

CHAPTER THREE

Who Decides?

Language Education Policies for Deaf Children - Selected Findings from a Comparative Analysis of Finnish and Irish Policies on Signed Languages

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1. Introduction

This chapter offers a comparative analysis of language education policies (LEP) for Deaf children in Finland and Ireland, derived from my doctoral research (Conama 2010). In order to discuss the topic we touch on six main components. These six components are selected on the basis of literature review and are regarded as common issues when discussing educational provision for Deaf children. These are: philosophical perspectives, early intervention, educational placement, nature of teacher training courses, fluency of teachers in signed languages and the scope of Deaf communities' involvement in the educational process. We may note that these are not ranked in order of importance here. For this chapter we focus only on the analysis of philosophical perspectives and early intervention.

Before addressing these components, it is necessary to discuss the concept of language education policy in general. Following from this, in Section three a general commentary on language education policies for Deaf children is presented. More specific commentaries are also outlined with respect to both Finland and Ireland. The purpose of this section is to give background information before each component is discussed in depth. Selected interview excerpts are used to illustrate key points². It is noticeable from the analysis that differing perspectives on signed languages have largely influenced or shaped language education policies for Deaf children. These are highlighted in the discussion that follows.

2. Differing Perspectives on Signed Languages

The general perspectives on deafness promoted across a range of spheres have had a negative impact on the status of signed languages. On a global scale, signed languages have been persecuted and misunderstood. They have often been viewed as concrete and not abstract; they have been seen as incapable of enabling reasoning or intellectual stimulation. Moreover, the status of signed languages has been downgraded by the mistaken belief that there is a universal signed language, which can be understood by Deaf people everywhere. Given this, signed languages are consequently believed to be derived from spoken languages. Woll (2001) describes how the rise of linguistics as an academic discipline in the nineteenth century contributed to the belief that signed languages were derived from spoken languages. As a consequence, signed languages were not subjected to academic scrutiny and this belief lingered for many decades.

Barden (1994) mentions that, in historical terms, the philosophy of languages equated language with speech. Thus, the assumption that spoken language was necessary for the communication of ideas promoted negative attitudes towards signed languages.

Until the 1960's, (and in the case of Ireland, the 1980's,) signed languages were treated as inferior to spoken languages (Griffey 1967 (cited in Conama 2002), St. Joseph's 1957, O'Dowd 1955). This situation was challenged by the seminal findings of William Stokoe for American Sign Language (ASL)³ and Bernard Tervoort for Sign Language of the Netherlands (NGT). Both researchers worked without knowledge of each other and both reached the same conclusion: signed languages are real languages in their own right.

The developments in the USA did not escape the attention of Griffey in Ireland. She was the chief proponent of oralism to this country. Conama (2002) writes:

Griffey (1967) showed that she had intimate knowledge of the significant breakthrough by American and Dutch linguists in the early 1960s regarding the status of indigenous sign[ed] language[s]. However she dismisses the breakthrough as insignificant: 'I have discussed this matter with linguists and they have assured me that there is evidence of modified linguistic structure in the sign system we use'. (Griffey 1967: 93)

This statement was made at a conference in Manchester University in 1966. It is not known if there were other Irish delegates attending the conference, but it is certain that Irish delegates would have taken notice of this statement given the stagnant nature of signed languages in Ireland (Conama 2002: 51).

Another related belief was that signed language was some kind of compensatory tool for the loss of hearing and demonstrated lack of capacity for speech. For instance, a report published in 1972 by an advisory committee reporting to the Department of Education recommended that if a Deaf child failed to avail of oral education, s/he was to be transferred to the class where signed language was the medium of instruction (Department of Education 1972).

After further investigation, signed languages as languages were recognised in their own right. This change in status led to tension in the power relations between Deaf and hearing people. Data from the 1960's and 1970's (especially American data) show that when the status of signed languages increased, there were commensurate moves to increase the status of signed variants of spoken languages (e.g. signed English) in a bid to stem the rising status of signed languages (Padden 2005, Kannapell 1993, Ladd 2003).

For those who are unfamiliar with codified signed variants of spoken languages, we may note that there are considerable differences between indigenous signed languages and such codes. The indigenous signed languages have their own grammatical structures; therefore, they can be used independently. This fact was confirmed by the well-known linguist, Noam Chomsky, in his presentation in University College Dublin in 2006. He said: "The structural properties of sign[ed] and spoken language appear to be remarkably similar" (Chomsky 2006)⁴. The prominent Israeli linguist, Spolsky reiterated this in Dublin Castle in the same year (Spolsky 2006)⁵.

Those who hold the view that signed languages are inferior to spoken languages insist that signed languages do not have grammatical structure. They argue that the signed languages acquire grammatical rules borrowed from spoken languages to make sense

of signing. The belief can be traced back to Abbe de l'Epee who founded the first public school for the deaf in Paris in 1760. His response was to impose French grammar rules on the existing signed language (Lane 1984). The Dominican nuns decided to visit the school in Caen, France to gain knowledge of how to teach deaf children and they imported the knowledge to Ireland. Misunderstandings as to the nature of signed languages persist to this day in many quarters (Leeson 2001, Conama and McDonnell 2001, Le Masters 2006).

Thus, in the 1960s and 1970s, professionals began to demand the use of signed English. It has been argued that other developed signed systems, such as Signing Exact English (SEE) and Cued Speech⁶ had tacitly acknowledged the status of signed languages. However, they saw it as a mediating tool, with the primary aim being to acquire spoken languages. Interestingly, the oralist movement opposed the rise of the signed system but for some commentators, the opposition was pointless. Glickman (1984 (quoted in Kannapell 1993: 167)) claimed that the rise of signed systems, after the status of signed languages was secured, was an attempt to stifle the power shift from hearing authorities to the Deaf communities. He comments:

Despite the bitter opposition between these two schools of thought, the interesting question is not how oralism and Total Communication differ, but how they are the same. Beyond the question of whether or not deaf children should be allowed to sign, the two approaches share a fear of exposing deaf children to the Deaf community and Deaf cultural values. ...Both approaches share the belief that the most successful product of deaf education is the person most able to integrate fully into the hearing world. (Glickman 1984 (quoted in Kannapell 1993: 167))

The rise of signed codes based on spoken language structures led to widespread confusion over the status of signed languages (for example, see Schick 2003: 225-226). This is also evident in Ireland where a former Taoiseach (Prime Minister), Bertie Ahern TD stated:

While I know Irish Sign Language is a vital part of communication and is used by probably a larger number than we imagine, I am not sure a constitutional provision would need to be made for it.... If I remember rightly from a visit to the Irish Deaf Society, several different forms of sign language are used.⁷

The former Taoiseach is by no means alone in his understanding; the then Minister for Education, Noel Dempsey TD said ".....ISL, has formal recognition in the Education Act 1998". In this Act, ISL is referred to as one of the support services section, which tacitly regards it as equivalent to speech therapy and assistive technology. The then Minister for Justice, Law Reform and Equality Michael McDowell TD said "Two forms of sign languages are commonly in use in this country"⁸.

There is another related matter regarding the terminology of using signed language. Indigenous signed languages are often described as 'the sign language' instead of Irish Sign Language (ISL), British Sign Language (BSL) or American Sign Language (ASL) (for example, see World Federation of the Deaf (WFD), British Deaf Association (BDA) and Irish Deaf Society (IDS)). The widespread belief that there is only one signed language in the world assumes that language is non-aligned to the lived experiences of its users and is non-cultural. Many linguists insist that behind every language is a related unique culture and indigenous signed languages are no exception. The use of

the phrase 'Sign Language' in the singular is therefore, a dangerous practice.

It is clear that in historical terms, signed languages were treated in two distinct ways. Those who negated the status of signed languages and wanted to banish them demonstrated the hallmarks of the medical model's thinking. Those who saw signed languages as a compensatory tool in recognition of the impairment in persons (deafness) demonstrate thinking more closely aligned with the social model on deafness. The implications of these views can be illustrated in the way families of Deaf children are treated professionally.

3. Language Education Policy (LEP)

Language education policy (LEP)⁹ refers to a process whereby language practices in education are implemented and practiced. LEP is regarded as a subtext of language policy but commentators hold the school as one of the most important domains for language policy. LEP holds a very significant role in reproducing ideologies about language development in society (Corson 1993, Spolsky 2004, Shohamy 2006, Paulston and Heideman 2006). It cannot be studied in isolation, however; it must be contextualised in a wider framework because it is heavily and mutually influenced by cultural, political and economic considerations (Corson 1993, Shohamy 2006, Paulston and Heideman 2006).

Corson (1993), using the example of Bourdieu's concept of cultural capital, states that LEP is often used to legitimise a particular language over other languages and powerful groups in society often decide the choice of language. The choice is often based on vested interests to protect their status. He refers to Apple's list of major functions that schools have in society (Corson 1993: 5): they select and certify a workforce; they maintain privilege by taking the form and content of the dominant culture over other cultures and they define dominant culture as legitimate knowledge to be passed on. In this regard, Corson (1993) claims that language is a key vehicle in the realisation of social goals.

Corson (1993) also applies Gramsci's concept of hegemonic practices. He holds that language policy in education is a key in the schooling process and is regarded as one of the non-coercive forms of domination by powerful groups in society. Through education, some discourses and values can be favoured over others by dominant groups. This therefore, creates discrimination and injustice. However, it often does not appear as an injustice as schools are publicly defined as neutral and universalistic in their practices (Bourdieu and Passeron 1977).

