

WHAT WE KNOW AND WHAT WE DON'T KNOW ABOUT EARLY-DEVELOPMENTAL SUPPORT AND EDUCATION OF DHH CHILDREN IN FIVE EUROPEAN COUNTRIES

Edyta Tominska, University of Geneva, Switzerland; Katarzyna Bieńkowska, Centrum Diagnostyki, Leczenia i Rehabilitacji Zaburzeń Słuchu, Głosu i Mowy, [Centre of Diagnosis, Healthcare and Rehabilitation of the Hearing and Language Impairment]Krosno, Poland; Małgorzata Zaborniak-Sobczak, University of Rzeszów, Poland

ABSTRACT: This proposition will present five European national systems of support for deaf and hard-of-hearing (DHH) children and their families. The countries are: Poland, Slovakia, Germany, France, Switzerland. The purpose is to compare different systemic and institutional solutions existing as a result of political, social and educational decisions, defined as support (diagnosis, hearing aids, rehabilitation, educational systems) for DHH. Two of chosen countries Poland and Slovakia have joined the structures of the EU later. Consequently the initiatives aimed at creating equal opportunities for disabled people have been based on other initial matters. The experience of French, German teachers has left its imprint on the solutions applied in other countries. An interesting issue is how it is solved in multilingual and multicultural Switzerland. Our method consists of comparative analysis of articles about the situation in chosen countries. We compare the solutions about the diagnosis process, preferences to hearing aids and rehabilitation type used in each country and then how the main issues influence on the child growth and the family satisfaction. The results show that the systemic and institutional solutions are different, however the implication of parents' status is the relevant indicator of harmonious child development. The question remains also: how better support the parents' involvement? What type of support propose to a child? Description of the systems of support and education of DHH children will offer an insight into solutions proposed in the selected countries. However, based on the comparisons – the best solutions may be introduced.

INTRODUCTION

The purpose of this contribution is to present preliminary results of descriptive studies conducted within the project: *“Early-development support and education of children and youth with hearing impairment in selected European countries. Comparative analysis”*. The project concerns early-developmental support and education for Deaf and Hard-of-Hearing (DHH) children from the perspective of five European countries participating in the studies (Poland, Slovakia, France, Germany, Switzerland).

The preliminary compilation and comparative analysis of situations in individual countries have a diagnostic and descriptive character and take into account variability of social and political as well as decision-making and legal contexts in relation to the needs and organisation of early-developmental support and education for DHH children and youth, which are influenced by these contexts.

The situation of DHH persons and in particular of children and youth, has undergone significant transformations in recent years. This concerns, first of all, learning a phonic language, which is conditioned on the one hand by technological development in the field of hearing aids, and on the other hand by organisation of early diagnosis, intervention, rehabilitation and, in consequence, increasing the opportunities for participation in education within the "open" mainstream education system by these children. The process of providing support (mainly informational and emotional but also material one) to parents of hearing-impaired children is also important. Moreover, due to the specific situation of DHH children and their parents, specialists must have appropriate preparation: medical staff, speech therapists, psychologists, teachers and social workers; in the field of hearing impairments.

Systemic and institutional solutions (political, social, educational ones) in the scope of widely understood support (early-developmental support: diagnosis, fitting hearing aids, rehabilitation, and education system) for hearing-impaired children and youth and their

parents adopted by individual countries vary significantly. This is a result of historical, political conditions as well as ideological beliefs. In our opinion the five European countries selected for the comparative analysis – France, Germany, Switzerland, Slovakia, Poland – show well these differences, which will allow to diagnose areas of actions which should be taken in order to develop the European consensus in this field. Two countries Poland and Slovakia have joined the structures of the EU relatively late and, in consequence, began later the activities aimed at equal opportunity for disabled persons, including persons with hearing impairment. However, they have developed their own, unique systemic solutions. On the other hand, the experience of French and German teachers of the deaf have been widely described (since the times of Samuel Heinicke and the Abbé de L'Epee (Krakowiak, 2012)) and have left their imprint on solutions adopted in other countries, including the countries of the former socialist block. An interesting issue is how it is solved in multilingual and multicultural Switzerland.

Presently, sign languages rarely appear in early-developmental support and education of DHH children. Their legal status also varies in different European countries. The preliminary compilation prepared by Leeson (2006), commissioned by the Council of Europe, stresses the lack of harmonisation, each country understands and implements differently its policy regarding sign languages. A group of European countries recognise sign languages as national languages and they are naturally included in the education of DHH children (Denmark, Sweden). In other countries these languages do not have a legal status so they do not exist or appear rarely in the social life and education.

