Media Influence on Perspectives of Deafness as Culture

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by

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Abstract

During a time when the debates between the Deaf culture and the medical community are extremely intense due to cochlear implant technology, it is important that there is more widespread awareness of both perspectives. The PBS documentary film, *Sound and Fury*, was created as a response to the increasing number of young cochlear implant recipients. The film follows the lives of two families—one deaf, and one hearing—in their quests to reconcile their beliefs about Deaf culture, and cochlear implants. Since its release in 2000, the film has been used as an educational tool in a variety of environments. Members of the Deaf Community have responded critically to *Sound and Fury*, claiming that the film is biased towards the hearing perspective and that it does not provide an accurate representation of the Deaf Culture. The potential of the film to be used in the classroom was called into question. The purpose of this study was to collect data on student perceptions before and after viewing the film as a means of determining the influence of *Sound and Fury* on perspectives of deafness and Deaf culture.

One-hundred sixteen students participated in the research study. Data was gathered from the survey designed to measure student responses. Individual responses were paired to determine the change in perspectives after viewing the film. Responses of subject groups as a whole were also examined to determine trends in group perceptions. Results discuss the impact of the film generally and its potential for use in educational settings. It is important that students and educators who choose to use *Sound and Fury* as a means of educating about deafness and Deaf Culture understand the influence of the film and its potential and limits in that function.
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Table of Contents

Abstract iii
Approval Page v
Acknowledgements vi

Review of Literature:
  A Linguistic Culture 1
  History of the Deaf Culture in America 4
  The Cochlear Implant Controversy 9
  Historical Perceptions of Deafness 13
  Present Perceptions of Deafness 15
  Culture in the Media 16
  Deaf Culture in the Media 19

Methods 23
Results 25
Discussion 29

References 34
Appendix A 44
Appendix B 47

Tables 50
Figures 54
Review of Literature

*A Linguistic Culture*

Culture has been defined as the traditions, artistic expression, shared experience, and patterns of behavior that unite various social groups; various culture groupings have historically been created according to boundaries of race, ethnicity, religion, sexuality, and gender. Culture is traditionally related closely with family, community values, and upbringing, and it is most often inherited from parents. Language is central to cultural sharing and transmission (Rutherford, 1988). Several nontraditional culture groups deviate from this norm and culture is shared between other members of the community, rather than between parent and child. The Deaf community is an example of a nontraditional culture. From the perspective of Deaf individuals, deafness is a culturally unifying characteristic defined by the shared history, struggles, and experiences of Deaf people (Moore & Levitan, 2003; Padden & Humphries, 1988). Some individuals believe that groups must contain other components to be considered cultures, including food, dress, religion, and a separate nation-state; others believe that a group can be considered a culture without them. The Deaf culture lacks some elements that some individuals have associated with culture, but it should be considered a culture because of its exclusivity, or the boundaries it creates between the deaf and the hearing, and its authenticity, or its power to define members (Padden, 1996). At the heart of the Deaf culture is American Sign Language (Rutherford, 1988). For the Deaf, the ability to perceive sound is not a priority. To the mainstream population, deafness is a medical condition, and the majority perspective tends to dwell on the loss of sound perception associated with it.
Not all individuals who experience hearing loss are considered members of the Deaf culture. Individuals with mild or moderate hearing impairments and late-deafened individuals often feel more comfortable communicating in verbal language and socializing with hearing individuals. The Deaf culture is comprised of individuals who rely on American Sign Language (ASL) as a primary form of communication (Dolnick, 1993; Rutherford, 1988). With ASL as their voice, the Deaf consider themselves to be a linguistic minority, such as Hispanics, in no more need of ‘fixing’ than any other minority culture (Emerton, 1996). Deaf individuals do not self-identify as “handicapped” or “disabled” and believe that the terms better describe individuals who are blind or who have physical disabilities (Padden & Humphries, 1988). The big “D” in “Deaf” is significant as well. Being “deaf” (with a small “d”) is a medical condition; to be “Deaf” means association with a rich and diverse culture (Dolnick, 1993). Individuals who consider themselves to be members of the Deaf culture usually attend schools for the Deaf, where cultural transmission can be easily seen. Social attitudes, ASL skills, a sense of unity, and common pastimes, such as interest in certain sports, are developed at the institutions (Dolnick, 1993; Johnston, 1997; Moore & Levitan, 2003).

Unlike members of ethnic minority groups, Deaf individuals cannot be identified by appearance alone. Hearing loss affects all races, ethnicities, religions and cultures; the only unifying characteristic of the culture is the use of sign language as a media for communication. Social practices employed by members of the Deaf culture are not based in tradition but rather developed out of communicative necessity (Moore & Levitan, 2003). Communication lies at the heart of the Deaf culture, making its existence as a
separate culture unclear until the late 20th century. Throughout history, several oralist groups have attempted to eradicate sign language and its widespread use among Deaf individuals in order to assimilate them into mainstream culture (Moore & Levitan, 2003). Despite the efforts, the Deaf culture has resisted transition and continues the struggle to be considered a viable and full-fledged minority culture. The Deaf culture is a necessary element in modern pluralistic society (Wilbers, 1988).

America needs Deaf culture just as it needs Black Culture, Asian Culture, Hispanic Culture and Native American Culture. We need to learn what these cultures have to teach us about their concepts of reality and their ways of perceiving the world. We need to be informed by their particular languages and enlightened by their art forms. And, for their sake, we need to remember that there is perhaps no greater tragedy than to deny people their selfhood and sense of individual identity. (Wilbers, 1988, 203)

Recently discourse about Deaf culture has focused on the terminology often associated with deafness. Many Deaf individuals do not like to associate deafness with disability. The consideration of the ability to hear as the standard for “normal” is considered by some to be a social, rather than physical, construction. Individuals who cannot hear are only limited by the social construction of physical environments that cater to the abilities of a hearing-dominant culture (Branson & Miller, 2002; Brueggemann, 1995; Corker, 1998; Davis, 1995; Lane, 2002; Skelton & Valentine, 2003). The intangible and mutable qualifiers “normal” and “disabled” are socially-created stereotypes that are limiting when describing variation in the human condition.
(Parasnis, 1996). Social remedies should be sought for the problems that stem from communication barriers; medical remedies do not address the social nature of the issues between the Deaf and hearing worlds (Ruthen, 1993).

