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Signs of the Times: Deaf Language and Culture in South Africa*

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Introduction

Of all human behaviours, language is probably the one which has been most studied through the ages. It has provided seemingly endless fascination to many disciplines, offering at once both the means and the focus of interdisciplinary dialogue. Language is the tool of thought, of poetry of narrative, of persuasion, history, tradition and religion. It is the means by which human relationships are started, maintained and terminated. Language portrays sentiment, love, anger, hope, belief. From whatever perspective we examine it - scientific, philosophical, neurological, anthropological even archaeological, the study of language continues to perplex and intrigue us.

Language is not a neutral topic. As a repository of cultural knowledge and a symbol of social identity, it has been and continues to be a charged and embattled area linked closely to social, political and educational issues.

"A language can serve as a cohesive defining source of pride and positive identification and simultaneously as a focus for stigma and ridicule from members of the majority culture." (Meadow, 1975:17.)

This is a situation we know all too well in our own country, in which many of the issues in politics and education have been centred both in the past and at present in linguistic and cultural issues.

The topic of sign language reflects just such debate and controversy - particularly in the South African context. I will propose that the study of sign language and the issues which surround it, provide insight into many of the broader issues of history, language identity, culture, education and language planning in this country.

I will also demonstrate that the study of sign language helps shed light on some issues of general concern to those studying language, such as the biological basis of language and the relationship between language and thought.

Sign language is the language of eyes and hands, of movement and of space. Sign language is the natural language of the Deaf community. A few definitions seem worthwhile here.

The term "deaf" is traditionally defined in relation to the audiogram. A person with a mild to moderate degree of hearing loss is still able to hear a number of speech sounds and is capable, with some extra help, of benefiting from the amplification provided by a hearing aid, and of learning language in the way that hearing children do, that is in the oral-aural mode.

Even a person with a severe degree of hearing loss is capable, with adequate intervention, of acquiring spoken language. The term "deaf" should probably therefore be reserved for those individuals with very little residual hearing - that is those with a severe to profound degree of hearing loss who will not benefit from amplification. In fact this term again, is far from a neutral one. As a medical description measured in decibels or degree of infirmity, deafness is viewed as a pathology requiring treatment - a problem which can be fixed. The overall goal of both medicine and education has been to normalise the situation and to make the individual as normal or as hearing as possible.

Both historically and currently, however, there is overwhelming evidence to suggest that neither medical nor traditional educational interventions produce very successful goals in this direction with the profoundly deaf child.

However, an alternate perspective of Deafness exists which is emerging as an equal if not more powerful and compelling one than the traditional view.

The term Deaf has become a descriptor for a distinct group with its own cultural identity and language. Padden and Humphries, two Deaf Americans write:

"The traditional way of writing about deafness is to focus on the fact of their condition - that they do not hear - and to interpret all other aspects of their lives as consequences of this fact..... In contrast to the long history of writings which treat them as medical cases or as people with disabilities who "compensate" for their deafness by using sign language, we want to portray the lives they live, their art and their performances, their everyday lives, their shared myths and the lessons they teach one another. We have always felt that the attention given to the physical condition of not hearing has obscured far more interesting facets of deaf peoples lives." (Padden & Humphries, 1988:1.)

^{*} This article is an inaugural address delivered on 17th February 1993, University of the Witwatersrand.

The cultural cohesion of such a group thus overrides similarities or differences on the audiogram and reflects a far more complex and dynamic state of affairs. There is limited correlation between the audiogram and the descriptor. Those who share a common language and culture are considered Deaf with a capital D.

Such a distinction explains Nancy Reflects's (1985; p.53) account of her own deafness: "When I was born, my hearing was fine. At age 2, I became deaf. At age 16, I became Deaf".

Age of onset is a crucial factor to be considered within this definition: The cultural term "Deaf" is used primarily for those with congenital deafness or who acquire Deafness at a very early age. Those individuals who tragically become profoundly deaf later on in life but who have had an opportunity to acquire spoken language are rarely considered to be part of The Deaf culture unless of course they become fluent signers. Similarly those who are labelled as "hard of hearing" (that is with some amount of residual hearing, who wear a hearing aid) and who have a substantial amount of oral language) are often excluded from the Deaf cultural group.

Residual hearing, far from becoming a desirable asset, thus becomes a type of handicap which excludes certain individuals from the Deaf group. This is the force which causes deaf adolescents to remove their hearing aids and to abandon attempts at oral communication.

One of the chief things which distinguishes the Deaf culture then is language.

The Nature of Sign Language

A number of myths have surrounded sign language for centuries. With the advent of the videorecorder which has enabled detailed study of this rich fleeting language, the past three decades has seen many of these myths dispelled. William Stokoe a linguist from Gallaudet University who must be considered the foremost researcher in this regard has suggested:

"Interestingly as sign language is as a system, tantalizingly like other languages and fascinatingly different, the real value to be found in the study of sign language is a human and not abstract scientific value. All language is unique, but the study of sign language reveals that *language* is both abstract, independent of speech and of gestural expression, and biologically concrete because of its expression. Language depends on the human brain, not on the naked or electronically assisted human ear." (Stokoe, 1976,p.13.)

What are some of the misconceptions which the research of Stokoe and others have dispelled?

- Sign language is not gesture.
- It is not a primitive form of language and is not equivalent to or derived from the codes used by American Indians and aboriginal people, chimpanzees, and silent orders, or on a local level, the signs of the Bushmen.
- It is not more concrete, and it is not less grammatical than spoken language.
- It is not pantomime.
- It is not universal- a popular misconception- and one

which has particular relevance in the South African context. As a result of linguistic change and because of independent creation in different parts of the world, no single sign language exists. As Figure 1 suggests, sign languages are often mutually unintelligible, even within countries that use the same spoken languages (as happens for example between British and American Sign Language).

