

OUTSIDERS WITHIN: COCHLEAR IMPLANTS, ORALISM,
AND THE POLITICS OF LIFE IN BETWEEN THE DEAF AND HEARING WORLDS

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To all Gallaudet students, past and present.

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CHAPTER I

INTRODUCTION: A BIOSOCIAL STUDY OF OUTSIDERS WITHIN

On Saturday, May 3, 2014, the eerie silence of Gallaudet's campus was shattered by the arrival of 48 middle schoolers, their coaches, and families for Gallaudet's National Battle of the Books competition.¹ A cacophony of adolescent voices filled the campus, their spoken words rarely accompanied by signed communication. Cochlear implants adorned the heads of a majority of the 6th, 7th, and 8th grade competitors. In stark contrast to these visitors who were described as the "next generation of Gallaudet," a radically different cohort, ages 20 to 99, returned to campus in July of that same year for the all-alumni reunion to celebrate the university's 150th anniversary. The joyful reunion festivities were nearly silent. Throughout the week of events, I noticed fewer than five cochlear implants, or their scars, on the heads of the 2,000 plus Gallaudet alumni in attendance.

Students enrolled at Gallaudet today live in a historical moment that is shaped by the impending transition from silence to technologically produced sound. These students are coming of age in a Deaf² community that is straddling two conceptions of itself: one a loud, technologically modified deafness, the other an aging socio-linguistic community. Caught in unsettled times, Gallaudet's Deaf community fights to redefine itself relative to the encroaching social changes, while holding onto a nostalgia for the past.

¹ Gallaudet's National Battle of the Books competition is sponsored by Gallaudet to promote literacy and critical thinking among deaf and hard of hearing middle school students. 16 teams from across the country compete in preliminary and playoff rounds before earning an all-expenses paid trip to Gallaudet to play for the title in the annual competition.

² I use the convention of deaf vs. Deaf, explained further on page 12, to make distinctions between those who participate in the socio-linguistic Deaf community, and deaf people who identify only by their auditory sensory loss.

In this dissertation, I engage the case of the Deaf community in response to broader theoretical debates about the relationship between biology and culture in shaping the human experience. Sociologists have often responded with hostility to biological explanations for social behaviors, even stating that sociology and biology are “inevitably opposed” disciplines (Freese, Allen Li, and Wade 2003:233). Despite calls for a “re-alignment of the human sciences with the life sciences,” (Benton 1991:25) and the appeal to “rethink the relationship between sociology and the biological sciences” (Bury 1997:19), sociologists continue to, for the most part, expunge biological explanations from an analysis of social behavior. Sociologists’ aversion to biological reductionism is not unfounded; as such explanations have led to horrific consequences in the past (e.g., slavery and genocide), which reified prejudice in the name of science. While I do not seek to revive biological determinism, I do argue that an undiscerning expulsion of biological factors as components to explain human behavior and social life in favor a type of social constructionist viewpoint that would expunge biology from consideration is an equally flawed approach to generating social theory. People use both socio-cultural and embodied materials to construct social difference, and as such, a uniquely biosocial theoretical framework for understanding social difference is mandated. In this dissertation I use a biosocial theoretical framework, which is positioned between biological determinism and social constructionist theories that ignore the role of embodiment.

Technological innovation further complicates the relationship between biology and culture. New technologies and shifting cultural attitudes towards acceptance of body modification have deconstructed the boundaries between natural and unnatural bodies. As such, the new frontier of a high-tech, malleable body is a “site of cultural and political struggle” (Pitts 2003:184). In the

face of technological innovation, communities and individuals alike strain to make biosocial classifications that contribute to determining social difference.

Haraway (1985) uses the metaphor of a cyborg to critique the distinctions made between biology and culture. She employs a utopian vision of cyborgs to deconstruct the boundaries between the natural and artificial. In extending Haraway's deconstructed vision of cyborg identity, I argue that biology and culture are intertwined in the production of symbolic boundaries between social groups. In the current age of technological intervention, technology is one added dimension to the tangled relationship between biology and culture. In this dissertation, I engage a biosocial vision of the human experience to analyze how individuals and communities adopt and/or expel technology from their understanding of personhood and social identity.

Changes in socio-cultural values and practices also raise biosocial concerns. For example, continually rising rates of interracial marriage and their biracial offspring disrupt clear distinctions between blacks and whites (among other races and ethnicities). Additionally, international migration yields second and third generation immigrants who identify with mixed or ambiguous ties to other nations and cultures. These social distinctions each have biological and social components (i.e. skin tone, DNA, and other biomarkers of race), leaving sociology with the task of integrating cultural and biological markers into our understanding of social difference.

The tensions facing the Deaf community today are an appropriate source for a biosocial analysis of social life. In the current historical moment, the Deaf community is managing the tense relationship between biological modifications and historically grounded socio-linguistic constructions of Deaf identity. As such, I argue that the Deaf community is located in the

crosshairs of progress and diversity. Cochlear implants are now considered the gold standard “cure” for the biological affliction of deafness in America. Yet, ideals of cultural diversity push back against technological progress, as Americans claim to value multiculturalism. For example, according to a recent study of foreign language enrollment by the Modern Language Association (2010), American Sign Language is the fourth most commonly taught foreign language in US colleges and universities behind Spanish, French, and German. Yet, the *New England Journal of Medicine* published an article in three years after the MLA’s study, which positioned the cochlear implant as a panacea for the deaf (O’Donoghue 2013a). As the Deaf community grapples with these tensions, I ask, what is the relationship between biology and culture in constructing a Deaf identity? How are biosocial Deaf identities performed? How are these performances validated or critiqued by peers?

In answering these questions, I contribute to broader sociological understandings of symbolic boundaries. Symbolic boundaries are lines used to define groups relationally according to insiders and outsiders (Epstein 1992:232). They are expressed in both material objects and cognitive schemas. Such distinctions are used to create classifications based on race, class, ethnicity, religion, age, gender, disability, nationality, and education, among countless others.

Thomas Gieryn (1983) introduced the concept of “boundary-work” to explain the relational process by which individuals classify in-groups and out-groups. Immigration scholars have developed a typology of boundary-related changes including: boundary crossing, boundary blurring, and boundary shifting (Alba 1999, 2005; Zolberg and Woon 1999). In the case of boundary crossing, individuals move from one group to another, where they fully assimilate, causing no disruption to the symbolic boundary that separates the two groups. In the case of boundary blurring, the demographics of the community become less distinct as people with

ambiguous qualifications for membership enter the community. Primary examples of research on blurred boundaries come from the work on race and ethnicity, especially in response to the case of mixed race individuals (Bonilla-Silva and Embrick 2006; Root 1992; Spickard and Fong 1995). Finally, boundary shifting explains the relocation of a boundary after one-time outsiders have become insiders. The most commonly used reference for boundary shifting comes again from the literature on race, in which race is defined as a social construction that changes over time (Omi and Winant 1994). An often-cited example is the shift in the boundary of “whiteness” to include Irish Catholics, Italians, and European Jews, who, upon their early migration to the United States, were racialized “others,” outside the context of the dominant Western-European Anglo Americans. But, over time, these groups found inclusion into the racial category “white” as they performed acts of symbolic violence to unify themselves with other whites and distinguish a black “other.”

Social boundaries are created based on a relational understanding of “us versus them” (Barth 1969; Tilly 1997). However, in the case of the blurred boundaries, the distinction between insider and outsider is unclear. So, how do communities with blurred boundaries do boundary-work to negotiate space for community members who fit some, but not all, of the necessary criteria for membership in their communities? I contribute to the literature on boundary making through an analysis of the process by which blurred boundaries begin to shift.

Evolving demographics of the Deaf community in the form of people with cochlear implants and oral deaf speakers create what I call, “Outsiders Within,” who challenge binary distinctions between Deaf and Hearing. In engaging the case of Outsiders Within in the Deaf community, I ask, how do communities negotiate their symbolic boundaries in cases wherein insiders cannot be clearly distinguished from outsiders? How do individuals who occupy dual

roles as both insiders and outsiders understand themselves relative to the communities they straddle?

I use the metaphor of bridges and walls to explain how communities that have blurred boundaries adapt to a growing presence of Outsiders Within by erecting bridges and walls. In doing so, I demonstrate how community boundaries adapt by shifting from monolithic categories that differentiate “us versus them,” to complex hierarchies within their borders. Symbolic boundaries are used to define “authentic” members of the Deaf world against members of the Hearing world, while simultaneously expanding the borders of the community to include members who do not fit this ideal type.

In this introduction, I continue with a review of the literature on symbolic boundaries to further situate my case within this theoretical frame. Next, I review relevant theories and literature from scholarship on cultural conflict. I then discuss the debates between medical and social approaches to the study of deafness by reviewing dominant theories of disability and establishing precedence for the biosocial theory of disability, which I use to support my analysis of the Deaf community. I follow this section with a brief review of Deaf educational and cultural history, including a discussion of the history of American Sign Language and Gallaudet University. Next, I provide a detailed account of my research questions and methodologies. I then introduce myself as an ethnographer, and my positionality as a Hearing researcher with familial connections to the Deaf community. I conclude by providing an overview of the subsequent chapters.

Theories of Boundary Work and the Outsider Within

Symbolic Boundaries

Inspired by work on symbolic systems and indirect forms of power as articulated in the works of Mary Douglas, Pierre Bourdieu, Erving Goffman, and Michèle Lamont, my research speaks to a broad group of cultural sociologists who collectively refer to their work as “the study of symbolic boundaries” (see The American Sociological Association’s Symbolic Boundaries Research Network). As evidenced above, other fields including cognition, gender, immigration, knowledge and science, race and ethnicity, and social movements, among others, have gained analytical prominence in the study of boundaries (Lamont, Pendergrass, and Pachucki Forthcoming). Even so, Lamont and Molnár (2002) argue that despite the pervasiveness of the study of symbolic boundaries across specialties and fields of social science, “citation patterns suggest that researchers who draw upon the concept of boundaries are largely unaware of the use to which it is put beyond their own specialties and across the social sciences” (2002:168). In addressing this critique, I draw upon theories from a variety of subfields throughout my dissertation to connect the vast scholarship on the sociology of symbolic boundaries.

Scholarship on symbolic boundaries can be traced to Durkheim’s ([1912]1995) work on the sacred and profane in his seminal work, *Elementary Forms of Religious Life*, wherein he defines the two realms relationally and as mutually exclusive. That is, the sacred is understood and protected in contrast to the profane. This system of classification orders social life by creating shared understandings of, and adherence to, the distinctions between sacred and profane. Mary Douglas’ work is inspired by a Durkheimian vision of symbolic boundaries. Her work investigates how artifacts of daily life (e.g., food, dirt, etc.) are used as symbols to construct a social order. Richard Pitt (2012:226) extends Douglas’ work on symbolic pollution to the case

of *Outsiders Within* by introducing his concept of “category polluters”—those “people who can stake a strong claim to the category in *some* conventional ways, but “dirty it up” by not being able to full embrace *all* of its conventions.”

My own research heritage is aligned with a second vein of sociological scholarship on symbolic boundaries that can be traced to the work of Max Weber. Weber was interested in the way in which symbolic boundaries create social boundaries and hierarchies within communities. In *Economy and Society*, Weber ([1922] 2013) develops a critical analysis of symbolic boundaries as forces to create social inequality in the form of status boundaries. Much like distinctions between sacred and profane, status boundaries are created as groups define their superiority in relation to other groups. Thus, symbolic boundaries also become social boundaries. Specific qualifications and rules for gaining entry to higher status groups, and rules of interacting with lower status groups, are generated in this system. Neo-Weberian work on symbolic boundaries continues to address how inequality is produced through symbolic boundaries. Foundational examples of such explorations of boundaries are Bourdieu’s (1987) and Peterson’s (1996) work on distinction and taste. Gieryn’s (1983) study of boundary-work in the scientific professions is an extension of neo-Weberian theory of symbolic boundaries. My work follows this tradition of the study of symbolic boundaries in that I am interested in explaining status hierarchies within a community whose boundaries are blurred by the growing presence of *Outsiders Within*.

Of primary importance for my analysis of symbolic boundaries is the recognition that social classification is imperfect. Classification depends greatly on social context, as status hierarchies change relative to the settings in which they are analyzed. Additionally, classification is imperfect because a residual always remains. “There is no classification without a remainder...

there is no distinction without a third possibility that sits astride the boundary” (Giesen 2012:802). That is, tightly bound social categories cannot encompass all individuals; a residual, undefined category always remains. A focus on the residuals of this classification, those who I call “Outsiders Within,” aid scholastic understandings of the social implications and meanings ascribed to symbolic boundaries. In the case of the Deaf community, what was once a small residual is rapidly becoming the majority of the population. This rapid shift from Outsider Within to the numeric majority makes the Deaf community an ideal case to study the process of the transition from boundary blurring to boundary shifts.

Outsiders Within

The concept of “Outsiders Within” has a long history in academia, traceable to Du Bois’ (1903) “double consciousness,” which describes the psychological battle African Americans wage in reconciling the two cultures of which they are a part—their American home and their African roots. The term, “Outsider Within,” is most predominately attributed to Patricia Hill-Collins (1986), who describes black women as having historically been granted access to white society in ways not permitted to their male peers, and even to whites themselves. Black women’s position as members of white households, often as “mammies” raising white children, and the view it grants them, is what makes black women Outsiders Within white society.

Recent research has taken a social psychological approach to the analysis of Outsiders Within, or “category polluters,” who are positioned as insiders in one category, but who also embody characteristics that are antithetical to the category’s conventions (Pitt 2012). Hill-Collins’ work on black women in white homes exemplifies the notion of Outsiders Within in the context of race. Transracial adoption is another arena in which the term “Outsider Within” is often raised, as non-US born children come home to white families, raised in a white American

culture without “looking” white (Tuan and Shiao 2011). Pitt’s (2010) work on gay Christians exemplifies the notion of the Outsider Within from the perspective of religion, demonstrating the ways in which potentially opposed identities as both gay and Christian are negotiated by the men who hold these dual identities. Each of these scholars, and those who follow similar lines of research within their fields, are fundamentally interested in the issue of symbolic boundaries. That is, scholarship on Outsiders Within engages with the classification systems set in place through the act of boundary-work to distinguish the pure from the impure by drawing clear distinctions between races, sexes, ethnicities, and nationalities, among other distinctions. In so doing, these scholars investigate what it means to be an authentic member of an in-group.

