Language and Socio-emotional Development of Congenitally Deaf Learners

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Abstract

This study attempts to explore, describe and explain the effects of prelingual deafness on deaf language and socio-emotional development of students. Qualitative case study design was used to investigate and explore the problems from four sampled deaf students', their mothers', and two teachers' perspectives. The empirical data was based mainly on interviews with the participants. Observations, informal talks and focus group discussions were used as a supplement and a complement to the interview method. Results show that the deaf students, as a result of their poor verbal communication, their linguistic, emotional and social development seemed to be deprived and they may not obtain the same quality of life in comparison to their hearing peers. Hence, congenitally deaf learners should be identified and get accesses to language learning early in life.

Key words: Congenital Deafness, deaf, spoken language, sign language, language development, socio-emotional development

1. Introduction

Oral language for hearing children or sign language for deaf children is a cornerstone for successful outcomes in later emotional and social life. Language and communicative competences can serve as critical tools for learning, engaging in social relationships, and regulating behavior and emotions from infancy onward, if successfully mediated by adults in early life; because, there is complex links between language, cognition, social and

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emotional development (Edwards and Crocker 2008). As Lahey (1988) pointed out, people use language to establish and maintain contact, to gain and give information, and in general to influence the beliefs and the actions of themselves and other persons, become self-conscious and responsible social creatures. This is possible for all human being; but, in a deprived language environment, this is unthinkable. Congenitally profound deafness and the absence of social environment skilled in sign language inhibit deaf people to develop language, communication, perception, social skills, and emotional stability (Schulze, et al. 1991; Alemayehu, 2019). A study shows that there is strong relationship between language delay or disorders, communication skills, social and emotional problems (Edwards and Crocker 2008; Mekonnen, 2019). Some local unpublished studies (e.g. Abeba, 1996; Alemeyehu, 1996; Alemayehu, 2000; Tafesse, 1998; Tensay, 1998) indicated that many profound deaf people in Ethiopia faced significant development delays in language, cognitive, social-emotional and academics, due to absence of spontaneously language acquisition early in life.

Language in general is the most prominent, among all systems of communication and is our primary means of intentional communication (Corner and Hawthorn 1993); and sign language has irreversible communication potential for deaf people's development. Sign language is a visual gestural language, involving the use of hands, eyes, mouth, head and body, which is a language in its own, with its own grammar and vocabulary (WFD, 1993; 2016). It is linguistically accepted as a fully developed first language of the deaf and can be acquired naturally through exposure to the language and through instructions provided in the school settings (Bouvet, 1990; WFD, 2016). The competence of sign language can develop spontaneously for deaf children of deaf parents, and deprived for deaf children of hearing parents those who are without sign language skills. Language incompetencies for deaf people could have significant advers effects on their socio-emotional development, due to unfavourable societal attitudes and undesirable preasures (Edwards and Crocker, 2008; Harris, 2014; Hintermair, 2016).

If sign language competencies fail to develop normally in their social environment, profoundly deaf children may face negative consequences from their social environments. Due to absence of communication with social environments, deaf people may be socially neglected, discriminated, marginalized and may be denied their natural right which deprive in their socio-emotional development. For example, according to Tirussew, deaf people are undermined, ridiculed and insulted by their teachers and laughed at by hearing peers due to their disturbed and stammered speech; perceived as different creator; seen as unique, cursed and labeled useless individuals (Tirussew, 1998).

The limited communication in language and the aforementioned negative reactions against deaf people could create higher risk for later socioemotional problems than children without communication difficulties. In affirming this thought, UNESCO (1984) indicated that, impoverished and incomplete language development lead to deprived cognitive, emotional, behavioral and social skill developments. Even with delayed intervention, the children may have slow language development in all linguistic experiences (reading, writing, and speaking/signing), less success educationally, maladjustment socially and other environmental restrictions (UNESCO, 1984; Edwards and Crocker, 2008; Harris, 2014), depending on the child's degree of hearing loss, and age at the onset of loss (Gearheart et. al, 1992). Many other research findings confirmed that poorly developed language could have an impact on concurrent and later problem behavior. intellectual and executive functioning, educational adjustment and achievement, poor motivation and poor self-concepts (Schachar, 1991; Edwards and Crocker, 2008; Harris, 2014; Mekonnen, 2018). In addition to these, language and communication difficulties are consistently related to learning and social and emotional difficulties from infancy to adolescence (Cantwell and Baker, 1991; Williams and McGee, 1996; Harris, 2014). This means the level of language development could have effects on socioemotional development; socio-emotional development again affects the level of language development (Harris, 2014).

