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LOYER, VICKIE LEE

HEARING PARENTS' PERCEPTIONS OF THEIR DEAF CHILD'S ISOLATION
AND LONELINESS.

THE UNIVERSITY OF ARIZONA

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HEARING PARENTS' PERCEPTIONS OF THEIR
DEAF CHILD'S ISOLATION AND LONELINESS

by

Vicki Lee Loyer

A Thesis Submitted to the Faculty of the
SCHOOL OF HOME ECONOMICS
In Partial Fulfillment of the Requirements
For the Degree of
MASTER OF SCIENCE
In the Graduate College
THE UNIVERSITY OF ARIZONA

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ACKNOWLEDGMENTS

There are many people who have been of tremendous help to me during the preparation of this thesis. First, I would like to thank my thesis advisor, Dr. Victor A. Christopherson, for his guidance, encouragement, and support throughout this study. I am also grateful to the other members of my committee, Dr. Arthur Avery and Dr. George Domino, for their support and recommendations. Many thanks to Dr. Ralph Hoag for sharing with me his experiences of working with deaf children and his advice in this area of research. In addition, I would like to thank Dr. Robert Kuehl and Dr. Stephen Dingle for their statistical advice and assistance in computer programming.

I would like to express my most special thanks and gratitude to my parents and brother. Their undying love, support, and encouragement has made this thesis possible.

And last, but not least, I would like to thank Scott Carlson, Monica Nitszche, and Katie Singer for always being there for me.

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ABSTRACT

The purpose of this study was to determine the extent to which parents and teachers agree on the isolation and loneliness experienced by the deaf child. Forty-nine children who attended the Phoenix Day School for the Deaf, Phoenix, Arizona, were assessed by parents and teachers of these children using the UCLA Loneliness Scale. Results indicate that parents' perceptions of their deaf child's isolation and loneliness were not significantly different than their teachers' perceptions. Further research on the loneliness and isolation of deaf children using a sample comprised of day and residential students was suggested.

CHAPTER 1

INTRODUCTION

Professionals in the field of deafness have frequently reported the deaf child's difficulties with functioning in a "hearing world." This is especially true of the deaf child born to hearing parents when there is no effective means of communication used in the home (Altshuler, 1974; Brinich, 1979; Knee, 1976; Kusche, Greenberg, & Garfield, 1983). The most effective means of communication for the deaf individual is sign language, and yet according to Mitchell (1982), 90-95% of the hearing parents of deaf children do not have a sign language system. Even in those families who consider themselves to be communicating fully, most are "limited to crude gestures and a few home signs" (Baum, 1981, p. 16).

Current statistics indicate that 91.7% of American deaf children have parents with normal hearing (Minter, 1983). Since fewer than 1% of Americans are deaf (Sussman & Stewart, 1971), most of these hearing parents have had no prior exposure to this disability (Knee, 1976; Mindel & Vernon, 1971; Minter, 1983). Therefore, it is possible that parents who do not use sign language are unaware of the benefits that the deaf child receives as a result of

of such communication, and of the deficits suffered by its absence.

Signing facilitates the acquisition of lip reading and reading comprehension (Vernon, 1972) as well as positive social behaviors (Greenberg & Marvin, 1979). Difficulties incurred by the absence of fluent signed communication show up in the establishment of reciprocal relationships (Brinich, 1979); in difficult and distant parent-child relationships (Brinich, 1979; Knee, 1976; Meadow et al., 1981); in delayed psychosocial development (Kusche, Garfield, & Greenberg, 1983); in the lack of development in the area of abstraction (Altshuler, 1974); and in the lack of social knowledge (Brinich, 1979; Kusche, Garfield, & Greenberg, 1983).

In many schools for the deaf, teachers are fluent in total communication. Total communication consists of utilizing speech, lip reading, and sign language in order to communicate with deaf individuals. When teachers are fluent in total communication, they become a source of information for the child beyond academic training. There is typically a very low student-teacher ratio in such classrooms, and this allows the teacher more time to spend with each child. If the child's primary mode of communication is sign language and no one in his/her home can communicate via sign language, the teacher very likely becomes the most accurate source of information concerning the child's thoughts and feelings.

A study on loneliness by Horowitz and French (1979) found that persons who have difficulty socializing with others described themselves as lonely. By the very nature of the disability, the deaf person is forced to live in isolation unless others make an effort to learn signed communication (Jacobs, 1974). It can be expected then that one of the main complaints of deaf adults and children is isolation from their family and communities (Mindel & Vernon, 1971). In fact, "lonely" is the word that was most often used as a descriptor of the deaf person's experiences with their hearing families (Jacobs, 1974).

Little research is available concerning the hearing parents' perceptions of the problems facing their deaf child. It is not known whether or not hearing parents realize the extent to which their child may be isolated. Reportedly, there is a lack of communication between these parents and children (Freeman, Malkin, & Hastings, 1975), and it is hypothesized that abstract feelings such as loneliness and isolation are experienced by the deaf child and not communicated to the hearing parents. Since teachers are able to communicate via total communication, it would seem that any loneliness and isolation that is experienced by the deaf child would be communicated to the teacher. The purpose of this study was to determine the extent to which parents and

teachers agree on the isolation and loneliness experienced by the deaf child.

The present research has several limitations that should be noted. First, only day students were assessed in this study. It is possible that the home life situation of day students is different from that of residential students. Second, because of the reading difficulties of deaf children, it was not feasible to have the children answer the questionnaire themselves. It is possible that the teacher's assessments of the child's loneliness were not completely accurate, and therefore it would have been more desirable to ask the children questions concerning their loneliness directly. Third, due to a small sample size, this study cannot be generalized beyond the present population. Future research, using a larger sample of deaf children and utilizing a great number of schools for the deaf may allow for greater generalizability of the results.

CHAPTER 2

REVIEW OF LITERATURE

An ideal family situation for the deaf child is one in which parents, siblings, and other relatives are fluent in sign language (Greenberg & Marvin, 1979; Jacobs, 1974; Knee, 1976). The actual situation for most deaf children is one in which family members are not fluent in sign language, and communication is limited to pantomime and pointing (Freeman et al., 1975). In examining this situation, three areas have been selected for review. These areas are: (1) the methods of communication which are available to the deaf, (2) decisions and beliefs of hearing parents, and (3) empirical studies concerning deaf child/hearing parent families.

Methods of Communications

Language must be introduced during the optimum period of language attainment. According to Jacobs (1974), the time to introduce language is between birth and five years of age. Mindel and Vernon (1971) and Altshuler (1974) have stated that if a child passes through ideal periods without learning a system of communication, the result is a loss so great that it is doubtful that later efforts can

make up for the earlier deficiency. It is necessary, therefore, to introduce a language system that is readily acquired by a deaf child as soon as deafness is diagnosed.

Deaf children are unable to acquire spoken English. The oral/aural approach, which employs the use of speech and lip reading, is characterized by its slow process of intense teaching and practice. The majority of prelingually deaf children are unable to effectively use the oral approach (Greenberg & Marvin, 1979; Vernon, 1972). In fact, according to Freeman et al. (1975), there is an attrition in oral programs that correlates with increasing age. This indicates that many children who were first thought to have "good oral potential" fail to realize that potential and pursue other modes of communication. Greenberg and Marvin (1979) have stated that most deaf children who are trained in the oral/aural approach find communication to be difficult and frustrating, and they have a tendency to avoid or resist interaction.

Vernon (1972) estimated that as many as 90% of prelingually deaf children are oral failures. Research has shown that the best lip readers understand approximately one-fourth of the spoken message (Vernon, 1972). Paradoxically, the best lip readers are hearing persons, because lip reading requires an adequate command of the English language which prelingually deaf children do not have (Liddell, 1983; Minter, 1983; Vernon, 1972).

Professionals agree that especially during language acquisition, hearing and deaf children find sign language much easier to use than spoken English (Ahlgren, cited in Savage, Evans, & Savage, 1981; Brown, cited in Savage et al., 1981). In fact, the first 400 signs of a deaf child's vocabulary are learned much more quickly than are the first 400 spoken words of a hearing child's vocabulary (Brown, cited in Savage et al., 1981). The greatest endorsement for signed communication lies within the deaf community. Most, if not all, deaf adults prefer the use of American Sign Language over any other form of communication (Vernon, 1972).

In summary, optimal acquisition of a language must occur during the early years of a child's life. The oral/aural approach is a very difficult approach that can be successfully used by approximately 10% of the deaf population. Sign language is acquired in much the same way as spoken language, and it is the preferred mode of communication of most deaf adults.

