

# **Considering the Disabling Nature of Deafness as Misrecognition**

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<b>Table of Contents</b>	<b>Page</b>
Summary	ii
Candidate Statement	iii
Acknowledgement	iv
Introduction	1
 <i>Chapter 1: The versatility of deafness and the introduction of the cochlear implant</i>	
1.1 Introduction	4
1.2 What is Deaf culture?	4
1.3 Deafness in history	5
1.4 Invention of the cochlear implant	16
 <i>Chapter 2: Examining the debate on Deaf culture and cochlear implants</i>	
2.1 The ‘deafness as cultural’ arguments	20
2.2 Responses to claims asserted by deaf activists	24
2.3 Merits and Drawbacks of claims	31
 <i>Chapter 3: Reconceptualising deafness as a disability</i>	
3.1 Changing the debate	43
3.2 What is a healthy identity? The importance of recognition	46
3.3 Recognitive Attitudes	46
3.4 Two advantages of applying recognition	49
3.5 Misrecognition as tragedy	51
3.6 What is needed for deaf people to have recognition	53
3.7 The disabling nature of deafness as misrecognition	57
3.8 Deaf culture’s role in telos of personhood	59
Conclusion	62
Works Cited	66

## Summary

The aim of this thesis is to consider the disabling nature of deafness as misrecognition. The nature of deafness is not merely confined to the disabled body instead the degree of the disability is heavily determined by the process of recognition within social interactions. Motivating this thesis is the inherent difficulty in resolving the conflict between Deaf culture and cochlear implants. The debates between interpreting deafness as disability and deafness as difference is problematic; both are too extreme and do not capture the essence of deafness. Asserting deafness as cultural allows for relativism, thus allowing the idea of deafness as purely disabled-in-itself as an acceptable idea in ethics. These rather common approaches do not help with the defence of Deaf culture. I argue that the ideal way to defend Deaf culture - *the* appropriate source of recognition for deaf people and people with hearing loss - is by revising the 'Deafhood' model proposed by Paddy Ladd: Asserting a universal conception of Deaf culture - incorporating the normative elements of recognition as argued by Honneth - as a *phenomenological* requirement for deaf people, *not* a cultural one. The corollary of this argument is that Deaf culture has a *teleological* function: to promote the wellbeing of deaf people.

## **Candidate Statement**

I certify that the work in this thesis entitled “*Considering the Disabling Nature of Deafness as Misrecognition*” has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree to any other university or institution other than Macquarie University.

I also certify that the thesis is an original piece of research and it has been written by me. Any help and assistance that I have received in my research work and the preparation of the thesis itself have been appropriately acknowledged.


In addition, I certify that all information sources and literature used are indicated in the thesis.



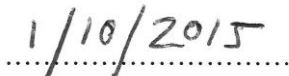
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I am also indebted to the Deaf community for making my deafness condition feel less of a burden and more of a privilege, having experienced a truly special culture, language, and meeting wonderful friends and people. It is with great hope that this culture will be preserved whether there is a cure or not. I hope this thesis will help with the ongoing advocacy work, particularly in the area of deaf education. I am also aware that many parents of deaf children have it hard, and I hope this thesis can play a part in quelling the confusion and grief of raising a deaf child.

Lastly, I am indebted to my family and friends, especially my mother, for being patient with me while working and studying, and providing the support and encouragement I sorely needed throughout writing this thesis.

## **Introduction<sup>1</sup>**

For many people, disability is considered to be a straightforward phenomenon. The general conception is that a disabled person lacks a particular normal bodily or mental function that people typically have. Arguably, though, deafness is an enigmatic disability that challenges this layperson conception of disability. Since the 1980s, the invention of the cochlear implant has been heralded as the solution to hearing loss. It would then come as a surprise for most people that there are communities and cultures founded on the phenomenon of deafness which have expressed objections to the cochlear implant. Deaf communities all over the world are linguistic minority groups with their own natural sign languages, values, traditions and beliefs. One of the most commonly held beliefs is that their deafness is merely a characteristic, not a disability; they interpret their deafness to be a matter of difference. Cochlear implants have been rejected by numerous deaf activists on the grounds that they threaten the status of Deaf culture and are a tool of ethnocide. Indeed there have been other arguments, since most parents of deaf children are hearing, that deaf children belong to their hearing parents' and their culture and that a cochlear implant would maximise their involvement within their families. This would inevitably lead to the reduction of members of deaf communities. Ultimately there are two prominent conceptions of deafness: deafness as difference and deafness as disability. Because these two prominent conceptions are irreconcilable to the extent that there has not been an universally accepted understanding of deafness as a disability, this has meant most ethical and bioethical discussions surrounding deafness, Deaf culture, and cochlear implantation are multi-faceted, highly complex, and without easy answers. Most debates have approached the conflict between Deaf culture and

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<sup>1</sup> It should be noted that many deaf people have cochlear implants nowadays and that the deaf community is not against cochlear implantation per se (see National Association of the Deaf's policy on cochlear implants, 2000). The main issue is the attitudes that are commonly associated with the cochlear implant which poses a threat to the wellbeing of deaf people and deaf communities. The thesis will argue for the preservation of deaf culture in light of this.

cochlear implants in binary terms: one must take priority over the other. Deaf children must have either a cochlear implant or join Deaf culture. Regardless of the positions, one key question has not been analysed thoroughly in these discussions: is deafness a disability? Whilst it is correct to say that hearing loss is a physical disability, this answer, on its own is too simplified and does not make better sense of the issues mentioned above. For a better clarification of deafness, the answer needs to incorporate a more multi-faceted understanding of disability: deafness as a physical disability, and the *social and embodied implications* of this disability, which this thesis will account for through the idea of recognition. Accordingly, this thesis strives to clarify the nature of deafness and emphasise the importance of Deaf culture by offering a new position beyond the binary positions of deafness as disability and difference: *to consider the disabling nature of deafness as misrecognition*.

Attempting to reach an answer to this question has important implications. Firstly, it clarifies what takes priority in the debate. It clarifies the nature of deafness and how it fits in the disability picture. It clarifies how deafness is in itself a positive and negative phenomenon and if there is a need for Deaf culture, cochlear implants, or both. By coming to terms with the nature of deafness, clearer answers with normative implications are feasible, allowing us to better come to terms with the ethical priorities underlying debates on Deaf culture and cochlear implants, and to clarify whether there is actually an unresolvable conflict between cochlear implants and Deaf culture. This clarification aims to strengthen the importance of advocating for the recognition of deaf people, Deaf culture and sign language against oppressive values. Ultimately, it aims to clarify what deaf people require to have a healthy life where deafness does not continuously pose a problem for their everyday lives.

This thesis will examine several topics in three chapters. The first chapter will consider the history of deafness, including the formation of the deaf community, the conflicting attitudes in deaf education concerning sign language and spoken language



methods, and the introduction of the cochlear implant. The second chapter will evaluate the main claims in the debate around Deaf culture and cochlear implants. Claims made by notable figures such as Deaf culture theorist Paddy Ladd, psychologist Harlan Lane and philosopher Neil Levy will be examined, as well as considering their merits and drawbacks. The third chapter will suggest a new direction for the debate by introducing and applying the notion of recognition as theorised by Heikki Ikäheimo, drawing on Axel Honneth's breakthrough analysis of the Hegelian notion of recognition. This chapter will focus on reconceptualising deafness as a disability, establishing the thesis' hypothesis that the disabling nature of deafness is a result of misrecognition.

## **Chapter One: The versatility of deafness and the introduction of the cochlear implant**

### **1. Introduction**

In order to reach a clarified understanding of the disabling nature of deafness, it is useful initially to identify how the concepts of deafness and disability have been analysed and perceived historically. This also involves a consideration of how and why deaf communities and sign languages came to exist. In doing so we can understand how deafness as a disability has been commonly understood in the past and present, and examine if this way of understanding deafness and the resulting normative assumptions (whether they should speak or sign for example) do align with the enigmatic nature of deafness. Historically, deafness is a particularly enigmatic disability due to its seemingly versatile nature and it is correct to say that deafness is a hearing impairment, a physical disability. It should be noted, though, that the impairment per se has led to the natural development of a visually vibrant culture that embraces and promotes natural visual and manual languages. Because of this culture, children with pre-lingual hearing loss (deaf before language acquisition) were and are able to healthily learn a natural language and live comfortable lives rather than being left language-less and cognitively malnourished.

### **2. What is Deaf culture?**

For many people, it seems rather perplexing that there would be a culture based on a hearing loss disability. However, there are deaf communities all across the world, located within many different countries with varieties of 'Deaf culture', where differences vary from country to country. This terminology suffers a lack of clarity; many deaf people and/or academics have yet to present a definition of Deaf culture that is universally accepted. Paddy Ladd, a Deaf academic, argues that it would be premature to assert a universal theory that

defines Deaf culture, and that the ideal way to research Deaf culture is to ‘utilise bricolage’ alongside with internal perspectives and reflections of deaf people (Ladd, 2003: p.265). Since it is problematic to assert a full-bodied definition of Deaf culture, this thesis will sidestep the issue temporarily by assuming a *broad* definition of Deaf culture as ‘a collection of cultural practices and values within deaf communities that predominantly revolve around their use of sign language, their natural affinity with visual and kinetic experiences’. Generally, Deaf culture views deafness as difference, not a disability and as something to be proud of. It is unsurprising then that the existence of Deaf cultures and sign languages has made understanding deafness an enigmatic quest. By looking at deafness in history, including the emergence of Deaf culture, we can understand more closely the ontology of deafness, the deaf community and *why* it exists in the first place. This will provide a background for further understanding the significance of the cochlear implant and the implicating ethical predicaments raised in the conflict between the technology and the deaf community that has been perpetuated due to a common misunderstanding of this enigmatic disability.

### **3. Deafness in History**

Deafness was not a disability that could be understood in a short amount of time; the understanding of deafness that has evolved in the past 500 odd years has affected prominent institutions, including pedagogical and scientific institutions. Reaching an understanding took centuries of shifting perspectives that were dominated by folk metaphysical assumptions regarding the nature and interrelationships between our perceptions, senses, and knowledge. It is the philosophical and historical roots that have led to the current positions on deafness. What is evident is that the nature of deafness has eluded even the most eminent philosophers and educated persons, and has been a topic of discussion driven mostly by prejudiced values. Because the widely accepted notion that speech and hearing was simply an intrinsic good was

mostly unreflected, this had meant that deaf people were paradoxically consigned to live in sounds they could not grasp. As a result of this unreflected inability to understand the complexity of deafness, deaf people, sign languages and deaf communities underwent centuries of oppression. An historical reflection will suggest *why* people continue to struggle to understand deafness today, for this has important ethical implications for the lifestyle and everyday experiences of many deaf people.

The historical account of deafness and sign language is only a relatively recent phenomenon; records of manual (hands) signs used by deaf people in history are far from detailed. This is likely due to the unawareness of sign languages and its rich linguistic properties, limited methods of recording history, and the absence of institutions and communities that could sustain and spread such languages. There are informational traces of people communicating via manual (hand) signs in history, such as ‘the mutes’ in the Ottoman courts as early as the 1500s (Miles, 2000). However, what was prevalent historically speaking was the rather one-dimensional view of speech, the voice, and how it correlated to the folk notions of selfhood: the voice was (and is) the supreme mode of communication, expression, signs of intelligence and reason. Consequently, varying modes of communication, such as sign language, were not nearly as valued as speech. Jonathan Rée’s (1999) excellent insight into the philosophical history of the senses in context of deafness reveals how the tenacious ungrounded views that permeated the thoughts of philosophers in history have been carried on until even today. For instance, Immanuel Kant said that “the dumb could never attain the faculty of Reason itself, but only, at best, a mere ‘analogy of reason’” (Rée, 1999: p.93). Hegel had also followed a similar line of thought suggesting that it “is primarily through the voice that people make known their inwardness, for they put into it what they are” (Rée, p.60). These implied metaphysical claims of the nature of the voice could be argued to have permeated scientific views on language and speech. According to Rée, 19<sup>th</sup> century German linguist Max Müller suggested that the growth of the mind was parallel to language growth

and that the maxim *without speech no reason, without reason no speech* was one of the central principles of language sciences. Because of this, Müller had suggested the voiceless language of the ‘deaf and dumb’ was linguistically rootless and unfounded (Rée, p.272). The metaphysical bias of the voice is plausibly a result from these numerous historical claims: people who could not speak were assumed to be incapable of reason, and it was perceived that since most deaf people could not speak, they would be intellectually inferior, dumb, and lacking reason. There was an implied natural relationship between deafness and dumbness, and that speech would be a remedy for this ‘dumbness’ that plagued deaf people. It is this unsubstantiated metaphysical belief that has seemingly infiltrated folk beliefs and the institutions of deaf education. Because the priority of speech complementing the denigration of sign language was deeply ingrained, the eventual recognition of sign languages was arguably more difficult to attain.

This overpraising of speech over sign language and its inherent communicative capacities is a part of what Tom Humphries, a Deaf scholar, considered ‘audism’: oppression of deaf people. Drawing on this concept, Bauman suggests there are three dimensions of audism: individual, institutional, and metaphysical (Bauman, 2004). While individual and institutional audism focus on everyday behaviours and societal reinforcements between individuals and institutions, metaphysical audism is a key dimension that infiltrates and drives individual and institutional oppression, and can be largely attributed to what Jacques Derrida coined as ‘phonocentrism’, the historical bias that speech trumps all forms of communication as the most fully human form of language. Derrida was critical of Ferdinand de Saussure’s assumption that sound is a central element of language since it embodies essential signifier properties of linearity and arbitrariness. This had meant that all non-vocal forms of communication were “relegated to the study of semiology rather than linguistics” (Bauman, p.243) which prevented people from understanding that sign language was able to signify arbitrary concepts like any other spoken languages. In other words, it was thought that sign

languages were not equipped to discuss abstract concepts (such as morality and unicorns) and were seen as unable to transgress the boundaries of mere iconic gestures. Those utilising sign language were not recognised as complete humans; deaf people were doomed to the continuous institutional “daily practices, rituals, and disciplining...into becoming closer to normal hearing bodies” (Bauman, p.245). Deaf education, for instance, has suffered greatly from these practices of audism/phonocentrism.