Children with language and communication difficulties often demonstrate social and emotional disorders (Edwards and Crocker, 2008; and Harris, 2014; Mekonnen, 2018). This implies that it can be difficult to separate social and emotional problems from the problems related to language and communication. Then, children with language impairments, face difficulty, entering peer group conversations and are excluded, giving them less opportunity to learn and practice the social skills they required for peer interaction. Failure to identify and treat such problems can have serious consequences, on reading and writing.

Besides the spoken or sign language communication, learning to read is the central achievement of early elementary schooling. In the case of deafness, a child could face language problem and poor reading achievement after sufficient opportunity presented for learning to read. Children exposed to appropriate language environment can bring with them, experiences, knowledge, and skills that facilitate their acquisition of efficient and accurate reading and writing skills. Moreover, accurate comprehension of written texts presupposes that children can read individual words effortlessly. It is obvious that Deaf children enter school with no skills in listening, speaking and/or phonological processing, both oral and sign languages, face severe reading and writing skills. Most children who have poor reading skills at the end of grade one will continue to experience difficulties in reading later in life. It is therefore important to intervene early in the lives of children to prevent reading problems and their negative consequences. Some research findings suggest that the development of early reading skills predict the development of desirable self-perceptions and vice-versa (Chapman and Tunmer, 1997). According to these authors, children who perceive themselves as less able (poor self-concept) tend to avoid reading or read less frequently; in turn, reading less frequently further impedes the acquisition of efficient reading comprehension skills. This may then negatively affect the learning behavior of the children and lead to unpredicted socio-emotional problems and may affect their academic achievement.

In Ethiopia, due to undetected and hidden impairment, large number of deaf children are not recognized and supported, by parents, teachers, peers and the society. Historically, socially and culturally, there are lacks of knowledge, skills and positive attitude to rear deaf children for their appropriate holistic development. According to some local researches, parents lack awareness, teachers in ordinary schools' lack knowledge and skills to support and enhance cognitive and positive socio-emotional development of deaf children (Ababa, 1996; Tafesse, 1998). Little efforts have been done to identify, assess, investigate and intervene in the linguistic and socio-emotional problems of profoundly deaf children (Ababa, 1996; Alemayehu, 2000, 2019). From my own experiences, significant numbers of regular schools have lacked appropriate strategy to identify, assess and support deaf children. Generally, there is lack of care and support for deaf children in order to grow linguistically, cognitively, socially and emotionally, in Ethiopia. In sum, lack of appropriate provisions and support, and the people's negative attitude seem to deprive deaf children from linguistic, cognitive and positive socio-emotional developments. Such poor caring practices and negative attitudes may lead to poor self-esteem, lack of social participation and delayed in exercising their own rights, on the part of deaf people in Ethiopia (Alemayehu, 2000; 2019). All these deprived incidents together, may work as a pushing factor and influence deaf people to isolate them-selves from hearing people. Because of these unfavorable historical and socio-cultural factors, deaf people may in turn demonstrate negative attitude, towards society, face difficulties in learning, perception, cognition and unable to manage their own behavior.

There are some studies in relation to hearing impaired people's developmental problems in general, but not congenitally profound deaf students' in Ethiopia. This was the gap I identified and attempted to conduct explorative study. In light of the aforementioned problems and needs, the aim of the present study is to investigate the effects of congenital profound deafness on language and socio-emotional development of deaf students, living in Addis Ababa city with reference to home and a primary school special class for hearing impairments. The present article may have some

theoretical contributions, a base for further study, and may be useful as a source of information in planning assessment and intervention in the area. Hence, the purpose of the present study is to explore the impacts of congenital deafness on language, socio-emotional developments with the following basic research questions.

- a. What are the major effects of congenital deafness on language development of deaf students in special classes?
- b. What are the major effects of congenital deafness on socioemotional development of deaf students in special classes?
- c. How do language and socio-emotional development affect the development of one another?

2. Research Methods

Research Design

The intention of this study was to collect empirical data specific to the effects of congenital deafness on deaf individuals' language and socioemotional developments. In order to meet this purpose, a qualitative case study design was employed. Qualitative study, as defined by Yin (1994) and Gall Borg and Gall, (2006) is an empirical inquiry that investigates a contemporary phenomenon within its real-life context in which multiple sources of evidences are used. Such a design helped the researcher in this study to find out the real situation of deaf student's language and socioemotional developments, through an 'in-depth' investigation, to discover more about the meanings attributed to events experienced by individuals, rather than to record the number or quantity of the events themselves (Price, 1997). The qualitative data in this study was a source of well grounded, rich and thick descriptions that are vivid, and have a ring of truth and explanations of linguistic and communication skills mastered by the deaf children and the difficulties they face in their home and school environments.

