



# RESEARCH AT GALLAUDET

A Publication of the Gallaudet Research Institute at Gallaudet University



Spring 1999

## New Procedures May Revolutionize Early Identification of Hearing Loss

By Sylvestro Menzano, 1998-1999 Walter Ross Fellow

Although agreement about how best to educate children with significant hearing loss is difficult to achieve, most educators and professionals concerned with the welfare of such children agree that the sooner hearing loss is identified the better. For children who are born deaf, identification soon after birth can lead to an early search for special services that may help families adjust to the child's special communication needs during a critical developmental stage. In spite of this obvious benefit, however, the average age for diagnosis of hearing loss in the U.S. is currently 2½ to 3 years and does not generally occur until parents have become concerned that their child's speech and language development appear to be delayed.

So, why aren't hearing screenings for newborns universally required? At this time, only ten states require such screenings, even though hearing loss is six times more prevalent in newborns than such conditions as phenylketonuria (PKU) and metabolic disorders, which are routinely screened nationwide through blood tests. The chief roadblocks to universal hearing screening, according to Dr. Brandt Culpepper, a research scientist in Gallaudet's Department of Audiology and Speech-Language Pathology and chairperson of the American Academy of Audiology's Task Force on Infant Hearing, have been that reliable methods for testing the hearing of newborns and infants have only existed since the 1980s and, until recently, these methods were either too expensive or too invasive to be used on all newborns. Luckily, Culpepper says, new technologies now appear to have eliminated all of these drawbacks.

In the early 1980s, a procedure called auditory brainstem response (ABR) was developed that can measure an infant's neural processing of sound, giving a

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Brandt Culpepper

## Inside a Bilingual Program for Deaf Students

By Robert Clover Johnson, Research Editor

The potential value of using American Sign Language (ASL) to teach curricular content, including English, in educational programs for deaf students has been both hypothesized and debated among educators and linguists for at least a quarter of a century. In some ways, the argument is much older than that, but ASL was not identified as a true language on linguistic grounds until 1960, and the concept of bilingual education for deaf students, as opposed to total communication, did not gain national attention until the Second National Symposium on Sign Language Research and Teaching in San Diego in 1978. The subject finally permeated the field of deaf education, reaching parents and teachers nationwide, after the publication in 1989 of Gallaudet Research Institute Working Paper 89-3, *Unlocking the Curriculum: Principles for Achieving Access in Deaf Education* (Johnson, Liddell, & Erting).

Deaf students' access to visual information, proponents of a bilingual approach argue, would make ASL (in the U.S. and much of Canada) the most natural medium for face-to-face classroom communication. English, the argument continues, might best be taught to deaf students as a second language, with status equal to ASL, but with emphasis on reading and writing rather than on speaking the language. In spite of widespread interest in these ideas, few people in the U.S. today have more than theoretical notions of how such "bilingual" education programs might be put into practice. Why? The primary reasons are that such programs weren't even attempted in the U.S. until 1990 and the few

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## Priority Area Research at Gallaudet

By Brenda Rawlings, Acting Director, Gallaudet Research Institute

This issue of *Research at Gallaudet* features two projects conducted during the 1997-1998 academic year with significant support from the Gallaudet Research Institute's Priority Area Research Fund. The GRI is currently in its third year of managing this fund which was established in 1996 to offer financial and sometimes technical assistance to projects the GRI believes will contribute knowledge and scholarship beneficial to deaf and hard of hearing people, particularly in the areas of education and human services. During the first three funding years, the GRI has supported 31 faculty members and graduate students in research dealing with a broad range of deafness-related topics.



Brenda Rawlings

Each spring, proposals are submitted to the GRI by faculty in the various academic departments at Gallaudet and voted on by a Priority Area Research Fund Selection Committee. This committee is guided in its selection process by research priorities established through a process that involves both internal and external advisement. The resulting list of priority research areas includes English language literacy, communication in the classroom, recruitment and retention, assessment, teaching and learning, ASL acquisition in new signers, preparation for the school-to-work transition, the family-school relationship, studies of language and cultural development among deaf children, studies of technologies likely to benefit deaf and hard of hearing people, and studies of the specific needs of certain subgroups of the deaf and hard of hearing population.