The concept and practice of deaf education is a fairly recent occurrence. One of the earliest practice dates back in 1550, where a monk in Spain was concerned that the deaf could not achieve religious absolution without any language acquisition (Rée, p.98). He proposed that the deaf were to learn language through senses other than sounds. Several others joined in this belief, suggesting several alternative methods. For instance, writing was prioritised before they could ‘tackle speech’; deaf people were encouraged to observe the movements of mouths when people speak (i.e., lip-reading) - as well as feel the vibrations in the nose and throat; they could learn to spell out letters with their hands (fingerspelling). It was suggested that by utilising these methods, it would make the practice of learning to speak more accessible. Around the 16<sup>th</sup> century, according to Rée, it was established that it was indeed possible for deaf people to learn to speak despite the prior belief that deaf people were doomed to a life of dumbness and silence (Rée, p.109).

Despite the fact that they might be imitating noises (relatively) successfully, it did not guarantee full linguistic comprehension. It is actually quite possible to pronounce and imitate sounds without ever actively engaging with the content that is being delivered. Rée summarises the predicament of the talking deaf:

Indeed the intellectual prospects for the deaf were even worse than (a scrivener): the scriveners and printers of Oxford might not know much Latin, Welsh, Irish, Greek or Arabic, but at least they understood their native English. The talking deaf, in contrast, had no prior linguistic knowledge whatsoever, and they would be lucky if they could learn to speak at all, even ‘to speak like a Parrot’. It was rather like teaching portrait-painting to the blind, or training the deaf to sing by following a musical score: even if

they eventually attained some proficiency, the meaning and point of the whole exercise was bound to elude them. They were, it seemed, being forced to act a part in a ridiculous and alien masquerade, bringing possible amusement to others, but no benefit whatever to themselves (Rée, p.113).

Meanwhile, the prospect of non-vocal etymologies slowly expanded in the 17<sup>th</sup> century. People and philosophers were becoming interested in the idea that languages could be naturally expressed through gestures and motions of the hand/s and face, and whether this was a healthy alternative for the deaf in place of spoken languages. Descartes, for instance, believed that “the ‘signs’ used by those ‘born deaf and dumb’ constituted a fully human language and had nothing in common with the purely mechanical communicative behaviour of lowly animals” (Rée, p.121). This was in contrast to the common belief that gesturing embodied primitive qualities and could not engage in the same amount of rich semantic content that spoken and written languages could.

Considering these musings and beliefs, it is apparent that there are two opposing views on deafness, education and language: *oralism* and *manualism*. Oralism advocates for an exclusive use of the voice for language use, practice and acquisition without resorting to sign language, whereas manualism advocates for the use of sign language as the natural destined language for deaf people. Manualism, however, does not actually reject the idea of deaf people speaking on top of their sign language abilities and actually promotes the concept of bilingualism. Since non-sign languages are prevalent all around the world, it has been accepted and strongly insisted that deaf people do need to learn how to read and write (at the very least) the dominant language used in their country.

Historical records on the rise of manualism in deaf education are far from rich (particularly in contrast to the practices and works written by supporters of oralism) but virtually all deaf people familiar with deaf history will invoke the name ‘Abbé de l’Épée’ as one of the pioneers of incorporating sign language in deaf education. Although he was not the first to do so, his name carries immeasurable significance. The oft retold story is that l’Épée,

in 1790 France, compelled to teach deaf twin sisters ideas of Christianity, came to realise that the sisters were fluently communicating with each other through sign language that went *beyond* mere gestures and visual correspondence via pointing and appeared to have syntax (Rée, p.149). Admittedly, Abbé de l'Épée did not perfect deaf pedagogy and was driven by religious motives, but he was a significant figure for introducing the possibility of recording and teaching sign language, particularly in an educational environment. Despite opposition and aggressive disagreements by educators advocating oralism, this line of thinking had gradually been passed onto a deaf man named Laurent Clerc, another significant name in deaf history, if not the most significant in American deaf history. Clerc is co-credited for the establishment of ASL (American Sign Language) and the first American school for the deaf in Hartford in 1817. Clerc had made his way to America from France with an American, Thomas Gallaudet who was aspiring to establish deaf education in America, which was sorely lacking at the time. Gallaudet had known several deaf children suffering a lack of language and was pressed to resolve this widespread predicament, making his way over to Europe to acquire teaching methods for the deaf, meeting Abbé Sicard (Clerc's mentor and Abbé de l'Épée's mentee) and Clerc himself. Gallaudet asked Clerc to accompany him to America to help with his deaf schooling aspiration, a fateful meeting which led to the widespread establishment of deaf schools and the institutionalisation of ASL. Clerc had initially taught LSF (French Sign Language), but due to language's natural inclination of mutation and evolution as well as pre-existing signs used by other deaf people, it eventually merged and transformed into the sign language all signing American Deaf people use today: ASL (Siple, 1994: p.350). Although this brief biography may *prima facie* seem mundane, it does however serve an important point: looking at the genesis of deaf schools, it becomes evident that the institutionalisation of deaf education led to the institutionalisation of sign language. After the institutionalisation of deaf education and sign language, the deaf community then naturally *emerged*. This was an unprecedented phenomenon (as there were no other records of



prominent deaf communities) and gives us vital clues regarding the ontology of deafness that are fundamental for understanding the ethical issues surrounding deafness.

The deaf community is a somewhat enigmatic phenomenon. It cannot sustain itself through families and kinship, a general way of continuing culture. Statistically speaking, 90% of deaf children are born into hearing families and more than 80% of children of deaf parents are hearing (R  e, p.232). Because of the institutionalisation of deaf education and sign language, Deaf culture was initiated commonly within deaf schools. Because there were numerous deaf people within a place, it was a domain of phenomenologically shared experience as well as a healthy breeding ground for constructing and developing a ‘deaf-way’ of understanding and existing in the world. Siple lists several essential qualities valued by ‘Deaf culture’: emphasis on face-to-face communication, directness (little use of euphemisms), openness, pride and humour (encouraging acceptance of being deaf), eye contact, and touching (Siple, 1994). These *phenomenological* and *social* qualities are often brought upon by the experience of being deaf. It is *phenomenological* because eye contact is an essential way of establishing communication with another person by ensuring attention, and is by no means discouraged contrary to most cultures. Touching is also important in order to get a deaf person’s attention or to warn and prevent them walking into something because they are visually preoccupied. For most cultures, touching equates to an invasion of personal space but this is not the case with deaf people (Siple, pp.363-364)<sup>2</sup>. These phenomenological practices provide essential opportunities for deaf people to be able to socialise *uninhibitedly*. Such phenomenological practices ensure that deaf people are able to follow through their needs to express themselves openly whenever they have the opportunity to interact with deaf people. They often express intimate details in the open as if they were mundane topics and quite often do not have the same opportunities to engage openly with hearing peers (Siple, p.355). More features of Deaf culture will be discussed later on.

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<sup>2</sup> For an interesting account of deaf people’s affinity with the visual, see Bahan 2008

What is important to note here is that there were cultural features, a hybrid of phenomenological and social qualities, emerging from a *collective experience* of deafness. From then on, Deaf culture and sign language eventually mobilised beyond deaf schools, obtaining a life of its own, an organic culture transmitting through perpetuated deaf social networks such as deaf community services, deaf clubs, and deaf sports to name a few. Contrary to popular belief, it is reasonable to consider that Deaf culture is not without purpose, that it is largely to do with supporting and strengthening the phenomenological and social experiences of deaf people. This has meant the disabling experiences of hearing loss were mitigated inasmuch as they were not consigned to a hopeless and meaningless life. This initial expansion of Deaf culture did not happen without difficulties, however, it was (and is) continuously misunderstood and opposed by people and regimes in favour of oralism.

The attitudes and beliefs fuelling the oralist movement proved to be highly tenacious and harmful for the supporters of manualism. The most defining event in deaf history was the International Congress on Education of the Deaf at Milan, 1880, run wholly by hearing people of whom the majority had decided that the oral method would be favoured over the manual method. No deaf person had a say in the congress and were excluded from the decision making process. The first two resolutions were as follows:

1. The Convention, considering the incontestable superiority of articulation over signs in restoring the deaf-mute to society and giving him a fuller knowledge of language, declares that the oral method should be preferred to that of signs in the education and instruction of deaf-mutes.
2. The Convention, considering that the simultaneous use of articulation and signs has the disadvantage of injuring articulation and lip-reading and the precision of ideas, declares that the pure oral method should be preferred (Gannon, 1981: p.63) (Quoted within Siple, p.351).

As a result, the numbers of Deaf instructors were drastically lowered at virtually all deaf education institutions, dropping from 50% to 25%, and eventually lowering to as low as 10% in the 1960s (Siple, p.352). Despite this widespread suppression in education institutions, sign language was still stubbornly flourishing within deaf social events and gatherings where

interactions between deaf people would occur. Deaf students in oral schools would often sign secretly in playgrounds when teachers were not watching and if caught, teachers would often carry out punishments for signing. Many deaf people did not find this zealot oralist approach beneficial, resulting in a ‘dramatic deterioration’ of educational achievements and literacy capacities (Sacks, 1991: p.28). Oliver Sacks notes several clear reasons for this clear reduction in educational achievements:

Hans Furth, a psychologist whose work is concerned with cognition of the deaf, states that the deaf do as well as the hearing on tasks that measure intelligence without the need for acquired information. He argues that the congenitally deaf suffer from “information deprivation.” There are a number of reasons for this. First, they are less exposed to the “incidental” learning that takes place out of school- for example, to that buzz of conversation that is the background of ordinary life; to television, unless it is captioned, etc. Second, the content of deaf education is meagre compared to that of hearing children: so much time is spent teaching deaf children speech- one must envisage between five and eight years of intensive tutoring- that there is little time for transmitting information, culture, complex skills, or anything else (Sacks, 1991: p.28).

The strength and pervasion of the oral method and oralist values can be credited to the most notable supporter of Oralism, Alexander Graham Bell. Apart from inventing the telephone, he had considered ‘teacher of the deaf’ as his true vocation. Not only did he insist on greatly reducing the need of sign language for the sake of oral proficiency (which he believed was the only way deaf people could ever succeed), he also had strong eugenic motivations driven by his oralist agenda. Bell suggested that marriage between deaf people should be banned to reduce the number of signers arguing that sign language isolated users from ordinary citizens and encouraged intermarriages between deaf people. He had thought that banning marriages between deaf people would eliminate the possibility of the “production of a defective race of human beings” (Rée, pp.222-223). Although concerns of hereditary genes are mostly unfounded as most deaf children are born of hearing parents, Bell did still command a large amount of authority when it came to the oralist school of thought, and was responsible for reaffirming the continuous oppression of manualism and Deaf culture (Siple, p.351).

Since the Milan Congress, the spectre of oralism and audism haunted virtually all institutions affiliated with deaf people and deaf education, especially sign language linguistics. Consequently, sign language research and linguistics were not regarded as worthy endeavours, being misrecognised and interpreted as mere visual phenomena by people who did not understand it. The common perception of sign language can be summed up in the following excerpt:

The manual sign language used by the deaf is an Ideographic language. Essentially it is more pictorial, less symbolic, and as a system is one which falls mainly at the level of imagery. Ideographic language systems, in comparison with verbal symbol systems, lack precision, subtlety and flexibility. It is likely that Man cannot achieve his ultimate potential through an Ideographic language, inasmuch as it is limited to the more concrete aspects of his experience (Myklebust, 1960)(within Sacks, p.77).

It was not until the 1960s that William C. Stokoe in two written publications: *Sign Language Structure* and *Dictionary of American Sign Language* made academically acceptable the idea of sign language as a fully functioning language. These writings had asserted sign language to be a natural language that embodied all the essential linguistic components. It had its own range of lexicons and its own syntax and was able to generate infinite propositions out of finite resources, a crucial property of natural language (Sacks, p.78). These publications were the first two *written* publications of American Sign Language, an unprecedented achievement and were hailed as a scientific revolution, a paradigm shift in the Kuhnian sense. Sign language was finally beginning to be scrutinised on the same level as other spoken languages. This linguistic recognition of sign language has been referred to as the ‘linguistic turn in the study of deafness’ (Thoutenhoofd, 2000: p.267). Consequently, there have been numerous studies in the field of neuroscience and cognitive science. For instance, studies in such fields suggest that sign language and bilingualism has a massive effect on the brain, typically strengthening executive control (see Emmorey & McCullough, 2009). There has also been heightened awareness that early acquisition of sign language within the *critical period* age span for deaf children is crucial, there having been indications where deaf children who first

learn sign language past the age of five “never acquire the effortless fluency and flawless grammar of those who learn it from the start (especially those who acquire it earliest, from their deaf parents)” (Sacks, p.84).