Scholars have also done much to advance our understandings of the ways in which individuals who are deemed “inauthentic” members of groups, because of the position as Outsiders Within, negotiate conflicting identities. Yet the focus of these foundational studies of Outsiders Within has addressed the status of the Outsider Within relative to the dominant, or hegemonic group, namely, straight Christians, US born children, and whites. Baez (2003) critiques this hegemonic perspective in his essay in which he asserts that claiming a status as “outsider” consolidates the ideal of the “insider,” in his case, persons of color as outsiders relative to white insiders. That is, accepting the label of an “outsider” whether she is involved in the workings of the dominant “insider” as “within” or not reinforces the power of the hegemonic group. Baez (2003) furthers this critique by arguing that as people move from “outside” minority positions into fields dominated by the “inside” majority, their presence fundamentally changes the space they have moved into, and also changes their own conceptions of self. That is, both the “insiders” and the Outsiders Within are changed by this disruption of the social order, and must negotiate space within the boundaries of their community.

But how is the insider-outsider dichotomy, which has been disrupted by Outsiders Within, managed in the context of the “other” community? Instead of addressing the Deaf Outsider Within from the perspective of the Hearing majority—as previously established by Paul Higgins (1980) in his book *“Outsiders in a Hearing World: A Sociology of Deafness,”* in this dissertation, I examine the case of Outsiders Within the Deaf community from the perspective of the Deaf world. I investigate the ways in which movement between inside and outside fundamentally change the community’s conceptions of itself and the self-identification of those individuals who find themselves in between.

I extend the growing literature on symbolic boundaries by addressing the ways in which the communities “polluted” by the presence of Outsiders Within respond by redefining their boundaries. I analyze the ways in which Outsiders Within the boundaries of the Deaf community contribute to the redefinition of Deafness, as well as address the ways in which these Outsiders Within manage their own identity conflicts as people caught in between the Deaf and Hearing worlds.

Cultural Conflict Over Symbolic Boundaries

The symbolic boundary of a community is a site of contention as groups inside and outside the community struggle to reach an agreement on the definition of the group’s status and identity through debating who and what should or should not be included in the community (Lamont and Molnár 2002). Accordingly, the boundary “encapsulates the identity of the community and, like the identity of an individual, is called into being by the exigencies of social interaction” (Cohen 1985:12).

Symbolic boundaries become contested in periods of unsettled times—moments when there is a fight over the ideologies that structure society (Swidler 1986). Scholars have found that for

communities, periods of unsettlement occur when new demographic groups, ideologies, or technologies are introduced that threaten the community's existing way of life (Tepper 2011). Conflicts over the group boundaries in the Deaf community are exhibited in the changing conception of deafness over time, from "Deaf and Dumb" in the medieval English era, to "Deaf mute" which was popularized in the 18th and 19th centuries. Conceptions of deafness continue to change as the community responds to new technologies and the continuing battle over language and communication. Many labels popular today, which I investigate in this study, include: Deaf, deaf, hearing impaired, hard of hearing, and latened³ deaf, among others.

When the symbolic boundaries of a community have become contested, individual members fight over symbols (e.g., art, technology, language, etc.) to try to reestablish their sense of security within the bounds of the social group (Tepper 2011). In the chapters that follow, I examine specific symbols including technology, language, and voice that are sites of contention in the struggle to redefine the boundaries of the contemporary Deaf community.

In traditional analyses of conflict, communities respond by building symbolic walls to unify those within their boundaries and separate members from external threats to their way of life, in a process known as social closure (Anderson 2006; Cohen 1985; Gusfield 1963; Tepper 2011). Yet in the case of *Outsiders Within*, communities cannot unilaterally exclude all who possess characteristics of an outsider without self-destructing. That is, conflict cannot be exclusively focused on the unification of the insiders and the expulsion of the "other," because the *Outsiders Within* these communities are simultaneously wanted insiders and unwanted outsiders who threaten the established boundaries of the community. The study of *Outsiders Within* expands existing theories of cultural conflict because communities that face growing numbers of

³ The term "latened deaf" is used to refer to adults who lose their hearing later in life, most commonly the elderly. Latened deaf adults rarely adopt sign language as a primary mode of communication

Outsiders Within try to preserve themselves by finding ways to simultaneously construct walls and erect symbolic bridges to grant Outsiders Within access to their community. In Gallaudet's Deaf community, Outsiders Within are bridged into the community through university-sponsored programs including the prospective student outreach program, Battle of the Books. Once inside the community, Outsiders Within encounter symbolic walls including language barriers and bullying, which exclude them from elite social status, effectively forcing them to marginal positions within the community. This simultaneous bridging and exclusion allows the community to collectively form cohesion around the preferred definition of Deafness, while also expanding opportunities for divergent conceptions of Deafness to exist at the margins. However, because boundaries are not static, continuing shifts in community demographics force the boundary to eventually shift as the community learns to adapt to ever-growing rises in rates of Outsiders Within in their community.

Deafness: Diagnosis or Culture?

On April 14, 2014, Gallaudet's student newspaper, *The Buff and Blue*, published an editorial written by their editor-in-chief, 21-year-old Gallaudet senior, Corinna Hill, who came to Gallaudet from a residential school for the deaf.⁴ The piece opened with three direct sentences, "I'm angry that I'm deaf. There. I said it." Hill goes on to complicate her argument by explaining the conflict she faces between loving her community built around disability and hating the isolation that her disability creates. I quote passages of her article at length here:

⁴ Residential schools for the Deaf were historically common pathways through which Deaf people acquired intimate knowledge of and connection to American Sign Language, Deaf culture, and the Deaf community. Today, residential schools for the Deaf are closing as more students are educated in mainstream schools—a result of special education laws connected to the Americans with Disabilities act of 1990. The consequence of this mainstreaming is that many Deaf students no longer benefit from the Deaf cultural settings of K-12 residential deaf education. Corinna Hill's background at a residential school for the deaf is important to note because with such an educational upbringing it would be expected that she have a strong connection to and pride for Deaf culture.

I'm awed by our language and proud of our culture. Our community is my home. But sometimes I get those bursts of anger about my disability... I'm just so sick of having people stare at me when I sign... I hate the feeling of being lost or socially incompetent in situations involving hearing members... I am fed up with the constant paternalism deaf people face... I love our community, but I believe it's time we stop sugarcoating things. Why is being angry a bad thing? I feel like we are expected to always be so happy that we're deaf and shout our joy from the rooftops. No. That's not what we are feeling...I'm angry that I'm limited. I'm not angry that I can't hear; I'm angry that I have to face obstacles everyday. I'm angry that as soon as I enter the hearing world, I am reminded that I am not 'whole' in their eyes. I am angry that I am seen as less. I am angry that society isolates us... I am angry that I have a disability. I would never trade my experience with our community, but I am angry (Hill 2014).

In this piece, Hill articulates the complex relationship between deafness and disability, between culture and diagnosis, and between medical and social models of disability. Hill critiques the medicalization of deafness by frequently expressing her love for the language and culture of a community to which she belongs. For her, deafness is not *just* a medical diagnosis; it is also a linguistic community with a unique culture. However, she repeatedly identifies as "disabled," stating that she "sometimes...get those bursts of anger about [her] disability." Hill's use of the label, "disability," allows her to highlight the social implications of her hearing impairment. She concludes her article by expressing anger over the ways in which sensory impairment has created obstacles for deaf people's everyday life in the Hearing world, from education, to employment, to general respect.

Hill's piece must be taken as an understanding of deafness somewhere between a strictly medicalized approach to deafness and an affirmation of deafness as a social construct. For Hill, deafness is both biomedical and social. Accordingly, I classify it as a "biosocial" articulation of the Deaf experience. In the section that follows I trace the history of the study of deafness from the fall of the biomedical model of disability to the rise of the biosocial, or what I call the Bio-Lingual model, evident in Hill's article.

The medicalized view of deafness, which emphasized the treatment and correction of deafness as a characteristic of an incomplete human (Davis 1995), began to fall out of favor in the mid 1960s alongside the Civil Rights and other identity-politics-based social movements. In place of the biomedical model of deafness, and of disability more broadly, came the social model of disability. The social model of disability makes a distinction between impairment—“any loss or abnormality of a psychological, or anatomical structure or function” (Titchkosky 2003:15)—and disability—“any restriction or inability to perform an activity in the manner or within the range considered normal for a human being” (Titchkosky 2003:15). In this sense, impairment is strictly physical (or mental), whereas disability is understood purely as a socially created problem. The model argues that people are disabled by society. This leads to the notion that everyone is disabled in some way (McRuer 2006a).

Within the field of Deaf Studies the distinction between medical (impairment) and social (disability) views of deafness is articulated in the convention of “deaf” vs. “Deaf,” wherein “deaf” refers to hearing impairment and “Deaf” refers to the socio-cultural affiliation with the Deaf community. James Woodward (1972) developed this linguistic convention as a tool to make distinctions between audiologically deaf people and those who identified with the culture and language of the Deaf community. Many Deaf individuals, both academics and lay people, have adopted this language to distinguish themselves from their deaf peers.⁵

Disability scholars have critiqued the social model of disability, arguing that it makes unnecessarily restrictive distinctions between medicalized impairment and the socially

⁵ In ASL, because it is not a written language, the distinction is made through repeated signs: “DEAF DEAF,” exaggerated facial expressions when signing the word “DEAF,”⁵ or through a compound sign—“DEAF PROUD.” In this dissertation I use this convention of capitalizing the word “Deaf” when I refer to only those individuals who self-identify as members of the Deaf cultural community. In cases where cultural membership cannot be claimed I use “deaf.”

contextualized disability (Kafer 2013; Shakespeare and Watson 2001). As such, insurances on social models of disability marginalize people who seek medical recognition, treatment, or even cures for their impairments. Scholars from across the academy have developed new theoretical models of disability including *Crip Theory* (McRuer 2006b) and *Queer Crip Theory* (Kafer 2013) to bridge the gap between impairment and disability. Medical sociologists have also attempted to bridge these gaps through investigations of the “lived experience of disability” (Toombs 1995). I classify each of these theoretical trajectories within the encompassing, but less often used term, “the biosocial model of disability.” Best articulated by the US Department of Education’s National Institute on Disability and Rehabilitation Research, the biosocial model of disability:

“maintains that disability is a product of an interaction between characteristics of an individual (e.g., conditions and impairments, functional status, or personal and socioeconomic qualities) and characteristics of the natural, built, cultural, and social environments. The new paradigm... [focuses] on the whole person functioning in his or her environment” (US Department of Education 2006).

While often suggested as a response to the critique of the social model of disability, no sociological studies have applied biosocial theories of disability in empirical studies (for exceptions outside of sociology see Kafer 2013; Omansky 2011). I framed this empirical study of Deafness using the biosocial model of disability, effectively taking up the long sought after call from disability studies scholars.

The tensions remain between medical and social conceptions of Deafness within the field of Deaf Studies. Scholars have yet to push beyond the medical-social binary in explaining the Deaf experience. The social model of Deafness gained influence when, in 1988, Deaf scholars Carol Padden and her husband, Tom Humphries, sent shockwaves through the signing community by coining the phrase “Deaf culture” in their widely read book, *Deaf in America: Voices from a*

Culture (1988). Scholars who adopted this social model of disability claimed that a cultural Deaf identity was closely related to racial, ethnic, gender, and sexual minority groups (e.g., black people, women, and gays) (Bauman 2005, 2008; Bauman and Murray 2009; Foster 2001; Lane 1999, 2005; Padden and Humphries 1988; Senghas and Monaghan 2002; Wrigley 1996). Harlan Lane (2005) provided a comprehensive overview of Deafness to argue for the study of Deafness as a socio-linguistic ethnic minority group. Lane compared Deafness to other ethnic groups by highlighting issues of language, social networks, identity, familial relationships, pride, and desire for hearing impairment to prove that Deafness is an ethnicity.

While such positioning of a social, or ethnic model of Deafness in direct contrast to a medicalized vision of deafness was necessary, and had great impacts on the Deaf community and the affirmation of Deaf pride in the early 1990s and 2000s, today, expunging the role of biology in theorizing the Deaf experience is credulous. Research on race and ethnicity, which Lane used to establish a purely ethnic model of Deafness, has itself begun to move towards a biosocial understanding of race and ethnicity (see for example, Shiao et al. 2012). I make parallel theoretical shifts in this dissertation to examine the biosocial Deaf experience as a critique of the dominance of the social, or ethnic model of Deafness articulated by Lane and his followers.

The value of this biosocial approach for the study of Deafness allows for research on bodies to highlight gaps in our understandings about social life more generally. In adopting a biosocial model of Deafness, I assert that biology and culture are inextricably intertwined; the deaf body (or any body for that matter), its interactions with others, and its relationship to the social world cannot be explained or analyzed if the biological is separated from the social. Neither the biological, social, nor symbolic understandings of deafness can or should be prioritized in the understanding the Deaf experience. I expand social theories on the relationship between biology

and culture in an analysis of the complex relationships between language and embodiment in defining the structure of the Deaf community and the nature of identities within it. My work is generalizable to other fields of social inquiry engaged in the study of the relationship between bodies and culture including work in race and ethnicity, immigration, sex and gender, and sexuality, among others.

Deaf Educational and Cultural History: A Primer

Historical records dating back to the 1700s document the ongoing battle in deaf education between oralism and manualism. Oralists support the education of deaf people using speech therapy and lip-reading, effectively training them to fully engage in spoken communication without the aid of visual language. Manualists, on the other hand, advocate for the use of various forms of manual—signed—communication, including American Sign Language (ASL) for the education and communication of and between deaf people.