**History of the Deaf Culture in America**

The Deaf culture did not flourish in early America. Deaf individuals were born to different families in various religious and geographical communities and often never interacted with other deaf people. The only record of Deaf culture in the early periods of the nation was Martha’s Vineyard, where a hereditary deafness was frequently manifested in isolation (Groce, 1985; Van Cleve & Crouch, 1989). The deaf individuals there were in such a high proportion that they were integrated into the larger hearing community and did not develop a separate sense of unity among deaf citizens. Deaf and hearing individuals alike learned sign language at an early age, and without linguistic barriers, social barriers between deaf and hearing individuals never developed as they did in mainstream culture (Groce, 1985).

Education served as the setting in which the Deaf community was brought together within the larger American culture (Van Cleve & Crouch, 1989). The question of how to educate deaf students was often answered by residential institutions, as family members could not or did not know how to maintain children who were unable to hear. The first attempts to create schooling for deaf children were spearheaded by the Bollings of Virginia in the early 19th century. Due to a family history of congenital deafness, the deaf Bolling children were sent to the famous Braidwood Academy in Scotland, a well-known English school for the deaf. The financial hardships of travel and the
Revolutionary War prompted the Bolling family to search for a more local means of education, and the arrival of John Braidwood, the grandson of the founder of the British school, provided them with a solution. After some initial impediments, Braidwood and the Bollings established a school on Cobbs, the family plantation in Virginia. The Cobbs school only survived a year-and-a-half, but its presence was a milestone in deaf education in the United States (Van Cleve & Crouch, 1989).

In the Northern United States, another individual was seeking educational options for the deaf. Dr. Mason Fitch Cogswell of Connecticut sent Thomas Hopkins Gallaudet to Europe in search of methods of educational for the hearing impaired that would be suitable for his deaf daughter. Unable to gain information from the close-mouthed Braidwood family in Scotland, Gallaudet went to France where he met the abbé Sicard of the National French Institute and his deaf pupils. Laurent Clerc, a student at the institute, agreed to return to America with Gallaudet to help establish a school for the deaf in Connecticut. On the journey back to the United States, Clerc taught Gallaudet the intricacies of Old French Sign Language (LSF), and together they founded the American Asylum for the Instruction of Deaf and Dumb Persons in Hartford in 1817 (Moore & Levitan, 2003; Padden & Humphries, 1988; Van Cleve & Crouch, 1989). The school would grow to become a center of Deaf culture, eventually becoming the first and only public university for Deaf students. As the school accepted more students, the sign language Clerc brought from Paris began to blend with other home-created American signs and the dialect of Martha’s Vineyard, creating the beginnings what would come to be known as American Sign Language (Moore & Levitan, 2003).
Since the early days of the nation to the present, the Deaf community has flourished because of educational settings in which the students used ASL. After Gallaudet established his school in Hartford, other schools followed (Jankowski, 1997; Van Cleve & Crouch, 1989), most of them relying on the new signed language system. In the late 19th century, the educational community shifted methods and began to discard the use of sign language in favor of speech and lipreading. In 1880 the Second International Congress on Deaf Education gathered hearing educators of deaf students from around the world in Milan; with only one deaf educator represented, the congress voted to pass a resolution stating that only oral methods were to be used in the education of deaf students (Jankowski, 1997). The blow to the residential school system in the United States was clear over the next few decades as the use of sign language dwindled as a medium for teaching.

The following sixty years were characterized by a dominance of oralist methods in deaf education. To preserve the community and continue to transmit their culture, Deaf individuals created the National Association of the Deaf (NAD) in 1880 and other organizations that would help to provide a sense of cultural unity (Jankowski, 1997). The experiences related by Deaf students from the time indicate that the success rates for speechreading were not very high and that sign language continued to be shared among the students, even when they were punished severely for speaking with their hands (Ladd, 2003).

The beginning of a change in general attitude toward sign language was marked by the work of linguist William Stokoe in 1960. After conducting an extensive research
study, he concluded that American Sign Language was not simply a visual transliteration of English, but rather a valid language with its own unique syntactical structure and vocabulary (Jankowski, 1997). In 1965 he published the first dictionary of American Sign Language, which classified signs by five parameters: handshape, palm orientation, location, movement and repetition (Moore & Levitan, 2003). Stokoe’s work was not initially widely accepted by scholars and even by the Deaf community; however, the growing disillusionment with oralism combined with Stokoe’s research brought the beginnings of change to the deaf education system.

When sign language was reintroduced into the classroom, it did not appear in its familiar ASL form. Many hearing educators still focused on the importance of teaching English, and total communication became the method of choice. Educators encouraged simultaneous speaking and signing by deaf children to facilitate the development of English literacy and reinforce speechreading and auditory training skills (Jankowski, 1997). The method proved to be problematic for several reasons. Since American Sign Language has its own grammar and syntax, simultaneous communication would have to favor one structure over another. Therefore, in most cases, English word-order tended to be dominant when modes were used simultaneously (Ladd, 2003). Additionally, there are several English words that do not exist in sign language. In order to visually express English words and affixes which do not exist in ASL, hearing educators created new signed systems based on English, including Signing Exact English (SEE), Signing Exact English (SEE 2), and Linguistics of Verbal English (LOVE) (Moore & Levitan, 2003). Though the systems were more easily understood by native speakers of English, to deaf
students they were often confusing and cumbersome (Jankowski, 1997; Ladd 2003; Moore & Levitan, 2003). Debate between signed English systems, oralist methods, and bicultural/bilingual strategies continue to be a focal point in the modern education system.

Recent history of the Deaf culture in the United States has focused on empowerment and social equality. The Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 provided support needed by the Deaf community to ensure equality in education, employment and civil rights. Captioning and interpreter rights constitute ongoing struggles in the Deaf community as society works to strike a balance between securing equal rights and providing special treatment for a group that does not self-identify as disabled.