### Other 1997-1998 Projects

In addition to the projects by Dr. Brandt Culpepper and Dr. Cynthia Neese Bailes described in this issue, seven other projects received Priority Area Research Fund awards in Academic Year 1997-1998. These projects are listed here by investigator, academic department, and title of project. (Information on 1996-1997 and 1998-1999 Priority Area Research awards can be found at the following website: <http://gri.gallaudet.edu/Priority/>)

# Carol J. Erting (Education) and Benjamin Bahan (Deaf Studies), *Language, Literacy, and Cultural Development in Bilingual Homes and Classrooms.*

# Thomas N. Kluwin (Educational Foundations and Research), Catherine F. Andersen (Undergraduate Studies), and Carolyn A. Corbett (Psychology), *Longitudinal Study of the Retention of Undergraduates at Gallaudet.*

# Jane Freiburg Nickerson (English) and Leslie A. Rach (English), *Using Literacy Portfolios to Promote Self-Assessment Activities in English.*

# Dennis B. Galvan (Psychology), *The Acquisition of Narrative Discourse Competence in Deaf Children with Deaf or Hearing Parents.*

# Jan C. Hafer (Education) and Patricia E. Spencer (Social Work), *An Investigation of Maternal Behaviors Which Support and Facilitate Symbolic Play of Young Deaf Children.*

# James J. Mahshie (Speech-Language Pathology), *Phonatory and Articulatory Factors Affecting the Speech Intelligibility of Deaf Individuals: An Analysis by Synthesis Study.*

# Barbara J. White (Social Work), *Deaf-Parented Adoptive Families: The Effects of Perceptions of Entitlement and Perceptions of Social Support on Family Functioning.*

*Research at Gallaudet* is available free of charge. Address inquiries to *Research at Gallaudet*, Gallaudet Research Institute, Gallaudet University, Washington, DC 20002-3660. Phone: (202) 651-5995 (V/TTY). Contributing to this issue were Robert Clover Johnson, Editor, Sylvestro Menzano, 1998-1999 Walter Ross Fellowship recipient, Brenda Rawlings, Acting Director of the GRI, and Harry Markowicz, a member of Gallaudet's English faculty. Enormous thanks are due to researchers Cynthia Neese Bailes and Brandt Culpepper for the materials and advice they provided for creating this issue and to the teachers of Metro Deaf School for permission to name them and their school. Thanks to Fred D. Brandt for the photo on page 1, to Susan J. King for the photos on pages 2 and 4, to Cynthia Neese Bailes for the images from her videotapes used on pages 5 and 6, and to Patrick J. Harris who made the transfer from videotape to newsletter image possible.

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Thomas E. Allen, Dean  
The Graduate School and Research  
Robert Clover Johnson  
Senior Research Editor

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## Early Identification, Continued from page one

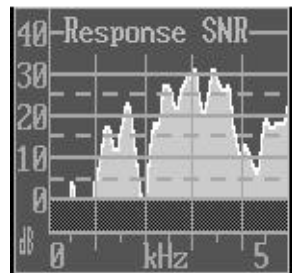
reliable indicator of hearing level. This procedure has been improved over the years and a screening version, called the screening ABR (SABR), is routinely used by some hospitals. Nevertheless, the procedure is typically more expensive and invasive than its alternative. The procedure takes from 15 to 30 minutes to perform and involves the attachment of electrodes.

In 1988, a less expensive and invasive screening tool became clinically available. It was tested and approved during large-scale clinical trials conducted in 1990 by the Hearing Assessment Program, funded by the Bureau of Maternal and Child Health in Rhode Island. This tool, otoacoustic emissions (OAEs), provides a quick, simple, and effective way of screening for possible hearing loss among newborns, infants, and young children.

