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Social Determinants of the Effective Rehabilitation of the Chronically Hard of Hearing Child

Summary

The most important border who divide chronically hard of hearing people and hearing society is language barrier. It makes communication hampered, even in family, and disturb culture integration. The condition of break his situation is using the appropriate language rehabilitation method.

Among the people, that function within the framework of many social groups, starting from the family and ending on the global society, there are some borders and barriers that determine us in many diverse fields. The administrative borders, political, legal, mental and racial, more or less visible, commonly accepted and the ones the people attempt to fight with- it can be the essential element, that assures the stable position of the individual in the society or the limitation that prevent the development, self-realization and even satisfying interpersonal contacts. In this case the most important is telling about the barriers. There are easily noticeable barriers, the ones the society gives the account of them, the ones it tries to eliminate more or less effective. There are some architectural barriers for the disabled people, inequalities in the education access in the country and in the city, the social exclusion caused by the poverty etc. However, some barriers are less noticeable, but they fence off effectively the groups of people, limiting their development and social functioning. The example of this is the specific of the functioning of the chronically hard of hearing people's language in the audible society.

Among the disabled, the chronically hard of hearing are the group the least integrated with the rest of the society. They live next to us, but their problems are for the audible society very unfamiliar. (K. Krakowiak, A. Dziurda-Multan, from the introduction). The deaf *people* "*possess the limited, disturbed language communication dimension. During their life, they bring with themselves, apart from them struggle for existence, the struggle for the communication using their language*". (W.Chudy 2006,p.35). They are in the group of people move away on the margin of the society, condemned to the contact limitation, they depend on their guardians and the specialists, who make every decision about their destiny, by communicating in the simple way, very often reduced to the minimum. Not known and not understood, they live in the isolated world, that have some features of the ethnical groups in the minority where the members use their own language and they create "subcultures". Such state of affairs is the consequence of some preserved social stereotypes that have become the barriers for the full effective rehabilitation's process. (Białas, 2007).

When in the family where all members listen and speak, appear the baby with the hearing damage, the really difficult situation appears, as K. Krakowiak claims (2000, p.440). Not knowing the possibilities of the child and not having any personal experiences in that field, the parents and the closest family are not able to adapt to his needs.

It may caused the situation that the parents resign from speaking to the child or on the contrary they speak too much, too loudly, and too slowly or they repeat so many times the same words. The first and the second manners will cause the communication disruptions with the child, and consequently in the whole family. The hearing

damage causes that between the child and the parents, the baby and his mother, has been created the invisible barrier that makes the relation establishing between them difficult (K.Krakowiak 2000, p. 441)

The hearing disability causes the child isolation from the communicative society and it disables the both sides: the child, who can not understand the language if the society and the family that can not communicate with the child.

More and more specialists appreciate the role of the closest social surrounding that- as the community that use the language- represents the mother surrounding , it enables the child's language development, and what is more the young man with the hearing impediment. Also, the more people see the need to support the parents by the specialists. (G. Dryżałowska 1997; K. Krakowiak 1998, 2000). The help that is given to the family of the inaudible child should consist in giving the reliable information about the hearing impediment, development of the child with such a disability, and their possibilities, limitation and the methods of the language education as for the given language is optimal.

By suggesting the particular method, every specialist should think about the real possibilities of the child and its family. The communicative method in the family should be optimal for the child; it should enable him the full access to the language, as it can in the natural way build his own competence. First of all the family as the first and the basic language community ought to give the communicative security to the child, it means creating such situation where the child will be able to speak to someone and he will be understood by the listener. The child should have the access to the mother tongue, as the common social good, where he can get the education and the access to the cultural community.

By taking the rehabilitation action or by supporting the methods of the language training for the chronically hard of hearing baby, according to K.Krakowiak we should pay attention to the anthropological foundations of the different rehabilitation concepts. The author has taken the attempt to isolate and categorize the fundamental anthropological assumptions that are in the main concepts in the contemporary audiophonology and surdopedagogy. The three of the basic, mentioned on the basic of the analysis of many works, the author has given the conventional names: biologism, sociologism, and personalism. The division and the terminological arrangements do not mean that three separate conceptions exist, clearly formulated by the particular authors to make an action. Mainly- by deductive understanding- we can identify the fundamental anthropological thesis, taken without their uttering, the fundaments of the deaf based on them are the solid of the taken assumptions.

The basis determined as the biologism, is about the perceiving the deaf person as the living organism, whose part is damaged, so the whole organism functions wrongly, it is not able to adapt spontaneously to the surrounding, and we can observe many dysfunctions and deficits. The hearing functioning properly, mainly in the sound speech perception, is perceived as the most important feature in the human organism. The human is biological adopted to the language development, and thanks to it, it can communicate effectively with the other representatives of its species and function in the society in the specific human way. By such an assumption, the hearing damage can be perceived as the loss of the constructive attribute of the homo sapiens species (K. Krakowiak 2003a, p. 5). Pedagogical conceptions based on the biologism assumptions, recommend the rehabilitation actions that can streamline the damage organ and bring back its functioning by the systematical, intensive exercises that enables to master the speech on the satisfying level (K. Krakowiak 2003a, p. 6).