The story of American Sign Language's origins begins in 1815, when Mason Fitch Cogswell, the father of a deaf child living in Connecticut, commissioned his neighbor, Thomas Gallaudet, to observe the Braidwood School for the Deaf in Edinburg, Scotland to learn their techniques so that he could bring them back and educate Cogswell's young daughter, Alice. The Braidwood School was a renowned oral school for the deaf. Its oralist methods were widely accepted as the dominant model for deaf education in Europe. Deaf cultural folklore contends that after less than a year at the Braidwood School, Gallaudet became homesick. Shortly thereafter, he met Laurent Clerc, a deaf man who communicated in French Sign Language. Clerc became Gallaudet's teacher and mentor while in Europe. Gallaudet convinced Clerc to return to the US with him to establish the first American school for the deaf. In 1817, the American Asylum for the Deaf and Dumb opened in Hartford, Connecticut under Gallaudet's

administration. Clerc was the first teacher and Alice Cogswell was the first student. Clerc and Gallaudet developed American Sign Language through a combination of French Sign Language and the local “home signs” students at the institution had developed to communicate with their own families. Residential schools for the deaf spread rapidly throughout the United States; between 1817 and 1912, 30 schools opened all over the country, where the newly developed American Sign Language was used as the primary method of communication.

A defining moment in the oralism vs. manualism debate came in the spring of 1880, when an international group of primarily hearing educators of the deaf met in Milan, Italy. During what has become known as the “Milan Congress,” 158 of the 164 educators in attendance voted to ratify a resolution to endorse an exclusively oralist approach to international deaf education. Five of the six dissenting votes came from the Americans in attendance (including James Denison, the only deaf educator at the conference). Back in the United States, advocates for manual communication formed the activist group, The National Association of the Deaf (NAD) in resistance to the Milan Congress’ manifesto. The NAD was a critical force in challenging the rise of oralism and its main US-based advocate, Alexander Graham Bell. Despite the efforts of the NAD, by 1920, 80% of deaf education in the US had become oral. However, students still used manual sign outside of the classroom, for which they were often severely punished.

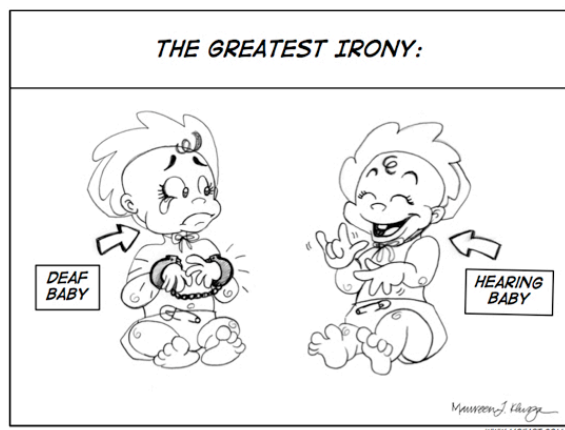
Coinciding with the Civil Rights Movement and other identity-based movements of the 1960s, the manual approach made resurgence in American Deaf education. The field of structural linguistics emerged as an academic discipline at roughly the same point in the early 1960s (Newmeyer 1988). Shortly thereafter, William C. Stokoe published the first dictionary of American Sign Language, making the claim that ASL was a distinct language separate from a manual version of the English Language (Stokoe, Casterline, and Croneberg 1965). At first,

Deaf individuals resisted Stokoe’s claim in fear of furthering their own oppression. However, as time passed, Deaf individuals began to embrace the distinctness of their language, and began to argue, along with Padden and Humphries (1988), that their linguistic diversity is what classified them as members of a unique culture. Manual language has been claimed to be the basis of the Deaf community ever since:

An environment created solely by a sensory deprivation does not make culture... What does form a culture for Deaf people is the fact that the adaptation to a visual world has, by human necessity, included a visual language. In the United States this is American Sign Language (Garey and Hott 2007).

Oralism has experienced resurgence in deaf education today. This shift corresponds with cochlear implant surgeons’ active discouragement of parents from using sign language with their deaf children in fear that children will use sign language as a crutch, and never achieve full facility with spoken language (O’Donoghue 2013a). This comes at a time in which parents of hearing babies are encouraged to use “baby signs” to help their children develop communication earlier than the child is able to develop spoken language skills. The irony of the contrast between signing hearing babies and deaf babies who are denied the privilege of manual communication is regularly used in protests against oralism and is depicted in artwork such as the cartoon graphic in figure 1 below.

Figure 1: Oralism vs. Baby Signs



To this day, debates over oralism and manualism frame the educational and social lives of deaf people. Scholars of Deafness explore educational, health, and social outcomes of oral vs. manual deaf youth (Li, Bain, and Steinberg 2003). Research on the diversity within the Deaf community has extended to explorations of ethnic identity and the study of a uniquely black sign language (McCaskill et al. 2011). Personal memoirs and autobiographies have begun to explore the unique experiences of latended deaf (Hammond 2012), implanted deaf (Chorost 2006), hard of hearing (Harvey 1998), and Children of Deaf adults (Preston 1998), among many others. I extend this growing literature in my study of the contestation, and at times lack thereof, of the redefinition of the boundaries of Gallaudet's Deaf community that comes as a result of diversifying community demographics.

Research Questions and Methods

I extend scholarly understandings of the biosocial sociology, symbolic boundaries, disability, medicine, technology, and Deafness by asking, how is Deafness understood today, amidst the rapidly changing demographics—both technological and linguistic—of the community? How are the boundaries of the Deaf community redefined by the presence of Outsiders Within—those who, as a result of new technological interventions that change the human body and corresponding oralist ideologies, fall in the residual categories of the Deaf and Hearing dichotomy? How are malleable bodies and changing cultural values negotiated in response to the presence of Outsiders Within? How do bodies and culture intertwine to produce hierarchies in the Deaf community? How does occupying a space in the residual category between Deaf and Hearing, as a result of technological modification or linguistic difference, affect one's own identity as members of the communities they straddle?

Gallaudet University: The Mecca of the Deaf World

To answer these questions, I conducted 15 months of ethnographic research, including participant observation and in-depth interviews, with a diverse group of incoming first-year students at Gallaudet University. I also attended the all-alumni reunion celebrating the university's 150th anniversary in the summer of 2014. During the reunion, I observed reunion festivities including lectures and recreational events, and participated in the Deaf Stories Corpus, a team of researchers from the Deaf Studies and ASL department at Gallaudet who collectively interviewed 120 alumni about their memories of Gallaudet.

Set atop a graded hill in the Northeast quadrant of Washington, D.C., Gallaudet University is the cultural and linguistic “Mecca” of the Deaf community. The uniquely cherished Deaf space is an ideal site for the investigation of symbolic boundaries, as those that surround the university have heightened political meaning for the international Deaf community.

Disability takes a new meaning within the tall iron gates that divide the campus from the gentrifying, high-crime, surrounding neighborhood. Once one passes the guard tower, she enters a social world reversed, where those who can hear and speak are disabled amidst a quiet, signing campus community. Deaf and hard of hearing students, faculty, and staff who struggle to communicate in the Hearing world are welcomed to a space with no barriers, a community designed specifically for their unique communication and learning needs. Because of the open access provided at the university, it becomes “home” to many members of the international Deaf community (Schein 1989). Bonds are established between Deaf people around the world through the cultural and linguistic similarities. The discourse of “coming home” is so prevalent in the community that after some time on campus, I even found myself welcoming home visitors who stopped me for directions.

Gallaudet was established just prior to the Civil War when, in 1856, Amos Kendall, a postmaster general during two presidential terms, donated two acres of his estate to build a small residential school for twelve deaf and six blind students. A year later, Kendall petitioned Congress to incorporate The Columbia Institution for the Instruction of the Deaf and Dumb and Blind. Edward Miner Gallaudet, son of Thomas Gallaudet, was named superintendent of the newly incorporated manual school. Seven years later, Congress authorized the school to confer college degrees; and in 1864, President Abraham Lincoln signed the bill into law establishing the college portion of the institution.

Thirty years after the opening of the National Deaf Mute College, there was a push to rename the school, “Clerc College” after Laurent Clerc, the deaf man whom Thomas Gallaudet had enlisted to bring sign language to the United States. However, by this time in the late 1800s, oralist ideologies were dominant in models of deaf education. The oralists led the opposition to renaming the National Deaf Mute College after Clerc, a manual signer. As a compromise, the college was renamed Gallaudet College, after Thomas Gallaudet, in 1894. The name changed once again in 1986 to its current name, Gallaudet University (Gallaudet University 2014c).

Today, the university continues to receive a majority of its funding from the federal government. Acts passed by Congress determine the funding for the bulk of the university’s operating costs while additional revenues are acquired from tuition and private donors. Members of Congress still lobby on behalf of the university as national advocates of the Deaf community. Because of this unique relationship with the US government, Gallaudet is a unique marker of national Deaf education standards and policy. The university remains the only liberal arts college in the world designed and operated specifically for the needs of deaf and hard of hearing

post-secondary education, and as such, is a beacon for K-12 and post-secondary deaf education worldwide.

Gallaudet: A Research Site

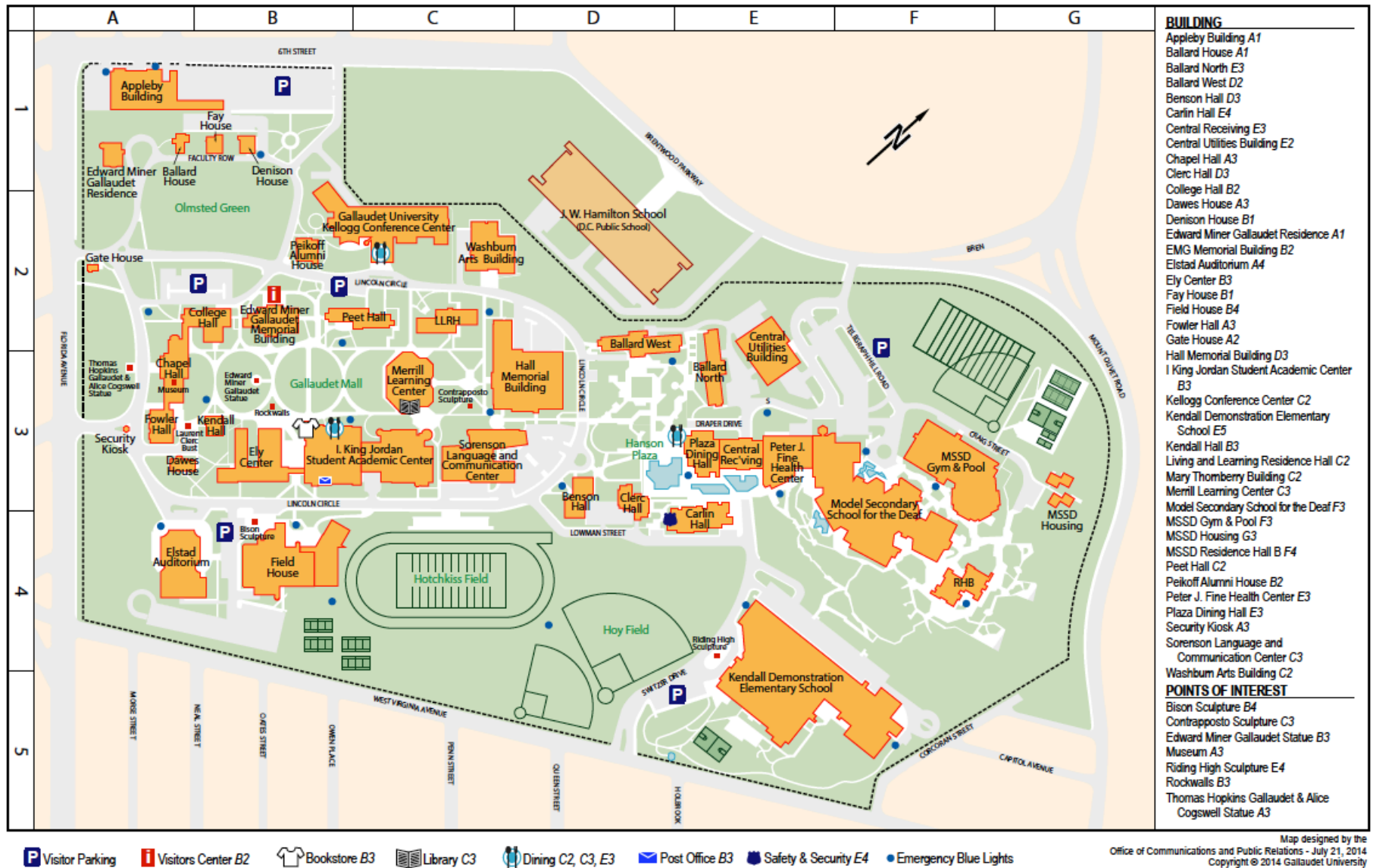
I strategically selected Gallaudet University as my research site to take advantage of the natural experiment of diverse members of the Deaf community coming together, often for the first time, at the Deaf Mecca. The uniqueness of this site allows me to treat the interactions that take place in and around the university campus as an extreme model, a place at which the boundaries of the Deaf community are most valued, and therefore contested, because the community they protect is so cherished. I limit my analysis of “the Deaf community” to the context of Gallaudet University. I do so because Gallaudet is a unique homogenous population in which Deaf people are the majority. This conservative limitation of my study to the Deaf community at Gallaudet leaves open the potential for future research to test the generalizability of my findings in smaller Deaf communities embedded in the context of the Hearing world. Such communities can be found in gatherings such as “silent dinners,” “Deaf night out,” and at non-profit organizations serving the Deaf and Hard of Hearing communities.

In the 2013-2014 academic year, 1,077 undergraduate, 484 graduate, and 63 English Language Institute⁶ students were enrolled at Gallaudet. Up to 5% of student enrollment in the undergraduate academic program is open to hearing students (Gallaudet University 2014a). In the Fall of 2013, seven of the 302 first year students were hearing, while the remaining 295 identified as deaf or hard of hearing (Gallaudet University 2014d).⁷ The campus still houses

⁶ The English Language Institute (ELI) is an intensive English as a second language program for American and international deaf and hard of hearing students. Students enroll at ELI to gain proficiency in English in order to qualify for admission to Gallaudet or another university, or to increase employment opportunities.

⁷ These numbers do not include visiting students.

Figure 2: Map of Gallaudet University



primary and secondary schools, extending the tradition established by its founders. The Laurent Clerc National Deaf Education Center, which includes the Model Secondary School for the Deaf—a residential middle and high school—and Kendall Demonstration Elementary School, is located on the Eastern portion of Gallaudet’s campus (see figure 2). Together, Gallaudet and The Clerc Center employ 895 people, 462 of who are deaf or hard of hearing (Gallaudet University 2014a).

