

SIGN AND SCHOOL: A JOURNEY

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Abstract: When our international collection of papers on the status of signing in school was published in 1987, we believed we were in transition in the UK. The discovery of sign languages and their validation by linguists, had provided the base for the implementation which the deaf community had requested. Deaf children ought to have sign language as their language of interaction and instruction. The collection highlighted forward thinking but also showed that different countries were at different stages of their journey. In this contribution, we reflect on the knowledge we had then, the discoveries since, and ask the question: is it now the norm that deaf children, from the earliest of age, have access to sign language (in our case, British Sign Language), and can we describe the evidence that says this is working to produce more adjusted and effective citizens? We look beyond the simple question to consider whether the bilingualism we have been advocating is one-sided and does not produce a change in attitude for the majority society. In effect, if deaf people become bilingual, does it allow society to remain monolingual and to avoid engagement with the deaf view of life and society? And finally, the paper asks: what will be hearing loss or/and hearing enhancement in future?

Keywords: Sign Language in School. Sign bilingualism. Transhumanism.

SINAL E ESCOLA: UMA JORNADA

Resumo: Quando nossa coletânea internacional de artigos sobre o status da sinalização na escola foi publicada em 1987, acreditávamos que estávamos em transição no Reino Unido. A descoberta das línguas de sinais e sua validação pelos linguistas, forneceram a base para a implementação que a comunidade surda havia solicitado. As crianças surdas devem ter a língua de sinais como sua língua de interação e instrução. A coletânea destacou os pensamentos de vanguarda, mas também mostrou que diferentes países estavam em diferentes estágios de sua jornada. Nesta contribuição, refletimos sobre o conhecimento que tínhamos na época, as descobertas desde então e questionamos: a norma atual é que as crianças surdas, desde a mais tenra idade, tenham acesso à língua de sinais (no nosso caso, a Língua de Sinais Britânica), e podemos descrevermos as evidências que dizem que isso está funcionando para produzir cidadãos mais ajustados e eficazes? Olhamos além da simples questão para considerar se o bilinguismo que temos defendido é unilateral e não produz uma mudança de atitude para a maioria da sociedade. Com efeito, se os surdos se tornam bilíngues, isso permite que a sociedade permaneça monolíngue e evite o envolvimento com a visão surda de vida e de sociedade? E, finalmente, o artigo pergunta o que será a perda auditiva ou o aprimoramento auditivo no futuro?

Palavras-chave: Língua de Sinais na Escola. Bilinguismo de sinais. Transumanismo.

SEÑAL Y ESCUELA: UN VIAJE

Resumen: Cuando se publicó en 1987 nuestra colección internacional de artículos sobre el estado de la señalización escolar se publicó en 1987, creíamos que estábamos en transición en el Reino Unido. El descubrimiento de las lenguas de señas y su validación por parte de los lingüistas sentó las bases para la implementación que la comunidad sorda había solicitado. Los niños sordos deben tener la lengua de

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señas como su lenguaje de interacción e instrucción. La colección destacó la visión del futuro, pero también mostró que diferentes países se encontraban en diferentes etapas de su viaje. En esta contribución, reflexionamos sobre el conocimiento que teníamos, los descubrimientos desde entonces, y nos preguntamos: ¿es ahora la norma que los niños sordos, desde una edad temprana, tengan acceso a la lengua de señas (en nuestro caso, la lengua de señas británica) y a ser capaz de describir la evidencia que dice que esto está funcionando para producir ciudadanos más aptos y efectivos? Vamos más allá de la simple pregunta para considerar si el bilingüismo que venimos defendiendo es unilateral y no produce un cambio de actitud en la mayoría de la sociedad. De hecho, si las personas sordas se vuelven bilingües, ¿permite esto que la sociedad siga siendo monolingüe y evita comprometerse con la visión sorda de la vida y la sociedad? Y finalmente, el artículo pregunta ¿qué será la pérdida auditiva o la mejora auditiva en el futuro?

Palabras clave: Lengua de señas en la Escuela. Bilingüismo de señas. Transhumanismo.