Sampling

Sampling in a qualitative study tends to be small number of people nested in their context and studied in depth, unlike quantitative studies which aim for larger number of context stripped cases and seek statistical significance (Patton, 1990; Miles and Huberman, 2014). The sampling procedure for this study was purposeful sampling. Four deaf students attending 5th and 6th grade in special classes, their parents and two teachers were purposefully sampled to serve as sources of information in relation to language and socio-emotional development of deaf children. Audiometric test was conducted in order to identify deaf from hard of hearing and only congenitally profound deaf students with greater than 90dB was considered. This was very important to confirm the deafness and to predict their capacity to acquire speech language development. Hence, deaf students attending upper primary (5-6), congenital deaf and have good expression skills were considered in the study. Besides, two language (Amharic and English) teachers from the special class and four biological mothers of the sampled deaf students were also purposefully selected to serve as a source of data.

Instruments

To obtain adequate information for the study semi-structured interview, focus group discussion and observation guideline were used to investigate the linguistic and socio-emotional aspects of the sampled profoundly deaf students.

Semi-structured interviews

The interviews with the four deaf students were conducted both at home and at school, using interview guides to investigate language and socio-emotional developments. The interviews focused on the communication skill in oral, sign language, written messages and socio-emotional development of the sampled deaf students. The level of interactions and the status of common understanding between the sampled deaf children and their immediate social environment was also the focus of the interviews. School sign and home-based sign communication methods were used during the interviews with sampled deaf students. The researcher is skilled in sign language, and conducted the interview with deaf students using school signs, lip movements and sometimes written languages. Teachers

and parents complement the home sign deficiencies of the researcher. All the interviews conducted in sign were recorded in video camera with full consensus of all the participants. The interviews that were done in vocal language with teachers and parents were gathered by tape-record.

Observation

As an instrument for observation, some key themes in relation to language discourses and socio-emotional functioning, had been developed prior to the fieldwork and during the course of the study. The major contents include classroom interactive discourses, reading and writing, mode of various communications and covert behaviour of the deaf students. In order to understand the complexities of communication in language between deaf students and other social systems around them, observation, which is a systematic way of watching, recording, describing, interpreting and analysing events was employed (Patton, 1990; Robson, 1993). Hence, to probe deeply, and confirm information obtained from interviewing the participants, intensive observation was conducted in relation to the deaf students' interaction with teachers, parents and peer groups at school. The observations were conducted during classroom interactions and outside the classroom during the intermissions. The observations in the classroom interactions were recorded through note taking and video camera.

Focus Group Discussion

List of main themes were prepared before conducting the discussion. This includes language skills, social skills, emotional stability, interactions and the status of mutual understanding. More specifically, the problem of communication difficulties they have faced, the support they get from their social environments and the support they seek in the future, was the main focus of the FGD with deaf students. For teachers and parents, the focus of discussions was mainly on the socio-emotional problems, language teaching and learning practice, and on the resolutions to improve the situations currently Deaf students are facing. Focus group discussions were conducted with the deaf students and the teachers at the end of data gathering through

interviews. The aim was to strengthen the findings obtained from informants through interviews.

Procedures in organising and analysing the data

The data was gathered in Amharic language which is the official language of federal government and which people living in Addis Ababa are proficient in. The procedures of data gathering include transcription and translation, categorization, data reduction, data display, conclusion drawing and verification. The interviews conducted with teachers and parents in the Amharic language were transcribed from the recorded tape as stated, and then translated into English. The data gathered from deaf students by sign were also transcribed in Amharic, then into English written form, as interpreted from the video record. Then, information collected through interview and focus group discussion was categorised, reduced, displayed, verified and analysed in words. The data were selected, focused, condensed and abstracted (Patton, 1990; Miles and Huberman, 2014; Tesch, 1990) and reported. A process of data analysis includes, sorting relevant data by going back to the field, verified data that can answer the research questions, discarded irrelevant once, and organised the data, present and analyze in a way that "final" conclusions can be drawn and verified (Miles and Huberman, 2014).

In order to check, confirm, clarify, justify and come to the truth, multiple research methods mentioned in this article were used. Then, the conclusions increasingly become explicit and grounded. In sum, data reduction, data display and verification as interwoven before, during and after data collection in a parallel form, to make up the general domain called analysis (Miles and Huberman, 2014; Mertons and McLaughlin, 2004). This was very important for the fieldwork cycle back and forth between thinking about the existing data and generating strategy for collecting new, often better data. It had energized the process of field works. Finally, the analyzed data was systematically reorganized and presented. Due to space all the data are not displayed and described in this article. Only the

summary of the major results is condensed, clustered and abstracted, precisely and clearly, presented and discussed below.

3. Results

Case by case analysis of the Deaf sample participants

To answer the basic research questions, in relation to the adverse effects of congenitally profound deafness on language and socio-emotional development of sampled students, triangulated approaches were used. Interviews with mothers, deaf students and teachers and focus group discussions were carried out. Based on all these sources and approaches, the case by case analysis (Miles and Huberman, 2014) is employed to systematically present the results in the following parts. All the names used in this part are pseudo names, so that it is not referred to any similar names.

