implications and without full information about their alternatives. There is relatively little documented information on this issue, although there is a wealth of anecdotal evidence (see Marschark, 1997), and there are several findings relating parental decision-making to the severity of children's hearing losses.

Because the degree of a child's hearing loss influences the age at which that loss is discovered and the age at which child and parents gain access to appropriate services, profound and severe-to-profound hearing losses may be detected up to a year earlier than less severe losses (Freeman, Malkin, & Hastings, 1975). The degree of a child's hearing loss also influences the selection of the mode of communication used with the child: Mothers more likely to use signs are those whose children have more severe hearing losses (Kluwin & Gaustad, 1991, 1994). Further, Kluwin and Gaustad (1994) suggested that the choice of communication mode used in the home is predicted primarily by maternal personal characteristics: Mothers who learn to sign tend to be more family-oriented or more focused on maintaining the functional cohesion of the family. They are also more likely to receive social support from friends and family outside of the home (Luterman, 1987).

As children get older, linguistic interaction becomes even more important for social and emotional development, as parents communicate social norms, behavioral rules, and the reasons for observed and imminent social emotional events. Effective modes of parent-child and child-child communication provide for more rapid and detailed transmission of social information, both implicitly and explicitly. Lack of such communication has been shown in several studies to be related to impulsive behavior, poorer self-image, more disruptive behavior, and an external locus of control on the part of deaf children (Marschark, 1993a, Chapter 4). Hearing families, ineffective communication tends to result in less satisfying interactions with their deaf children.
and the use of more physical control and punishment. Dessille (1994), for example, found that parent-child communication involving deaf teenagers was positively related to self-esteem (as well as reading levels). Families in which signed and spoken communication were used together had children with higher self-esteem than did families that relied solely on spoken communication.

Kluwin and Gaustad (1994) further found that families in which signed communication was used were significantly more cohesive than families that used only spoken language, where cohesion was defined in terms of the extent of emotional bonding among family members. Such findings do not necessarily mean that signed communication is better than spoken communication for social development, but they do emphasize the need for effective communication. For many deaf children, spoken language simply cannot fill that role.

2.3. CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES

Hearing families of the deaf shall take all appropriate measures to ensure that deaf child can exercise the right to freedom of expression and opinion, including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice as well as Hearing families of deaf children shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that (UNCRPD, 2002; Article 21).

According to UNCRPD (2002; Article 23) Hearing families of the deaf shall ensure that children with disabilities have equal rights with respect to family life. With a view to realizing these rights, and to prevent concealment, abandonment, neglect and segregation of children with disabilities, families shall undertake to provide early and comprehensive information, services and support to children with disabilities by favorable means of communication and “Communication” includes languages, display of text, Braille, tactile communication, large print, accessible multimedia as well as written, audio, plain-language, human-reader and augmentative and alternative modes, means and formats of communication, including accessible information and communication technology; as well as “Language” includes spoken and signed languages and other forms of non spoken languages.
2.4. IMPACT OF COMMUNICATION ON DEAFNESS WITH HEARING FAMILIES

People who are born deaf experience much discrimination and lack of understanding in society at large, whether they communicate using spoken or sign language (Higgins, 1980). This may be attributed to negative attitudes towards people who have communication difficulties (Morgan, Herman & Woll, 2002) as well as the fact that profoundly deaf signers have considerable difficulty in communicating with hearing people (Bench, 1992; Gagne, Stelmacovich & Yovetich, 1991).

Many of the skills deaf children need to interact successfully with hearing peers are language based. In addition to speech intelligibility issues referred to above, prelingually deaf children and adults typically display poor mastery of Amharic vocabulary and syntax and find learning the rules of social communication challenging (Crocker & Edwards, 2004). As most Hearing people cannot sign, this frequently leads to the emergence of a ‘shared handicap of communication’ between deaf and hearing partners (Bouvet, 1990), causing both to be unsure and ineffective at communicating with each other.

A compounding factor is that deaf children are not always made aware of the lack of clarity of their own communication. Often, a hearing parent or teacher will fail to signal the ineffectiveness of a message or may themselves repair it for the child (Beazley, 1992; Brackett, 1983; Wood et al., 1986), thereby denying deaf children the chance to develop the effectiveness of their interactions or take responsibility for their own communication.

Deaf people who communicate poorly in the hearing world are more likely to be socially isolated (Bain, Scott & Steinberg, 2004; Steinberg, Sullivan & Loew, 1998), are at greater risk for psychological distress (Marschark, 1993) and have a greater overall prevalence of mental illness than the general population (Crocker & Edwards, 2004; Hindley, 2000).

2.4.1. The Impact of Deafness on early communication skill

Marschark (2000) explains that those deaf children who are most competent socially tend to be those who actively participate in linguistic interactions with their parents from an early age. Good parent–child interaction allows deaf children to gain social knowledge, cognitive and problem-solving strategies, information about self and others, and a sense of being part of the
environment (Marschark, 1993). Children’s expressive language (their first words) emerges from previous non-verbal interaction with adults, which in part fosters children’s visual attention, turn-taking, labeling and language comprehension skills. All of this involves some ability on the part of the child to ‘mind read’ (Nurmsoo & Bloom, 2008; Liebal, Behne, Carpenter & Tomasello, 2009).

The issue of how deaf children of hearing parents enter into the mindreading game is complex. Several studies have demonstrated that deaf children of hearing parents as old as 10 years of age have persistent delays on communication skills (e.g. Schick et al., 2007; Morgan & Kegl, 2006) while deaf children of deaf parents score age-appropriately on the same tasks (Woolfe, Want & Siegal, 2002). The origin of these delays can be traced back to the very early interaction deaf infants’ experience with hearing parents. Part of this early atypical development is linked with difficulties in establishing good joint attention (Harris & Mohay, 1997). These missed interactions arise because hearing parents are not aware of how to adapt their communication for a child that needs to share his visual attention between the speaker (in order to know that communication is taking place and to receive speech-reading and signing /gestural cues) and the object being labeled. Even children whose hearing parents start using sign language when their child is as young as 2 years of age have been shown to have difficulty with standard Theory of Mind tasks compared to hearing children.

2.4.2. The Impact of deafness on early social interaction

The social-emotional differences between deaf children of deaf parents and deaf children of hearing parents have complex origins and cannot be attributed to any single cause. Swisher (1992) argued that hearing parents of deaf children are not signing; they didn’t adapt their habitual communication behaviors to meet the vision related needs of their children. Early on, mothers interaction with def child is to slow and the responsibility for coordinate such interactions, didn’t waiting for the child's attention before beginning to sign and trying to maintain visual attention for the duration of the message.

Hearing families are not sensitive to the visual communication of their deaf children, and they have no available a shareable means of communication via sign language (Harris & Mohay, 1997; Meadow-Orlans, 1996).
2.5. AN OVERVIEW OF DEAFNESS ON EARLY COMMUNICATION SKILLS

Several studies have demonstrated that deaf children of hearing parents as old as 10 years of age have persistent delays on Theory of Mind tasks (e.g. Schick et al., 2007; Morgan & Kegl, 2006) while deaf children of deaf parents score age-appropriately on the same tasks (Woolfe, Want & Siegal, 2002).

Hearing families are not aware of how to adapt their communication for a child that needs to share his visual attention between the speaker (in order to know that communication is taking place and to receive speech-reading and signing/ gestural cues) and the object being labeled. This fundamental difficulty in establishing connected communication leads to vocabulary learning delays and, perhaps more significantly, potential problems with interpreting intentional communication and the mindreading element of interpersonal communication.