Sampling

In accordance with the biosocial theoretical framework, I constructed a sampling frame that would allow me to analyze variation in the conceptions of the boundaries of the Deaf community along both cultural and biological lens of difference. To do so, I interviewed students from a broad spectrum of linguistic, cultural, and auditory backgrounds to understand the complexities of the Deaf experience and the boundaries of the community. Gallaudet sponsors a summer pre-orientation program that acted as a natural experiment for the collection of diversity of d/Deaf, Hard of Hearing, and Hearing identities. I recruited participants for interviews using email recruitment and snowball sampling with the support of the JumpStart program director, Darian Burwell.

The JumpStart program is a five-week summer orientation program at Gallaudet for first-year and transfer students to help develop their ASL and academic skills, as well as establish social networks in the campus Deaf community before the fall semester begins. JumpStart provides two tracks for incoming students: Academic Success and American Sign Language (formally called the New Signers Program⁸). Between the two tracks, 90 students were enrolled in the summer 2013 program. There was a \$325 fee for participating in either track that covered

⁸ To avoid confusion I refer to this program and its participants as “New Signers” rather than American Sign Language program.

room and board for the summer and orientation materials, excluding transportation for recreation and fieldtrips (Gallaudet University 2013b).

The New Signers Program is a language immersion program for deaf and hard of hearing students who are not proficient in American Sign Language at the time of their enrollment at Gallaudet. Most of the 40 students enrolled in the program in 2013 were raised and educated using oralist methods including lip-reading and intensive speech therapy instead of learning a manual sign language. Most have relied on assistive devices such as hearing aids, FM systems⁹, and cochlear implants to help them adapt to the spoken language used in hearing society, though some students did not routinely use assistive devices of any kind. Four international students who were fluent in a different manual sign language enrolled in the New Signers program in 2013.

New Signers learn enough basic language skills during the six-week residential summer immersion program so that they can engage in basic conversation with Gallaudet students, faculty, and staff during the fall and spring semesters. New Signers are provided interpreters for their first year of coursework, though many began dismissing their interpreters during the second half of the fall semester indicating they felt they had achieved proficient fluency in ASL. During the summer JumpStart program students are also introduced to Gallaudet's history and traditions, deaf awareness, and Deaf Culture as a way to socialize them into the Deaf community (Gallaudet University 2013b). This education continues for New Signers' first one to two years at Gallaudet in required ASL and Deaf studies coursework.

⁹ An FM system is a wireless sound transmission system that uses radio technology. In a classroom setting the teacher wears a microphone that wirelessly transmits sound to a programed receiver worn or placed next to the user. Examples and more descriptions can be found here: <http://www.hearinglink.org/fm-systems>

New Signers occupy an interesting theoretical case for my study because they embody a key component of the Deaf experience—namely, hearing loss. New Signers have *one* ascribed characteristic necessary for membership in the Deaf community. However, because these students are not proficient in ASL, which historically has been the primary prerequisite for membership in the community, they have low levels of socialization and integration in the Deaf community and in effect would not be considered Deaf community members in the traditional definition of the community. I therefore define New Signers as one category of Outsiders Within in Gallaudet’s Deaf community.

The Academic Success Program is for d/Deaf and hard of hearing freshmen and transfer students admitted to Gallaudet University whose entry scores in writing, reading, and/or mathematics do not meet basic admissions requirements. Academic Success students are fluent ASL users. Many Academic Success students in the 2013 cohort attended residential schools for the deaf or special programs at their mainstream schools. Some have d/Deaf parents, and most were well connected to the Deaf community through their linguistic, social, and cultural ties.

During the summer Academic Success program students are tutored in college writing, reading, mathematics, and study skills to prepare them for college level work at Gallaudet. Academic Success students also receive one-on-one academic advising and counseling, including an assessment their academic strengths and weaknesses. In addition, students meet with faculty and staff during their orientation programs to learn about academic support resources available to them at Gallaudet (Gallaudet University 2013b).

The Academic Success JumpStart program students occupy an interesting theoretical case for my study because many, but not all, identified as culturally Deaf. All Academic Success students had working proficiency to native fluency in ASL. Students in the Academic Success

program have bodily (hearing loss) and social (cultural and linguistic) capital as well as high levels of integration into the Deaf community due to their language proficiency and cultural and social ties to community norms and values. While some of the Academic Success students represented the “old guard” of the Deaf community, others had ties to the Hearing world including fluency in spoken English as aided by cochlear implants, less hearing loss than their peers, and/or oral training. The division of Academic Success students into insiders and Outsiders Within is a complex process detailed further in Chapter Two.

Outside of the summer JumpStart program, I sampled from two unique programs designed to accommodate hearing undergraduates at Gallaudet. *The Hearing Undergraduate (HUG)* program, established fall 2001, is a program designed for hearing students who wish to enroll as degree-seeking undergraduate students at the university. HUG students must be fluent in ASL to enroll at Gallaudet and must make explicit their intention to build a career working in the Deaf community (e.g., as interpreters). HUG applicants must complete an on-campus interview and an assessment of their signing skills before being officially accepted into the program (Gallaudet University 2013c). HUG students have “normal” levels of hearing. However, they have social capital through their fluency as ASL users and social network connections to the Deaf community through Deaf family members (e.g., Children of Deaf Adults (CODA¹⁰)) or friends.

Gallaudet also has a *Visiting Student Program*, which functions similar to a study abroad program. Hearing, deaf, and hard of hearing students currently enrolled at an accredited college, university, or community college may take courses at Gallaudet and transfer all credits earned back to their home institutions. Visiting students are invited to attend Gallaudet for up to two semesters, though all visiting students I encountered enrolled at Gallaudet for only one

¹⁰ The label CODA is reserved for hearing children of deaf parents. Deaf children who are born to deaf parents are referred to as “Deaf of Deaf.”

semester—the Spring 2014 semester. Visiting students often attend Gallaudet in order to enhance their current understanding of and involvement within the Deaf community. Visiting students are required to have a working knowledge of ASL. They must also submit an application including video essays and two letters of recommendation. Campus interviews are required before final admittance is granted to visiting students.

HUG and hearing visiting students occupy a third theoretically useful group for my comparative study, as hearing students have linguistic capacities, but do not have an audiological loss that validates their membership in the Deaf community, and as such are Outsiders Within.

In-Depth Interviews

I conducted a total of 49 semi-structured in-depth interviews with 29 different d/Deaf and hard of hearing, and hearing students at Gallaudet University. Thirteen students were New Signers, nine were part of the Academic Success Program, three were HUG and two were Hearing Special Students.¹¹ Demographics for each of the 29 student interviewees are outlined in Table 1 below. Pseudonyms are used in the reporting of student participants to protect their confidentiality. In sum, eighteen students (62.1%) identified as white, four (13.8%) Hispanic/Latina, one (3.4%) African American/black, four (13.8%) Asian, and two (6.9%) students identified as biracial (one as Native American and White, the other White and Asian). Seven students were foreign born, although citizenship status was not assessed. Only three of the seven identified explicitly as international students, all of whom were Asian. These demographics are representative of those in the entire first year cohort. Of the 2013 incoming

¹¹ Two students did not participate in JumpStart programs, but volunteered for the study and were strategically selected to increase the number of cochlear implant users in my sample.

Table 1: Interview Participants

<i>Pseudonym</i>	<i>Age</i>	<i>Gender</i>	<i>Race/ Ethnicity</i>	<i>US Born</i>	<i>Program Affiliation</i>	<i>Age at onset of hearing loss</i>	<i>Assistive Devices</i>	<i>Fall Interview</i>			<i>Spring Interview</i>		
								<i>Interviewer</i>	<i>Language</i>	<i>Identity T1</i>	<i>Interviewer</i>	<i>Language</i>	<i>Identity T2</i>
Owen	25	Male	White	Y	New Signer	10 days	Hearing Aids (2)	Carly	English	HoH	Carly	English	Deaf
Jake	18	Male	White	Y	New Signer	18 months	none	Carly	English	deaf	Carly	English	HoH
Bryant	19	Male	White	Y	New Signer	3 years	Hearing Aids (2)	Carly	English	Hearing Impaired	Carly	English	HoH
Frederik	21	Male	White	N	New Signer	birth	Hearing Aid (1)	Carly	English	Hearing Impaired	Carly	English	HoH
Stacy	18	Female	White	Y	New Signer	birth	Hearing Aid (1)	Carly	English	HoH	Carly	SimCom	HoH
Fiona	18	Female	Hispanic/ Latina	N	New Signer	birth	none	Carly	English	HoH	--	--	--
Amy	19	Female	White	Y	New Signer	birth	none	Carly	English	HoH	Carly	ASL	Deaf
Darrell	24	Male	African American/ black	Y	New Signer	birth	Hearing Aids (2)	Carly	English	HoH	Carly	English	HoH
Molly	19	Female	White	Y	New Signer	birth	none	Carly	English	Hearing Impaired	Carly	English	HoH
Jessica	19	Female	Native American & White	Y	New Signer	5 years	none	Carly	English	HoH	Carly	English	HoH
Lian	18	Female	Asian	N	New Signer	15 years	Hearing Aids (2); Later receives Cochlear Implant (1)	Carly	ASL	Deaf	Carly	ASL	Deaf
Alice	21	Female	Asian	N	New Signer	1 year	Cochlear Implant (1)	Carly	ASL	Deaf	Carly	ASL	Deaf
Chris	25	Male	White	Y	New Signer	22 years	Hearing Aids (2)	Carly	English	Hearing Impaired	Carly	English	HoH
Lydia	19	Female	White	Y	Academic Success	birth	none	Rachel	ASL	deaf	Carly w/ Interpreter	ASL	deaf
Camila	19	Female	Hispanic/ Latina	N	Academic Success	unknown	Hearing Aids (2)	Rachel	ASL	Deaf & HoH	Carly w/ Interpreter	ASL	Deaf

Rebecca	19	Female	White	Y	Academic Success	3 years	Cochlear Implants (2)	Carly	English	Deaf	--	--	--
Jackie	18	Female	White	Y	Academic Success	unknown	Cochlear Implant (1); Hearing Aid (1)	Rachel	ASL	Deaf	--	--	--
Angelica	18	Female	Hispanic/ Latina	Y	Academic Success	2 years	Hearing Aids (2)	Rachel	SimCom	HoH	Carly	SimCom	HoH
David	18	Male	White	Y	Academic Success	2 years	Hearing Aid (1)	Ashleigh	SimCom	HoH	--	--	--
Danielle	18	Female	White	Y	Academic Success	birth	none	--	--	--	Carly	ASL	Deaf
Alexia	18	Female	Hispanic/ Latina	Y	Academic Success	birth	Cochlear Implant (1)	Rachel	ASL & SimCom	Deaf & HoH	Carly	English	Deaf
Bao	18	Male	Asian	N	Academic Success	birth	Hearing Aids (2)	Rachel	ASL	Deaf	Carly w/ Interpreter	ASL	Deaf
Eunji	26	Female	Asian	N	HUG	--	--	--	--	--	Carly	SimCom	Hearing
Dawn	21	Female	White	Y	HUG	--	--	--	--	--	Carly	English	Hearing
Tony	24	Male	White	Y	HUG	--	--	--	--	--	Carly	English	Hearing
Cora	20	Female	White & Asian	Y	Visiting Student	--	--	--	--	--	Carly	ASL	Hearing
Courtney	20	Female	White	Y	Visiting Student	--	--	--	--	--	Carly	English	Hearing
Liz	18	Female	White	Y	Freshman	birth	Cochlear Implant (1)	--	--	--	Carly w/ Interpreter	ASL	Deaf & HoH
Tracy	19	Female	White	Y	Freshman	2 years	Cochlear Implant (1)	--	--	--	Carly w/ Interpreter	English & SimCom	Deaf

freshman class,¹² 53.3% identified as white, 13.9% Hispanic, 13.6% black/African American, 3% identified as Asian, 0.66% American Indian/Alaska Native, 0.33% Native Hawaiian/Pacific Islander, 5.3% Biracial, .33% unknown, and 9.6% unclassified international or resident alien students.

The average age of students I interviewed was 20 years old. This slightly higher-than-average age of first year college students in my sample is reflective of two factors common across the Gallaudet student body: first, a high rate of transfer students in the incoming cohort, and second, the elevated age of the population of students with disabilities at first college attendance (Rivera Drew 2013). Nine of the students I interviewed identified as male, the remaining twenty identified as female.

In person, semi-structured interviews were conducted with student participants, covering a range of topics related to their experiences in the Deaf community and their understandings of deafness. Prior to the start of the first interview, each participant completed a questionnaire on his or her demographics, personal and educational backgrounds, which was used as a tool for customizing the interview guide (see appendices A and B). The twenty-two participants who enrolled in the summer JumpStart program were asked to complete two formal interviews over the course of their first year on campus. The interview guide for the first wave of interviews covered the onset of hearing loss, students' educational history, language acquisition, social and community bonds inside and outside the Deaf community, decisions to attend Gallaudet, expectations for academic and social life at Gallaudet, opinions and experiences with assistive devices including cochlear implants and hearing aids, definitions of Deafness, boundaries of the

¹² It is important to note that because my sample includes first year students at Gallaudet who are transfer students, the freshman class is not the exact population for my sample. Statistics are reported by class standing, and not by year of entry due to the high rate of transfers and issues with retention.

Deaf community, and expectations for life beyond Gallaudet. Each interview was tailored to the respondent's unique audiological and socio-cultural connections to the Deaf community (see appendix C).

All but two of the initial JumpStart student interviews took place during the 6-week summer program.¹³ These first interviews lasted between thirty minutes and over four hours. Each interview was digitally documented including both audio and video recordings. Eight of the twenty JumpStart interviews were conducted exclusively in ASL, while the remaining twelve interviews were conducted in either spoken English or a through a combination of the two languages (SimCom¹⁴). According to the language of the interview, a team of certified ASL interpreters and I either transcribed or translated the interviews into written English for analysis.

