

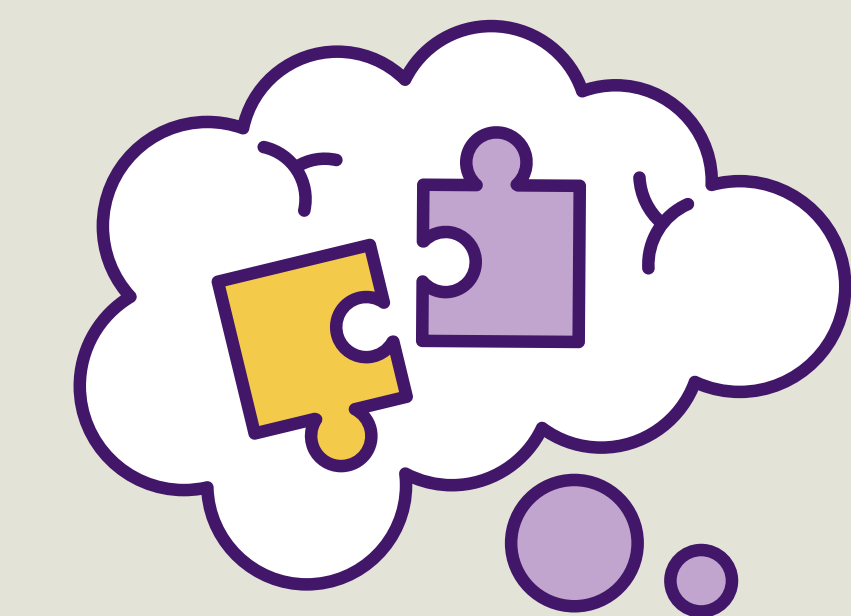
# THE EXPERIENCES AND PERCEPTIONS OF LOW-INCOME MULTILINGUAL FAMILIES WITH LATE-DIAGNOSED DEAF CHILDREN AND THEIR TEACHERS



## THEORETICAL FRAMEWORK

In this study, James Paul Gee's Socio-Linguistic Theory and Multilingualism Theory will be used to examine the perceptions and experiences of low-income multilingual families whose deaf children were diagnosed late. According to this theory, language is not only a means of communication, but also plays an important role in social interaction, identity construction and power relations.

According to Gee's socio-linguistic theory (2008), language carries different meanings in different social contexts. The elements that make up language are not only words, but also gestures and facial expressions, and tone of voice. The use of language is a way for people to reflect their values and beliefs.



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FURTHER INFORMATION!

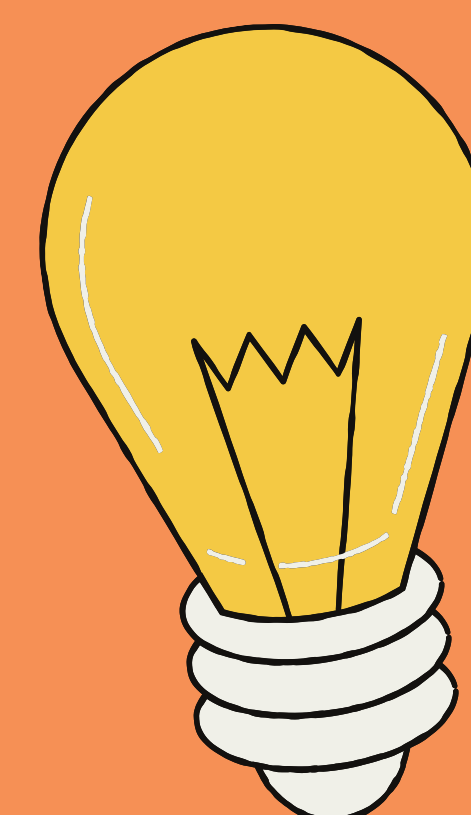


## INTRODUCTION

This research delves into the experiences and perceptions of late-diagnosed deaf children within low-income, multilingual families, while also examining the insights of teachers of Deaf who work with these families. The study seeks to understand the impact of delayed detection and resulting language deprivation on these families. Given that the degree of deafness and age at diagnosis are critical factors in the development of language and communication skills, early intervention is crucial. Although technological advancements and new-born screening programs have improved early detection rates, a significant number of deaf children still receive late diagnoses. These delays can lead to severe language deprivation, affecting not only educational and social outcomes but also the broader family dynamics, as multilingual families face unique challenges in accessing appropriate resources and support systems. The study aims to highlight these complexities and underscore the importance of timely and effective interventions to mitigate the effects of language deprivation among deaf children.

## OBJECTIVE

This study contributes valuable insights to the discourse on late-diagnosed deaf children.



## METHODOLOGY

With Families:



Naturalistic Observation

(Angrosino, 2016)



Semi-Structured Interviews

(Brinkman and Kvale, 2018; Neuman, 2014)

With Teachers of Deaf:



Survey

(Keiding and Louis, 2018)

## RESEARCH QUESTIONS

1. What are the experiences and perceptions of low-income multilingual families about the health and education system in the processes related to their late-diagnosed deaf children?
2. How are the experiences and perceptions of teachers of Deaf children working with low-income, multilingual families shaped when working with late diagnosed deaf children?

## PARTICIPANTS

- With 6-10 low-income, multilingual families
- With 100 Teachers of Deaf

## LITERATURE REVIEW

Just like all families, families of deaf children also have expectations and concerns for the health and happiness of their children. They face more difficulties than other families because they have concerns about their ability to communicate with their children and whether it is possible for their children to participate in everyday life (Sass-Lehrer, Porter and Wu, 2016). In addition to these concerns, they are more likely to experience economic difficulties (Macaulay and Ford, 2013), social isolation and cultural adjustment (Bowen, 2016).

Parents of deaf children must spend more money to meet their children's needs. Services such as radio aids, sign language interpreters, and special education are expensive (Sass-Lehrer et al., 2016). To access these services, families may need to rearrange their budgets according to the needs of their deaf children (O'Neill et al., 2019). This situation is even more difficult in low-income, multilingual families.

One of the other biggest challenges these low-income multilingual families face is lack of access to resources (Sheehy-Skeffington and Rea, 2017). Families whose first language is not English may have difficulty accessing information (Yoshikawa, 2011) and available resources regarding their child's deafness. As a result of the native language of the families being different, the difference in the languages of families from different origins and the country they come from is seen as an obstacle called a "language barrier" (Arfa et al., 2020). These barriers include insufficient proficiency in the majority language; for this reason, lack of knowledge about services and lack of understanding of how to act in these services, the use of medical terms, lack of experience and intercultural communication skills and perceived attitudes contribute towards insufficient time allocated to interaction with the families (Arfa et al, 2020). Considering all this, it is more likely that diagnosis and intervention are delayed in deaf children from low-income multilingual families.



## POLICY BACKGROUND

1. British Audiology Association (BAA) Scotland Report in 2021
2. Taylor Review, 2023
3. Consortium for Research into Deaf Education (CRIDE) Scotland Reports

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