2.6. Communication, Attachment, and Control

The early interactions of deaf children and their mothers and their communication in particular have ever-widening implications for social development as children become older. They set the exploration, learning, and further social interactions, as the child ventures beyond the mother infant relationship and eventually beyond the family context to deal with the rest of the world. In this context, the earlier establishment of an effective, reciprocal, mother-child communication system should facilitate social development in several ways, including the explicit transmission of social information, providing support for the establishment of a secure attachment bond, and making the mother more "available" to the child in stressful or educational situations.

Also implicating the level of communication between parents and young children is the fact that hearing children's abilities to interpret parental emotional states appear to derive largely from the observed correlation of those states with particular verbal and nonverbal behaviors (Spelke & Cortelyou, 1981) and later, from verbal explanations and analyses (Snitzer Reilly, McIntyre, & Bellugi, 1990). For most deaf children with hearing parents, explanations concerning the reasons for actions, expectations, and emotional situations experienced by both parties will be less frequent and less competent due to the communication barrier (Gregory, 1976). The perceived correlation between emotional states and parental behaviors may thus be lower, with possible
implications for children's own social-emotional development. Although studies with younger deaf children have not yet been conducted (Odom, Blanton, and Laukhuf, 1973) found that deaf 7- to 8-year-olds were just as able as hearing peers at sorting photographed faces portraying a variety of emotional states into categories, but they were less able to link particular faces to pictures of emotionally relevant situations. Even if the content of language does not play a primary role in attachment, it may thus have secondary effects on the emotional development of the child during the time the attachment bond and other components of social interaction are developing.

Greenberg and Marvin (1979) suggested, for example, that effective mother-child communication should be linked to the transition from proximity-seeking attachment to a more mature attachment relationship in which parting of parents and their children is characterized by mutual consent.

On the basis of the results considered thus far, it appears that good early communication is an important ingredient for social-emotional development in deaf children. To conclude that such interventions are necessary might underestimate the plasticity and malleability of young children, but we can be certain that children who have established good social-communication skills within the family are better equipped to venture out into the social world (Hadadian & Rose, 1991; Marschark, 1993a, b). We now turn, therefore, to consideration of some of the causes and consequences of variability in communication between parents and their deaf children and their long-term effects on social-emotional development.
CHAPTER THREE

3. METHODOLOGY

The general methods employed in order to achieve the objectives stated in the earlier chapter based on qualitative design. This design included triangulation of data collection by interviewing deaf students, hearing families of deaf children, focus group discussion and through observation. The purpose was to get adequate information so as to be able to look into the major communication challenges of deaf children with hearing families.

3.1. RESEARCH SITE AND SAMPLING METHOD

3.1.1. Research site

The study was conducted at Victory School for the Deaf and Yekatit 12 special school in Addis Ababa. The main reason for selecting this school for the study was that the researcher conducted a study in the school previously and had acquaintances with most of the school community. Hence, the researcher believed that adequate information could be easily find out. Moreover, expenses like allowances and transport fees are minimized.

3.1.2. The Participants

The target populations of the study are deaf students from the two schools. It was expected that these deaf students from these schools can express themselves more than those deaf students in the other school because they know the researcher closely. Besides hearing families of the deaf are key informants of the study.

3.1.3. Population and Sampling technique

According to the information gained from the school principal, some families of deaf children have frequent contacts with school principal and teachers at the school. As was stated, there were ten students selected from both schools and five parents of deaf children in Victory School for the deaf and five from Yekatit 23 Special School selected and four of them are mothers, three of them are fathers, a sister, brother and an aunt were selected. Based on this
information, the researcher contacted these parents by the help of the school principal who had acquaintances with all of the mentioned families of deaf children.

As explained earlier, deaf children were also informants of the study. There were more than 110 deaf children at the school. As a result, the selection procedure was purposive sampling techniques was used for the study. From a total of students at the school, 5 students (three female and two male) were selected from Victory School for the Deaf and again 5 students (four females and one male) also selected from Yekatit 23 special class in regular school.

3.1.4. Instruments

The methods used to collect information for the study included a combination of such techniques as interviews, focus group discussion and observation. Research questions on the communication challenges of deaf children with their hearing families were prepared. Hearing families and deaf children were the main sources of information for qualitative analysis and focus group discussion and observation also were arranged. Two instruments were developed in order to identify the communication challenges of deaf children with their hearing families. The instruments had open ended written questions. The instruments were prepared in Amharic for the purpose of data collection.

3.1.4.1. Semi-structured interview guide

To collect further data on the communication challenges of deaf children with their hearing families, 15 interviews question for each participant were prepared and conducted with all the participants of the study. The interviews were conducted in Amharic and they were tap recorded.

3.1.4.2. Focus group discussion guide

On the focus group discussion all participants were gather together and made a discussion on the provided guide line which contains 8 questions. An experienced moderator is navigating the discussion. This helps the discussion focused on the subject at hand. Thus, focus group discussion is conducted within each preferred participate from the two selected schools in Addis Ababa.
3.1.4.3. Observations checklist:

The researcher were observe about the communication between the hearing families and between the Deaf children about the mode of communication that the families are using, this means the use of sign language (signed exist Amharic/SEA/, Total communication/TC/ and sign language only), eye contact and gesture, the situate of Deaf children communication with their hearing families on parents day, morning when they came to school with their hearing family members and afternoon.

In consultation with the advisor and all the way through review of literature, the researcher developed 16 observation check list questions and used in the study.

3.1.5. Recruitment and orientation of the field staff and field work

For the fieldwork, facilitator and interpreter were employed. Briefing was given to participants before interviewing and focus group discussion.

3.2. The main study

At the sample school of the main research, at the very beginning a contact was made with the school principal. The mission of the researcher and the purpose of the research work were explained to the principal. Then, the researcher was introduced with the deaf children’s of the selected school. The researcher made a contact with the hearing families of the deaf children and arranged the interview schedule before the study conducted.

After this, interviews were delivered among deaf children’s, the researcher used sign language to give further explanation for children’s. Then, interviews were held with hearing families of the deaf for about approximately an hour each. The focus group discussion was implemented with the presence of 5 families of the deaf in each of the school regarding the focus group discussion guideline questions and observations are made depend on checklist.

Finally, the data collected from deaf children and their hearing families by Amharic was translated in to English Language. The data from all the rest of participants was also transcribed and translated in to English.
### 3.3. SUMMARY

<table>
<thead>
<tr>
<th>Instruments</th>
<th>Participants name</th>
<th>No of participants</th>
<th>Sampling techniques</th>
<th>Issue</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview guide for deaf children</td>
<td>Deaf children</td>
<td>10</td>
<td>Purposive sampling</td>
<td>What are the possible measurements to alleviate the gap?</td>
<td>Qualitative</td>
</tr>
<tr>
<td>Interview guide for hearing families</td>
<td>Hearing families of deaf children</td>
<td>10</td>
<td>Purposive sampling</td>
<td>Do deaf children assume their family members understand them easily and exactly?</td>
<td>Qualitative</td>
</tr>
<tr>
<td>Focus group discussion</td>
<td>Hearing families of deaf children</td>
<td>10</td>
<td>Purposive sampling</td>
<td>How do families of deaf children equally share their knowledge, information and attitude with deaf children?</td>
<td>Qualitative</td>
</tr>
<tr>
<td>Observation</td>
<td>Deaf children with their hearing families</td>
<td>10</td>
<td>Purposive sampling</td>
<td>How do deaf children’s communicate with their hearing families?</td>
<td>Qualitative</td>
</tr>
</tbody>
</table>
CHAPTER FOUR

4. FINDING AND DISCUSSION

The main objective of this study is to investigate communication challenges of deaf children with their hearing families. Ten hearing family members and ten deaf children are selected from two regular schools with special class. Among all family participants selected, four of them are mothers, three of them are fathers, and aunt, a sister and a brother of deaf children are selected.

