Adapting Learning Materials to support the Language Acquisition of Black Minority Ethnic Deaf Individuals

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Abstract

This paper presents research into providing accessible resources for Black Minority Ethnic (BME) Deaf individuals from London whose first language is neither English nor British Sign Language (BSL). The case study presented in this research demonstrates the possible affects of learning when materials are designed according to the language needs of the backgrounds of the BME Deaf individuals involved. The approach demonstrated is transferable to other BME Deaf people who come from different language and cultural backgrounds, and it is hoped that this could become a useful reference tool for educators to encourage and provide an alternative approach to adapting learing resources for foreign BME Deaf learners.

Keywords

Sign Language, Deaf Accessible Materials, Black Minority Ethnic Deaf Communities,

Introduction

The essential problem of deafness is not the lack of hearing, but isolation. Although most deaf children possess normal intelligence, their average reading age remains consistently and substantially below that of their hearing peers *(*Kyle et al, 1997*)*. There is also evidence to show that young deaf people mature at a much slower rate that their hearing counterparts *(*Deafax, 2007*)*. 95% of deaf children are born into hearing families few of whom sign fluently with their child *(*Deafax, 2007*)*. This means that identity and socialisation depends largely on the schools they attend since Deaf identity is rarely developed through family-based socialisation. Within Asian families, deaf children have additional barriers that need to be assessed, demographic evidence estimates that there are approximately 97,000 Asian people (male and female) over 15 years old in the UK who suffer from deafness *(*Deafax, 2007*)*. Communication problems are then often compounded by the use of additional languages within the home. The purpose of this research is to extend on some initial findings for good practice to design appropriate learning materials for BME Deaf people with complex language backgrounds.

A challenge facing Black Minority Ethnic (BME) Deaf people is the lack of cultural sensitivity or understanding towards their heritage and their Deaf identity. BME deaf adults have less exposure to their own ethnic culture than that of their hearing counter-parts *(*Chamba et al, 1998*)*. Although ethnic and religious diversity is more evident, services still cannot fully accommodate the language needs of BME Deaf populations. This leads to a variety of problems recognised by young Deaf families and professionals. Language choices such as BSL, English and a variety of home languages are complex and usually such decisions of language are affected by personal knowledge and preferences on part of the parents *(*Ahmad et al, 1998*)*. Interpreters aren't always familiar with BME culture and working with the BME community, therefore often unable to understand the full cultural implication of the BME Deaf person. This

has raised several issues alongside the fact that there is limited research into BME Deaf people's profiles, hence probably why so many services are unable to accommodate the needs of BME Deaf people. In this paper we will share our initial findings and our initial guidelines for this specialised community.

Background

In our initial research we have found that many BME deaf individuals have multiple languages in their homes, spoken and signed. We will explore our initial findings in our research and explore how conventional methods to designing deaf friendly materials *(*Crombie-Smith, K.J.W. & Mootoo, A., 2007, Naqvi, S., 2006*)* need to be adapted to suit BME deaf community needs.

In our initial case studies (Ali et al, 2007) we have found a very complex group of individuals with several factors affecting their language and educational development, from the lack of communication in the homes to difficulties in connecting with their own communities. As a reminder to the reader we were able to find that it was common for Deaf BME people to come from varied language backgrounds, where they may be signing in various languages, mixing signing with various lip reading skills. This also highlighted that there was in many cases a lack of one strong language in place, having an impact on that learners overall progress of learning and language development. From our initial understandings we established some rules for inclusion with BME Deaf people when designing Deaf friendly materials.

Conventional methods have shown a great understanding of visual communication such as images, the use of plain English and modification of the layout to make it less wordy and more visual *(*Crombie-Smith, K.J.W. & Mootoo, A. 2007*)*. However BME deaf education is still significantly behind mainstream "white" Deaf communities in London, so how can we provide alternative ways of improving educational/communication support for BME deaf people when accessing new information? Four initial recommendations were stated, they have been compiled in discussion with Teachers of the Deaf who work with BME deaf individuals.

1. Sign Language: It is beneficial to use a sign language as it improves communication. However, as BME deaf people may be coming from different sign language backgrounds, e.g. British Sign Language, American Sign Language, Sign Supported English. Home signing or gesturing is also used, therefore a more gestural based signed moving towards more structure maybe more appropriate, depending on the learners language level.

2. Written communication: conventionally when designing deaf-friendly materials, plain English is used, but if the individual is from a different written language background additional languages may need to be used. For example, by using key words in different languages showing an image and sign as well as the English spelling of the word. It will give a total rounded understanding of the word, but also providing links between languages will help in the learning process.

3. Images: Use images that maybe relevant to BME deaf peoples backgrounds, something that associates to an individual's community, this will provide a familiarity to the learning materials used.

4. Individual: understand the particular background the individual is coming from, there are a wide range of BME deaf communities, by providing something too generic it may be possible to miss the communities totally. There is a need for additional support, such as understanding particular constraints within one community to another. For example Somalie Muslims do not always like to have facial images in their homes and avoid seeing them or keeping them. Therefore when designing deaf-friendly material for this group faces or personified images would need to be avoided.

In order to advance our understanding we used these rules to design an essential English course for Deaf BME people. We tested this on a group, but for the purposes of this paper we will be focusing on one particular case study as he demonstrated the more extreme cases of what we need to address when creating learning materials.