Perhaps the most notable victory for Deaf culture occurred at Gallaudet University in March of 1988. After the resignation of the former university president in 1987, the Deaf community began to mobilize to support the selection of the institution’s first Deaf president. When the board announced the hearing nominee, Dr. Elisabeth Ann Zinser, as the new university president, the Deaf community was in shock at the paternalistic nature of the decision. Students, faculty, staff and alumni who had been on campus awaiting the announcement congregated at the hotel where the board was staying (Jankowski, 1997; Lane, 1992; Moore & Levitan, 2003; Van Cleve & Crouch, 1989). The chairman offered no support to the questioning group and stated that a deaf candidate had not been offered the position because “deaf people are incapable of functioning in a hearing world” (Lane, 1992, p.188). The group was stunned and infuriated by the
remarks of the board chairman and responded by staging a protest on the campus. All of the entrances to campus were blocked by busses; students refused to admit administration until Dr. Zinser was replaced with a Deaf president, the board chairman resigned, and the deaf membership of the board was increased to at least 51%. The Deaf President Now protest rally lasted for a week, and the board announced full complicity with all of the demands, including the appointment of the university’s first Deaf president, I. King Jordan. The movement had a profound effect on the empowerment of Deaf culture. Deaf individuals gained a sense of self-efficacy and control, and they took their place as a viable cultural and political minority in modern culture (Brueggemann, 1995; Lane, 1992; Jankowski, 1997; Moore & Levitan, 2003; Van Cleve & Crouch, 1989).

The Cochlear Implant Controversy

From the medical perspective, deafness is a classified strictly as a sensory deficit (Tyler, 1993). The medical model has historically dominated mainstream views of deafness and encouraged research in the area of auditory nerve stimulation. The earliest records of this research date back to the late 18th century when scientist Alessandro Volta attempted to electrically stimulate his own auditory system by connecting a battery of approximately 50 volts to two metal rods that were inserted into his ears. He described the sensation created as a loud boom followed by a sound like boiling liquid (Niparko, et al., 2000).

The first successful cochlear implant surgery was completed in the 1970s. Since then, the technological device that simulates hearing for deaf individuals through electric stimulation of the auditory nerve has improved dramatically. The cochlear implant is
composed of four basic parts. The external microphone picks up sounds and translates them into electrical impulses. The signal is then sent to the externally worn speech processor, which analyzes and processes the incoming signal. The external transmitter, which is worn behind the ear over the mastoid bone and held in place by a small magnet, sends the sound across the skull to the implanted receiver. The receiver transmits electrical impulses into the cochlea, which stimulates the auditory nerve. The signals pass along the nerve to the brain, where they are interpreted as sound (Manning, 2000b; Stone, 2002).

According to the National Institute on Deafness and Other Communication Disorders (2002), the FDA estimates that by 2002, 59,000 individuals across the world had received cochlear implants. Several individual testimonies indicate positive life changes and high levels of satisfaction with the implant (Brown & Holmes, 1991; Luetke-Stahlman, 1994; Van Ingen, 2000). In the United States alone, approximately 13,000 adults and almost 10,000 children had been implanted (National Institute on Deafness and Other Communication Disorders, 2002). Due to the increased benefits of early implantation, it can be expected that the number of young children implanted will continue to grow.

The debate between the medical community and the Deaf community surrounding the early implantation of children continues. Some researchers believe that the number of individuals who are currently benefiting from the implant technology is far too small compared to the number that could potentially benefit. Of the 12,000 babies born annually, it is believed that as many as one-third may benefit from implantation
(Deafness Research Foundation, 2003; Sharp, 2000). For many hearing families, the opportunity to provide their children with the ability to hear far outweighs the cultural argument (Farley, 2002; Manning, 2000a; Mayhall, 2001; Neri, 2001; Sharp, 2000; Whalen, 1999). Research has shown that the earlier a child is implanted, the greater the possibility of success with the device. Implants have also been shown to benefit children’s social relationships with hearing children (Bat-Chava, 2001). It has been shown that a variety of factors, including characteristics of the child and family, characteristics of the implanted device, and educational variable, influence the implanted child’s ability to develop speech and language (Geers, 2002). Since the effectiveness of the cochlear implant is determined by many factors not related to the device itself, it is important for families to keep in mind the limitations of the implant and seek out strong supportive services (Ertmer, 2002).

Other individuals perceive implantation of young children as unethical or problematic (Lane, 1992; Lane & Grodin, 1997; Manning, 2000a; Moores, 2002; Padden, 2001; Peters, 2000; Swanson, 1997). Some believe the practice abusive. Some individuals would prefer leaving the decision for the child to make when he or she is older (Artinian, 2004; Banakis & Kelly, 2005a), citing the fact the some early implanted individuals have been known to turn their implants off later in life (Emmons, 1999; Manning, 2000a; Swanson, 1997). Within the last decade, the National Association of the Deaf has toned down its stance on implantation. The organization has moved from a position against the decision of the Food and Drug Administration to approve
implantation (National Association of the Deaf, 1993) to a more moderate position that takes diversity of opinion and perspective into account (NAD, 2000).

The debate over early implantation has also been considered in the judicial system. In Grand Rapids, Michigan in October 2002, the 17th Circuit Court of Kent County upheld a parent’s right to choose not to implant deaf children. Lee Larson, deaf mother of two deaf sons, temporarily relinquished custody of her children to the courts in 2001 with the intention of regaining custody. The boy were placed in foster-care and enrolled in a school with an aural-oral program. After the boys struggled to adjust to the program, school administrators and the foster-care agency suggested the boys be implanted. The boys’ mother refused to allow the surgery, and the matter went to court. “I should decide. They are my flesh and blood. I am deaf. God made them deaf. I do not want them to have implants” (MSM Productions, 2005). Despite the court’s expressed belief that implants were in the child’s best interest, the judge declined to rule against the mother in the case on the basis of parental rights (Gaines, 2003; MSM Productions, 2005). The NAD expressed support for the court’s decision in upholding parental rights and in noting the elective nature of the cochlear implant surgery (NAD, 2002).