As it is mentioned in part three of the paper, two sets of interviews, observation and focus group discussion are employed to gather data from various topics of the study. The data collected through all these instruments are presented and discussed in this section, the findings are analyzed in relation to the major research questions of the study and theoretical frameworks.

4.1. FINDINGS

4.1.1. How do deaf children communicate with their hearing families?

The study identified communication problems of deaf children and their hearing families face as a consequence of hearing loss of the child. The study assessed the commencement of deafness and its implication on deaf children and their hearing families, which in one way or another may result in communication problems.

Most of deaf children participants of the study, mostly felt isolated from their family environment because of lack of communication. They preferred Ethiopian Sign Language (ESL), but their parents, siblings and relatives were communicating orally and most of them are never learned basic sign language. In explaining communication of deaf children among hearing families, one deaf participant stated the following:

“I’ve been communicating orally with my parents. They feel embarrassed with the sign language. They don’t know the Ethiopian Sign Language (ESL). They prefer to communicate through speech or home sign. Once up on a time, the people at the village had asked my mother if I knew how to speak or if I could hear. My mother used to say that “he spoke a little” and that I was slightly hard of hearing.
Deaf participants in this study identified that, communication is very difficult with their hearing family members because of the absence of sign language use. But they are trying their best to communicate through lip reading even if it is difficult when the person who are discussing with them turn their face to other direction or they make their face down. One of the deaf participant said that;

“Most of the time I used to communicate with my hearing families by lip reading method, it is the best way for me than nothing but I don’t know why I can’t lip read my father discussion, because of that most of the time I didn’t understand what my father is taking about. So that, I face a challenge and some time I hate being at home without any involvement in the family discussion. I wish if I had deaf parents and family members just like my peers, so that, they will always include, help, involve and support me in every kind of aspects”

Deaf children’s are the prime victims with the absence of successful communication with their family members in every situation of day to day activity starting from the beginning and on familiarization process with the surrounding world. It become worse for the pre-lingual deaf child because the new born deaf child with no experience of the language that the community speaks at large and without knowing the exact alphabet, language and sounds. If pre-lingual child experience the local language that his family members talking, at least lip reading will not be difficult that much for communication with them without any further assistant or interpreter.

On the other hand, the deaf children’s in this study reported that their parents most of the time were in favor of their hearing children. As the deaf student stated, their hearing families and parents tended to spend much of their time with their hearing siblings. This situation as they stated made them feel rejected and socially different from their hearing brothers and sisters. As one of deaf participant indicated that, she can’t communicate with anybody with in the family using sign language rather she forced to use lip reading mode of communication. Most of the time when something important for her to discuss with the family members, she use to communicate through writing and lip reading as well. She always advised her mother to take sign
language training but her mother has no any income to cover day to day expenses than go to the school for sign language training. As she said, it would be much easier, at least her mother knows some basic knowledge about sign language to communicate with her because as everybody says, mothers are a model of the world to create socialization and accessible communication with their children.

As the other participant said that, most of the time he use lip reading, writing and gesture to communicate with his hearing families, but sometimes he become offended because of absence of appropriate communication with his families, he don’t know what is the best communication methods and how to communicate with his hearing families, when he is not included in the families discussion and he strictly tell them to his families to include him in a discussion through appropriate communication. That’s because of he feel a sense of marginalization and excluded from the family interaction. Most of the time if something important that he needs to know he asked her family members to repeat and explain for him again and again but if he couldn’t understand he forced them to write for him in piece of paper.

In explaining the communication interaction with hearing families, one of deaf participant further stated that, he stress on the information communication accessibility on home setting that should be equally distributed among each family member. He didn’t fully participate in any type of discussion within the family. He also said that he is not able to receive every kind of information on time because of no one in the family can keep informed him any important information but after several days passed his family members mostly his mother tries to let know some important issues using different methods of home setting communication.

All of deaf children participants in this study indicated they had developed good interaction with family members who acquired sign language, and with other deaf children in the school and even outside. Furthermore, these children stated that they would like to form strong ties with deaf children so that they could possibly have things to discuss with one another among themselves, solve problems they may face in their day-to-day real life situations. Hearing families of the deaf children in the study also reported that their deaf children tended to be happy with the social interaction they had with other deaf children than of their own family status.
According to one of deaf participant reported, on how does she communicate with her hearing families, she said that;

“My sister knows some basic courses of Ethiopian sign language, when she was with me and through her sign language interpretation, I always listen news, different information’s through radio, TV and other different mode of information transmission, on that time she is the one always tries to interpret everything for me even during families’ discussion at night. That’s makes me confident and sense of belonging and part of the family.”

The father, in the course of the interview, didn’t seem to hesitate to explicitly state every experience his family had faced following the awareness of their first daughter’s loss of hearing and continued said as: Eventually, he promised himself never to retreat and to be always a reliance to the fitful kids to the best of her ability so that she would not be deprived of parental love and care and he believe that he is successful in coping with the challenge. Because of that as he said, his daughter likes to communicate with him through home sign.

As a brother of deaf children in this study indicated that because deaf children’s were all fluent in sign language, they easily understand one another, share experiences, exchange ideas and information between or among themselves. Deaf children’s social and family interaction among themselves, I could possibly say, explained one of the family of the deaf respondents, were integrated as that of the hearing children’s. As the result of close exposure to one another’s life experiences, deaf children’s, understand each other more than they do with hearing siblings or family members. Mother respondents further explained that deaf children’s had no any difficulty playing, discussing, cooperating, and working together with their deaf siblings and deaf peers.

One of the hearing families of the deaf children participant stated about with who her daughter prefer to discuss and play,

“My husband is dead, it is my burden to take care of my daughters by means of doing different day labor activities, I have three deaf children’s two girls and a boy, they are really like to chat and play together because they share the same language and feeling. For me taking a sign language training is difficult because
I have no free time for it, however, we can talk to each other by lip reading but I am not satisfied with it because sometimes I feel guilty and abandoned by my own children’s.”

Many of the deaf children tended to be in crowd with hearing family members who can communicate using sign language or with deaf family members, deaf peers and deaf neighbors. Similar way of communication and mutual understanding encourages deaf children preference to be with other with the same situation. As many of the deaf children’s reported many of their friends they had were deaf than their hearing. This might be due to the fact that the deaf lend to feel adequate, efficient and mature enough to communicate with other deaf children.

In explaining, preference of deaf children who to communicate on family’s interaction among deaf children further, one father respondent stated the following:

“My child does not often like to come home soon after school. He rather spends his free time playing with one another in the school compound. He cannot communicate with people at home easily as he do with friends at school. At home he rarely fined people who can understand sign language. For that matter, he prefer being with people of his own kind in his sense of hearing. Because he feel detested and neglected by the people at their respective homes. Alternatively, he sometimes leaves the school for a place of their own preference with his deaf peers.”

The aunt of deaf child also partly attributed deaf children’s preference to be with other deaf siblings, peers or that of similar social status to people’s negative attitudes toward the deaf and she said the following:

“To everyone’s surprise it is only annoyingly a few people who have changed their wrong attitude toward the deaf. As is clear to everyone, there are people to be pitied not condemned (scorned). The aunt added, I had many accessions when I was discussing with sign language, over some issues with my deaf child while in a taxi or bus. In the meantime, I heard people in the bus making remarks, which were alarming (starting) and disappointing. I heard some of them saying that
being deaf is like being condemned uniquely created, abnormal, and the like. They further remarked that, unlike people with the ability to hear, the deaf are not in a position to have access to whatever they wish for it and I am happy that my child can communicate with me.”

As one can understand from the statements of the aunt stated above, deaf children find it very difficult or even impossible to communicate with people who are not trained in sign language including their hearing family members. People’s negative and wrong perception about deaf people is also a communication barrier resulting in poor social development between the deaf and the hearing.