Yosef

Yosef is male, 18 years old, thin and tall. He was living with his biological parents including 10 brothers and sisters. Yosef has congenitally profound deaf (92 and 95dB in left and right ears respectively) with no intelligible speech. He is from low socio-economic status and there was no any attempt to understand his disability and able support him at early years. Yosef admitted to grade one without pre-school or without both spoken and sign language skills that would enable him to cop-up with social relationships, emotional stability and learning. Teachers and parents disclosed that he has serious language difficulties both in expression and reception abilities. Whenever he failed to understand other intentions or when his ways of communications are not understood by others, he gets upset. Signing, tapping, finger spelling and pointing to objects and body movements are the very frequent ways he expresses himself. He signed very rapidly and emotionally, which was difficult to understand for his teachers, family members and deaf peers. Besides his rapid signing, there were many strange signs produced emotionally, which were fragmented and without discourse. He attempted to use written messages to express his thought, where his written communication is mainly based on single words, at times

meaningless words. Due to these and other odds, the teachers and his classmates were complaining him.

His understanding of messages was found to be limited to non-verbal communication, such as tapping and pointing to objects, gesturing, and facial expression which are dominant ways of communications at home. For example, parents contract their face for impossible things and smile for positive things with nodding their heads. Since the most frequent way communication was the oral language at home, his perception of the communication of his family is based on referring to objects, body movements and gestures. The signs family members used are limited only to the home environment. He has difficulties with all the members of the family in receiving messages. Speech and written messages are less frequently understood in the course of his communication with family members. He understands their messages after several repetitions and various ways of writings; which upsets both parties. While family members are chatting, most of the time he is silent, passive and seldom asking questions. He received little or no response from his family. The family members neglected him in informing events, news and stories, frightening the frequent demand to repeat the same thing again and again. He can't easily understand sentences from their lips. Communication very much lacks fluency and time consuming due to several repetitions. There is no spontaneous communication, every mode of communication is used with full of misunderstandings, tension, fragmented and lacks discourse. They look for objects to show whenever they do not understand each other. Understanding things even within context is sometimes difficult. All these together put him under stress, annoyed and develop despair in his environment.

Yosef was also very poor in the second languages, Amharic and English, evaluated less satisfactory in Amharic speech, lip-reading, text reading and writing. Besides he was very unsatisfactory at English expressions and perception skills. He knew very little or no about these languages and the

usage of the languages itself. His limited language skill did not allow him to create interpersonal communications with others.

Although he frequently used written communication, it was found that his writing and reading skill was very poor. His writings were very fragmented, ungrammatical and sometimes constructed from meaningless words and phrases. He tried reading and writing only in the Amharic language. He had no any text reading and writing skills in English. Yosef was tested to read and found to have serious difficulties in reading to the level of grade six. He read with unintelligible sound and rapid signs that seem meaningless. He couldn't understand the discourse and couldn't tell the message of the passage to the class. He repeatedly said, "I don't know". His classmates also argued that they understand nothing from his reading in sign; the class students all together said: "He can't read; he doesn't know sign". Then, he aggressively shouted, left the class and run away from the school compound. Yosef isolated himself from people and prefers to be alone. He usually withdraws from any dialogue with the family members, keeping him-self aloof. It seems to be hopeless for him to get information from his family members. Besides his isolation, as stated by his mother, he is also aggressive: "He aggressively quarrels with his brothers, sisters and peer groups." In the school, he looks frustrated and developed poor self image. He is very silent all the time. Unless asked by the teachers, he didn't respond and his responses were usually irrelevant to the teachers' questions. For unknown reasons, he liked to work independently rather than interacting either with teachers or deaf classmates.

Tigist

Tigist is a female, 15 years old, thin and medium height. She is living with her biological mother, two sisters and a brother, attending grade five at special class. She was born profound deaf (93 and 91 dB left and right ears respectively). She did not get appropriate early interventions, neither in preprimary school nor at home. Tigist communicates with people using unintelligible speech, sign with facial expressions, limited finger spelling,

referring to objects and body movements. Her language skills were very poor. Her writing in Amharic language, the language she was exposed most, was less satisfactory, sometimes meaningless, whereas, her English language skills were worst. Her communication behavior seems different from other people. She frequently responded to teachers; it doesn't matter whether she is right or wrong, she responds, most of the time, wrongly.

She can better perceive the message of others when they use objects to be referred, home signs, body movements, slow speech for lip-reading, pantomime, and in general non-verbal communications.