ISSUES

Our studies aim to recognise, interpret and try to explain existing phenomena concerning social, institutional opportunities available to children and youth with hearing impairment and their parents in different European countries. The explanation will be based on historical, social and economic conditions. Social changes concerning attitudes towards disabilities, their consequences, methods of correcting and compensating them in the process of rehabilitation, opportunities and a more and more widespread tendency for integration/inclusion of children with different types of disability in mainstream schools (the European and world-wide tendency, compare The UNESCO Salamanka Statement, 1994) are transforming support and education of DHH children, especially in the face of new realities.

METHODOLOGY OF STUDIES

The project has an international, European character. Scientists from five countries were invited for cooperation: Poland – K. Bieńkowska, M. Zaborniak-Sobczak; Slovakia – D. Tarcsiova, M. Schmidtova; Germany – J. Hennies, K. Hofmann, C. Becker; France – S. Mugnier, I. Esteve, A. Millet; Switzerland – E. Tominska. All participants were asked the same scientific questions:

1. What systems of early-developmental support for children with hearing impaired and their families exist in selected European countries? Detailed questions concerned: hearing screening, diagnosis – its time, fitting hearing aids, receiving implants - its consequences, existing systems of medical and educational support, research on speech development.
2. What education systems available to children with hearing impaired exist in individual countries? Detailed questions concerned: what political, social and economic reasons and historical contexts influenced the selection of existing solutions? How does individual work with a child within the systemic support look like? What legal solutions can parents use?

The effect of the project will be the book edited by M. Zaborniak-Sobczak, K. Bieńkowska and E. Tomińska titled *“Early-development support and education of children and youth with hearing impairment in selected European countries. Comparative analysis”*. The publication of chapters of the monograph in national languages: German, French, Slovak and Polish is planned. All of them have an abstract in English and will be translated into Polish and

included in the monograph. On-line availability of materials in the English version is considered. Currently, the monograph in Polish is under development, translations are already available, the authors are working on results of analyses. The planned date of the publication is June 2015.

RESULTS, SO WHAT WE KNOW AND WHAT WE DON'T KNOW....

Poland

The Polish support system assumes early diagnosis and intervention, which is provided within the healthcare system, and early development support, supervised by the Department of Education. Hearing screening is commonly practised, which enables early diagnosis. Children with diagnosed severe hearing loss are referred to cochlear implant centres. Availability of hearing aids and their refunding are well organised. The most of young children are covered by the early-developmental support, based on the Polish National Health Fund, education and non-public funds and focused mainly on phonic education, which develops the command of Polish language. The most of DHH children are referred to mainstream schools and consideration is given to special needs of each child and an appropriate support for them. There are also special schools for children with hearing impaired. In individual cases sign language and cued speech are used in special education. Kindergartens accept children from the age of three, compulsory education starts at the age of five (from September 2015).

Slovakia

The Slovak healthcare system provides neonatal hearing screening; however, from the organisational point of view the system is not focused on quick diagnosis and fitting hearing aids, receiving co-funding to hearing aids also takes quite a long time. Children with severe hearing loss have a chance to receive cochlear implants early, if their parents are determined enough. There are two cochlear implant centres. Young children are covered by the system of general speech-therapy care, which is funded by the health fund. A consistent national program of early support does not exist. Eligible children are covered by care of special schools of speech-therapy profile from the age of four. The bilingual model of education is widespread. Currently, due to grassroots initiatives of parents and speech therapists, there is some hope that the situation in the field of early support will improve. Education is compulsory from the age of six.

France

Hearing screening is widespread in France, which enables early diagnosis. There is also a focus on providing hearing implants and well-organised availability of hearing aids (healthcare refunds). France does not have a national program which would regulate early rehabilitation. Using sign language and cued speech depends on local institutional decisions and choices made by teams working with children. The most of children are referred to special classes in mainstream schools or to special centres for deaf children (this a decreasing tendency). Schools for the Deaf (National Institutes for the Deaf), which exist in each region, have significantly changed their profile – from traditionally bilingual Abbe de l'Epee school - to schools using the phonic language, often with Cued Speech. Children with hearing implants who deal well with learning French phonic language are automatically referred to mainstream schools. Schools accept children from the age of three to kindergarten classes – so called Maternelle, compulsory education starts at the age of six.