In the course the interview, one of the mother of the deaf children reported that, deaf children have a different way of communication styles and immature speech development, which is markedly observed particularly on pre-lingually deaf children. This, according to this mother, results in a feeling of inadequacy on the part of the deaf children.

Many of the deaf respondents participated in the study revealed that they considered themselves inferior to the hearing people due to inaccessible information communication. In explaining such feelings experienced by deaf students, family participants in the study indicated that their deaf children’s gone though some degree it was, experienced a feeling of dissatisfaction with their communication. Some deaf children, in the study also revealed that they were not fully satisfied with their home setting. In explaining the reasons for their dissatisfaction further, this deaf children reported that they were not courageous enough to ask questions at home for clarification and in some instances they got confused with what their talking and how to explain. Eventually, they felt that they were less able and less competent than their siblings.

4.2.2. Do deaf children assume that their family members understand them easily and exactly?

Almost all of the deaf respondents stated that, they faced a serious communication problem when they communicate with their hearing families. As they explained, it took them long time to understand and to communicate with their hearing families. For most of deaf children participants, it had been really a challenge to understand and develop smooth communication
between them and their hearing families. Such a communication breakdown resulted, in misinterpretation of what a deaf children’s wants to transmit to his/her families. Consequently, such misunderstanding even led to conflicts between hearing families and deaf children. The difficulty worsens especially when hearing families are trying to communicate with children who are prelingually deaf. One can imagine the difficulty a deaf student faces when trying to communicate with a hearing family who is not trained in sign Language or unable to communicate by sign language.

In relation to this, one deaf interviewee reported the following:

“One of my uncle came to home from countryside to stay with us for a couple of months. He had not been trained in sign language and he doesn’t know anything about deafness, this resulted in lots of breakdown in communication with me for several days. One evening, he was at home and he was so surprised that I was being late to arrive home. Meanwhile, he asked me why I was late and I try to tell him but he couldn’t understand me easily so I attempt to apologize to my uncle including the families for being late, as patting or rubbing my left palm with the fingers of my right hand. That in sign language means ‘excuses me.’ Failing to make out what I was trying to say, my uncle came straight to me and started to look for something written on my palm. To his great disappointment, my uncle happened to read a very offensive remark written on my palm “stupid”, just by chance. Hence, being very much offended with what he saw, he punished me very severely.”

As two of the deaf children’s reported, families are not trained in the areas of special needs or sign language particularly in issues surrounding deafness and the consequence it can have on children social and communicational profiles, they have positive attitudes toward their deaf children and they understand them to some extent. This positive approach is what many families have to develop through home based communication interaction with their deaf children.

Family is the most important and essential part of the community for a child to know, enable and develop a sense of belongingness, understand and learn everything in earlier stage of deafness if
it is supported by Ethiopian sign language mode of communication at the beginning and onset of deafness.

If the hearing families of the deaf children acquired some basic concepts of Ethiopian Sign Language (ESL) it will not be that much difficult for the general mode of communication. This communication accessibility within the family changes a child life on the course of education and interaction. As one of deaf participant said that, he always asks his sister any subject for clarification and as a tutor that seems difficult subject for him, she always tries to help him in every kind of issues. More than being interpreter she is one of his mentors that’s why he always score the highest rank in the class and love to talk to her and get necessary information.

Parents of deaf children in this study revealed that, they have serious problems with their deaf children to develop mutual understanding for life affairs in the home environment. Almost all of the parents who participated in this study indicated that they had no any training of sign language for communication with their deaf children. This created a big communication gap between deaf children and hearing members of the family. As two of the mothers in the study explained, they sometimes got confused the deaf children’s real demands with what they actually did not ask for. In this case, the deaf child became upset, frustrated and feel they couldn’t at all be understood due to his loss of hearing.

Parents of deaf children also indicated that, the most difficult problem they faced was communication barrier. As they stated, they had no previous exposure to social contacts with deaf people in life. This lack of exposure to such real life situations brought about problems to socially interact smoothly with their deaf children. Furthermore, these parents explained that most of the members of their family were hearing and their deaf children’s pattern of communication was different from that of the hearing members of their family. If deaf children failed to be understood by their mothers or fathers or any member of the family, stated one mother of the deaf children, they tended to feel they were neglected, unloved, unwanted, hopeless and even deprived of everything given to their hearing brother and sisters.

Almost all of the deaf children’s in this study reported that, they faced difficulties understanding long and complex sentences. They understood only short, and simple sentences, talks and meaningful contexts limited to home situations. In most instances as the families’ explanation
deaf children appeared passive to participate in the interplays of social interaction with the family members.

It was also indicated by parent respondents that the chances for deaf children’s to tell and/or listen to jokes, exchange information, discuss about matters at homes, play together, singsongs together with their hearing brothers and sisters was really difficult for them.

However, it was found out in this study that most parents have difficulty making their feelings of togetherness, their love and affection known to their deaf children due to the barriers of communication. One mother in the course of the interview stated that if the demands of deaf children were not met as immediately as the deaf children needed, they at once got upset, became unhappy and sometimes might inflict damage on their hearing brothers and sisters.

The father also added, deaf children tended to be jealous of the social interaction between parents and hearing siblings at homes. They felt that something special is talked to hearing siblings. In other respects, the father participant explaining deaf children, like his own, felt discriminated with regard to educational supports and aids given to them. In stating the problems he was facing with his deaf son, the father said the following:

“I cannot understand sign language. For that reason, I am not in a position to help him with his lessons the way I want because of communication difficulty. This compels me to confine that effort (help) frequently to my hearing daughter. He interpret it wrongly, this for discrimination against him in favor of his sisters. He tends to become aggressive and gets easily touched believing that we have a disregard for him. And this is a headache to his mother and me.”

Gradually, through family-child and child-child interaction, the families became better in using home sign language and the communication barrier breaks and hence, social interaction between deaf children and their hearing families becomes smooth. The majority of hearing families of deaf informants in the study indicated that they have no excellent family interaction with their family’s members.
4.2.3. How do hearing families of deaf children equally share their knowledge, information and attitude with deaf children?

Hearing families of deaf children in this study reported that, they were facing problems in developing communication skills, which are common to both the deaf children and the families. As two of families of the deaf children reported, it was really very difficult to understand the deaf children real needs and interests. This was partly because deaf children tended to be sensitive and got upset if they were repeatedly asked to clearly point out what their real needs and interests were, so that hearing families lack appropriate and equal information dissemination to their deaf family members.

As a sister of the deaf child declared that, they tried to communicate with him in every means of communication methods, if she didn’t understand what he want to say, she will make him to write for her on the piece of paper otherwise she tries to talk to him in home language because she don’t know and no one in the family knows the exact Ethiopian sign language to understand him. Sometimes there are no means of communication to explain about something that they couldn’t formulate him understand, on that time he will get offended and mad and he always complain about no one cares about him except his peers. She believes that, there is no fair communication interaction with the deaf child at home.

Parents began to feel disappointed and unable to manage the situation, such a problem affected the whole family system. With regard to such a problem, hearing families of deaf children often express feelings of incompetence, self-doubt, and sorrow. In some cases, the birth of a deaf child threatens family integration and destroys the balance of family relationship.

Almost all participants in this study indicated that deaf child’s experience communication problems in different family and social contexts they live in. In the following paragraphs deaf child stated that. He grew up with his family who are all hearing and they were communicating orally, so he used to it. That’s how he learned things since he was a little. This causes him some problems. When the family communicates orally, he cannot understand them. He often asks them ‘What did you say?’ With the ESL things are different, easier. His family did not use any sings when he was a little. His families thought when he was a little that it would be better to learn
how to speak. They did not think that the ESL was a good option. When he grew up he explained to them that the ESL is important for him to communicate.