- Signs are arbitrary and not iconic.
- The grammar of sign is not derived from the spoken language of the hearing community.
- Signing does not interfere in any way with the acquisition of spoken language - or of speech. On the contrary like any first language, it provides a cognitive framework for the learning of later second languages.
- Most important the Deaf are not dumb- a commonly used but hugely derogatory term which reflects many of the historical biases and misconceptions held about their language.

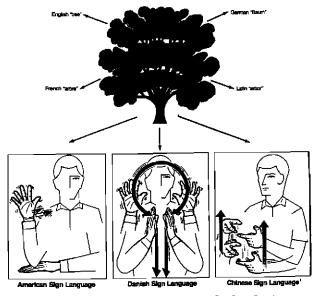


Figure 1: Seven language symbols that represent the same object.

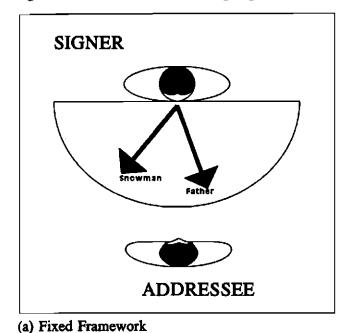
In short sign language is a *real* language, equivalent in status to any other language - Deaf persons can sign about any topic, concrete or abstract as economically, as effectively, as rapidly and as grammatically as hearing people can. Sign language is influenced by entirely equivalent historical social and psychological factors as spoken language - there are rules for attention-getting, turn-taking, story telling, there are jokes, puns and taboo signs, there are generational effects observed in sign language, metaphors and " slips of the hand."

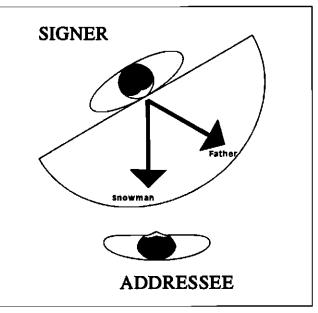
In short as Stokoe observes: "Language is not mouth stuff, it's brain stuff."

Let us examine some of the evidence accumulated with reference where possible to our own South African research base to highlight some of the properties of sign language as well as its biological basis.

Sign language has a unique spatial syntax which is complex and multilayered. What is sequential, linear and temporal in speech, additionally becomes multidimensional and simultaneous in sign- in other words "language in four dimensions."

The South African Journal of Communication Disorders, Vol. 40, 1993





(b) Shifting Reference



Individual signs differ from each other in terms of a system of distinctive features known as cheremes, which include hand shape, orientation, movement and location in space. In addition a complex system of nonmanual features exists involving eye gaze, posture and facial expression.

Description of these features includes both the syntax, that is the way that individual signs are organised into larger units such as clauses and sentences, and also the rich morphology - that is the regular ways in which the signs can be modified to express specific grammatical functions such as number and aspect.

A few specific examples will illustrate these points:

In sign language nominals (people or other referents) are introduced into signed discourse by initially assigning spatially distinct loci. In spoken conversation, speakers may point to a specific location to indicate a person or object. For example, two speakers may be talking about (and point to) a cat who occupies a particular chair. Here a real location is used. In sign languages a combination of real as well as relative and conventionalised locations is used. In *relative* locations a signer uses points in space to produce an image of some or other location. Any subsequent reference to that locus either by pointing, gazing or shifting the body or by verb agreement refers back to the previously established nominal even when other signs have intervened.

In Figure 2 for example we see how the subjects of the conversation and the space they occupy remain established throughout the stretch of discourse.

Conventionalised locations may be illustrated in relation to the system of pronouns where indexing in relation to the speaker indicates a range of particular pronouns. (See Figure 3.)

Such conventional location may also be found in the system of verb inflections. In certain verbs the movement is mutable and marks the grammatical relationships among sentence constituents. For example, the difference between the sentences *I* ask you and You ask me relate to the differences in movement of the hand (and orientation) towards and away form the body, as-

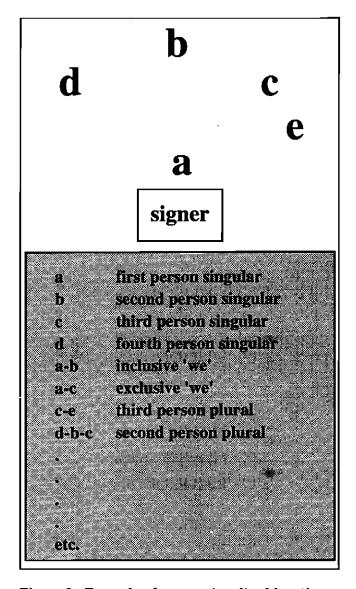


Figure 3. Example of conventionalised locations : pronouns.

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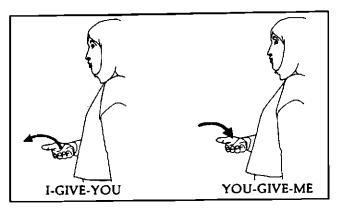


Figure 4: Example of conventionalised locations : verb inflections.

signing both the subject and the object of the sentence. (See Figure 4.)

Additional cohesion in signed discourse is achieved through the use of "performatives" equivalent to role playing in which there is modification to facial expression, body posture and style of signing as the signer adopts a particular character role in a story or everyday conversation.

The marking of the time and aspect in sign language is also of interest. Two main mechanisms may be identified.One of the ways is adverbial modification (using separate signs for concepts such as yesterday, recently, etc). Some writers make reference to the putative time line in which these adverbials as well as particular verbs are marked in a location in space to represent time illustrated in Figure 5. Thus the past is viewed as located over the right shoulder and the future in front of the body. Other ways of marking tense include the use of signs such as FINISH which imply completiveness.

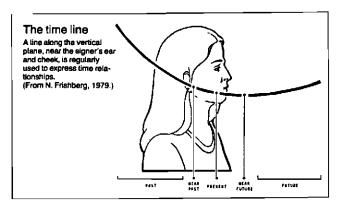


Figure 5: The Time Line.