Germany

Germany is a federal country consisting of independent constituent states. This type of democracy assumes independence of individual regions in the scope of healthcare, social care and education. As in other highly-developed countries, hearing screening is widespread and enables early diagnosis, there are cochlear implant centres in nearly every constituent state. Hearing aids are available and funded by the health fund. However, care before and after cochlear implant surgery and early linguistic support vary in different constituent states. Germany does not have a federal program which would set forth general rules of support and

education, there is not a general legal basis for sign language, Cued Speech is not widespread. There are special schools for the Deaf, integrated classes in mainstream schools, mainstream schools are available for children with hearing impairment, especially the children with cochlear implants, and provide appropriate support. Bilingual programs are conducted, among others in Berlin and Hamburg. Kindergartens accept children from the age of three, compulsory education starts at the age of six.

Switzerland

Similarly as Germany, Switzerland is a federal country consisting of independent cantons. Moreover, it has four national languages, which significantly complicates the situation and a coherent policy with regard to sign languages. Hearing screening is commonly practised in the whole area of the Swiss Confederation, which enables early diagnosis. Hearing aids are available and refunded. Providing cochlear implants is also widespread in all linguistic regions. A federal program defining tasks and rules of early rehabilitation does not exist. In the Suisse romande (the French-speaking parts of the western Switzerland) there is monitoring of early support and education (Opera Project). Sign languages are used in the process of support and education on parents' request, some education units are bilingual (two schools in the Suisse romande/ seven cantons). Using Cued Speech is widespread (in the Suisse romande – A' Capella Foundation). The most of children with hearing impairment attend mainstream schools and are provided with linguistic support according to their parents' choice (Cued Speech or Sign Language) and support in general learning process (max. 6 hours a week). Education is compulsory from the age of four according to the new program which harmonises education systems in Switzerland¹.

Table 1. The most important elements of early support and education in individual countries

Countries/ existing support	Poland	Slovakia	Germany	France	Switzerland
Hearing screening and early diagnosis	+	+	+	+	+
Existence of a national program of early support	+	-	-	-	-
Phonic education in schools	+	+	+	+	+
Bilingual education (sign language + phonic language)	-/+	+	+/-	-/+	-/+

The preliminary analysis focuses on four important and scientifically justified indicators of the development of support and education systems (Knors & Marschark, 2014; Swanwick & Marschark, 2010; Spencer & Marschark, 2010). Early identification, diagnosing, fitting hearing aids (it is well organised and refunded) and a focus on providing cochlear implants to deaf children exist in all countries. Financial support for parents in different forms is provided

¹ Sixteen out of twenty-six cantons have entered into this harmonisation (data from 2014).

in each country. However, as research show (Easterbrooks, 2010; Moeller et al. 2013), professional, harmonious and scientifically monitored national programs of support and linguistic development of children exist rarely. In our compilation only Poland is covered by such a program, although also this country does not have systemic monitoring of linguistic development (Zaborniak-Sobczak, Bieńkowska & Tomińska, 2015).

As it is presented in the compilation, the support and education in all countries are based on national phonic language, bilingual programs are rare and often are realised only in selected institutions, even if they are allowed by law. In some countries the support using Cued Speech is developed (France, Suisse romande, Poland). As experience of federal countries shows (Germany and Switzerland), the law regulating linguistic policy or the law concerning disabled persons is interpreted differently in each constituent state or canton. In consequence, each region develops its own educational policy, also with regard to children and youth with hearing impairment. This is particularly visible in Switzerland, where the attempts to harmonise education systems in the scope of special pedagogy encounter resistance and barriers, which have existed for a long time and divide the country into linguistic spheres.

DISCUSSION AND PERSPECTIVES

Gathering this variable material is interesting cognitive and scientific experience for the authors of the monograph. However, it is difficult to find coherence in the materials received, which would allow to achieve the European consensus concerning education of persons with hearing impairment.

The lack of coherence in choices and conditions is also visible in different understanding of the issues covered by the monograph by authors from the selected countries. The options presented by the authors are also influenced by their personal, ideological involvement in defending or fighting for a particular concept of support or education (bilingual or phonic).

Common and specific systemic solutions focused on supporting DHH children and youth and their families and related education systems are difficult to harmonize. However, tendencies for coherent systems of hearing screening, fitting hearing aids and emphasizing the programs of early hearing and speech development support are definitely visible. A number of schools for the deaf is gradually decreasing in each country, which shows the growing importance of phonic education provided to young children with hearing impairment. This is also the consequence of international, global assumptions and the tendency for inclusion within "education for everyone" (UNESCO).

The presented preliminary results of meta-analysis of articles sent for the monograph show general trends and in a longer perspective the need for international cooperation in the research field of widely understood support for children with hearing impairment; both in the area of early-developmental support and care (0-4 years) and pre-school, primary school and secondary school education leading to finding a profession and independence in life. The possibility of implementation of the system of monitoring the effects of undertaken medical and educational actions for children's linguistic development is particularly interesting.

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