Setting a context

Our *Sign and School* published collection of papers in 1987 examined current practices in Italy, France, Denmark, Germany, the Netherlands, Belgium, Spain, Switzerland, Australia and Russia, USA as well as the U.K. How far have we travelled? In the U.K., there are many fewer schools for deaf children now than then, more children implanted, and still very small numbers of teachers who are themselves deaf and users of British Sign Language (BSL). At the same time research has progressed and new concepts such as *Deafhood* (LADD, 2003) and *Sign Bilingualism* (BAKER, 2011) are evident. There is new legislation on rights of access to BSL for adults (for example, the British Sign Language (Scotland) Act 2015) and a much higher profile for BSL in the media. However, it is not obvious where the educational journey will end.

In the beginning

Signing, sign language and deafness are not new. And they are certainly not new in the practice of education.

Arnot (1779) in his history of Edinburgh described the Braidwood Academy and its teaching of deaf young people. Not surprisingly (as the assimilationist tendency was always strong, even then), he prioritised his comments on the Academy's teaching of English literacy and even speech-reading. He also identified the fact that the students were signing (albeit from a negative perspective): "Their only method of conversing is by signs and gestures. Their ideas are few,

being entirely confined to visible objects and to the passions and senses [...]” (ARNOT, 1779, p. 425).

When Braidwood’s Academy moved to London, the teachers continued to use sign language in instruction:

In order to bring (the deaf learner) acquainted with (sounds and words) we must proceed by the most obvious and simple methods, depending on what has been termed natural language (gesture, feature etc). (WATSON, 1809, p. 75).

Scott, the headmaster of the deaf school in Exeter, in the South-West of England, said

Sign language then is used by teachers because it is the only common ground on which they can meet their pupils and where they can both understand each other so that one can communicate and the other receive the knowledge to be conveyed. (SCOTT, 1870, p. 118).

However, educators were not satisfied with the use of natural signing and began to create new forms. There came to be a distinction between the natural signs and those which had to be invented. These were the methodical signs invented to provide word-sign equivalents to be distinguished from the natural signs, which in turn, had two forms: truly natural (used by hearing people - gestures) and descriptive or imitative signs, that is, as in BSL today (e.g., TIRED, worn facial expressions shoulders slumped; and SLEEP, palms together on side of head, with head tilted).

The urge to invent signs for words, which has no direct equivalent in signing, has continued to the present day as speech-centric education stumbled with classroom communication of text curricula. This need for equivalence may be heightened in countries such as the U.K. and USA where monolingualism is more obviously a societal norm. This ensured that, what occurred in practice in the U.K., became the *combined method* (ADDISON, 1899).

However, Tylor (1874) (sometimes considered the father of Anthropology) had already pointed out that these methodical signs had limited impact.

So far as I can learn, few or none of the fictitious grammatical signs will bear even the short journey from the schoolroom to the playground where there is no longer any verb ‘to be’, where abstract conjunctions are unknown and where mere position, quality and action may serve to describe substantive and adjective alike. (TYLOR, 1874, p. 23).

Much of these understandings were lost in the rise of oralist views in the late 19th century and well into the 20th century; views which denied sign language as being useful in deaf education. However, despite these earlier practices and discoveries (which recognised sign *language*), a new generation of educators in the 1970s and 1980s wanted again to invent new signs and new intermediate systems in order to represent the words and grammar of spoken and written language. Even Conrad (1980), after having demonstrated the failures of the British oral education system predominant in the U.K. through most of the 19th century, suggested that a system of signing *and* speaking might be best. In that view, he re-iterated Tylor's views a century earlier. He entitled his article *Let the children choose*, implying that by offering them a *total communication* provision, the deaf children would pick from the mixture, what they needed in order to fashion a language and accumulate knowledge. At the same time, linguists had begun to analyse and describe signing as a language and to note that each country had its own signed language.

Proceedings of a conference in Bristol (KYLE, 1987), tried to bring together our knowledge of sign methodology in schools. Researchers and educators from thirteen countries were represented.

Sign and School in 1987

Several papers set out the advances in the linguistic analysis of sign language in different countries, but our primary concern here is on the application of those signed languages in education.

Possibly most developed were the applications in the USA (DENTON, 1987) who maintained that 75% of programmes in the USA were using Total Communication methodology (already in 1976). A similar programme was adopted in early 1970s in Sweden as *Signed Swedish* (BERGMAN, 1979).

Most of the papers presented experimental studies of the introduction of signing in school. Prillwitz (1987) (thinking of the deaf children) said of the outcome of the German pre-school intervention.