In addition to my team of interpreters and translators, I trained two graduate research assistants, Rachel and Ashleigh, to conduct seven of the first twenty interviews. Rachel is a self-identified Deaf counseling graduate student in her early twenties who has a cochlear implant, though the device is rarely visible. Ashleigh is a self-identified Hearing counseling graduate student who is fluent in ASL. Both assistants worked with the JumpStart students weekly in a "personal discovery" program designed to help students adjust emotionally to college life, thereby making them familiar and emotionally safe interviewers for students in my study. Participants chose the language they preferred to use during their interviews during the scheduling of the interview. In the fall interviews, to complete these initial interviews as quickly as possible during the tightly scheduled program, I relied on Rachel and Ashleigh to conduct all but one ASL interview. I personally conducted the final ASL interview with Alice, who at the time

¹³ The remaining two interviews were conducted shortly after the start of the fall semester in September and October 2013.

¹⁴ SimCom refers to simultaneous communication, or the use of both spoken and signed language at the same time. SimCom is discussed in more detail in Chapter Two.

was a new signer from China and was fluent in Chinese sign, but still was a beginner with ASL. Upon her request I personally conducted her interview.

Seventeen of the twenty-two JumpStart participants completed both fall and spring interviews. The second wave of semi-structured follow-up interviews was conducted between March and May 2014. I personally completed each of these interviews, regardless of the language in which they were conducted. In cases where I had not gained in-depth familiarity with the participant, so as to have a record of successful communication, I employed an interpreter to assist in these interviews. The interpreter was directed not to interfere in communication unless her assistance was requested either by myself or by the participant to clarify errors in communication.

Second round interviews lasted between 45 minutes and three hours. The goal of the second round of interviews was to learn how attitudes and understandings of the boundaries of the Deaf community change as participants become further integrated into the Gallaudet community (see appendix D). Taken together, these data provide a multi-faceted longitudinal account of individual and community level responses to the progress and diversity tensions encoded in the debate around cochlear implants, language, and community.

During the spring semester I also conducted interviews with five Hearing students who were enrolled in either the HUG or visiting student programs about their experiences in the Deaf community at Gallaudet, as well as opinions on technology, language, and other topics covered with JumpStart participants (see appendix E). In addition, I interviewed two freshman students with cochlear implants and one additional Academic Success student in the spring semester, who had requested to join the study after having been recruited by another one of my participants.

Participant Observation

I conducted over 1,000 hours of observation at orientation events, classes, public lectures, communal meals, and social activities both on and off campus. I targeted my observations to gain insights to the complexities of the Deaf experience—including biological, social, and moral aspects of Deaf life—and the boundaries of the community. I focused observations on the symbolic role of technologies—especially the cochlear implant and hearing aid, American Sign Language, spoken English, and performances of Deaf cultural heritage—principally retellings of Gallaudet’s History and the history of Deaf culture in the United States.

I used my participant observation to generate insights on social practices, interactional tensions, and contradictions around the understanding of deafness and the Deaf community commonly presented in interviews. For example, while basketball players I interviewed did not originally speak about the discrimination of New Signers on the team, once I inquired about their responses to the fact that the entire starting lineup identified as culturally Deaf, complex team dynamics including a division between those who do speak and those who choose not to use their voices emerged as a fruitful site for understanding the implications of diversity on the basketball team.

Analysis

All interviews were video and audio recorded, transcribed, and when necessary, translated from ASL into written English. In the presentation of interview data I use the following convention to signify the language used: ASL (SMALL CAPS), *spoken English (italics)*, SimCom (underline). Translated interview transcripts and field notes were coded and analyzed using Atlas.Ti drawing on principles of grounded theory (Charmaz 2006). After I conducted each interview, I wrote detailed memos outlining key interview points, emerging themes, and

connections across interviews. My research assistants were trained and completed memos on each interview they conducted. After reviewing each interview tape, I also drafted my own memo on each of the seven interviews conducted by my assistants. These, and additional memos written throughout the year on thematic insights, informed the codes I developed and used to analyze my interview transcripts and field notes. I used an inductive approach to generate codes, allowing my codes to emerge from my data (Patton 2001). After coding each interview, I generated additional memos on each interview and series of field notes. This inductive approach to analysis helped me to make connections to broader themes and trends in my data not evident during data collection. This repeated engagement with data and memoing is foundational to the work of grounded theorists (Charmaz 2006).

My Positionality

When meeting members of the Deaf community, they commonly assess a newcomer's auditory status, ASL fluency, and familial or other relationships to the Deaf community. Hearing newcomers undergo a higher level of scrutiny upon entry than deaf or hard of hearing newcomers. Community members, particularly other hearing people, are suspicious and often critical of hearing newcomers, presumably because their attraction to the community is not supported by an embodied connection to the community.

Like other Hearing people at Gallaudet who seek to establish credibility in the Deaf community, I used a common tactic of establishing validity and right to access the community through a presentation of the history of Deafness in my family. My strong lineage of Deafness and generations of service to the Deaf community helped me to establish credibility. My paternal great-grandparents were Deaf. Their daughter's (my grandmother's) first language was ASL because her two parents were signing "deaf mutes," as was the typical designation in the

early 20th century. Four of my great-grandmother's eight siblings were Deaf, each attending the residential school for the deaf in Danville, Kentucky, where my great-grandmother met my great-grandfather. Connections to Deafness and Deaf culture have continued in my family. My grandmother (CODA) and my grandfather (hearing) met while the two were attending graduate school at Gallaudet in the early 1950s. My grandparents raised five hearing children, two of whom continued their education as graduate students at Gallaudet. One of those children now works at the university as the director of the Mental Health Center; and in a twist of fate, her daughter is Deaf—the first in our family since my great-grandparents. Sharing this long legacy of Deafness grants me deeper access to the community than other hearing people who do not share this history. In many ways, my lineage validates my credentials as a prospective member of the Deaf community.

Because my grandparents and two aunts were involved in the Deaf community, primarily Deaf education, I learned to sign as a young child. Shortly after she was born, my cousin, Serena, became deaf. At that time I continued my education in American Sign Language in formal classes at my local community college. I continued my involvement in the Deaf community as a graduate student by volunteering for an after-school program for deaf and hard of hearing students in the Nashville area.

Months prior to entering the field, I decided to have my own hearing tested. I have had what has been referred to as “trouble with my ears” since childhood, and was looking to get a baseline audiogram. I was surprised after 30 minutes of testing when I was diagnosed with a mild hearing loss. According to the tests, I had 30 decibels (dB) of loss in both of my ears. Hearing is considered “normal” with losses below 25dB, though most people my age have between a 0-15 dB loss, making my loss meaningful in the context of the Hearing world. I knew that I

occasionally struggled to hear in noisy environments like restaurants. Asking people to repeat themselves had been so commonplace for me that I had never given it a second thought. The diagnosis, nonetheless, came as a shock. I spent time with deaf and hard of hearing people and was certain my hearing loss and the minor inconveniences I faced were nothing compared to that of my friends and family.

I decided to use my diagnosis as a tool for understanding the boundaries of the Deaf community. As a person fluent in ASL who had always identified as “Hearing,” my new diagnosis provided a space for discussing what it meant to be “Deaf enough.” I shared my diagnosis with several participants throughout my time in the field and received widely varying reactions from pity to jealousy. I explore the intentions and motivations of the concept of “Deaf enough” throughout this dissertation.

Chapter Outlines

In Chapter Two, I develop a theoretical model, which I term the “Bio-Lingual” model of Deafness, to explain the relationship between biology and culture—in particular, language—in developing a Deaf identity. Through this model, I expand upon the biosocial model of disability by highlighting the unique values ascribed to auditory hearing loss and linguistic fluency in the Deaf community. I expand upon this model further in Chapter Three by showing how Bio-Lingual Deaf identities are performed and critiqued. In Chapter Three, I explain how students come to discover their position in the social hierarchy on which the model is based. I also explain how individuals manage their social position as Outsiders Within through an analysis of a typology of responses, ranging from assimilation to resistance, to social positions on the periphery.

In Chapter Four, I test the limits of the Bio-Lingual model of Deafness through an in-depth analysis of the cochlear implant as a symbol of the Outsider Within. I profile students with cochlear implants and explain the ways in which their cochlear implant(s) allows them to adopt dual identities as members of both the Deaf and Hearing worlds, thereby managing their potentially conflicting identities. I then explain how the community responds to the presence of Outsiders Within by explaining how non-cochlear implant users respond to the increasing presence of cochlear implants in their community. In this chapter, I examine the rhetorical distinctions made between “treatment” and “tool” as a way to analyze the boundary-work performed by community members to simultaneously include and exclude Outsiders Within who have cochlear implants.

In Chapter Five, I conclude the dissertation with a return to the concept of “home.” In doing so I review the relationship between bodies, technology, and culture for Outsiders Within as a way to explain the social stratification of Gallaudet students. I end the chapter with an in-depth review of the broad theoretical contributions of my work and directions for future research.

CHAPTER II

THE BIO-LINGUAL SOCIAL ORDER

Gallaudet's "Deaf Enough" Roots

In 2006 Gallaudet students launched a campus-wide protest against the incoming administration. Students built on the highly publicized efforts of the first *Deaf President Now!* (DPN) protest in 1988 during which Gallaudet students fought and successfully won the struggle to have a Deaf president for the first time in the university's 124-year history. During the second DPN in 2006 protesters reacted to the appointment of a deaf woman who they considered to be not "Deaf enough" as the university's ninth president. The named president, Jane Fernandes, was raised using oralist methods and did not learn to sign until she was in her 20s. Gallaudet students and staff criticized her use of Pidgin Signed English (PSE), as opposed to the proper grammatical structure of ASL, and her status as audiologically, but not culturally, Deaf. Accordingly, and in light of her treatment as an object of protest, I would classify Fernandes as an "Outsider Within." Students questioned Fernandes' ability to represent a culturally Deaf student body. Moving beyond 1988's issues of representation by a deaf president, students in 2006 called Deafness into question by asserting that there are those who are "more Deaf" than others. Ultimately, students succeeded and the board of trustees rescinded Fernandes' appointment. In this chapter, I demonstrate how murmurings of the "Deaf enough" spirit continued to haunt the student body at Gallaudet, especially the growing population of Outsiders Within who were not "Deaf enough," whether culturally or audiologically.

In the current historical moment, the boundaries of the Deaf community have been challenged by the cochlear implant and a resurgence of oralist ideologies. Implants raise the question, what does it mean to be audiologically deaf? Along with the implant, trends towards

oral and bilingual education call the community's linguistic foundations into question. I take the collective historical moment as a call to focus attention on the intertwined relationship between bodies and language in the renegotiation of boundaries of the Deaf community, and to highlight the lived experiences of community members on the fringes of this braided identity.

I take a biosocial approach to the study of the Deaf community, extending what race and ethnicity scholars call “racial authenticity” to the case of Deafness. While authenticity—racial, ethnic, and otherwise—is socially constructed (Peterson 1997), the materials used to construct authenticity are both biological and socio-cultural. Group members collectively evaluate newcomers' biosocial authenticity to determine their eligibility for group membership. For example, in the context of race, biological determinants such as the “one-drop rule” and visible biomarkers such as skin tone have been used to contest racial authenticity for decades. Ethnic communities also gauge cultural authenticity, through assessment of appropriate music, clothing, food, and speech styles, to construct in-group and out-group membership (Fordham and Ogbu 1986). Perceptions of (in)authentic expressions of biosocial markers of identity affect one's status within the group (Fine 2003; Milner 2004; Warikoo 2007). Those who are determined to have insufficient biological and socio-cultural markers of authentic identity are challenged and often excluded from membership in the community (Carter 2005; Jackson 2001).

Both biological (audiological) and socio-cultural (linguistic) markers of Deafness stratify students, staff, and faculty at Gallaudet. In this chapter, I extend research on racial authenticity to analyze the relationship between biology and culture in the negotiation of identity and social stratification in the Deaf community. Rather than thinking of these issues as separate but related symbols of contention within the Deaf community, I introduce the concept “Bio-Lingual” to explain both individual identities and the social order of Gallaudet's Deaf community. I argue

that the interaction between bodies and language, namely the presentation of both audiological and linguistic markers of deafness, is critical in determining one's identity and related social position in the campus community. Those who did not embody an acceptable configuration of Bio-Lingual markers encounter social barriers within Gallaudet's Deaf community, thereby positioning them as Outsiders Within. I argue that both audiology and linguistic fluency are critical, but insufficient, components for central membership in the Deaf community. I provide evidence for this fact by detailing the stratified hierarchy of students along lines defined by Bio-Lingual social markers.

I open this chapter with a review of past conceptions of Deafness and demonstrate how Deaf identities are constantly in flux. Next, I introduce the concept of Bio-Lingual social orders and illustrate how Bio-Lingual markers of Deafness stratify the Gallaudet student body. Before providing a detailed account of the social order, I demonstrate the Bio-Lingual concept through an investigation of the issue of voice. I show how voice is both a linguistic and embodied marker used to stratify the Deaf community. I conclude the chapter with a discussion of individuals' ability to move within the Bio-Lingual social order.

Deaf People as a Linguistic Minority

Deafness is continually re-defined in a process that unfolds in both academic and lay settings. In 1960, efforts to de-pathologize Deafness began with the publication of William Stokoe's monograph, which provided the first modern linguistic treatment of sign language (Stokoe 1960). The monograph was followed a few years later with the first dictionary of American Sign Language (Stokoe et al. 1965). In this work, Stoke and colleagues used linguistic elements to demonstrate that ASL was a distinct human language with its own grammatical rules and structures. Elites in the Deaf community initially resisted these findings, because they feared

that the codification of ASL as a distinct language would further separate them from the English speaking world and further stigmatize the community (Padden and Humphries 2005:126–27). A public and private battle, which Carol Padden and Tom Humphries term “conflict and anxiety,” over the recognition of ASL persisted, yielding eventually to widespread support for recognizing ASL as a distinct language (Padden and Humphries 2005).

A variety of positions along a spectrum—from complete denial of the importance of audiology in defining Deaf identity, to recognition of the complex relationship between culture and audiology—have been adopted to define the relationship between bodies and language in explaining the Deaf experience. As discussed in Chapter One, Deaf Studies scholars have adopted the rhetoric of ethnicity to define the Deaf experience. In this dissertation, I critique this long-standing ethnic approach to the study of Deafness. I demonstrate instead the validity of a Bio-Lingual model of Deafness to show how bodily capital, in particular audiology, *and* linguistic capital are necessary, interrelated components of a Deaf identity, and critical for structuring hierarchies in the Deaf community.