Parents' Decisions and Beliefs

The diagnosis of deafness is often accompanied by feelings of shock, grief, guilt, anger, and depression (Altshuler, 1974; Knee, 1976; Minter, 1983). The major defense mechanism used by hearing parents is denial. Denial

of deafness is successful for two major reasons: (1) Deafness is a hidden disability, and (2) physicians tend to reassure parents of having a "normal" child.

Unlike other disabilities, deafness is free of external symptoms. It is generally the use of a signing system or the sight of hearing aids that implies deafness. It is for this reason that sign language is regarded as an inferior mode of communication by many hearing parents, and that the oral/aural approach receives such widespread support. Oralism promises speech and lip reading that is proficient enough for total integration into the "hearing world" (Freeman et al., 1975). Although parents recognize that they are unable to fully communicate with their deaf children, they tend to deny the significance of this lack of communication (Freeman et al., 1975; Jacobs, 1974; Knee, 1976). Concentrated effort is made by the parents to assist the child in learning speech in the hope that they will be able to normalize their child.

Congenitally deaf children never become "normally hearing." They will always be deaf, and they will necessarily live with the limitations imposed by their disability. Unfortunately, some parents never learn the limitations of deafness (Altshuler, 1974; Baum, 1981; Liddell, 1983). It is possible that not learning the limitations of deafness is due to encouragement that parents receive

from physicians and other professionals who advocate oralism. According to Freeman et al. (1975), physicians are reluctant to diagnose a child as deaf, and they have a tendency to deny suspicions parents have of deafness. Behavioral changes that are reported to these physicians as evidence of deafness are often disregarded as insignificant, and they are attributed to "maternal overanxiety." Parents are then given such reassurances as "he'll outgrow it" or "he's just slow" (Gregory, 1976; Schlesinger & Meadow, 1972). Few of these specialists are sufficiently aware of the social and educational aspects of deafness, or with deafness per se to be able to make an early diagnosis (Freeman et al., 1975).

Regardless of the origin or rationale of this denial, until parents view the disability realistically (Knee, 1976) and acknowledge the limitations of deafness, an adequate form of communication will not be utilized. According to Vernon (1972), by the time this denial ceases and parents realize the errors that have been made, "the educational damage has been done and personal and family interaction has disintegrated to the point that the deaf child is an isolate in his own home" (p. 538).

In summary, parental reactions toward the diagnosis of deafness tend to result in the defensive reaction of denial. This denial is reinforced by the invisibility of

deafness, and by the advice of some professionals. Denial often results in the unwillingness to use a signing system, which "marks" the individual as deaf, thus the oral/aural approach is pursued.

Deaf Child/Hearing Parent Families

The adequate adjustment of deaf children is a function of the acceptance they receive at home and the rapport that they are able to form with their family members (Knee, 1976). Rapport is achieved through communication. Without access to a mode of communication that both the parents and children are able to use effectively, there is no professional intervention that can be utilized in order to facilitate the necessary rapport.

In examining the psychosocial problems of deaf children and their families, Freeman et al. (1975) compared 120 deaf children (severe or profound, prelingual deafness) between the ages of 5 to 15 with a matched group of hearing subjects. Their study utilized questionnaires, interviews, and psychological testing in order to assess the differences between the two groups. Of the various areas that were examined, three areas seemed to have the greatest influence on the life of the deaf child; (1) delay in diagnosis, (2) behavioral issues, and (3) communication and family involvement.

In most cases (75%), one or both of the parents suspected deafness before it was diagnosed. In 54% of these cases, the family physician rejected the idea of deafness, and 36% of the physicians refused to refer the child for assessment by a specialist. According to Freeman et al. (1975), this delay in diagnosis prevents early habilitation of the child, causes the parents to doubt their judgment, stimulates marital disharmony, and results in an impairment of parents' confidence in professionals when deafness is confirmed. It seems that this situation could be responsible for some of the widely acknowledged difficulties concerning parental adjustment to the diagnosis (e.g., Meadow et al., 1981; Schlesinger and Meadow, 1972).

In terms of behavior characteristics of this population, Freeman et al. (1975) found that hearing mothers of deaf children were more controlling than hearing mothers of hearing children. They gave more orders and allowed their children significantly less freedom than mothers of hearing children. In addition, there is a tendency for hearing mothers with an only child to rate a deaf child's behavior as being much worse than the ratings that were assigned to a hearing child. Interestingly, the school behaviors of these deaf-only children did not differ from the behavior of other deaf children. When the behavior problems which were found with deaf children were compared to hearing

children, it was found that while most of the problems were similar to the hearing population, two clusters were different; i.e., those designated "isolation" and "communication problem."

The chief concerns with communication and family involvement are that: (1) so few parents have a useful mode of communication that ". . . the present situation is unacceptable and damaging to the children, parents, and professionals" (Freeman et al., 1975, p. 401); and (2) mothers of deaf children typically assume the responsibility for and total involvement with the deaf child. Freeman et al. (1975) concluded that it is necessary to have fathers as well as other siblings involved with the deaf child so that the mother is not forced to take on all of the responsibilities. In addition to easing the mother's burden, participation of other family members assists the deaf child in becoming integrated into his/her family.

In a study by Wendell-Monnig and Lumly (1980), interaction patterns between deaf child/hearing mother (dc/hm) dyads were compared to interaction patterns between hearing child/hearing mother (hc/hm) dyads. The sample consisted of 12 dyads (6 hearing and 6 deaf), and the children ranged in age from 21 to 29 months. These dyads were videotaped during 15 minutes of free play, and mothers were given no instructions other than to think of themselves at

home alone with their child. Two important observations were obtained from their study. First, the interaction between dc/hm declined toward the end of the session whereas the hc/hm dyads increased in interaction. Second, the older deaf children had less interaction with their mothers than the younger deaf children, which is also in contrast to the hearing dyads. In regard to these findings, the authors suggested that a trend of increasingly less interaction was occurring, beginning at approximately age two when language plays an integral part in interactions. Thus it was suggested that when the deaf child does not have an adequate system of communication, he/she experiences a decrease of control over his/her environment. The child's ideas, needs, and wants increase in complexity while his/her ability to communicate remains inadequate. Learned helplessness and passivity occur as a consequence. At this time, mothers become increasingly frustrated with their child because of their minimal involvement in interactions. Alienation is often the result.

Meadow et al. (1981) also studied mother and child interactions with preschool age children. The study included hearing child/hearing mother (hc/hm) dyads, deaf child/deaf mother (dc/dm) dyads, and deaf child/hearing mother (dc/hm) dyads. The dc/hm dyads were divided into two groups; i.e., those who utilized signed communication

and those who utilized an oral-only approach. Subjects included 14 dc/hm with signed communication, 14 dc/hm without signed communication, 7 hc/hm, and 7 dc/dm. The ages of the children ranged from 3 to 5 years, and all of the children had normal intelligence.

Interactions of the dyads were video-taped, and they were rated according to complexity, topic (object-present, object-absent), initiation, and elaboration. It was concluded that hc/hm dyads and dc/dm dyads were equivalent in terms of shared elaboration of topics as well as on extended, complex, and child-initiated interactions. Hc/hm and dc/dm dyads enjoyed the interactions more than dc/hm, and in the dc/hm dyads, the hearing mother is more intrusive and controlling. In examining the two groups of dc/hm dyads, it was found that the dyads with signed communication functioned more like the dc/dm and hc/hm dyads than did the dc/hm dyads without signed communication.

Greenberg and Marvin (1978) studied 28 dc/hm dyads in terms of Bowlby's four developmental phases of the attachment system in early childhood. The focus of their study was on the shift from Phase III to Phase IV. Phase III occurs when children are able to purposefully maintain contact with caregivers and have as their goal to do so, and Phase IV occurs when the child and caregiver work in a "partnership" to plan departures and reunions. In their

study, it was determined that the level of communicative competence, not age, was associated with qualitatively different patterns of attachment. Specifically, it was the ability to communicate that was responsible for decreasing the amount of anxiety experienced by a child when separated from a caregiver for brief periods of time. Developmental changes in communication skills were assumed to provide the means by which children shift from Phase III to Phase IV, thus supporting the theory that signed communication facilitates positive social behavior.

Horowitz and French (1979) found that persons who describe themselves as lonely have difficulties with socializing; i.e., social isolation appears to be firmly associated with loneliness. As stated by Mindel et al. (1971, p. 19), "Isolation from others is perhaps one of man's greatest concerns . . . our capacity to communicate meaningfully with others is inextricably tied to our capacities for survival." Other professionals (e.g., Freeman et al., 1975; Jacobs, 1974) have repeatedly emphasized the fact that the deaf child is isolated from his/her family. Freeman et al. (1975, p. 401) went so far as to say that deaf children "remain strangers to their families for years (or forever)." Therefore, it is hypothesized that deaf children who have no means by which to communicate with their family members are isolated from their families. The child does not have

the means by which to express this isolation to the parents, and it seems apparent that loneliness is the result.