They have turned into comparatively well-balanced, curious, self-confident and intelligent little personalities. The communication with hearing parent is relaxed and comes close to that age-group quality standard. Upon entering school, they normally know more than 2,000 signs. (PRILLWITZ, 1987, p. 93).

Harder and Knoors (1987) explained that in the Netherlands the primary aim for schools was to teach Dutch and as a result, it was primarily the use of signing and speaking which had been used. They did suggest however, that the native sign language should have a place in a bilingual framework.

Zaitseva (1987) described use of Russian “sign language as an auxiliary means” with an expectation of simultaneous presentation of sign and speech. Marchesi (1987), likewise for Spain, indicated the predominance of sign and speaking in order to produce literacy, but identified the difficult issue that deaf people could not legally become teachers. By and large, the descriptions by educators indicated that signing and speaking simultaneously was the default model.

The experimental programme in Denmark described by Hansen (1987), promoted Danish Sign Language as the first language of the young children and set this within a bilingual framework and reported positive outcomes. Similarly, early intervention with sign language was described in the Netherlands by Van der Lem (1987).

Bouvet was quite clear in her analysis of French Sign Language, that

If “signs” do play a part in the education of the deaf, “Sign language” itself is still totally excluded. It is a blatant and surprising inconsistency in the field of education in communication and language and it is the deaf child alone who suffers as a result. (BOUVET, 1987, p. 59-60).

Deck (1987) described a bilingual education programme in France, and May, Ringli and Boyes-Braem (1987) described a bilingual programme emerging from a signed speech development. In both these cases, the approach required the involvement of deaf teachers. However, in most countries, regulations effectively barred deaf people from qualifying as teachers.

In 1987, it appeared the education systems were on a pathway to use sign language and to use them in a way which offered access and knowledge to deaf people. The consensus was positive and forward-looking.

Sign bilingual education

The sign bilingual school systems which were being promoted implied equality in language status. Models came from spoken language experiments in Canada and in Ireland where immersion in French or Irish Gaelic was the chosen approach for curriculum delivery. Benefits were claimed and measured in cognitive growth as well as in acceptance of a bicultural identity. The benefits were predicted in terms of enrichment of society.

In those spoken bilingual models, it was imperative to ensure that staff were high level users of the language used for curriculum delivery. In sign bilingual schools, it was clear at the start that the expert groups of teachers who could use sign language had to include teachers who were deaf themselves. Inevitably, this requirement came up against a range of obstacles in the U.K. with aspiring teachers who are deaf themselves being unable to reach the legal teaching qualification, and hearing teachers unable to learn to use the sign language at the advanced level needed. It seemed odd that the assessment of trainee teachers of the deaf in the U.K., allowed the lack of communication in the classroom to be ignored. Hearing teachers could be accepted as qualified, even though they could not communicate with the deaf children. In the assessment of mainstream hearing teachers, an inability to communicate with the children would have been a failure.

While Preisler (2009) was able to describe a comprehensive application of a sign bilingual approach across all areas of the curriculum and age groups, in Sweden, the pattern of use of sign language in education in other countries was much less certain.

Moore and Miller (2009) collected an extensive set of papers on the state of education in countries across the world. In their final comments, they highlight the enormous pressure of what they term, a “pathological model of deafness”, which promotes mainstream education as the primary goal (the educational framework had shifted from the accommodation principles of 1987 to the assimilationist goals of the past). This model

[...] implies that it is preferable for deaf children to be educated with hearing children instead of with other deaf children and by extension to be taught by hearing teachers rather than by deaf teachers. The assumption is that outcomes in the form of educational achievement will be better and little attention is given to social emotional considerations ... There is little or no contact with deaf adults or deaf role models ... Unfortunately the confidence and empowerment felt by deaf adults ... has little influence on educational programs for

deaf children which are controlled by hearing people in every country of the world. (MOORES, MILLER, 2009, p. 394).

The momentum described in 1987 had stalled and, some might say, had withered in the face of the tsunami of mainstreaming. The Salamanca Statement and Framework for Action on Special Needs Education (UNESCO, 1994) derived from a gathering of 300 participants representing 92 governments and 25 international organisations of hearing educators, who proposed “...every child has a fundamental right to education, and must be given the opportunity to achieve and maintain an acceptable level of learning” (p. viii). A view everyone would agree with but then also “[...] those with special educational needs must have access to regular schools which should accommodate them within a child centred pedagogy capable of meeting those needs” (p. viii).

