Making the most of language

Merle Mahon and Robert Adam

Outcomes for deaf children leaving school are, by and large, based on their literacy in English. However, many deaf children do not grow up in English-speaking families. Some are from deaf families where sign language is the family’s first language (in the UK this is British Sign Language - BSL); others are from families where English is not the main language spoken at home. Thus, the language of education for deaf children in the UK provides a unique challenge.

Through most of the 20th century deaf children were stopped from using sign language. This was due to a mistaken belief that signing would prevent them from learning to lip read and speak. The reality was that many deaf children failed to learn English and their education was badly affected. There is an increasing recognition that supporting sign-spoken bilingualism in deaf children may well bring benefits in educational and other achievements for the deaf child.

By the same token, parents of deaf children in bi-multilingual families where English is not the main language are often advised to speak English to their deaf child – even though it is not the language in which they are proficient (Mahon 2009). For these families, many of whom are from the UK’s large ethnic minority population, there is increasing evidence that they would be better advised to use their home language with their deaf child.

Researchers from the ESRC Deafness, Cognition and Language Research Centre (DCAL) based at University College London (UCL) have always asserted that deaf
children who are bilingual in a signed language and a spoken language are at no
disadvantage educationally; sign language can help children learn spoken language.
MacSweeney et al (2008) compared how Deaf people who were brought up using British
Sign Language (BSL) processed BSL with how hearing people processed audio- visual
spoken English. They found that sign language and spoken language processing are left-
lateralised and processed on the same side of the brain using very similar networks .
Their evidence suggests that there is little difference in how how spoken languages and
sign languages are processed by the brain. A person does not need to speak and listen to
process language in the classical language processing areas in the brain.

This supports the widely accepted current understanding that bilingualism in all its forms,
has many advantages, such as making the brain more flexible. Since BSL is a full
language like any other, with its own grammar and vocabulary, Adam (2010). has
stressed the need for deaf children to learn both a signed language because it is crucial to
their educational progress and their identity development, and a spoken language
because this maximizes opportunities in education and employment in adulthood
It has been shown that there are similar patterns of acquisition in both signed and spoken
languages (Emmorey, 2002; Morgan and Woll, 2002). In spoken languages, a child will
reach their first word milestone within 9-14  (Petitto and Kovelman, 2003). In contrast,
for Deaf children with hearing parents who cannot sign, the learning of language
(whether spoken or signed) is delayed, which may have a negative effect on the long-
term language development of the Deaf child. Most Deaf children (approximately 90-
95%) are born to hearing parents who do not know sign language at the time of their
child’s birth, and thus language acquisition patterns are not typical. (Morford and Mayberry, 2000, Johnson and Newport, 1989). Research has shown that the age of exposure to a first language can predict performance on psycholinguistic tasks (Newport, 1990; Mayberry, Lock and Kazmi, 2002) with native signers performing better than people who learnt a sign language late. It was also found that people who learnt sign language later as a second language performed better than people who acquired a first language later. This happens because the latter did not acquire a natural base for languages within the critical period of language acquisition. Also, native signers performed better than people who learnt English later as a first language (Mayberry, 1993).

Research has also been carried out on how language acquisition takes place when the parents are Deaf. Herman (2002) found that Deaf parents are aware of, and indeed use their child’s visual perspective whether using speech or sign. A hearing mother on the other hand may not be aware that a Deaf child responds best to seeing her face rather than hearing her voice. Gallaway and Woll (1994) suggest that hearing parents do not always understand some of the difficulties their deaf child has in accessing language input and, as a consequence, communication opportunities can be lost. Deaf parents are actually good models of early interaction with a child, whether using signing or speech or both (Gregory, 1996).

There are also developmental benefits for the child. Full access to a language has been found to have a positive effect on a child’s development. In a study of the psychosocial development of Deaf children (Dammeyer, 2010 it was found that while psychosocial difficulty in children with a hearing loss was almost four times times greater than a
comparative group of hearing children, where there was evidence of good sign language and/or oral language skills, this psychosocial difficulty was not evident.

This raises the question of what happens when the family language at home is neither English nor BSL. In their recent review of educational issues concerning deaf children from such homes, Cline and Mahon (2010) note the many challenges the children face. In particular, they are exposed to oral language input from more than one spoken language at home, but must, as deaf learners, also acquire English for their education. In research with British-Bangladeshi families living in London, Mahon (2003) explored the languages deaf children from those families are exposed to at home – usually Bengali or Sylheti (a version of Bengali spoken in Sylhet Province of Bangladesh), some English and lots of gestures. While the parents stated that their own first language and that of their hearing children was Sylheti, they reported their deaf child’s first language as being English (because the language used at school was English). The study analyzed in detail the conversations between 7-year old deaf (and hearing) children and their parents. The analysis revealed the difficulties parents had communicating with their deaf child with no language in common, and the impact this had on the child as well as the family. The findings suggest families should be encouraged to use their home language with their deaf child, because “unless there are realistic and affordable opportunities for all family members to learn English quickly and appropriately without undue expense, asking them to speak only English with their deaf child could be a course of action which may fail all the key players: the families, the deaf child and the well-intentioned professionals” (Mahon 2003 p.51).
If the thinking on bilingualism in deaf education could be extended beyond BSL and spoken English, then it would mirror the increasingly accepted situation whereby hearing children from bi/multi-lingual families are viewed as 'emergent bilinguals, becoming more fluent in English as they interact to a greater degree beyond their family environment. Applying this to deaf children would lead to greater communication ability in the home, the school and the community, as well as an increased positive sense of cultural identity and enhanced linguistic competence.

References


Dr Merle Mahon
Senior Lecturer
Developmental Science Research Department
Division of Psychology and Language Science
University College London (UCL)
Chandler House
2 Wakefield Street
London WC1N 1PF
Tel: +44 (0) 207 6794036 Internal 24036
Email: merle.mahon@ucl.ac.uk

Robert Adam
Postgraduate Researcher
Deafness Cognition and Language Research Centre (DCAL)
Cognitive, Perceptual and Brain Sciences,
University College London. (UCL)
49 Gordon Square,
LONDON WC1H OPD
Email: r.adam@ucl.ac.uk