To put this in practical terms, Shohamy (2006) claims that LEP can be regarded as a de facto process of implementing ideological views or political/legal statements about language(s) into practice. She also states that language practices can be regarded as a form of imposition and manipulation. Common questions relating to LEP are as follows:

- Which language(s) to teach or to be learned?
- When (or at what age) to begin these languages?
- For how long? (Hours per week, number of years?)
- By whom, for whom? (Who is qualified to teach and who is entitled or obligated to learn?)

- Finally, how? (Methodology, materials etc)
(Shohamy 2006: 76)

Such questions appear to be innocuous, yet Shohamy (2006) and Paulston and Heideman (2006) claim that these decisions are often ideologically or politically laden. Educational staff are the key people in implementation and they are often uncritical and tolerant of decisions taken simply because they are often drawn from the same dominant groups in society. Shohamy (2006) warns that LEP should not be dictated on a top-down basis; indeed, there are cases where parents or minority groups have successfully challenged top-down decisions, with policies subsequently taking account of views from minorities and for parents.

Classrooms are viewed as significant sites as they reproduce cultural identity and social inequality (Paulston and Heideman 2006). Language shift¹⁰ is one of the activities of the classroom. Shohamy (2006) reports that educational staff often view children who have unconventional use of language(s) such as the hybrid approach¹¹, as having lower intelligence and lacking in academic skills. Shohamy (2006) also reports that those children from different linguistic backgrounds take more time to acquire the official or national language than those children of dominant groups. Teachers' beliefs about the lower intelligence of hybrid speakers lead to children internalising beliefs that they are lacking in terms of academic skills and that they have lower intelligence. Hence, they unwittingly consolidate their unequal status in society (Shohamy 2006).

However, schools are not necessarily fixed places; they can be remodelled as sites for resistance. Corson (1993) points out that schools have to recognise structural influences on social injustice and can issue carefully drafted language policies to counter such occurrences¹². Such practical measures have to be implemented to ensure effective and fair language education policies. There are several measures that are desirable: school management has to adopt a genuine collaborative style to ensure the participation of staff and community; the board of management should be drawn from various interested stakeholders from the community; parents have to have easy access to the minutes of board meetings and be able to challenge decisions made.

Corson (1993: 160-162) cites examples of Inuit schools in Canada, Navajo schools in the US and more recently, Aboriginal schools in Australia, as evidence of positive inclusion of communities in schools and the formatting of egalitarian policies. Positive discrimination policies are also applied to these schools as the teachers from majority or dominant groups are available only for numerical and literacy teaching. Such policies are shown to have empowered their communities.

In Table 3.1 below, the implications of different perspectives on deafness for language education policy for Deaf children are outlined. It is evident that medical perspectives are most antithetical to a signed language functioning as the first language of education for Deaf children while the Deafhood¹³ perspective is most sympathetic. The social perspective occupies an interim position although it is closer to the Deafhood than the medical model. Language education for Deaf children can be classified along the continuum in different countries. I will now proceed to analyse Finnish and Irish education policy for Deaf children in terms of Shohamy's (2006) list of questions.

4. LEP for the Schools for the Deaf: A General Commentary

This commentary focuses on the language education policy for Deaf children, with a focus on western countries¹⁴. There are several influences that shape language policy, and while this list is not exhaustive, it is important to note that philosophical perspectives play a very significant role.

Much discussion about the education of children of minority language groups assumes children come from groups where language and cultural transmission is generational. However, because more than ninety percent of Deaf children are born to hearing families, language and cultural transmission can be challenging (Marschark et al 2002). Hence, for these Deaf children there are significant barriers impeding the potential for acquiring signed language and the cultural norms of the Deaf community from the Deaf community. Even horizontal learning (from peers) is not always readily available. This brings more emphasis to the process known as ‘early intervention’. This process often aims to identify whether the child is deaf or not and whether appropriate measures can be applied.

Table 3.1: Key questions for Deaf Education (following Shohamy 2006)

DOMAINS OF LANGUAGE EDUCATION FOR DEAF CHILDREN	REPHRASED QUESTIONS	LANGUAGE POLICY PERSPECTIVES		
		Medical perspectives	Social perspectives	Deafhood perspectives
Philosophical perspectives	Philosophical orientation	Favours oralism	Favours transitional bilingualism or Total Communication	Favours maintenance of bilingualism or multilingualism
	What language(s) to teach or be learned?	Mono/lingualism (One national or dominant spoken language)	One national spoken language and signed language as a compensatory tool	Indigenous national signed language and written language (national or dominant language)
Early intervention	Range of information options for parents Parents are likely to be given such information options	Emphasis on aural rehabilitation. Does not see much merit in alternative formats in disseminating public information	Offers range of ‘choices’ but emphasis on spoken language at the expense of signed language under the guise of neutrality	Emphasises signed language as the central plank in the child’s language acquisition
	Language acquisition orientation Parents would be strongly advised to do this	Favours cochlear implantation for increasing the ability to hear, therefore the acquisition process is aural	Ambivalent towards cochlear implantation but stresses it is a personal choice	Antagonism towards cochlear implantation, yet even for those who are implanted, the emphasis is on learning a signed language
	Nature of staff in early intervention	Visiting teachers / medical professional’s consists of a multi-disciplinary team	Multi-disciplinary team including Deaf team but dominated by hearing staff	ISL advocates / teachers controlling intervention scheme

Intervention processes can influence later decisions, for example, deciding on the educational placement of a young deaf child (Young et al. 2006). If parents are initially advised not to encourage signing with their child, they are more likely to send their child to an ordinary school instead of the school for the Deaf. This complicates matters further.

It is beyond argument that language acquisition is crucial for all Deaf children. This necessitates the early identification¹⁵ of deafness in the child. The tasks of identification often falls to medical professionals; therefore, parents are influenced by their recommendations for dealing with the future projection (Young et al. 2002). This influences language policy quite significantly. This influence is compounded by referrals to early intervention schemes. Evidence from many countries asserts that medical professionals often dominate the early intervention process with little or no input from parents and the Deaf community (Mathews 2011, Cornes and Wiltshire 1999).

The movement towards 'inclusive education' or 'mainstreaming' also obscures the issue of language policy for Deaf children. Ordinary schools are dominated by the use of national, dominant or official languages. Such policies leave little room to manoeuvre for a separate language policy for Deaf children. It is widely recognised that mainstreaming Deaf children in ordinary schools often means that the Deaf child is left alone (Londen 2004: 14, Ryan 2006, Mathews 2011), with no access to peer relationships (Deaf children) or signed language. This raises several questions, especially regarding the potential academic, social and cognitive performance of such children. Hence, support services are seen as necessary and such support is designated as falling under the scope of disability policy rather than language education policy.

The emergence of cochlear implantation in recent years has brought the question of language education policy for Deaf children to the fore. Proponents of cochlear implantation tend to opt for oral approaches to education in order to maximise use of residual hearing. Hence parents are advised against using signed language with their children (Ladd 2007). In this context, parents opt for a spoken monolingual education for these Deaf children. It is known that anti-bilingual discourse is being encouraged by those who are involved in paediatric cochlear implantation in Norway (Vonen 2008). Less than fourteen percent of Finnish Deaf implanted children are exposed to signed language (Paivi Raino, personal communication, 2008). However in Sweden, medical professionals are known to encourage parents to learn to sign and to place their Deaf child in bilingual education. This approach acknowledges the limitation of cochlear implantations for many children (Londen 2004:75, Blume 2005).

The most obvious reflection of how language policy can influence parents' decisions regarding their Deaf child's education is what we can call the 'educational location' of the school. I am not referring to geographical terms explicitly, though this also plays a significant role in the decision-making process. I use educational location to refer to whether parents choose to send their child to a local mainstream school or a stand-alone school for Deaf children, and this decision is influenced by education policy for Deaf children in their country. Parents are often persuaded by language policies adopted by a given school and sometimes by geographical factors (distance of travelling to the school, availability of transport, etc).

There is historical evidence that parents were influenced by language policies adopted by the schools for the Deaf in Ireland, for example (see Griffey 1994, Crean 1997)¹⁶. In some cases, the decision is often tactically supported by the state. The state often adopts an apparent neutrality stance in this regard but takes on an active role in promoting mainstream schools ahead of Deaf schools.

Even when parents opt to send their Deaf child to the school for the Deaf, proficiency in signed language depends on what policy is adopted in the selected school. Many schools for the Deaf do not have many teachers who have functional fluency in a signed language, and thus there are challenges to effective delivery of the curriculum (Conroy 2006 describes the Irish case). The scarcity of such fluent teachers tends to hinder the development of bilingual education in the schools for the Deaf, and this is an experience common to several countries (Finland 2006).

Moreover, the majority of Deaf children with no disabilities are educated in the mainstream. The increasing survival rate of premature deaf children with disabilities increases the heterogeneity of Deaf children in one classroom – posing pedagogical

difficulties in the schools in the UK (Turner 2006)¹⁷.