As detailed in Chapter 1, Deaf studies scholars make a distinction between deaf and Deaf individuals (Woodward 1972). Those with hearing loss who use American Sign Language (ASL) and identify with the Deaf community are referred to as culturally Deaf, with a capital D. Individuals who do not use ASL and do not identify with the cultural Deaf community are referred to by the diagnosis¹⁵ of deaf, with a lower case d. Some Deaf students at Gallaudet

¹⁵ I use the word diagnosis here to emphasize the biomedical experience these individuals tie to their hearing loss. For these individuals deafness is impairment, and does not accompany social, cultural, or linguistic classifications. Literatures on diagnosis have highlighted and problematized the diagnostic practice that encompasses the experience of this group of deaf individuals (Harvey 1998).

adopted this language to distinguish themselves from their deaf peers.¹⁶ Many New Signers entering the Deaf community for the first time were initially unaware of the d/D convention; however, by the end of their first year, all students I interviewed were familiar with this language and used the convention to identify themselves.

One explanation used to support this social model of Deafness is that not all people with hearing loss identify with the Deaf community or use ASL. Latened deaf adults offer a prime example of deaf people who are not considered part of the Deaf community. In writing about Deaf communities, authors explicitly make the distinction between deaf and Deaf, and routinely state that their investigation relates only to the later group. Padden and Humphries (1988:4) explain, “the fact of not hearing is not itself a determinant of group identity,” yet, they continue, “[a]lthough the term ‘deaf’ is the group’s official label for itself, people who are Deaf can have a range of hearing abilities from ‘hard of hearing’ to ‘profoundly deaf’” (1988:4). Accordingly, “Deaf people are both Deaf and deaf” (1988:3).

Audiology does not necessitate group membership; however, it is part and parcel of the requirements for membership in Gallaudet’s Deaf community. I extend the argument that Deaf people are both deaf and Deaf by drawing on the popular estimate that roughly 10% of Deaf people are born to Deaf parents¹⁷, leaving 90% of Deaf people to come to the language and community through routes other than familial transmission of language and culture (Mitchell and Karchmer 2004; Padden and Humphries 1988, 2005; Schein 1989; Wilcox 1988). Audiology

¹⁶ Because there is not a sign in ASL to distinguish between deaf and Deaf, students used the convention of using a classifier—a symbol—of a capital D, referencing the written English convention. This classifier is created by pointing the left index finger, then with the right index finger and thumb creating a semi-circle; the semi-circle is then touched to the left index finger to create the shape of a capitalized D.

¹⁷ This statistic is often repeated in lectures, presentations, and published reports on the Deaf community to describe linguistic, educational advantages, and socio-cultural differences of deaf children born to deaf parents compared to those born to hearing parents. However, reliable citations for this statistic are rarely reported. A recent study by Gallaudet researchers Mitchell and Karchmer (2004) finds that this often-repeated statistic may in fact be an underestimate.

has critical importance for establishing whether one can choose to identify as Deaf and acts as a gatekeeper to all pathways towards membership in Gallaudet's Deaf community.

In this dissertation, I focus on community members whose non-traditional linguistic and physiological biographies separate them from the traditional Deaf community members studied in previous research. This work extends an emergent line of research on the diversity of Deaf identities (see for example Leigh 2009). This research complicates existing research in the field of Deaf studies that focuses on a homogenous signing Deaf community. Other Deaf Studies scholars have highlighted the experience of oral deaf and hard of hearing students, arguing that "there are many ways to be Deaf." Further extending these scholarly endeavors, I bring the various conceptions of Deafness into dialogue with one another and demonstrate the hierarchical social order that emerges when people from various backgrounds converge at Gallaudet University.

Bio-Lingual Deafness

In the summer of 2013, when 90 JumpStart students arrived on Gallaudet's campus, divisions quickly formed between those who used their voices to communicate and those who presumably "couldn't." Jake bluntly stated that he established his social circle by asking, "*Do you talk?*"

Carly: Are your friends mostly other people in the ASL program or other JumpStart students?

Jake: Yeah. There are a few in the Academic Success [program] that are my friends, too, that are able to hear. [Chuckle] The first couple days, we were like, "Hey, do you talk? Do you talk?" [Laughter]

In the first six weeks that the small group of JumpStart students was on campus, a binary social order emerged between the New Signers, who spoke orally, and Academic Success students,

fluent signers who did not use their voice. However, no clearly defined social hierarchy formed between the students, who were equally split between the two JumpStart programs.

In fact, New Signers routinely noted how friendly and accommodating their JumpStart peers were and that they felt welcomed and accepted at the university despite language barriers. New Signers often compared language barriers they experienced at Gallaudet to linguistic diversity in the broader US population. Jake, a New Signer, explained:

Carly: What do you think is the difference between oral deaf or hard of hearing people and those people who sign?

Jake: I think it'd be the same thing as saying a person who speaks English and a person who speaks Spanish, as a person who speaks English and a person who speaks—is—does ASL... They're both people. They speak a different language

Roughly half of the students enrolled in the summer JumpStart program were oral deaf or hard of hearing students whose preferred mode of communication was a spoken language—most commonly English, though some students did prefer spoken Spanish, Chinese, or German—while the other half were fluent signers, many of whom were bilingual.¹⁸ In these first few weeks, bilingual students often facilitated interactions between New Signers and those who communicated primarily in ASL. The bilingual students, many of whom used cochlear implants and/or considered themselves to be hard of hearing, acted as bridge between the two distinct groups and operated happily as members of both groups during the JumpStart program.

Conversations in the cafeteria during the summer pre-orientation program were visually and auditorily segregated between talking tables and signing tables. And while some of the more fluent new signers caught on to signed commentary such as “TALKING TABLE” accompanied by subtle eye rolls, overt tensions between those who spoke and those who communicated strictly

¹⁸ It is important to note that there is no written form of ASL. Therefore, with the exception of a few international students, all deaf and hard of hearing signers are bilingual in two languages: ASL and written English.

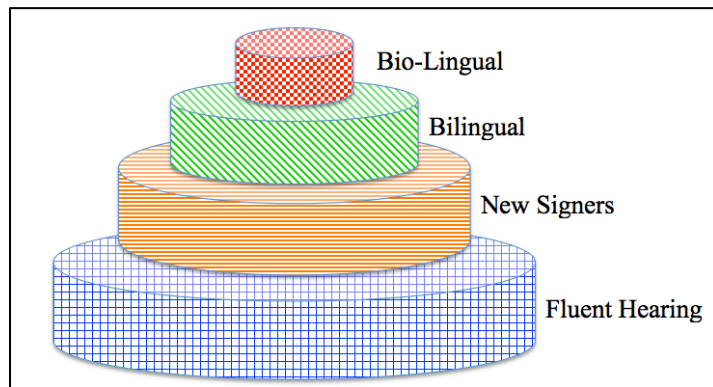
through manual means did not erupt until later in the year. Tensions around the use of voice would become highly political in the months to follow as the binary divide between voicing students, who referred to themselves as “*half breed*,” and their non-voicing counterparts, whom they called “*full breed*,” fractured into a more nuanced and complex social order.

The social order that developed after the arrival of the remainder of the student body at the start of the fall semester was a four-tiered hierarchy, illustrated in Figure 3 below. The individual identities of the students related to the broader social structure of the campus community. That is, Bio-Lingual Deafness illustrates two different units of analysis: individual status and social structure.

I use the metaphor of core and periphery to explain the relationships and social order of Gallaudet’s campus. By core, I mean the elites in the community. These community members were viewed as icons for the Deaf community in that they represented the ideal Deaf student at Gallaudet. They had great symbolic authority on campus and were highly respected by those who validated the Bio-Lingual social order.¹⁹ The periphery includes several tiers. As one moves farther from the core, he or she embodies fewer characteristics of the ideal Deaf community member. These students had less symbolic authority on campus. I use the language of core and periphery rather than a standard hierarchical model to emphasize the fact that the periphery is always oriented towards the core; the core’s influence runs through each tier of the periphery as people’s behaviors, beliefs, and values are aimed at reinforcing the power of the community core.

¹⁹ An analysis of those who do not validate or abide by the Bio-Lingual social order is provided in Chapter Two.

Figure 3: The Bio-Lingual Social Order of Gallaudet's Deaf Community



I use the metaphor of braided identity to show how Bio-Lingual attributes situate individual students in the core-periphery model, as explained below:

- *Bio-Lingual*: Consistent with existing studies of the Deaf community, the students in the core of Gallaudet's Deaf community were audiologically and linguistically Deaf, often native users of ASL. The most common representative of this category of students were "Deaf of Deaf" students, who come from Deaf families.
- *Bilingual Students*: Moving out from the core, the next group is bilingual students (fluent in ASL and spoken English). These community members have Bio-Lingual markers of Deafness, in that they were audiologically deaf or hard of hearing, with or without cochlear implants, and were fluent ASL users. However, these students were excluded from the core of the community because of their affiliations with the Hearing world as evidenced by their fluency in and public use of a spoken language. These students typically had Hearing families, but sign with their friends and classmates. Many had attended special Deaf education programs within mainstream schools.
- *New Signers*: The second group along the periphery of Gallaudet's Bio-Lingual core is the New Signers. These students fulfilled partial requirements for Bio-Lingual membership in the Deaf community in that they were audiologically "deaf enough" but

did not have the linguistic fluency to grant them full access to the community. Most of these students had Hearing or oral deaf or hard of hearing families. They most likely attended mainstream schools and had undergone speech therapy and lip-reading training.

- *Hearing Students:* The final peripheral group within Gallaudet's Deaf community is the fluent hearing students. Like New Signers, hearing students had only one marker of Bio-Lingual Deafness; in contrast, they were linguistically but not audiotologically Deaf. These students came from a variety of backgrounds, some having Deaf or hard of hearing parents, but most having come to the community through other relationships and interests.

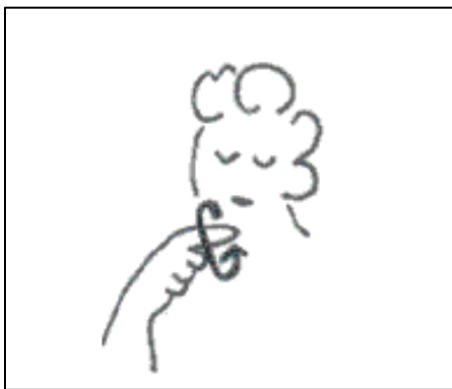
Voice as a Bio-Lingual Symbol of Status

Before returning to a thorough investigation of the Bio-Lingual social order, I will focus on the issue of voice as both an embodied and a cultural marker of Deafness used to stratify students across Gallaudet's Bio-Lingual social order. Voice represents affiliation with the Hearing world through its association with spoken languages, in opposition to the manual mode of communication in signed languages. Students who engaged linguistically with the Hearing world through the use of their voice were forced to the periphery of the Deaf community because of this marker of cultural identification with the Hearing world.

Voice also represents an embodied relationship to the Hearing world. It has been demonized through processes of boundary making that to authenticate Bio-Lingual Deafness. While most deaf and hard of hearing people at the Bio-Lingual core of the community *can* use their voices, they chose not to do so, especially when around other Deaf people. Because using one's voice for communication relies upon the listeners' ability to hear sound, voicing represents a source of embodied privilege in the Hearing world that has no utility in a signing Deaf world.

To learn how to use their voice, deaf students often undergo repetitive therapies to learn how to formulate spoken words in a way that sounds more appropriate for the Hearing world. Some Deaf community members view this oral training as an oppressive treatment for deafness. Indeed, many Deaf people have resisted these therapies, which adopt a strictly medical vision of deafness, as a means of asserting pride in a visually oriented Deaf world. Those students who utilized their voice within the boundaries of the Deaf community were relegated to the periphery for their linguistic and embodied connections to the Hearing world. In drawing symbolic boundaries between the Deaf and Hearing worlds, Deaf community members deployed the voice as a boundary object to objectively mark speakers as affiliates of the Hearing world and, therefore, outsiders in relation to the Deaf community. In fact, the sign for “HEARING PEOPLE,” as presented in figure 4 below, references the mouth rather than the ears.

Figure 4: ASL Sign "HEARING PEOPLE"



The sign is produced by placing the index finger horizontal to one's mouth and making small forward circles; this motion represents words tumbling from the mouth.

A change in the sign for “DEAF” further illustrates the relationship between voice, bodies, and culture. The old sign for “DEAF,” illustrated in figure 5 directly translates to mean “EAR CLOSED,” and is now considered pejorative.

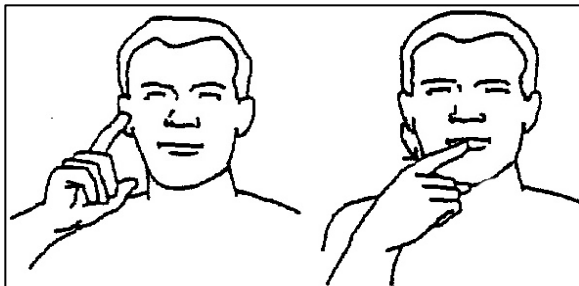
Figure 5: Old ASL Sign “DEAF”



The sign is produced by touching the right index finger to the right ear and then dropping the hand, palm faced down in front of the body’s midsection in the “5” handshape, and touch the right hand to the left hand which is also in an open palm faced down “5” handshape.

Today, the contemporary sign for “DEAF” is no longer a strictly auditory reference to closed ears. The current sign, illustrated in figure 6, represents both the ears and mouth, seemingly to indicate both audiology and communication.

Figure 6: Contemporary ASL Sign "Deaf"



The contemporary sign for “DEAF” is produced by touching the right index finger on the face near the ear and then moving the finger in a small arc down the face to touch again near the mouth.

The stratification of students along Bio-Lingual markers conflated the use of one’s voice, fluency in ASL, and audiology. Students used audiological labels to classify their peers according to mode of communication. Those who sign fluently without using their voices were “Deaf,” or as a select group of students I interviewed labeled them, “*Super Deaf.*” Those who voiced were labeled “Hard of Hearing” or “Hearing” depending on the particular speaker and

context.²⁰ Bao, an 18-year-old, self-identified Deaf freshman who attended a residential school for the Deaf for high school, explained the marginalization of oral New Signers, whom he referred to as “hard of hearing”²¹ (see Figure 7):

OKAY. OKAY THAT POINT, IT’S REALLY IMPORTANT. HARD OF HEARING PEOPLE WHO SIGN **ARE** ACCEPTED. HARD OF HEARING PEOPLE TEND TO TALK THOUGH, SO EH, THEY’RE NOT REALLY ACCEPTED... IF WE SEE SOMEONE TALKING WE FEEL LIKE IT’S RUDE. SO WE DON’T LIKE THAT, WE DON’T LIKE THOSE PEOPLE.