Currently the cochlear implant debate is growing in complexity. Research continues to show the benefits of the implant, especially as the technology improves (Bat-Chava & Deignan, 2001; Blarney, Barry & Jacq, 2001; Chin, Tsai & Gao, 2003; Discolo & Hirose, 2002; Geers, Spehar & Sedey, 2002; Niparko & Blankenhorn, 2003). Concerns are being raised about the equitable distribution of implants; currently the large majority of individuals implanted are Caucasian, while Caucasians barely make up the
majority of deaf individuals (Innes, 2001). Backlash against members of the Deaf Community who are against implantation continues to grow (Davis, 1997; Levy, 2002; Tucker, 1998; Young, 2002). A growing diversity in opinion can be seen within the Deaf culture, as well as within the larger hearing culture. Neither the benefits of the implanted device nor the positive attributes of the Deaf culture can be overlooked (Ramsey, 2000). Although some individuals maintain devout allegiance to one faction or the other, many individuals have found ways to balance cultural appreciation and audiological rehabilitation (Banakis & Kelly, 2005b).

**Historical Perceptions of Deafness**

An understanding of the historical perspectives of deafness provides a base for understanding the framework that shapes current views of deafness and the underlying cultural and medical debates. Biblical references towards the deaf send mixed messages. The Old Testament discusses deafness as part of God’s plan, and mandates that the deaf are not to be cursed but rather treated with respect (Van Cleve & Crouch, 1989). Contrastingly, the New Testament, deaf people are reduced to objects of the miraculous works of Jesus and often marked demonically possessed individuals. Some early interpreters of the Bible believed that since deaf people are unable to physically hear the word of God, they cannot be Christian, develop faith, or experience salvation. Religious beliefs translated to legal rights, and for many centuries, deaf individuals were denied basic civil rights (Moore & Levitan, 2003; Van Cleve & Crouch, 1989).

Throughout ancient and medieval history, deafness and muteness were viewed as a single condition and deaf individuals were often considered uneducable. Deaf
individuals were isolated from each other and from the general society. Most physicians viewed deaf individuals from a strictly medical perspective. Deafness was a physical malady in need of treatment and did not constitute a separate community or culture (Van Cleve & Crouch, 1989). In 1591, a German physician named Solomon Alberti published research indicating that speech and hearing were physiologically unrelated. He went on to conclude that deaf individuals were capable of rational thought, despite any lack in speech abilities (Van Cleve & Crouch, 1989). Although Alberti proved that deaf people were no less capable of intellectual thought than their hearing counterparts, stereotypes about the abilities of deaf individuals would persevere for centuries.

In the 19th century, the evolution theories and writings of Charles Darwin drove speculations that social, behavioral and physical limitations were the result of bad genetic makeup. Some individuals believed that society needed to practice selective breeding in order to eradicate human defects. Alexander Graham Bell revealed his support of eugenics in his *Memoir upon the Formation of a Deaf Variety of the Human Race* in which he suggested that deaf people weakened the society; in order to prevent deaf children from being born, congenitally deaf individuals should be forbidden to intermarry (Moore & Levitan, 2003; Van Cleve & Crouch, 1989). He also advised several preventative measures that would limit the opportunity of deaf individuals to socialize and marry one another, including abolishing the residential school system, prohibiting the use of sign language in education, and forbidding Deaf adults from teaching deaf children (Moore & Levitan, 2003). Not all scientists supported Dr. Bell’s theories; some did not view deafness as a pathetic and pitiable condition and were not opposed to their
intermarriage (Gillett, 1891; Gillett, 1890); however, the theories of Dr. Bell and other prominent educators of the deaf led to prevailing negative sentiment and drastic eugenic practices. An unknown number of deaf children were sterilized to prevent the breeding of “undesirables”; the practice of forcibly sterilizing deaf children and teenagers was later adopted by the Nazis in the 20th century (Moore & Levitan, 2003).

**Present Perceptions of Deafness**

Several research studies conducted on current perspectives indicate positive growth when compared with historical perceptions of deafness; studies also indicate that opportunity exists for further sociocultural development in perceptions of deafness. Few instruments have been designed for use in profiling attitudes toward people who are deaf (Berkay, Gardner & Smith, 1995; Cooper, Rose & Mason, 2004), and a limited amount of research has been conducted on the subject. A study conducted by Kiger (1997) indicated positive attitudes of hearing individuals toward their deaf counterparts. Members of the hearing society do not consider deaf people to be a political, social, or economic threat and view them more positively than other disabled groups. The positive responses of the hearing individuals surveyed may indicate paternalistic and patronizing attitudes rather than support or appreciation for deaf people (Lane as cited in Kiger, 1997).

More recent research has revealed that students exposed to positive deaf and hard of hearing role models in employment settings correlates with an increase in positive attitudes about the employability of deaf workers. After viewing video tapes featuring deaf workers, respondents were able to generalize the abilities of the deaf individuals to
various types of employment that were not introduced in the presentation (Zahn & Kelly, 1995). The investigation makes clear the improvement in attitude related to exposure to positive deaf and hard-of-hearing role models, indicating that further education could lead to growing positive attitudes and increased cultural acceptance of Deaf individuals.

Attitudes of mental health professionals towards deaf individuals have also been assessed. Historically mental health professionals have viewed deaf individuals as immature, impulsive, aggressive, and socially inept (Lane, 1992). Results from more current studies indicated that more positive attitudes are correlated with contact between health professionals and deaf individuals of equal or higher status. Contact with other mental health professionals who are deaf may also create positive changes in attitudes, but the small percentage of qualified deaf professionals in the field limits possibility of change. Training in deafness and deaf issues also resulted in more positive results, supporting an increase in training related to deafness (Cooper, Rose, & Mason 2003).

Culture in the Media

Television and other electronic media play an important role in the development of the social attitudes of the younger generations; if the opportunity to create a pluralistic society that attempts to embrace diverse cultural traditions rests in the hands of the children and adolescents, how the media portrays cultural minorities must be examined (Berry, 2000). Media portrayal also provides an understanding of the current political and social atmosphere for minority groups, reflecting the holistic views and prejudices of the society. In addition, the mass media has the potential to impact the self-concepts of the minority individuals that it represents, as well as their understanding of their minority
group as a whole, especially when direct contact with represented social groups is limited (Fujioka, 1999).