A time line in front of the body will represent continuousness- differentiating for instance between past tense "I posted the letter" and continuous tense "I am posting the letter". In addition the verbs themselves can undergo complex modulation providing information about manner, location and direction differentiating for example between the uninflected form of the meaning "be sick" and other meanings: prone to be sick, get sick easily, sick for a long time, never stops being sick, often sick, very sick, sort of sick, became sick, through morphological changes to the basic sign in terms of reduplication, repetition and duration. Another important area of sign language structure is nonmanual behaviour. Just as tone of voice can serve to alter meaning in spoken language, so various aspects of facial expression and posture can modify meaning in sign language. It can be used to mark sentence boundaries. It can be used to mark a grammatical function for instance in serving to mark the difference between statement and questions (illustrated in Figure 6) and state-



Figure 6a: Examples of nonmanual behaviour.

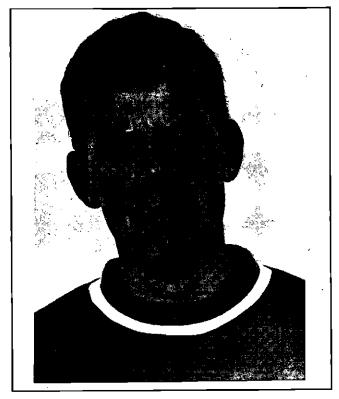


Figure 6b: Examples of nonmanual behaviour.



Figure 6c: Examples of nonmanual Behaviour.

ments and negatives. Nonmanual behaviour is also used in an adverbial way to illustrate concepts such as ease, effort, enjoyment, intensity, etc. (See Figure 6.)

What I have dealt with here is only a brief look into the some aspects of sign language linguistics. It has, however, I hope illustrated the complexity of the process as well as the rule based nature of this unique language.

Having dealt with the behavioural perspective, it seems timely to move to the biological perspective of sign language. Two areas of research shed light on this aspect and these are the areas of acquisition and dissolution:

How do deaf children acquire sign language and how does sign language become impaired after brain damage?

Are there parallels between the acquisition and dissolution of spoken and sign language and what are the implications of such parallels?

Acquisition and Dissolution of Sign Language

The best context in which to observe the acquisition of sign language is by observing the sign language development of a deaf child born to deaf parents. It has been demonstrated that such babies acquire sign language at approximately the same rate and in the same sequence as hearing children acquire spoken language. Deaf babies "babble" with their hands, in the same repetitive rhythmic patterns as hearing babies babble with their voices. The first signed word occurs at around nine months - often before the first spoken word of hearing babies - for reasons suggested to be related to motoric and neurodevelopmental aspects. Subsequent development takes place in leaps and bounds, with characteristic childhood errors (such as incorrect use of some of the more complex spatialised syntax) but within a short period of time, the deaf child achieves full signing competence.

Thus when the language learning environment is compatible with the needs of the deaf child and is presented in the visual mode, language can be acquired easily and at the same pace as language presented in the aural mode.

The question remains as to where sign language is stored in the human brain.

Cerebral asymmetries in person with normal hearing and specialisation of the left hemisphere for spoken language have long been documented. Though research in the area of deafness in this regard is more sparse, sign language is similarly located (Poizner, Klima and Bellugi, 1989). This is in spite of the fact that sign as we have seen has a large spatial component - a function widely recognised to be subserved by the right hemisphere.

One of the ways in which hemispheric specialization has been studied is by examining the effect of brain lesions on the language of an individual. In spoken aphasia, which has been documented for well over a century, characteristic patterns of language deficit emerge correlating with specific areas of brain damage. For example, in Broca's aphasia or agrammatic aphasia which is caused by a lesion in the left inferior frontal lobe, there is an impairment of expressive syntax in the presence of relatively well retained receptive abilities.

In cases of sign aphasia, that is when for example a fluent deaf signer suffers a stroke in the same area, an equivalent pattern of syntactic and morphological deficit emerges in relation to the sign. An examination of some of data supports this claim.

Figure 7 illustrates three cases of deaf adults who were previously fluent in sign language and who have as a result of a stroke shown a dissolution in their language abilities.

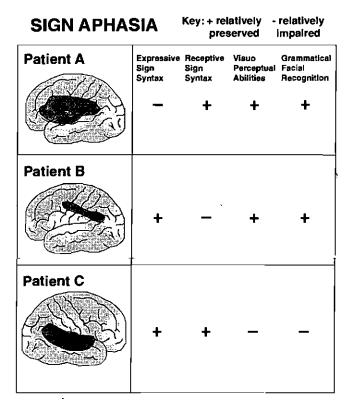


Figure 7: Performance of 3 deaf persons with brain lesions on Linguistic and Neuropsychological batteries.

The first two cases demonstrate a left hemisphere lesion and the third, a right hemisphere lesion. Their performance on a battery of neuropsychological and linguistic tests is summarised on the right hand side of the figure.

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Case one demonstrates a lesion in what is traditionally known as Broca's area of the brain . Her sign language is agrammatic - consisting of uninflected and sparse nouns and verbs. She shows none of the grammatical apparatus previously described - no verb agreements or inflections and no use of spatialized syntax. In contrast, her reception of sign is relatively well retained - she is able to follow sign instructions and to understand a sign conversation. Her visuo spatial and constructional abilities, as measured on a range of adapted neuropsychological tests, remain intact, as does her ability to recognize and comprehend some of the grammatical nonmanual features (such as changes in facial expression) which have been discussed already.

This profile therefore shows some interesting parallels with the neurolinguistic profiles of a left hemisphere damaged hearing patients. Interestingly in this case (as in the only other cases of documented cases of this nature) shows damage not only to Broca's area but also to the cortical immediately above it - that dealing with the hand- and this suggests that the area above the left motor area may be an important component of sign aphasia specifically.