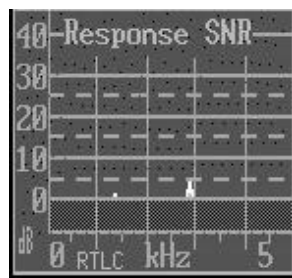
The OAE screening involves the painless insertion of a probe into the ear, which can be done while the infant is sleeping. An auditory stimulus is then presented to that ear. Sound waves from the stimulus travel through the middle ear canal to the cochlea where they cause hair cells on the cochlea to vibrate. The energy created by these vibrations (called OAEs) is then measured. Depending on the magnitude of the OAE measurements, the infant receives an outcome of either “pass” or “refer” (see Figure 1). The entire procedure takes less than 15 minutes, is non-invasive, painless, inexpensive, and easy

**Figure 1. Typical “Pass” and “Refer” response patterns to otoacoustic emission hearing screening tests.**

**Sample “Pass.”** The bright peaks in this chart represent emissions of energy from inner ear hair cells vibrating in response to sound stimuli as expected when hearing is normal. A “Pass” evaluation would be given when this is the result.



**Sample “Refer.”** The absence of energy across frequency range—important for clear audition of speech (the X axis)—represents an OAE recording that would receive a “Refer” evaluation, meaning there is a likelihood of hearing loss and the tested newborn should be referred for additional testing.



to administer, making it an ideal choice for screening large numbers of infants.

In newborns with hearing levels of 0 to 30 dB HL (considered a normal-hearing range), sufficient OAEs are typically recorded for the infant to receive a “pass,” meaning that no further testing is warranted. Infants with hearing levels greater than 30 dBs HL, however, do not register sufficient OAEs and receive a “refer” notice, indicating that further evaluation is necessary. These further evaluations generally involve performing a second OAE and possibly an SABR.

Like all screening tools, the OAE screening is subject to error. In some cases, infants who do not have any hearing loss may be referred for further evaluation, resulting in unnecessary financial cost for the hospital and unnecessary emotional upheaval for the families involved. It is the likelihood of “false positives” that Dr. Culpepper has been seeking to reduce through a close examination of OAE protocols. With the support of a GRI Priority Area Research Grant, Culpepper has been pursuing a project called “Test operating characteristics and pass/refer criteria for hearing screening using otoacoustic emissions.” She is collecting OAE protocol data from 500 adults at Gallaudet University to determine the most accurate pass/refer criteria. She then plans to use this data to examine whether the results can be applied to newborns.

OAE screenings are not “hearing tests” in the traditional sense, because they are pre-neural. That is, they do not measure whether the infant’s central nervous system (CNS) is able to process sound, but rather whether the cochlea responds normally to sound. This lack of CNS involvement allows the OAE screening tool to measure hearing loss in newborns with under-developed or compromised neural systems. “When used in conjunction with the SABR,” Culpepper says, “OAE screening provides us with much more information than we had before.” In addition, because the OAE screening tool does not require a behavioral response from the infant being tested, it can be used not only with newborns and infants, but also with malingerers and individuals with physical or cognitive limitations that prevent the usage of traditional hearing evaluation techniques.

According to Culpepper, the development and improvement of the OAE screening tool “will change pediatric audiology as we know it.” The procedure, she says, will allow professionals to identify hearing loss immediately and recommend services leading to improved communication between deaf and hard of hearing infants and their families. She also notes that Congressman Jim Walsh (R-NY) recently introduced a bill (H.R. 1193) recommending that the federal government provide money to states endeavoring to implement the universal hearing screening of newborns. If this bill becomes a law, she says, much of the credit goes to the existence of the OAE screening tool.

## Bilingual Education, Continued from page one

programs established since haven't had the resources to conduct in-depth research on their own practices.

Nevertheless, according to data from the Gallaudet Research Institute's Annual Survey of Deaf and Hard of Hearing Children and Youth, the percentage of deaf students reportedly taught through "Signs Without Voice" (a term used by Gallaudet researchers to indicate ASL), has risen during the last decade from less than half of one percent (1989-1990) to 4 percent (1996-1997), the latter percentage representing a small but significant number of students (roughly 1,870). Insufficient data are available to determine whether these students are truly being taught in ASL-English bilingual programs, but a survey is currently being considered at Gallaudet that would help gather such information. Also, a few studies are underway or completed that were designed to gather descriptive information about some of these programs, and there are plans to pursue long-range studies of the educational and achievement results of such programs in the years ahead.