The history of the television media is rampant with negative and hostile images of African-Americans (Downing, 1988). Based on the television shows that represented African-Americans between 1969 and 1984, an average viewer could easily conclude that all blacks come from a single-parent home, black mothers are overly aggressive, black fathers are irresponsible, black parents cannot attain professional positions, the black home lacks love and is filled with conflict, and all black families are poor (Harris, 1992). Not only does the news media avoid covering stories that target African-American and Latino audiences (Heider, 2003), but the news media also frequently inaccurately reports or omits information in accounts of black people (Abron, 1991). Research in the early 1990s indicated positive changes in the representation of African-Americans in television media with shows such as *Charlie and Company* and *The Cosby Show* (Downing, 1988; Merritt & Stroman, 1993). Although the quality and quantity of representation of African-Americans has increased to a degree, they are still more likely than European-Americans to be portrayed according to stereotypical roles or characteristics (Berry, 2000).

Commercial entertainment television is almost completely lacking Latino influences; rarely is a family of Latino heritage featured on prime-time television (Berry, 2000). Analysis of the Disney film *The Lion King* as a nationalizing agent highlights some of the pressures felt by Latinos in American society. Events and characters in the film imply that the need for diversity exists only when minority groups accept their
unequal social position, social hierarchy is natural, women should submit to male authority and privilege, and evil is inherent in the film’s dark characters. Additionally, the dark, shadowed land that is poorly controlled by the minority creatures likens to the inner cities and the inability of the residents to manage the territory. The villain hyenas are dark-skinned and approximate Black English and Latino slang, demonstrating the negative associations created by the film (Gutiérrez, 2000).

Asians and Asian-Americans have historically been portrayed in film media as exotic, foreign, and evil (Mok, 1998). Evil genius, mystic, sidekick, and talented student are only a few roles that are typically portrayed by Asian actors (Berry, 2000). Current media fails to distinguish between Asian ethnic groups and between Asians and Asian-Americans. They are portrayed as either extremely positive or negative characters; and the more Asian the characters look and act, the more likely they are portrayed as villains (Mok, 1998). The image of the Native American has been arrogantly misused for decades of filmmaking, and now the media is denying them any fair representation (Berry, 2000).

While progress is evident in the representation of minorities in the media over the last several decades, the roles given to minorities for roles in prime-time television decreased in 1998. Less than 40 percent of the actors in prime-time are women, and their characters tend to be younger than male counterparts, emphasizing the social and cultural importance of youth (Anderson & Cavarallo, 2002). The depiction of minorities in television and film media is still far from ideal. The negative stereotypes that are propagated by the industry affect not only the self-concept of individuals, but also the social attitudes of the larger society.
Deaf Culture in the Media

Historically, deaf individuals have been represented through the media in one of several ways: as socially isolated mutes, as flawless speakers, as hearing individuals pretending to be deaf, as unhappy and depressed individuals contemplating suicide, as objects of humor, or as expert speechreaders. Since the early 1900s, over 150 television programs and movies have included or featured deaf actors; however, it was not until the production of *Children of a Lesser God* (Sugarman, Palmer & Haines, 1986) that a deaf actor held a prominent film role. Due to the lack of media portrayal of Deaf culture and realistic deaf characters, the entertainment industry has served to propagate negative stereotypes about the Deaf community and deaf individuals (Schuchman, 1988).

During the era of silent films, deaf individuals experienced a level of equal opportunity in the film and entertainment industry that has not yet been duplicated. Without the need for interpreters, additional captioning, or assistive listening devices, deaf moviegoers enjoyed films alongside their hearing counterparts (Schuchman, 2004; Schuchman, 1988). The time period also provided employment opportunities for several deaf actors, including Granville Redmond, who was a known companion of Charlie Chaplin, and Emerson Romero. Once motion pictures began to include sound, the deaf actors found themselves out of work and the deaf audiences found a new imposing barrier between themselves and the equal access to film that they had previously enjoyed (Schuchman, 1988).

While the educational community was focused on total communication and mainstreaming deaf children in the 1970s and 1980s, equal access also became a concern

On November 8, 1992, CBS aired a segment on *60 Minutes* entitled “Caitlin’s Story” that featured a six-year-old recently implanted deaf child. “Caitlin’s Story” is controversial as a representation of cochlear implants and the Deaf culture. Deaf culture activists Roz Rosen and Harlan Lane were interviewed for hours; their comments were reduced to five-minute segments that inaccurately represented the individuals’ positions.
Interviewer Ed Bradley was captivated by the young girl and her amazing social abilities; he did not recognize the vibrant social life of members of the Deaf culture (Levesque, 2001).

The PBS documentary film, *Sound and Fury*, was created as a response to the increasing number of young cochlear implant recipients. The film follows the lives of two families--one deaf, and one hearing--in their quests to reconcile their beliefs about deafness, Deaf culture, and cochlear implants. Two brothers and their families find themselves in the middle of the cochlear implant debate. One brother is deaf, married to a deaf wife with deaf kids. The other is hearing, married to a hearing daughter of deaf parents with two hearing children and one deaf child. When the hearing brother decides to implant his young son, the families find themselves torn between two distinct cultures. The deaf family stands by their initial assertion and decides not to implant their children, citing the tragedy of their cultural destruction. The extended family questions this decision with arguments that include accusations of poor parenting and child abuse (Banakis & Kelly, 2005a; Hewitt, Gose & Birkbeck, 2000; Weisberg & Aronson, 2000). Some Deaf individuals supported the film and its message while recognizing its limitations and shortcomings (Roth, 2001); others responded negatively, claiming that the documentary had a hearing bias and Deaf culture was poorly represented (D., 2002; Deafgrrrl, 2002; James, 2002; Taieia, 2002; Warnica, 2001a; Warnica, 2001b).

Literature is another media form that has been used to represent deaf individuals. Deaf characters are used in short stories and novels for a variety of purposes. A research study investigating the presence of deaf characters in literature found about 100 short
stories and 50 novels; though some demonstrated a greater understanding of the deaf experience, most of the portrayals were stereotypical and lacked foundation in reality (Guella, 1983). Only a few representations of deaf individuals exist in children’s literature, and they are limited to pathologically-focused narratives. One such work, *Mandy*, by Barbara D. Booth (1991), features a young deaf girl as the main character. Though initially promising, the story highlights the struggles of the deaf child in the hearing world and does not provide any sense of cultural context, relying on previously established stereotypes of the Deaf experience (Neese Bailes, 2002).