Such issues complicate the discursive framework. Earlier, I pointed out that Deaf children do not form a homogenous group but the focus here is on the application of language policies to the schools for the Deaf. Most Deaf children can be taught through the medium of a signed language without any extra accommodation to take account of disabilities. The inclusion of Deaf children with disabilities demands the need for extra accommodation such as personal assistance and modified communication approaches. For the sake of comprehensibility, it is necessary to rephrase the contents of the LEP framework in order to apply this to the education of Deaf children. The practical questions identified by Shohamy (2006) can be rephrased as seen in the second column of Table 3.1.

Language education policy thus plays a key role in determining Deaf education policy in any given country or territory. Shohamy (2006) claims that five key questions have to be addressed in language education, and clearly the answers impact on education for Deaf children. The first question is: What language is taught in school as the first language? If a signed language is prioritised and other languages are secondary, this influences where children will go to school, what they will learn and how they will learn. The other questions in language education are: When does a child start to study a language, for how long and from whom? The answers to these are predicated on the answer to the first question. Who teaches the child is also strongly influenced by the answer to the first question. If the oral language is prioritised then it is obvious that they will be the medium of instruction; if sign language is prioritised then this becomes the medium and teachers need to be proficient in sign language.

5. LEP in the Finnish Schools for the Deaf: Background Information

Historically, LEP in the Finnish schools for the Deaf was dominated by oralism (Takala 1995, Conama 2002). In 1973, as a result of a review of curricula, it was decided that a signed language could be used as an 'auxiliary' support to oral teaching but there was no instruction as to how to use it in this context (Takala 1995: 11). In another review of the curriculum (in 1980), signed language use was viewed as a supporting method in the acquisition of the mother language (Finnish). However, a breakthrough was made in 1987 when bilingual education was clearly emphasised for the teaching of Deaf children. This review also recognised simultaneous signing as a form of pidgin language (Takala 1995:12).

The Finnish Sign Language (FinSL) curriculum was published in 1990 and there was a distinction made between Deaf and hard of hearing children. As a consequence, language acquisition is different here. For Deaf children, FinSL is regarded as the primary language while it is seen as an option for hard of hearing children (Takala 1995: 13). Interestingly, the distinction and its consequences are primarily influenced by a medicalised view. Takala (1995) also reports that two main organisations, the Finnish Association of the Deaf and the Finnish Federation of the Hard of Hearing adopt different outlooks on this issue. The former advocates the use of FinSL as the primary language while the latter opt for the utilisation of residual hearing. Since the Finnish Federation of the Hard of Hearing has responsibility for the rehabilitation of deaf children up to the age of 16 years, the oral method dominates.

Nevertheless, the national curriculum published in 2004 has a section devoted to signed language users (National Board of Education (NBE) 2004: 33). It makes no distinction regarding hearing level categorisation as was the case in earlier versions of the curriculum. It suggests that FinSL is to be made available to all who wish to avail of it and gives particular attention to those whose primary language is FinSL. It emphasises the bilingual approach of teaching which regards FinSL as the primary language for Deaf children, while written Finnish or Swedish is the complementary language. The aim of bilingual education here is to enforce a strong sense of cultural identity in children and to help them to value their language on an equal footing to the spoken language (NBE 2004: 33). Despite this, Latomaa and Nuolijarvi (2005) report that current education legislation does not oblige schools for the Deaf to provide education in a signed language. Consequentially, the right to use FinSL is still determined on the basis of level of hearing loss (Latomaa and Nuolijarvi 2005: 143). The widely held assumption is that the more deaf you are, the more necessary it is for you to learn a signed language. Those who have residual hearing would thus be exempted from learning signed language. The emergence of cochlear implantation further complicates the language education policy for Deaf children in Finland. This has caused serious concern among the Deaf community in Finland with evidence pointing to the fact that an increasing number of implanted children are discouraged from learning FinSL (Londen 2004: 74).

Finland has sixteen schools for the Deaf and thirteen of these are run by municipalities while the remainder are run by the state. The municipality-run school is known as the community school and it is often attached to ordinary schools. The three state schools operate on a stand-alone basis and cater exclusively for Deaf children (Londen 2004: 83). Latomaa and Nuolijarvi (2005) report that all of these schools (both state schools and municipality-run schools) have a relatively free hand in choosing the language of instruction used along with the national languages (Finnish and Swedish). Deaf children are also subject to compulsory education like their hearing counterparts (Londen 2004: 82). Latomaa and Nuolijarvi (2005) also report that the number of Deaf children using signed language in education is very small and therefore, schools do not form separate and distinctive groups for them. Moreover, most Deaf children are educated along with Finnish-speaking dysphasic¹⁸ pupils, hence causing serious pedagogical problems.

Takala (1995) reports that curriculum delivery through FinSL can be problematic because many teachers' competence in FinSL is limited. However, many of the schools were anxious to improve on this front, with some improvement noted over time Takala (1995: 12). Londen (2004) also reports that the quantity and quality of Finnish Sign Language varies from one school to another. There is a small pool of qualified Deaf teachers who are native users of FinSL and these are obviously very skilled in FinSL. Londen (2004) also reports that negative attitudes exist towards FinSL among professionals who work with Deaf children. To address these issues, the University of Jyväskylä provides teacher-training courses in FinSL (Latomaa and Nuolijarvi 2005, Londen 2004: 83, Keski-Levijoki, Takkinen, and Tapio this volume), which demonstrate an attempt to move away from the mode of 'special education' among teachers of Deaf children (Paula, interview 2006)¹⁹.

The number of Deaf children mainstreamed in ordinary schools²⁰ exceeds the number in the schools for the Deaf (Takala 1995, Latomaa and Nuolijarvi 2005), a result that can be attributed to the early intervention process where a multi-disciplinary team²¹ decides the process for each child. This team tends to favour the mainstreaming option,

which excludes the child from accessing a signed language and related peer²² relationships with other Deaf children (Londen 2004: 75-76).

Based on a review of the literature and statistical information alone, it is difficult to determine the extent of the involvement of the Deaf community in the Finnish education process. However, there is some evidence that involvement exists but that this is confined to peripheral areas such as school management (Londen, 2004, Latomaa and Nuolijarvi 2005). Based on personal communication (Jaana Keski-Levijoki e-mail correspondence, 26/2/08), there are a number of Deaf SL teachers employed in the schools for the Deaf including the vice principal of one school. This informant also confirms that there is no Deaf parent or Deaf community representative sitting on the boards of management of schools for the Deaf. She served on the board herself for a brief period in 1994-5.

Having outlined the background information on the Finnish Deaf education, the following section contains a number of interview excerpts by Finnish respondents, which can be regarded as a complementary but very insightful information.

6. Finnish Perspectives and Philosophies

The philosophy behind language usage in Finland can be identified through its language policies in schools and early intervention schemes. It can reflect 'perspectives' on deafness quite clearly and it can affect the allocation of resources to support language policies in education. When FinSL was constitutionally recognised in 1995, one interviewee explained that this had an impact on attitudes towards signed language in education:

At the same time, there was a strong metaphysical view that the spoken Finnish language was more superior to the Finnish SL. Thus, the constitutional recognition of sign language helped to lessen or reduce this kind of attitude among the educators. This had changed attitudes among the educators. I hope the attitudes will be continually changing! (Irene, community²³ 2005)

However, her hopes appear to be misplaced, as another interviewee described the current situation:

At the moment the resources are too little. I would say that, for example, at school, Deaf people cannot have education in their own language - there is not enough material, there is not enough knowledge, and hearing people get better education than deaf children get. They may get little or no education in their own language. (Marja, community 2006)

This same interviewee pointed out the irony of having the same situation as before even though the personal right to use signed language was now recognised by the constitution. Deaf people are further disempowered by the limitations of access to knowledge and information about signed language. This echoes Kyle and Allsop's (1997) research findings on a European level. The same interviewee expressed her frustration:

Hearing adults can get much better education - they know more about Finnish SL as a language than Deaf people. It is really wrong, this situation. (Marja, community 2006)

There are a number of reasons why Deaf children are not exposed to signed language or are not properly instructed to sign. One prominent interviewee explained that there are three distinct groups of Deaf people. The first group is gradually growing and is becoming more confident in signing; the second group adopts ambivalent attitudes toward signing while the final group can be regarded as not conversant in signing. This interviewee pinpoints the differences between these groups in terms of parental influence and the degree of exposure to signing in the schools. For the second group, this interviewee claims that:

They can identify themselves with Deaf identity etc., but their families adopt a cavalier attitude towards FinSL. (Paula, community 2005)

As for the first confident group, the same interviewee states:

.....You see within the young Deaf population in Finland a significant but growing sector has expressed significantly in bilingual mode and their education had not ceased to amaze the hearing population - they are fluent in FinSL, Finnish and Swedish and take them for granted. This is due to their families' positive attitude toward FinSL. (Paula, community 2005)

However, this interviewee recognises that this group may dwindle in time to come because:

.....not many parents follow the spirit of the law - this is due to the expansion of cochlear implantation. Doctors in the cochlear implantation scheme have advised against the use of Finnish Sign Language among Deaf children. Parents and schools strongly influenced by the doctors now are using Total Communication. It is really a throwback to the old days in Finland in the 1970's. (Paula, community 2005)

Paula's reference to a throwback to the 1970s is that the status of signed language was treated as inferior to spoken languages. This interviewee's fears are quite common among her Deaf compatriots. Even in the schools for the Deaf it seems that there is a lack of confidence. The following comment exemplifies the degree of scepticism:

A number of Deaf schools declare their belief in bilingualism, but now they move to the concept of multilingualism in line with the UN's policy to encourage linguistic [and] cultural diversity. Of course, being realistic, Deaf schools emphasize more spoken Finnish language than Finnish Sign Language. I did ask them why it was the case and I suggested the reverse but we kept a distance. Maybe you can visit one of them and ask questions yourself. For the record I do have doubts regarding their declaration for multilingualism considering the amount [of time] they devote to Finnish Sign Language teaching (Rikka, community 2005)

It is clear that the philosophical perspectives have influenced the language educational policies for Deaf children directly and indirectly. The dominant philosophical perspective is to have Deaf children exposed to the spoken language as much as possible and to minimise exposure to Finnish Sign Language. The pessimism among interviewees regarding future language education policies is evident.