Case 2 with a left parietal lesion though fluent in expressive sign language has severe difficulties in the comprehension of certain grammatical forms. This receptive difficulty does not appear to parallel in severity the comprehension of a speaking aphasic patient with a lesion in this area and suggests perhaps that because of the spatial aspects to sign language, a left parietal lesion is of more impact. This patient, however, like Case I shows competence in visuospatial ability (a function served by the right hemisphere) but cannot accurately recognise the grammatical distinction between certain facial behaviours - a finding which tends to suggest a dissociation between different spatial aspects in the brain (those with and without linguistic overlay).

Finally Case 3 who has a lesion in the right capsula interna region shows poor performance as one would expect in a hearing patient with a similar lesion on a battery of visuospatial and visuoconstructional tasks such as block design. However, signing competence is spared both expressively and receptively except, interestingly, in the domain of nonmanual features . This patient appears to lack an ability to recognise some of the grammatical and adverbial marker marked by facial expression such as has been shown. The impact of a right hemisphere lesion therefore may be greater for the deaf person than for the hearing person.

. This type of data while broadly confirming that sign language has an equivalent biological basis to spoken language, is thus highlighting certain interesting differences.

Such lines of evidence are also accumulating from psycholinguistic experiments with neurologically normal deaf and hearing individuals.

For example, researchers at the SALK Institute have shown that deaf children are superior to hearing children in being able to draw accurately the shape of a moving light pattern travelling in space. Similarly deaf adults seem to be better than hearing adults at generating and manipulating mental images, e.g. telling whether one object is the same as another but rotated in space. The question arises as to whether the mode of language learning thus influences the brain's ability to perform certain tasks and takes us back to the Sapir-Whorf hypothesis which suggests that how we talk determines the way we think.

Many questions still need addressing but to recap so far, I have argued that the structure and the biological basis of sign language demonstrates its full status as a language. "Sign Language is biologically and unsilenceably the voice of the deaf" (Sacks, 1989 :123). Such research has done more than anything in the past three decades to consolidate the notion of Deaf culture.

Cultural and Historical aspects of Deafness

The growing acceptance of sign language as a real language has done a great deal to strengthen the notion of Deafness as a cultural entity.

The past few years have seen the emergence of a strong and powerful Deaf culture in many countries. There is deaf art, poetry, theatre, sport, many deaf clubs, and congregations. Films such as *Children of a Lesser* god and TV series like *Reasonable Doubts* have helped to show the hearing world the pride and unique status of Deaf culture.

Additional indices of such cultural cohesion include a shared set of behavioural norms among deaf as groups and a largely endogamous marital pattern. Regardless of parental hearing status over 90 % of deaf people marry other deaf people.

A shared history is another such index of cultural strength and a glimpse into the history of the Deaf of their language and culture and the attitudes of hearing persons to Deafness provides an intriguing window on prevailing attitudes and thought about cultural minorities.

There is some reference made to the deaf and their language in Greek times. For example in Plato there is a dialogue between Socrates and Hermogenes on the relation between word and idea and Socrates asks: "If we had neither the voice nor tongue and wished to explain things to others, could we not try like the deaf to convey our meaning by using our hands, heads and other parts of our bodies?"

Hippocrates, however, suggested that deafness was due to a defect in the tongue since the deaf were not able to speak.

During the Renaissance several mentions were made of methods of teaching the deaf language and Leonardo da Vinci suggested that lip reading was a very valuable lesson for the painter.

Most modern accounts of deaf education and language, however, begin in the 18th century.

The father of modern sign language was probably the Abbe l Epee who founded the first school for Deaf children in France in about 1765. Observing closely the natural language of two deaf girls he met in a Paris slum, he decided to dedicate himself to the education of the deaf. He learnt their signs as a medium of teaching and imposed on them a formal grammar and method of instruction (based on rules of spoken French). His dis-

ciple and successor Abbe Sicard continued in his footsteps but gradually the use of methodical signing was viewed as unwieldy and cumbersome and the natural syntax of sign was adopted.

Among the foremost proponents of this was a deaf Frenchman Laurent Clerc who was invited by Rev Thomas Gallaudet to America and who with Gallaudet founded the first school for deaf children in America in 1817 . The French signs were formally integrated with some of the sign language used by local deaf groups and what became known as American Sign Language (ASL) was formally adopted in the Deaf schools in America. In 1867 there were 26 institutions for the education for the Deaf in America and ASL was the language of instruction in all. Deaf persons had moved into positions of esteem and success and were working as teachers in all the schools.

By 1907 there were 139 schools and ASL was allowed in none. A similar state of affairs had happened in France and in other European countries. What happened is that at a meeting of hearing educators in 1880 held in Milan it was agreed that oral instruction *only* could restore deaf people to society.

Thus towards the ends of the last century hearing teachers took control of schools for Deaf children and banished sign from the classrooms as well as all the deaf teachers. Despite considerable deaf protest manual language thus became oppressed. The first president of the National association of the Deaf said at the turn of the century:

"What heinous crime have the deaf been guilty of that their language should be proscribed?" (quoted in Lane, 1984:xvii).

Harlan Lane, an eminent psychologist who has written two powerful books on deaf culture and history (1984,1992) has suggested that:

Milan was the single most critical event in driving the languages of the Deaf communities beneath the surface; I believe it is the single most important cause of the limited educational achievements of modern deaf men and women (1984:25).

There is every indication according to Lane, that the Deaf were better off in the 19th century. Not until very recently have things been rectified (at least in countries such as the United States). Lane believes that attitude and treatment of the Deaf during the first part of this century can be viewed within a framework of stigma and paternalism.

