REPORTS OF HEARING MOTHERS ABOUT THE PROCESS OF COMMUNICATION WITH DEAF CHILDREN

RELATOS DE MÃES OUVINTES SOBRE OS PROCESSOS COMUNICATIVOS COM FILHOS SURDOS

RELATOS DE MADRES OYENTES SOBRE LOS PROCESOS DE COMUNICACIÓN COM HIJOS SORDOS

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ABSTRACT: This study aims to describe the process of communication between hearing mothers and deaf children at home. This study counted on the participation of three hearing mothers with deaf kids of school age. For the collecting of data, audio-recorded interviews were conducted with the mothers. The results showed that mothers make constant use of speech and familiar (homemade) gestures to communicate with deaf children and they consider the communication processes satisfactory, although sometimes difficult. The nonacceptance of the deafness condition can be found between the lines in their answers, because was revealed the expectation that the children will hear and speak to achieve a better development. It was evidenced that there was no mention from the mothers to the possibility of communication by Sign Language with their deaf children, what could favor the language development and the children's learning.

KEYWORDS: Deafness. Communication. Family. Learning.

RESUMO: Este estudo tem o objetivo de caracterizar os processos de comunicação entre mães ouvintes e filhos surdos no lar. Participaram deste estudo três mães ouvintes com filhos surdos em idade escolar. Para a coleta dos dados, foram realizadas entrevistas em áudio gravadas com as mães. Os resultados apontaram que as mães ouvintes fazem uso constante da linguagem oral e de gestos caseiros para se comunicarem com as crianças surdas e consideram os processos de comunicação satisfatórios, embora algumas vezes difíceis. A negação da condição de surdez encontra-se nas entrelinhas das respostas e revelou-se a expectativa de que as crianças venham a ouvir e falar para melhor se desenvolverem. Evidenciou-se que não houve menção pelas mães da possibilidade de comunicação por Língua de Sinais com seus filhos surdos, o que poderia favorecer o desenvolvimento da linguagem e da aprendizagem das crianças.

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PALAVRAS-CHAVE: Surdez. Comunicação. Família. Aprendizagem.

RESUMEN: Este estudio tiene el objetivo de caracterizar los procesos de comunicación entre la madre oyente y el hijo sordo en el hogar. Participaron de este estudio tres madres oyentes con hijos sordos en edad escolar. Para recoger las informaciones fueron realizadas encuestas audios grabadas con las madres. Los resultados apuntaron que las madres oyentes hacen uso del lenguaje oral y de los gestos caseros para se comunicaren con los niños sordos y consideran los procesos de comunicación satisfactorio, todavía algunas veces difíciles. La negación de la condición de sordez encuéntrase en entre líneas de las respuestas se reveló la expectativa de que los niños vengan a escuchar y hablar para mejor desarrollo. Quedó claro que no hubo mención por las madres de la posibilidad de comunicación por lengua de señales con sus hijos sordos, lo que podría favorecer el desarrollo del lenguaje y aprendizaje de los niños.

PALABRAS CLAVE: Sordez. Comucicación. Familia. Aprendizaje.

Introduction

The child is signified and reframed in the mother's speech and it is, from alienation, or not, to this maternal place that the child will be constituted, according to French psychoanalysis, from Lacan, as referred by Lieber (2015). Furthermore, since Sign Language is a different language from that used by hearing mothers with deaf children, it makes these mothers feel like they are immigrants in their homes (FORMIGONI, 2004), as they are unable to communicate, leading them not to accept this situation.

The impact that occurs and involves the parents at the moment of discovering their children's deafness causes, initially, a distance between them, either by the deafness itself or by the escapism, which causes the deaf child to be harmed in their biopsychosocial formation process since early childhood, which ends up compromising his whole life. To make up for this damage, there is a fundamental need for knowledge of Sign Language, as a form of communication between hearing parents and children with deafness. The distancing of family members in the communication process with the deaf subject is the first linguistic barrier with implications for social inclusion and language development for the deaf subject (FRANCO, 2015).

Human interactions start at the family level, which, being considered the first school, is where children's abilities are developed, becomes the ideal place to start basic development for the deaf child. Tavares (2011) refers that there is the possibility of taking advantage of all the opportunities for stimulation generated in the home, in the case of prepared parents and mothers aware of their role of welcoming and interacting with the deaf child. Thus, parents'

understanding of deafness is essential for the quality of their deaf children's education, since the language acquisition process is a subjective constitution of the child, initiated from the first ties of interaction with the mother.