When participants discussed the Finnish early intervention system, the dominance of medical professionals arose as an issue of concern. One interviewee describes the

situation as follows:

Well, in this country, when parents of Deaf children discover their child is deaf, they tend to seek advice from medical people; they are usually referred to a medical specialist. The typical medical specialist's knowledge on Deaf-related issues is virtually non-existent. This type of specialist would recommend cochlear implantation or mainstream education. Notwithstanding, I must say there are some referral people who are positive towards the Deaf community but they are few and far between. (Jenna, administration 2005)

Another person pointed out that planning for the Deaf child's future in education is organised through the health care system.

We have a system based on the fact that when a child is very young and in every year of their life (sic), the mother or father takes them to a centre where there is a healthcare system which goes through the basic things and that concerns opportunities to learn in the future, especially when the child is five years old. (Ella, administration 2006)

The general consensus among the Finnish interviewees is that the emphasis for language acquisition is increasingly focused on cochlear implantation for young children in order to avail of spoken language. This is the advice given to parents in the healthcare centres. This emphasis reflects the medicalised attitudes adopted by the national health administration responsible for this scheme.

Interviewees were asked if parents are encouraged to use Finnish Sign Language. They claimed there is widespread negativity, despite the fact that the Finnish Association of the Deaf (FAD) has adopted an active role in ensuring the access to FinSL for those parents. However, the Deaf community, through the FAD, is determined to have a foothold in this regard. It developed a programme aimed at parents of Deaf children and provides teachers of FinSL to such families:

There is a programme aimed at hearing families of the young Deaf child to speed up their signing skills and they have chances to mingle with other Deaf families. This programme is known as the junior programme and is usually held at the weekends. During the summer break, the FAD organizes a home tuition programme aimed at parents. I, myself, do that work. This is a good programme for hearing families. This usually takes place at homes and municipalities fund this programme. (Laura, administration 2005)

It is noticeable from this statement that such programmes offered by the Deaf community are to be held on the 'periphery' of the education system, but local municipalities fund them. This raises an interesting observation as there are two strands operating in this regard. At the first level (centrally), the state offers early intervention with a strong emphasis on spoken language acquisition and cochlear implantation. At the next level (and more peripherally), the Deaf community through the FAD, offers FinSL instruction to families, yet both are paid by the public purse.

In terms of early years education, there is only one dedicated kindergarten for Deaf children in Finland with Deaf children otherwise being placed in mainstream kindergartens across Finland. One interviewee states:

There are kindergartens where many Deaf children are placed individually.

There is one kindergarten school focusing on Deaf children in the Helsinki area. It is about 10km away from this place. This kindergarten regularly supplies children to this school [for the Deaf] when they reach the appropriate age ... (Jenna, administration 2005)

Many Deaf children individually placed in kindergartens are unlikely to have ready access to signed languages or Deaf adult role models. Only one kindergarten provides service in FinSL and it is in Helsinki. This demonstrates how medical or social perspectives on deafness can influence the individual placing of a child. A concurrent consequence is the reduction in numbers attending schools for the Deaf.

The dominance of medical professionals in early intervention clearly shapes the language education policies regardless of stated policy intentions. A number of interviewees identified the involvement of medical professionals as a key factor in determining the lack of interest in a language education policy based on Finnish Sign Language for Deaf children. They also acknowledged that parental attitude towards the FinSL is a crucial issue in shaping language education policies.

7. LEP in the Irish schools for the Deaf: Background Information

The number of schools catering for Deaf children in Ireland is difficult to pinpoint as some of them have a special unit attached to mainstream schools while others are stand-alone. The known number of stand-alone schools is three²⁴. The number of special units attached to the mainstream schools is difficult to establish because there are tendencies to open and then close a unit after a few years of operation depending on the presence of Deaf children in the vicinity. According to Department of Education and Science statistics there are eight such units. All of these units are attached to local national schools and available figures do not provide any information on secondary schools. Most of these national schools have been named after saints indicating that the Catholic Church owns most of them (see Inglis 1999, McDonnell 2007). More than eighty percent of Deaf children are placed in mainstream schools without adjunct special units (Ryan, 2006, Mathews 2011).

The language policy in stand-alone schools for the Deaf was historically biased toward oralism and signing was strictly forbidden (Crean 1997, Burns 1998, LeMasters 2003)²⁵. However, it has to be pointed out that the Irish experience was unique in an international context as oralism was introduced to the Irish Catholic schools during the 1940s and 1950s (Crean 1997, Burns 1998, LeMasters 2003), while many other countries had implemented an oral approach in the aftermath of the Congress of Milan (1880). LeMasters (2003) also reports how the rapid change by these schools to oralism (from exclusive signing as the method of instruction) brought upheavals to the sense of identity among Irish Deaf people.

The usage of signing by children was often met with corporal punishment (McDonnell and Saunders 1993). The huge number of applications by Deaf people to the Irish state's Redress Board²⁶ to compensate for the physical abuse suffered at the hands of their educators is indicative of the systematic approach to the suppression of signing (Commission of Inquiry into Child Abuse 2009). The oralist policy²⁷ has diminished slightly in recent times due to the campaign by the Irish Deaf Society and the more recent exposure to different ideological perspectives, especially from abroad (Conama 2002, LeMasters 2003).

However, the shift has not been completely made toward bilingualism (Burns 1998, LeMasters 2003) as can be exemplified by reference to the websites of these stand-alone schools²⁸. These schools emphasise the individual needs of each child including his/her communication needs rather than adopting a language policy, which is based on a chosen language or two. Such statements exemplify the lack of distinction between the concept of 'communication' versus 'language use'.

Wilden (1987) argues that language is not the same thing as communication. Language is a system for communicating and expressing thoughts and ideas. Communication refers to the means of exchanging messages – therefore, communication is distinct from language itself. Wilden states:

All language is communication but very little communication is language. With the five senses and body communication in general, our non-linguistic modes of communication in society include music, the visual arts, and the visual aspects of film and television; kinship, status, money, sex, and power; accent, height, shape, and beauty; much mathematics, dreams, and fantasy; images, ideals, emotions, and desires; the production and exchange of commodities; and class, caste, race and sex'. (Wilden 1987: 137)

The two major schools in Dublin do not refer to ISL as such and the Limerick school uses a generic term: 'sign language', which is akin to using the term 'spoken language' to mean English.

The failure to distinguish between language and communication generally masks difficulties that are actually arising because of pedagogical methodology. It is also compounded by additional difficulties: the number of Deaf children attending the schools for the Deaf has steadily reduced in recent years (Ryan 2006, Mathews 2011). According to the Department of Education and Science, 193 children attended these Deaf schools in 2007 but no reliable number can be given for those who attended special units and mainstream schools. According to Ryan (2006), there are 1,500 children nationwide receiving attention from the Department of Education and Science, for example, via the Visiting Teacher Service for the deaf²⁹. In addition, recent years have seen an increasing number of children with multiple disabilities who are Deaf but unlikely to be fluent signers (Turner 2006: 410) registered in the schools for the Deaf. This increases challenges to teachers aiming to deliver education more effectively.

The schools for the Deaf in Ireland deliver the national curriculum (both primary and secondary), but the curriculum delivery is limited and is modified for a range of reasons including the small number of children and limited teaching expertise in particular areas. The curriculum adopted is very vocationally orientated. Further, Irish is not on the curriculum of these schools³⁰. Deaf children attending mainstream schools or special units are typically exempted from learning Irish too. An inspector from the Department of Education and Science confirmed that the exemption could be granted but only with the consent of parents and the school concerned (Sean O'Murchu³¹, personal communication, September 2006).

While 'Sign Language'³² is a subject in the Leaving Certificate Applied programme, this subject is orientated towards the general school-going population. It is chiefly of an introductory nature. Though extra credits are given for Deaf pupils if they pass this subject (NCCA 2000), this is not ideal because the level of ISL is considered as basic and well below their level of comprehension and production³³.

With regard to the legislative status of language policy in education for Deaf children, the Education Act (1998) makes reference to the status of 'sign language'. However, it does not have any explicit clause regarding the right to use ISL. The reference to the Education Act (1998) is about providing support services for ISL users:

2 (1).....

"support services" means the services which the Minister provides to students or their parents, schools or centres for education in accordance with section 7 and shall include any or all of the following:

.....

(e) provision for students learning through Irish sign language or other sign language, including interpreting services; (Ireland 1998).