The linguistic recognition of sign language had also meant a cultural revolution for deaf people. The Deaf community could now be considered as a community based on a natural language, not one based on superficial hand gestures. It did initially strengthen the resolve of many Deaf communities exemplified by the historical ‘Deaf President Now’ event. In Washington DC in 1988, deaf students took hold of Gallaudet University (an American university for the Deaf) and barricaded themselves in until several demands were met, the main one asking for a deaf person - and only a deaf person in the future - to be president of the university (Siple, p.352) (see Lane, 1992 for an excellent account of the event). Despite sheer tenacity and passion within deaf communities, it has not resolved the inherent issues arising in the treatment of deaf people in society. Thoutenhoofd argues that Jonathan Rée (likely) unintentionally suggested that the historical suffering of deaf people has been dispelled as a result of the vindication of sign language as a natural language (Thoutenhoofd, p.266). He suggests that despite this ‘linguistic vindication of sign language’, underperformance of deaf people in academia and schools *still* persists and many deaf people are considered functionally illiterate (Thoutenhoofd, p.262). It is the case that underperformance “is sustained and historical... and as a social phenomenon it reflects the various conditions relevant to the *continuing* history of oppression of deaf people” (Thoutenhoofd, p.266). Although sign language recognition has helped relatively as we can observe with the “Deaf President Now” phenomenon, it has yet to dispel the ‘suffering’ of deaf people. The issue lies in the fact that, again, deafness and sign language is a prevalently misunderstood phenomenon and it is not sufficient to imagine deafness as merely like being a hearing person without the ability to hear. Furthermore, sign language cannot be understood in terms of mainstream linguistics; the nature of sign language differs greatly to spoken and

written languages. This simplified attempt at imagining the conditions of deafness and a continuous superficial understanding of sign language, Thoutenhoofd asserted, is responsible for the ongoing oppressive conditions of deafness. A philosophical revision of the ontology of the senses in relation to deafness and sign language is a worthy endeavour to strive for (Thoutenhoofd, p.274).

The main issue dominating discourses in deafness is a fundamental misunderstanding of how the absence of hearing differs to a species-typical experience. This can have many implications as we have seen in the history of deafness. The cause of this issue is the difficulty of imagining particular and unique experiences that are beyond the scope of our embodied experiences (Mackenzie & Scully, 2007). Hence, most ethical and pedagogical solutions for deaf people are often engineered from a hearing point of view and do not fit within their social and phenomenological requirements. Precisely because of this widespread misunderstanding of deafness, deaf people have experienced these historically prevalent audiocentric solutions as oppressive. It is then unsurprising that deaf communities and movements have reacted to this fundamental misunderstanding of deafness by rejecting the general definition of deafness as disability. Accordingly most deaf communities have shown resistance to audiocentric practices, attitudes and devices including most recently, the cochlear implant device.

#### **4. The invention of the cochlear implant**

It is indisputable that forcing deaf children to hear and speak when they cannot hear sufficiently is counterintuitive and counterproductive. Since the introduction of hearing aids and more importantly, the cochlear implant, however, the moral and ethical nature of coercing deaf children learn to hear and speak has been irreversibly complicated. The cochlear implant is a device that stimulates sounds through electrical currents via an electrode inserted into the

cochlea, a small part of the inner ear responsible for transmitting sounds to the brain. The cochlea receives the electrical signals transmitted via the external processor that are then interpreted as sounds by the brain (Mudry, 2013). Although this device can be successful in ‘restoring’ partial hearing which is an impressive feat, the phenomenological experiences of people with cochlear implants are not identical to that of hearing individuals with research indicating disadvantages in theory of mind and executive control in children with cochlear implants (Ketelaar et al, 2012)(Kronenberger et al, 2013). Despite this, the proliferation of hearing aid devices continues, a trend which has been interpreted by Deaf communities as a threat to their existence (Lloyd & Uniacke, 2007).

Deaf children now have the option of having hearing aids and/or cochlear implants to assist their hearing and speaking rehabilitation (and integration into society) with a marked increase in success. It should be noted that the rate of success is very inconsistent, contrary to public belief and raises more questions whether Deaf culture and sign language are needed. Although Deaf culture had to endure many attempts by the oralist school of thought to have sign language concede to the superiority of spoken languages, the invention of the cochlear implant had meant that the oralist approach arguably became more accessible for even the most profoundly deaf people. The issue that arises is whether it is ethically acceptable to *assert* the superiority of the combination of cochlear implants and exclusive spoken language practice if it results in the diminishing of sign language and Deaf culture. This however can only be properly addressed after the nature of deafness as a disability is clarified. It is suggested that the continuous debate surrounding the use of cochlear implants as a solution to hearing loss is underpinned by this obfuscated understanding of deafness.

It is not uncommon for members of the deaf community to have rejected the cochlear implant on grounds that the device would inevitably cause the deaf community and culture to wither away; this would seem *prima facie* surprising to those unfamiliar with Deaf culture and

more familiar with the notion of deafness as a disability, a hearing loss. Nevertheless the issue of Deaf culture and sign language gradually dissipating is highly significant, and is a primary concern for the majority of deaf people. This has led to the emergence of the radical argument utilised by deaf activists to defend the existence of Deaf culture: being deaf is not being disabled but *being different* and anything that causes the eradication of Deaf culture is unjustifiable, unethical, and oppressive. Certain deaf people value deafness to the point where having deaf children is celebrated while birthing hearing children inspires disappointment. There is a well-known case that demonstrates how certain deaf parents celebrate the deaf condition: a deaf American lesbian couple aimed to maximise the possibility of having a deaf child via IVF by selecting a sperm donor with strong deaf genes (i.e. a higher chance of passing on deafness). This has provoked interest in the fields of ethics and bioethics with general agreement that the process of intentionally having a deaf child is an unethical act, since the child herself suffers the consequence of her deaf parents' values and has weaker chances of thriving in the world (See Levy 2002b, Murphy 2009). More will be discussed on this issue shortly.

As can be seen in the historical conflict between oralism and manualism, there are two divergent ethical positions on deafness and disability: the *medical* model of deafness and the *cultural* model of deafness. The former model simply views deafness as a physical disability, that of hearing loss. The latter model rejects the medical model in favour of viewing deafness as a cultural difference. However, it is the contention of this thesis that the arguments and ethical frameworks of the medical model do not capture the complexities of deafness, disability, and the phenomenological importance of Deaf culture for *all* people with hearing loss. It will be argued that both the *medical* and *cultural* models of deafness have their drawbacks and cannot, for example, offer a strong possibility of solving the conflict between Deaf culture and cochlear implants. On the one hand, most supporters of Deaf culture are utilising ethically controversial concepts to support their arguments. They defend the



existence of Deaf culture on grounds that they are a cultural and linguistic minority; that deafness is merely a different way of being and experiencing the world and is not a disability. Nonetheless, it is difficult to argue in general that deafness is not a disability. On the other hand, proponents of the medical model of deafness fail to consider the instrumental and intrinsic value of Deaf culture while idealistically asserting cochlear implantation technology to be the equivalence of natural hearing. They insist that cochlear implants are favourable over Deaf culture and sign language because they operate largely in the best interests of the deaf child and hearing parents of deaf children. However, since cochlear implants are *not* phenomenologically equivalent to natural hearing, and that not all cochlear implant recipients are successful, the current ethical arguments and policies in favour of cochlear implantation drift towards an unfavourable utilitarian direction.

The next chapter will begin evaluating the ‘deafness as cultural’ arguments supporting Deaf culture as put forward by Paddy Ladd and Harlan Lane. This position will then be contrasted with the arguments in response to the arguments for Deaf culture (and ultimately considering deafness merely as a disability and cochlear implants as the ideal solution) epitomised in Neil Levy’s claims. This will be followed by a consideration of the implications of the two opposing positions and it will be argued that neither of these positions are heading in the right direction towards achieving a thorough understanding of the nature of deafness and the ethical issues that are implicated. The importance of understanding deafness is paramount particularly in light of the impending threat of Deaf culture and natural sign languages disappearing – which has been a widespread concern for many deaf communities - in the face of improved biotechnology and advancing cochlear implants with mainstreaming agendas put forward by the hearing and speech sciences. By improving on our understanding of deafness, we can see what is truly at stake within the conflict between Deaf culture and cochlear implants.

## Chapter Two: Examining the debate on Deaf culture and cochlear implants

### 1. The 'deafness as cultural' arguments

Two prominent academic proponents of Deaf culture are Harlan Lane and Paddy Ladd. The crux of their argument is that deafness should not be strictly viewed in terms of medical deficits but rather the deaf community embodies features typical of ethnic groups that incorporate deafness as a cultural feature. Reducing deafness to the medical model of deafness is the cause of historical oppression that deaf people have faced. The result of this historically resilient medical reduction is that deaf children are denied the opportunity to learn their natural language and take part in Deaf culture. Lane argues that the medical model of deafness (or deafness framed as *infirmity* as he put it) is a social construction and serves only to reaffirm audio/speech institutional powers that are in themselves disabling for deaf people (Lane: 1992, 2005). In a similar vein, Ladd (2003) coined the widely influential concept of 'Deafhood', an identity formation process that all deaf people go through, suggesting that the rather open-ended concept is a useful starting point for understanding the experience of deafness without the medical/'infirmity' frame (Ladd, 2003).

Lane explains that there is a 'Deaf-world', a community of deaf people with their own natural sign language. Deaf people in this community identify themselves with a capital D – 'Deaf' as opposed to just deaf. They also reject identifying themselves as 'hearing-impaired' as that term implies being 'disadvantaged' or 'lacking something'. The Deaf-world, Lane argues, has qualities that affirm the community as an authentic ethnic group. The qualities are as follows: Collective Name, Feeling of Community, Norms for Behaviour, Distinct Values, Knowledge, Customs, Social Structure, Language, The Arts, History and Kinship (Lane, 2005: pp.292-293). These qualities, as mentioned previously, revolve around the natural affinity of the visual and kinetic to offset the disadvantage of losing the sense of hearing. The social structure and kinship are often that deaf people prefer and usually find solidarity in the company of other deaf people, mainly because of their phenomenological compatibility

through a shared language and experience; they can and do interact as if their hearing loss was not an issue at all. Conversely, their everyday interactions with hearing people are likely to be alienating, particularly if hearing people are not versatile and accommodating with their social interaction to make up for the phenomenological inconsistency (i.e., the inability to communicate with a deaf person). There are natural variations from one deaf community to another; the culture of the country in which the deaf community is situated often permeates their values. Although there are inevitable and required social overlaps, Deaf-world has also clear ethnic boundaries that can be distinguished from the hearing world. The deaf community, for instance, has many ethnic practices, such as usage and transmission of sign languages, social activities, sign language teaching, political activities, athletics, arts and leisure, publishing, and employment services; these are often practices that bridge the hearing and the deaf world (Lane, p.294). Because Deaf-world is considered as an ethnic group, it should be given the same rights and protections treatment as any other ethnic groups (Lane, p.295). Deaf people within the Deaf-world do not feel they are 'disabled', but rather they understand themselves to be part of this unique ethnic group.

Lane argues that like ethnicity, disability is a social construct rather than a 'matter of fact' (Lane, p.295). He draws a parallel between deafness and alcoholism, homosexuality, shortness to name a few. What they have in common is that these qualities have embodied negative traits according to how they are socially framed. Alcoholism was initially considered to be a product of voluntary hedonism until later it was reconsidered as a form of addiction and illness that requires compassionate professional intervention. Lane presents the common example of Martha's Vineyard, an island off the coast of Massachusetts that was predominantly populated by deaf people in the 19<sup>th</sup>-20<sup>th</sup> century where the majority of people living on the island, including hearing people, could sign, and deafness was merely seen as a trait and not a disability (Lane, p.295). Lane also further argues that despite disability being a construct:

many writers addressing ethics and Deaf people, apparently unaware of disability studies and medical anthropology, simply adopt the naïve materialist view when it comes to disability: “Almost by definition deaf persons... have a disability” ... “I maintain that the inability to hear is a deficit, a disability, a lack of perfect health” ... And, their ethical conclusions turn on this postulate (Lane, pp.295-296).

Lane suggests that deafness as a disability is a concept continually reinforced by the Foucauldian ‘technologies of normalization’; disability is something that *requires* mitigation, and that societies “have a great stake in retaining that conception” of deaf people (Lane, p.296). Because the medical model has a simplified view of deafness, arguably the benefits offered by the solutions are dubious. It has been admitted by cochlear implant advocates that the device does not restore normal hearing; additionally, long term habilitation is required. Deaf babies with cochlear implants, thus, are not in the same position as hearing babies- there are inescapable delays at the start:

According to a recent report, 59% of implanted children are judged by their parents to be behind their hearing peers in reading, and 37% are behind in math...It seems unlikely these children will be full-fledged members of the hearing world (Lane, p.300).

It is also not known what the long terms effect of cochlear implants are: “there is no body of knowledge on the effects of the implant on educational achievement, social identity, or psychological adjustment” (Lane, p.300)<sup>3</sup>. Yet the cochlear implant is being commonly hailed as a cure and seen as practically the only solution for the predicament of deafness; this issue will be highlighted shortly. Lane points out that an early acquisition of sign language can and does pave the way for a stronger acquisition of a secondary language like English. This can happen by ensuring that the deaf child has a healthy access to the deaf community and Deaf culture. Furthermore, the deaf child will experience a sense of solidarity; this solidarity has a special function of *unifying* the deaf community in order for necessary services to operate (e.g., employment services and sign language classes). The priorities of the deaf community are different to that of most disability rights movements. While the disability rights movement

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<sup>3</sup> Although these considerations were made in 2005, there are still similar concerns in recent times despite rapid advancements in cochlear implant technology (see Kermit, 2012)(Humphries et al, 2012)

advocate for services such as better medical and rehabilitation services, the deaf community advocates for a widespread recognition of sign language and more sign language interpreters: The former values independence while the latter values *interdependence* (Lane, pp.305-306). Subsuming the deafness condition within a disability framework, Lane contends, will set deaf people up for wrong and inappropriate solutions, such as wholly integrating deaf children in hearing classrooms. Moreover, it will set up deaf children to embody a negative stance towards their hearing loss.