In this context, there is a need to understand how communicative experiences occur in families with Deaf children, as well as whether they are aware of the difficulties generated by the probable barriers to communication failures. It is understood that the knowledge of differentiated and more favorable methods for the development of communication with the deaf would be essential and would contribute to the fundamental family interactions for the development of deaf children.

Methods to develop communication for the deaf: oralism

Since 1878, when the 1st International Congress on Deaf Education took place in Paris, this theme has been debated. At this congress, two fronts regarding deaf communication were defended: the appreciation that speech was better than using gestures and the idea that gestures were also important for children to communicate (FRANCO, 2015). In addition, the spread of the importance of the role of the family in education and social integration of the deaf has begun. According to Franco (2015, p. 37, our translation), "the event also brought some civil gains for the deaf, such as the right to sign documents".

In 1880, the Second International Congress on the education of the deaf took place in Milan, when there were many changes regarding the approach to the education of people with deafness. The preparation of this congress counted with most listeners and oralized deaf people in order to create strength, with regard to the education of the deaf. According to Paiva (2000, p. 34, our translation) the main considerations made at this congress were as follows:

[...] the indisputable superiority of the speech over the signs to reintegrate the deaf mute into society and to give them a better knowledge of language, the pure oral method should have preference over the signs. [...] the simultaneous use of speech and signs has the disadvantage of impairing speech, orofacial reading, and the accuracy of ideas, the pure oral method should be preferred.

It was decided, then, that oral language was superior to sign languages and that, in this way, deaf people should learn to speak. The use of any gestures or sign language was prohibited. Thus, the whole world started to use the oralist method for approximately one hundred years, which were called one hundred years of oralism (LIEBER, 2015).

The fact is that listeners are dominant in society. Thus, the imposition of oralism as a form of communication with the deaf, in addition to the belief that the deaf could easily and naturally adapt to the condition of being deaf, indicates understanding deafness as an organic condition with the possibility of being cured and rehabilitated within the scope of "[...] corrective pedagogy, installed at the beginning of the 20th century" (SKLIAR, 2013, p. 7, our translation). Thus, the imposition of speech, aiming at a cure for the deaf to be able to hear and speak, has persisted over time.

Oralism is a method that perceives deafness as a disability that must be minimized by speech, however, it develops through auditory stimulation. It is understood that this stimulation enables speech and makes the deaf child integrate with the listening community. Thus, it is possible to say that the purpose of oralism is to make a hearing rehabilitation in the deaf child towards normal speech.

According to Goldfeld (1997), oralism or oral philosophy aims at the integration of the deaf child in the community of listeners, giving them conditions to develop the oral language, in the case of Brazil, Portuguese. The idea of language, for most professionals in this philosophy, is restricted to oral language and for them, this must be the only form of communication for the deaf.

The data found in the literature on oralism show that during childhood, deaf people, encouraged to use orality, most of the time, do not have a good understanding of what they are told. The oralist method has a view of the deaf as someone with a disability who needs, at any cost, to learn an oral language, which allows their acceptance in society in general.

The difficulties generated by the communication barriers of the deaf with his family, such as the absence of a shared language, the insistence on the use of oral language, the use of indicative gestures or understood only at home, to the detriment of the use of sign language, since early childhood and in the first years of school life, makes the deaf at a disadvantage in relation to the listener, as he uses his mother tongue since birth and acquires relevant knowledge and information for his development through a shared language by his family members.

The importance of the mother for the child's emotional development in the first year of life

According to Winnicott (1993), the mother plays a fundamental role in the child's development. There is something about a baby's mother that makes her qualified to protect

her child in the vulnerable stage. The mother is able to play this role when she feels safe, loved in her relationship with the child's father and with her own family, when she feels accepted in the increasingly broader circles that involve the family and constitute society and love for the baby.

Winnicott's theory contains a series of propositions supporting the child's development. The initial proposition is that there is, in the psychological universe, a tendency to development that is innate to human beings, corresponding to the growth of the body and the gradual development of certain functions. The evolutionary process of emotional development is similar to the baby's sitting, which usually occurs around the age of five or six months and when walking, around the age of twelve months. But "[...] this natural growth is not seen in the absence of sufficiently good conditions, and that difficulty consists partly in establishing what those conditions are" (WINNICOTT, 1993, p. 5, our translation). The conditions that are found involve several aspects of the mother-child relationship in the integration of the personality.