While the status of signed language in the Education Act 1998 appears to give symbolic acknowledgement to the language, it clearly exemplifies the official attitude towards Irish Sign Language, namely that it is to be supported, but without any recognition of the fact that it is a language in its own right. The emergence of cochlear implantation in Ireland has reinforced this position.

There is only one programme on cochlear implantation in Ireland and this is based at Beaumont Hospital, Dublin (Beaumont Hospital website: <http://www.beaumont.ie> - accessed – April 2008). The hospital publishes an explanatory guide and there is no reference to ISL or even to signed languages and the guide refers only to spoken language, in this case English. This guide states that interpreters can be provided for Deaf patients/ prospective patients. The guide emphasises that the speech intelligibility is the central goal for the programme.

Medical professionals or visiting teachers have dominated early intervention schemes aimed at Deaf children in Ireland (as demonstrated by references in a number of official reports or pamphlets). The National Paediatric Cochlear Implant Programme states this:

Again every child has different needs, and your visiting teacher of the deaf and implant centre teacher of the deaf will give you information so that you can decide what is right for your child. (Beaumont Hospital, n/d)

It is generally known that the visiting teachers have been a bone of contention for many within the Deaf community (Crean 1997, Ryan 2004, NDA 2007). The Deaf community has expressed a serious concern about their inability to use ISL effectively and the negative attitudes among the professionals in the early intervention period, especially visiting teachers and educational psychologists (NDA 2007, Leeson 2007).

Although it is not widely publicised, the ISL home tuition scheme³⁴ refers to the deployment of ISL teachers to family homes. These teachers are meant to introduce families to ISL, not only to the child (Irish Deaf Journal 2002). The whole purpose is to facilitate the language acquisition of the child. The establishment of this scheme was down to the determined lobbying of two hearing parents (Irish Deaf Journal 2001). This can be viewed as a counter to these aforementioned services and is similar in nature to the Finnish programme described earlier.

The government is aware of the negative views of the Deaf community on mainstream educational placement for Deaf children. The following excerpt is quoted from the

National Disability Authority report on the stakeholders' views on special education:

The very limited availability of Irish Sign Language in mainstream schools was cited as a major barrier to the successful inclusion for Deaf children by some members of the Deaf community, who felt that there was inadequate systemic recognition of their culture and language. (Kenny at al 2006)

Training for teachers of the Deaf had been provided in only one university in Ireland - University College Dublin (UCD)³⁵. Several Irish publications have referred to this course when discussing the nature of education for Deaf children (for example Griffey 1994, Matthews 1996, Crean 1997). This course was heavily embedded in the medical perspective on deafness (Griffey 1994:66). Such was the dominance of this course and the oralist perspective, that there was no concern about the teachers' lack of fluency of ISL³⁶ nor was there encouragement for Deaf aspirants to become teachers (Centre for Deaf Studies 2002: 10).

The involvement of the Deaf community in the education process is largely limited to the employment of Special Education Needs Assistants (SNA) in the Deaf schools and the mainstream schools. Recently a small but growing number of Deaf teacher graduates are becoming secondary school teachers. In 2011 there were seventeen Deaf teachers qualified and an additional one in training (Deirdre Byrne-Dunne, personal communication, December 2011).

Most of the SNAs who are assigned to care for Deaf children are Deaf themselves. Their value is recognised by the Deaf community as they provide ideal role models to these Deaf children. However, it is also recognised that they require further training in teaching as some of their work can be regarded as teaching. This function is not widely acknowledged by the Department of Education and Science however (Kenny at al 2006).

In October 2001, the Minister for Education and Science announced the setting up of the second³⁷ advisory committee to examine the education of the Deaf and hard of hearing (Dáil Éireann - Volume 5³⁷ - 12 June, 2001 Written Answers - Special Educational Needs). However, the majority of those on the committee were hearing professionals though there were also some Deaf representatives³⁸. Complaints were made to the then Minister for Education and Science, Michael Woods regarding the balance of hearing to Deaf people on the committee but to no avail³⁹. Inevitably, tensions and conflict arose, chiefly surrounding differences regarding approaches and philosophy. Given these reasons, the subsequent Minister Mary Hanafin decided to disband the committee⁴⁰ and transferred the responsibility for completing the report to the National Council for Special Education (Ryan 2006). She justified by her claim by suggesting that: "The differences between the two groups were "not only insurmountable, but historical and deeply felt"" (Irish 'Times, April 27th 2005).

Given the brief background information, the next section outlines the key issues arising from interviews with Irish participants, and these may serve to complement the wider picture.

8. Irish Perspectives and Philosophies

There is a widespread acknowledgement that philosophical perspectives on Deaf education are informed by medical views of deafness in Ireland. The alternative

than resistance to implementation of bilingual programmes and this can be exemplified by two examples. First, an official from the National Council for Special Education (NCSE) queried whether the concept of bilingualism is understood within the Council (Sarah Craig, personal communication, 2006). Secondly, one interviewee recalled the situation:

Well I'll tell you a funny story! At one time I met someone working in the Department of Education and we got talking. I was telling him about ISL, and the classes we had in ISL and that they had been booked solid, and that that was normal for these beginners' introductory classes. And he said to me, 'but why would anyone be interested in learning that?' He had not a notion of why people would want to learn sign language, why they would want to know ISL. I think this is interesting, that within the Department there is not so much a resistance but it is just that they don't get it! (Bridget, academic 2006)

It is clear from the interviews that medical perspectives dominate the philosophy of Deaf education. It is accepted by professionals that medical and other professionals should have power over the language education policies. This apparently is made possible by the fact that state administrators are ignorant or complacent of the significance of ISL in Deaf peoples' lives.

With regard to the Irish early intervention scheme, all interviewees agreed that it is regarded as not being as transparent as it is supposed to be. One interviewee described it as follows:

I think again, it's a very confused system, and again it's not clear.. eh, I'm not aware of any research into or...that has been done to ah discover what form does intervention take. Who's involved in this intervention and is there a particular policy as part of this intervention? Now, my own understanding of the situation is that ... by and large, intervention is largely medical, that the.. the.. Initial, lets say how intervention is started is largely through medical personnel, and then the guidance services would be informed and would be brought into the situation and this would obviously involve people like the visiting teachers and...But certainly initially it tends to be largely medical and say for example the initial information that parents would be getting would be largely medical. (Daithi, academic 2006)

This interviewee's description of the early intervention scheme being dominated by the medical perspective is universally agreed. The scheme is strongly dominated by the Visiting Teacher Service⁴¹. This service has been a controversial subject within Deaf education because it is largely perceived to be driven by medicalised views. It is also common that VTS teachers are allowed to have a great degree of discretion in terms of advising parents, without any clear supervision or centralised policy.

When it comes to VISTA⁴², I believe some teachers may have signing ability and support sign[ed] language, but at the individual level each visiting teacher does their own thing, rather than follow an overall formal policy. (Bridget, academic 2006)

However, not all interviewees share this view as one interviewee insists on the usefulness of service, including the provision of counselling:

... there is the visiting teachers' scheme, so... now, when a child is diagnosed

philosophy is bilingualism, which emphasises the use of signed languages and its role in language acquisition in conjunction with a spoken language. However, there is a general consensus that bilingualism is not currently a strong feature in the Irish schools as exemplified by the following comment from a hearing academic:

I think bilingualism is not strong within Deaf education. (Bridget, academic 2006)

This following interviewee identified the likely supporters of bilingualism:

The only people who accept bilingual education and bilingualism are the Deaf community and the parents of Deaf children - a very small number. The others don't accept it. (Cathal, community 2005)

There is some resistance to the idea of implementing bilingualism as the language policy in the schools for Deaf children. There is a widespread belief that resistance to bilingualism can be linked to the adherence to a medical perspective:

So I would say, if you like to think why is there no bilingual education, well I would say...it's because there has been a predominantly medical definition of deafness that has been the prevalent model, eh and the education or educational practices are derived from the thinking that deafness has a medical view rather than a social/cultural. That is the major reason why there has not been a bilingual educational system introduced. (Daithi, academic 2006)

Granted, the medical model can be identified as the prevalent reason that bilingualism could not be implemented in the schools for the Deaf. However, one interviewee claimed that parental involvement had played a significant factor in the non-implementation of bilingualism:

.....but sometimes bilingualism involves sign[ed] language. Em, so there maybe some... anxiety on the part of parents when deafness is confirmed for the child and when they hear that the deaf person might have to learn sign language because many parents initially want the child to grow up as a hearing person. Now I'm not saying that they are right or wrong but they have that anxiety about the child learning sign[ed] language that will place them glaringly in the deaf culture. They want the child to be... part of... their culture. So there would be that little anxiety, initially. (Enda, academic 2006)

Such a comment shows that parents expect their children to grow up as a hearing person. It is clear from this that the medical thinking has permeated beyond the schools. However, others believe this provides an excuse for professionals who resisted signing, allowing them to hide behind parents' concerns. There is a general consensus that those who resist the idea of bilingualism can be easily identified. The main known opponents are teachers in the Deaf schools. Some speculated that the opposition could be based on several grounds that any change in language policy would mean that their lack of fluency would be a threat to job security:

I think a lot of this relates to the teachers themselves, because the teachers don't [currently] need ISL to teach there. So when they arrive at a school for the deaf they don't have training for ISL. But if there were a bilingual policy in place then there would not be a job for them at the schools. (Eimear, community 2006)