The fact that a later paragraph (21) in the Salamanca Statement (UNESCO, 1994) said

Educational policies should take full account of individual differences and situation. The importance of sign language as the medium of communication among the deaf for example should be recognised and provision made to ensure that all deaf persons have access to education in their national sign language. (UNESCO, 1994, p. 18).

was mostly ignored. Education administrators in many countries viewed the “integration” green light as a means of reducing the higher costs of separate education.

The principle of mainstreaming had its roots much earlier in the UK but by the time of the Salamanca Statement the beliefs and policies had become solidified internationally.

The situation in the U.K.

In the U.K., statutory educational responsibilities begin at the point of discovery of hearing loss. That is, teachers of the deaf are advised by medical authorities of the hearing loss in the infant. There is a nationwide new-born screening programme, which means that nearly all hearing loss is identified very close to birth. The precise service offered at that stage varies from one local education authority to another but, typically, a teacher of the deaf will visit the home of the child and begin an advisory relationship with the family, which may involve weekly visits. At the same time, most infants will be considered for cochlear implants and an education

and medical team will begin to examine the possibilities for surgery. Depending on circumstances, a social worker may also become involved with the family. There is a national deaf children's organisation, which advises parents and tries to support them through what can be a very confusing time of professional intervention and requests for decisions from the family about the future direction of the child.

Many local education authorities have parent-baby/infant/toddler groups where parents are invited to meet up with education specialists and with other parents. Visits to the home by the teacher of the deaf service may run in parallel with speech and language therapy linked to hearing aid provision or to the medical intervention of cochlear implantation. In some areas, for example in Bristol, the programme includes deaf adults who will be present in meetings and will work with the deaf infants and children. Sign bilingual programmes are offered to families from the earliest contact.

Formal deaf school can begin at age three although increasingly children are kept in mainstream pre-school groups, especially where the child has a cochlear implant. The default approach is to emphasise hearing and speech development but some authorities adopt a strong bilingual approach and provide sign language training to the family. Even when children have cochlear implants, they can have sign bilingual programmes in school.

All children in the U.K. progress in school according to chronological age and although progress is formally measured at several points through their schooling, it is unusual for a child to repeat a year because of poor performance. This allows deaf children in mainstream schools to continue in parallel with their own age group. Children with special needs are assessed by local education authorities and in England, are provided with an Education, Health and Care Plan (EHCP) (formerly a Statement of Special Educational Needs). This sets out the additional support a child needs in order to be included in education and also to function effectively in daily life. For deaf children in school, this can provide a personal helper or a sign language interpreter for a set number of hours each week. In times of financial austerity, local education authorities may struggle to meet all the provision as set out in the EHCP.

Deaf children are expected to follow the same curriculum as set out nationally for all children. There may be some alterations such as in regard to the requirement to study a non-English language. Although a BSL curriculum has been developed, this is not yet in operation.

However, the Government has agreed to a public consultation on its use in mainstream and deaf schools – the consultation to begin in 2022. Deaf young people will progress to further and higher education at age 16 or 18 years. Several universities have specialist support for deaf students. The traditional pattern of deaf young people moving into manual occupations has almost disappeared, and has been replaced by occupation in professional and semi-professional roles. A national curriculum for adult study of BSL offers a pathway into sign language interpreting – although this route will typically require 3 to 5 years of study and practice.

Looking at the most recent survey of deaf children in the U.K., it is reported that there are 53,954 deaf children in schools aged 3 years to 19 years (CRIDE, 2019). One in 1500 of all (hearing and deaf) children are reported as being profoundly deaf (5,833). Only 3% of the reported deaf children are in specialist schools for deaf children. There are 9% of profoundly deaf children reported as being in sign language programmes, although there is a category of English programmes with signed support (a further 22% - but these are unlikely to be sign bilingual). The same survey reports 6% of staff attached to schools and services who are deaf. There are said to be 22 schools for deaf children in the U.K.

It's becoming very clear that our model of deaf culture arising in deaf schools and feeding the adult deaf community is nearly gone as a functioning model in the U.K. It is quite obvious that *deaf studies* itself has to change. We can see that “deaf” is being used by decision-makers to refer to everyone with hearing loss however minor. As a result the percentage of culturally deaf (BSL-using) school age children drops to a very small number. This could be possibly as low as 600 out of the total 53,000 who are said to have a hearing loss. Decision-makers can now say that the culturally deaf children are such a small minority of school children as to be almost insignificant.