For example, Alexander Graham Bell inventor of the telephone and son of a deaf mother as well as married to a deaf woman, not only suggested that sign language and deaf teachers should be banished but as committee member of the Breeders Association, wrote a great deal about eugenics, and the danger of marriage between immigrants, and also between deaf people. Presupposing that familial deafness was something to be avoided, he urged deaf students not to " hand your affliction down to your children" and to "enter into an ideal marriage with a hearing person". The unfortunate Mrs Mabel Bell not surprisingly wrote near the end of her life " I shrink from any reference to my disability... I have striven in every way to have my deafness forgotten ... I would have no friends among them."

The development of psychometrics and IQ tests also had a negative import for this model of disability. Such tests were grievously misapplied to deaf children and adults -deaf people performing up to 30 points below hearing people on such tests standardised and administered in oral language. This was taken as evidence for the "dumbness" of Deaf people and provided reason for diversion into non-academic subjects.

On the psychological track, a series of publications emerged describing the personality characteristics of the deaf. Lane (1992) likens the historical attitude towards deafness to the forces of colonization particularly in Africa. Drawing on colonial literature on the one hand, and descriptions of deafness in the past twenty years from the educational and psychological literature on the other, he demonstrates vividly the frightening parallels in description and terminology. He expands the argument by drawing parallels in attitude between the oppressors in both cases.

As an explanation Lane cites the ideas of French historian and philosopher Foucault (1977) who proposes that power in modern society is disseminated into small structures. Through a system of norms and exclusion, those members of society who are different (such as the criminal, the insane, the sick, and of course, the Deaf) are given a set of rules and restrictions which highlight their differences and disempower them further. What is also interesting is the interdependence between physicians, educators and decision makers on the one hand and the oppressed - sick (or Deaf) people slipping into roles of subservience and non-achievement.

What is probably the most important milestone in the history of deaf culture this century is the series of events which took place during a week in early March 1988 at Gallaudet University for the Deaf in Washington. This University had hearing presidents since its founding in 1864. The appointment of a new hearing president Dr Elizabeth Zinser lead to a strong accelerating protest among students and staff at Gallaudet.

During the week of protest which included a march to the White House, the shutting of the University and the barricading of campus, the activities touched the hearts and imagination of the hearing world and highlighted the power of the Deaf culture. Eventually this action resulted in the resignation of Dr Zinser and the appointment of a deaf president Dr Irving King Jordan whose words "Deaf people can do anything but hear" have become a slogan for deaf empowerment. Jesse Jackson said of this event:

Your determination, strength and unity achieved a historic victory at Gallaudet ... your victory was a victory for all of us ... It was a victory for all people who ever felt the pain of being stereotyped, devalued and unrepresented.

After a century of oppression things had at last changed. If such attitudes towards disability have prevailed throughout the world how much more can we expect them to be entrenched in a country like our own which has formally legislated against certain groups for so long?

Moving to a history of the South African deaf we see some uncomfortably close parallels and some similar shifts in attitudes.

HISTORY OF SOUTH AFRICAN DEAF

The main milestones in the history of the Deaf in South Africa are portrayed in Table 1.

Table 1: Milestones in the history of Signing in South Africa

1863	Irish sisters involved in training programmes for the deaf
1874	Grimley Institute for Deaf and Dumb opened in Cape Town
1877	German (Dominican) sisters started school for the deaf in King Williams Town
1881	De La Bat School started by DRC in Worces- ter
192 0	Oralism formally adopted in deaf schools
1934	Schools divided into "European" and "Non- European" St Vincent's School for the Deaf opened in Jhb
1941	First school for the Black Deaf established Paget Gorman Coding system introduced
198 0	Publication of "Talking to the Deaf" Adopted by DET
1984	Medium of education changed from vernacu- lar to English in DET schools

There is little history formally documented and what I have had to rely on is press cuttings, records and newsletters of the South African National Council for the Deaf founded in 1929 and interviews with deaf adults. In 1863, five sisters from the Dominican Convent, Cabra, Dublin Ireland founded a school for the Deaf in Cape Town, later known as the Grimley Institute for the Deaf. At approximately the same time, the Dominican sisters started a school for the Deaf in King William's Town. In 1881 the de la Bat School for the Deaf was started by the Dutch Reformed Church in Worcester.

Official educational policy changed in South Africa changed, and in accordance with recommendations made at the Milan congress, oralism was formally adopted in deaf schools in 1920.

With pride the schools advertised themselves as "purely oral" and advocated the "The modern method of speech and lip reading." Dr van Schalkwyk, Superintendent of:Social welfare and Probation in 1938 said, "a deaf mute child given the opportunity to learn lip reading will learn it as naturally and easily as a normal child learning to speak."

A deaf informant in Cape Town, born to deaf parents tells of how a Principal of a local deaf school agreed to admit her on one condition only : that the parents (both of whom had Sign Language as their first language) would never use their hands in front of her.

The belief of the time was that with amplification and early intervention, including lip reading "the deaf will hear and the dumb will speak" to quote an early Cape newspaper. Unfortunately with hindsight, such goals were hideously misdirected.

I have already discussed the complete proficiency with which deaf children acquire language from their deaf parents. The language outcome for deaf children born to hearing parents and placed in a purely oral environment is, however, considerably less effective. In most cases the deafness is not detected until the child is a few months old, and in South Africa it is quite common for this to be much later. Research suggest overwhelmingly that in the case of profound congenital hearing loss that even with concentrated and intensive early intervention, there are often considerable delays in the acquisition of spoken language and subsequently literacy. Over sixty percent of the deaf adult's speech remains unintelligible to the average listener. The average reading age of the deaf school leaver is that of an eight year old. In short, the deliberate exclusion of sign language from the learning of such children sometimes has had a disastrous effect on overall scholastic and vocational goals for the deaf in South Africa. This lack of a mutual communication system during a critical language learning phase leads to poor language development: " There is an especial peril that threatens human development, both intellectual and emotional, if the healthy acquisition of language fails to occur" (Sacks, 1989:60).

