

Alicia Pensamiento

RHET 105

Professor Mary

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Youth Life in a Silent World

How politics affect youth deaf culture and debate on cochlear implants.

“A.” *Audiology Licensure vs. Certification* | *Audiology*, American Academy of Audiology, 2018, www.audiology.org/publications-resources/document-library/cochlear-implants-children.

This web source explores the support of youth cochlear implants. Cochlear implants were approved for adults in 1984, and later approved for youth surgery in 1990. There is no specific thesis, although the American Academy of Audiology states, “Research has shown that children with multichannel cochlear implants achieved performance levels that exceeded those of their non-implanted peers who used other sensory aids, including conventional hearing aids and vibrotactile aids” (1). Children are able to improve in auditory speech recognition and production over a course of time, depending on when the implantation occurred, the stages following, and number of channels within the implant. Multicellular cochlear implants are used in pediatric surgery because their research has shown a better outcome. There are no reliable outcomes of the implantation of the cochlear implant, meaning it is specific to that child and/or individual.

This article is reliable because it uses descriptive detail to express the definition of a cochlear implant and all it embodies, the surgical benefits, process, and post-surgery steps. It is a secondary scholarly article because it was written by the Academy of Audiology, which

specializes in hearing sciences. There is no bias present as well as recently updated in 2018. It directly relates to cochlear implants and their medical anatomy. This source contained no specification of peer review, although must be edited by the publisher before posting on the professional website. I will use this to define a cochlear implant, as well as a contradictory paragraph, by using the “benefits” column in comparison to other research found.

DE CLERCK, GOEDELE A. M. “Debating Futures in Flemish Deaf Parliament : Deaf Epistemologies, Participatory Citizenship, and Sustainable Development.” *American Annals of the Deaf*, vol. 162, no. 4, Fall 2017, pp. 350–359. *EBSCOhost*, search.ebscohost.com/login.aspx?direct=true&db=asn&AN=126118007.

This library database article explores the issue of deaf culture within politics. De Clerck states, “Flemish Deaf Parliament aims to provide opportunities for deaf community members to “voice” and to actively address concerns about the future and well-being of the community” (1). The Flemish Deaf Parliament focuses on cultural heritage, equal in current and future education, increased social experience, despite “barriers” set by society. Related to future social responsibility, they promote political participation and advocate for a better quality of services needed for the deaf elderly. The author brings awareness to the deaf culture, emphasizing their disunity and credibility due to the lack of communication and allowance due to their “disability”. The main difference that separates the hearing from the non-hearing is not the lack of communication, but lack of cultural understanding.

This primary source article is somewhat reliable, because research on the Flemish Deaf Parliament provided information up to present day. The research provided information dating back to how others did not view the deaf community as completely “able”. The article is recent,

as it was published in 2017. The article directly relates to the deaf culture in politics from a personal perspective, with little to no bias, more specifically discussing governmental roles and contribution to the inclusion of deaf culture in politics. There is no specification on if the source was peer reviewed. I would use this article as an example of the future children will have with or without cochlear implants, as being severely deaf does not mean that the child is unable to succeed in their future.

Institute of Medicine National Research Council. *America's Children: Health Insurance and Access to Care*. National Academy Press, 1998.

This book explores health insurance in relation to children and needed care. There is no specified thesis. Part one, “*Does Insurance Equal Access to Care*” (1), contained information on insurance and equal access to medical aid, based on social profiles. In regards to children, many families with smaller children tend to be on the lower class level due to their infancy; therefore are unable to get the same aid as an individual whose children are in adulthood. In the 80’s, progression began and children began taking higher priority. Medical Insurance is also based on the state, which determines to laws and amount provided.

This book is a primary source because it provides specific facts and data provided by the Institute of Medicine to present information on the lack of health insurance for children. This data is not current to this date, it was published in 1998. I would say that the data is not completely reliable in regards to the current issues on youth health insurance, as the situation could be advanced or worsened. There is no specification on if the source was peer reviewed, although multiple publishers review the book before being published as a reliable book. I would use this in my paper to describe the health care issues that arise with or without complications in

youth health. Financially, cochlear implantations cost a significant amount of money, just as maintaining the health of a deaf child or hearing child.

Janet Olds, et al. "Perspectives of Young People and Their Parents in the Transition of Cochlear Implant Services: Implications for Improved Service Delivery." *Cochlear Implants International: An Interdisciplinary Journal*, vol. 15, no. 1, Jan. 2014, pp. 2–12. *EBSCOhost*, doi:10.1179/1754762813Y.00000000438.