Kyle and Ladd (2009) examined the OFSTED (national school inspection) reports and Deaf schools tend to use sign language. The OFSTED reports rate these schools very highly in learning and personal development; but rate them very low in achieving the standards of the national curriculum goals. It would seem that inspectors are making value judgements about the nature of deaf children suggesting that deaf children are a learning challenge and therefore consider that teachers are doing very well to get them to what turns out to be a rather low level of achievement.

The obstacle to deployment of sign bilingual programmes remains the dominance of the hearing education system and its grounding in medical remedial policy and the over-riding directive of the right to mainstream education.

What sign bilingualism ought to be

Obviously (perhaps) sign bilingualism is about normality, status and equality - the rights of individuals to express themselves in their own language. But if that language is not a majority language nor the language of power in any one country, then the bilingualism may not be a recognition of equality but may be seen as a transition process to monolingual acceptance (SKUTNABB-KANGAS, 1994).

In her analysis of linguistic human rights, deaf people have that right to sign language in education. Even though there are laws passed recognising sign language in many countries (including separately in Scotland, but not England), the impact on the community and education system is not so apparent. It is true that interpreters are provided in Courts of Law and also in appointments with the doctor and in hospital and even that 5% of television broadcasts have to have BSL. Even so, the impact has been limited in relation to the promotion of BSL users' linguistic human rights and quite strikingly, in terms of the deaf community's influence on education. The deaf community has virtually "no voice" in regard to what happens in the classroom. Deaf children are treated as disabled and in need. When they are given an assessment in favour of sign language support, this is often derailed by the lack of specialist bilingual teachers and the reluctance to bringing deaf people, who are sign language users, into those support roles.

Skliar and Quadros (2004) made a similar point.

The discourses and practices are like networks with asymmetric power and knowledge relations about Deaf people and Deafness. The meanings and symbolic systems produce representations about Deafness and about Deaf bilingual education that are based on traditional conceptions, which use sign language as a tool for the dissemination of the official culture and language. (SKLIAR, QUADROS, 2004, p. 370).

Their observation is that signing is tolerated only to promote access to majority society – that is the "official culture". Deaf people are often drawn into this - they are given the idea that

access to hearing society's knowledge is the goal, actually the only valuable goal. The sign bilingualism they are offered is a bridge only to the greater knowledge and culture of hearing people. In regard to the offered sign bilingualism, the trap is simple: if deaf people can become bilingual, then hearing people do not need to make adjustments because, by definition, deaf people are bilingual and will have access to social knowledge in English, in reading and writing, even if their speech is less than perfect. Problem solved. There is no need for the majority of society to embrace, understand or even learn to use sign language. The flaw in the argument is that, so far, the programmes of education have not been able to ensure full literacy in English and fluency in sign language.

The focus, then, shifts to the provision for that asymmetric bilingualism - provision of interpreters or teachers who are functionally bilingual - at least in the domain of education and in the education curriculum. Where this seems incomplete, signs can be invented for curricula terminology, which has no obvious equivalent in BSL and even deaf people can be "consulted and engaged" in this important endeavour. However, the functional bilingualism on the hearing side, does not extend into residence in the deaf community or involvement in life, relationships and culture. In fact, there is no BSL-based, deaf culture-focused educational curriculum, which teachers can use and other professionals can enter into. The asymmetry should be obvious. The deaf representatives in the interaction are drawn into this imbalance relationship.

However, there is another issue which arises, because this designated "provision" now carries a financial value (cost) and it "has to be" monetised. Ideally, deaf children, students and adults can be assessed in terms of need, and the provision can be costed inside a notional and then a real, budget, according to the hearing-determined level of deaf need. Sign bilingualism then becomes a commodity, to be purchased from the mainstream community's budget. In the U.K., if the National Deaf Children's 2018 report is to be believed, that commodity has become too expensive, and there has been in the period of austerity in the least ten years, a major reduction in the specialist provision of qualified and linguistically competent teachers and assistants.

Sign bilingualism is not seen as a means to enrich the language environment even of the deaf community itself, never mind promoting the general mosaic of languages in mainstream

society; which, in any case, as demonstrated by Brexit and the reduction in language learning/teaching, is not prioritised in the context of increasing English nationalism.