Because some programs do exist that are endeavoring to realize the promise behind the theory, a number of researchers have realized for some time the importance of finding out what such programs see as their underlying principles, what they are actually doing, and what the results at least appear to be so far. One such researcher is Dr. Cynthia Neese Bailes, Director of Gallaudet University's Undergraduate Teacher Education Program, who recently completed a study—supported by a GRI Priority Area Grant—entitled "Primary-Grade Teachers' Strategic Use of ASL in Teaching English Literacy in a Bilingual School Setting." Although Bailes insists that her study provides little more than a glimpse into one school program, many readers will no doubt wish to take notes on the many practices of this program, which Bailes describes in some detail.



Dr. Cynthia Neese Bailes, Director of Gallaudet's Undergraduate Teacher Education Program

## A Bilingual School for Deaf Children

In her study, Bailes examined the principles and teaching practices of a team of primary-grade teachers at Metro Deaf School, a kindergarten-through-fifth-grade program for deaf children established by charter in 1993 in St. Paul, Minnesota. The school is definitely atypical in that it was established for the purpose of providing bilingual education for deaf students and in that it has more deaf than hearing teachers on its staff. Since its inception, Metro Deaf School has used ASL as the language of instruction, using ASL to teach English as a second language. ASL is also explicitly taught in the school, including instruction in the grammatical principles of ASL.

Bailes concentrated on grades K through 3, which included 19 students taught by a team of four teachers. Three of the teachers were deaf, two of these from deaf families. The fourth teacher was the hearing child of deaf adults (a "coda"). All four teachers were certified to teach in their state, all were native-level ASL signers, and all rated themselves as fluent in written English. Bailes examined school documents, videotaped interviews with teachers and parents, and videotaped and analyzed scores of hours of classroom instruction.

## Underlying Principles

Bailes devoted a significant amount of her study to determining the principles that governed the teachers' practices. The first principle, articulated by all participants, was that teachers of primary-aged deaf children should be models of language fluency in both ASL and English (in its written form). The teachers also stated that sign language needs to be established as the first language of deaf children because it is the language these children can most naturally acquire. Inherent in this second principle was the belief that knowledge of ASL provides the framework for English literacy instruction.

A third principle was that opportunities should constantly be sought to build deaf children's world knowledge. Deaf children from homes where ASL is not used well or at all generally enter school with large gaps in information. Teachers therefore should take every opportunity to provide information on a wide range of topics, knowing that such information is critical to the development of reading, writing, and thinking.

A fourth principle was the promotion of an awareness of the structures and functions of ASL and written English. The children's developing knowledge of ASL was used to foster connections and comparisons with English structures and functions, on the assumption that an understanding of how ASL and English are either similar or different plays a key role in the reading development of deaf children.

Teachers also believed students needed some time each day to read, discuss, and write about books without interruption and correction by teachers. These occasions, they believed, were important for building the students'

confidence that they could use approximations of both ASL and English effectively on their own.

The final principle was that parental involvement was needed to support and extend the children's experiences at school. Teachers asserted that parents should try to keep up with teacher assignments, read and discuss books with their children as much as possible, and use ASL with their children to whatever extent they can.

### Using ASL to Teach English

The second area Bailes focused on was how teachers used ASL to teach English. During reading and writing classes, both languages were modeled, ASL as the language of instruction and discussion, and English as the language for reading and communicating through writing. The teachers read storybooks daily, first read-ing, then signing part of the story in ASL. In doing so, the teachers modeled reading in English, as well as sign-ing in ASL. This practice also generated interest among the students in the books the teachers were reading.

Several strategies were used to enable students to make comparisons and associations between forms, structures, and functions of ASL and English. The teachers frequently used a "chaining" technique to foster mental associations between ASL and English by, for example, fingerspelling, signing, and writing in turn words or phrases that have the same meaning. Similarly,



A first grader using ASL to discuss a book with teacher Estella Bustamante

teachers would often fingerspell a word or phrase, then either write or sign the same concept, following this by fingerspelling the word or phrase again (the "sandwich" technique). Bailes noted that such exercises appeared to build lasting associations in the students' minds.