Paddy Ladd argues the same line of thought that the internalisation of deafness as disability is oppressive, asserting that this can be combatted by embracing the identity formation process of 'Deafhood'. This reinterpretation of the definitions of Deaf culture has an "an important role to play in the decolonization process" (Ladd & Lane, 2013: p.571), addressing the need to identify, deconstruct and disrupt oppressive attitudes transmitted by the medical model of deafness that has historically permeated deaf communities. The decolonisation process serves to extract the existing negativity of deafness and replace it with a reflective non-medical stance: what does it *mean* to be deaf? (Ladd & Lane, p.572-574). The process of extracting the negativity of deafness as disability has significant implications: the oralist shift in deaf education has had a huge impact on the collective lives of deaf people. As a result "deaf people have experienced high levels of internalized oppression leading to a rate of acquired mental illness double that of the hearing population" (Kusters & De Meulder, 2013: p.430). The negative slant on deafness also leads to a resentful mindset, fuelling a general disliking and untrusting behaviour towards hearing people. The deaf community also suffers from frequent cases of tall-poppy syndrome, where deaf people will criticise (rather than support) other deaf people, perpetuating a disabled-mindset and hindering the process of general flourishing. Ladd emphasises that understanding and promoting Deafhood is key to ensuring that deaf people can be academically researched as 'subjects' as opposed to the "Deaf person as researched-Object (as is typical in the fields of)...medicine, technology,

education, and social welfare” (Ladd & Lane, p.574). The normative elements found in Ladd and Lane’s arguments are that framing deafness via a medical model or a deficiency model is harmful, damaging and does not fulfil the needs of deaf people around the world. Deaf culture and Deafhood establishes a better understanding of the ontology of deafness that medicine and the hearing/speech sciences, as they are currently, cannot achieve.

## **2. Response to claims asserted by deaf activists:**

Neil Levy’s position can be considered a representation of most positions taken in response to the deafness as cultural arguments. It also serves as a useful insight into how deafness as a disability is being understood in the arguments for and against cochlear implants. The basis of Levy’s argument is this: to evaluate the weight of the claims made by deaf activists with comparison to the claims of hearing parents with deaf children.

The main challenge presented by deaf activists in support of Deaf culture is that the cochlear implant device can be considered as a form of cultural genocide. Because children with cochlear implants are frequently raised exclusively oral and mainstreamed, this prevents Deaf culture from propagating itself; the device would then eventually lead to the extinction of Deaf culture as a result. Levy examines this apparent ‘moral dilemma’, as most theorists and activists perceives it, inasmuch as we are forced to weigh up opposing claims and choose one at the expense of the other. Either we allow the manufacturing of cochlear implants and allow Deaf culture to fade away in the process or, as Levy describes it, we sacrifice the interests of cochlear implant beneficiaries for the sake of preserving Deaf culture (Levy, 2002a: p.135). What is to be assessed here is the *worth* of a culture. Levy suggests that this moral dilemma raises the issue of confused intuition regarding the value of a culture: ought we appraise the worth of a culture on the basis of instrumental values or intrinsic values? How does the worth of a culture compare to the worth of individuals? In the case of Deaf culture

and cochlear implants, it is *prima facie* difficult to accurately determine the worth of either entity and to decide which one should be exclusively supported. It is fair to argue that Deaf culture can be considered to have intrinsic worth as a culture, but it is also plausible to argue that restoring partial hearing for deaf individuals should not be excluded as an option, particularly when the majority of deaf individuals have hearing parents who have virtually no ties with Deaf culture, let alone have met a deaf person before.

Levy attempts to tackle this value predicament by assessing the main argument asserted by deaf activists in support of Deaf culture over cochlear implants: that the characteristic of deafness is not different to the characteristic of race, and that although there are disadvantages experienced being a black person, she would not undergo surgery to become white. Levy suggests that there are three basic claims inherent in this argument: the *disability* argument, the *message* argument and the *culture* argument (Levy, pp.137-138). These arguments, as put forward by deaf activists, serve to divorce deafness from the medical model's understanding of disability (i.e., merely hearing loss) and to consider Deaf culture as intrinsically valuable like any ethnic groups and cultures.

The disability argument contends that disability is *social* in origin; in other words, disadvantages experienced by people with disabilities are caused by social arrangements, not the disability itself. This is where the parallel between deaf people and black people are drawn; both experience disadvantages arising from negative social actions, such as discrimination and lack of support in education and employability to name a few. As Levy rightfully indicated, there are strong and weak versions of the disability argument. The weak disability argument argues that certain disadvantages of disability are social in origin; the strong version argues that *all* disadvantages are social in nature. The latter version is the position that Lane takes. This is a problematic view, however, since this argument conflates two mutually exclusive qualities; a distinction needs to be made between *disability* and

*disadvantage*. It is certainly the case that the disadvantages experienced by people with disabilities are results of social arrangements, but as Levy argues, it is also the case that people with disabilities *are* naturally disabled and that there are no plausible or reasonable ways of offsetting particular disadvantages via social arrangements. For instance, it is fair to expect ramps to be constructed for wheelchair users for accessibility, and there are no convincing reasons why we need to use stairs *only*. In this case, the disadvantage disappears after *plausible* social arrangements. However, wheelchair users are unable to go hiking or at the very least will struggle to go hiking compared to non-wheelchair users. Although wheelchair users cannot go hiking, there are no convincing reasons why people should stop hiking. It is then the case that there are inescapable disadvantages experienced by wheelchair users that are not necessarily social in origin (Levy, p.139). This is also the case with deaf people. Although a majority of disadvantages are especially social in nature (e.g., the 1880 Milan Congress), the benefits of sounds cannot be disregarded. For example, sound alarms or horns are more effective for the majority of people in terms of safety. It is very unlikely, if not impossible, for social arrangements to be exclusively visual, especially when there are others like blind people to consider as well. Inevitably deaf people are going to experience natural disadvantages resulting from their hearing losses. This however does not mean that social disadvantages experienced cannot be *minimised*; social arrangements should still be continuously worked on in order to minimise disadvantages for people with disabilities. In this sense, the weaker version of the disability argument retains plausibility (Levy, p.140). The social, educational and employment disadvantages experienced by deaf people indicate there is much work to be done to improve social arrangements. In the end, the disability argument in its strong form does not prevail; it is not plausible to say deafness is not a disability and there are no convincing reasons why there should not be medical interventions for deaf people (Levy, p.141).



The message argument asserts that the treatment of deafness sends a message that deaf people are of lesser worth because they are deaf. When deafness becomes an *object* of medical intervention - i.e., deafness scrutinised under the medical model mentioned previously - it suggests that deafness is not an acceptable trait; it is unwanted. It then signifies that people embodying such traits - incapable of benefiting from such treatments - are of lesser worth and has engendered polarising responses. Some argue that one should not embrace their disability as their existence (Levy, p.142). This is contrary to Lane and Ladd's position, particularly since deafness as a concept does not align to the general concept of disability. Recalling the claim that the deaf community is an ethnic group with its own culture and language, treating deafness would be seen as a symbolic move that suggests 'we do not want you or your community here'. In this sense, deaf people reject the perceived *need* of treatment for their hearing loss. Drawing a parallel, the case of treating skin colour is straightforward: if black people were forced to undergo treatment to change their skin colour, this would be a highly insulting procedure driven by blatant racism and non-medical reasons. Whether this has the same implications in the case of treating deaf people is a highly contentious matter. If it were a different disability other than deafness, such as near-sightedness, the implication would be different and not seen as an insult, particularly when there are no cultures or communities at stake. Additionally, those with near-sightedness view their conditions as a burden rather than something contributing to their existence and identity. Levy then suggests that the message argument hinges on the *cultural argument* and the question "whether cochlear implants are benign treatments or an unacceptable example of eugenics" (Levy, p.143).

The culture argument can be summed up in the following excerpt:

That deafness, whether or not it is a disability, is the constitutive condition of access to a rich and living culture. Since cultures are intrinsically valuable, we may not engage in actions that would tend to undermine or destroy them (Levy, p.143).

On this basis, cochlear implantation as a medical intervention is unacceptable since such an act of medical intervention would invariably lead to the demise of Deaf culture. Levy suggests, then, that there are two empirical questions to examine: Does Deaf culture exist and will cochlear implants threaten or destroy its existence? It is, however, important to note that Levy does frame this discussion without dealing with concerns of the in/effectiveness of the cochlear implant; he states that for “the purposes of this paper, (he makes) the assumption that the implant will give their recipients functionally normal hearing” and suggests that the technology is *likely* to improve *enough* that current limitations will not be a concern (Levy, footnote p.137). This appears to be an unreflected assumption relying on the medical model of deafness – that cochlear implants are a sufficient cure - which is an issue in itself. The significance of this assumption will be examined shortly. It is however useful to consider the logical implications if cochlear implants *were* indeed capable of ‘restoring functionally normal hearing’. As a result of this thought experiment, it is possible to foresee how Deaf culture could fare against such technology logically.

Levy lays out three necessary conditions that a group needs to meet to be considered as a ‘culture’. Firstly, it must be *ongoing* and able to perpetuate itself at least over several generations. Secondly, it must have distinctive *values* that set the group apart from other groups/cultures. Finally, such values must be expressed in various *material* forms (Levy, p.144). If we measure Deaf culture with these criteria, it is clear that the second and third conditions are satisfied from our examination of the history of deafness and the genesis of the deaf community. There is no doubt that Deaf culture has strong values motivated by its kinetic and visual affinities, and many of these values are materialised in kinetic and visual forms, and via their natural sign languages. However, as Levy states, the *ongoing* condition for Deaf culture is tricky.

Unlike most cultures, the deaf community, as an enigmatic phenomenon, does not propagate itself through families but through social networking that originated from deaf schools where there were a concentrated number of deaf people in close proximity. Moreover, the rarity of passing on Deaf culture via families is due to the fact that 90% parents of deaf children are hearing. According to Levy, because of this, there is a tension between the *obligations* of two different cultures. It is important to note that the way this debate is framed is in terms of *either/or*. Either deaf children receive cochlear implants and participate in their hearing parents' culture/s and allow Deaf culture to dwindle or they reject implantation and join Deaf culture and learn sign language at the expense of participating in their parents' culture/s. Levy argues that although there is a *prima facie* convincing reason to oppose cochlear implants on grounds that Deaf culture is intrinsically valuable, it does not follow that hearing parents of deaf children have an obligation to support the existence of Deaf culture. Deaf children might be *potential* members of the deaf community, but it does not mean that they *ought* to be members of the deaf community from the start as Lane and Grodin argue should be the case (Levy, p.148). Moreover, culture is a matter of *acculturation*, something learnt and embodied, not that of determinism; e.g., the idea that if one has black skin despite having white parents, she *must* join black culture. To apply this principle to deaf people would be biologist, in the same sense that forcing a black child to join black culture despite white parents would be racist. More importantly, due to the availability of cochlear implants, Levy argues that the deaf child is *also* a potential member of the hearing world (Levy, p.149). Since it is important for the deaf child to be a part of their hearing parents' culture, ultimately, the obligations of the hearing parents of deaf children take precedent over the obligation of Deaf culture, even if it means leading to the dwindling of Deaf culture despite its intrinsic worth.

Additionally, Levy argues that one should consider the weight of the "harm done to children by allowing them to suffer from a disability that is treatable" (Levy, p.151), and that

deaf activists have no right to enforce deafness when the kind of measures required to maintain Deaf culture is not permissible (Levy, p.153). He considers the example of Martha's Vineyard, where everyone who had lived on the island knew sign language (since there was a high percentage of deaf people with inheritable deaf genes) which meant that deaf people were not socially disabled and faced no linguistic barriers<sup>4</sup>. Levy claims that this also meant the *demise* of Deaf culture, since deaf people were fully integrated into the community and were not distinct from the majority. Levy concludes that:

the only practical way to reduce (the costs of being deaf) is through the assimilation of the Deaf, whether through the generalization of Sign, or the use of implants. Either the Deaf must continue to bear the costs of their disability, or they must disappear (Levy, p.151).

In other words, as soon as the barriers arising from deafness fall away, Deaf culture will inevitably fall away. This is why the comparison between Deaf culture and ethnicity does not follow; for Levy it seems counterintuitive for Deaf culture to maintain itself distinctively if there are no disabling barriers of integrating into the wider culture remaining. Ultimately, through a widespread use of either sign language (manualism) or implantation (oralism), participation of deaf people in general society will result in the demise of Deaf culture. Although the demise of Deaf culture would appear to be an inevitable by-product of removing disabling barriers, it does not make sense that cochlear implants and oralism should not be supported anyway. In order to maximally accommodate parents' wishes of sharing their culture with their deaf children, cochlear implantation technology should be allowed and favoured over the desire to propagate Deaf culture; any counterarguments would have to be very *convincing* "to deny hearing parents the means of exercising their right to bring their children into the hearing culture" (Levy, 2007: p.141).

During the discussion, Levy also makes an underlying key assumption. Not only does he suggest that the deaf child can only partake in one culture – either Deaf culture or the

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<sup>4</sup> Although it is still argued whether or not there is deaf culture on Martha's Vineyard, for the purpose of this thesis, Levy's interpretation of the culture on Martha's Vineyard is used.

hearing parents' culture - he also argues that true bilingualism for deaf children is 'rarely achieved' - "Usually, if the child speaks Sign as a first language, she has little competence in or comprehension of spoken languages" (Levy, 2002a: p.145). This appears to be a form of value judgement motivated by oralist principles inasmuch as it is not ideal if the deaf child cannot speak and resorts to only sign language for communication. Moreover, he echoes the common sentiment propagated by oralist advocates that sign language interferes with the ability to hear and speak. Generally, it is this kind of belief that encourages the all-or-nothing approach to resolving the conflict between cochlear implants and Deaf culture.