In effect, sign bilingual programmes may be driven by oralist principles and economic control. The purpose of the provision of sign bilingualism is to achieve “the normal” or at least, an “inclusion” which is speech-centric.

It is this story which we often see presented to parents by educators - something like, ‘if you want your child to be normal then he/she has to acquire spoken/written language; but you as parents will need to compete for the use of a limited budget, in order to achieve this.’

Weber (2019) a deaf person, having been brought up orally, expanded on this:

There are two opposing ontological assumptions concerning the deaf person: 1) the deaf person is disabled and needs a cure to take their place in the hearing world and 2) the deaf person is not disabled but is a member of a minoritized language and a cultural group and possesses a first language and an identity with which to navigate hearing and deaf worlds. Both positions are presented as stark choices to parents of deaf children (Mauldin, 2016). Each position on the binary poses a threat to the other. (WEBER, 2019, p. 111).

The choice for parents is stark – conform or lose your child to this alien culture which the education systems will not support you in entering. There is no budget to aid the parents in learning to communicate in BSL. On this pathway, we have probably lost sight of the value of languages and have actually marginalised deaf people rather than creating the respect for community and culture; even when we talk about sign bilingualism.

Deaf Futures

So where does this take us as we struggle to provide language options to the deaf child and deaf community? Most research work and analysis looks backwards in time. In this section, we need to look forwards and consider some of the social, political, ethical and moral questions concerning our approach to deaf “humans”. It is true that there has been significant progress in Deaf Studies, Deafhood Studies, and in empowering and promoting deaf researchers. The collection of papers by Kusters, De Meulder and O’Brien (2017) illustrate the strength of this movement and its potential place in academic literature. At the same time however, there are major changes in medical intervention and socio-political developments affecting the deaf community in the search for the “new normal”.

Until recently, the medico-social intention was to force speech development on deaf children through direct immersion in hearing-speech environments. This was then augmented by the transfer of deaf children into mainstream situations, isolating them from other sign language users. Now, there is a more direct action against the “abnormality” of hearing loss and that is the invasive surgery of cochlear implantation, designed to replace defective functioning with an artificial sound reception and processing system. In this medical-educational programme, there is no need of sign language as the previously deaf child is becoming hearing.

When we accept this approach and the goal can be particularly attractive to parents who have “lost” their normal child to hearing loss, we, as a society, are entering a new age. Perhaps it is more correct to say that we have already entered into this new age of accepted medical intervention. We have encouraged and funded (in most cases) interventions directly on the human person in order to “normalise” the individual. A cochlear implant is a neuro-prosthesis: a direct action on the internal functioning of the brain of the person. It has become mainstream approach to the problem of hearing loss. However, the ethical discussion which might have been more prominent is whether this invasive approach is a “treatment” or an “enhancement.”

Science fiction has for many years predicted enhancement of human functioning by invasive action that is, through bio-engineering. Lee (2016) has presented this development of cochlear implantation as having been offered as a “treatment” with the threat to parents that failure to accept this treatment is morally reprehensible on the part of the parents (that is, the duty of care and responsibility for decision-making on behalf of the infant or child resides with the parents). In fact, there has been relatively little debate on the way in which cochlear implantation relates to the arguments surrounding *transhumanism*. The *transhuman* is a person where their natural functioning is augmented by non-natural invasion of the body. Science fiction offers super-human strength, better vision, enhanced speed and even self-repairing functionality in the event of injury, as well as longer life span. The fact that cochlear implantation has not been analysed as enhancement is a result of the socio-medical perception of the deaf person as deficient - and therefore, a to-be-repaired entity. However, there is every reason to consider the possibility that currently hearing individuals may wish to have a cochlear implant in order to experience a wider spectrum of sound. In fact, in this line of thinking, in a future society, the un-enhanced person will become the future un-abled person.

As Lee pointed out:

In other words, futuristic CI use by hearing people is no longer a treatment but as an entry into supra-normal hearing or new sensory experiences in a posthuman world. They may interface with other future neuro-prostheses so that one sensory modality can be replaced with another. (LEE, 2016, p. 07).