All the family participants in this study identified the hearing loss of their children when the deaf children fail to respond to sound stimuli. Even afterwards, two of the families explained that, they were not financially capable of taking their children to hospitals for further medical diagnosis. After realizing that their deaf child is unable to hear, it was very difficult for them to accept the deafness of their child, some of the family members tried several traditional, religious, herbal and formal medicine to restore hearing capability of their deaf family members. After their knowing that their child is unable to hear after several steps of medicament follow-up they fell sense of guilty, confused what to do for the future, and sense of hopelessness. Moreover, these families were not given any professional support to cope positively with such problems as emotional disturbances, people’s negative attitudes towards not only the deaf children but also families of deaf children themselves and how to disseminate information equally for their deaf children.

Had these families (especially fathers and mothers of the deaf child) been provided with appropriate professional guidance and counseling services as to how they could possibly react positively with their deaf children’s situation, this could have been an advantage to parents and their deaf children to develop proper communication and positive acceptance of their deaf children in their respective families.

Every family participated in the interview for this study explained that, learning their children deafness was really a tragedy and difficult to cope with it. The situation as they reported brought about profound negative effects on the special attention and sharing information they should have to their deaf children.

This difficult situation is even worse and markedly observed if a family has more than one child with a hearing problem. This situation happens because an unpleasant attitude is directed to those families from the community. The parents in this study indicated that they tended to develop a negative attitude in themselves in reaction to the social situation, otherwise stated, they consider such children as embarrassments to the family because of the societies strong belief that such
incidents are ascribed to the wrong they committed, be it knowingly or unknowingly to whatever they worship.

Family members of the deaf may experience different feelings following the awareness of their children loss of the sense of hearing and how to communicate with them. In the following statement mother stated the feelings how to circulate information equally like other member of the family.

“When the first time realize my child deafness and unable to hear me, I was very much disturbed and I don’t know how to communicate with her very easily in every kind of information exchange. Even, it was very difficult for me to accept it, most of the time I always suspect and believe that my child become able to regain her hearing ability and i always cross check when my daughter wake up from the bed in the morning, but no result every day. My husband and I lose our money and time that we save it for a long time for emergency and other big plans”.

One of the father of the deaf child stated that, it is a shock and confusion that he experience during the time he aware of that his son is unable to hear. That was a terrible experience to the family. His wife and he lost mutual trust as a result of what was happening. They started to attribute the events to some kind of abnormality. In other words, they made them to believe that they must have had somehow unique make up that they have such children. They were also convinced that it must have been a punishment sent from God for some wrong they did. To have such children is really something they should feel strongly about. They feel cringed (cowered) whenever they think of the position they have in the eye of the community, but know day’s siblings of the deaf child able to attend some sign language class and this help them to communicate with their deaf child.

From all the statements presented by family members in the above paragraphs, one can possibly understand that to have a child with a hearing loss is really shocking, embracement, confusion, challenging and difficult for parents to cope with it. As was indicated, the situation gets worsened if people in the community where the deaf child lives have negative attitudes toward the child with the problem for it can in one way or another affect parents attitude too.
4.3. DISCUSSION

In this section, the data gathered from diverse topics of the study are discussed by relating these various sets of data. The secondary data obtained from literature review are also included to the discussion. The data collected through interview observation and focus group discussion serve as base line data against which the discussions are made. The data secured through other instruments and through the review of related literature are administered to back up ideas reflected from deaf children and hearing families. Thus, the data presented in each important part of the interviews are followed by wide discussions, and some related inferences reflecting the researcher's insight of the ideas. The discussions attempt to address the basic research questions stated in the introductory part of this research paper.

Among deaf participants, those who attended the school for the deaf described negative communication experiences within the family, because of the sole use of oral language and the non-use of ESL. Some of these participants felt that the non-learning and rejection of ESL by their families were indicative of the fact that they were ashamed of their child deafness.

Specifically, Kluwin and Gaustad (1991) emphasize that in the absence of a shared communication system there is a general sense of isolation among family members. The informants in the studies also reported feelings of loneliness and isolation within their families; Foster (1996), stresses that deaf people often find it difficult to ‘experience fully the closeness, acceptance, and shared identity traditionally associated with family’, as a negative consequence of communication barriers within the family.

Deaf participant in the case study carried out by Hurwitz and Hurwitz (1995) pointed out that that she felt that she had been rejected by her family members because of her deafness. She also felt that her family members tried to deny her deafness by encouraging her to be involved in activities with hearing people. Deaf respondents participating in the study, brought out by Foster and Kinuthia (2003), reported that most hearing parents believed that learning and using sign language would hinder their children’s speech development, and most of the parents wanted to ‘normalize’ their children and so they encouraged them to speak and to lip-read. Luterman (1987) also stresses that a negative impact on sibling relationships occurs when hearing siblings turn outward for relationships because they are unable to communicate with a deaf sibling.
According to the study conducted by Frank (1983) cited in Sikennon (1994) on the self concept of the deaf, it was found out that most deaf persons have more negative attitudes towards their deafness. Moreover, the results indicated that most deaf individuals have adjustment difficulties. Adverse home management, complex communication difficulties and unfavorable treatment cause their problems from family members.

Many research works conducted on the self-concepts of deaf persons revealed that the deaf feel themselves, in general, to be in the position of a minority group which is discriminated against and held in low social regard by the majority. It was also indicated that persons with disabilities in general and the deaf in particular have feelings of unworthiness, inadequacy, rejection and confusion. In this study also five deaf students stated that they have a feeling of inadequacy.

As Moores stated Greenberg (1993), reported that a family oriented approach result more effective communication, lower stress and better interactions in families with deaf children. When there is the use of sign language in home setting the deaf child start to feeling a sense of belongingness and part of the family.

In many ways a child represents to the parent an extension of his own self. When the baby is born the mother’s wish to be loved is partially transferred from her own person to that of the baby. To the father, a normal child is often an affirmation, at least in part, of his own sense of success. The capacity to produce unimpaired offspring is language and communication is important for the parents’ sense of personal adequacy (Baum, 1962 as cited in Institute of Educational Research, 1995).

But different emotional states and feelings are experienced by the family when it comes to realize that their child is with some sort of disabilities like hearing loss. Martin (1991), for instance, said that following the parents experience a wide range of feelings including sadness, disappointment, confusion, anxiety, guilt and grief.

Moreover, Lindgren and Sutta (1985) indicated that parents of children with hearing losses pass through a variety of negative emotional feelings before they come to accept the disability. Generally, parental attitudes towards their deaf children tend to be negative. One should also note, however, that the degree and type of parental reactions to a birth of a disabled child like a
hearing loss depends on the availability of professional support parents of deaf children need to be provided with. According to Meadow (1968) as cited in Tesfaye (1995), parents of deaf children who are knowledgeable about the probable reason of coping with the guilt, shame and sorrow that accompany the diagnosis tend to accept their deaf child more easily than parents who are not knowledgeable about the coping mechanisms.

Deafness is a challenge for the child and the family. Regarding this point Schlesinger (1978) states that deafness is a cultural phenomenon in which social, emotional, linguistic and intellectual patterns are intractably bound together. It puts considerable bounds on the child and his family.

Parents’ intense and confused feelings culminate at times in withdrawal, rejection and anger toward the child Shapper, (1980; as cited in Sinkkonen, (1994). At this time, the deaf child develops unexpected behavior of fear, frustration and depression. Dale (1976) reported that a deaf child needs to be reassured quite after that both his/her parents love him/her and must remember to praise him/her and show pleasure in what he/she does whenever possible.

According to Spink (1976) states that the diagnosis process is frequently traumatic for parents and may influence their feelings toward their deaf child for many years. Yet diagnosis marks only the beginning of the family’s struggles. After the initial diagnosis parents after pass through a psychological crisis that includes guilt, sorrow, shock and denial.