Overall, Levy's discussion might appear to be a *prima facie* straightforward debate proceeding to its logical conclusion of favouring cochlear implants and oralism over Deaf culture and manualism despite Deaf culture's intrinsic worth. Nonetheless it is worth pointing out how Deaf culture, the wishes of hearing parents, and cochlear implants are framed in Levy's analysis of the either/or debate. How Deaf culture is framed in these kinds of debates is of crucial importance; the idea of preserving Deaf culture for Deaf culture's sake is considered the priority. Conversely, the nature of deafness and the *importance* of Deaf culture *per se* has been routinely overlooked and unaccounted for in routine ethical and bioethical discussions. Additionally, the effectiveness of the cochlear implant needs to be considered and incorporated into the debate as a significant factor; natural hearing and hearing restored via cochlear implantation are significantly different and have significant implications which have not been very openly discussed. If the debate were reframed accordingly, as well as incorporating a better understanding of deafness as a disability, the logical conclusion would be a very different one. The next section will now examine the merits and drawbacks of the claims asserted by Lane, Ladd and Levy. It will be argued that the arguments put forward do not satisfactorily explain and justify the importance of Deaf culture, as well as fail to capture the dynamic implications hearing losses can have on individuals.

### 3. Merits and Drawbacks of Claims

As was suggested at the end of the last section, the two different positions emerging from the debate of prioritising and choosing between Deaf culture and cochlear implants fail to capture the nature of deafness and disability. Consequently, it becomes difficult to pinpoint how and why deaf people experience oppression arising from their disability and to understand the worth of Deaf culture in different terms other than its cultural intrinsic worth. This section will explore why this is the case. It is nevertheless the case that both sides of the debate have significant points and caveats to take into consideration. It is worthwhile to briefly consider the merits of their positions before we consider their inherent drawbacks.

The claims put forward by Harlan Lane and Paddy Ladd have two considerable merits. Firstly, they offer strong plausible accounts of identifying and understanding the oppression of deaf people. It is undeniable that deaf people have undergone continuous mistreatment over the centuries on many levels. The misrecognition of sign language as primitive gestures incapable of expressing abstract thought and the enforcement of exclusive oral practices have seen many deaf people disadvantaged particularly since the Milan Congress in the 1880s. Generally speaking, it is undoubtedly the case that a lot of disadvantages experienced by deaf people historically speaking were and are *social* in nature. Because of the seemingly social nature of the disability, it was natural for deaf activists and theorists to deconstruct the general notion of disability, namely the medical model of deafness, and to introduce non-medical concepts of deafness, one of which is becoming increasingly well known as ‘Deafhood’. Particularly these theories and acts of deconstruction imply the importance of a *positive self-image* for deaf people surrounded by values driven by colonialism, phonocentrism and audism. Harlan Lane has written extensively on the nature of the historical oppression deaf people have faced, drawing a parallel between deaf people and the colonisation of minority

cultures (Lane, 1992: p.32). They are both often portrayed as inferior and subjugated subjects in need of guidance of the coloniser, and therefore, as natural targets of assimilation, the aim is to integrate them into the culture of the coloniser in order to discard their 'naturally inferior' culture. The Australian Aborigines experienced forced assimilation via a gradual form of genocide imposed by various legislations as a means to fade away their 'blackness'. Deaf people have similarly experienced this forced integration through attempts to abandon their 'deafness' via oralism, dominance of spoken English, mainstreaming, and surgery for cochlear implants (Lane, p.132). These are attempts to *pass* deaf children as *hearing* (i.e., make it appear that deaf children are hearing). In other words, these are practices aiming to *deny* the condition of deafness.

The nature of the deaf person's self-image corresponds to whether deafness is a condition to be accepted or rejected; if deafness is a condition to *reject*, a deaf person will view their condition with *disdain*. If a deaf person lacks a positive self-image, she is likely to incorporate and accept audist values (i.e., valuing the quality of being hearing as superior), viewing her deafness as a pox on her identity and self. On the importance of embodying a positive sense of deaf identity, Lane cites Sartre in which he comments on the implications of embodying the identity of the 'other':

The oppressed accepts the judgement of the other...incorporating into himself the very standard which decrees him a pariah. He actively consents to oppression. In response to the look of the other, he looks down (Lane, p.96).

In the case of deaf persons, it is not that they consent to oppression, but they have no option but accept oppressive conditions passively since they are not conceptually equipped to fight off such oppression. In this sense of embodying the 'other', the notion - that if the deaf person cannot learn to hear and speak, they will be seen and felt to be incomplete subjects - is a common sentiment that influences the expectations and self-worth of deaf people. By taking on a negative self-image, their quest for authenticity and recognition, as Charles Taylor (1994) has written extensively, is distorted and compromised. Their ability to assert

themselves beyond the audist conception of deafness as a *person* worthy of recognition is a failed mission from the start; there will always be a negative stigma on their condition of deafness which in turns compromises their self-worth. It is this reason that the notion of Deafhood (and the value of Deaf culture) is introduced, to substitute negative self-images with a positive one. For instance, as a way of salvaging positivity from the condition of deafness, it is commonly argued that instead of a hearing loss, it would be a *deaf gain* on the grounds (to name a few) that deaf people gain “enhanced cognitive skills...increased facial recognition...increased spatial cognition...visual alertness, and proficiency in visual learning and in the use of visual languages that are rich in “metaphoric iconicity””, a different way of experiencing the world (Kusters & De Meulder, 2013: p.430). Not only does the medical model lack the idea of ‘gain’, as Lane reiterates, it also asserts oversimplified solutions to deafness, such as disregarding sign language and asserting an exclusive use of oralist practices and cochlear implants. It is not surprising then that the medical model of deafness and their common endorsement of the cochlear implant are subjected to criticisms by deaf activists. This leads to the second merit of the claims.

Not only do deaf activists disagree with the cochlear implant and oralist approach because they threaten the worth and status of deafness and Deaf culture, they are also largely sceptical of what cochlear implants are capable of achieving, contrary to the sentiments of the general public where the device is commonly perceived to be a cure for deafness and taken for granted. Although it is the case that cochlear implants do restore certain amounts of (electronic) hearing, the knowledge of the outcomes and the success rate of the rehabilitation process is not fully known and clear cut; the historical lack of success with deaf children and oralism still persists, despite the usage of cochlear implants. There are still variances in the cochlear implant results as Patrick Kermit points out:

[It] might also be observed that, overall, the statistical presentation of the results of these studies displays degrees of variance that ranges “from the excellence of some



individuals whose auditory performance is near normal, to the unfortunate few who, despite major advances in technology and surgery, remain seriously impaired... This variance can still only be explained to a limited extent... The possibility of predicting outcomes for the individual child is thus limited (Kermit, 2012: p.373).

Additionally, there has been a lack of research on the long term results of cochlear implantees. Despite this doubt, the device is still hailed as a cure. There is a certain epistemic arrogance underlying the cochlear implant/oralism school of thought that would benefit from the scepticism displayed by deaf activists and the deaf community.

Despite these merits, the validity of Lane and Ladd's normative claims is significantly held back by the rather bold assertion that deafness is not a disability but difference. In other words, their claims would be valid only if the condition that deafness is not a disability were met. As Neil Levy pointed out, this is a flawed argument; it is not plausible to assert the preservation of Deaf culture when deafness is in actuality a disability. Consider how the deaf as difference proposition would work in a popular bioethics case example. In the previously mentioned designer IVF deaf baby example where a deaf lesbian couple were maximising their chances of having a deaf baby, it is visibly the case that striving to have a baby with a disability is ethically problematic, especially considering that the majority of parents would more likely strive for normality for their children (Murphy, 2009). As Levy argued, the ability to hear is an intrinsic good in a heavily audio-centric world. Intentionally having deaf children, disrupting the intrinsic ability to hear, seems intuitively unethical. For instance, it is unethical in Kantian terms since the act itself would be instrumentally motivated. In effect, the child is being used as a means to the parents' ends rather than considering the child as the end herself, even if the deaf person might experience certain opportunities and advantages that are not available to hearing people (e.g., Deaf culture, employment/social opportunities in the deaf community, learning a visual language, improved visual cognition). Moreover, it undermines the *worth* of *hearing* children of deaf adults (CODAs). Hearing CODAs are able and likely to serve significant roles in deaf communities due to their natural signing abilities

and understanding of deafness which are advantageous qualities ideal for becoming a sign language interpreter, an occupation that is continuously in high demand in all deaf communities. A distinction should be made at this point: intentionally having a deaf child and having a child who happens to be deaf are two different intentions; the former is considered not ethically ideal while the latter is acceptable, although these two actions do coincide with having a deaf child. Despite the difficulty of distinguishing between these two intentions, what should be clear is that *intentionally* causing disability is not a morally acceptable act even if the disability itself, as argued by Ladd and Lane for example, is not incapacitating or is merely ‘difference’. Using the ‘deafness as difference’ approach here is incapable of providing a strong resolution to this intuitive ethical dilemma of intentionally causing deafness. It is the case that any ethical deliberations regarding deafness *must* be deliberated under the condition that deafness *is* a disability. To assert that deafness is *difference* is stepping towards relativism, compromising the normative integrity of resulting claims. It would be difficult to defend Deaf culture on relative grounds against the medical model. A stronger chance of defending Deaf culture (and rectifying the medical model) must incorporate and satisfy the condition that deafness is a disability, and the claims put forward by Ladd and Lane fall short in this respect. It is important to note that how we should consider and appraise *disability* and its worth is yet to be determined at this point, only that disability should not be argued merely in terms of difference.

As previously stated, Neil Levy’s claims have certain merits by considering the flaws of arguing deafness in terms of difference. It provides a useful thought experiment of considering the destiny of Deaf culture if there were an actual cure for deafness. Levy does make the assumption that cochlear implants give functionally normal hearing for the purpose of logically appraising the worth of defending Deaf culture. It is worthwhile to consider what would happen if there were an actual cure (not necessarily the cochlear implant) resulting in a hearing experience phenomenologically identical to that of a hearing person with no side

effects and variations in results. It is very likely that deaf people would not hesitate to take the cure; the existence of Deaf culture would invariably be compromised as the numbers of deaf people declined. If one were to insist on the preservation of Deaf culture despite the proliferation of a cure, it would be in terms of what it has to offer despite the absence of deaf people. For instance, preservation of sign language would mean opportunities for philosophical exercises in understanding languages in different modes, which also offers empirical opportunities for the brain/cognitive sciences to explore the complexities of the human mind. What Deaf culture has produced over the years is invariably priceless and such records of unique human experiences and aesthetics should be relished and preserved, especially since *anyone* can learn sign language; hearing loss is not a sufficient or necessary condition for learning sign language.

With that said, Levy maintains it is clear that we are left with no *convincing* reason to defend Deaf culture in the face of the perfect cure. Contrarily, Robert Sparrow argues that on communitarian grounds (i.e., respecting cultural differences), the intrinsic value of Deaf culture is enough for defending deaf parents' decisions to raise deaf children without resorting to such cure, whether it is perfect or not. Despite this, he does concede that such technology would likely reduce the number of Deaf culture members (Sparrow, 2005: p.148). As both Sparrow and Levy have discussed, since 90% of deaf children are born to hearing parents and that it is the case that the hearing parents have the right make the decision whether their child joins their own culture or Deaf culture, it is likely that the majority of the hearing parents would prefer their children to be a part of their own culture, leaving Deaf culture continuously struggling to maintain numbers of deaf members. Since Deaf culture faces this hypothetical possibility of the perfect cure, it is difficult to defend it on grounds that it is an ethnic group; if the deafness condition goes, Deaf culture inevitably goes with it.

It is the case, nonetheless, that there isn't a cure and the cochlear implant cannot replicate the phenomenal experience of a 'normal species function' (Sparrow, 2010: p.459). There are more immediate concerns with the defence of Deaf culture and that Levy's arguments do not follow within this immediate timeframe where there isn't a cure for deafness yet. It still does not follow that the *mere* possibility of cochlear implantation technology improving over time justifies making policy decisions that overlook the importance of Deaf culture and sign language. To do so would be heading towards an unfavourable utilitarian direction; perhaps 70-80% do benefit from the cochlear implant, but what about the failures that cannot benefit from it? Quite typically, those failures end up learning sign language at a later age, past the critical period typically, to make up for the lack of language, which is quite often too late and can lead to developmental delay.

Moreover, Elizabeth Barnes highlights the dangers of the overt commitments, motivated by ableist principles, to develop 'cures' for disabilities. Indeed, there is nothing wrong with wanting to mitigate disabilities and their disadvantaging effects but as Barnes argues:

[There] is something wrong with the expectation that becoming nondisabled is the ultimate hope in the lives of disabled people and their families. Such an expectation makes it harder for disabled people- who in other circumstances might be perfectly happy with their disability- to accept what their bodies are like, and it makes it less likely that society's ableism will change. It is hard to accept and be happy with a disabled body if the expectation is that you should wish, hope, and strive for some mechanism to turn that disabled body into a nondisabled body (Barnes, 2014: p.111).

Not only does the idea of the 'cure' have damaging effects on the general self-image of people with disabilities (i.e., see the message argument), Barnes highlights additional issues with striving for a cure by using an example of muscular dystrophy where there were campaigns relentlessly focusing on achieving the miracle cure. Although the idea of the cure is not objected to, it detracts the focus from other important and more immediate everyday lives' concerns:

What [people with muscular dystrophy] want are things like: research on how to extend the life span of persons with Duchenne Muscular Dystrophy, better wheelchair technology, focus on helping people with muscular dystrophy find accessible jobs, more public awareness about accessibility, and so forth (Barnes, p.111).

Although a cure is possible, there are still other basic needs to be met to mitigate the disadvantaging nature of disabilities that people have; this is also the case with deaf and hard of hearing people and the cochlear implant.

Apart from the fact that there is no present cure, there are two discrepancies in Levy claims to be examined: how the nature of Deaf culture is framed with reference to the wishes of hearing parents of deaf children, and how Deaf culture is being conceptualised with reference to deaf people in the debate.

