Reflections on Identity

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Identifying a Child as Deaf or Hard of Hearing...

- Starting point?
  - Initial hearing screening

- How is the information conveyed?

- What images emerge for new hearing parents?
  - How do audiologists, nurses, doctors, & allied professionals work to maintain or modify these parental images?
Professional Focus & Image-Making?

- Early focus: maintaining attachment with child, language acquisition, auditory habilitation, educational approaches
  - (not necessarily in order of importance)
- Language used to create child’s identity as D/deaf/hard-of-hearing/hearing impaired?
- Role of specialists’ perceptions of the developing child’s identity?
- Role of parents’ perceptions of the developing child’s identity?
What is Identity?

- **Identity** = representation of the self.

- **Self-identity**: self-identification re own life history

- **Social identity**: how others identify you
  - Note: We have multiple identities related to our roles

- **Identity development incorporates**:
  - Psychological motivation
  - Cultural knowledge
  - Ability to perform different roles
Process of Identity?

- Ongoing restructuring of identities each time new information about oneself emerges
  - Influenced by the responses or input of others
  - Influenced by changes in one’s abilities and skills
  - Molded by past and ongoing experiences.
  - Molded by immigration
  - Molded by technology
  - Continues throughout the life span

- (e.g.: Baumeister, 1997; Grotevant, 1992; Harter, 1997; Holland et al., 1998; Leigh, 2009)
Deaf-related Identities

- To understand D/deaf/hard-of-hearing lives, need to understand
  - identity aspects
  - how D/deaf and hard-of-hearing identities are internalized

- “d”eaf”? Hard of hearing?
  - Limitations in hearing, audiological representation; need for assistive technology
  - Does not necessarily mean use of spoken language (but often assumed): e.g., Oral Deaf, Hearing Impaired, Hard of Hearing

- Deaf = connection with Deaf culture
  - Markings: ASL, visual processing, cultural ways of being
    - Padden, 1980; Padden & Humphries, 1988; Lane, Hoffmeister, & Bahan, 1996; Ladd, 2003; Padden & Humphries, 2006.
Is D/deaf/hard-of-hearing identity a core identity?

- Not typically (Corker, 1996)
  - Its development depends on the extent to which and how being deaf or hard of hearing is salient in daily life.
    - Differs depends on parent hearing status and how parents describe their children
      - Examples:
        - “My child is normal.”
        - “I have a deaf child, she is really special.”
  - Ethnic identity takes precedence.
Theories of deaf Identities

- **Disability framework**: (Weinberg & Sterritt, 1986)
  - Hearing identity = able-bodied
  - Deaf identity = disability related
  - Dual identity = identification with deaf & hearing peers
  - Dual identity was associated with more positive adjustment outcomes.
Social identity parameters: 
(Stinson & Kluwin, 1996)

- Socialization with deaf peers -> social identity as deaf or Deaf
- Socialization with hearing peers -> social identity as hearing oriented
- Socialization with peers in general, → social identity as both deaf and hearing, or bicultural.

- Differences in perceived quality of social experiences lead to differences in identity choices
  - (Leigh, 1999, 2009; Stinson, Chase & Kluwin, 1990)
Categories based on racial identity development theories:

Stage 1: **Culturally hearing**, deafness = medical condition to be ameliorated. Follows hearing ways of speaking, understanding, & behaving. Interaction mostly with hearing persons. (Pre-encounter)

Stage 2: **Marginal**, on the fringe of both hearing and Deaf cultures (Marginal/encounter)

Stage 3: **Immersion** within Deaf culture, denigration of hearing values (Immersion)

Stage 4: **Bicultural**, involves integrating values of both hearing and Deaf culture (Integration)
Acculturation Model

Based on the immigration experience (e.g., Berry, 2002)

Identity (hearing and deaf) has several components:

- Psychological identification with a social group
- Attitudes about one’s own group and members of other groups
- Cultural behaviors
- Cultural competence
Deaf Acculturation Scale
(Maxwell-McCaw, 2001; currently submitted)

- **Hearing acculturated** = high scores in hearing acculturation, low in deaf acculturation
- **Deaf acculturated** = high scores in deaf acculturation, low in hearing acculturation
- **Bicultural**: high scores in both
- **Marginal**: low scores in both
- **Highest self-esteem and satisfaction with life for Bicultural & Deaf acculturated**
  - (Maxwell-McCaw, 2001; Hintermair, 2008)
Implications of Language Choice

- Professional push for “either-or” versus “both” in parent language/communication choice (Hintermair & Albertini, 2005)

- Most parents choose spoken language, but many value bilingualism

  - Parents often pragmatic, add signed languages, particularly before implantation (approx < 50%) (Christiansen & Leigh, 2002/2005; Watson, Hardie, Archbold, & Wheeler, 2008; Zaidman-Zait, 2008)

  - Children may switch to spoken language even while parents are still signing (Watson, Hardie, Archbold, & Wheeler, 2008). Signing seems to help develop spoken language (reports by Yoshinaga-Itano).
Identity Issues

- **A Taste of Interview Studies:**
  - 29 British young adolescents with CI in deaf & mainstream settings: (Wheeler, Archbold, Gregory, & Skipp, 2007)
    - Majority identified as deaf, not strong Deaf identity, wanted to socialize with both deaf & hearing
  - 11 Swedish children with CI, some in the mainstream (Preisler, Tvingstedt, & Ahlström, 2005)
    - Used sign language when had trouble understanding
    - Authors conclude a bicultural identity is better.
  - 14 mostly mainstreamed adolescent & young adult CI users (Christiansen & Leigh, 2002/2005):
    - Most see themselves as deaf, one as hard of hearing.
    - Most had both hearing & deaf friends, desired contact with both deaf and hearing peers.
Questionnaire studies

- Israeli questionnaire study, 115 adolescents (Most, Weisel, & Blitzer, 2007)
  - CI group similar to non-CI group in attitudes about social status, academic achievements, Deaf culture, or identity classification (bicultural).

- 45 US adolescents with & without CI (Wald & Knutsen, 2000)
  - Not clear re: percentage mainstreamed
  - Both groups similar in Bicultural and Deaf identities
  - Adolescents with CI had more endorsement of hearing-oriented identity.

- Preliminary study, 57 US deaf adolescents with/without CI (Leigh, Maxwell-McCaw, Bat-Chava, & Christiansen, 2009)
  - Most affirmed hearing-oriented identity, number with bicultural identity similar to those in deaf settings.
Another sampling of questionnaire studies

- 78 deaf college students at mainstream university (Jambor & Elliott, 2005)
  - Either identifying with the Deaf community or having greater bicultural skills correlated with higher self-esteem
  - Less likely to deny hearing loss, self-acceptance more likely, take pride in their ability to negotiate the dominant society while benefiting from Deaf community social support.
Connected...

- **Implications for Identity:**
  - Appears that positive psychosocial adjustment is reflected by bicultural and Deaf identities
  - Less often but still possible with hearing acculturated identity
  - Comfort in shifting identities as in bicultural appears to be of importance.
Importance of...

- Flexible attitude towards signed & spoken/written languages and their role in D/deaf/hard-of-hearing identity development
- Flexibility in identity images thru life span
- Relationship between identity & psychosocial adjustment
- Professionals who are flexible, parent-centered, and comfortable with D/deaf/hard-of-hearing role models
  - More appreciated by parents, will influence their images of their deaf/hard-of-hearing children’s identities
- Better opportunities for parents to move from dysfunctional child image to image of unique identity & positive self-esteem