In the press cuttings I have seen, recording the history of Dominican schools for the deaf in Cape Town from 1932 to 1965 the only reference to sign language that I found was: "We don't teach it officially but they pick it up from older children and pass it on in their turn." (Sister Amata Dominican School, 1962.)

Thus Sign Language continued to be used informally in the playgrounds and in deaf clubs and congregations.

In some of our own findings surveying adult deaf in South Africa about when and from whom sign language was learned, this was confirmed, well over half our respondents learning sign from contexts other than home and formal school settings. (Figures 8.)

In 1934, the same year that St Vincent school for the deaf was founded in Johannesburg, schools were divided into European and non-European.

In the spirit of the times Dr Cawston of the Juvenile Affairs Board, writing in *The Silent Messenger* 1936 said:

Attention would not seem to have been paid to the fact that South African natives are very seldom hard of hearing except in old age. This may be partly due to the fact that they have such spacious nostrils and air space. It is hoped that provision will shortly be made for those who are both deaf and dumb, for primitive peoples cannot be expected to look after them adequately in their own homes.

The first school for the black deaf was opened in 1941 Increasing fragmentation of educational policy was entrenched by the coming to power of the Nationalist governments in 1948. Ironically in contrast to so many other

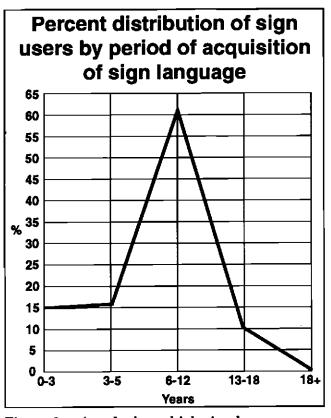


Figure 8a: Age during which sign language was learnt.

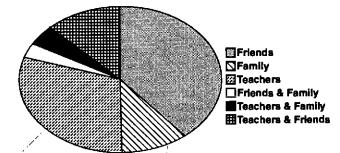


Figure 8b: Primary Educators of Sign Language.

areas of education the situation for the black deaf child with the advent of the group areas act and the separate education bill, became educationally superior to that of the white deaf child - for part of the educational policy was to introduce manual communication into the schools. The system used was not sign language per sé but a manual code known as the Paget Gorman system which enabled a facility in communication and established a very strong deaf culture among the children and graduates of the black deaf schools.

One assumes at the time that this was out of a sense of sheer desperation as hearing aids were not available to black deaf children and no effective communication system was available, but it was a happy choice, leading to the first attempt by Norman Nieder Heitmann, principal of a school for the Deaf near Rustenburg to produce a dictionary of signs for use by the deaf in South Africa. This text, called *Talking to the Deaf* (1980) was formally adopted as a teaching manual in the DET schools where medium of instruction was changed to English in 1984.

Unfortunately subsequent educational policy has

denied the right of such children to achieve their potential. It is no longer possible for black deaf children to move beyond Standard six in academic subjects and the focus of their education has been limited to highly technical aspects.

Such attitudes, although not legislated in the white schools for the deaf, some of which still offer an academic matriculation, have tended nevertheless to be entrenched: For example, Rev de la Bat after whom the school for the Deaf in Worcester was named, in justifying training programmes for deaf girls (1935) said:

My personal view is that normal intelligent educated and well trained deaf girls make excellent wives and homemakers. The general desire today of girls for social entertainment, for excitement, for economic independence and freedom from domestic trammels does not affect the deaf girl so much. This is due to her handicap of deafness..These trends in modern girls are not in themselves faults and constitute essential factors in the woman wage earner but I am old fashioned enough to hold the view that these trends are detrimental to homemaking... The married woman because of her deafness naturally finds her interests and activities curtailed and consequently confines herself more to the sphere of her home I would suggest therefore that training be given to deaf girls in sewing, pattern making, costume designing, dress-making, cooking, invalid cooking, dietetics, upholstery, housewifery, home nursing, household decoration, washing and ironing, rug making, woolwork, knitting, millinery, marketing, toy making, basketry, lamp shade making, eiderdown quilt making and last but not least, gardening and agriculture.

Even this vocational advice is not as misdirected as that of the misguided Dr Cawston who suggested:

Secretarial work is difficult for those who fail to hear what is being said at committee meetings... but broadcast stations should provide a serviceable outlet of public speakers who are defective in hearing or suffer from other inefficiencies which make it difficult for them to speak from a public platform.

In 1987 a national research project jointly funded by the South African National Council for the Deaf and the Human Sciences Research Council was established which had as its aim a characterisation of the diversity of sign languages in the country as well as of the sign syntax found among deaf groups. The first volume of the Dictionary of Southern African Signs was published at the end of last year (Penn, 1992).

As we had predicted because of the widely diverse education systems, a number of sign variations were found to exist as illustrated in Figure 8. No one had, however, predicted the extent of this variation with the finding of an average of six variations per word. Only two percent of the words had common signs - a reflection of the effects of the legacy of apartheid and the attempts by hearing educationalists to divide, transplant and fragment deaf people (see also Penn and Reagan, 1990; Penn, Reagan & Ogilvy, 1992). Happily, however, and a point on which to build future educational policy

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Insect GRAMMATICAL CATEGORY : Noun. LEVEL : Preschool. THEME : Insect - General. TRANSLATIONS : Gogga (A)/ Intythwane (Z)/ Kokonyana (S). EXAMPLE OF USAGE : Flies, bees, grasshoppers, and beetles are insects. 'n Insek het hom op die wang gesteek.



VARIATION 1: One-handed sign in which 5-hand (clawed), palm down, hand away moves away in wriggling motion. Used by DET.



VARIATION 2: One-handed sign in which finger and thumb of A-hand, palm away, hand left, pinch corner of mouth. Used by 2.



VARIATION 6: Eenhandteken. G-hand, palm na onder, hand na links, wys na kant van mond en word vinnig na regs beweeg. Used by 8, 9.