Four major hypotheses were established for the present study:

1. It is commonly assumed that deaf children experience a greater degree of loneliness and isolation than do hearing children. While parents are habituated to the child's disability, they are less sensitized to their child's emotional status than are teachers who are trained in deafness and total communication. In light of this situation, the teachers should be better able to detect the child's feelings of loneliness and isolation than the parents. Therefore, it is assumed that the teachers' evaluations will reflect greater isolation and loneliness than the parents' evaluations.
2. While most of the personnel at Phoenix Day School for the Deaf, Phoenix, Arizona (which was selected as the site for this research) are able to communicate using total communication, not all parents of deaf children have mastered the same skill. It is therefore hypothesized that as the signing skills of the parents increase, their ability to discern the extent to which the child experiences loneliness correspondingly will increase; consequently the

difference between parental and teacher assessments will be smaller when parents use sign language than when parents do not use sign language.

3. Children who function as hard of hearing rather than as deaf are able to communicate verbally with little or no use of sign language. Hence, the difference between parental and teacher assessments of the loneliness experienced by hard of hearing children will be less than the difference between parental and teacher assessments of the loneliness experienced by deaf children.
4. As age increases, the importance of language in parent and child interactions increases. Therefore, as age increases, deaf children of hearing parents who do not use sign language will elicit more intense loneliness scores from teachers, and their parent-teacher difference scores will be greater.

CHAPTER 3

METHOD

Ideally, in a study examining a child's loneliness, the child would be asked to answer a questionnaire or to respond to an interview concerning loneliness. Because of the reading difficulties which are characteristic of the prelingually deaf population, the data were gathered by asking the parents and teachers to assess the children's loneliness rather than asking the children directly.

Teachers were chosen to answer the loneliness questionnaire because their use of total communication with deaf children would provide them an ideal opportunity to be sensitive to the thoughts and feelings of the deaf child. The Phoenix Day School for the Deaf (PDS), Phoenix, Arizona, was selected as the site for this research for several reasons. The PDS teacher-student ratio of approximately 1 teacher to every 7 students would provide close contact with the child on a regular basis and, in addition, student-teacher interactions at PDS encompass a full range of academic and social activities. It appeared that PDS teachers had the necessary experience and total communication with their students to enable them to provide reasonably

accurate and comprehensive assessments of the children's loneliness.

Research has indicated that in hearing families with deaf children the mother generally assumes responsibility for the deaf child (Freeman et al., 1975; Crowley, Keane, & Needham, 1982). This responsibility includes any education concerning the nature of deafness and the needs of the child, as well as whatever communication is used, including "home signs," verbal utterances, or formal signed communications. For this reason, the parent questionnaires described below were addressed to the mothers.

Sample

The sample consisted of 47 mothers and 16 teachers of children who attend PDS. A total of 49 children (34 male, 15 female) between the ages of 5 to 13 were assessed by teachers and parents. All of the children function as hard of hearing or as deaf. In one case, 3 siblings fit these criteria and their mother was asked to assess each of them.

Mothers ranged in age from 21 to 61. In 7 of the families, there was more than one hearing-impaired individual. Ethnic groups that were represented included 64% Caucasian, 25% Mexican-American, 2% American-Indian, 4% Black, and 4% other. Seven of the 16 teachers were hearing impaired; 4 were male and 12 were female. In 51% of the

cases, the teacher was acquainted with the child they assessed for less than one year.

Procedure

Mothers

Personnel at PDSB compiled a list of all children between the ages of 5 to 13. Packets were sent to the mothers of these children. Included in the packets were a letter from the researcher, a letter of endorsement from the director of the school, a questionnaire, and a self-addressed and stamped envelope. In order to reduce the risk of a language barrier, all of the information included both English and Spanish versions (Appendices A, B, and C).

The questionnaire consisted of the 20-item UCLA Loneliness Scale, developed by Russell, Peplau, and Ferguson (1978), and a 21-item demographic section. The child's name was placed on the cover of each questionnaire so that the teacher and parent perception questionnaires for each child could be matched. Although the questionnaires were not anonymous, they were confidential.

A follow-up postcard was sent to all subjects 2 weeks after the mailing of the questionnaires. This postcard thanked everyone for their participation and reminded those persons who had not returned their questionnaires to do so (Appendix D).

Two weeks after the mailing of the postcards, a second follow-up was sent to those persons who still had not returned their questionnaires. This follow-up included a letter from the researcher, an additional questionnaire, and a self-addressed and stamped envelope (Appendix E).

Teachers

Personnel at PDSB compiled a list of all teachers of students between the ages of 5 to 13. The researchers delivered a packet to these teachers which included a letter from the researcher, questionnaires, and a return self-addressed and stamped envelope. Teachers were instructed not to return the questionnaires until the parent questionnaires were returned with the parent's signature indicating permission for the teachers to complete the questionnaire. When permission was obtained, personnel at PDSB were notified, and the teachers were sent memoranda indicating the names of the children to be assessed (Appendices F, G, and H).

The teacher perception questionnaire consisted of the 20-item UCLA Loneliness Scale and a 10-item demographic section. Teachers were given the option of returning their questionnaires directly to the researcher or having them returned by the administrative personnel at the school.

One month after the initial distribution of the questionnaires, a letter was sent to all of the teachers

who participated in the study by the researcher. This letter thanked the teachers for their cooperation (Appendix I).

Measurement of the Dependent Variable

The UCLA Loneliness Scale was utilized as a measure of the child's loneliness. This scale had a test-retest reliability correlation of .73 and a coefficient alpha for internal consistency of .96. Validity was determined by comparing a subjective, self-report question about current loneliness and the loneliness scale score which resulted in a correlation of .79 (Russell et al., 1978). This instrument is a 20-item likert scale which has a 4-point response range (4 = never feel this way, 3 = rarely feel this way, 2 = sometimes feel this way, and 1 = often feel this way). In order to determine the loneliness score, the responses were summed. The possible total scores ranged from 20 to 80. A high score represented a low degree of loneliness, and a low score represented a high degree of loneliness.

Items on the UCLA Loneliness Scale were written as statements such as, "I lack companionship," "I feel left out," and "No one really knows me well." On the parent questionnaire, the "I" was changed to "My child," and on the teacher questionnaire, the "I" was changed to "My student."

Both the teachers and parents were asked to assess how the child feels when he/she is at home. By focusing on home life, parents were able to base their assessments on direct observations of their child rather than on reports from the professionals at PDSD. It was assumed that the teachers would be able to obtain the necessary information through direct communication with the child.

Data Analysis

Assessments of the child's loneliness were classified into three categories; parent loneliness score, teacher loneliness score, and the difference score (the difference between the parent's and teacher's assessments of the child's loneliness). Statistical procedures that were used to analyze the data included the t test, the one-way ANOVA, the two-way ANOVA, and the Pearson product-moment correlation coefficient (Pearson's r).

CHAPTER 4

RESULTS

Of the 98 parent questionnaires that were sent out, 67 were returned. Two of these returned questionnaires could not be used because the loneliness scales were not filled out correctly. In order for parent questionnaires to be utilized, the teacher questionnaires had to be returned on the same child. Of the requested 65 teacher questionnaires, 16 were not returned, leaving a net sample of 49.

Hypothesis I

The teacher's evaluations will reflect greater isolation and loneliness than the parent's evaluations.

A two-tailed t test revealed that the loneliness assessment of teachers did not reflect greater isolation and loneliness than the loneliness assessment of parents ($t(48) = 1.33, p > .05$) (Table 2). Hypothesis I, therefore, was not supported. To determine the difference between the teacher's and parent's perceptions of the child's loneliness, adjusted loneliness scores were developed for each teacher and parent. This was necessary since not all of the loneliness scales were completely answered. By assigning an adjusted score (the sum of the answered questions was divided by the total number of answered questions) equal weight was assigned to each response.

Table 1. T-test values between parents' and teachers' assessment scores

	<u>N</u>	<u>M</u>	<u>SD</u>	<u>t</u> value	<u>df</u>	<u>p</u>
Parent Scores	49	3.13	.75	1.33	48	.189
Teacher Scores	49	2.94	.76			

Hypothesis II

The difference between parental and teacher assessments will be smaller when parents use sign language than when parents do not use sign language.