Moreover, on the official side, it appears that there is a widespread ignorance rather

as deaf, it is the function of the visiting teacher service to go and make, em... help the parents cope with having a deaf child, and help the teacher when the child goes to school, and maybe do some work with the child themselves. (Enda, academic 2006)

Such is the power of the visiting teachers in advising parents of Deaf children, that they tend not to inform them of the existence of the Model School for the Deaf Project (MSDP). This was reported on Hands On, a television programme for the Deaf community (October 10th 2004). MSDP was established in 1998 and opened the preschool in 2001. Its board consists of Deaf representatives and hearing supporters. MSDP aims to provide bilingual education with a strong emphasis on ISL to Deaf children in Ireland (MSDP, website: <http://indigo.ie/~msdp>). This author was the acting chairperson of this school. As for now, the preschool facility ceased to function and there is a belief that a referral system dominated by medical perspective has not been in its favour. One interviewee describes the implicit power of visiting teachers in this regard:

I know that the DES was involved with the Model School for the Deaf when that was established - DES, Department of Education and Science - and they told VISTA that information about the MSDP had to be given to parents. But there is a question mark about whether that did really happen in practice, or not. It looks like the number of children referred to that school was small. (Bridget, academic 2006)

It is obvious from these interviews that an early intervention scheme is a vital part of sustaining language policy for Deaf children. In this regard, a significant development which could consolidate the medical view within the early intervention scheme, is the 'universal neonatal hearing screening', which aims at identification of deafness in newborn babies. In early 2011, the programme has started in the maternity hospital in Cork and the Health Executive Service tends to roll out the programme to the rest of country (<http://www.irishdeafkids.ie/>).

While the neonatal screening is welcomed by all concerned, one has to point out that as this service is established in a medical institute, it would be difficult to offer an alternative perspective in terms of advising parents at this site unless the medical institute agrees to the inclusion of alternative perspectives.

Another part of the early intervention scheme that is not widely known of amongst parents is the ISL home tuition scheme⁴³. This scheme is operated under the auspices of the Department of Education and Science. One interviewee describes the establishment of this scheme in the following terms:

But you have that new scheme now, the ISL Home Tuition Scheme. It was established because of two parents who were fighting for it. It came in... when was it... six years ago. So now you can get those ISL teachers coming in, but only if the parents ask for it. Only then do they supply it, but if the parents haven't heard of it before then they don't ask. And that's a missed opportunity. (Ciara, community 2006)

Despite its usefulness in introducing ISL to hearing parents and their Deaf children, only two interviewees referred to this scheme. In addition, details of the scheme are visibly absent from the Department of Education and Science's website and annual reports⁴⁴ (Department of Education and Science, website: <http://www.education.ie>). Indeed, this was an issue that parents who learned about the service by chance have

complained vociferously about (Leeson 2007).

There are two contrasting early intervention schemes aiming at Deaf children and they are vital in shaping the future hearts and minds behind language education policies, namely the medical intervention and ISL tuition. Ironically, both schemes are financed by the state but the dominant service receives more attention and is clearly the favoured route.

9. Concluding Remarks

Following from Shohamy's five questions on LEP, we considered the situation in Finland and Ireland, focusing specifically on two key themes: early intervention and philosophical perspectives.

Firstly, let us make some general comments on LEP for Deaf children in both countries. It is clear that both countries have experienced similar historical situations where oralism was the dominant language policy. It appears however, that Finland has moved ahead of Ireland with regard to the status of signed languages in their schools. Yet, both countries share a similar weak legislative base to protect the status of signed languages and the respondents have identified two areas: a) the emergence of cochlear implantation and b) a move to mainstream education for Deaf education as key issues that will influence the future directions of language education policies. In both countries, signed language specialists and Deaf advocates are equally pessimistic regarding the future status of signed languages in education.

There is widespread recognition in both countries that the philosophy emphasising medicalised views are influencing LEPs. In addition, the interviewees in both countries have identified parental involvement and the composition of staff with strong medical views as the main factors impacting on language policy. There is also resistance to the alternative philosophy of bilingualism. This alternative is deprived of resources and thereby the ability to develop and be a viable option in the future.

With regard to early intervention schemes, both countries share similar characteristics: both schemes are heavily dominated and staffed by medical perspectives. The emergence of cochlear implantation appears to consolidate this approach, as it is known that those who favour cochlear implantation typically opt for spoken monolingual education for Deaf children. However, in both countries, there are alternative approaches available to parents of Deaf children albeit with a lower public profile. These alternative approaches include the preschool facilities for Deaf children and home tuition in signed languages.

Given the dominant position of those who hold medical perspectives in the early intervention programmes, it is absolutely clear that this model shapes LEPs for Deaf children. Interviewees clearly stated their view that medically driven policies are the default position in Deaf education. In light of this analysis, it is difficult to retain the belief that such policies are created by default considering the fact that little encouragement or publicity is given to alternative approaches.

Educational placement refers to the placement of a child in the school. The evidence demonstrates that the decision, even at the individual level, to place a child in a given

school has enormous influence on their learning experience. We noted that the type of training that is given to student teachers of the Deaf is highly impactful. There is much evidence to show that such training can function as a vital component in consolidating specific LEPs. Interlinked with this, fluency in ISL and FinSL among teachers was also analysed. Given that the success of LEPs often centres on the ability of teachers to deliver in classrooms, this is an important issue. Finally, the role of Deaf communities in the process of shaping and directing language education policies is to be examined.

Several commentators (Corson 1993, Spolsky 2004, Shohamy 2006, Paulston and Heideman 2006 for example) identify LEPs as a key factor in promoting new thinking about signed languages. To have a language policy that respects signed languages in education policies, the involvement of Deaf communities must be ensured in every part of the process (Corson 1993). Having analysed the six components of LEPs in my doctoral research (and highlighting two of these in this chapter) we can say that it is absolutely clear that the ideology or views favoured by Deaf communities in both countries have been largely ignored apart from minor concessions granted after protest and following from negotiations.

Three perspectives in operation within Deaf education have been identified: the medical, social and Deafhood frameworks. The medical 'perspective' focuses on curative and rehabilitative approaches that do not involve Deaf staff or professionals; hence they give no credence to the fluency of ISL or FinSL among professionals. Therefore, such approaches require minimal or no involvement from Deaf communities in LEPs. The social 'perspective' can be regarded as a reaction to the medical 'perspective'. This perspective tends to acknowledge impairment but refuses to recognise that impairment is the sole cause for oppression and disability. This perspective is much championed by the disability movement but Deaf people regard some parts of this view as problematic. For example, mainstreaming, with adequate accommodation provisions would be seen as relatively unproblematic from the social model perspective movement, provided protections were in place. It is however problematic for Deaf communities because mainstreaming does not address the linguistic and cultural context of Deaf communities. Hence, provisions such as fluency of teachers in ISL or FinSL are regarded as a bonus rather than an obligation from a service provider's viewpoint. The involvement of Deaf communities in such a social model driven LEP process would be obscured by the views that in order to accommodate disabled people, compensatory approaches are required because such approaches may not necessitate the involvement of Deaf communities. An example of compensatory approaches is the employment of Special Needs Assistants (SNAs) as communication workers to support teachers in the classrooms⁴⁵.

Finally, the Deafhood 'perspective' is focused on the idea of championing Deafhood, and it would regard schools for the Deaf with strong language policies on ISL or FinSL as the first and natural choice for Deaf children. Such strong language policies centre on fluency in ISL or FinSL and would necessitate the involvement of Deaf communities at every stage of the process. To ensure ownership of the process, influential positions in such schools for the Deaf would have to be reserved for Deaf fluent signers. This would require a significant revamp of teacher training courses.