The teachers involved the students in translating from English text to ASL because they believed that doing so fostered reading for meaning. Also, they involved the students in translating from ASL to English because they

believed that this process could be used by students as part of their writing process. Sometimes teachers made corrections, helping the students reduce errors in their English and ASL. Other times, students translated without teacher intervention, working together on research projects, using ASL to discuss the meaning of texts they read and to discuss the content of English writing they would attempt concerning some topic.

### Strengthening Skills in ASL

The fact that all instruction took place in ASL meant that students had to learn to pay attention to others' signing as well as to their own. The children were taught to make sure they had everyone's attention before signing, just as the teachers always did. Group conversations took place during news sharing sessions as a means of improving informal signing, and students signed stories to each other during free reading periods. Presentations and plays provided opportunities to sign in front of larger audiences. Videotapes were used as "first drafts" students could improve upon as a way of preparing for formal presentations. (Children also used writing to record brainstorming sessions, later expanding their ideas in both ASL and written English.)

ASL was taught to first through third graders as a formal course three times per week. Games that centered on forms and usage of ASL were the focus of these classes. The children were immersed in activities that promoted awareness of such aspects of ASL as handshapes and non-manual grammatical markers. Handshape games elicited an awareness of the many handshapes used in ASL and signs that can be executed with each. (Equivalent English words and phrases were stressed during these games.) Non-manual grammatical markers, involving facial expressions and movements of the body, were another ASL element focused on during these classes. These markers are akin to intonation and inflection and convey syntax and meaning.

### Limitations and Conclusions

Bailes emphasizes that her study was intended to provide a description and analysis of the principles and practices at work in one bilingual program for deaf students. No pre-tests and post-tests were conducted to obtain standardized measures of gains in reading, writing, or ASL skills in the course of her study. Nor were control groups of deaf students in total communication or oral programs studied and compared. Bailes states that for these reasons her study should not be interpreted as a definitive answer to general questions about how best to educate deaf children.

Nevertheless, it is obvious from Bailes' description of Metro Deaf School that the deaf students there were fully

engaged in the process of learning and that their teachers' fluency in ASL was creating a barrier-free learning environment for these children. "It was clear to me," Bailes states, "that the students were intricately involved in classroom discourse, and were not only learning content through ASL, but also learning about languages—both ASL and English—through ASL." This impression, supported by all the details of her study, is Bailes' basic conclusion. Educators already interested in learning more about the inner workings of a bilingual program for deaf students will no doubt want to obtain copies of Bailes' dissertation from University Micro-films. (The order number is not yet available, but you should be able to obtain ordering information soon by calling University Microfilms at 1-800-521-0600.) Those who first want proof that this approach is superior to others will have to await other studies.

### Implications

One reason *Unlocking the Curriculum* caused such a stir in 1989 was its assertion that deaf education programs in general have been a "failure." To support this assertion, the authors cited data from Stanford Achievement Test (SAT) scores showing that the reading skills of deaf 18-year-olds, on average, had remained at roughly the fourth-grade level for the previous 20 years, in spite of the widespread acceptance and implementation of a total communication philosophy in schools. The authors expressed the belief that the students were achieving at low levels because their teachers, though signing, were also speaking at the same time ("Sign Supported Speech"), forcing them to sign in English word order (which in itself renders signing more difficult than ASL for most deaf students to understand) and reducing the teachers' ability to concentrate on accuracy and fluency in their signing. *Unlocking the Curriculum*, in other words, shifted the blame for deaf students' low achievement levels away from deafness and deficiencies in the students toward problems in the way teachers tend to communicate with deaf students. The authors recommended, as an alternative to total communication programs, programs very much like the one later established at Metro Deaf School, stating that it was their belief that such programs would enable deaf students to read, write, learn, and think as well as hearing children.

Ten years after the publication of *Unlocking the Curriculum*, 18-year-old deaf students' reading skills, on average, are still measured by the SAT as being at roughly the fourth grade level. We do not yet have data proving that programs such as the one at Metro Deaf School will eventually bring about dramatically different results, but Bailes reports that "participants frequently stated that deaf children could and should achieve at rates comparable to their hearing counterparts."