T tests were utilized in order to detect the influence of the mother's signing ability (as assessed by the mother) on the difference between the teacher and parent assessments of the child's loneliness. A difference score was derived by subtracting the adjusted parent loneliness score from the adjusted teacher loneliness score. Although Hypothesis II was not supported, when the mother's signing skill was the lowest the difference score approached significance ($\underline{t}(8) = 1.97, p = .08$). As the mother's signing skill increased, the difference score became less important (mother's skill group 2, $\underline{t}(15) = 1.48, p = .15$; mother's skill group 3, $\underline{t}(23) = -.07, p = .94$) (Table 2).

Table 2. T tests of the difference between parent and teacher assessments of the child's loneliness by mother's skill, sign language index 1, and sign language index 2

	Means			<u>SD</u>	<u>df</u>	<u>t</u> value
	Teachers	Parents	Difference			
<u>Mother's Skill</u>						
Low	2.68	3.00	.32	.47	8	1.97*
Medium	2.76	3.18	.42	1.13	15	1.48
High	3.15	3.14	- .01	1.01	23	- .07
<u>Sign Language Index 1^a</u>						
Low	2.78	2.74	- .03	1.04	17	- .16
Medium	2.97	3.36	.39	1.09	15	1.44
High	3.10	3.34	.23	.78	14	1.18
<u>Sign Language Index 2^b</u>						
Low	2.83	3.10	.26	.96	36	1.69
Medium	3.51	2.88	- .62	.82	6	-2.02
High	2.94	3.67	.73	.82	4	2.00

a. Sign Language Index 1 = the parent's assessment of the number of family members who use sign language and the competency with which it is used.

b. Sign Language Index 2 = the teacher's assessment of the number of family members who use sign language and the competency with which it is used.

*p < .10

A one-way ANOVA between the teacher and parent difference scores, and the mother's sign language skill as assessed by the teacher, showed significant results ($F(3, 35) = 2.8, p < .05$). Specifically, as teachers perceived the mother to be less competent in her ability to sign, the difference between the teacher and parent assessments of the child's loneliness became greater. In addition, a one-way ANOVA between the teacher and parent difference scores, and the family's sign language index as perceived by the teacher (sign language index 2), showed significant results ($F(2, 45) = 3.5, p < .05$).

Hypothesis III

The difference between parental and teacher assessments of the loneliness experienced by hard of hearing children will be less than the difference between parental and teacher assessments of the loneliness experienced by deaf children.

A two-tailed t test revealed that the difference scores for deaf children was not significantly different than the difference score for hard of hearing children ($t(46) = .37, p > .05$) (Table 3). Therefore, Hypothesis III was not supported.

Table 3. Difference scores by hearing status

	<u>N</u>	<u>MD</u> ^a	<u>SD</u>	<u>t</u> value	<u>df</u>	<u>p</u>
Deaf	35	.22	1.01			
				.37	46	.712
Hard of Hearing	13	.10	.98			

a. Mean difference score.

Hypothesis IV

As age increases, deaf children of hearing parents who do not use sign language will elicit more intense loneliness scores from teachers and their parent-teacher difference scores will be greater.

The signing skills of the family members were derived in two ways. The first was based on the mother's rating of each individual family member's use of sign language, and the competency with which sign language is used. These ratings were summed in order to produce a family sign score and were then divided by the number of people in the family, thus a sign language index (sign language index 1) was derived. The second method used to assess the family's signing skills was similar to the sign language index 1 in all ways except that the family's sign language competence was assessed by the child's teacher (sign language index 2).

After the sign language indexes were computed, they were broken down into three groups: Group 1 = no sign language skills to homemade signs; Group 2 = homemade and formal signs; Group 3 = formal signs fluently. In addition, the children were separated into three age groups: Group 1 = 5- to 7-year-olds; Group 2 = 8- to 10-year-olds; Group 3 = 11- to 13-year-olds. Two-way ANOVAs showed no interaction between age and sign language index 2 when looked at in terms of parent score, teacher score, or difference score. However, there was interaction between age and sign language index 1. Due to the presence of an empty cell, one-way ANOVAs were computed utilizing the eight existing age and skill groups.

The result of the one-way ANOVA, which was computed in terms of the parent's assessments of the child's loneliness by the sign language index 1 and the child's age, was significant ($F(7, 41) = 3.09, p < .01$). Specific comparisons were made in terms of the differences of the loneliness scores of children in each age group across signing skill levels. The test for Least Significant Difference was also utilized at the .05 level of significance. There were significant differences between the parent scores for 5- to 7-year-olds and for 8- to 10-year-olds, but not for 11- to 13-year-olds (Table 4).

Table 4. Parents' loneliness scores by the child's age and the families' sign language index 1

	Group		
	1	2	3
<u>5- to 7-year-olds</u>			
<u>N</u>	5	5	6
<u>M</u>	2.62	3.87	3.67
<u>SD</u>	1.09	.11	.26
<u>8- to 10-year-olds</u>			
<u>N</u>	4	---	4
<u>M</u>	2.20	---	3.25
<u>SD</u>	.98	---	.28
<u>11- to 13-year-olds</u>			
<u>N</u>	9	11	4
<u>M</u>	3.05	3.13	2.95
<u>SD</u>	.72	.55	.89

Note: $F(7, 41) = 3.09, p < .01$

The same process was used when looking at teachers' scores and difference scores across age and sign language skill. Neither of these comparisons showed significant results (Tables 5 and 6, respectively). Therefore, Hypotheses IV was not supported.

Additional Findings

In addition to the ANOVAs, Pearson's correlations were computed for: (1) the parent's assessments of the child's loneliness and sign language index 1 ($r = .32, p < .01$); (2) the parent's assessments of the child's loneliness and sign language index 2 ($r = .13, n.s.$); (3) the teacher's assessments of the child's loneliness and sign language index 1 ($r = .18, n.s.$); (4) the teacher's assessments of the child's loneliness and sign language index 2 ($r = .14, n.s.$), (5) the difference between parent and teacher assessments of the child's loneliness and sign language index 1 ($r = .11, n.s.$), and (6) the difference between parent and teacher assessments of the child's loneliness and sign language index 2 ($r = .02, n.s.$) (see Table 7).

The father's sign language skill as assessed by the mother was not a significant influence on either the mother's or the teacher's responses to the loneliness scale. Nor was the father's sign language skill an influence on the difference scores ($F(4, 34) = 1.5; n.s.$). The mother's employment did not appear to influence the scores in a significant fashion either ($F(3, 34) = .13; n.s.$).

Table 5. Teachers' loneliness scores by the child's age and the families' sign language index 1

	Group		
	1	2	3
<u>5- to 7-year-olds</u>			
<u>N</u>	5	5	6
<u>M</u>	3.07	3.30	3.24
<u>SD</u>	.72	.50	.59
<u>8- to 10-year-olds</u>			
<u>N</u>	4	---	5
<u>M</u>	2.24	---	3.16
<u>SD</u>	.53	---	.72
<u>11- to 13-year-olds</u>			
<u>N</u>	9	11	4
<u>M</u>	2.86	2.81	2.81
<u>SD</u>	.83	1.01	.55

Note: $F(7, 41) = .89, p > .05$

Table 6. The difference scores by the child's age and the families' sign language index 1

	Group		
	1	2	3
<u>5- to 7-year-olds</u>			
<u>N</u>	5	5	6
<u>M</u>	- .44	.57	.42
<u>SD</u>	1.37	.48	.72
<u>8-10-year-olds</u>			
<u>N</u>	4	---	5
<u>M</u>	- .04	---	.09
<u>SD</u>	1.45	---	.70
<u>11- to 13-year-olds</u>			
<u>N</u>	9	10	4
<u>M</u>	.19	.34	.13
<u>SD</u>	.63	1.36	1.09

Note: $F(7, 40) = .48, p > .05$

Table 7. Correlations between parent, teacher, and difference scores by sign language index 1 and sign language index 2

	Means		
	Parent	Teacher	Difference
Sign Language Index 1	.32*	.18	.11
Sign Language Index 2	.13	.14	- .02

*p < .01

CHAPTER 5

DISCUSSION

In Hypothesis I, it was expected that the teacher evaluations of the child's loneliness would reflect greater isolation and loneliness than the parent's evaluations of the child's loneliness. In past studies (e.g., Freeman et al., 1975; Knee, 1976), the majority of the parents reportedly had no means of communicating with their child. The parents relied on oral communication while the child relied primarily on sign language. However, in this study, an unexpectedly large number of parents (91%) used sign language at least sometime. It is possible that the availability of communication between parents and children in this study could be responsible for the lack of difference in the assessments of parents and teachers.