The first stages of this lifelong process, which Winnicott (1993) called painful, occur in early childhood when the mother provides the baby with a facilitating environment to present fragments of reality, depending on the development phase of her child, to enable this child to cope with reality. This occurs in the relationship between mother and baby, which favors the integration process. If there is no favorable environment between mother and baby, for example, a mother who is very nervous, anxious or depressed, the necessary relationship will be impaired and make it difficult to continue the process. As the relationship between mother and baby develops in a conducive environment, the baby intrudes the mother's auxiliary ego and, in this way, becomes able to be alone without frequent support from the mother or a symbol of the mother.

In this way, it is understood the importance of the maternal figure in the process of satisfactory constitution of the child in its first year of life. However, it is necessary that the mother is in sufficiently good condition for the interaction to take place and trigger the integration of the child's personality and emotional development.

In this process, a language shared by both is essential, for this, it is necessary to think about the proposal of Bilingualism³ for the communication of the Deaf. The use of Sign Language, as the first language of the Deaf, is the guarantee of respect for their language.

³ There are two distinct ways of defining bilingual philosophy. The first defends that the deaf child must acquire the Sign Language and the oral modality of his country and be literate in the official language of his country; and the other believes that it is necessary for the deaf to learn the Sign Language and only the written modality of the official language of his country (GOLDFELD, 1997).

When we speak in language, we must not forget that language is not just a set of rules, but the culture of the people who use it. The Deaf, when in contact with the deaf community and their language, starts to interact in a socio-affective way with their peers through Sign Language and, thus, will be able to perceive the world in a more autonomous way. Paiva and Silva (2000) understand that the deaf child may have an intellectual capacity similar to that of hearing children, as long as they acquire and internalize a language from an early age, thus promoting the evolution of the first social communicative exchanges.

Although there are cultural differences between hearing parents and deaf children, according to Goldfeld (1997), the most appropriate solution for satisfactory communication for deaf children seems to be bilingualism. However, to ensure linguistic and cognitive development it is important and necessary that they live with the deaf community through a contextualized dialogue by Sign Language.

It is necessary to understand how much the interaction between the listening mother and the deaf child can be impaired, in case there is no such sharing of language. According to Winnicott (1993), the baby needs a mother who favors his emotional development, therefore, she needs to be well to create environments that are conducive to interaction. If there is a denial of deafness, accompanied by the use of oral language and based on anxiety for an oral communication between the mother and the child, how can this prevent the child from integrating in this process through deafness? In later stages, shown by theory, the mother will depend on the child's intellectual processes, expressed through a shared language to gradually regain her own life. Therefore, if the child takes too long to express his intellectual processes in the language used by the mother, there will be an extension of the excessive care relationship, which, consequently, may cause conflicts and delays in the emotional development of the deaf child.

Method

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A qualitative investigative research, with project duly approved by the Research Ethics Committee with human beings, via Plataforma Brasil (CAAE no. 1831115), whose focus was understanding how communicative experiences of hearing mothers at home with their Deaf children is covered in this article. Hearing mothers with deaf children, living in a city in the interior of the state of São Paulo, were invited to participate, taking into consideration as inclusion criteria that mothers should be listeners and their deaf children of school age, attending early childhood education or the years elementary school. Four mothers were

contacted, however, only three agreed to participate in the research, now called fictitious by the letter M and numerals (1, 2 and 3).

Access to the mothers of deaf students was made possible by the Municipal Education Department and the first contacts were made by telephone. After the mothers' initial acceptance, it was possible to schedule dates and times for the researcher to go to the home of each of them, when the objectives of the research were explained and formal authorization was requested for the individual interview, which was consolidated in the residence itself, in a private place. The interviews were audio-recorded and duly transcribed to proceed with the survey of the most recurring themes, namely: modalities of communication with their Deaf children and effectiveness of the communicative process.

The interview scripts were prepared by the researcher. The questions explore the importance of the relationship between the concept of deafness that adults have and the psychosocial development of the deaf child. It was considering that the family and the school represent the two main environments of human development in contemporary societies, we also sought to identify how listening mothers describe the forms of communication established with their deaf children in childhood and their expectations about the development of these children, in addition to understand the effectiveness of the communicative process in the home.