Although hearing families of the deaf child want to do what is best for their children, most have difficulty coping with the child’s disability and may actually be contributing to maladaptive behavior. While a child’s parent’s pass through the stages related to the diagnostic trauma, the child’s own psychological structure is also resilient, recent research indicates that deaf children suffer a range negative effect, of whose consequences we are still relatively unknowledgeable Clarke, (1982). We do know, however, that the absence of meaningful, satisfying communication, isolation from the family later poor school achievement and higher rates of psychiatric disturbance, Greenburg and Calderon (1984).

Recent evidences suggest that those who are deaf prefer to be with others who are deaf and tend to cluster in groups, socialize, and marry. Stinson, Whitemire and Kwmin (1996), cited in
Tirusew (2000) indicated that deaf children might have positive perceptions about those with hearing ones. Because many people who are deaf see the experiences and signed language of deaf communities as the most important factors in their lives. The obvious barrier to deaf individuals’ relationships is communication.

Some hearing families and siblings of the participants who didn’t attended sign language course in the school for the deaf tried to communicate with them; communication depended on speech and lip-reading, which was described as limited, similarly to other studies. Foster and Kinuthia (2003) reported in their study that communication at home was often described by their deaf participants as frustrating for both parents and children and conversation was limited.

Children who are deaf require a considerable intervention to provide health care, education rehabilitation and therapy. Intervention strategies for children with hearing losses focus on minimizing the educational, social, and psychological consequences of the hearing loss. Telford and Sawrey, (1981) Gallapher (1993) also stated that early intervention is designed to prevent deficits or improve an existing disability by providing therapies such as speech, therapy, auditory training and such as hearing aids and most important in the new view of children who are deaf, teaching and learning experience. Most children with hearing losses have some remaining, or residual, hearing, and special efforts must be made to facilitate speech reading because the children may not hear all of the sounds in the environment. Children must learn to closely observe lips, facial gestures, body gestures and other environmental clues to fully understand what their family says (Ouigley & Paul, 1984) as cited in Gearheart (1988).

It was also indicated in another research work that parents are required to do their best to treat their deaf children as a like as possible. Deaf children should respond to the same family rules and demand an equal share of their parents’ attention. In this way normally hearing children can become sympathetic allies for helping the deaf child, rather than resentful rivals who feel neglected. In addition to this parents must be polite but firm in explaining to people how they are trying to bring up their deaf children so that all the negative attitudes of hearing people toward the deaf child can be minimized.
Respondents in this study suggested that hearing people should be oriented and taught that deaf people are not uniquely created. Hearing people should be made aware that the deaf have potentialities and capacities to learn and be educated like each one of us.

Parents of deaf children in the study indicated that the government should consider the education of deaf students. Many deaf children face problems of education after graduating. This is because, according to families’ report, after completing, deaf children are forced either to quit their education or join regular schools. This is really very challenging for them. Centers for vocational and sign language training are almost nonexistent in the country, Ethiopia. Hence, stated most of the family participants in the study, governmental or nongovernmental organizations or agencies should open such centers so that the deaf can be the beneficiaries of such centers.

As Ahlgren and Hyltenstan (1994) stated, deaf children had no access to information about daily events and news to extend their deeper understanding of everyday life experiences from everyday social surroundings. Moreover, Yahaya-Isal (1982) explained that a deaf child who cannot hear and speak is expected to miss significant experiences in social and emotional aspects since he or she lacks many pieces of information.

In the all rounded development of deaf children the role of the whole family members is needed. When members of one family have mutual understanding and love with deaf children at home, then they are expected to apply the same experience in contact with other people outside home. If the siblings and parents of deaf children have strong affection or tender feelings for the deaf child, then their interaction with hearing persons in different social contexts in the community where the deaf children live is expected to be smooth and positive (Kirk et al, 1993).

Heward and Orlansky, (1987) stated that school personnel's, specially teachers who are trained in sign language, speech therapists, psychologists visit the home to provide intervention for the deaf child and their families. Such strategy is designed primarily to improve the families’ skills in working with their deaf children. This is very important for parents and their children because through the intervention parents can modify their communication for the mutual benefit of themselves and their deaf children.
Foster (1996) also reported that when deaf people were unable to lip-read or speak clearly communication with family members was more limited. In the current study, as stated above, deaf participants identified problems regarding communication used at home. It must be noted, however, that those participants could sign since childhood and could compare the quality of communication achieved between themselves and their deaf peers at school with that between hearing members at home. They mainly felt disappointed, probably because they could see the benefits deriving from the use of ESL and because of their limited oral communication skills that did not allow them to effectively communicate orally with hearing members of the family.

Mitchell and Karchmer (2004) stress that home language preferences are related to regular use patterns, which are influenced by factors associated with parental hearing status. The language culture of the home can be affirmed or contradicted by school policies influencing the use of sign at home.

As a result deaf children and their parents’ even teachers of deaf students encounter serious problems in communicating with the deaf. To avoid or at least to minimize such problems parents of deaf children should take sign language training so that they could easily communicate with their deaf children. Parents must also be encouraged to help their deaf children to express themselves through whatever communication mechanisms they find easy and convenient for them.

Deaf students who participated in the study also indicated that the deaf should be treated, as equally has the hearing. The families need to provide the deaf with the necessary hearing aids, teaching aids and other relevant equipments, which could enable them to use their potentialities. Moreover, these children suggested that deaf must be accessed to such opportunities as community meetings, conferences, employment and other important sectors available in their respective communities. Furthermore, deaf children said that additional school for the deaf must be opened so that hearing families can get the opportunities to learn how to communicate.

As all of the participants of the study stated in earlier paragraphs they used different mode of communication when they are discussing with their deaf children, which not satisfactory to all of them. Using ESL in the family creates mental satisfaction for deaf children as well as their hearing families.
Acquiring the knowledge of how to communicate using Ethiopian sign language within the family can minimize and remove the barriers and confusion among deaf children and their hearing families of the deaf. Especially, during the early age of the deaf child life is an environment of frustration and stress, family life frequently become centered and the deaf child and the usual patterns of family interactions are not easily disrupted.

However, family communication is still a source for personal frustrations and intra-familial conflicts’ Haueland et al., (2003) among deaf people, the current study highlights communication interaction issues that are part of deaf/hearing relations, which educators and service providers working with deaf children and their families, as an entire family system, should be aware of. Specifically, this study does not only report negative experiences of all participants who communicated orally with their families, as suggested by previous studies but also revealed some pleasant memories as well, given that early, effective and mutual communication was established between family members, as also noted in a study reporting deaf persons’ communication experiences in Greece (Nikolarazi et al., 2007). Thus, the findings of the study mostly highlight the importance of an early and mutual mode of communication between family members and their deaf children, regardless of the communication modality, that ameliorates language barriers between deaf children and hearing parents Haueland et al., 2003a, 2003b), and facilitates natural and meaningful interchanges Kluwin and Gaustad, (1991) and can eventually lead to pleasant family communication memories and experiences.

The implications of this study may be also of importance for the family themselves when making decisions about the communication method to use with their children.

To summarize, in this study deaf children with their hearing families did not have access to a signed environment at home, since their families could not sign with them; thus, their initial language exposure at home was rather limited, and their communication experiences at home were negative.
CHAPTER FIVE

5. CONCLUSION AND RECOMMENDATION

5.1. CONCLUSION

The main focus of this research paper was to investigate the communicational challenges of deaf children with their hearing families and to suggest ways of alleviating the problems.

Accordingly, among others, the following conclusions were drawn. As per the findings of the study, hearing families of the deaf expressed different reactions as a result of having deaf children. These were shock, denial, anger and sadness. And also they faced communicational problems following the awareness of their children’s hearing loss. Such problems encountered by families affected the communicational outline of the deaf students’ too, Children’s negative attitudes towards their hearing families with the absence of participatory interaction and accessible communication.