Her perceptual and expressive difficulties in spoken languages were enormous. Communication in sign with her teachers was with tension, based on very fragmented speech, lacks discourse and is with frequent misunderstandings that frequently annoyed her. Reading text was also another challenge and with various emotional variability. When she started reading, she smiled and then, contracted her face, which seems confusion. She touched her nose frequently and watched the class whenever confused. After some seconds, she stopped signing, run her finger on the line and produced the same meaningless sounds. After 3 minutes she looked at the class and said, "Finished". Her reading attempts were with unintelligible sound, very slow and communicated with fragmented sign. She was requested to tell the class what she comprehended from the reading. She told the class nothing. She said: "I don't know what it means, because I have never read this book before." Her classmates also respond that they understand nothing from her reading. Finally, she shied and said; "I can't read"

Furthermore, her deafness has adversely affected her social interactions with other people. Tigist did not participate in the family chatting due to her difficulties in speech perception. She was alert and demanded to get information all the time. If she did not get information, she immediately became upset, aggressive and violent. She had difficulties in developing appropriate behavior towards others and inability to follow the norms of

friends and classroom. Furthermore, she had developed anger, confusion, suspicion, a lack of confidence with her poor self-image.

Hanna

Hanna is a female, thin and medium height, 15 years old, lived with biological parents and other 3 siblings, was attending grade five. She was born profound deaf (99 and 95dB in left and right ears respectively). She had no intelligible speech. She had neither attended pre-primary school nor received any intervention program at home. She was admitted to school at the age of 9 years.

Hanna communicated with people using sign and tried written communication for long messages; but her written messages were fragmented and ungrammatical. She was a good lip reader for some bilabial words and home sign user. She understood some words and phrases from lip, but not sentences. She watched everybody speaking, alertly, to get information from lip as well as body movements and emotions. Sentences were understood after several repetitions and demonstrations in body movements, descriptions in pantomime and tapping and pointing to concrete objects. Due to the usual usage of speech at home, she did not participate in the home social settings, but demands interpretation and elaboration. Otherwise, she was good at guessing during the discussions of family members from their emotional expressions.

In the school, most of the time, she was very passive and looks confused. Classroom setting and attending lessons in unfamiliar languages was very challenging for her. Attending two languages, she had neither the command of expression nor perception except the Amharic language. In this language, she tried to communicate less satisfactorily in lip-reading, and text reading and writing. In English language, she knew little or not at all, although she attended classes in this language. Furthermore, here reading skills seemed to be delayed by four years; since she couldn't read second grade Amharic language text.

At a time, she started reading; she looked at the class with very nervous face, putting an index finger on her lip and the left index finger on the book. She looked at the book, then the class; never turned her face for minutes without any movements. She looked confused, and stared at the class, shied, then towards the book. She signed a single word after three minutes, with very dark face. One of deaf students interrupted and said; "She can't read." She looked at him, then to the book for thirty seconds without any movements. Finally, after spending six minutes without any reading, she stared at the class, biting her lower lip and said; "I can't read, because I have no hearing and speech." Supporting her, all the class signed, repeated what she said; "We don't have hearing and speech; so, we can't read and understand." Then, she rushed to her sit, sat and put her head down, looked more frustrated.

Socially and emotionally she seemed to be different from the others. Her mother usually told her the summary of the events with difficulties. If she refused to tell, she simply became upset and quarreled with her mother. But, the mother's signs were not well understood all the time. In general, her development in social activities and emotion is not good. Aggressiveness, suspicion, lack of confidence and poor self image are her typical behaviors.

Debebe

Debebe is male, 17 years old, fat and tall, attending grade five. He lived with his biological parents and other 7 family members. He was born profoundly deaf (120dB in left ear and 95 dB in right ear). His speech was not intelligible. He joined a special class at the age of 11, without any early interventions and pre school attendance. He communicated with people using his own signs, referring to objects for further understanding, and body movements. He also tried to express himself through "speech", vocalising and finger spelling. He is an alert seeker of information and good at reading emotions of people and the affairs they are talking about. He read single familiar words from lip, but very poorly. Since communication took place on request and with tension, spontaneous communication was not observed.

Finger-spelling and movements, pantomime, and written form of communication are also his better means of expressing messages to others. However, his written messages are long, fragmented, ungrammatical and meaningless. He has also serious reading difficulties.

While reading, he looked at the book then sign. Said, "I don't know" by signing whenever he got the words he repeated the phrase "I don't know." He produced unintelligible speech and fragmented sign. He was in tension while reading. Finally, he said, "I don't know". He himself and the class were asked what they understand from the passage. Nobody comprehended the text. They said, "We don't know." All these language difficulties may further aggravate his socio-emotional problems.

His social and emotional developments were not matured. He had difficulties in developing appropriate behavior towards others and inability to follow the norms. He was isolated in the social system of hearing people. Emotionally, he was violent, angry, confused, suspicious, lack confidence and also develops poor self- images. Like Hanna, sometimes he was passive in social interaction and communication.