Endnotes

1. In this study 'Deaf' (with a capital D) refers to persons who consider themselves members of a linguistic-cultural minority community and who are deaf. The lower case noun 'deaf' is used to describe the audiological state of loss of hearing. Several scholars in Deaf Studies make this distinction although they recognise the fluidity and inherent complexities involved when discussing individuals and groups simultaneously. The fluidity and inherent complexities in identifying oneself in society are often shaped or influenced by the societal expectations or norms.
2. There were 29 people interviewed for my doctoral research. Amongst them are academics, administrators and community activists. Ten of them are Deaf and 15 of them are Finnish.
3. It is interesting to note that when the findings from such research was announced, many Deaf academics at Gallaudet University were bitterly opposed to the idea that ASL was a language in its own right (Padden 2005). Some of them, in later years, admitted they were mistaken for opposing the idea in the first place and they believed it was down to their inferiority complex and fear of the unknown (i.e. what this would bring in the future). (Padden 2005: 127).
4. *Biolinguistic Explorations: design, development, evolution* by Noam Chomsky: Public Philosophy and Linguistics lecture hosted by UCD School of Philosophy, January 20th 2006.
5. The keynote lecture was delivered by policy expert Professor Bernard Spolsky of Bar-Ilan University, Israel at the Royal Irish Academy's conference on 'Language Policy and Language Planning in Ireland' on February 2nd 2006, in Dublin Castle.
6. 'Cued Speech' is viewed by some as neither a signed language nor manually coded language but it is an aid to speech communication (Leybert and Alegria 2003).
7. Dáil Debates, 11 February 2003. In fact, he never visited IDS (Irish Deaf Society 2006).
8. Dáil Debates, 30 June 2004.
9. The term, 'language education policy' (LEP), is used throughout the chapter though other authors use slightly different terms with the same meaning. For example, LEP is used by Shohamy (2006); Corson opts for 'language planning in education', and Paulston and Heidemann (2006) use 'educational language policy'. Others adopt 'language acquisition policy'.
10. 'Language shift', sometimes referred to as 'language transfer' or 'language replacement or assimilation', is the progressive process whereby a speech community of one language shifts to speaking another language.
11. 'Hybrid approach' refers to the use and mix of two or more languages in a single written composition.
12. Corson (1993) points out that feminists have successfully reformed sexist languages but they have not been successful in tackling the wider structures. This, in turn has contributed to the inferior status of women in society.
13. Paddy Ladd (2003) first coined this term 'Deafhood' in order to describe the existence of Deaf people and their experience of being Deaf. Ladd describes Deafhood as a process of becoming: he argues that Deafhood is not a 'static' medical condition but the process reflecting the experiences of individual and collective struggles by Deaf people themselves to explain and name their existences. He recognises that each Deaf individual has its own unique experience of becoming Deaf and struggling to be Deaf but the enduring and binding tenets behind this process is to champion the existence of signed languages (Ladd 2003: 3-4).
14. In some countries in the majority world, Deaf education does not exist or is only available to primary level (World Federation of the Deaf, website: <http://www.wfdeaf.org> - accessed April 2008).
15. This term is deliberately chosen instead of 'diagnosed' as the author writes from the cultural perspective. The term 'diagnosed' implies the necessitation of medical intervention.
16. Griffey (1994) and Crean (1996) refer to the 1940s and to the decision of some parents

- to withdraw their children from the schools for Deaf children in Dublin in order to avail of oral education in the United Kingdom.
17. 'Pedagogical difficulties' refer to different communication needs of Deaf children, especially those with disabilities that may require different communication approaches. For example, given the small number of Deaf children, it may be necessary to group some children of a certain age into one or two groups. One group may need methodical signing or signing at a slower pace.
 18. 'Dysphasia' refers to an impairment of speech and verbal comprehension, especially when associated with brain injury Online Medical Dictionary - website <http://www.online-medical-dictionary.org/omd.asp?q=Dysphasia+>: accessed January 2009).
 19. This source was an interview respondent in my original research process though in that instance, her comments were reported anonymously.
 20. Ordinary schools refer to the non-special schools for the national population.
 21. Londen reports that medical professionals heavily dominate the typical team to a great degree. The social worker, nurse and parents only get involved in later stages of the process. She did not mention any involvement of Deaf professionals in this process (Londen 2004:76).
 22. The term 'peer' refers to other children where the child can communicate on equal terms. In this regard, for the Deaf child, a signed language is the only natural and spontaneous language available (Jokinen 2000). Therefore, it is impossible to have communication on equal terms between the Deaf child and the hearing child if the latter child does not have the ability to sign.
 23. Respondents are given a pseudonym and a general area of their occupations. Given the size of the Deaf communities in both countries, this generalised description was designed to avoid easy identification.
 24. St. Mary's School, Cabra, Dublin, St. Joseph's Cabra, Dublin and the Mid-West School for the Hearing Impaired, Limerick. All these schools are designated as national primary schools by the Department of Education and Science.
 25. Oralism was largely employed in several European countries including the UK (including Irish Protestant run schools) during the 19th century. It was given a superior status over signed languages in terms of medium of instruction by the infamous Milan conference in 1880. Though the status was not legally binding, it became a widespread currency for several schools in Europe and North America. This status was heavily disputed and became a source of resentment by Deaf communities against the validity of oralism (Lane and Fischer 1993).
 26. The Redress Board was set up under the Residential Institutions Redress Act, 2002 to make fair and reasonable awards to persons who, as children, were abused while resident in industrial schools, reformatories and other institutions subject to state regulation or inspection (Residential Institutions Redress Board <http://www.rirb.ie/aboutus.asp> - accessed June 2008).
 27. According to the Commission of Inquiry into Child Abuse Report (2009), the oralist policy remains at least in one of the schools for the Deaf.
 28. These schools are: St. Joseph's Cabra, St. Mary's Cabra and Limerick School for the Hearing Impaired.
 29. The statistics for Deaf /hard of hearing students are not readily available and this number was based on those who availed of the Visiting Teachers' Services.
 30. Information is based on the schools' respective websites.
 31. Regional divisional inspector attached to the Department of Education and Science
 32. This is termed generically.
 33. The author has seen the curriculum notes for Sign Language and has considered them suitable for those beginners who do not have previous experience of signing.
 34. The Department of Education and Science finance this scheme and it got no mention in its recent annual report (Department of Education and Science 2006).
 35. This course had been discontinued in the early 2000s for a number of reasons.
 36. The Commission of Inquiry into Child Abuse Report (Ryan Report 2009) expressed

disbelief that the majority of staff in the schools for the Deaf did not have the ability to communicate with the Deaf children in their care (CICA Investigation Committee 2009 Vol. 1: 570).

37. The first was established in 1967 and the report was published in 1972. No Deaf representation was on the advisory committee nor were there any submissions from the committee (Department of Education 1972). It is interesting to see the difference of treatment between this committee and the 2001 committee. There were eighteen representatives and four of them were Deaf and one was elected to chair the committee.
38. The author was one of them. There were eighteen representatives and four of them were Deaf and one was elected to chair the committee.
39. Complaints were aired in the Dail Eireann (The parliament of Ireland) (see Dáil Éireann - Volume 541 - 03 October 2001 Written Answers. - Committee on Deaf Education).
40. The author can confirm that there was a promising sign that the committee would agree to the suggestion that two reports were to be submitted; majority and minority but the Minister did not accept the idea of two separate reports (Dail Debates, April 26th 2005).
41. The visiting teacher service refers to a scheme operated under the auspices of the Department of Education and Science. Their main role is to advise parents of Deaf children on educational placements. However, according to an Irish National Teachers Organisation (INTO) document, the role appears to exceed this and it includes counselling and advocacy (INTO 2000).
42. This organisation represents visiting teachers and for some reason, this acronym is not spelt out.
43. It is understood that 60 plus families have availed of this service but detailed information is difficult to obtain given its 'absence' from the Department's information dissemination.
44. This website and annual reports list a wide range of services available under their control.
45. The overall number of SNAs in the schools has reached 18,000 (Irish Times, September 5th 2008) but the Report of the Special Group on Public Service Numbers and Expenditure Programs (as known as the 'Bord na Snip Nua' report 2009) reports that there are 10500 currently employed. While they "are recruited specifically to assist in the care of pupils with disabilities in an educational context" (Department of Education and Science circular 07/02), however, for those SNAs working with Deaf children, their roles are widely understood as supporting communication (relaying communication from teacher to pupil through ISL and vice versa) (National Disability Authority, website: [http://www.nda.ie/cntmgmtnew.nsf/0/5B4CE56E1452B0E18025717E00525CDE/\\$File/primary_ed_report_04.htm](http://www.nda.ie/cntmgmtnew.nsf/0/5B4CE56E1452B0E18025717E00525CDE/$File/primary_ed_report_04.htm)). The number of SNAs in this regard is not available but based on the statistics supplied by the Association of Secondary Teachers in Ireland (ASTI website: www.asti.ie) and Ryan (2006), the calculated number could be in the region of a few hundred.

References

- Blume, S. (2005) 'The Effects of Cochlear Implantation on Deaf Culture'. A paper presented at the Irish Deaf Society 5th National Congress, Technology and Deaf culture: Has recent technological advances improved or is it killing Deaf culture?, University College Cork: October 22, 2005.
- Bourdieu P. and Passeron (1977) 'Cultural Reproduction and Social Reproduction', in Richard K. Brown (Ed.), Knowledge, Education and Cultural Change, London: Tavistock.

Braden, J. (1994) *Deafness, deprivation, and IQ Perspectives on individual differences* New Horizons in Therapeutics. New York: Springer.

Burns, S. E. (1998) 'Ireland's Second Minority Language', in Lucas, C. ed. *Pinky Extension and Eye Gaze: Language Use in Deaf Communities*, Washington DC: Gallaudet University Press.

Centre for Deaf Studies (TCD) (2001) Submission to the Advisory Committee on Education of the Deaf by Lorraine Leeson and Patrick A. Matthews, September 2002. [online] Available from: <http://www.tara.tcd.ie/bitstream/2262/1577/1/CDS+Submission+DES+Deaf+ed.doc> [accessed January 2007].

Chomsky, N. (2007) *Biolinguistic Explorations: Design, Development, Evolution*, *International Journal of Philosophical Studies*, 15:1, 1-21.

Conama, J and P. McDonnell (2001) 'Irish Sign Language', *Higher Education Equality Unit UCC Newsletter*: April 10, 2001.

Conama, J. B. and C. Grehan (2001) 'Is There Poverty in the Deaf Community?' Dublin: Irish Deaf Society.

Conama, J. B. (2002) *Tourists in their own land - A Social Policy Analysis of the Irish Deaf Community's Participation in Society*, M.Litt thesis (unpublished), University of Dublin, Trinity College.