In Hypothesis II, it was expected that as the signing skills of the family members increased, the difference between the parent and teacher assessments of the child's loneliness would decrease. Although the difference score did not decrease when looked at in terms of the family's skill, there was a trend toward decreasing difference scores when looked at in terms of the mother's skill in signing. This seems to be consistent with the findings

by Crowley et al. (1982) and Freeman et al. (1975) that the mother generally assumes the responsibility for the deaf child.

In Hypothesis III, it was expected that the difference between teacher assessments of hard of hearing children would be less than the difference between parent and teacher assessments of deaf children. It is possible that this lack of significance is the result of the number of parents in this study that used sign language. The assumption of this hypothesis was that hard of hearing children would have more access to communication with their parents; consequently, it can be expected that when there is a mode of communication available to the deaf child and hearing parents, the two groups function more similarly. This is consistent with the findings of Meadow et al. (1981) in which it was found that deaf child/hearing mother dyads that used total communication were closer in interaction to the deaf child/deaf mother dyads and the hearing child/hearing mother dyads than were the deaf child/hearing mother dyads that did not use sign language.

In Hypothesis IV, it was expected that as age increased, the importance of the parent's signing skills also increased, and therefore, as children increased in age, teachers would rate children of parents who do sign as less lonely than children of parents who do not sign. In

addition, it was expected that the difference score between the latter group of children's parent and teacher scores would be greater than the former group of children's parent and teacher scores. While teachers did not assess the children as being significantly more lonely based on their age and parent's signing skill, the parent's assessments did follow this pattern. The loneliness assessments for 5- to 7-year-old children and the 8- to 10-year-old children dropped significantly from the family's skill level 1 to the family's skill level 3. However, there was no difference between the family members' skill level and loneliness scores for the 11- to 13-year-old children (see Table 4). It is possible that by the time the children are 11-years-old, they begin to look outside of their family for inclusion and socialization. Therefore, as the children become older, the sign language skills of their family members appear to become less important, and their peers become more important.

Additional findings indicate that the mother's perception of how her child feels is highly correlated with how the mother feels about her ability and her family's ability to sign. This seems to contradict investigators (e.g., Freeman et al., 1975; Knee, 1976) that have reported that parents tend to deny the significance of a lack of communication with their deaf child. However, the findings

that neither the father's sign language skill nor the mother's employment status affect the child's loneliness scores seem to further support the assertion (mentioned earlier) that the mothers tend to assume the responsibility for their deaf children.

CHAPTER 6

SUMMARY AND CONCLUSIONS

The purpose of this study was to determine the extent to which parents and teachers agree on the isolation and loneliness experienced by the deaf child. It was found that the teachers' assessments of the child's loneliness were not significantly different than the parents' assessments of the child's loneliness. In addition, there was no significance between the parents' and teachers' assessments of the child's loneliness when the assessments were looked at in terms of the child's hearing status (i.e., hard of hearing or deaf).

The difference between parent and teacher assessments seemed to become smaller when the mother's signing skill increased. The family's skill in signing did not appear to have the same influence. The signing skills of the family members appear to influence the parent's perception of their child's loneliness until the child is approximately 10-years-old. Beginning at approximately age 11, the importance of the family's signing skill decreases significantly.

Other variables which were examined as possible influences on the perceptions of the child's loneliness

were the father's skill in using sign language and the mother's employment status. However, neither of these variables significantly affected the parents' or the teachers' assessments of the child's loneliness.

The present study seems to support past research which asserts that mothers assume the major responsibility for their deaf child. However, there seems to be a difference between the number of persons in the child's family who use sign language in this study as opposed to the number of persons in past studies that used sign language. It is possible that this is a function of the specific population involved in this study. All of the children at PDSB are day students who live within the specified school district boundaries. Hence, it seems possible that parents of children who attend PDSB are more involved with their child than parents whose child attends a residential school.

The findings of this study appear to indicate a need for further research focusing on the family life of the deaf child. Specifically, there is a need for further investigation concerning the difference between parents who participate fully in their deaf child's life (e.g., live within school boundaries in order for their child to attend a day school, learn and utilize sign language, etc.) and parents who do not. Furthermore, the need for educational programs for parents and siblings of deaf children is evident. Goals

for such a program should include education on the psychology of the deaf, training in the use of fluent signed communication, and the intent to include all of the family members into the life of the deaf child rather than primarily the mother.

APPENDIX A

INTRODUCTION LETTER TO PARENTS



THE UNIVERSITY OF ARIZONA

TUCSON, ARIZONA 85721

COLLEGE OF AGRICULTURE
SCHOOL OF HOME ECONOMICS
DIVISION OF CHILD DEVELOPMENT AND FAMILY RELATIONS

February 1, 1984

Dear Parent:

I am a graduate student at the University of Arizona in the Division of Child Development and Family Relations. At this time, I am completing a Master's of Science degree with the intention of pursuing a Ph.D. in psychology of deafness. My specific interest is in working with deaf children, and their hearing parents.

It is important to know how parents and teachers perceive deaf children in regard to loneliness, and this study is an effort to obtain more information on this important subject. As a parent of a hearing impaired child, your help would be much appreciated. We hope that the information you provide will help us to do a better job in providing for your child's needs.

A short questionnaire is enclosed. It will only take a few minutes of your time, yet the information you provide will be of great value. If you have more than one child attending this school it is possible that you will receive more than one questionnaire. It would be greatly appreciated if you would kindly complete all of the questionnaires that you receive. For your convenience, a self-addressed and stamped envelope has been enclosed for returning the questionnaire.

Your participation in this study is completely voluntary. Any information that you provide will be held in strict confidence and no identities will be revealed.

Sincerely,

Vicki L. Loyer
M. S. Candidate

VLL/bnm
encl



THE UNIVERSITY OF ARIZONA

TUCSON, ARIZONA 85721

COLLEGE OF AGRICULTURE

SCHOOL OF HOME ECONOMICS

Febrero 1, 1984

Estimados Padres:

Soy estudiante ya graduada de la Universidad de Arizona en la Division del estudio del Crecimiento del niño y Relaciones Familiares; (Child Development and Family Relations). Presentemente estoy obteniendo mi maestría con el propósito de obtener mi doctorado en psicología del incapacitado de oído.

Es muy importante comprender como los padres y maestros perciven al niño incapacitado con respecto a sus sentimientos hacia su problema, y este estudio pretende obtener mas información acerca de este tema importante.

He incluido un breve cuestionario. Solamente requerirá unos minutos de su tiempo; pero la información será de gran valor. Si tiene varios niños atendiendo esta escuela es posible que reciba más de un cuestionario. Se lo agradeceríamos si por favor contestara todos los cuestionarios. Para su conveniencia hemos incluido un sobre para que regrese el cuestionario.

Su participación en este estudio es completamente voluntaria. Cualquier información que nos ofrezca será estrictamente confidencial y su identidad no será revelada.

Sinceramente,

A handwritten signature in cursive script that reads "Vicki L. Loyer".

Vicki L. Loyer
M.S. Candidate

VLL/bnm
encl

APPENDIX B

LETTER OF ENDORSEMENT

Phoenix Day School for the Deaf

1935 West Hayward Avenue
Phoenix, Arizona 85021-6997

J. JAY FARMAN
Director

(602) 255-3448

March 8, 1984

Dear Parents:

Very often PDS is asked to participate in a variety of research and special projects connected with colleges and universities. We screen these very carefully and select those for participation that we feel have some benefit for our own students, as well as the profession of education of the deaf as a whole.

We have agreed to participate in a project with Miss Vicki Loyer, a graduate student at the University of Arizona. This project requires participation by parents and teachers at the school. Enclosed is a survey that Miss Loyer asks you to complete and return directly to her. We endorse the merit of this project and hope that you will take a few minutes to answer the questionnaire.

Thank you for your cooperation. This means a great deal to those young people who are training to become professionals working with the hearing impaired.

Sincerely yours,



J. Jay Farman
Director

km1

Enclosure

APPENDIX C

PARENT QUESTIONNAIRE

THE DEAF CHILD

A PARENT'S PERSPECTIVE

The purpose of this study is to collect information on parents' perceptions of their deaf child. Approximately 20 minutes of your time will be required for completion of this questionnaire and will indicate your consent as a willing participant in this study. You have the right to refuse to answer any question and are free to withdraw from the study at any time without incurring ill will. All information that is given is strictly confidential and no identities will be revealed.

Having read and understood this letter and questionnaire, I do _____ do not _____ agree to have my child's teacher(s) fill out a similar questionnaire on my child or children.