Hearing families in the study reported that they were facing problems in developing communication skills, which are common to the deaf children and the families. The findings of the study disclosed that a deaf child’s experienced communicational problems in different family and social contexts.

In the family context, for instance, it was reported by the parents that they had serious problems to develop mutual understanding for life affairs in their home environments. This was attributed to a big communication gap between the deaf children’s and their hearing families, most of the parents were not trained in sign language even if some of them are took short term sign language training but they lose it because of the absence of day to day communication with deaf child. According to the parents report, their deaf children’s ways of communication were different from that the actual training they receive as well as the hearing members of the family. As a result, the deaf children have failed to be understood by their family members; consequently, they felt neglected, unloved, unwanted and hopeless.
The finding on the deaf children’s found it more difficult to adjust themselves with the hearing than to do so with the deaf. Such a problem was even more severe for pre-lingually deaf students.

All children participants, indicated that they had developed good friendship with other deaf children in the school and in neighbors and even outside families also reported that their deaf children tended to be happy with the social interaction they had with other children of their own social status. In explaining this, one family participant stated that deaf students preferred being with people of their own kind in their sense of hearing.

The study also assessed interaction between hearing families and their deaf children’s. And it was found out that most hearing family members were not trained in sign language. This created a big communication problem between hearing families and their deaf children. The problem lessens as families gradually developed sign language through communication with their deaf children.

The study, furthermore, revealed that deaf children faced serious families as well as social problems in their respective communities. The problems were brought about as a result of the deaf children’s failure to understand the basic concepts of language units such as words, phrases, and sentences either in communication or written forms.

Deaf children’s easily got hopeless indifferent to what is going on at home, careless and even tended to inflict damage upon their hearing sisters and brothers. Parent respondents in the study revealed that deaf children often tend to feel emotionally, unstable, egocentric unwanted, unloved and rejected.

Participants of the study were asked to give their suggestions about ways of alleviating the communicational challenges encounter between deaf children and their hearing families. All of the families suggested that hearing families of the deaf must take regular basis of sign language training in advance level and as much as they can they need to practice and communicate with it.

They said that deaf children’s should be patient and revolutionary in every issue of like teaching a sign language to create accessible environment, so that communication that cannot be harm the
family interaction easily. Like each one of the hearing people children respondents indicated that parents and teachers of the deaf students should take sign language training.

Deaf children respondents of the study also indicated that the deaf should be treated as equally as the hearing. They further explained that the government should provide appropriate sign language training for family members of the deaf and provide the deaf with the necessary hearing aids and other relevant equipments, which enable them to use their potentialities. It was also indicated by hearing families of the deaf that wrong and distorted beliefs of the society about deafness must be changed through the professionals’ organized effects.

5.2. RECOMMENDATIONS

The findings of this study indicate that sample of the families experience communicational challenges between deaf children and their hearing family members. Different measures have been proposed by the distinct topics of the study. Based on the proposals of the subject and ideas extracted from related literature, the following prospective measures are recommended to be taken by the families of the deaf, deaf children’s, government, the school and the classroom teachers.

I. Measures to be taken by deaf children’s

- Persons with hearing impairment should readily accept their physical being and should overcome the psychological inferiority complex in order to enhance their integration.
- Be ready to train the member of the family and learn from them, raise the awareness of the community by demonstrating special personality attributes and courage to break the barriers.
- The hearing impaired persons must face the challenges of negative attitude instead of letting it to flourish.

II. Measures to be taken by the hearing families of the deaf.

- As it was revealed in the study, books translated and written in sign language are hardly available in the country, Ethiopia. So that efforts must be made to have adequate books prepared in sign language.
Families of the deaf child have to give a big emphasis for sign language training that will help them to have equal dissemination of information and discussion among all the family members.

III. Measures to be taken by CBO and civil society organization

- NGOs should organize a awareness raising event or program for deaf children’s and their hearing family members on the topics of advantage and disadvantage of communication,
- ENAD should be empowered to advocate and lobby for the formulation and implementation of policies helpful for persons with deaf children’s and their families.

IV. Measures to be taken by concerned bodies

- It is also very important that the concerned bodies like policy makers, planners and interested groups must realize and assist the deaf to overcome barriers which operate against the psychosocial development of the deaf.
- It could be of the greatest help for the deaf and their hearing families if the concerned bodies and professionals provide families with the necessary assistance. This is because parents can understand their deaf children through professionals’ assistance and creates conducive settings for healthy communication developments of their deaf children.

V. Measures to be taken at school level

- The school has to ensure the availability of resources e.g. resource room, interpreters, instructional materials and hearing aids etc.
- School need to facilitate sign language training for the families of deaf children and they needs to work on continuous assessment of communicational achievement of hearing families of the deaf.
- The school has to create a forum in which different concerned bodies, e.g. special educators, sign language professionals, psychologist, families of deaf children and governmental and non- governmental organization collaborate with each other to discuss and create effective communication among deaf children’s and their families.

VI. Measures to be taken by Teachers

- Teachers have to be well aware of their students communication challenge within the family so that they can prepare a consecutive training schedule for families of deaf children’s.
Indeed, teachers should be innovative, flexible, creative, ready to bring a solution from the deaf children’s and capable of initiating different active.

Teachers should have the skill of sign language to interact and narrow the gap of deaf children and their families whenever they face challenge.

VII. Measures to be taken by government organization

- In order to create accessible communication and equal opportunities for the persons with hearing impairment the enactment of laws and practical measures are essential especially in areas that hinder their integration and access to communication, equality and human right.
- Attitudinal barriers need be improved within the family and the surrounding neighbors have to be constructed by concerned Ministry office.
- Communication and information inaccessibility needs to be improved and needs to be placed on the verge of transformation, communication accessibility through TV programs, radio, and on every means of communication.
- GOs must launch awareness raising programs for the public in order to change such negative attitudes the public has on hearing impaired children’s so that opportunities for equal participation within the family and to easily mix with communities could be created.
- Take legal measures on those individuals who consciously and deliberately violate the basic rights of persons with disabilities /hearing impaired/. Such measures can help the effective implementation of:
  - Policies;
  - Inclusive education; and
  - Participation of the persons with disabilities in developmental activities.
- Government should facilitate the involvement of NGOs to help the development of effective communication between deaf children’s and their families in Ethiopia.
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Appendices
Appendix A

ADDIS ABABA UNIVERSITY

Department of Special Needs Education

Semi-structured interview for Deaf children

Part 1: Introduction

Interviews are among the most familiar strategies for collecting qualitative data. The different qualitative interviewing strategies in common use emerged from diverse disciplinary perspectives resulting in a wide variation among interviewing approaches.

With qualitative research interviews we try to understand something from the subject’s point of view and to uncover the meaning of their experiences. Interviews allow people to convey to others a situation from their own perspective and in their own words. Research interviews are based on the conversations of everyday life. They are conversations with structure and purpose that are defined and controlled by the researcher. Although the research interview may not lead to objective information, it captures many of the subjects’ views on something.

Part II: Objective

The objective of this interview is to get reliable and trustful information from the concerned bodies of the research participants and the partial fulfillment of Masters Degree in Art on the title of “Communication Challenges of Deaf children with their hearing Families”.

Part III: Personal Profile

Thank you for taking the time to participate in this interview, you will remain anonymous. I just need a sample of participants to use as an example for a research.