Firstly, how Deaf culture is commonly framed in these debates is in terms of *either/or*: people who are deaf can *either* join mainstream culture that their parents regularly practice, *or* join Deaf culture and abandon their parents' culture. There is no middle ground of any sort. Levy claims that if the deaf child joins Deaf culture, she will (likely) be estranged from her hearing parents and that Deaf culture clashes with the wishes of hearing parents (Levy, 2007). If the aim, the *end* point, were to *preserve* the existence of Deaf culture, it is undoubtedly the case that the wishes of hearing parents, whether they want their deaf child to sign or speak, have more weight than the claims for Deaf culture. As previously discussed in this thesis Deaf culture does not work as an *exclusive* culture. Siple (1994) argues that Deaf culture functions as a *co-culture*, often acting as support for deaf people in order to endure the hearing world, such as employment services, opportunities for language and social developments, advocacy against discrimination, and so on. It is clearly counterintuitive to isolate oneself from the world, which is why Deaf culture advocates for a bilingual approach for deaf children so they are likely to be able to be involved in both worlds and experience what they both have to offer. Joining Deaf culture does not necessarily entail a *rejection* of other cultures, including cultures of hearing parents.

Secondly, Levy makes a bold claim concerning the nature of Deaf culture; he argues that once the barriers to deafness as a disability fade, this necessarily entails the *death* of Deaf culture. He cites the lesson of Martha's Vineyard where the majority of the population historically were able to sign (due to an unusually higher number of deaf people) and deaf people "were fully integrated into the community – which is to say that there was no separate Deaf culture" (Levy, 2002a: p.151). Although an interesting point it does not explain *why* deaf people would prefer to be in such a community as Martha's Vineyard rather than worry about the preservation of Deaf culture. Thus a distinction needs to be made here: either deaf people want to maintain Deaf culture for its sake, or deaf people just want to be able to live at ease with minimal disadvantages.

As I suggested in the history of the deaf community, the creation and propagation of Deaf culture naturally occurs from two necessary conditions:

1. There are numerous deaf people in proximity to each other (i.e., an existing social network).
2. There are *phenomenological inconsistencies* between deaf and hearing people.

Very simply put, phenomenological inconsistencies mean not being on "the same page" as other people in terms of perceptual and social experiences. To clarify, phenomenological inconsistencies can be ameliorated in three ways: either everyone is hearing or everyone is deaf, or *both* deaf and hearing people are able to sign thus everyone is on the 'same page'. Compare, for example, the historical community in Martha's Vineyard to today's Australian Deaf community; the former did not experience phenomenological inconsistencies while the latter continuously experience phenomenological inconsistencies. Martha's Vineyard, per Levy's claim, does not have Deaf culture since everyone was on the 'same page', but Deaf culture still exists in Australia since not everyone is on the 'same page'. Importantly this distinction clarifies the ontological nature of Deaf culture; whenever there are

phenomenological inconsistencies and numerous deaf people in close proximity, Deaf culture will exist. Several key questions emerge as a result. Why is it the case that Deaf culture arises from phenomenological inconsistencies, what *purpose* does it serve apart from its intrinsic cultural value and why should we care about Deaf culture if cochlear implants are so widely available and used in developed countries?

The debates as they are - as argued by Levy, Ladd and Lane - cannot sufficiently answer these questions nor do they present a convincing resolution to the conflicts at hand. In order to resolve the conflicts of obligations and to understand the importance of Deaf culture, the debate requires a different approach and a restructured ethical framework to make sense of deafness. This involves understanding the continuous persistence of Deaf culture and manualism against cochlear implants and oralism while also accepting the fact that deafness *is* a disability.

Simultaneously, the debate also needs to be able to highlight why the inherent epistemic arrogance of the exclusive cochlear implant/oralism approach can be harmful for the identity formation of deaf people and to clarify what is categorically required for deaf people to flourish. The resulting tangent of this is that ethical discourses relating to the issues of deaf children and cochlear implants can be addressed. Consider one example: a hearing couple - both are fluent ASL sign language interpreters - decided not to give their two deaf children cochlear implants and to raise them with ASL as their first language. Addressing this supposedly ethical issue, Byrd et al (2011) suggest that although the case is too ethically complex to come to a strong normative conclusion, since the notion of impairment is rather subjective, they still nevertheless claim that it is not ideal *not* to give a deaf child cochlear implants and such acts could be considered to be child abuse:

Although ASL is a vibrant language and valid form of communication, preventing children from receiving auditory input and developing oral communicative skills *will indelibly impact their lives and limit their potential* (Byrd et al, 2011: p.1803) (Italicised for emphasis)

Especially since it is the case that cochlear implants are at present not ideal cures, this claim is misguided and inherently dangerous for two reasons. Firstly taking this position could eventually validate the act of removing the deaf children from their parents if they are not given cochlear implants regardless of whether they learn to sign or speak. Secondly, it presents cochlear implants as a requirement for deaf children to achieve full potential while representing Deaf culture and sign language as not contributing to this achievement of full potential. In other words, they are persons *if and only if* they obtain cochlear implants and learn to speak. The assumption that lacking auditory input and oral communicative skills equates to a negative impact on lives and potential is inaccurately reductive; it overlooks and simplifies the basic conditions for self-realisation to the ability to *hear* and *speak*.

Despite this conclusion, it is generally not the case that deaf people reject cochlear implants as a tool itself, or the ability to speak and hear as an intrinsic good. We must consider and attempt to understand the basic conditions for self-realisation for people from all walks of life and understand how deafness as a disability fits in this conception if we are to make non-harmful normative ethical considerations to resolve - what has been commonly assumed in ethical discourses - the imagined conflict surrounding deaf people, hearing people and parents, cochlear implants and Deaf culture. The attempt to reach this understanding of how deaf people can achieve self-realisation may be considered to be the ontological revision of the senses and deafness that Thoutenhoofd suggested is sorely needed currently.



## **Chapter Three: Reconceptualising deafness as a disability:**

### **1. Changing the debate**

The hypothesis of this thesis is that this imagined conflict surrounding parents, Deaf culture, and cochlear implants can be resolved through the reconceptualisation of deafness by utilising the theoretical framework of recognition, extending on Axel Honneth's (1995) breakthrough interpretation of the Hegelian notion of recognition. By applying the theory of recognition, as argued by Axel Honneth and Heikki Ikäheimo, with its emphasis on considering recognition as a requirement for the wellbeing of individuals, we can understand the disabling nature of deafness resulting not merely from the hearing loss itself but from *misrecognition*.

The idea of using recognition for overcoming the impasse between the claims of deaf children, advocates of cochlear implants and hearing parents has also been advocated by Patrick Kermit (2009, 2010, & 2012) who points out that the real issue relates to the identity formation of deaf children. The debate, then, should incorporate the notion of identity formation as the long term goal for deaf children, and all research and studies regarding the efficacy and success of cochlear implants should mainly consider this rather than merely evaluate the level of success in relation to the ongoing capacity to hear and speak. However, Kermit's application of recognition theory stops here; he does not expand on the potential deeper correlation between disabling experiences of deafness and misrecognition; how such disabling experiences could plausibly occur and how the importance of Deaf culture fits into this paradigm.

Kermit also follows the line of thought that the apparent mutual exclusiveness between deafness as difference and deafness as impairment is chimerical. Choosing the strongest of either side is oversimplified and only overlooks the nature of deafness and its disabling experiences. He suggests that the appropriate approach to deafness involves three

interacting qualities: deafness as physical impairment, deafness as a linguistic minority culture, and deafness as a socially constructed disability. When we consider these qualities together as *not* mutually exclusive and especially placed in context of the widespread recognition that sign language is a natural language with sound benefits (pun intended) and the sheer availability of hearing assistive devices that have shown to be useful, the needs of deaf children become clearer: that of providing and fulfilling opportunities “to realize their social, cognitive and lingual potential and form an authentic identity” (Kermit, p.172). Incorporating this sentiment, the historical idea that the ability to hear and speak is the fundamental component of a person’s identity is superseded. This is replaced with the priority of absorbing a natural language that can be clearly understood, phenomenologically speaking, and allows for the process of such authentic identity formation to occur. It is at this point that Kermit clearly refers to Honneth’s and Taylor’s emphasis on the process of recognition for identity formation and suggest that learning and using sign language is a strong option for deaf children to be able to experience this process reliably (Kermit, p.170).

The notion that sign language is a basic minimum requirement for deaf children in order to develop healthily has been widely advocated (Mellon et al, 2015). More notably, the 2015 Young Australian of the Year Drisana Levitzke-Gray. Levitzke-Gray, a strong deaf activist from a large well-known Australian deaf family, believes that the ‘hearing-speaking-equals-language’ ideology is harmful since it overlooks the importance of literacy and communication and that Deaf children in Australia should have early access to Auslan (Australian Sign Language) particularly during the critical period for language acquisition. Her clearly stated position on cochlear implants and sign language is similar to that of Kermit’s:

I’m not against cochlear implants, or hearing aids, or other technologies; I believe in being bilingual and bicultural. Auslan is my first language; English is my second. We have a lot of research that proves that bilingual, bicultural models – teaching Deaf children sign language *and* giving them access to whatever technology and speech

therapy might be necessary – ensure that they do better than those who only have access to speech methods. If later they say, ‘I don’t want a cochlear implant’ or, ‘My cochlear implant is fantastic and I don’t want to use Auslan’, that’s fine: at least they’ve had the opportunity to access both. It shouldn’t be one or the other, but Auslan has to be the base, because it’s the most accessible (Levitzke-Gray, 2015)

Looking at Levitzke-Gray’s and Kermit’s comments, the aim for deaf children, as it is for everyone else, is to form a healthy identity and sense of self. It does not actually matter if the deaf person prefers to speak, sign, or both, as long as she has all the fundamental capacities typical of a person with a fully formed healthy identity. It is accepted that having the ability to hear and speak is in itself useful but not at the expense of language fluency. Language, whether spoken or signed, French or English, as long as it is understood and used *without difficulty*, is vital for identity formation (Kermit, 2010: p.97). Deaf children are highly vulnerable to the risk of missing out on developing a strong identity since they will experience inevitable *phenomenological inconsistencies* in their lives. This thesis has already noted that phenomenological inconsistency occurs when ‘not being on the same page as other people in terms of perceptual and social experiences’. Deaf people will never experience species-typical hearing – unless there is an actual cure - so it is plausible to say there are going to be forms of phenomenological disadvantages in areas where species-typical hearing is taken for granted. In other words, it is natural that a deaf person in all likelihood will not be able to socialise naturally, let alone fully acquire a spoken language, when they do not have species-typical hearing and are placed in an environment where talking and hearing is a required means to socialise with other hearing people. As a result, if this hearing loss is left unmitigated and unsupported, their social experience will likely be alienating and isolating, especially more so if they are not prepared to deal with the alienating experiences, social exclusions, discrimination, and conflicts.

Accordingly, we can then understand that the negative outcome of being deaf is missing the opportunity to fully acquire a natural language and develop a healthy identity. Before we consider how disabling experiences of deafness could arise from misrecognition

and how Deaf culture can rectify this, a clarification of what constitutes a healthy identity is required.

## **2. What is a healthy identity? The importance of recognition**

There is no unequivocal consensus around the meaning of the notion of recognition and it has only started to be subjected to theoretical scrutiny in recent times. For the purposes of this thesis (and due to the limited space), Heikki Ikäheimo's version of 'recognition' building on Axel Honneth's notions will be used as the scaffolding concept. Ikäheimo (2009, 2010) follows the line of thinking that we ought to consider healthy identity formation as a result of recognition. What makes a person a *fully-fledged* person is that they experience, receive and reciprocate recognitive attitudes. Since what makes a person a person is reliant on recognitive attitudes and attributes shared and reciprocated by other persons, personhood – what constitutes a person ontologically speaking - in this sense is essentially what Ikäheimo labels *interpersonal personhood*.

## **3. Recognitive Attitudes**

This section will briefly examine what Ikäheimo means by recognitive attitudes. Recognitive attitudes can be considered to be *components* of recognition that fuel the interdependent formation of personhood; that is, subjects *become* persons as well as *seen/taken* as persons through recognitive attitudes (Ikäheimo & Laitinen, 2007). The components of recognition can be considered, following Hegel and Honneth, as *love, respect and esteem*, although Ikäheimo himself suggests *contributive valuing* in place of esteem. These are 'personifying attitudes'.

*Respect* is a morally fundamental attitude experienced in two forms: via institutional norms constituting basic rights, and interpersonal interactions. Within interpersonal interactions, Ikäheimo suggests that to respect someone is to see her as having authority over oneself. The significance of this claim can be made visible if we contrast how we distinguish persons from animals. We do not consider animals as having authority over themselves, that is, we do not see them as embodying reason/norm-making capacities except that they follow their innate instincts and impulses. Persons, on the other hand, have the capacity to generate norms and values for themselves and others. When there is mutual respect, it becomes what Ikäheimo calls ‘co-authority’. He further argues that co-authority is fundamental for a moral ‘we’, a society that can establish norms and morals that can promote interpersonal conditions, that is, a space that promotes seeing others and being perceived as persons having authority over themselves. *Love* extends on the interpersonal conditions of respect inasmuch as one views and intrinsically cares for another person’s wellbeing and happiness for her own sake. Again, Ikäheimo suggests that this is also a crucial component for solidifying the interpersonal community spirit; we obtain a greater sense of ourselves as persons and our values through the experience of mutual love knowing that one is being valued more amongst others and vice versa. The third recognitive attitude for Ikäheimo is *contributive valuing*. He argues it ought not to be confused with love or instrumental valuing; what sets contributive valuing apart from these two is that of feeling *gratitude*. One would feel gratitude towards a person if her contribution is considered to be positive and her status as a contributor is valued. Conversely, for example, a master would not feel gratitude for his slave inasmuch as the slave’s contribution is only valued instrumentally and the slave lacks a respected status as both a contributor and person.