Hearing mothers' perception of the communicative processes experienced at home with their deaf children

At the beginning of the interview, all participants were eager to talk about the subject and all three were enlightening in their answers, which were permeated by memories, mainly about the discovery of their children's deafness.

Regarding the way in which communication between mothers and their deaf children takes place, mothers were unanimous in saying that they consider it normal to use oral language, similarly to that used with other adult interlocutors or hearing children. In other words, they consider the process to be satisfactory. Two of them cited the use of gestures to complement communication at certain times, without making reference to LIBRAS but to homemade gestures.

> With my son I always try to speak with my mouth with him, sometimes if I realize that he doesn't understand, sometimes, I show him what I want and then, and he hears what I'm saying to him (M1, our translation).

Usually, as if I were here talking to you, I talk to her, normally (M2, our translation).

Today, normal. She had an implant at the age of two and started speaking at 6 months of age, at the age of one she was just babbling. She started to listen at the age of three, at this stage the communication was through homemade gestures (M3, our translation).

When referring to listening, having normal hearing, as something necessary for the communication process, the mothers' responses corroborated the strong influence of corrective pedagogy, established in the 20th century, in which the Deaf would fit into a model of medicalization of deafness, as they show the expectation that their children can be healed and start listening. It should be noted here that they have been over a hundred years trying to correct and normalize the education of the deaf, with special institutions regulated by charity and beneficence in the search for the cure of deafness (SKLIAR, 2013). In this perspective, the social culture of controlling, separating and denying the existence of the deaf community, of Sign Language, of deaf identities and visual experiences, which determine the set of differences of the deaf in relation to any other group of subjects, was maintained.

When mothers emphasized, in their responses, the use of oral language as exclusive with their deaf children, they revealed that they did not seek other forms of communicative approach within reach of the deaf. Therefore, probably, mothers had unsatisfactory processes of communication with their children and, consequently, of mother-child interaction in early childhood. There was a probable deficit in the issue of the child's emotional development, which occurs from the constant presence of sufficiently good conditions in the various aspects of the relationship between the mother and the child (WINNICOTT, 1993); being that human interactions are permeated by language, which offers the meaning of concrete, or not, things in the child's context (VYGOTSKY, 1998).

As a result of the direct question about how mothers evaluated the communicative interaction between them and their children, the responses were quite firm regarding the communicative interactions being satisfactory, under any circumstances. With this assertiveness, the mothers made it clear that they did not accept deafness, believing that the children understood everything with the use of oral language.

The mothers' statements made evident the denial made about deafness. M1 stresses that she is not fully convinced that the communication process has been satisfactory, because, although she believes that the child understands everything, she associates this understanding with the learning obtained at school and distances herself from interactions at home. M2 was insecure in the response and revealed contradictions with the previous answer, in which she

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pointed out that she indicated objects when the child did not understand the message, indicating that the daughter always listens and understands, even at a distance, the process is satisfactory. M3 reports speaking normally with her daughter and highlights that she understands everything, even when she watches television, but the deaf daughter does not listen to music due to rhythm issues. In this case, M3 gives evidence that the daughter's understanding with orality is satisfactory, being the only exception the perception of music.

> I think so, he understands everything. He learned a lot this past year at school (M1, our translation).

> Yes, very, very, we are very... (Interviewer: but does she understand everything you say, or do you sometimes need to show?) No, she understands everything I say. Interviewer: and when you talk to her from a distance, do you need to get closer?) Normally, as if I were talking to you, I talk to her. (Interviewer: if you are in one room of the house and she is in another, does she understand, or do you have to get closer?) Even though she is far away, she understands (M2, our translation).

> Yes, today we talk to her normally, at home everything is normal, when watching television she understands everything, but she listens to music and doesn't understand the lyrics, she cannot keep up with the rhythm because it is very fast (M3, our translation).

Even when asked more objectively about the possibility of using different forms of communication to better understand their deaf children, the mothers maintained lines similar to those already mentioned in the previous questions, ignoring the possibility of using Libras and hoping that their children would understand them by oral language or homemade gestures. This makes it clear that they have no other communication strategies. This opinion was reinforced by M3, when saying that with the orality developed by the daughter, it provided an improvement in the communication process.