Such optimistic predictions may or may not be realized by this or any other current bilingual program for deaf students. Nevertheless, Bailes' study should



Third graders seek the advice of their teacher, Amy Hile, while planning a formal ASL presentation of a research project.

help generate renewed interest in supporting programs such as Metro Deaf School's and in supporting research aimed at providing more answers to everyone's questions concerning the effectiveness of such programs.

### Special Review Essay

## A Kindred Response to a New Annotated Bibliography About Codas

By Harry Markowicz, English Faculty

In 1973, I asked a fellow graduate student in the Sociolinguistics Program at Georgetown University where she was from. Like me and most students in the program, she was in her mid-thirties, and like me, she spoke English fluently, without an accent, yet with a difficult-to-identify foreign intonation. Her response was somewhat vague and disconcerting: "France . . . Switzerland. Where are *you* from?" For me, the answer to this question depends on the context and who is asking it. By the age of 13 I had lived in three different countries and three more by the time of this encounter. Usually, I would answer simply "Seattle," but I hesitated while figuring out how much I was willing to reveal. Before I could decide, her next statement caught me off-guard: "You don't have to say anything . . . I understand." Although no information had been exchanged, not even our names, we knew we had just shared a secret about our childhood.

Many years later, I helped organize a group in the Washington/Baltimore area which has been meeting monthly for the past 15 years. Spontaneously, other groups such as ours sprang up in other cities in the U.S., Canada, Europe, Australia, and Israel. We called our-selves Child Survivors of the Holocaust. Within a year

we held our first national conference which later became annual and international. Though we came from almost every Nazi-occupied country and our stories are very different from each other—some lived in hiding, some passed for Christians, some were shipped in children's transports to England in 1939 never to see their parents again, others lived on their own in forests, and still others survived ghettos and concentration camps—among ourselves we don't have to explain ourselves.

Our meetings and conferences have had a profound effect on our lives. We became aware that our childhood experiences—both during the war and after as immigrants in new countries—contributed to making us who we are and explained in part the choices and decisions we have made. By sharing our personal experiences and painful memories, most of us for the first time in our lives, we realized that we were not unique. Others like ourselves could understand us and the deep feelings that had been hidden for a lifetime. We discussed issues such as identity (Why do we feel like outsiders everywhere? Why do we feel so alone, even when we are married and have families?), anger (We were robbed of our childhood. The usual parent-child relationship was permanently damaged by the Holocaust.), resentment (Our parents didn't protect us against the outside world . . . or they gave us away to strangers.), role reversals (Those of us lucky enough to have one or both parents alive after the war found that they used us to face the outside world because as children we acquired the languages and the cultures of the countries in which we lived.), and embarrassment (Because of our parents' foreign ways and limited linguistic ability—they may have known several languages but that did not count since they were not fluent in the languages of the countries where we lived—we rarely invited our friends to our homes.). Participation in this group, for some more than others, has been a liberating experience, enabling us to acknowledge buried memories ("You were too young to remember. Just get on with your life!"). The process of discovering our identities seems endless.

One positive aspect is that we feel like brothers and sisters with all the sibling rivalries and conflicts that entails.

Recently, upon reading the introduction to Thomas Bull's exciting new annotated bibliography of materials about hearing children of deaf adults (*On the Edge of Deaf Culture: Hearing Children/Deaf Parents*), I found confirmation that there are many interesting parallels between the experiences of codas (hearing children of deaf adults) and the experiences of members of my group. Bull describes himself as always having felt alone and different from others because he had deaf parents. Like many codas, he was often unsure whether he was hearing or deaf. (Such an identity conflict reminds me of the many Jewish

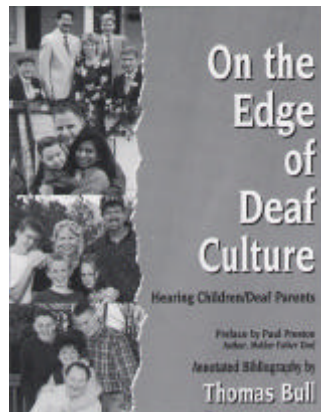
children who survived the war by assuming Christian identities. I was known during much of the war as "Henry Vanderlinden.") Bull recalls the painful memory (as a 12-year-old), of acting as the intermediary between his deaf parents and a funeral home as they selected a casket for his grandmother. He also remembers embarrassing moments when as a young boy he signed in ASL in front of his peers. Another un-pleasant memory was witnessing his father's helplessness when trying to get assistance from neighbors when his sister fell ill one night. It was not until Bull became associated with the CODA organization well into adulthood that he started coming to terms with the different parts of his identity. He attended his first CODA conference in 1986 and describes its impact as follows:

My experience was personally dramatic. For me the sense of isolation and aloneness yielded to the camaraderie and joy I found. Over the last few years, I have shared what I thought were the experiences of a jaded personality with my coda brothers and sisters. Replace the word 'coda' by 'child survivors of the Holocaust' and you could be quoting members of my group word-for-word.

Bull's annotated bibliography contains 2,200 citations and 104 organizational resource references, making it an invaluable tool for codas, deaf parents, service providers, researchers studying codas, or other groups whose members have special affinities with each other. This 350-page softbound book contains a preface by Paul Preston, author of *Mother Father Deaf* (described on page 20), as well as the introduction by Bull. The bibliographical part—full of helpful annotations—is divided into separate sections: books; journal articles and book chapters; newspaper, magazine, proceedings, and newsletter articles; CODA conference proceedings and chapter newsletters; Ph.D. dissertations and M.A. theses; video and audio tapes, films, and compact discs; information about, by, and for deaf and disabled parents; miscellaneous publications (including mono-graphs, reports, brochures, manuscripts, Internet articles, and difficult-to-obtain papers).

There are also sections on obtaining information from international resources and instructions for using Gallaudet University resources.

In his introduction, when Bull describes his family, it's as if I knew it already. He draws parallels between his own family and the family depicted in Joanne Greenberg's *In This Sign* (described on page 17), a book I read almost 30 years ago. As a student, like the grandson in the novel, Bull participated in the civil rights movement, inspired to fight discrimination and social injustice. The child survivors belong to an older generation but many of their children took part in that movement. It's also worth noting that a very high percentage of child survivors are in the helping



professions: social workers, therapists, psychiatrists, and teachers. The development of the CODA organization has been accompanied by a vast increase in the coda literature. Similarly, as child survivors have come to terms with their experiences and accepted the legitimacy of their memories, they have written many new books that shed light on a previously neglected aspect of the Holocaust.

The discovery that one has affinities with others marked by special circumstances in their childhood can be liberating, whether the experience is that of a coda or of a child survivor. However, for whatever reasons, some prefer to assimilate by denying their past. For example, Madeleine Albright, our Secretary of State, only recently acknowledged her Jewish origins, after having believed her whole life that her family had always been Christian. I would guess that of the 1.5 million people Bull estimates to be codas in the U.S. many choose to dissociate themselves in part or fully from the Deaf community. In a very moving scene in the excellent documentary videotape *Passport Without a Country* (described on page 226), one of the codas interviewed explains that he left England for Australia to get away from his deaf parents; nevertheless, he adds tearfully that

after many years in Australia he began to visit deaf clubs there because he found, to his surprise, that he needed contact with deaf people.

Readers wishing to respond to the above essay are encouraged to write letters to the editor (or send e-mail to robert.c.johnson@gallaudet.edu) some of which may be printed in a future issue of this newsletter. Individuals or groups interested in ordering copies of *On the Edge of Deaf Culture: Hearing Children/Deaf Parents* may write to Deaf Family Research Press, P.O. Box 8417, Alexandria, VA 22306-8417 or contact the author by e-mail (tomthe@aol.com).

### New College and Career Guide Available!

The Gallaudet Research Institute, in collaboration with the National Technical Institute for the Deaf, has published the tenth edition of *College and Career Programs for Deaf Students*. This 142-page, softbound book describes post-secondary programs throughout the nation that provide support services for deaf and hard of hearing students. It provides information concerning accreditation, costs, deaf enrollment levels, special services, and other information for 149 programs, organized by region of the U.S. Individuals or programs interested in ordering the book should call Brenda Rawlings at (202) 651-5575 (V/TTY).



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