Ikäheimo argues that these recognitive attitudes have person-making significances, that is, they constitute the psychological makeup of persons. In other words, these practical attitudes build and reaffirm the core psychological capacities that constitute a fully-fledged

person. Emphasis is also placed on immersing infants and children in a space that practises recognition for they *embody* a sense of what it means to respect, love, be grateful, to be seen as a person and see others as persons. It is not an ability that is innate but, rather, emergent properties that fluctuate dynamically accordingly to the kind of recognitive attitudes, whether nourishing or damaging, received and reciprocated over time. It is straightforward that it is ideal for a person to receive respect and love as opposed to the lack of it. Moreover, it is clear that recognition is centrally psychological. For instance, Ikäheimo mentions the phenomenon of psychopathy in which psychopaths appear to embody inhumane traits inasmuch as they lack the ability to be moved by claims made by others and cannot view others as persons; it can be argued, then, that they are incapable of giving and receiving recognitive attitudes (Ikäheimo, 2010: p.354).

Ikäheimo extracts two conclusions from these implications: recognition is both an ethical and ontological concept (Ikäheimo, pp.353-354). This is a notion that finds overlapping middle ground between Kantian morality and Hegelian social ontology. The Hegelian aspect of recognition is that the process of recognition psychologically shapes the person and is in essence ‘constitutive’ of the will of persons; the dynamicity of social interaction and recognitive attitudes has significant bearing on shaping intentionalities of persons. It is within this interpersonal phenomenon that people obtain personhood and status. The ethical significance arising from this ontological conclusion is that positive recognitive attitudes are *good* for persons; they are a psychological necessity and are ethically central in the lives of persons to be seen as persons. We would, arguably, intuitively feel pity for those unable to feel moved by the recognitive needs of others, such as the psychopath. Moreover, as Ikäheimo contends, it would even be more disturbing if a fully-fledged person were capable of expressing recognitive attitudes towards certain people but consciously engage in dehumanising attitudes and practices with others, as was the case with the consciously immoral Nazi concentration camp guard for example. As the claims suggest, the moral

coercion in the idea of recognition lies within this simple aphorism: “more recognition makes both the psychic and the social life of persons better” (Ikäheimo, p.355). Anything that threatens and damages the ontological integrity of persons, whether by violence, disrespect and lack of love or respect, for example, is inherently unethical. This is considered ‘misrecognition’. More will be discussed on misrecognition shortly.

#### **4. Two advantages of applying recognition**

It is useful to consider the benefits of using recognition for reconceptualising deafness as a disability as discussed in this thesis. Adopting recognition as the normative foundation has two significant advantages. First is that since the type of personhood asserted is *interpersonal*, emphasis is then placed on *interdependency*. Barbara Arneil (2008) argues that considering disability, justice and personhood in terms of interdependency has several advantages. The key change is by understanding the disabling physical/mental condition not merely confined in the individual body, but a result of the dynamicity between the limitations of the body and the physical, social, political environments (Arneil, 2008: p.234). This has several significant implications: it clarifies what ought to be, ontologically speaking, the starting point for understanding disability. The liberal conception of personhood cannot sufficiently account for the nature of disability for it presumes the formation of identity and personhood to be within the bodies and rationality of individuals. By referring to an interpersonal personhood conception, disability then can be understood as a spectrum in which the degrees of autonomy, rationality, and in/dependence vary accordingly to the severity of the physical/mental disability with reference to how the physical, social and political environment are arranged. Simo Vehmas (2008) adheres to this line of thinking; he suggests that the ontology of impairment has two intertwining components: brute (biological) facts and institutional facts. Building on John Searle’s notions of observer-relative and

intrinsic features, he argues that disability studies and activists (Lane and Ladd for example) have persistently overlooked biological facts and ontologically reduced disability to the *institutional* level, that is, disability as a *purely* social or environmental phenomenon. This is a problematic move, however, since:

There are cases where people do need the medical model of *impairment*; they need *facts* about the physical consequence of impairment or any other medical conditions they may have... Millions of competing texts, discourses and representations are not much of a comfort for people who are in pain (Vehmas, 2008: p.95).

The notion of interdependency acknowledges this fact and allows for both social and biological phenomena as essential factors in understanding the disabling nature of impairment. It was an important political act for the disability movements to emphasise the social nature of disability to pierce through the epistemic arrogance of medical and scientific institutions and inspire progressive changes for the betterment of people with disabilities, but it does not succeed as a final answer and is something that requires ameliorating. It is the case that people with disabilities must learn to come to terms with their own bodily idiosyncrasies, if not impairments, within certain social and environmental arrangements. To use a simplified example, it is expected that a deaf person looks both ways (rather than just listening for approaching cars) before crossing the road. Insisting that disability is purely a social product will not stop a car from hitting the deaf person.

More importantly, the process of interdependency is vital for people from all walks of life, not just the disabled. Ultimately, dependence within a web of interpersonal support (both social and environmental) is a necessary condition for achieving independence. Even then, the taken for granted notion of autonomy and independence for the non-disabled is in itself somewhat of a misnomer; Simo Vehmas argues that independency is only possible if certain social arrangements are in place. It is easy to consider themselves as independent and “forget their own dependence on services, such as the provision of the water that comes out of the tap- an obvious obstacle to their independence” (excerpt cited within Arneil, p.236). Although



the point Vehmas makes may seem irrelevant to recognitive attitudes, it could be argued that provision of resources and utilities is driven by recognitive attitudes inasmuch as the deprivation or inadequate provision of resources or social arrangements is a form of disrespect. Ultimately, in all forms, both resources and social behaviour, we are reliant on others for achieving independence. The notion of interdependency as necessary for everyone leads to the second advantage: considering recognition as vital for *the telos of personhood*.

Building on the conception of *personhood as telos*, Ikäheimo argues that interpersonal recognition constitutes this very personhood and it can be plausibly argued that persons have a predisposition to value and strive for more recognition: “As partakers in interaction we feel the necessity of recognition as a burning need whenever adequate recognition is clearly denied of us or of ones we deeply care about” (Ikäheimo, p.358). Although we experience recognition and misrecognition in various degrees, intuitively we all seem to respond to severe misrecognition and social exclusion in similar manners, that is, to *demand* for recognition, or as Honneth famously puts it, *struggle* for recognition. Moreover, we tend to morally gauge cultures, communities, and such in terms of recognitive attitudes and whether individuals are treated as persons or not. It appears to have universal credit that accounts for the general moral force that is embedded in the intuitions of people from all walks of life. Since that recognition likely serves a teleological function for a fully-fledge personhood, it does so for people with disabilities as well.

## **5. Misrecognition as tragedy**

If it is the case that recognition plays a vital part in the formation of identities, it would be reasonable to consider the failure to achieve a healthy identity formation as a *tragedy*. This is contrary to the general conception of disability as tragic in itself (Arneil, 2008). The distinction between ‘misrecognition as tragic’ and ‘having a disability is tragic’ is an

important one to make. The reason for this is that the act of considering a person's disability as tragic can be harmful to the self-worth of that person. This projection of disability as tragic may coerce the disabled person to adopt a negative self-image, cutting their own self-worth short, to consider their lives as ultimately tragic simply because they are disabled.

Because disability as a whole is viewed mostly as a tragedy, ultimately *all* forms of disability are viewed in a tragic light (Arneil, 2008). Tragedy is an image often projected onto the whole spectrum of disabilities, *even* if the disability, like deafness, is a physical one. Their psychological capacity is just the same as the non-disabled in that their trajectory for a fully-fledged identity is not too different (Ikäheimo, 2009). Although this statement does *prima facie* imply that having a mental disability (rather than a physical one) is tragic, this is not the case. The point is if the physically disabled do not achieve identity formation or suffer misrecognition, this is a tragedy in the sense that their identity *per se* has been disabled or unfulfilled; it is not a tragedy if a deaf person cannot hear and speak, but it is a tragedy if she lacks a healthy identity.

A distinction is to be made here identifying two kinds of misrecognition people with disabilities can experience: the first is when they do not receive appropriate support required for identity formation, and the second when their ongoing identity is compromised via 'misrecognitive' attitudes and conflicts. I will now explain how this occurs. For the purposes of this thesis - considering how broad the disability spectrum is, and that the issue of people with mental disabilities and recognition is morally far more complex since their psychological capacities differ (Ikäheimo, 2009: p.88) - only deafness as a physical disability will be covered. In other words considering the disabling nature of deafness as misrecognition will be extending on the physical nature of the hearing loss itself. This is with the intention to emphasise the multi-faceted nature of disability, comprised of the disability itself, hearing loss, to the social and embodied qualities implicating from such hearing loss which can be

understood through the process of recognition. Because deafness as a disability is multifaceted, it is understandable why it has been such an elusive concept to grasp for many people over time.

## **6. What is needed for deaf people to have recognition?**

Despite both having the same psychological capacities, there is one significant difference between non-disabled people and deaf people. Following the two advantages of applying recognition theory, that is, personhood as telos and disability as a combined result of individual impairment/s within social/environment arrangements, we can infer that there is one extra necessary condition for both the *formation* and *maintenance* of identity for deaf people:

- The deaf person must ‘come to terms’ with her hearing loss according to social/environmental arrangements.

It is only after satisfying the necessary extra condition can recognitive attitudes be sufficiently experienced. If the condition is not satisfied, it is the case that the deaf person will struggle to experience and understand recognitive attitudes, let alone demand them.

This necessary condition can be extracted via a fortiori reasoning from the social nature of recognition. It is logically the case that one must be able to *authentically* experience recognition for it to have any effect, that is, one must regularly experience authentic recognitive attitudes and develop a sense of when recognitive attitudes are authentic or not (i.e., sarcastic and dishonest remarks are not authentic). This involves understanding recognitive attitudes on various levels:

The relations-to-world of a person – from prelinguistic coping and vague background understandings to clear and distinct beliefs – are that person’s ‘takes’, ‘views’, ‘understandings’, ‘stances’, ‘intentions’ or ‘attitudes’ towards the world (Ikäheimo & Laitinen, 2007).

The deaf person is able to experience significant portions of this only if she comes to terms with her hearing loss; in other words, recognition can be experienced and embodied if and only if the hearing loss itself does not have any negative bearings on the dynamics of interpersonal interactions. There are two necessary ways of ‘coming to terms’ with hearing loss so that the hearing loss itself does not have negative outcomes: firstly, the deaf person learns *how* to be a deaf person in an audiocentric world, and secondly, she has the opportunity to socialise and learn in essential spaces of reason that has *phenomenological consistency*.

The importance of ‘coming to terms’ with hearing loss can be easily understood with a thought experiment. Imagine that a non-disabled young adult, Jenny, has suddenly become deaf. Understandably her body self-conception has been wildly thrown off because she only knows her life as a hearing person. As a result, she struggles to navigate the world comfortably and becomes highly conscious of many things she had previously taken for granted: simple things such as crossing the road, or complex things like every day social interaction, communication, incidental knowledge (i.e., picking up information and ideas by ear), audio awareness, and the importance of positive self-images. She will likely view this huge bodily change as a tragedy in itself and experience despair. She will feel withdrawn and struggle to integrate in everyday life. It is likely at this point that she has not met a deaf person before or is unaware of Deaf culture, so she cannot obtain any sources of resiliency and optimism; her self-image is rooted in negativity and self-deprecation. The effect of this negative self-image is that she will not assert herself to have authority and believes herself to have limited potential. However, this will likely change for the better if she has deaf people to guide her on how to explore the world despite hearing loss, to set examples that deafness is not ‘the end of the world’, to learn how to bypass social and environmental obstacles that arise from hearing loss and to reinforce the message that it is still very possible to live a full life as a self-realised agent.

We can make better sense of this by referring to Honneth's (1995) explanation of self-trust as one of the fundamental embodied qualities that paves the way for embodying other recognitive attitudes like respect and gratitude. Self-trust, that is, confidence in oneself and the ability to be alone comfortably as a result of love, also requires bodily confidence. As soon as this bodily confidence is compromised, it is plausible to argue that then the person's psychological integrity is also compromised. Donna Reeve's explanation of psycho-emotional disablism is one way of understanding the nature of compromised psychological integrity. She argues that while structural disability arises from social and environmental arrangements (i.e., wheelchair users and lack of ramps), psycho-emotional disablism "affects *being*" (Reeve, 2012: p.229). This being can be affected by lacking bodily confidence, rights, and solidarity, often as a result of abuse, disrespect, and stigmatisation to name a few. Thus, we can establish a correlation between bodily self-trust and learning how to be a deaf person in an audiocentric world: a deaf person cannot assert herself as an autonomous agent if she continuously doubts herself and what occurs around her. To draw a parallel, this is not dissimilar to the dangers of hard scepticism.

The second condition for coming to terms with deafness is having spaces of reason that are phenomenological consistent. There will be inevitable situations and areas where a deaf person will struggle to understand, considering how audiocentric the world is. There are certain spaces of reason, however, where it is absolutely vital that they are phenomenological consistent with the deaf person, that is, it is a kind of space where behaviour and interactions can be clearly understood. Essential space of reasons can be considered in terms of Hegelian spheres vital for identity formation – the family, school, particular areas of socialisation, important institutions such as government, legal and medical institutions, and so on. For deaf people to experience social inclusion as a *person*, it is vital for there to be phenomenological consistency. Consider the empirical example, of a Norwegian pilot study presented by Kermit (2010). Two Norwegian deaf boys, Peter and John, participated in an ethnographic

observation in which the main purpose was to gauge communication patterns occurring between peers of their own age (7-10 years) as well as adults in their schools. Both have been raised bilingual and have unilateral cochlear implants (one ear). Peter's dominant language is Norwegian sign language and John's spoken Norwegian. Peter was considered to have moderately benefited from his CI and attended a deaf school full time. John was considered to have maximally benefited from his CI, *appeared* to understand the observation team clearly, and was able to speak fluently with 'a normal prosody'; he mainstreamed in a local hearing school. What was observed was *prima facie* telling. Peter was seen to have interacted normally and typically with his peers and adults like a hearing person with other hearing peers. John on the other hand, despite maximally benefiting from his CI, under the illusion of inclusion, interacted *less*; Kermit comments:

The dialogue analysis confirmed that John said something nearly as often as his peers did, but apart from this, the dialogues were characterized by a very limited use of pragmatic and semantic functions. Almost half the initiatives taken in the two dialogues received no response at all. When the children managed to grab hold of a theme they would mostly let go of it after only a few exchanges. This pattern resulted in many inconsistencies and did not allow the dialogue partners to explore and develop a theme together...It was evident that John did not always make out what was said (especially when there was a lot of background noise), and consequently he failed to respond adequately to roughly one-third of the initiatives taken by his peers. John's dialogue partners on the other hand, failed to respond to all but one of John's initiatives. This was surprising because John's dialogue partners had normal hearing. Even though John contributed to the dialogues, and took the initiatives several times, his contributions were not recognized or reflected in the pattern of the dialogue. Our assessment was thus that the dialogues were asymmetrical and that John was not given the opportunity to contribute to the conversation on an equal level...Further analysis of the dialogues revealed something that might explain this discrepancy between our initial impressions as observers and subsequent investigation. John used different techniques to hide his lack of comprehension from his dialogue partners and he concealed his lack of peer interaction from the adults around him. When interacting with adults, John did demonstrate pragmatic skills and dialogue competence. When interacting with hearing peers, however, John seemed unable to exercise these skills he possessed (Kermit, p.99).