Figure 7: ASL Sign "HARD OF HEARING"



The sign for “HARD OF HEARING” is produced using the “H” handshape, first drawing down from the body to tap once in front of the chest, then is moved to the right in an upwards arch before bouncing a second time.

In this way, although the labels students used to place others within the Bio-Lingual social order referenced audiology, the use of voice figured prominently in the stratification of students. Audiological labels (i.e., Deaf, Hearing, or Hard of Hearing) were used to reference linguistic choices related to voice, as both embodied and cultural. As such, I define voice as a Bio-Lingual symbol of status in Gallaudet’s Deaf community.

²⁰ Students use either spoken English or ASL signs for “Deaf,” “Hard of Hearing,” and “Hearing” when making these references. The students who used the expression “Super Deaf” did so exclusively through spoken English, though a comparable sign in ASL would be the sign for “DEAF” produced with puffed cheeks to emphasize intensity.

²¹ The sign for “HARD OF HEARING,” illustrated in figure 7, references the English word. The sign does not make reference to the ears, mouth, or speaking in anyway. Instead, its distinct separation from the ASL signs for Hearing or Deaf distinguish this category of people, or the identity label, as a misfit in the pure dichotomous classification of “Deaf” or “Hearing.”

Walls Within: Establishing the Bio-Lingual Core and its Periphery

Literature on symbolic boundaries has demonstrated that, as established community members negotiate space for newcomers, they erect symbolic walls to distinguish core from periphery membership (see for example, in the case of ethnicity and migration, Logan et al. 2000). The walls I discuss here are not walls that separate insiders from outsiders (i.e., the Hearing World from the Deaf World), but rather walls that act as impediments for periphery members attempting to access the core of the Deaf community. However, these walls can be traversed at least by some, over time.

The Bio-Lingual Elite

The core members of Gallaudet's Deaf community resembled the Deaf community members celebrated in past research (Groce 1985; Higgins 1980; Ladd 2003; Lane 1999; Lane, Hoffmeister, and Bahan 1996; Padden and Humphries 1988, 2005; Preston 1998; Wrigley 1996). These students were linguistically fluent, often native signers. Many attended residential schools for the deaf and participated actively in Deaf sports leagues, clubs, and events in their hometowns or residential schools. Bio-Lingual students are either audiological deaf or hard of hearing, but rarely distinguish between these audiological diagnoses in their introductions, identifying simply as "Deaf," especially to other Deaf peers. In fact, students who were diagnosed with mild to moderate hearing loss, thereby clinically labeled hard of hearing, learned to identify as "Deaf" through association with Deaf peers. Darian, the faculty coordinator of the JumpStart program, told me that she quickly learned not to call herself "hard of hearing" after arriving to Gallaudet in the nineties as an undergraduate. Hard of Hearing as an identity label was understood as a proclamation of a connection to the Hearing world and was interpreted by

many Bio-Lingual Deaf students as shame about one's audiological and socio-linguistic Deafness.

Students at the Bio-Lingual core of Gallaudet's Deaf community were hesitant, even resistant to self-identifying as elite members of the community. Of the 29 students I interviewed, I had originally labeled four as members of what I thought to be the Bio-Lingual community core. I would describe this core to the students using the popular convention "Big D Deaf." In each interview I asked these participants directly if they identified as such, and three of the four chose not to assert the Big D Deaf identity or the power that comes from the Bio-Lingual social position. Each cited oral childhoods, which meant they had bilingual backgrounds, and the fact that they "can" speak but choose not to as evidence that they are not core Bio-Lingual members. Lydia explained her own rationale for choosing not to identify as Big-D Deaf despite being a primarily voice-off signing member of the Deaf community who pridefully insisted we conduct our interview in ASL because she said it would give me the "OPPORTUNITY TO PRACTICE AND IMPROVE [MY] ASL SKILLS."

CARLY: AS FAR AS BIG VERSUS LITTLE D DEAF, WHICH ARE YOU?

LYDIA: I WOULD SAY LITTLE D DEAF.

CARLY: INTERESTING. WHO IS BIG D DEAF?

LYDIA: NONE OF MY FRIENDS. THAT MEANS STRONG DEAF, STRONGLY INVESTED IN THE DEAF COMMUNITY, STRONG DEAF FAMILY...

CARLY: AH! I SEE LIKE THOSE PEOPLE WHO ARE IN THE SPECIAL FRATERNITY?

LYDIA: YEAH. LIKE I DO HAVE A DEAF SISTER, BUT WE'RE NOT STRONG DEAF. WE WERE MAINSTREAMED, WE HAD HEARING FAMILY, AND WE DIDN'T KNOW A LOT ABOUT THE DEAF COMMUNITY. SO WE'RE LITTLE D DEAF.

Lydia's statement affirms the notion that audiology is part and parcel of Deaf identity, but insufficient on its own. Big D Deaf community members not only had Bio-Lingual biographies

including audiology and ASL fluency, but their behavior also exhibited pride for their identity, including engagement in the Deaf community and profession of Bio-Lingual core values, such as voice-off norms.

It is possible, and perhaps likely, that the three students who denied a Bio-Lingual identity were an anomaly within the Gallaudet population, or were attempting to build a connection with me as a fellow Outsider Within. Insofar as I was a Hearing researcher focused on the periphery of the community who spent the majority of her time in the field with New Signers and Bilingual students, it is possible that those who openly identify as Bio-Lingual core community members were disinterested in participating in my study. I encountered students whom I perceived to be core members in public social settings in ways that allowed me to identify what I considered to be Bio-Lingual core behavior, but was unable to determine whether or not the students themselves would identify as elites in the community. When I asked other students to identify those they considered to be elite, “Big D Deaf,” or “Super Deaf” as some students called them, our labels matched. Brothers from the prestigious Kappa Gamma fraternity were often identified, as well as other student body leaders.

As detailed further in Chapter Three, regardless of self-identification of core members as elites, the student body oriented towards the core as moral beacons of the Gallaudet Deaf community. That is, the community, including Outsiders Within, reinforced walls built around the ideal Bio-Lingual Deaf community member. Whether their presence was asserted or strictly symbolic had no influence over the fact that students acted as if the core is real. An additional complication to the issue of the core as symbolic is the fact that membership at the core has decreased proportionally to the number of peripheral members at the university. In particular, according to JumpStart program director Darian Burwell, the number of New Signers and

Bilingual students has increased with each incoming cohort. Despite a decrease in quantity of members, the Bio-Lingual core continued to carry strong symbolic authority over the campus community.

Bilingual Peripheral Members

The first tier of the periphery of Gallaudet's Bio-Lingual community were those who had appropriate biological markers of deafness in addition to linguistic fluency in ASL. However, these students were marked as Outsiders Within the Gallaudet Deaf community, because they had a perceived dual citizenship in the Hearing world evidenced by their fluency and persistent use of spoken language. Their proficiency and use of spoken language diluted their elite status within the boundaries of the Deaf world.

Although Bio-Lingual students constituted the elite cultural core of the student body, Gallaudet adopted a bilingual vision for the university. The mission statement published by Gallaudet University Board of Trustee's in the 2013 Annual Report of Achievements stated,

Since its founding in 1864, Gallaudet University has always offered a unique, bilingual learning environment. In 2007, the Board of Trustees adopted a new mission statement which commits the university to become more intentional about leveraging the advantages of bilingual education for deaf and hard of hearing students. In the transformation from "default bilingualism" to a model of "intentional and inclusive bilingualism," the University has undertaken a number of steps to implement the mission, including defining student learning outcomes, developing curricula and assessments, offering professional development opportunities, creating learning materials, supporting research projects, and hosting a series of lectures, workshops and campus-wide dialogues (2013a:194).

While workshops and programs sponsored by the Office of Bilingual Teaching and Learning purport to encourage and support a bilingual environment, students insisted that "bilingual" had particular meanings at Gallaudet that enforced the voice-off community norms. During the 6-week JumpStart program, Owen, a new signer, emphatically claimed on the return from a fieldtrip to the zoo, "*Gallaudet is not a bilingual school!*" He explained further that he expected

education and communication to be in both ASL and spoken English. Early in the spring semester that same year, Owen expanded on his interpretation of Gallaudet's vision of bilingualism,

The school's primary language...is sign language... "Bilingual school" means that they write English. I think that their idea of bilingual and my idea of bilingual are totally different. I think learning to write English is not making you bilingual...[But] even voicing and signing, I don't think it's valuable 'cause not everybody can voice...I truly don't think that you can be a true bilingual school at Gallaudet.

A commonly recited xenophobic discourse developed on campus and was used by students at all levels of the social order to police the boundaries of the Bio-Lingual core. Bao repeated this discourse in an interview during the spring semester: "ANOTHER SIMILAR EXAMPLE, IN AMERICA, WE SPEAK ENGLISH. AND IF YOU SEE A MEXICAN PERSON COME AROUND AND SPEAK IN SPANISH THEY FEEL LIKE THAT'S RUDE." Core community members disparaged the use of voice on campus because it was a public presentation of the speaker's dual citizenship in the Hearing world while in a Deaf space. The ASL-only rhetoric mimicked discourse produced by English-only movements, in that it was deployed as an effort to force assimilation and acculturation. ASL-only rhetoric was exchanged through social interaction, but also existed on the physical structures of the campus. ASL-only signage posted in faculty- and staff-controlled public spaces on campus, like that in figure 8 below, supported critics within the community who confronted students who used their voice on campus.

Figure 8: ASL-only sign posted in an office window in Gallaudet's library



New Signers as Peripheral Members

New Signers along the periphery diverged from the Bio-Lingual standards of the Deaf community in that they possessed only audiological attributes that connected them to the Deaf community, lacking the linguistic aspect of the braided identity. Issues of voice and language once again were used to establish a hierarchy, with the Bio-Lingual elite at the core and the New Signers falling to the periphery of the community.

In the early part of the year, students were marked by not only the use of their voice on campus, but also by bilingual peers and Hearing faculty and staff who used their voice to communicate with New Signers, either to aid communication or dispel the frustration of attempting to communicate manually with those who lacked fluency. The use of voice by bilingual and fluent hearing members of the Gallaudet campus community signaled the exclusion of New Signers. As deployed by Bilingual and Hearing community members, voice effectively restricted New Signers to the tight boundary on the periphery of the community. In contrast, some community members, especially those at the Bio-Lingual core, insisted upon using ASL when communicating with these New Signers, in a way that Jake described as *“like you’re playing charades the whole day sometimes.”* This latter strategy included, or bridged, new

signers into the community, yet also policed them in an attempt to force assimilation.

As New Signers learned ASL they often used Simultaneous Communication (SimCom), the dual use of spoken English and ASL. Better tolerated than voice-only communication, SimCom was another tense issue on campus. Because ASL follows a unique grammatical structure, it is nearly impossible to sign ASL while speaking English, which follows its own grammar and syntax rules. As a result, English was typically privileged, and Pidgin Signed English (PSE) replaces ASL. Opponents of SimCom argued that the switch to PSE was an explicit devaluation of ASL and Deaf culture. They argued for “one language at a time” to give each unique language its proper respect. Signage around campus highlighted these linguistic tensions on campus. The sign presented in figure 9 below was posted in an external facing window in the Sorensen LCC building, which housed faculty offices for both the ASL/Deaf studies department and the Hearing & Speech Center. As such, the building housed symbols of both extremes in the culture war over manual vs. oral communication.

Figure 9: Anti-SimCom sign posted in an office window at Gallaudet



Like the “American Sign Language Zone” poster, the Anti-SimCom sign was posted in a faculty-owned space. Posters like these were less common in the dorms and other student-run

spaces on campus. However, it was fairly common to see politically active graduate students, mainly in the Deaf Studies and ASL department, wearing “Stop Audism” T-shirts and bracelets, which the student groups sold as part of a department fundraiser during the school year.

The Hearing Periphery

Despite repeated insistence from community members and Deaf scholars alike that Deafness ought to be thought of primarily as a “linguistic minority,” audiology was used to marginalize Hearing students on campus. The exclusion of Hearing students, but general acceptance of those who identify as hard of hearing or deaf, revealed audiology as a critical, but insufficient component for central membership in the Deaf community. Hearing students with the linguistic but not the audiological prerequisites for a Deaf identity found themselves at the periphery of the community as Outsiders Within.

Hearing students entered Gallaudet with what Goffman (1963) calls a “spoiled identity.” They arrived on heightened alert to downplay their auditory status. Many attempted to “pass” as deaf or hard of hearing by not using their voice on campus, nor proudly proclaiming their Hearing status.²² Tony, a Hearing student who started an organization on campus to support fellow Hearing students adjust to the unique Deaf environment at Gallaudet, attributed the difficulty I had originally faced in identifying Hearing participants for my study to the fact that Hearing students tended to “hide,” meaning that Hearing students did not often “out” themselves on campus. Hearing students paid special attention to the use of their voices and their affiliation with others who voice for fear of marginalization, as Dawn’s experience illustrates:

I know there’s one guy. I sat at a table, and it was frustrating to me—well, I sat down, and then he came and sat by me, ‘cause it was a mutual friend. I didn’t

²² New Signers and Bilingual students were less likely to attempt to pass during the JumpStart program, in large part due to the fact that they felt they had the embodied right to the campus community. This is developed further in Chapter Three.

even know who he was. I was like, “Oh, what’s your name?” He was signing. I could tell he was a new signer. Then something happened where he figured out I was hearing, and he’s like, “Oh, finally! Good, I don’t have to sign anymore.” I’m like, “No.” I didn’t wanna be associated with him, because I do know people will look down on you if you’re hanging out with people who are talking.

To highlight the strength of the Bio-Lingual conceptual model, I will now discuss the case of hearing Children of Deaf Adults (CODAs). This group exposes hierarchies within the Hearing periphery that follow Bio-Lingual conventions. Those with physiological ties to deafness through family heritage were closest to the core, followed by those with no familial ties to the Deaf community, who were then stratified according to their fluency. That is, Hearing people who came from Deaf families were elites within the Hearing periphery, often accepted more easily than their Hearing peers who did not have familial connections to the community.