What are the similarities between the four sampled deaf students?

The findings of the four sample deaf students were quite similar in terms of their profound deafness, limited access to language at home and school and mode of communication. All were deprived in both spoken and sign languages. Their common means of communication seemed to be non-verbal communication. According to these teachers, poor communication skills of teachers and parents, the congenital onset of deafness and many other related factors have adversely affected their socio-emotional developments.

Another similarity is also found in their reading skills. They were also deprived from reading and writing in the language they are better off, Amharic; because the children had home and school experiences in this language. Initially, students were requested to read the Amharic book of

grade five and failed to read, then, grade four and three, turn by turn. At this stage, deaf students' reading skill was found to be poor. In all cases the reading skills of these deaf children were extremely poor. For example, the final reading experiences observed and carefully recorded was an Amharic reading skill practice of second grade text book. All the sample students were given the passages they had already passed through at second grade levels, three to four years delayed in their reading skills.

Writing

Writing of the deaf students was not exceptional to be deprived. I observed their exercise books very frequently. The first activity was, writing a letter of greetings to one of their relatives in the language they know best i.e. Amharic. Their writings were totally fragmented, meaningless, irrelevant and very unintelligible in terms of grammar and meaning. Furthermore, another classroom writing tasks were given by the teacher. This was relatively simple than the previous letter writing. It was sentence construction. Five familiar words were given to construct simple sentences. Again their works were unintelligible in terms of meaning and grammar. After a month, the same words were given with hearing students of the same grade. The hearing students constructed within two minutes correctly both in meaning and grammar. On the other hand, it was really a pity that students at this level (grade five and six) could not construct simple sentences for the second time.

4. Discussions and Conclusion

The results of this study revealed that deafness has enormous effects on the individual's holistic development. The sampled four deaf students in this study, who joined first grade, at the age of 9-12 without pre-school experiences, had slow language development, in spoken as well as sign linguistic experiences and socio-emotional difficulties. Such delayed and slow language developments had influenced deaf adolescent's ability to develop communication skills, such as reading, writing, and speaking/signing, as indicated by the teachers, parents and confirmed by the observation of the researcher. The researcher frequently observed and

reconfirmed that the sampled deaf students had sever difficulties in reading Amharic text books. This means, deafness has a retarding effect on language development, unless mediated early in life (Strong, 1995; Edwards and Crocker 2008). Parents reported that they were very much helpless to intervene in their deaf child's development. Absence of early intervention seemed to have resulted in such primary disability and such effect implied to secondary disability. Among many secondary effects, deafness was manifested in poor language and poor socio-emotional developments. This finding is confirmed by another study by Edwards and Crocker (2008) that hearing-impaired children are at risks for developing a wide range of behavioral disorder or problems. On the other hand according to the same author, superior early language skills are associated with better adjustment in later life.

Language and Social and Emotional Development

The data from the interviews, focus group discussions and researcher's observations showed that deaf students in this study were deprived form language development: speaking, signing, reading and writing. They mainly Due to their deprived communicated in non-verbal communications. language skills, emotional distress and psychological problems, they were living isolated live. According to Edwards and Crocker (2008) and Harris (2014), delayed in language may lead to high levels of frustration, and problems such as aggressive behavior, anxiety or social withdrawal. Isolation here is primarily a lack of interaction and communication with the hearing people. As identified by some studies, Deaf people are isolated themselves from the social and emotional demands as a result of their communication difficulties and ineffective interaction strategies (Ayodele, 2000; Edwards and Crocker, 2008; Harris, 2014). Another study also confirmed this thought that deaf people often feel more socially isolated in their home and communities than those who have less restricted opportunities to communicate in the family environment. They likely have faced frustration, embarrassing misunderstandings, and the loneliness of being left out of oral conversation (Jambor and Elliott, 2005).

On the other hand, according to Mekonnen (2018), gaining feelings of trust, confidence, pride, friendship, social skill, affection and humor are all a part of a child's socio-emotional wellbeing that develops through parent-child effective communication through language. Such development is crucial to academic success and social and emotional wellbeing.

Among other things, as reported by the teachers and parents in this study, the negative attitude of the society influenced deaf students to be isolated in Ethiopian context. Furthermore, the sample deaf participants in this study disclosed that they find them-selves excluded by their family members and the community around, due to lack of communication in language. From the experiences of the researcher some traditional prejudice against deaf children by some parents is still alive in Ethiopia, influencing the development of deaf people and applied to deaf students living at the city of Addis Ababa. This was also used to be the experiences of other countries. For example, according to a letter written by the Abbe' de l' Epée: "Parents looked having a deaf- mute child as disgrace; they believed themselves entirely just toward their child, if they provided him with food and shelter; yet they would keep him entirely out of sight, confined to the process of a cloister or the obscurity of some unknown boarding house" (quoted in Bouvet, 1990: 88). This may be still a reality in the Ethiopian context; because, in the process of data collection of this study, two of the four parents had asked me for the possibilities of boarding school, in Ethiopia; probably to get rid of the deaf child from their home and get relieved. This may be due to the influence of the negative attitude of the community and the challenges they have faced in communication. Such an attitude by itself negatively affects the socio-emotional development of the deaf students.