VARIATION 5: Two-handed sign in which dominant 5-(clawed) hand, palm down, hand left, makes crawling movement along back of subordinate B-hand, palm down, hand right. Used by 5, 7.

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VARIATION 3: Two-handed sign in which index finger of dominant G-hand, palm down, hand away, wriggles away along palm of subordinate B-hand, palm up, hand away. Used by 1, 3, 6.



VARIATION 4: Double-handed version of DET. (VARIATION 1). Used by 4.

Key: 1/N Tvl Tswana. 2/Soweto Sotho. 3/Zulu Natal. 4/Tvl Indian. 5/Natal English. 6/Cape English. 7/Tvl English. 8/Cape Afrik. 9/Tvl Afrik. DET/Sign taught in Dept Education and Training.

Figure 9: Excerpt: Dictionary of South African Signs (Penn, 1992).

is the finding that which lexical variety exists there is a strong common shared syntax which will surely become the basis of formal language teaching for the deaf in the future.

Before I pass on to future directions, mention should be made of two deaf South Africans whose rise to fame serve as an inspiration to all those who have struggled with an inequitable system:

The first is deaf artist Tommy Motswai born in 1963 a pupil of Kutlwanong school for the Deaf near Rustenburg, who has become a well known figure in South African art - his work has been hung in local and international galleries and has won awards including most recently the Standard Bank Young Artists award. His delightful work portrayed in Figure 10 captures the essence of South African society- its diversity, colour and its humour and reveals a sparkling wit and observation.



Figure 10: Children Play Love by Tommy Motswai (Reprinted from: Standard Bank Young Artist Award 1992. Photography: Michael Hall).

The second famous deaf South African is David Wright a poet of considerable influence having edited several anthologies and the *Penguin Book of Modern Verse*. Wright was born in Johannesburg in 1920 and became totally deaf from scarlet fever at the age of 7. He received some schooling here, then went to Northampton School for the Deaf and then to Oriel College, Oxford. He felt unsettled, lost and alienated at the Deaf school, not having learnt the sign of his peers, but at University he also felt a stranger in a hearing world (Wright 1969). In his verse he shows a cynical perception of life's paradoxes and injustices.

The last verse of his poem "Monologue of a Deaf man" is particularly poignant:

"Thus I too must praise out of a quiet ear The great creation to which I owe I am

My grief and my love. Oh hear me if I cry Among the din of birds deaf to their acclaim Involved like them in the not unhearing air"

In the last lines of his own funeral oration which he wrote at the age of 30, he makes reference to his South African origins: "Born in a dominion in which he hoped not to go back Since predisposed to imagine white possibly black His life, like his times, was appalling; his conduct odd He hoped to write one good line; died believing in God"

Alas many of our talented deaf (like the hearing) are leaving South Africa like Wright because of lack of opportunities and frustration with the authorities.

Having dealt with the history of the topic, a look at the present state of affairs is relevant.

The current situation in South Africa

In South Africa, in sign language, as of course in many other things, things are in a state of transition. The ripples of the Gallaudet revolution have been felt worldwide and changes may be seen in many aspects relating to the Deaf in this country.

Sign language courses are being taught by deaf persons, the first deaf chairman has been appointed to SANCD, there is sign language interpreting in theatres and the deaf in Johannesburg organised a march through the streets two years ago to highlight their situation.

The situation in certain schools is slowly changing and although not formally legislated, the use of sign language is becoming more and more accepted - sometimes as a last resort when all else fails. Deaf teaching assistants are sometimes employed informally to assist their hearing counterparts.

Such informal change is I believe a reaction to the manifest failure of prescribed educational methods with the deaf and a frustration with the authorities:

At official levels, however, change is much less rapid. "None so deaf as those that do not hear."

There remains fragmentation and a lack of cohesive educational policy towards the deaf. As yet there are no proper courses for training teachers of the Deaf and no possibility of Deaf persons becoming registered teachers for the Deaf in this country. Some schools continue to actively punish the use of hands - even of natural gesture - and the children are reduced to "closet signing" in the playground, running the risk of developing fully neither oral nor sign language in the early years a recipe for disastrous cognitive, social and vocational outcome.

Attitudes towards Deafness and handicap in general remain locked in a pathology/infirmity model which appears to be adhered to with vigour by far too many education and special education departments throughout the country. There is a huge lack of available resources and personnel and often some misguided decisions about even these limited resources.

Provision of expensive technology in the form of audiometers and hearing aids cannot substitute for the adequate training of specialised teachers. Until such time as there is an infrastructure throughout the country which can not only provide, but also service and use such technology, programmes which have as their very dubious goal the expensive equipping of deaf individuals and deaf schools throughout the country will have limited impact. The goal of education should surely be the development of language skills in all, not speech in the few who will benefit from amplification.

Once again one is reminded of the position put for-

ward by Lane and that is in medicalizing deafness, the majority "audist" culture stands to be considerably economically advantaged. Many deaf individuals derive little or no benefit from extremely costly hearing aids. This is a fine example of "biopower" which Foucault (1977) has referred to as being characteristic of medical advances in this century.

This argument has to be even more valid for cochlear implantation particularly in this country. Hailed as the "greatest advance in the treatment of deafness" briefly cochlear implantation involves a surgical procedure lasting about 3 and a half hours, and costing over R60 000 in which a multichannel electrode is implanted into the skull of the patient, so that acoustic energy can be converted into a type of mechanical energy which stimulates the auditory nerve. With intensive training, such individuals are able to detect and recognise distinct sounds and hopefully ultimately speech sounds. It was first approved by the Federal Drug Administration in 1985 for use with adults, and in 1989 for use with children over two years old. Several adults have been implanted with multichannel electrodes in South Africa and the first child was implanted in Johannesburg in October 1992. While the benefits of cochlear implantation in the postlingually deafened adult have been well demonstrated, cochlear implantation for the young congenitally deaf child is much more controversial. Not only is there relatively little research on their long term success but it calls to mind the whole ethical issue of child rights. There has been a very strong voice among Deaf groups internationally against such early and drastic intervention. In a sense to implant a child is to commit oneself to oralism, and hence a rejection of deaf culture and language. Further, it is a commitment to a great deal of intervention and money for relatively few individuals which is a highly questionable goal in a country like ours with scarce therapeutic resources. Cochlear implantation is for life. The adolescent or adult is not able to discard the device as he is a hearing aid. We may be creating a " culturally homeless" child who fits neither into a deaf or hearing world.