Information about the general public’s current attitudes towards the Deaf culture and community is lacking. More research and anecdotal evidence is needed to more accurately define the social environment in which hearing and deaf individuals interact. A greater degree of understanding about attitudes and perspectives on deafness can be ascertained from how individuals of cultural minorities are represented and treated in the mass media. The purpose of the present study was to gain insights into perceptions of Deaf culture and cochlear implantation, as well as the impact of media on current attitudes.
Methods

Subjects

Research participants were drawn from the student population at Miami University and data collection was conducted in several sections of a course focused on issues in diversity. As such, the gender, age, ethnic background and major status of the subjects reflect the general distribution of the student population at the present time.

Instrumentation

The stimulus materials consisted of a VHS copy of the film *Sound and Fury* (Weisberg & Aronson, 2000). Two versions of a questionnaire were designed reflecting perspectives and knowledge of deafness, Deaf culture, and cochlear implants. In addition to the items on deafness, the first questionnaire gathered demographic information, including major of study, gender, year in school, and whether participants knew any Deaf individuals. The second questionnaire repeated the items on deafness and also contained items specific to the film *Sound and Fury*, such as whether the subjects agreed or disagreed with the families’ decisions regarding cochlear implantation. The first version of the survey was designed to be distributed before viewing the film, and the second was made for use after the movie. Appendix A and Appendix B contain copies of the pre-film survey and the post-film survey, respectively.

Procedures

Subjects invented a personal code that was used on the first survey and again on the second survey in order that the pre/post instruments could be matched for statistical analysis. After finishing the first survey, the research subjects viewed the film *Sound and Fury*.
*Fury.* Due to the length of the film and the time constraints of the academic schedule, half of the film was viewed in one class session and the second half was viewed during the next scheduled class session. After the conclusion of the film, subjects filled out the second questionnaire. One section of the diversity course was selected for use as a control group. Subjects from the control group completed the first questionnaire and the second during consecutive class periods without viewing the film. Two additional sections of the diversity course was selected to take the second survey after viewing the film without taking the first survey before viewing. Comparison between data from the post-only groups and from the pre-/post-test groups would determine whether or not the questionnaire influenced the intervention process.
Results

The questionnaire was collapsed into five different categories for purposes of analysis. These groups included questions about Deaf culture, cochlear implants, the daily function of deaf people, communication abilities of deaf individuals, and heredity deafness. Each item on the survey was also coded for the purpose of analysis. One-hundred sixteen individuals participated in the research process; 16 individuals in the control group, 60 individuals in the pre/post experimental group that completed both surveys, and 40 individuals in the post-only experimental group that only completed the survey after seeing the film. Figures 1, 2, 3, and 4 provide a detailed breakdown of population demographics. Sixty-three percent of research participants were female; 37% were male. Students’ major was also noted. The largest group of students (about 46%) indicated a business or business-related major; 16% of the subjects were education students; general arts and science students comprised 12% of the subject pool; 9% of students indicated sciences as their field of study; 5% declared engineering; and fine arts, speech and hearing, and undecided majors each made up 4% of the total population. The majority of students (92%) were Caucasian, 5% were African-American, and 3% indicated another race. The demographic breakdown by class indicated a fairly equal representation from each year: freshmen made up 29% of the group, sophomores comprised 21% of the subjects, 31% of the participants were juniors, and the remaining 19% were seniors.

The stability of the questionnaire was tested by comparing the control data and the pre/post experimental data with a Pearson RHO(r). The test revealed a correlation
between test administrations and no significant average differences between responses across the different survey categories, indicating strong internal stability. The correlation coefficient for the Deaf culture category was 0.7345 with 16 total observations. The daily function category had 16 observations, and a correlation coefficient of 0.8034. Analysis of the category discussing communication of deaf people revealed a coefficient of 0.8452 with 16 total observations. 15 individuals responded to questions falling under the category discussing cochlear implants, and analysis of the category revealed a coefficient of 0.7310. The correlation coefficient for the heredity category was 0.5941 with twelve observations. Table 1 shows a breakdown of the Pearson correlation coefficients by the five survey categories.

A second analysis test was run on the data to compare control difference scores with pre/post difference scores as a means of quantifying the influence of the intervention on perceptions of the survey categories. Bonferroni (Dunn) t Test analysis of the pre/post experimental data revealed significant changes in response between the first and second surveys in all categories. There were 76 observations in the Deaf culture category, daily function category, and communication category, 70 observations in the cochlear implant category, and 55 observations in the hereditary category. An analysis of variance data was conducted for each survey category; the data is shown in Table 2. The alpha level of 0.05 or less was selected to denote significance. The Deaf culture category showed a significant pre/post viewing difference with a p value of 0.0033. The mean difference for the category was -0.6525. The categories of daily function (p = 0.0064, mean difference = 0.2426), communication (p = 0.0081, mean difference = 0.3053), cochlear implants (p
= 0.0176, mean difference = 0.5515), and hereditary deafness (p = 0.026, mean difference = 1.4186) all showed signs of pre/post intervention differences.

A third test was run to analyze the difference between the mean scores of the second surveys from the control group, the pre/post experimental group, and the post-only experimental group. Significant differences between the post-test scores of the pre/post experimental group and the scores from the post-only experimental group are of interest to the study. Bonferroni (Dunn) t-tests indicated that the only category with a significant difference (p<0.05) between pre/post responses and post-only responses was the group of questions about Deaf culture. Significant differences were demonstrated between the pre/post and control groups in the cochlear implant category, the communication category, and the hereditary category; these differences were expected in this study. The communication category and the daily function category showed significant differences between the post-only and control groups, but the findings were also expected in the study.

