DEAF WRITERS IN THE UNIVERSITY WRITING CENTER

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When I first began interning at my University Writing Center, I was impressed by the careful consideration given to student with disabilities as well as English language learners. Accommodations such as quiet rooms and extended time were paired alongside physically accessible spaces and consultants trained extensively in ESL writing pedagodgy. But as I have experienced through working with d/Deaf, blind, and DeafBlind children, no accommodation is one-size-fits-all.

During the end of my time as a Writing Consultant, I began to truly understand how writing consultants were struggling to serve d/Deaf and hard of hearing students. During one of my own consultations, I was working with a woman who identified as hard of hearing. She shared that she feared the writing center would be unable to work with a student like her. She had visited the center two times before and had unsuccessful, stressful sessions; this was her last attempt at seeking writing center services.

On a separate occasion, I witnessed a consultation with a Deaf student who utilized interpreting services. The student began by sharing with the consultant that English was not her first language. Unfamiliar with the unique grammar of ASL, the consultant responded, "Oh, what is?" As the consultation continued, the consultant struggled to understand the needs of the student as well as howto work with an interpreter.

For every unique experience encompassed by the term "disability," there are equally as many possible accommodations. However, in the case of university writing centers, some accommodations cannot stand alone and instead must be paired with education and training. At the same time, University Writing Centers fueled by undergraduate consultants face a revolving door of knowledge and experience, making training and education a formidable task. Many strategies employed by consultants are learned through experience, but how often does this learning curve come at the cost of students with disabilities?

d/Deaf Americans account for two to four of every 1,000 births in the nation (roughly 0.38%).[1] Of that .38%, a portion of deaf Americans identify as culturally Deaf. These culturally Deaf Americans have a rich history of linguistic heritage,[2] cultural development, and community building, commonly referred to as Deaf culture. Deaf culture formed through centuries of shared life experiences, struggle, and linguistic marginalization. While many college campuses accommodate d/Deaf students through services such as the University of Texas's Services for Students with Disabilities, it is imperative that all university institutions and resources provide equal access to d/Deaf students. In order to be effective tutors at university writing centers, writing consultants must be cognizant of the variance in Deaf writers' educational, linguistic, cultural experience and needs in terms of accessibility.

The history of deaf education is rooted in centuries of alternating perceptions about d/Deafness and how d/Deaf students learn. Shadowed by centuries of ableism, many fallacious perceptions have prevailed despite scientific and scholastic inquiry into the minds of d/Deaf learners. Up until 1970, the American model of deaf education stood firm in the practices of teaching speech and lip reading to deaf learners. The recognition of American Sign Language (ASL) as a true language by linguist William Stokoe in 1970 ushered in a new pedagogy for deaf education: Bilingual Bicultural Education. Bilingual Bicultural education operates under the linguistic interdependence hypothesis, arguing that if a deaf child has a strong language foundation in a signed language such as ASL, they "can use this language to buttress their learning of the majority language in its written form, without exposure to the majority language through speech or a manually coded system" (Mayer 2). However, Connie Mayer, author of "Bilingual-Bicultural Models of Literacy Education for Deaf Students," argues, "there is no evidence of a correlation between oral ability in the first language and the subsequent ability to read and write in the second language" (2). If there is no correlation between a person's oral ability in a first language and the ability to read and write in a second language, why would we expect to see a linguistic transfer between the ability to sign in ASL and read and write in English (2)?

The theory of linguistic interdependence breaks down when faced with the bi-modality of English and ASL. Because signed languages such as ASL do not have written forms, Deaf students face barriers when transferring literacy skills from their first language to

the written form of a spoken language. There is no one-to-one correspondence between signed language and written text. Instead, native signers "develop the cognitive power that supports broad conceptual and cognitive transfers across language" (Mayer 2). Having a strong foundation in language—spoken or signed—enables writers to elaborate and expand on ideas and aids students in making successful lexical, morphological and syntactic choices (Mayer 4). However,

> without full proficiency in a second language, [the constraints of writing] may impose psychological limitations on people's abilities to conceptualize their intended meanings and its organization in discourse. (Freedman, Pringle, et al. 10, qtd. in Mayer, "Shaping at the Point of Utterance")

Language and literacy development are independent, not interdependent. As d/Deaf students get older, their writing begins to resemble that of hearing peers who are learning English as a second language. However, audible English immersion is impossible for deaf students, and as a result, "deaf writers face much greater difficulties in overcoming English writing barriers and meeting American academic standards than their non-native hearing counterparts" (Schmidt 8).

ASL differs from English in a number of core grammatical components. Most obviously, as a visual language, ASL does not have a codified written form. While many visual representations of ASL have been attempted, there has yet to be a commonly accepted form that is capable of capturing all of the languages' Non-Manual Markers (facial expression, mouthing, role-shift, eye gaze, etc.) that indicate meaning far beyond the movement of the hands. For teaching purposes, a tool called ASL Gloss can be used—a way to visually represent ASL vocabulary through the use of English. ASL Gloss is written in all capital letters. Typically, English follows subject-verb-object word order. ASL however, utilizes a time-subject-verb-object word order. When constructing a sentence, ASL users will establish a time frame at the beginning: for example, WEEK-PAST MY CAR ME WASH versus its English counterpart, "I washed my car last week." ASL is also characterized by the use of rhetorical question: for example, MY CAR? WEEK-PAST ME WASH. This variation in sentence structure is accompanied by an absence of possessive markers, plural markers, articles, to-be verbs, and varied verb tenses. Reports indicate that compositions written by d/Deaf children in English tend to be shorter, use more articles and nouns, use fewer adverbs and conjunctions, and reiterate words and phrases (Albertini 130).