It is likely that this suggestion will be challenged by both the commercial and medical interests in the “treatment”. Nevertheless, what has been happening and what continues to happen in many countries, seriously alters the nature of the deaf community. In the U.K., parents who refuse implantation may be considered by service organisation as being guilty of child abuse. They have been threatened with the withdrawal of statutory educational and social support. Oddly enough, on the reverse view, the deaf community advocates of sign bilingualism, may want to accuse non-signing parents as being guilty of child abuse. The argument comes down to whether hearing loss in children is a medical illness/deficiency, or a natural variant of humanity. Put very simply, ‘are deaf people who use sign language, different humans or deviant and treatable abnormalities?’

The answer to the question has to be understood in moral and ethical terms. Weber (2019), an orally-raised late arrival to the deaf community, expresses this quite starkly (agreeing with LEE, 2016):

The auditory industrial complex associated with the habilitation of deaf persons including the provision of cochlear implant surgery, auditory training, auditory verbal therapy and placements in inclusive education learning environments considers the concerns of the deaf community as impeding progress in creating opportunities for the deaf child to become fully integrated into the hearing world (Lee, 2016). (WEBER, 2019, p. 111).

The above is self-evident if we just believe in the “hearing world” as the only reality. Weber explains:

Mauldin (2016) notes that most successes associated with cochlear implantation come from white upper middle-class families who have financial, cultural and social capital with which to engage in the long and arduous therapeutic processes associated with cochlear implantation and follow-up activity. (WEBER, 2019, p. 113).

While the medical intervention can be considered to be a success and a sensation of sound is created in the child, the task of normalisation passes to education and/or speech and language therapy and the parents. The measurement of success then becomes somewhat blurred. Is it the satisfactory response to sound stimulation, is it the improved speech of the child, or is it the extent to which the child passes as normal or even the extent to which the child can interact fully with peers and later in life? Many children with implants are also in deaf schools with signing programmes. Some will opt to be more sign prominent. Some may feel comfortable in both language contexts. Some will continue to be ‘deaf’ in any group setting with hearing people. The challenge has shifted to the implanted young person trying to manage their integration into the hearing society, potentially without contact with the sign language community and with only partial hearing in the hearing community. However, if that person is deemed to be bilingual and speaks well, then the process is deemed successful by those around who will continue to be monolingual in speech.

The moral and ethical question can then be stated as ‘why stop there with the repair to a deficiency, why not offer the implant as an extension of hearing to everyone who can afford to pay?’ In fact, we may be able to replicate this process in other sensory areas. Would deafness be re-defined as a feature of those who were un-enhanced? This is not a particularly new thought but it impinges on our journey from the discovery of sign language through the ‘provision’ of sign bilingualism in school to a state of the new normal. It neatly skips the need for society to manage a different language in a different modality, a language which, if we are honest, has developed naturally over hundreds of years as part of one group’s normal development. As long as sign bilingualism is defined asymmetrically as a help to the deaf child and as a means to deaf people’s integration, it will be at risk of being discarded altogether, as medical intervention increases and finances decline.

We have probably strayed beyond the initial remit of this paper but any journey has to consider not only where it began and where it is now, but where the final destination might be and what we might find when we arrive.

The journey

It has always been a difficult struggle - deaf people versus medical science, education and even religion. The deaf community has always been on the outside - there is no deaf-directed medical breakthrough, there is no deaf-constructed and delivered education curriculum and there is no deaf religion or spirituality. Deaf people's position in society has been defined as a need for access to the power and knowledge jealously guarded by the mainstream. There has been no deaf homeland where sign language, deaf culture and Deafhood could be grown and encouraged or even recognised fully. The inevitable result has been marginalisation and disenfranchisement.

Gregory (2017) summarised the educational service view in her online analysis

The sign bilingual approach is still in a state of evolution where practitioners consider the impact of recent changes and the need to adapt to the shifting focus of an individualised approach. Their aim remains to maximise the educational opportunities for deaf children. (GREGORY, 2017, online).

Our optimism in 1987 about the potential for sign language use in school for early intervention and support to families for home life has been realised in research terms and in academia, but the impact on daily life for deaf people has been limited. The enormous impact of mainstreaming and of the movement towards early implantation without consent of the child, has altered the nature of the deaf community. It has also removed the burden of responsibility from the educational system and educational practitioners, who would have to make the necessary accommodations in terms of language and cultural awareness, and shifted it to the adjustments in the deaf child. Sign bilingualism exists in schools in the U.K. but does not have the recognition or support which is justified if we were to accept diversity in language and culture.

The journey continues supported by research findings, by linguistic analysis and by ethical and moral debate. The final destination remains unclear.

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