The counterbalance to such reductional attitude is the conceptions based on another anthropological premise, determined as the sociologism by the creator of such division. (K. Krakowiak 2003a, p. 7). She determines integrative sociologism and ethnological sociologism.

The integrative sociologies assumption is the modification of the biologism assumptions. In this approach the chronically hard of hearing person is seen as the individual unit, whose organism functions wrongly, what has caused difficulties in its social functioning. The hearing damage is seen as the original cause, but also the social factors are considered as the important causes such as: censure and distance, the family and environment rejection, the isolation, the mental barriers and the lack of the means of the communication, the adverse personal identification models, and also the bad education conditions at the schools. The overcoming conditions of these environmental burdens are the education of the deaf children in the integrative system. In the practice we know that the education at the school for all children make the chronically hard of hearing children and the teachers a lot of difficulties, the effective model of the integrative education has been searching for.

In order not to see the deaf person as the disabled person, it is important to change the point of view and consider his situation as the member of the ethnical minority, for who the characteristic features are: the lack of the hearing (that makes not only the disability but the new quality) and the common language- the sign language. Such a position is characteristic for the ethnological sociologies representatives. The followers of such way of thinking claim that the chronically hard of hearing people can be happy living in their own environment, they can understand each other very well in, they don't feel their disability and they are not the subject of the rehabilitation actions. Thanks to such environment the deaf get the autonomy. According to the ideology that has been created on the ethnological sociologies, the deaf child is the rightful member of the deaf community so for the full development the language of the audible people, so the native language. Anthropological assumptions of biologism are the base of the false and the harming vision of the deaf person by reducing his image to the disability vision and its limitations. The inversion of this assumption as K.Krakowiak claims causes the creating of the false and dangerous vision, where the limitations are hidden under the false mask of the cultural otherness. "The full ability illusion and "the autonomy illusion" are created then.

The reflection on the sign language issue may represent the starting point to the reflection over the next anthropological assumption, present at the contemporary surpedagogical, over the personalism assumption. On the basis of the assumption, the person should be treated as the subject and the aim and not as the thing and the action instrument or the mean to achieve the aim. The answer, created on the basis of the personalism, for the answer who is the deaf child, contains the thesis that he is the person worth caring regardless of level of the hearing organ damage and the level of the results of its rehabilitation, no matter of the lack and the faulty of the speech, no matter of the way of the communication with the environment. Its dignity is the enough the parents and the educators caring motive about the proper living conditions, his development and the education.

The pursuit of the ideal image of the child or staying in the way in which the parents feel bad about them, can not give any good results. The deaf child is a disabled child but he is also the child who needs the proper conditions not only to a language development but also to the emotional development and moral support, as the family should create him (J.Leszka 2000, p.485).

On the field of the moral solutions these conditions are fulfilled by the fonogyst's method. Its model represents the method famous all over the world and called *Cued Speech* (CS) or the Language Complete Cornett's (*Language Complete Cornett – LCC*), or the Language Spoken Complete (*Language Parle Complete –*

LPC), (K. Krakowiak 1995, p. 10). K. Krakowiak started the Polish study about this Cued Speech method in the eighties. In this version the system of the gestures she managed to assist effectively the sight perception of the Polish language speech (K.Krakowiak 1987, pp.44-50, pp. 29-31). The main aim of this phonogests method is “the speech development and the communication ability very important in the integration process with the audible society” (K.Krakowiak 2003, p.86). This is the method that makes the mother tongue available to the chronically hard of hearing people and with the consequent, proper use it makes them master in the speech and in writing. The main motive for the phonogest method is broadening the educational chances or the possibility of the mastering the mother tongue properly and also learning the foreign languages.

In the light of the given assumptions, we can claim that the deaf person will always be different, distinguished from the other people in the community by their language difference

The external sign of their disability: the gestures, the specific mime, the way of the communication, wearing the hearing aids, not clear or not proper pronunciation will always show their otherness (Białas 2007) but if they posses the higher language and communicative competences (at least in speech) they will get to know the culture of their country, the tradition, the habits and also the human values, they can exceed the external results of their disability. The language communicative disruptions do not exclude them from the social community. It may also appear to be reason to see by the audible people their disability. Contacting with the deaf people we –the audible people-are the disabled “if my speaker does not hear, it is me who can not speak” (K.Krakowiak 2003, p.68). To be able to liberate from the disability, we have to learn how to talk to the deaf people. The awareness of the mutual disability of the audible and the deaf people may be the impulse to the mutual development and creating the relations.

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