It is repeatedly observed that deaf students in this study faced interpersonal relationship with teachers, hearing peers and parents. Their classroom discourse and social interaction outside classrooms were also limited. Parents couldn't foster higher and positive socio-emotional and language development to their deaf children, due to their lack of positive attitude, knowledge and skills to shape them culturally and mediate socially using

sign language. The parents missed skills in this language. From my experiences working with deaf people for years and from a findings of some researchs in the area, sign language is not taught and used by teachers and hearing people in communication with deaf people. Hearing teachers use to teach deaf children. Signed Amharic as a subject and other subjects through it (sign depend on the Amharic grammar), oral and written language, and other non-verbal communication approaches. Sign language in Ethiopia may be used by the deaf community, and deaf children may acquire from the deaf community that needs investigation to describe the situation fully and in depth (Alemayehu, 2000, 2019).

As repeatedly discussed, absence of sign language skills among parents, teachers and other hearing people may lead to unfit social interaction patterns, between the deaf children and hearing people. Such situations often develop to the deaf people less positive personality, characterized by few social initiatives, misbehavior and less enjoyment in interactions with others. Deaf people due to deprived language development may lack the awareness of how mental states (memories, beliefs, desires, and intentions) govern their own behavior and others. Such deprived social intelligence may also deprive their social interaction. This developmental delays often happens for congenitally deaf children from hearing parents (Peterson, Wellman, and Liu, 2005; Hintermair, 2016)

Less understanding of others reactions to their behaviours can result in less accurate self-understanding and possibly low self-esteem, and developed social emotional difficulties. Self-esteem is a principal component of mental health and has a pervasive and powerful impact on human cognition, motivation, emotion, and behaviour (Jambor and Elliott (2005). These difficulties were pervasive, as pointed out by one of the mother informants about her daughter's difficulties: "Since she can't hear, always upsets while we are speaking. She cries for nothing and becomes aggressive. The reason could be her suspicious behaviour that we have spoken about her. She frustrates due to absence of hearing and speech communication". Similar research findings in Nigeria (Ayodele, 2000), indicated that most deaf

people exhibited social and emotional adjustment difficulties, with evidences of clear demonstration of incapability and inferiority complex; inability to develop self identity, frustration and stress, social isolation and diminished interactive benefits as a result of negative feedback from other members of their environment, since they cannot be heard.

As reported by another study, mothers rated deaf children those with poor communication skills, as having greater distractibility-hyperactivity problems than hearing children (Huser, Lukomski, Hillman, 2008); because, deaf individuals are likely to lose a lot of information during the communication process, in their life span. As a result of repeated experiences of ineffective communication may lead the hearing impaired individuals towards frustration and a feeling of deficiency that could depress their self-esteem (Jambor and Elliott, 2005; Hintermair, 2016).

Parents reported that the lack of communication between parents and children leaved both sides unclear about the needs, wants and capabilities of others. The language ability of both interacting people and hearing status affected the amount of everyday interaction that occurred, among them. For example, cultural play, such as story-telling, oral literature and humour were not exchanged among the family members and their deaf children in this study, as reported by the deaf participants and their parents. Regarding these points, one of the mother informants in this study, said: "Daily news, events, story, humour, oral literature wider ideas and concepts are difficult to be narrated, discussed and understood for my daughter, unless demonstrated by actions and referred to objects". Such language and communication barriers may lead deaf individuals to social-emotional difficulties. Most deaf students in this study seemed to have serious socioemotional difficulties. For example, another mother in this study described the behaviour of her deaf daughter as follow:

She is very moody. She behaved very differently. She didn't like to separate from me for a second. If I left her home, she become upset, knocking her head to the wall and ground and crying very aggressively. She had very strange behaviour.

She has withdrawn from communicating with any person outside our home. She is very violent, very- very aggressive. Every- body were running away when they saw her. We couldn't understand why she behaves like this.

One of the teacher informants of this study also mentioned the impacts of poor communication have on deaf children socio-emotional development:

Language has played great role in human relation and environmental awareness. Due to deprived language, their social skill is weak and they are isolated from the majority of society, because, they are very poor in sharing ideas, discussing phenomena, and expressing their feelings, and attitudes. Even if they tried to express themselves, the hearing community misunderstand them and do not know how to communicate and handle their needs. Emotionally, when people are discussing orally, they become suspicious, and then create conflict. Lacking language skills, deaf students had difficulties to integrate with the society and couldn't acquire education in a better way.