This article explores youth and young adults with cochlear implants. The transition from young adult to adulthood can be compromised depending on stages, therefore presents a higher concern for children with cochlear implants. This was an interview process with 11 individuals and their parents, as they discussed the transition from young adult to adulthood with their cochlear implantations. Old's Research states, "Patients who received implants as children or adolescents differ from adult recipients with post-lingual deafness, in that they may be at risk for communication and learning difficulties" (3). Many children receive cochlear implants prior to learning communication skills and language. The transition from pediatrics to adulthood expands further into daily life obstacles, as the transition of phases can both improve or damage hearing abilities due to the lack of connection and understanding of that person and the specific care needed.

This article is reliable because it is an interview, therefore it is a primary source and the information came directly from individuals whom shared their experience with cochlear implants. This was not an article that discussed if cochlear implants are beneficial or not, but an article that expresses complications that can arise in the future of youth lives that individuals may not think about prior to making the decision to get a cochlear implant for their child. The

article was published in 2014, therefore it is relatively recent and updated with technologies relating to cochlear implants. There is no specification on if the source was peer reviewed. I will use this as part of the contradictory paragraph, along with the debate on cochlear implants.

Kennedy Institute of Ethics Journal. "Ethical Issues in Cochlear Implant Surgery: An Exploration

into Disease, Disability, and the Best Interests of the Child." Project Muse, Sept. 1997, muse.jhu.edu/article/18557.

This article explores the issues of "the surgical treatment" of deaf children i.e. the cochlear-implant surgery. Kennedy Institute of Ethic Journal states their thesis, "There is something unique about childhood deafness that challenges the value-laden claim that growing up deaf involves a disability and that challenges, therefore, the appropriateness of surgical intervention to mitigate that disability" (1). With this thesis statement, the authors also include their ultimate goal, stating that their research focuses primarily on the special nature of the deaf community and concerns about diversity and inclusion within the deaf community. One way in which the article proves the thesis, is when they begin their discussion about the "deaf-world" and the tight knit community that grows due to the common language ASL (American Sign Language). The political agenda of the deaf-world highlights education for deaf children language and inclusion of interpreters, which relates to the exact treatment of other language minorities, rather than other groups of disability. Through their research, the Kennedy Institute of Ethnic Journal, found that if implanted children would benefit from learning English or ASL to reach the same intellectual growth as both hearing and deaf children.

This secondary source is reliable because it has specific details pertaining to broad aspects of this issue, from the surgery specifically, along with the ethical conflictions, cultural disputes, and a future outlook on the benefits for children that decide to proceed with cochlear implant surgery, including the struggles they may face in the future. I would not say it's current, as it was published in 1997, but the controversy and complications of cochlear implants seems to remain to present day. There is no specification on if the source was peer reviewed, although due to the fact that it is an institute, there is credibility and it is likely a publisher reviewed this article. I will use this in my paper to address the effects of politics on both deaf youth culture and debate on cochlear implants, as the decision to get cochlear implants can largely be in relation to limiting their children from containing complete "disability".

Sabatello, Maya. "The Politics of the Child's Right to Identity in a Disability-Free Society."

International Journal of Children's Rights, vol. 17, no. 2, Apr. 2009, pp. 177–206.

EBSCOhost, doi:10.1163/157181808X312131.

This article explores the issue of prenatal genetic child manipulations. The thesis focuses on disability-related practices, specifically, genetic modifications that are carried out on fetuses in uterus, with the goal of bringing them into full maturation as without disability-related conditions. Sabatello's research results stated, "A deaf child who is born to deaf parents who are members of the Deaf community is not much different from any child who is born to parents belonging to a minority group, and by extension to all other children. Efforts to extract social pressure on such parents to alter the genetic factor before birth are thus, from the child's perspective, unjustified" (201). The author finds that genetic manipulation due to the discovery of a child's development of disability, is found unjustifiable. Sabatello proves this by stating that

inclusiveness of the deaf community may increase if there was fluency in sign language, cultural connection, pride in being non-disabled. The author mentions parental intervention and manipulation, in a manner when children are unable to truly develop.

This secondary article is reliable because there was extensive research done to make conclusions about manipulation of disability. The author covers a variety of information and analysis before stating personal conclusions. I would say there is a sense of bias, as the author makes statements instead of suggestions or factual information. Sabatello includes the research found in order to conclude that decision, but in essence bias is indirect. The article is relatively recent, as it was published in 2009. There is no specification on if the source was peer reviewed. I will use this article in my paper to address the deaf youth culture.