Parent's or Guardian's Signature

NIÑO INCAPACITADO DEL OÍDO

PERCEPCIÓN DE LOS PADRES

El propósito de esta encuesta es de recaudar información acerca del punto de vista de los padres de su niño sordo. Este cuestionario requerirá aproximadamente 20 minutos de su tiempo e indicará su consentimiento al querer participar en este estudio. Está en su derecho de no contestar cualquiera de las preguntas y libre para cambiar de opinión. Toda la información es confidencial y su identidad no será revelada.

Habiendo leído y comprendido esta carta y el cuestionario, Si _____ No _____ estoy de acuerdo que el maestro de mi hijo(s) conteste un cuestionario refiriéndose a mi hijo.

Firma del Padre or Guardián

***** PART II *****

For each of the following, please circle the number which corresponds to your answer.

9. How often is sign language used in your home with this child?

- | | |
|---------------|--------------|
| 1. Always | 3. Sometimes |
| 2. Frequently | 4. Never |

If you circled NEVER in question 9, please circle the response which is most nearly correct:

We do not use sign language in our family because:

1. The use of sign language will be harmful to our child.
2. We have never had the opportunity to learn sign language.
3. Sign language is too difficult to learn.
4. Our child prefers to use oral communication.

10. To what extent do you think that this child disrupts family life your home?

- | | |
|---------------|-----------|
| 1. Very often | 4. Rarely |
| 2. Often | 5. Never |
| 3. Sometimes | |

If you circled 1, 2, or 3, how much of this disruption do you think is the result of this child's hearing impairment?

1. All
2. Some
3. None

11. Compared with other children, your deaf child disrupts the family:

1. More
2. Less
3. About the same

12. How often do you think your child experiences loneliness?

- | | |
|---------------------|-----------|
| 1. Most of the time | 3. Rarely |
| 2. Sometimes | 4. Never |

13. What is your ethnic heritage?

- | | |
|--------------------|---------------------------------|
| 1. American-Indian | 4. Mexican-American |
| 2. Asian | 5. White |
| 3. Black | 6. Other (please specify) _____ |

14. What is your present marital status?

- | | |
|-------------------------|------------------------------|
| 1. Never married | 4. Separated (year ____) |
| 2. Married (year ____) | 5. Widow/widower (year ____) |
| 3. Divorced (year ____) | |

15. What is the highest level of education completed by the mother?

- | | |
|-------------------------|-------------------------------------|
| 1. Eighth grade or less | 4. Some college or technical school |
| 2. Some high school | 5. College graduate |
| 3. High school graduate | 6. Graduate degree |

16. What is the highest level of education completed by the father?

- | | |
|-------------------------|-------------------------------------|
| 1. Eighth grade or less | 4. Some college or technical school |
| 2. Some high school | 5. College graduate |
| 3. High school graduate | 6. Graduate degree |

17. What is the employment status of the mother?

1. Full time (40 hours or more per week)
2. Part time (less than 40 hours per week)
3. Not employed outside of the home
4. Unemployed

18. What is the employment status of the father?

1. Full time (40 hours or more per week)
2. Part time (less than 40 hours per week)
3. Not employed outside of the home
4. Unemployed

19. If employed, what is the mother's occupation?

(Title)

(Responsibilities)

20. If employed, what is the father's occupation?

(Title)

(Responsibilities)

21. Please feel free to comment on any other aspect of your relationship with your deaf child that you think is significant.

***** PART III *****

22. To the best of your knowledge, how does your child feel when he/she is not at school? Please circle the number that corresponds to your answer.

- | | | | | |
|----------------------------------------------------------------------------------------|---|---|---|---|
| 1. My child often feels this way | | | | |
| 2. My child sometimes feels this way | | | | |
| 3. My child rarely feels this way | | | | |
| 4. My child never feels this way | | | | |
| | | | | |
| 1. My child is unhappy doing so many things alone. | 1 | 2 | 3 | 4 |
| 2. My child has no one to talk to. | 1 | 2 | 3 | 4 |
| 3. My child cannot tolerate being so alone | 1 | 2 | 3 | 4 |
| 4. My child lacks companionship. | 1 | 2 | 3 | 4 |
| 5. My child feels as if nobody really understands him/her | 1 | 2 | 3 | 4 |
| 6. My child finds himself/herself waiting. | 1 | 2 | 3 | 4 |
| for people to write | 1 | 2 | 3 | 4 |
| 7. There is no one my child can turn to. | 1 | 2 | 3 | 4 |
| 8. My child is no longer close to anyone | 1 | 2 | 3 | 4 |
| 9. My child's interests and ideas are not shared by those around him/her. | 1 | 2 | 3 | 4 |
| 10. My child feels left out | 1 | 2 | 3 | 4 |
| 11. My child feels completely alone | 1 | 2 | 3 | 4 |
| 12. My child is unable to reach out and communicate with those around him/her. | 1 | 2 | 3 | 4 |
| 13. My child's social relationships are superficial | 1 | 2 | 3 | 4 |
| 14. My child feels starved for company. | 1 | 2 | 3 | 4 |
| 15. No one really knows my child well | 1 | 2 | 3 | 4 |
| 16. My child feels isolated from others | 1 | 2 | 3 | 4 |
| 17. My child is unhappy being so withdrawn. | 1 | 2 | 3 | 4 |
| 18. It is difficult for my child to make friends | 1 | 2 | 3 | 4 |
| 19. My child feels shut out and excluded by others | 1 | 2 | 3 | 4 |
| 20. People are around my child but not with him/her. | 1 | 2 | 3 | 4 |

Thank you for your cooperation in filling out this questionnaire.
Your help is greatly appreciated.

Please return this questionnaire in the stamped addressed envelope.

**** SEGUNDA PARTE ****

Por favor circule el número que corresponda a su respuesta.

9. ¿Qué tan frecuente es el uso del lenguaje de señas en su casa con el niño?

- | | |
|-------------------|------------|
| 1. Siempre | 3. A veces |
| 2. Frecuentemente | 4. Nunca |

Si circulo NUNCA en la pregunta número nueve, por favor circule la respuesta más correcta.

No usamos la Mimfca en nuestra familia porque:

1. El uso dañaría al niño.
2. Nunca hemos tenido la oportunidad de aprenderlo.
3. Es muy difícil de aprender.
4. Nuestro hijo prefiere el uso de comunicación oral.

10. ¿A que grado, piensa ud., que el niño(a) corrupta su hogar?

- | | |
|----------------|-------------|
| 1. Muy seguido | 4. Rara vez |
| 2. Seguido | 5. Nunca |
| 3. A veces | |

Si circuló el 1, 2, o 3: ¿Qué tanto se debe a la dificultad del niño(a) de no oír bien?

1. Toda
2. Poca
3. Ninguna

11. A comparación de sus otros hijos(as), su hijo(a) sordo corrupta a la familia.

1. Mas
2. Menos
3. Igual

12. ¿Qué tan seguido piensa Ud. que su hijo(a) se siente sólo?

- | | |
|-----------------|-------------|
| 1. Casi siempre | 3. Rara vez |
| 2. A veces | 4. Nunca |

13. ¿Cuál es su origen étnico?

- | | |
|--------------------|------------------------------------|
| 1. Americano-Indio | 4. Mexicano-Americano |
| 2. Asiático | 5. Blanco |
| 3. Negro | 6. Otro (por favor explique) _____ |

14. ¿Cómo se clasifica Ud. en lo siguiente?

- | | |
|----------------------------|----------------------------|
| 1. Nunca se ha casado | 4. Separado (Año _____) |
| 2. Casado (Año _____) | 5. Viudo/viuda (Año _____) |
| 3. Divorcedado (Año _____) | |

15. ¿Cuál es el nivel más alto de escuela que a completado su madre?

- | | |
|--------------------------------|----------------------------------------------|
| 1. Octavo o menos | 4. Algunos años de colegio o escuela técnica |
| 2. Algunos años de High School | 5. Graduado de Universidad |
| 3. Graduado de high School | 6. Graduado de Universidad con Maestría. |

16. ¿Cuál es el nivel más alto de escuela que a completado su padre?

- | | |
|--------------------------------|----------------------------------------------|
| 1. Octavo o menos | 4. Algunos años de colegio o escuela técnica |
| 2. Algunos años de High School | 5. Graduado de Universidad |
| 3. Graduado de High School | 6. Graduado de Universidad con Maestría |

17. ¿Qué tanto trabaja la madre?

1. Tiempo completo (40 horas o mas a la semana)
2. Tiempo medio (menos de 40 horas a la semana)
3. No empleada fuera de la casa
4. Sin trabajo

18. ¿Qué tanto trabaja su padre?