----- (2005) 'Potential of the Centre for Deaf Studies (CDS): its role in enhancing social justice for the Deaf community: a personal observation', *Deaf Worlds*. 21 (2).

----- (2008) *Review of the Signing Information Project, Mid-West Region, Limerick: Paul Partnership*.

----- (2010) *Finnish and Irish Sign Languages: An egalitarian analysis of language policies and their effects*. Doctoral thesis submitted to School of Social Justice, University College Dublin. Unpublished.

Conroy, P. (2006) *Signing In and Signing Out: The Education and Employment Experiences of Deaf People in Ireland. A Study of Inequality and Deaf People in Ireland*, Dublin: Irish Deaf Society.

Cornes, A. and C. Wiltshire (1999) 'Still Waiting to be Heard: Deaf Children in Australia', *Australasian Psychiatry* 7 (6) 315 – 318.

Corson, D. (1993) *Language, minority education and gender: linking social justice and power*, Clevedon: Multilingual Matters.

Crean, E. (1997) *Breaking the Silence - The Education of the Deaf in Ireland 1816-1996*. Dublin: Irish Deaf Society Publications.

Finland – National Board of Education (2006) *Curricula for Sign Language as a Mother Tongue Written language as a Second Language for the Deaf*, Vammalan Kirjapaino Oy, 2006

Fischer, R. and H. Lane (1993) *Looking back: a reader on the history of deaf communities and their sign languages*, Hamburg: Signum.

Griffey, N. (1994) *From silence to speech: fifty years with the deaf*. Dublin: Dominican Publications.

Hands On (2004) Campaign for ISL recognition, Raidió Teleffs Éireann, distributed by Mind the Gap, Ireland.

Inglis, T. (1999). *Moral monopoly: the Catholic Church in modern Irish society*, 2nd edition, Dublin: Gill and Macmillan

INTO - Irish National Teachers Organisation (2000) *The Visiting Teacher Service for Special Needs*, Unpublished.

Ireland - Department of Education. (1972). *The Education of Children Who Are Handicapped by Impaired Hearing*, Dublin: Government Publications Office.

Ireland – Education Act 1998 – Attorney General’s Office, Dublin. [online] available from: <http://www.irishstatutebook.ie/1998/en/act/pub/0051/index.html>

Irish Deaf Kids (2009) Dublin, Ireland, accessed 1 October 2011, <<http://www.irishdeafkids.ie/>>.

Irish Deaf Society (IDS): (1987 – 2005) – *Irish Deaf Journal - Quarterly Issued Magazine*. Dublin: IDS.

Irish Times (2009) Review of special needs assistants 19 Mar 2009.

Jokinen, M. (2000). 'The Linguistic Human Rights of Sign Language Users', in: R. Phillipson (ed.) (2000). *Rights to Language. Equity, Power, and Education*, Mahwah, New Jersey and London: Lawrence Erlbaum Associates, Publishers, 200-213.

Kannapell, B. (1993) *Language choice: identity choice*, Burtonsville, Md: Linstok

Kenny, Máirín, Michael Shevlin & Andrew Loxley (2006) *Special Education Provision for Children with Disabilities in Irish Primary Schools – the Views of Stakeholders NDA*. [http://www.nda.ie/cntmgmtnew.nsf/0/5B4CE56E1452B0E18025717E00525CDE/\\$File/p_rimary_ed_report_04.htm](http://www.nda.ie/cntmgmtnew.nsf/0/5B4CE56E1452B0E18025717E00525CDE/$File/p_rimary_ed_report_04.htm) (Accessed September 2011)

Kyle, J. and L. Allsop (1997) *Sign on Europe: a study of deaf people and sign language in the European Union*, Bristol: Centre for Deaf Studies, University of Bristol.

Ladd, P. (2003) *Understanding Deaf Culture: In Search of Deafhood*, Clevedon: Multilingual Matters.

----- (2007) *Signs of Change: Sign Language and Televisual Media in the UK* in Mike Cormack and Niamh Hourigan’s *Minority Language Media Concepts, Critiques and Case Studies*. Cleavdon, Multilingual Matters.

Lane, H. (1984) *When the mind hears: a history of the Deaf*, New York: Random House.

Latomaa, S. and P. Nuolijarvi (2005) 'The Language Situation in Finland'. In R. B. Kaplan and R. B. Baldauf (eds) *Language planning and policy in Europe Volume 1 of Language planning and policy: Hungary, Sweden and Finland*, Clevedon: Multilingual Matters, 2005. 123-232.

Leeson, L. (ed.) (2001) *Looking forward: EUD in the 3rd millennium - the deaf citizen in the 21st century*, Coleford: McLean Publisher.

- (2007) Seeing is Learning. A Review of education for deaf and hard of hearing people in Ireland, unpublished report submitted to the National Council for Special Education.
- LeMaster, B. (2003) 'School Language and Shifts in Irish Deaf Identity', In Monaghan, L. et al (eds.), *Many Ways to be Deaf: International Variation in Deaf Communities*, Washington, D.C.: Gallaudet University Press. 153-172.
- (2006) 'Language Contraction, Revitalization and Irish Women', *Journal of Linguistic Anthropology*, 16 (2): 211-228.
- Londen, M. (2004) Communicational and educational choices for minorities within minorities: The case of the Finland-Swedish Deaf. University of Helsinki, Department of Education Research Report: Helsinki University Press, Finland. Available from: <https://oa.doria.fi/bitstream/handle/10024/3656/communic.pdf?sequence=1>
- Marschark, M., H. G. Lang and J. A. Albertini (2002) *Educating deaf students: from research to practice*, Oxford: Oxford University Press
- Mathews, E. (2011) *Mainstreaming Policy for Deaf Education in Ireland: An International Reflection*, a doctoral thesis (unpublished), National University of Ireland, Maynooth.
- Matthews, P. (1996) *The Deaf Community (Volume 1): Survey report, history of education, language and culture*. Dublin. The Linguistics Institute of Ireland.
- McDonnell, P and H. Saunders (1993) 'Sit on your hands: Strategies to prevent signing' in R. Fischer and H. Lane (eds) *Looking back: A Reader on the History of Deaf Communities and their sign Languages*, Hamburg: Signum Press.
- McDonnell, P. (2007) *Disability and Society: Ideological and Historical Dimensions*, Dublin: Blackhall.
- National Council for Curriculum and Assessment (2005) *Review of Languages in Post-Primary education: Report on the phase of the review*, unpublished.
- National Disability Authority (2007) *Public attitudes to disability in Ireland: report of findings*, Dublin: Insight Statistical Consulting.
- O'Dowd, M. (1955) *The History of the Catholic Schools for the Deaf*, unpublished MA Thesis, Dublin: University College Dublin.
- Padden, C. (2005) *Talking culture: Deaf people and Disability Studies*. Publications of the Modern Language Association (PMLA), 120, 508-513. University of San Deigo, USA.
- Padden, C. and T. Humphries (2005) *Inside deaf culture*, Cambridge, Mass: Harvard University Press.
- Paulston, C, and K. Heidemann (2006) 'Language Policy and the Education of Linguistic Minorities', in *Language Policy: Theory and Method*. T. Ricento (ed.) Blackwells: Malden, MA.
- Ryan, P. (2006) *The Catholic Institute for the Deaf Strategic Review Report*, Dublin: Catholic Institute of the Deaf People: [online] Available from: http://www.cidp.ie/downloads/Strategic_Review_Report.pdf.

Schick, B. (2003) 'The Development of American Sign Language and Manually Coded English Systems', in M. Marschark and P. Spencer (eds) (2003) *Oxford Handbook of Deaf Studies, Language, and Education*, Oxford: Oxford University Press.

Shohamy E. (2006) *Language policy: hidden agendas and new approaches* Routledge, London.

Spolsky, B. (2004) *Language policy*, Cambridge: Cambridge University Press.

Spolsky, B. (2006) Keynote speech at the Royal Irish Academy conference on 'Language Policy and Language Planning in Ireland' on February 2, 2006 in Dublin Castle. Text of his speech available from Royal Irish Academy (www.ria.ie).

Takala, M. (1995) "They say I'm stupid, but I just don't HEAR": Hearing impaired Adults' view of Finnish society': Research Report 142, Department of Teacher Education, University of Helsinki.

Turner, G. T. (2006) 'Why protect heritage sign languages?', *International Journal of Applied Linguistics*, 16 (3): 243 - 254.

Vonen, A. M. (2008) 'Ten years of bilingual deaf education in Norway – where are we?' At the International Perspectives on Educational Interpreting: Online conference organized by Direct Line <http://www.deafshop.co.uk/ashop/catalogue.php>. [accessed February 2008].

Wilden, A. (1987) *The rules are no game: the strategy of communication*, Routledge, London

Woll, B. (2001) 'Modality, universality and the similarities among sign languages: an historical perspective', in A. Baker (ed) *Contemporary Development in Sign Languages*, Hamburg: Signum Press.

Young A., J. Ackerman and J. G. Kyle (2002) *Looking On: Deaf People and the Organisation of Services*. 2nd Edition, Bristol: University of Bristol Press.

Young A., G. Carr, R. Hunt, W. McCracken, A. Skipp and H. Tattersall (2006) 'Informed Choice and Deaf Children: Underpinning Concepts and Enduring Challenges'. *Journal of Deaf Studies and Deaf Education*, 11(3): 322-336.