Samaha, Adam M. "What Good Is the Social Model of Disability?" *University of Chicago Law Review*, vol. 74, no. 4, Fall 2007, pp. 1251–1308. *EBSCOhost*, search.ebscohost.com/login.aspx?direct=true&db=asn&AN=29986420.

This article explores disability relating to the disadvantage to the combination of personality and social ability, in to controversy over cochlear implants and sign language skills. Samaha states, "Some individuals of the deaf-world find that cochlear implants are a bad choice for others. They perceive an unhealthy urge to "fix" people who are not broken and an underestimation of deaf people's potential, plus a threat to the number of American Sign Language (ASL) communicants—a core feature of Deaf culture" (22). Cochlear Implants may be viewed in a different way when technology advances. The article provides insight on "Preimplantation genetic diagnosis" (PGD) as becoming popular, but unliked due to the fact that

it is genetic modification of an egg within the womb to prevent future deafness after diagnosing the fetus from tests.

This secondary article is reliable because it was published by the University of Chicago (one of the top 10 universities in the United States), which is one of the national top universities. This is a good source for my paper because it provides information on both cochlear implants and PGD relatings to pediatrics. It was published in 2007, therefore it is somewhat recent. There is no specification on if the source was peer reviewed, but due to the factual information presented, I would estimate that researched reviewed their work collectively to ensure accuracy. I would use this article to discuss the debate on cochlear implants, and the arise of genetic manipulation in prenatal surgery to prevent deafness in an unborn child. This is super important because cochlear implantation technology will continue to advance, therefore PGD may advance as well.

Skelton, Tracey, and Gill Valentine. "Political Participation, Political Action and Political

Identities: Young d/Deaf People's Perspectives." *Space & Polity*, vol. 7, no. 2, Aug. 2003,

p. 117. *EBSCOhost*,

search.ebscohost.com/login.aspx?direct=true&db=asn&AN=11123232.

This article explores the debate on cochlear implants from a parental perspective. The community for a deaf child can be difficult to adjust not only for the child, but also parents. Skelton's thesis states, "This paper seeks to redress the balance and provide a critique of the cochlear implant debate from the viewpoint of hearing parents of a deaf child" (35). Two aspects are focused on, such as cultural appropriation between the deaf community and cochlear

implants. The second, focuses on the idea of the ‘normalisation’ and “abnormality” of deaf children and adults, to allow them to be members of an abundant hearing society. The author includes that the deaf community faces discrimination due to their lack of education and understanding of the hearing culture.

This primary article is reliable because it provides extensive detail of the medical aspect of cochlear implants. I would not say the author is entirely reliable as the journal contains bias, as the author wrote the article in reflection of his own decision to provide his son with cochlear implants. The journal was published in 2013, therefore it is recent and reliable in that regard with updated technology. There is no specification on if the source was peer reviewed. I will use this journal as support for my thesis in relation to the deaf culture and debate on cochlear implants. I do not consider this to be contradictory, as part of the cochlear implantation, the author taught his son British Sign Language, therefore his son is able to maintain his communication and relationship to the deaf community and hearing community.

Valente, Joseph Michael, and Gail M. Boldt. “The Rhizome of the Deaf Child.” *Qualitative Inquiry*, vol. 21, no. 6, July 2015, pp. 562–574. *EBSCOhost*, doi:10.1177/1077800415581885.

This article explores the complications of human communication of youth deaf children and pediatric cochlear implants. The authors’ thesis states, “We attempt to push the boundaries of assumptions that often undergird thinking about what is recognized as meaningful human communication” (1). Aware of the social controversy of youth cochlear implantations, the authors seek to prioritize the meaning of human communication, remaining neutral in the debate over cochlear implants. The authors include their stance on cochlear implants, stating, “that

medical, educational, legal, insurance, and industrial interests promote a one-sided understanding of human communication that reiterates pathologizing assumptions about deafness and valorizes oral communication while downplaying or leaving entirely unsaid the known challenges and limitations of cochlear implants” (Valente 1). This article supports that there is a general belief that cochlear implants “cure” deafness, although the deaf child still struggles to hear. Their research proves that children that have better sign language skills, have a stronger literacy outcome than those with cochlear implants. In essence, the research concludes that cochlear implants only separate children based on life experience with or without the cochlear implant.

This secondary article is reliable, because it includes loads of research done by many individuals that were also cited at the bottom of the article. The authors did not contain bias, instead they made a statement and suggested an action to part take or come in result of the research presented. It is very current, the article was published in 2015, therefore the technology remains significantly the same in regards to improving the cochlear implant. There is no specification on if the source was peer reviewed. I will use this in my paper to address the politics that affect deaf culture, along with the debates on cochlear implantations for children.