While not denying of course the need for such research we need to weigh up very carefully at the present time the distribution of relatively scarce resources.

Hopes for the Future

The issue of cochlear implantation like many others I have discussed this evening is far from resolved and presents a lively, often emotional battlefield for differing opinions on language and culture. I believe that the topic of sign language and the issues which surround it, is in a sense a microcosm of many of the issues that face South Africa today, in that it reflects a history of debate, oppression, linguistic, cultural and educational schisms.

There is a great need to be objective and to proceed with properly conducted research. Some of the questions which have up to now been ignored for reasons of cultural prejudice, are now ready for study. Under the large file I have called "Reasons for Staying in South Africa" which alas all too often is disregarded by the cream of our profession, I must include the wonderful, relevant, exciting prospects in the area of Sign language research which exist in this country.

The relationship of hearing society to the deaf com-

munity has up to now been largely paternalistic, prescriptive and medicalizing. We need to "depathologize" Deafness as Woodward (1982) suggests and begin to understand and appreciate an alternate view to Deafness. I sincerely hope that this will happen in my own Department.

In conclusion, I would like to use this platform to indulge myself in stating publicly some of my hopes for my Department and my profession and for the future of the Deaf in South Africa.

Deafness in its cultural and linguistic manifestations is an area of concern for a number of disciplines in this country. It is not only a medical problem, it is not only an educational challenge. It is a veritable banquet for practitioners and researchers, for historians, language planners, sociologists and philosophers, a reason perhaps, that I continue to regard the Arts Faculty as the happy home of our Department.

Facts about Deaf Language and culture should be taught formally at all levels and I hope that this University will continue to be a forerunner in this regard supporting the sign language classes that have started here, the mooted development of courses for sign language interpreters within the Department of Translation, the acceptance of deaf students into academic programmes and the provision of interpreters for them within lectures. Particularly I hope that this university will move in the direction of promotion of deaf teacher training and registration. This is not a new idea. Indeed in 1803 Abbe Sicard suggested: "As a foreigner is not fit to teach a Frenchman French, so the speaking man has no business to meddle with the invention of signs, giving them abstract values." (Kyle and Woll, 1985.)

I believe that the time is ripe in the country for the Deaf to become fully involved in their own affairs. There are many positive indications that there is a groundswell among teachers of the deaf and the Deaf themselves which will hopefully affect policy in the near future.

I hope to see a name change from the current National Council for the Deaf to National Council of the Deaf. We are seeing here an increasingly empowered group who hopefully using the developing research base as justification can begin to be involved in their own future, in guiding educational policy, in informing the hearing public about Deaf culture and language, in decision making and in research.

"What matters deafness of the ear when the mind hears... The one true deafness, the incurable deafness is that of the mind." Victor Hugo (1845)

During the course of history, health practitioners, scientists and educationalists have labelled various groups biologically inferior: these include women, blacks, gays and deaf people. South Africa I hope is at last moving away from some of its institutionalised legislation in this regard. It is my ardent hope that the future of the Deaf in this country should reflect such changes of perspective.

ACKNOWLEDGEMENTS

It remains for me to thank those who have shaped my ideas through the years and who have assisted in the conception and the production of this lecture :

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Being aware of the somewhat controversial nature of my topic, I must assume full responsibility for what I have said but gratefully acknowledge the input and inspiration of many others:

Prof Myrtle Aron former Head of the Department of Speech Patholgy & Audiology for her guidance and vision through the years and the fine example she set for me. Her dedication to embedding the profession within the changing needs of South Africa were an inspiration to me and all those she has taught.

Prof Tony Traill form the Dept Linguistics whose outstanding teaching when I was an undergraduate student provided me with a sustained fascination in language and its usage and whose keen research mind as well as supportive friendship I have valued highly throughout the years.

My thanks go too to Professor Len Lanham, now of Rhodes University and Professor David Crystal from University College of North Wales whose teaching and encouragement during the development of my career have been highly valued.

Prof Timothy Reagan of University of Connecticut has been a wonderful friend and colleague during recent years and a buttress during some of the sign language sorties which I have had to engage in in this country.

The ideas and attitudes of the late Carol Prutting my dear friend and mentor from the University of California,Santa Barbara influenced me in more ways than can be imagined and to her goes a special tribute.

To the Sign Language research team of the Human Sciences Research Council, I owe much gratitude, particularly to Dale Ogilvy Foreman for her constant support and friendship.

Thanks are also due to Dr Peggy Marks Wahlhaus, Ruth Wakefield, and Debra Nails for their continued support.

Finally and most important I would like to thank my Deaf friends and colleagues who have in the past few years allowed me some glimpses and insight into their language and culture and who have radically changed my attitudes towards disability and my visions for the profession in this country.

The fact that the large group of Deaf people who cooperated in the dictionary project and coming from widely differing geographic, racial, religious, educa-

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tional and linguistic backgrounds could within a few hours - even minutes, link so successfully and communicate so well is a tribute to the power of their language and the limitless flexibility in a difficult world.

The salience of Deaf identity overshadows differences of ethnicity, age, class and gender which are so prominent in hearing society. It is my ardent hope that all South Africans will take up such a common cause and move towards better communication in the future.

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