1. Tiempo completo (40 horas o mas a la semana)
2. Tiempo medio (menos de 40 horas a la semana)
3. No empleada fuera de la casa
4. Sin trabajo

19. Si trabaja, cuál es la ocupación de su madre?

Título (tipo de empleo)

Responsabilidades

20. Si trabaja, cuál es la ocupación de su padre?

Título (tipo de empleo)

Responsabilidades

21. Siéntase libre de incluir algun aspecto de su relación con su hijo(a) que Ud. considere significativo.

**** TERCERA PARTE ****

22. En su opinion, ¿como se siente su hijo cuando no esta en la escuela?
Por favor circule el que corresponda a su respuesta.

1. Mi hijo(a) se siente así con frecuencia.
2. Mi hijo(a) se siente así a veces.
3. Mi hijo(a) rara vez, se siente así.
4. Mi hijo(a) nunca se siente así.

1. Mi hijo no está contento haciendo tantas cosas solo.	1	2	3	4
2. Mi hijo no tiene a nadie con quien platicar.	1	2	3	4
3. Mi hijo no tolera estar tan solo.	1	2	3	4
4. A mi hijo le hace falta compañerismo.	1	2	3	4
5. Mi hijo(a) siente como que nadie lo comprende	1	2	3	4
6. Mi hijo(a) siente la necesidad de que le escriban	1	2	3	4
7. Mi hijo(a) siente como que no puede confiar en nadie.	1	2	3	4
8. Mi hijo(a) ya no tiene amistades cercanas	1	2	3	4
9. Los intereses de mi hijo e ideas no son los mismos que los de sus compañeros.	1	2	3	4
10. Mi hijo se siente excluido.	1	2	3	4
11. Mi hijo es siente completamente solo.	1	2	3	4
12. Mi hijo es incapaz de comunicarse con los que lo rodean	1	2	3	4
13. La vida social de mi hijo es muy superficial	1	2	3	4
14. Mi hijo siente mucha necesidad de compañía.	1	2	3	4
15. Nadie en realidad conoce a mi hijo(a)	1	2	3	4
16. Mi hijo se siente excomunicado de otros	1	2	3	4
17. Mi hijo no esta contenta en estar alejado de lo demas	1	2	3	4
18. Es muy difícil para mi hijo hacer amistades	1	2	3	4
19. Mi hijo(a) se siente excluido por otros	1	2	3	4
20. Mi hijo tiene compañía pero en realidad no tiene a nadie.	1	2	3	4

Gracias por su cooperación en llenar este cuestionario. Su ayuda es sumamente apreciada.

Por favor regrese este cuestionario en el sobre incluido.

APPENDIX D

FOLLOW-UP POSTCARD

Dear Parent,

Thank you for your cooperation in completing and returning the parent perception questionnaire. If you haven't returned it yet, please take a few minutes to do so now. Your participation is crucial to the success of this project. Please feel free to call me (621-7127) if you have any questions.

Thank you,


Vicki Loyer
M.S. Candidate

APPENDIX E

FOLLOW-UP LETTER



THE UNIVERSITY OF ARIZONA
TUCSON, ARIZONA 85721

COLLEGE OF AGRICULTURE
SCHOOL OF HOME ECONOMICS

April 6, 1984

Dear Parent:

If you have completed and returned the questionnaire sent recently on perception of loneliness, we should like to thank you very much. If you have not yet returned it, won't you please take a few minutes to do so? Your participation in this study is crucial to the success of this project and will be greatly appreciated. In the event you have misplaced the original questionnaire, another one is enclosed for your convenience.

Sincerely,

A handwritten signature in cursive script that reads "Vicki L. Loyer".

Vicki L. Loyer
M. S. Candidate

VLL/bnm
encl

APPENDIX F

INTRODUCTION LETTER TO TEACHERS



THE UNIVERSITY OF ARIZONA
TUCSON, ARIZONA 85721

COLLEGE OF AGRICULTURE
SCHOOL OF HOME ECONOMICS
DIVISION OF CHILD DEVELOPMENT AND FAMILY RELATIONS

February 1, 1984

Dear Teacher:

I am a graduate student at the University of Arizona in the Division of Child Development and Family Relations. At this time, I am completing a Master's of Science degree with the intention of pursuing a Ph.D. in psychology of deafness. My specific interest is in working with deaf children and their hearing parents.

It is important to know how parents and teachers perceive deaf children in regard to loneliness, and this study is an effort to obtain more information on this important subject. As a teacher of hearing impaired children, your help would be much appreciated. The information you can provide will contribute substantially to an important base of information concerning the status and needs of these children.

A short questionnaire is enclosed. It will only take a few minutes of your time, yet the information you provide will be of great value. If you have more than one child in your classroom who meets the criteria for this study, you may be asked to fill out more than one questionnaire. It would be greatly appreciated if you would kindly complete all of the questionnaires that you receive. For your convenience, self-addressed and stamped envelopes have been enclosed for returning the completed questionnaires.

Your participation in this study is completely voluntary. Any information that you provide will be held in strict confidence and no identities will be revealed.

Sincerely,

Vicki L. Loyer

Vicki L. Loyer
M.S. Candidate

VLL/bnm
encl

APPENDIX G

TEACHER QUESTIONNAIRE

THE DEAF CHILD

TEACHER'S PERSPECTIVE

The purpose of this study is to collect information on teacher's perceptions of their deaf students. Approximately 20 minutes of your time will be required for completion of this questionnaire and will indicate your consent as a willing participant in the study. You have the right to refuse to answer any question and are free to withdraw from the study at any time without incurring ill will. All information that is given is strictly confidential and no identities will be revealed.

El propósito de esta encuesta es de juntar información acerca de la punto de vista del maestro hacia un alumno incapacitado de ol oido. Este cuestionario requerirá aproximadament 20 minutos de su tiempo e indicará su consentimiento al querer participar en este estudio. Esta en su derecho de no contestar qualquiera de las preguntas y libre para cambiar de opinión. Toda la infomación es confidencial y su identidad no sera revelada.

THE DEAF CHILD
A TEACHER'S PERSPECTIVE

**** PART I ****

For each of the following, please circle the number which corresponds to your answer unless otherwise specified.

1. How long have you known this child?
 1. Less than 1 year
 2. 1-2 years
 3. More than 2 years

2. To the best of your knowledge, what form of communication is used in this child's family? (Please place a "1" next to the most frequently used form, a "2" by the next most frequently used form, and a "3" by the least used form.)
 - Speech/lip reading (basically oral)
 - Sign language (manual communication without verbalization)
 - Total communication (as defined in ASDB communication policy)

3. To the best of your knowledge, what form of communication does this child prefer?
 1. Speech/lip reading (basically oral)
 2. Sign language (manual communication without verbalization)
 3. Total communication (as defined in ASDB communication policy)

4. If sign language is used, how would you rate the family's competence in this area?

1. Fluent	4. Uses homemade signs
2. Skilled, but not fluent	5. I don't know
3. Knows some formal sign	

- | | | | | | |
|---------------------------|---|---|---|---|---|
| Mother. | 1 | 2 | 3 | 4 | 5 |
| Father. | 1 | 2 | 3 | 4 | 5 |
| Oldest brother. | 1 | 2 | 3 | 4 | 5 |
| Middle brother. | 1 | 2 | 3 | 4 | 5 |
| Youngest brother. | 1 | 2 | 3 | 4 | 5 |
| Oldest sister | 1 | 2 | 3 | 4 | 5 |
| Middle sister | 1 | 2 | 3 | 4 | 5 |
| Youngest sister | 1 | 2 | 3 | 4 | 5 |

5. To what extent do you feel that this child is a disruptive child at school?

- 1. Very disruptive
- 2. Occasionally disruptive
- 3. Seldom disruptive
- 4. Never disruptive

6. How often does this child appear to experience loneliness at school?

- 1. Frequently
- 2. Sometimes
- 3. Rarely
- 4. Never

7. How often do you believe this child experiences loneliness at home?

- 1. Frequently
- 2. Sometimes
- 3. Rarely
- 4. Never

8. Are you hearing impaired?

- 1. Yes
- 2. No

If yes, please explain _____

9. Please feel free to comment on any other aspect of your relationship with this child or any other aspect of this child's family relationships that you think is significant.

**** PART II ****

10. To the best of your knowledge, how does your student feel when he/she is not at school? Please circle the number that corresponds to your answer.