As stated by Moors, (1996) and Hintermair, (2016), in such a situation, a deaf child, reacting to a lack of effective communication may develop patterns of behavior that are classified as immature, autistic, egocentric and so on. Furthermore, the same author argues that the effects of a congenital deafness are pervasive and create psychological stress. He suggests that deafness can isolate people from other people and from knowledge, unless mediated very early through sign language. From the interview with the informants and researcher's intensive observation, it was revealed that the sampled deaf students were found to be shy, withdraw, poorly motivated, and dependent on others. Furthermore, they were frequently acting in the way of aggressive and uncooperative manner. Another research finding showed some related results on behavioral difficulties of deaf students. For example, in describing the impact of deafness on child development, Meadow (1980), listed the following factors as characteristics of hearing impaired students: "Lack of social emotional maturity, lack of self-

confidence and initiative, difficulty in peer relationships and physical aggression".

One of the deaf informants in this study also expressed his feelings about the difficulties he had faced in the situation of social interaction with hearing people:

I don't have speech to talk. I seldom use writing. My sister, who knows limited sign, sometimes helps me in interpreting for my mother and father. No sign at home. Usually I try to ask what makes them laugh and things they are talking about, but most of the time, they are not willing to tell me. This annoyed me much walked out of home. Hence, I am a person who is isolated and prefer to keep quiet.

Such things may aggravate psychological problems, such as, disturbances, disruption, aggression, distrustful, and unhappy with themselves, as a result of living in a hearing world, where there is mismatch of hearing status and communication mode. A number of research findings confirmed that poor language development has been implicated as a correlate and potential causal agent for the incidence of emotional-behavioral disorder in children. According to Gordon and Hintermair, poor language development may be related to psychiatric risk with high degree co morbidity between linguistic and psychological disorder (Gordon, 1991; Hintermair, 2016) delayed language development is related to significant level of emotional and behavioral problem, the relationship is not independent of cognitive development (Gilliam and de Mesquita (2006). The most recent study by Mekonnen (2018) shows that compared to the hearing sample, the hearing impaired students have severe socio-emotional problems, regardless of whether they were in special classes or special schools; which is the result of delayed language.

Hence, deaf people, in order to live socially and emotionally healthy life, they must acquire sign language early in life. They should spend much of their time with persons who can sign and /or deaf people, as suggested by one deaf informant: "I love and am loved by deaf people, because we are

identical, and we can communicate about all affairs in sign language, however it is limited".

Conclusion

Language is an important means of establishing and solidifying social and personal ties between the child and his/her parents, teachers and all in the social milieu. Deaf children should be able to communicate with his/her parents by means of a natural language (i.e. sign language) as soon and as fully as possible. This study revealed that the deprivation of language and communication resulted in the deaf children lagging radically behind the normal development, in language, cognitive, socio-emotional, and academic functions which may be true for most deaf people in Ethiopia. As these youngsters grow up into adulthood, their current problems often may become chronic, leading to employment, family and social failure and frustration. The result may reduce quality of life and reduce possibilities to manage a free grown up life as ordinary citizens.

It may be difficult to generalise the findings of this study to the population of deaf population in Ethiopia from such a qualitative study consisting of a small number of informants. However, from experiences and observations of similarities in Ethiopian poor socio economic situations, poor teachers training in special needs, lack of support for parents, absence of Ethiopian sign language as language with its own grammar and teaching it as a subject, absence of modern assessment and early intervention, poor educational provisions, and other relevant factors, it may be possible to generalise the findings of this study to the deaf people living in the other part of the country with similar status of the participants. Furthermore, some of the previously done researches (Ababa, 1996; Alemayehu, 1996; Alemayehu 2000a; Taffese, 1998; Tensay, 1998; Tibebu, 1991) also came with similar discouraging results on communication, social and psychological developments of deaf children in Ethiopia.

Thus, the key issue is early identification and mediation with appropriate and adequate support services for the deaf in the education system, which must extend to the support of parents, in Ethiopia. Sign language in

Ethiopia must be developed through research and accepted in order to help an early sign language acquisition and sign language training for those involved. To intervene deaf children socially, linguistically and psychologically early in life, those who are in a position to intervene (parents, teachers and peers) should be empowered, and in so doing, ultimately empower deaf children themselves. If deaf people are empowered and get ahead in Ethiopia, they must have a better image of themselves and their capabilities, so they can project for themselves brighter future. On the other side, another deeper and extensive research must be planned and carried out to find out some other factors, because this research is not without limitations. It attempted to find out only the major factors, but there may be several other factors contributing to such social, psychological and linguistic problems.

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