A final test was run to determine the mean post-test responses on items that received a response of “Don’t Know” on the pre-test. A categorization procedure was used to determine which items qualified for the analysis. There were several questions without pre-test responses and with post-test responses included. Table 3 shows descriptive statistics for individuals who were missing at the pre-stage. Two of the items that frequently resulted in a response of "Don't know" were statements indicating cochlear implants were a cure for deafness (N=37) and that implants made it possible for the deaf to speak the same as individuals with normal hearing (N=38). Also of note were
items discussing regret for hearing loss with 14 “Don’t Know” responses, Deaf pride with 15 responses, and driving abilities with 10 responses.
Discussion

The initial pre/post analysis of the Deaf culture category responses revealed a shift toward a more positive perspective of deafness as culture by individuals who had viewed *Sound and Fury*. After viewing the film subjects tended to agree with survey statements that viewed deafness from a cultural perspective, indicating the film may have increased both awareness and acceptance of Deaf culture. However, further analysis of the Deaf culture category responses comparing all three experimental groups reveals a significant difference between the post-only test group and the pre/post test group. The mean scores of the post-only group were more similar to the control than the pre/post group, indicating that the first presentation questionnaire may have influenced subjects’ responses, by sensitizing them to issues of culture prior to watching the film.

The other four categories of included statements on the daily function of deaf people, ability of deaf individuals to communicate, cochlear implants, and heredity deafness; data analysis indicated whether the film impacted individual’s perceptions of deafness in regard to the specific issues outlined in each category. Responses to questionnaire statements regarding the daily function of deaf individuals shifted toward a more negative perspective after intervention, suggesting subjects believed deaf individuals to be less independent, more isolated, less social, and less able to function in society. After viewing the film subjects were more likely to agree that deaf individuals would be unable to work in professional fields or to hold supervising positions in the workplace.
A shift was also noted in mean responses to survey statements in the communication category, revealing negative perspectives towards sign language and speaking abilities of deaf individuals. The communication category addressed the ability of deaf individuals to communicate in both signed and spoken language, as well as the quality of signed communication versus oral communication. Research participants from the experimental groups were more likely to view deaf individuals as less able to develop speech and signed languages as inferior to spoken after seeing the film.

The cochlear implant category responses were significantly higher in post-intervention responses, indicating a large shift to a more negative perspective. Despite the statements made in the film asserting that an implanted deaf child would always be “deaf” (Weisberg, 2000), participants were more likely to view the cochlear implant as a means to cure deafness. They were also more likely to agree that cochlear implants give individuals a full understanding of speech and music.

Issues of hereditary deafness showed the largest mean shift, indicating that subjects were much more likely to believe that deafness is mostly a dominant hereditary condition. Most genetic deafness is recessively passed down from hearing parents who are unaware of their status as potential carriers. In reality less than ten percent of deaf children are born to deaf parents (Padden & Humphries, 1988). The film seems to perpetuate a negative stereotype about the hereditary nature of deafness.

Additional information about the impact of the film as an educational tool can be determined from analysis of the mean post-test responses of individuals who answered “Don’t Know” on the initial questionnaire. Two of the items that were frequently given a
response indicating lack of knowledge or exposure dealt with cochlear implants; 37 individual’s responses qualified for the analysis from the item stating cochlear implants are a cure for deafness and 38 responses from the item stating that cochlear implants provide deaf individuals with the speech abilities equal to hearing counterparts. Mean responses were 2.00 and 2.18 respectively, indicating that test subjects agreed with statements about the effectiveness of cochlear implants as a “cure” deafness and in providing implanted individuals with typical speech abilities. The item dealing with Deaf pride had 15 missing initial survey responses and the mean post-test response was 2.00, indicating an appreciation for Deaf culture; individuals were more likely to agree that Deaf individuals are proud of their deafness. Fourteen “Don’t Know” responses were received for the item dealing with deafness and regret, with an average of 3.93 in post-test answers. Individuals were more likely to disagree with the statement that individuals often regret their inability to hear sounds and music. The item concerning the driving abilities of deaf individuals had 10 missing pre-test responses and had an average post-test response of 3.30, indicating that individuals had a slight tendency to disagree with the statement that deaf individuals have a difficult time getting a driver’s license.

Although Sound and Fury has potential for use as an educational tool, the influence of the film alone on subjects’ perspectives of deafness is generally negative. After viewing the film, individuals were likely to respond to statements about Deaf culture as if they had never seen the film. Subjects’ opinions concerning cochlear implants also did not appear to be impacted by the film. Perceptions of deafness were generally negative and reflected the prevailing stereotypes of limited ability. It is
recommended that educators who desire to use *Sound and Fury* as a means of educating about deafness, Deaf culture, and cochlear implants take time to include other sources into their presentations to provide more detailed information about Deaf culture and to prevent the perpetuation of negative stereotypes about deafness. Additional readings, other media presentations, class discussions, and interviews with or lectures from members of the Deaf community are all recommended supplemental material that would complement presentation of the film.

The current study could be improved with some procedural changes. Study participants were gathered from a class focusing on cultural diversity. Course content and class discussions may have provided general information about culture that influenced students’ opinions about issues specific to Deaf culture. In order to examine the various influences other than the film, additional items could be added to the questionnaire, such as exposure to issues addressed in the film or experience with sign language. A more controlled method of data collection would occur in one session rather than two to prevent any discussion of the film by subjects between sessions that could influence interpretation. Previous exposure to the film or experience with deaf individuals would also provide more detailed information about the film’s potential effects.

The demographic distribution of the students at Miami University is fairly limited in terms of ethnicity and age. As such, results from the study can only be generalized to the limited demography represented at the institution. The data could have been analyzed according to the various demographic groupings, such as gender, age, and ethnicity, but the analysis was not available. Future research could focus on more diverse
demographics and be expanded to include participants from more age, racial, and ethnic groups.

The intent of the study is to determine the effectiveness of the specific media as an educational tool; future research could evaluate the effectiveness of a variety of different media featuring the Deaf culture. It might also be possible to evaluate the effectiveness of other types of supplemental materials – including lectures, discussions, or readings – on influencing perceptions of deafness and Deaf culture. By using a combination of sources, educators could develop a more well-balanced manner of teaching about deafness and the Deaf culture.
References


Manning, A. (2000a, May 2). The changing Deaf culture.” *USA Today*, pp.1D-2D.

Manning, A. (2000b, May 2). Implants sounding better. *USA Today*, p. 7D.