A Case Study to Test the rules for Visually Accessible Materials for BME Deaf people
This student is from Turkey or Afghanistan, his origin could not be confirmed as he was himself unsure. His teacher provided us with the most information. It was thought that he was approximately 19yrs old. He is profoundly Deaf and attends a class in a college supporting life skills education for BME Deaf people. He lip reads and mutters in either Turkish or Afghani, and when he was unsure what we were signing, he would simply imitate our signing to demonstrate communication, only when he understood what we said he responded in his own signing. This allowed us to distinguish what he was understanding and what he was unsure about.

Initial Assessment
In our initial assessment a tutor supported him with filling in an enrolment form, and two observers made notes of the experience. The initial assessment was to primarily check the students level of communication skills and literacy skills. The student was given the chance to fill in an enrolment form, through sign or written text. "S" wrote his first name and stopped. We then asked him his "date of birth", he did not understand, the signing was modified to be more gestural and it was still very difficult to communicate with "S". We then asked for simpler questions, such as "what is your full name" after several attempts, we were able to get the spelling of the first name but the second name was still not fingerspelt to us. We then asked "where do you live?" the signing was modified to signing a house, which was still unclear. Then the tutor mimed himself walking home and drew a picture of a house, instantly "S" replied with the number "47" as the door number. But the street name and the rest of the address was not possible. The remaining questions were too complex and he could not identify what words were relevant to him. For example one question stated "Are you: Deaf, Hard of hearing, hearing?" he did not understand the question.

We all agreed that his communication skills were complex, he has no workable English, he lipreads and speaks (inaudibly) in Turkish/afghani and his signing was mostly gestural. However when asked what he wants in the future, he replied I want to be able to write.

Topic One

We started by teaching a topic called "about me" students used this to explain themselves. Everything was designed using the four rules from our initial work. The questions on this form were with blanks so students could fill in the gaps. The questions were:

1. I am a boy/girl.
2. I have black/red/blond hair.
3. I have brown/blue/green eyes.
4. I am deaf/hard of hearing/hearing.
5. I am from Pakistan/India/Turkey etc.

These questions were worked through with signing. "S" struggled greatly with his signing vocabulary, and we realised that before asking him the questions he needs to understand what the words mean. Therefore colours were used on the whiteboard and the student was taught vocabulary with spelling first. After we did this we then asked him the questions again and he could answer. However this took two sessions of 2 hours each for it to work properly. As we were aware that learning can be exhausting and there was a lot of information he was taking in, we kept the session concise and clear, not overlapping or confusing the following topics. We realised that the teaching had to be very "here and now" instead of outlining the following sessions, as this confused "S". So we kept everything very contextualised to the current learning topics.

Topic Two
The next topic within the essential English course was to understand warning signs that are around hospitals, roads etc. This was a very visual topic and again with "S" once we covered the vocabulary he was able to learn the topic. However we noted that the examples being taught needed to be relevant to "S" and his everyday life, it needs to be things that he sees regularly, if not he found it difficult to learn the topic, so for example images of a road sign, turning left worked best when saw the sign and he recognised it. If we used a sign of a motorway signal he found it difficult to take in, as it was unfamiliar to him. So working from his familiar knowledge and then introducing new words/symbols was a faster and more affective way for him to learn. This was taught over a series of 3 sessions for 2 hours each.

We only taught "S" and observed him over 5 sessions of learning to understand more about his learning needs, after teaching him we were given feedback from his teacher, that his overall confidence had improved and he had also started to ask more about vocabulary in his class. The teacher and the observers involved believe that he now understands how to ask questions better whereas before he didn't understand how to structure such a sentence.

For an individual like "S" he needs to learn BSL again, but with more focus on his language background, making it clearer and more accessible for him. He needs his vocabulary first as he is finding it difficult to take in so much new information at once.

New rules for supporting BME Deaf people
We propose the following rules to support the learning needs of BME Deaf people.

1. Teaching practice: needs to be gestural and demonstrative through learning resources. Mime works very well with practical topics. Abstract topics at such early stages of learning are not advised as it can cause unnecessary confusion and stress for the learner.

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2. Relevance: everything taught needs to be relevant to the learner and their lifestyle, if topics are not relevant it can become very difficult to teach something that the learner has not seen. Therefore a relevance of the learning materials to the user knowledge base is very important.

3. Rapport: it is important to have the student involved in the learning and not to be sitting without participation, otherwise the student can find it difficult to engage, and the teacher may not realise that the student is falling behind.

4. Vocabulary: initial vocabulary for a topic needs to be covered before starting a topic in order to support the learning of the materials.

Conclusion

This paper outlines some of our advances in our understanding towards supporting BME Deaf people and their learning needs. We have the opportunity to take advantage of advances in technology to create visually appropriate resources for BME Deaf people, however it is clear that the technologies alone cannot support the learning needs of some individuals from the BME Deaf community as demonstrated with the case study of "S". It is also important to note that this research has focused on one case study alone. We are now developing the materials to deliver this to a larger group of BME Deaf people to see how our understanding has impacted on the learning of BME Deaf people. We are aiming not only to do further more indepth case studies with particular individuals, but also to look at the differences between foreign or British born deaf BME as this may affect language and communication needs, and ultimately what resources we should make for different profiles of BME Deaf people. We believe it will also be insightful to work with the teachers/familes of these students in order to gain some of their insight to the learning progress of the individuals involved. We feel this is a positive start and we are continuing to work closely with BME deaf people within London to understand how we can cater for their communication needs further.

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