1. My student often feels this way
2. My student sometimes feels this way
3. My student rarely feels this way
4. My student never feels this way

- | | | | | |
|---------------------------------------------------------------------------------------|---|---|---|---|
| 1. My student is unhappy doing so many things alone | 1 | 2 | 3 | 4 |
| 2. My student has no one to talk to | 1 | 2 | 3 | 4 |
| 3. My student cannot tolerate being so alone | 1 | 2 | 3 | 5 |
| 4. My student lacks companionship | 1 | 2 | 3 | 4 |
| 5. My student feels as if nobody really understands him/her | 1 | 2 | 3 | 4 |
| 6. My student finds himself/herself waiting for people to write | 1 | 2 | 3 | 4 |
| 7. There is no one my student can turn to . . . | 1 | 2 | 3 | 4 |
| 8. My student is no longer close to anyone . . | 1 | 2 | 3 | 4 |
| 9. My student's interests and ideas are not shared by those around him/her | 1 | 2 | 3 | 4 |
| 10. My student feels left out | 1 | 2 | 3 | 4 |
| 11. My student feels completely alone | 1 | 2 | 3 | 4 |
| 12. My student is unable to reach out and communicate with those around him/her . . . | 1 | 2 | 3 | 4 |
| 13. My student's social relationships are superficial | 1 | 2 | 3 | 4 |
| 14. My student feels starved for company | 1 | 2 | 3 | 4 |
| 15. No one really knows my student well | 1 | 2 | 3 | 4 |
| 16. My student feels isolated from others . . . | 1 | 2 | 3 | 4 |
| 17. My student is unhappy being so withdrawn | 1 | 2 | 3 | 4 |
| 18. It is difficult for my student to make friends | 1 | 2 | 3 | 4 |
| 19. My student feels shut out and excluded by others | 1 | 2 | 3 | 4 |
| 20. People are around my student but not with him/her | 1 | 2 | 3 | 4 |

Thank you for your cooperation in filling out this questionnaire. Your help is greatly appreciated.

Please return this questionnaire in the stamped addressed envelope.

**** PART III ****

11. About the child:

a. Name: _____ Age: _____
 (All information concerning this child is confidential. The name is requested only for the purpose of compiling the necessary information.)

B. To the best of your knowledge, what is this child's hearing loss? (i.e.,--decibel loss aided and unaided)

C. In your opinion, does this child function as: (circle the correct response)

1. Hearing
2. Hard of hearing
3. Deaf

D. To the best of your knowledge, did onset of deafness occur:

1. at birth?
2. before two years of age?
3. after two years of age?

E. Does this child have any additional handicapping conditions?

1. Yes
2. No

If yes, please explain: _____

LA PERCEPCION DEL MAESTRO

**** PRIMERA PARTE ****

Por, favor circule el número que corresponda a su respuesta.

1. ¿Que tanto tiempo ud. conoce a este niño?
 1. Menos de un año.
 2. 1 o 2 años.
 3. Mas de 2 años.

2. A su conocimiento ¿que clase de comunicación usa su alumno en su hogar? (Por favor indique con un "1" en seguida del tipo de comunicación más frecuente. Un "2" en el segundo más frecuente. Y un "3" en el que menos es usado.)

_____ Comunicación Verbal (Leido de labios).

_____ Language de Señas (Comunicación manual sin el uso oral).

_____ Comunicación total (De acuerdo a la póliza de comunicación del ASDB).

3. En su opinion ¿qué tipo de comunicación es preferida por el alumno?
 1. Comunicación Verbal (Leido de labios).
 2. Language de Señas (Comunicación manual sin el uso oral).
 3. Comunicación total (De acuerdo a la póliza de comunicación del ASDB).

4. Si este eipo de comunicación es usado, ¿como clasificaría el nivel de conocimiento de la familia del idioma de señas?

1. Domina el language.	4. Usa señales que conoció en su hogar.
2. Eficiente pero no lo domina.	5. No sé
3. Conoce algunos signos formales.	

Madre.	1	2	3	4	5
Padre.	1	2	3	4	5
Hermano mayor.	1	2	3	4	5
Hermano de en medio.	1	2	3	4	5
Hermano menor.	1	2	3	4	5
Hermana mayor.	1	2	3	4	5
Hermana de en medio.	1	2	3	4	5
Hermana menor.	1	2	3	4	5

5. ¿A qué extremo siente ud. que este alumno interrumpe la clase?

1. Muy molesto
2. Ocasionalmente molesta.
3. Casi nunca molesta
4. Nunca molesta

6. ¿Qué tan seguido aparenta el elumno estar triste/solo?

1. Seguido
2. A veces
3. Rara vez
4. Nunca

7. ¿Qué tan seguido piensa ud. que el alumno se siente triste/solo en su casa?

1. Seguido
2. A veces
3. Rara vez
4. Nunca

8. ¿Tiene Ud. problemas al oír?

1. Sí
2. No

Si la respuesta es "Sí," explique por favor _____

9. Siéntase libre de incluir algún aspecto de su relación con este alumno, o algo que Ud. haya observado en su casa que ud. considere significativo.

**** SEGUNDA PARTE ****

10. En su opinión ¿como se siente su alumno cuando este no está en la escuela? Por favor circule el número que corresponda a su respuesta.

1. Mi alumno se siente así con frecuencia.
2. Mi alumno, a veces se siente así.
3. Mi alumno, rara vez se siente así.
4. Mi alumno nunca se seinté así.

1.	Mi alumno no está contento haciendo tantas cosas solo.	1	2	3	4
2.	Mi alumno no tiene a nadie con quien platicar.	1	2	3	4
3.	Mi alumno no tolera estar tan solo	1	2	3	4
4.	A mi alumno le hace falta compañerismo.	1	2	3	4
5.	Mi alumno siente como si nadie lo comprende	1	2	3	4
6.	Mi alumno siente la necesidad de que le escriban.	1	2	3	4
7.	Mi alumno siente como que no puede confiar en nadie.	1	2	3	4
8.	Mi alumno ya no tiene amistades cercanas.	1	2	3	4
9.	Los intereses de mi alumno e ideas no son las mismas que la de sus compañeros	1	2	3	4
10.	Mi alumno se siente excluído.	1	2	3	4
11.	Mi alumno se siente completamente solo.	1	2	3	4
12.	Mi alumno es incapaz de comunicarse con los que lo rodean.	1	2	3	4
13.	La vida social de mi alumno es muy superficial	1	2	3	4
14.	Mi alumno siente mucha necesidad de compañía.	1	2	3	4
15.	Nadie en realidad conoce a mi alumno.	1	2	3	4
16.	Mi alumno se siente excomunicado.	1	2	3	4
17.	Mi alumno no esta contento de ser tan alejado	1	2	3	4
18.	Es muy difícil para mi alumno hacer amistades	1	2	3	4
19.	Mi alumno se siente excluído por otros.	1	2	3	4
20.	Mi alumno tiene compañía pero en realidad no tiene a nadie.	1	2	3	4

Gracias por su cooperación en llenar este cuestionario. Su ayuda es muy apreciada.

Por favor regrese este cuestionario en el sobre incluído.

APPENDIX H

MEMORANDUM TO TEACHERS

PHOENIX DAY SCHOOL FOR THE DEAF

M E M O R A N D U M

TO: See Below DATE: _____

FROM: Beth and Alan SUBJECT: _____

A few months ago a graduate student from the U of A came to visit, and handed out some surveys for you to complete. Since that time, a few minor changes had to be made. Now we are ready to complete the research.

The students listed below are in your class. Their parents have agreed to participate, and now it's your turn. Please complete surveys for the following students.

Some of you already should have surveys, and for those who don't they are enclosed. It would be helpful if you returned these immediately to me (send them through inter-campus mail) -- The sooner this is done, the better it will be for Vicki Loyer--the graduate student.

If you have any questions or need more surveys, let me know! Thanks for your contribution to research!

APPENDIX I

LETTER TO TEACHERS



THE UNIVERSITY OF ARIZONA

TUCSON, ARIZONA 85721

COLLEGE OF AGRICULTURE
SCHOOL OF HOME ECONOMICS

May 30, 1984

Phoenix Day School for the Deaf
1935 West Hayward Avenue
Phoenix, AZ 85021-6997

I would like to thank you for completing the teacher perception questionnaires that were sent to you. The information that you provided in terms of answering questions and giving feedback was extremely valuable, and I sincerely appreciate your efforts.

I intend to be finished with my thesis by the middle of June. At that time I will send a summary of the results to Dr. Oberbeck, which will be made available to you when you return to school in the fall.

Once again, thank you very much for all of your help.

Sincerely,

A handwritten signature in cursive script that reads "Vicki L. Loyer".

Vicki L. Loyer
Master's Candidate
Division of Child Development
and Family Relations

VLL/bnm

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