Appendix A – Pre-film Questionnaire

Survey #1
ID #____________________
(last 4 digits of SSN + last 4 digits of telephone #)

Gender: Male Female
Race (optional):
Major:

Year: First Year Sophomore Junior Senior

Do you have a close friend or family member who is deaf?
Yes No

If so, does this person identify with the Deaf Community?
Yes No

Have you seen the film Sound and Fury before?
Yes No

1. Deaf people cannot speak. 1 2 3 4 5 ?

2. “Deaf” individuals completely lack the ability to hear. 1 2 3 4 5 ?

3. The majority of Deaf people are able to read lips, and can fully understand and follow everyday conversation. 1 2 3 4 5 ?

4. Deaf individuals often regret their inability to hear sounds, such as music. 1 2 3 4 5 ?

5. There are some individuals who are so profoundly deaf that they do not receive any benefit from hearing aids. 1 2 3 4 5 ?

6. The use of sign language keeps a deaf individual from learning how to speak. 1 2 3 4 5 ?

7. Many deaf individuals are able to work in professional fields, despite the communication difficulties they may experience in the workplace. 1 2 3 4 5 ?
8. Deaf individuals lead lives of social isolation, as they are unable to communicate with neighbors, use the telephone or hear important environmental sounds, such as sirens, horns, and cars.

9. The more intelligent a deaf person is, the better his/her speech will be.

10. Deaf individuals will be unable to hold management or executive positions as they are unable to communicate with hearing employees.

11. Many Deaf individuals are proud of their deafness and would choose not to restore their hearing if given the opportunity.

12. Most deaf children are not born to deaf parents.

13. The birth of a deaf child is devastating to all types of families, deaf and hearing alike.

14. Deaf individuals are an economic burden on society.

15. Deaf individuals have a variety of technologies that allow them to participate in the hearing world. They can respond to doorbells and alarms, use the telephone and watch television programs.

16. The cochlear implant technology is a means to cure deafness.

17. Cochlear implants give most individuals a full understanding of speech and allow them to listen to music and to sing.

18. Hearing parents of Deaf children may not always explore all educational options for the child because of bias against Deaf people.
19. The amount of information that can be conveyed in a signed language is limited. Oral languages are more complex and allow for greater flexibility.  

20. Deaf adults will have a difficult time living alone and taking care of themselves.  

21. Culture can be based on characteristics other than race or religion.  

22. Individuals who are deaf have difficulty getting driver’s licenses.  

23. Individuals who are deaf are united by a shared culture.
Appendix B – Post-film Questionnaire

Survey #1
ID #____________________
(last 4 digits of SSN + last 4 digits of telephone #)

Gender: Male Female
Race (optional): __________________________________________
Major: __________________________________________

Year: First Year Sophomore Junior Senior

Do you have a close friend or family member who is deaf?
Yes No

If so, does this person identify with the Deaf Community?
Yes No

Have you seen the film Sound and Fury before?
Yes No

1. Deaf people cannot speak. 1 2 3 4 5 ?
2. “Deaf” individuals completely lack the ability to hear. 1 2 3 4 5 ?
3. The majority of Deaf people are able to read lips, and can fully understand and follow everyday conversation. 1 2 3 4 5 ?
4. Deaf individuals often regret their inability to hear sounds, such as music. 1 2 3 4 5 ?
5. There are some individuals who are so profoundly deaf that they do not receive any benefit from hearing aids. 1 2 3 4 5 ?
6. The use of sign language keeps a deaf individual from learning how to speak. 1 2 3 4 5 ?
7. Many deaf individuals are able to work in professional fields, despite the communication difficulties they may experience in the workplace. 1 2 3 4 5 ?
8. Deaf individuals lead lives of social isolation, as they are unable to communicate with neighbors, use the telephone or hear important environmental sounds, such as sirens, horns, and cars.

9. The more intelligent a deaf person is, the better his/her speech will be.

10. Deaf individuals will be unable to hold management or executive positions as they are unable to communicate with hearing employees.

11. Many Deaf individuals are proud of their deafness and would choose *not* to restore their hearing if given the opportunity.

12. Most deaf children are *not* born to deaf parents.

13. The birth of a deaf child is devastating to all types of families, deaf and hearing alike.

14. Deaf individuals are an economic burden on society.

15. Deaf individuals have a variety of technologies that allow them to participate in the hearing world. They can respond to doorbells and alarms, use the telephone and watch television programs.

16. The cochlear implant technology is a means to cure deafness.

17. Cochlear implants give most individuals a full understanding of speech and allow them to listen to music and to sing.

18. Hearing parents of Deaf children may not always explore all educational options for the child because of bias against Deaf people.
19. The amount of information that can be conveyed in a signed language is limited. Oral languages are more complex and allow for greater flexibility.

20. Deaf adults will have a difficult time living alone and taking care of themselves.

21. Culture can be based on characteristics other than race or religion.

22. Individuals who are deaf have difficulty getting driver’s licenses.

23. Individuals who are deaf are united by a shared culture.
Table 1

*Control and Pre/Post Test Group Response Correlation by Survey Category*

<table>
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<th>category</th>
<th>correlation coefficient</th>
<th>p</th>
<th>observations</th>
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<tr>
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</tr>
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<td>Cochlear implants</td>
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<td>0.0020**</td>
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<td>Hereditary deafness</td>
<td>0.5941</td>
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*p < .05. **p < .01.*
Table 2

Analysis of Variance for Survey Categories between Pre- and Post-Test Responses

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<td>0.0026**</td>
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*Note.* Negative mean difference value indicates a shift towards more positive perspective of issue under consideration.

*p < .05. **p < .01.
Table 3

“Don’t Know” Response Breakdown by Item Number, Mean, Standard Deviation, Maximum Response and Minimum Response

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<th>Std Dev</th>
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<th>Maximum</th>
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Figure Caption

*Figure 1.* Summary of Demographic Data by Major of Study

*Figure 2.* Summary of Demographic Data by Gender

*Figure 3.* Summary of Demographic Data by Race

*Figure 4.* Summary of Demographic Data by Year
African-American | 3%
Caucasian | 92%
Other | 5%

Legend:
- African-American
- Caucasian
- Other