Rebecca Day Babock, the Chair of Literature and Languages at the University of Texas of the Permian Basin, has done extensive research with regard to disability in writing centers. She pays particular attention to d/Deaf and hard of hearing students in her book, *Tell Me How it Reads.* Babcock's studies of Deaf students in writing consultations show instances of tutors having difficulty understanding deaf students' attempts to paraphrase written material from textbooks, research materials, or the internet. Bi-modal bilingualism can present challenges not only in writing production, but also when synthesizing text. Consequently, "[it] is difficult to paraphrase something one does not understand" (Babcock 168). When tutoring d/Deaf writers, it is crucial that writing consultants recognize the linguistic variations between ASL and English and do not assume that ASL is a visual representation of English. Understanding these linguistic differences will help tutors recognize and understand recurring local concerns as well as larger global issues.

There are distinct cultural components to consider when working with Deaf writers. For those who are culturally Deaf, deafness is more than a medical diagnosis. There is a culture behind Deafness that encompasses a unique language, social norms, faux pas, and shared history. Deafness is an identity. Understanding Deaf culture can both explain behavioral norms of Deaf writers and make for a more productive consultation. For example, the Deaf community has a cultural emphasis on being direct and explicit. For this reason, the Non-Directive, Non-Evaluative (NDNE) approach may not be appropriate when working with Deaf writers (Babcock 180-81). NDNE inquiries may leave Deaf clients unsure of how to respond and looking for more pointed questions. By asking direct, *wh-* questions rather than ones that require only yes or no answers and by using imperatives, consultants will generate more discussion within the consultations (Johnson 34). Consultations with Deaf students function very similarly to ESL/ELL consultations. For many signing Deaf students, English is a second language, and "Deaf tutees, like ESL students, are more likely to ask for explanation of points of grammar" (Babcock 91). While consultants may feel being more direct is inappropriate given a Writing Center's NDNE doctrine, Deaf writers can greatly benefit from grammar revision. In fact, Nancy Grimm argues that refusing editing and proofreading to non-mainstream students privileges those students who are already members of the dominant discourse and may even violate disabled students' legal rights (Grimm).

Tutee's choice in communication style (interpreter, no interpreter, speech, ASL, or signed English, etc.)

plays an important role in the foundation of a client-tutor relationship. Allowing a tutee to lead, meanwhile emphasizing their comfort, will help writers maintain autonomy over their writing and the session as a whole. Respecting variations in communication styles leaves room for more confidence and trust between consultant and consultee. Often with ESL tutoring, it's common practice for the tutor to read the paper out loud in order for the student to hear his or her errors. However, "Deaf people can perceive English on paper, on the hands, and on the lips [and] [t]he choice of whether to read aloud and have it transliterated or to read together on the paper must be negotiated between tutor, tutee, and interpreter" (Babcock 169).

When working with d/Deaf writers, greater attention to environmental detail may be necessary. If a Deaf student arrives at the writing center with an ASL interpreter, they will require a more strategic choice in seating arrangement (Babcock 125). A well-lit area where the writer can see the tutor, the writing, and an interpreter easily will help alleviate and prevent communication breakdowns.

These communication breakdowns can be prevented through a series of best practices: When speaking, tutors must be sure to address the student. It is disrespectful to direct comments to an interpreter that are meant for the Deaf tutee (182). An interpreter should only be spoken to if a point of clarification is required. Speak clearly, without overemphasizing words, and with a mouth free of chewing gum or food. This provides ideal settings for students who utilize speech reading. These three points of contact and information (tutor, writing, interpreter) require more processing time for both consultant and student. Providing time for the student to process the information from the interpreter, assess the writing, and ask clarifying questions, will develop clear channels of communication. These sessions may require a time extension. Additionally, in both Deaf culture and ASL, eye contact illustrates attention, respect, and communication. It is best to maintain eye contact with the student throughout the consultation and to visually stimulate the conversation as much as possible. Using visual aids and learning any amount of sign language (the alphabet is a good start) will narrow the communication gap between the tutor and tutee. Finally, it is *not* the job of the Deaf writer to educate tutors on d/Deafness (183). The student came to the writing center to work on their writing, not to teach consultants about d/Deafness (183). Consultants should not waste session time on questions regarding d/Deafness that are unrelated to the task at hand.

The individual, tailored nature of writing consultations lays the foundation for successful exchanges. Much of working as a writing consultant is asking the right questions and working with students

with disabilities is no different—it is simply dependent on knowing which questions to ask to facilitate equal access. Through my work with d/Deaf, hard of hearing, and DeafBlind students, I have found success and comfort in starting with the question "What can I do to meet your communication accessibility needs today?"—a question that extends well beyond just the needs of d/Deaf and hard of hearing writers. This sets the stage for many of the strategies and techniques discussed earlier.

Babcock's observations in the University Writing Center environment parallel decades of conversations, dilemmas, and debates within the fields of Deaf Education, linguistics, and disability advocacy. When d/Deaf students visit writing centers, hearing tutors may not be properly prepared to consult them. This lack of training can, in effect, violate the students' right to university resources. However, addressing d/Deaf tutees with the same tactics as their hearing counterparts leaves space for cultural insensitivity, prejudice, and, potentially, a failed consultation. By hiring d/Deaf and hard of hearing staff as well as providing basic training on cultural sensitivity and linguistic differences between Deaf and hearing students, university writing centers expand to be more inclusive, beneficial institutions.

Notes

1. d/Deaf refers to people who do identify as culturally Deaf as well as those who only refer to deafness in medical terms.
2. Deaf with a capital 'D' refers to the community of people who identify as culturally Deaf and use a signed language as their preferred mode of communication.

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