> *No, just speech and showing the object, is what has to be done* (M1). No, no need, everything normally (M2). When she was not oralized, we had to face each other to talk to her, currently, we don't (M3, our translation).

Certainly, if the oral language and the indicative gestures do not produce a fully satisfactory communication, as it seems to occur according to the responses obtained, the interaction between the listening mother and the deaf child is impaired. As such, the effective understanding between a listening mother and a deaf child, which is very important in the issue of affection between them, essential for development, will also suffer. It is understood that the child's development is not static in the context in which it occurs nor fixed in itself, it

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is always in a state of transformation in relation to the child's age and needs that are in constant change. For this, it depends on the necessary conditions of an affective process of interaction between the mother and the child for the individual growth of the child (WINNICOTT, 1993). In this case, the communication processes described by the mothers may have been deficient. In the absence of truly satisfactory and effective communication processes, necessary for the interaction between the mother and the child, significant losses can occur in the emotional development and, consequently, in the child's overall development.

It also stands out, as relevant data, in the mothers' analyzed responses the non-acceptance of deafness, evidenced by the constant attempts to make the child listen in different ways, understand the oral language and the lack of reference to the use of Sign Language, mothers did not consider using Libras with their Deaf children. This positioning reveals the belief that children who use LIBRAS are disqualified when compared to those who learn to speak, as highlighted by Schiavon (2012). It is necessary to emphasize that Libras is considered a language and that all deaf children can acquire Sign Language as long as they participate in everyday interactions with the deaf community.

Paiva and Silva (2000) signal that there is a clinical-therapeutic view on the issue of deafness, that is, the deaf are seen as having a hearing impairment, which must be cured so that they can approach the normal, the listener. From this perspective, if family members are not properly oriented, there is a loss for deaf people with severe and profound hearing loss, due to difficulties in understanding and using the language in the oral modality and they start to present very low performance in all aspects of development.

From the perspective of hearing mothers, participants in this research, the communicative process occurs, predominantly, through oral language, in orality and with the use of habitual gestures. In the mothers' perception, there is no harm to the communicative process, as, in most cases, they consider it to be efficient. However, two elements emerge from these perceptions: the lack of information about the importance of the acquisition of Sign Language since early childhood, to avoid language delays for the deaf children, and the non-acceptance of deafness, by denying this condition in the expectation that hearing and speech will develop and everything will move towards normality, that is, towards the use of oral language.

The literature points out that the acquisition of Sign Language by the Deaf, defended by Bilingualism, can be acquired more naturally by the deaf child, who will start to develop linguistically and cognitively without difficulties (SKILIAR, 2003; PAIVA; SILVA, 2000; LACERDA, 1998; GOLDFELD, 1997). In this way, it may be possible to avoid language

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delays, in addition to improving all complications such as: perception, concept formation, attention and memory, as long as the introduction to Sign Language occurs at an age similar to that of a hearing child acquiring an oral language.

Final considerations

It is evident that hearing mothers of deaf children make constant use of oral language and homemade gestures to communicate. This behavior leads to unsatisfactory communication, although mothers, mistakenly, do not consider it so. It is a fact that some mothers tried to change their communication strategy when they perceived difficulties in understanding by the children, but, perhaps due to lack of knowledge, they continued to use orality as the main route and there was no mention of the use of Sign Language. The initial root of these attitudes may be the non-acceptance of the deafness condition, inducing the need to seek normal hearing and speech. The participation of their Deaf children in Deaf communities and the use of Sign Language in the home, could minimize these dualities and favor the communication processes that are so necessary between mother and child interactions.

Regarding the condition of deafness, it was clear that mothers expect normality through the development of speech and the development of hearing, because when children spoke or listened with the aid of individual sound amplification, even if there was no full communication, mothers considered normal and were satisfied. The interviewed mothers expect their deaf children to hear and speak.

It is possible to understand, in this study, that bilingualism is far from fully occurring, as mothers did not position themselves in favor of Sign Language as a form of communication with deaf children. It is noted that the lack of knowledge about the benefits of learning Sign Language, since early childhood for deaf individuals, is still an obstacle to the satisfactory development of this individual. The opposite way occurs to what Bilingualism advocates, because first parents seek, at all costs, the learning of oral language and the development of hearing and not the learning of Sign Language as a first language, unaware that through the knowledge of the Sign Language the development of the Portuguese language in the written and oral modality would take place.

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