Secrete name ____________________________________ Sex ____________

Age ___________________ Educational level/ grade ________________
IV: INTERVIEW QUESTIONS FOR DEAF CHILD;

1. How do you communicate with your hearing family members at a time when you need something important?
2. Do you think that you are different from your family members? Why?
3. What do your families believe and say about you? Why?
4. Do your families prefer to communicate with Ethiopian Sign Language (ESL) in every discussion? Why?
5. Does your hearing families understand you easily when you talk to them something important by using Ethiopian Sign Language? Why?
6. How do you participate in family discussion without any communication difficulties? Why?
7. What are the difficulties do you face every day with the absence of Ethiopian sign language communication with your hearing families? Why?
8. What are the basic prospectus do you think you will revive because of appropriate communication?
9. What kinds of communicational method you are using when you are chatting with your hearing families?
10. What are the reasons for you that some of your families can’t use Ethiopian sign language?
11. What do you feel if you realize that you are not incorporated in to families’ discussion?
12. What do you do when you are unable to understand the communication method your family uses to talk to you? Why?
13. Who is the most difficult member of the family for you to understand his language? Why?
14. With whom you prefer to talk when you are inside the family gathering? Why?
15. How do your families share their knowledge and information with you equally just like hearing Childs inside the family?
Appendix B

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Department of Special Needs Education

Semi-structured interview for hearing families of Deaf children

Part 1: Introduction

Interviews are among the most familiar strategies for collecting qualitative data. The different qualitative interviewing strategies in common use emerged from diverse disciplinary perspectives resulting in a wide variation among interviewing approaches.

With qualitative research interviews we try to understand something from the subject’s point of view and to uncover the meaning of their experiences. Interviews allow people to convey to others a situation from their own perspective and in their own words. Research interviews are based on the conversations of everyday life. They are conversations with structure and purpose that are defined and controlled by the researcher. Although the research interview may not lead to objective information, it captures many of the subjects’ views on something.

Part II: Objective

The objective of this interview is to get reliable and trustful information from the concerned bodies of the research participants and the partial fulfillment of Masters Degree in Art on the title of “Communication Challenges of Deaf children with their hearing Families”.

Part III: Personal Profile

Thank you for taking the time to participate in this interview, you will remain anonymous. I just need a sample of participants to use as an example for a research.

Secrete name _____________________________________ Sex _________________

Age ________________ Educational level/ grade ________________

Part IV: INTERVIEW QUESTIONS FOR HEARING FAMILIES OF DEAF CHILDREN.

1. What was your first reaction when you realize that your child is unable to hear your voice when you talk to him? Why?

2. Can you communicate your deaf child by using Ethiopian sign language? How/why?

3. What kinds of methods and techniques are you using to communicate with your Deaf child?

4. How do you discuss an important issue with your Deaf child every day? Why?

5. Do you think that your child is able to understand you easily when you talk to him/her even if he/she is Deaf? Why/how?

6. How do you equally share information and knowledge with your Deaf child like other family members?

7. What is your reaction when your child cannot understand you easily? Why?

8. Do you ever take a sign language training to try to communicate with your deaf family member?

9. How do you work on to overcome the communication gap between you and your families? Why?

10. Do you think that your Deaf child is different from other family members? Why?

11. What is your mode of communication you are using to communicate with your Deaf child? Why?

12. Do you believe that your Deaf child understands you easily when you talk to him without Ethiopian Sign Language? Why?

13. Do you think that you are using all what you have to do to create accessible communication with your Deaf child? How/why?

14. What is your challenge to communicate by Ethiopian Sign Language with your Deaf child? Why?

15. What do you think every hearing family of Deaf children must have to do for the development of their communication between their Deaf children?
Appendix C

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Observation checklist on communication challenges of Deaf children’s with their hearing families

Part I: Introduction

Observation refers to the process of observing events or situations. The technique is particularly useful for discovering how individuals or group of people behave, and non particular observation is the researcher simply observes the activities without talking part themselves. Whilst this has the advantage of preventing the researcher from unduly influencing or becoming involved in activities they may not wish to take part in.

Part II: Objective

This checklist was utilized by the researcher to observe participation or interaction and communicational issues of Deaf children’s with their hearing families in activities which take place during the actual home setting communication process between Deaf children’s and their hearing families.

Part III: Personal Profile

Date of Observation _________________________________

Total no of peoples inside home ______________________

Place ____________________________________________
# Part IV: Observational Activities

<table>
<thead>
<tr>
<th>No</th>
<th>Activities</th>
<th>Yes</th>
<th>No</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Did families of deaf children can communicate with their child by using Ethiopian sign language?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Do Deaf children feel confident to exchange information with their hearing families?</td>
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<td></td>
<td></td>
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<tr>
<td>3</td>
<td>Do Deaf children incorporated in families’ interaction without any communication problem/challenge?</td>
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<tr>
<td>4</td>
<td>Did Deaf child feeling alone or left out in the families’ issue during family gathering/discussion?</td>
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<tr>
<td>5</td>
<td>Did families of the Deaf child feeling aggressive or sad when they are overlooked by their Deaf child?</td>
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<tr>
<td>6</td>
<td>Did the Deaf child able to be understood by his/her family members during communication?</td>
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<tr>
<td>7</td>
<td>Did the Deaf child communicate and works effectively and safely just like other member of the family?</td>
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<tr>
<td>8</td>
<td>Families of the Deaf, are they able to interpret relevant information for the child?</td>
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<tr>
<td>9</td>
<td>Did the Deaf child has the ability to follow instructions and specifications and ask for help where needed?</td>
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<tr>
<td>10</td>
<td>Does the Deaf child have someone to interpret for him/her while TV or Radio program?</td>
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<td>11</td>
<td>Did the deaf child is using a sign language while to communicate with hearing family members?</td>
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<td></td>
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<tr>
<td></td>
<td>Question</td>
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<tr>
<td>12</td>
<td>Dose the Deaf child is included in the family discussion with Ethiopian sign language communication?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Is he/she understood everything or some points what the family member’s saying through the family discussion?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Do the Deaf child allowed to provide his/her opinion during communication b/n family members?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Do the hearing families of Deaf children feel uncomfortable or unhappy using Ethiopian Sign Language (ESL) during communication with the child?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Did Families of Deaf children using Local sign Language during communication with Deaf child?</td>
<td></td>
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<td></td>
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</tbody>
</table>
Appendix D

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FOCUS GROUP DISCUSSION GUIDE FOR HEARING PARENTS

Part I: Introduction

Focus group discussion is a type of interview that involve carefully selected individual who usually do not know each other. Focus groups are extremely useful in providing qualitative data which gives an insight into attitudes and perceptions difficult to obtain using other procedures.

Part II: Objective

The main and basic objective of this focus group discussion is to grasp different information that are not stated on the Interview section and it is helpful to have further information.

Part III: Profile

When ______________________________

Time ______________________________

Where ______________________________

Number of participant’s ____________
Part IV: Focus group Discussion topics /Discussion Topics/

1. Do you think learning Ethiopian sign language is necessary to communicate with your Deaf child? Why?
2. How do you communicate with your Deaf child about the current issue you want to tell him/her? Why?
3. Do you think that your Deaf child feel comfortable to communicate whatever the case with you? Why?
4. Does your child feels discourage and disappointed in the families discussion? Why?
5. What kind of communicational methods you follow to share information and knowledge with your Deaf children’s? Try to describe them or list the methods that you are using?
6. What are the challenges with you and your Deaf child face regarding communication? Why it is happening?
7. Do you think that your child understand you what you want you to say and you understand him/her back the way he/her talk to you?
8. Do you think that you are sharing information with your Deaf child just like other family members?
9. What is the best method you are using to communicate with your Deaf child/family member? List some of them?
10. Do you feel that your child/family member is experiencing discrimination and stigmatized because of the absence of appropriate communication within the family?
Declaration
This thesis is my original work, has not been presented for a MA, BA or other degree in any other university and that all sources of materials used for the thesis have been duly acknowledged.

Name, ________________________________

Signature ________________________________

Place ______________________________________

Date ______________________________________

Approved by ______________________________

Advisor Signatrae ___________________________