Although there are only a few studies touching upon this issue, we have *prima facie* empirical reasons to recognise that John, despite his CI, did not fully engage with his peers in the phenomenological sense and that this had implications on the dynamics of natural social

interaction. What is of utmost importance for deaf children is that they are able to communicate symmetrically or have regular opportunities to do so. With phenomenological inconsistencies, such as having a deaf person in a hearing school with hearing peers, this symmetry cannot happen naturally. Consider the implications if a deaf child grows up in a family that communicates asymmetrically; the deaf child would struggle to develop a healthy sense of self-love and respect. Donna Jo Napoli, a renowned linguist, and Theresa Handley comment that hearing parents do not necessarily need to be completely fluent in sign language to communicate with their deaf child as long as they are communicating symmetrically and clearly: “Deaf children who sign with their hearing mothers exhibit early language expressiveness similar to hearing children of the same age despite variability in the mothers’ signing abilities” (Mellon et al, 2015: p.174). There is no doubt that the deaf child will experience communication breakdowns and asymmetrical interaction in everyday life but what matters is they have a strong language, communication abilities and identity foundation in order to persevere despite hearing loss and the disadvantages that comes with it. This can only happen by coming to terms with one’s hearing loss, learning how to be a deaf person and having phenomenologically consistency in Hegelian space of reasons (a safe base so to speak).

It becomes clear why coming to terms with one’s disability is important if one is to undergo healthy identity formation. If the person is unable to come to terms with her deafness, the deafness per se becomes disabling since the process of identity formation is corrupted; this can be considered a form of misrecognition.

## **7. The disabling nature of deafness as misrecognition**

After clarifying what deaf people need to obtain recognition, we can now revisit the initial claims made previously that there are two ways disabled people can experience

misrecognition: the first when they do not receive appropriate support required for identity formation, and the second when their ongoing identity is compromised via 'misrecognitive' attitudes and conflicts. Adjusting these claims for hearing loss as a disability, the two ways misrecognition can arise for deaf people that inhibits healthy identity formation are:

1. Not coming to terms with one's deafness.
2. Misrecognitive attitudes.

The first way occurs when the deaf person lacks the ability to explore the world as a deaf person, and lacks phenomenologically consistent safe bases where they can communicate and learn as if deafness were not an issue. These components are fundamental ontological components of a deaf person's identity. If their identity is not fully formed, the struggle for recognition becomes an extra struggle. The second way of being misrecognised can and does occur to all deaf people; this also applies to non-disabled people, that is, they are not seen and treated as *persons*. This can arise from disrespect, institutional and everyday discrimination (i.e., missing basic rights and support), audism values and practices, and social exclusion. Ikäheimo argues that people with disability who are misrecognised often lack proper social inclusion *as persons*. There is ambiguity in the meaning of social *inclusion* and *exclusion* inasmuch as it is possible that people with disabilities have their basic rights and are mingling within social circles or groups but they may still not receive personifying attitudes. If we look at the John example, although it initially appeared as if he was socially included, it may be strongly argued that he was not fully included as a typical person and would not obtain the same level of respect, love and gratitude from other peers. It becomes clear that despite deafness being a disability, the issue lies within the extra vulnerability, which if left unmitigated would lead to lacking proper identity formation. When a deaf person does not have a strong formation of identity, the hearing loss itself becomes incapacitating.



## 8. Deaf culture's role in telos of personhood

A core question remains: why should we care about Deaf culture? Since the disabling nature of deafness is identified likely as misrecognition, we are able to make clearer the worth of Deaf culture. Contrary to Paddy Ladd's sentiment that there cannot be a universal definition of Deaf culture, I will assert that *all* varieties of Deaf culture have one thing in common: If it is the case that recognition is fundamental for the telos of personhood, it then follows that the teleological function of Deaf culture is to support and promote identity formations of deaf *persons* by strengthening their opportunities for recognition. This involves guiding deaf people through an audiocentric world and preparing them for inevitable practices and values of audism.

It is not an arbitrary coincidence that Deaf cultures and sign languages exist all over the world. It is quite plausible that Deaf culture does not exist merely for the sake of existing, but to ensure that deafness in itself is not an obstacle for the goal of identity formation. The community on Martha's Vineyard did not have Deaf culture, per Levy's comment, because it was not needed. Deaf people on the island were able to socialise and interact with many others due to the fact that large portions of the population were signers; in this sense, there were no phenomenological inconsistencies. Deafness in the end was not a concern and that the identity formations of deaf people were generally fulfilled. However, in places where there are phenomenological inconsistencies, Deaf culture emerges through deaf social networks and institutions where they serve to guide and support deaf people and provide safe bases for social interaction and learning where deafness is not a problem. Moreover, it is not only the signing deaf but all people with different hearing losses, whether mild or profound, who can benefit from Deaf culture. I reiterate that the one necessary condition to experience recognition is to come to terms with one's deafness. Deaf culture helps in this respect in several important ways:

- Language development and usage
- Welfare and support organisations
- Guidance on being deaf in a hearing world

These three ways ensure that deaf people obtain a healthy identity formation and are strengthened from ongoing social and phenomenological conflicts. Language development is a straightforward one; sign language is a language that can be understood by anyone, whether they are deaf or hearing. This paves the way for developing the ability to comprehend recognitive attitudes. Welfare and support organisations are there to continuously advocate for basic needs and rights against common discrimination experienced in everyday life. Deaf communities, organisations (e.g., World Federation of the Deaf) and other deaf social movements are fuelled by the general struggle for recognition and strive to support the process of identity formations for deaf people from all countries, both developing and developed (see Garcez & Maia, 2009 for an example of deaf people's struggle for recognition through the use of the internet).

The third way is fundamental: guidance on being a deaf person. One of the most commonly misunderstood facets of Deaf culture is the notion of deaf people expressing pride in their hearing loss and interpreting it as a gain. For the non-disabled, it seems to be counterintuitive to be proud of a disability but there is a strong reason for the said pride. Deaf pride can be interpreted as a form of positive self-image. In this sense, pride has a Kierkegaardian function inasmuch as the negative despairing effects of hearing loss are mitigated: a 'leap of faith' despite hearing loss that could otherwise be a source of despair. Pride and positive self-images are mostly constituted through deaf role models. For deaf people, particularly deaf children, they are sources of inspiration, visual awareness, and sign language. Seeing a deaf person succeed academically at university will instil the belief that such an achievement is possible. Otherwise absence of such role models would prove difficult

for deaf people to assert themselves as authentic autonomous agent with a healthy identity. Through established deaf social networks, deaf people are more likely to practise and experience organic social interactions and have higher chances of experiencing recognitive attitudes and be seen as persons. Moreover, if everyday life becomes daunting, particularly with the inevitable experience of discrimination and conflicts typically instigated by people unaware of deafness and disability, there will be deaf social networks to act as a source of solidarity, advocacy, and support where deaf people are able to secure a healthy sense of self comprised of resiliency, faith, and pride. There have been arguments in different disciplines that also emphasise the importance of Deaf culture. Peter Hauser et al (2010) have argued that Deaf culture and individuals are sources of ‘cultural capital’, a source of conceptual tools, guidance in an audiocentric world, and resistance against audist values:

The need for resistant and navigational capital is not limited to deaf signers but is also relevant to oral individuals, hard of hearing individuals, and individuals who use cochlear implants, as they all are subject to stereotyping and audism (Hauser et al, 2010: p.490)

It is also the case that all deaf individuals will not receive the same amount of ‘capital’ from hearing cultures’ world like everyone else due to phenomenological inconsistencies (they cannot ‘pick up’ as much as hearing people do); Deaf culture helps compensate for this inevitable disadvantage. Until phenomenological inconsistencies are non-existent – as will hypothetically occur if a cure for hearing loss is achieved – the importance of Deaf culture for the promotion of healthy identity formations will remain.

## **Conclusion**

This thesis aimed to understand the nature of deafness as a disability, and discern the importance of Deaf culture and sign language despite the proliferation of cochlear implants and the possibility of a future cure. The conclusion reached is that what takes precedence in the lives of deaf children is that they have the opportunity to experience healthy identity formation. Humans have a general need for recognition which underpins the fundamental process of identity formation. When humans are deprived of recognition and recognitive attitudes, misrecognition arises. Misrecognition typically results from disrespectful actions and attitudes that denigrate the worth and status of people, to treat people as non-persons. The experience of being misrecognised has great implications for the psychological integrity of all individuals to the extent that they often develop psychological issues and experience declines in self-worth. With this in mind, the disabling nature of deafness is not merely the hearing loss itself but also a result of misrecognition.

Historically and presently, because deafness as a disability has not been understood, deaf people's quest to embody healthy identities has often been exceedingly difficult. The direct consequence of misunderstanding deafness is that it is not clear what is needed for deaf people to flourish. Deaf people have been subjected to treatments from a hearing point of view, often aiming to restore deaf people's ability to hear and speak, so that they can 'pass as hearing persons'. These treatments are frequently incompatible with the phenomenological experiences of deafness, however. It is also not the case that all deaf people will succeed in hearing and speaking; quite often they will face inescapable struggles in a hearing social environment. Because the phenomenological experiences of deafness are inevitably incompatible with an audiocentric environment, it leaves deaf people highly vulnerable to misrecognition. This thesis has argued that deaf people can experience misrecognition in two ways in which they will struggle to experience healthy identity formations: firstly, when they

do not come to terms with their deafness, this will pose an ongoing problem for their bodily confidence and self-trust, and secondly when they experience misrecognitive attitudes and discrimination from others. Because audiocentric treatments and attitudes misrecognise the experiences of deafness, they are *oppressive* to deaf people and deaf communities. The 1880 Milan Congress was possibly the most oppressive event in the history of deafness where deaf people were consigned to experience the world of hearing and speaking as their only option, restricting their ability to acquire language, to read and write, to communicate and to embody a healthy sense of identity. Compare a deaf child with an unhealthy sense of identity and poor language and communication abilities to a deaf child with a strong sense of identity and who is fluent in both sign and spoken languages. Although both have a hearing loss, a physical disability, we would still consider the former deaf child to be even more *disabled* than the latter.

With this laid out, the importance of Deaf culture and sign language emerges. For a deaf person to be felt and seen as a person, she must come to terms with her deafness - which involves overcoming phenomenological inconsistencies - as well as regularly experiencing recognitive attitudes and safe bases where deafness does not pose a problem for necessary experiences of recognitive attitudes. In this sense, Deaf culture and sign language can offer stronger opportunities for the deaf child to achieve an initial sense of being a person, even if in the future the deaf person may prefer to speak and decide not to sign again.

To conclude, what could be done to secure better opportunities for deaf persons? There are several options to consider. The first is to rectify the medical model of deafness and to incorporate Deaf culture and sign language into the medical model of deafness so that they form a part of the medical solution for deafness. As I have argued, it is evident that Deaf culture and sign language have significant psychological benefits. All research regarding the long term success of cochlear implants and its rehabilitation processes, as Patrick Kermit has

argued (Kermit, 2012), need to begin measuring success in terms beyond the ability to hear and speak and to focus more on a deeper level of language usage and comprehension since such skills are the core of social interactions. Cochlear implant advocates ought to embrace the moderate scepticism displayed by deaf communities if they are to promote the wellbeing of deaf people with cochlear implants. An effective way of going about this would be to incorporate numerous deaf people and role models into hearing and speech sciences institutions and deaf education. This value pluralism will mean better policy planning, better education for the deaf, and assessment of health technologies that generally affect deaf people (Wilt et al, 2000). This is particularly the case since deaf people are more intimately familiar with the embodied experiences of deafness and are likely to know what is required to minimise the disabling nature of deafness. Moreover, sign language, deaf education and Deaf culture would benefit from institutionalisation where services can be easily accessed and provided without monetary concerns. For example, hearing parents of deaf children would greatly benefit from having support and advice from deaf communities, including free or cost friendly sign language courses so they are able to communicate and relate to their children. Hearing parents would also benefit from guidance on bridging cultures so that the deaf child is able to experience the deaf community and navigate the hearing world soundly, to promote regular exposures to deaf role models and learn how to interact with hearing people (see Burke et al, 2011) and provide guidance on what is needed for the deaf child to obtain an adequate education; this will invariably require that parents also receive moral support, since raising a deaf child in a hearing world can be overwhelming. It is also important that deaf people have spaces where they are able to share and voice their concerns on their experiences as a deaf person, such as when advocacy is needed to highlight and quell discriminative conditions. Although deafness as a disability will invariably have its disadvantages as is the case in phenomenologically inconsistent spaces, by focusing on the importance of identity formation and recognitive attitudes within phenomenological consistent social interactions, it

is likely that deaf people will then flourish with minimal disabling experiences and stronger psychological integrity.

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