Goffman’s (1963) concept of “courtesy stigma” offers insight into the privileged status afforded to CODAs. According to Goffman, “there is a tendency for stigma to spread from the stigmatized individual to his [sic] close connections” (1963:30). In the context of the Hearing World, this spread is evidenced by the fact that CODAs, who sign with their Deaf parents and share the same bloodlines, become stigmatized through their relationship with their parents. In the context of the Deaf world, this stigma is privileged, so that those Hearing people who have a Deaf lineage, with both biological and linguistic upbringing, are granted social prestige.

Existing scholarship has addressed the fact that the Deaf community has a special caveat for CODAs, often treating them as full members by affiliation (Preston 1998). CODAs’ first language is sign, thereby fulfilling the linguistic requirement for Bio-Lingual membership. They also adhere to cultural norms, beliefs, and practices of the Deaf community. Further, their membership in Deaf families—a trait prized within the Deaf community—fulfills the cultural requirements for a Bio-Lingual Deaf identity. Thus, CODAs meet every criterion of a Bio-

Lingual community member, except for their audiology. However, their bloodlines do cultural work to makeup for the audiological differences; CODAs at Gallaudet were accepted as elite members of the Hearing periphery and, at times, were granted further access to the community than New Signers. This highlights the importance of language and culture in defining the Bio-Lingual boundaries of the community.

While having Deaf parents granted Hearing people the most access to the community possible given their audiological status, other familial memberships were also valuable. Having Deaf siblings, cousins, aunts, uncles, etc. grants Hearing people greater community access, though still less than those with Deaf parents. Since a large number of deaf people are raised in families in which nobody signs, it was assumed that hearing siblings, cousins, nieces, and nephews will have far less fluency than children if any it is assumed that hearing siblings, cousins, nieces, and nephews will have far less fluency, if any, than CODAs. I shared my familial connection to ASL and the Deaf community when asked, and it often granted me access to the community, as if my credentials had satisfied the gatekeepers who questioned me.

In order to understand how audiology may be used as a reference to determine if a newcomer was “Deaf enough,” I decided to share information about my own mild hearing loss with a few students. Despite the fact that an audiologist had labeled me within the spectrum of “hard of hearing,” I continue to identify as Hearing. Further, my mild loss did not affect my status in the community; I was viewed as a member of the Hearing periphery. In fact, several key informants jokingly pitied me as a “poor hearing girl” when the issue of my hearing loss came up in conversation.

Hearing students I shared the loss with were far more enamored with my diagnosis. Courtney said during an interview, “*Wow! You go girl. Look at you, you’re almost there!*” when

I shared my loss. I introduced the story of the discovery of my own hearing loss to gauge how a hearing person reacts to questions of being audiological “Deaf enough.” However, the conversation took an unexpected turn when, instead of discussing how much loss a person ought to have in order to call themselves “Deaf,” she was quick to ask if she was speaking loudly and clearly enough for me to understand. This was of particular note, as we had been interviewing for over an hour at this point. Our conversation flowed from the issue of access to communication to issues of voice. For Courtney, my diagnosis of a very mild hearing loss gave me enough audiological credibility to choose a Deaf identity, but my voice was the stumbling block to gaining full access. Courtney explained further,

If you're still using your voice and speaking... that's not what Deaf culture is about... I think that you could...find some people that would support you on a big D Deaf identity even if you did speak later on in life. That's cool because there are people out there that can really step outside of that role and support you no matter what...but as far as representing the Deaf community and Deaf culture, and helping them thrive, and empower them as a community, [identifying as Big D Deaf while still using your voice] is kind of degrading to them in a way.

The varied reactions hard of hearing and Hearing students had to my loss connects to the Bio-Lingual model. For Hearing students, my loss was “enough” to be included closer to the core of the community, because I now had what they considered to be linguistic and some trace of embodied rights to the community. New Signers who were hard of hearing or deaf laughed my loss off as nothing more than a minor inconvenience—a view that I shared with them. My loss was dissimilar to their own hearing loss, which granted them access to the community. I identified, and was identified by others, as a Hearing signer, despite my 30dB loss, and was therefore relegated to the Hearing periphery.

Movement Between the Core and Periphery of the Bio-Lingual Social Order

Hearing students and Bilingual students had somewhat static social positions in the social order at Gallaudet. Hearing students, because they lacked the embodied component of a Bio-Lingual identity, were relegated to the farthest periphery of the community, that is, unless they lose their hearing. Bilingual students can, though rarely did, move into the Bio-Lingual core of the Deaf community if they made the conscious decision to voice-off and adopt all other necessary components of a Deaf identity in their daily lives. The movement from Bilingual to Bio-Lingual was rare, however, because students who maintain relationships with those in the Hearing world seldom ceased verbal communication as a force of habit or conscious decision.

Bao and Danielle each represented Bilingual community members who I believed to have achieved elite core membership through the practice of voicing off, despite the fact that each came from Hearing families with whom they occasionally use their voices, and each declined the identity of “Big D Deaf.” It is important also to note that, while some students adopted voice-off norms and other Bio-Lingual socio-cultural behaviors on campus, they may or may not revert to norms of the Hearing world once outside the gates of the community. However, because my study focuses on social life at Gallaudet, these practices become relevant only when made public on campus. That is, a student who adopted voice-off norms on campus, but was known to use spoken English and “act Hearing” while riding the metro or running around the city, was excluded from the Bio-Lingual core. Those who kept affiliations with Hearing norms private, including Bao and Danielle, maintained their Bio-Lingual core status in the campus community.

New Signers more commonly transitioned between tiers of the Bio-Lingual social hierarchy. After making an initial stop at the Bilingual social position, New Signers could move closer to the Bio-Lingual core of the Deaf community as they achieve fluency. Students also moved

closer to the core as they culturally assimilated, an issue discussed in further detail in the next chapter.

Symbolic rewards accompanied this movement inwards from the periphery. One of the highest compliments a New Signer could receive was, “you don’t sign like a New Signer!” Throughout my time at Gallaudet, I heard variations of this comment as ways to describe former New Signers as success stories. Occasionally, a version of this comment on the former New Signers’ signing skills served as a critique to mark the individuals’ continued exclusion based on their linguistic proficiency, such as, “you can tell they grew up oral.” Compliments on a New Signers’ improvement were also common in the Deaf community, sometimes used strictly as encouragement for the individual to keep practicing; other times, the compliment constituted genuine acknowledgement of an individual’s improvement.

Conclusion

In this chapter, I introduced the Bio-Lingual model of Deafness as a critique of the dominant social, or ethnic, model of Deafness to show how individual identities are based on an interwoven relationship between audiology and language. Students at Gallaudet were stratified in a core-periphery model according to these biosocial markers of Deafness. The expulsion of biological explanations of Deafness in the social, or ethnic, model wrongly ascribes exclusively cultural explanations of the Deaf experience. As I have shown in this chapter, biomarkers of Deafness were as critical to the structure of the social order and to the availability of a Deaf identity as socio-cultural markers of Deafness. Voice, in particular, served as a critical boundary object used to distinguish each tier of the core-periphery model, as it represents physiological and cultural affiliations with the Hearing world. That is, a policing of voice was a policing of the symbolic boundaries between the Deaf and Hearing worlds. Outsiders Within who used their

voices were granted some access to the community, though symbolic barriers restricted their access from the Bio-Lingual core of the community. In next chapter, I explain how students came to discover their place within the boundaries of the Bio-Lingual Deaf community, and how they managed these identities and statuses. I also expand upon issues of passing and the rejection of the Bio-Lingual social order.

CHAPTER III

PERIPHERAL MEMBERS: FIRST-YEAR STUDENT RESPONSES TO BEING OUTSIDERS WITHIN

Social life is structured around categories (e.g., race, religion, and deafness). Individuals and scholars often treat these categories as static and the groups within broader social categories (e.g., black vs. white, Christian vs. Muslim) as mutually exclusive; however, social reality is not always packaged in discrete categories. For example, mixed race individuals introduce the concept of racial liminality, interfaith marriages between Jews and Catholics produce children who are born with ambiguous religious and cultural ties, and Deaf people who have cochlear implants or are oral challenge the distinctions made between Deaf and Hearing.

These “Outsiders Within” and the communities they straddle warrant scholarly attention. Understanding those who do not fit neatly into these categories provides scholars with an opportunity to not only better understand how categories are used to create communities, but also which actors are central to these communities, and how communities adapt to social change. In this chapter, I explain how students became Outsiders within in Gallaudet’s Deaf community and how they responded to their social positions. To do so, I demonstrate the ways in which students policed the boundaries of the community, effectively developing and maintaining a hierarchy built around audiological and linguistic factors. Next, I produce a typology of responses that Outsiders Within had to their social position. While each response was unique, student responses reinforced, rather than subverted the social structure by which they were, to varying degrees, disempowered. That is, the social order was internalized so that Outsiders Within policed themselves.

The outline of the chapter is as follows: first, I show how diverse groups of Outsiders Within came to Gallaudet expecting to find a common embodied bond with their peers. Second, I demonstrate how the promise of similarity became a site for demarcating cultural—namely linguistic—differences between students at Gallaudet. I then discuss the peculiarities of the Hearing students as a type of Outsider Within. I explain the various ways Hearing students were marked and how they understood their peripheral status. Next, I present the typology of responses students had to the discovery of their peripheral status. I conclude the chapter with a discussion of fluid identities. I highlight the fact that the typology of responses I presented in the chapter is based on ideal types. I point to several specific cases as evidence for the ways in which individual students often exhibited various combinations of responses to their social positions as they managed the fluidity of their own Deaf identities.

“Deaf Like Me”

New Signers

Upon arrival at Gallaudet, many New Signers did not see hierarchies within the community, let alone the barriers for accessing its core. That is, many New Signers did not arrive at Gallaudet with recognition of their peripheral status.²³ In fact, New Signers’ early interactions with university officials contributed to their belief that the common bond they shared with the Gallaudet students was hearing loss. For example, university recruiters sent letters and emails to students who listed their hearing loss on SAT and ACT paperwork. Furthermore, academic and athletic departments actively recruited these students, and at times, paid for cross-country trips for students and their families to visit campus. Once prospective students arrived on campus,

²³ Two participants who were New Signers did state that they expected to be marginalized when they arrived because of their lack of fluency, and/or because of their mainstream educational backgrounds. However, the overwhelming majority of students I interviewed expressed expectations of acceptance based on their shared embodiment.

university representatives highlighted the similarity between the recruits and the Gallaudet student body. Jake, an 18-year-old tall, slender basketball player recounted meeting the Bison's head coach for the first time,

Jake: The first person I talked to that was signing only was the basketball coach. He came up to me, and I had seen a picture of him, but I didn't really remember him. He was like, what's up? At that time, I had no idea what anything meant. Then he takes out a Blackberry, and he started typing like that...

Carly: Yeah. What did you think in that moment? Were you—

Jake: At that moment, I was like, "Well, I mean, he's just like me." I mean, he's hard of hearing or he's deaf, he just speaks a different language than me.

These new student recruits, who later recognized their social position as Outsiders Within in the community, did often experience the strong, common bond they were promised with their peers upon arrival at Gallaudet. This bond was intensified by the fact that, for many students, their arrival marked the first time they met another person with a hearing loss. Fiona, an 18-year-old freshman was one of these students. A fashionable California native whose newly appointed name sign²⁴ was a tribute to her love of cat-eye makeup, Fiona talked about the instant bond she felt with her peers at Gallaudet upon arrival, "*I met people like me... like my friend [Stacy], who's my roommate, she's...deaf like me!*"

Students meeting deaf and hard of hearing peers for the first time reveled in the opportunity to socialize with others who had similar embodied life experiences. As children, these students were routinely told to disregard their hearing loss as a marker of difference. Fiona stated, "*My parents had constantly told me, 'Oh, you're not different. You're just normal.'*" Students'

²⁴ A name sign is a traditional part of Deaf culture that is similar to naming practices among Native Americans. Each member of the Deaf community has a unique name sign, even if two members have the same name on their birth certificates, their name signs are different because a name sign is not a translation of a spoken name. Members of the Deaf community often assigns name signs based on personal characteristics, and individuals do not select their own name sign.

parents, educators, and physicians are not to be blamed for their choices, but rather, it is important to note that the de-emphasis of hearing loss in favor of emphasizing shared humanity forced these students to cope with the realities of their hearing loss in solitude.²⁵ Fiona continued,

Sometimes I would just sit there and be like,... "I'm done with this. I hate it." And like I said, I didn't know anybody like me. It's not like I could've shared to somebody that would've known how I felt. 'Cause even when I told my parents, they were like, "Oh, it's okay," but they don't know how I feel. They just don't know how I feel...

While rarely outraged or regretful of their childhoods, the majority²⁶ of these students had lived their entire lives with family members, classmates, and/or neighbors who loved them, but around whom they were always different. When these students were presented with the opportunity to come to Gallaudet, a community built around the difference they possessed but never could openly express, they felt the intense desire to share their lives with those who have similar embodied experiences.

Jake delighted in his recounting of his first exposure to Gallaudet during an Open House weekend in the spring of 2013. Jake grew up as the only deaf student in his California high school. He explained that in order to form friendships, he had to adopt an extroverted personality that would help him overcome his physiological difference. He shared his expectations about Gallaudet, *"I felt like for the first time.... I'm not the deaf kid on campus, or the deaf kid on the basketball team, or the deaf kid on the volleyball team. I felt like this is gonna be cool. Everybody's gonna be just like me."*

²⁵ The discourse of "normalcy" is common among hearing parents, educators, and medical personnel. However, I did interview some students who suggested that they received this same input from some hard of hearing and deaf adults.

²⁶ Some students at Gallaudet who I classify as "Outsiders Within" had deaf family members, and/or interacted with deaf peers. The difference between these interactions and the interactions of students at the Bio-Lingual core is that the deaf peers in their lives were oral deaf; "deaf" but not "Deaf."

For most New Signers, the decision to attend Gallaudet was based first on the discovery of a community of peers with hearing loss; secondly, financial assistance from government-sponsored programs for disabled students; and finally, the promise of accessibility. Amy, a petite, spunky 19-year-old transfer student with a love for animals talked about her decision to transfer from her large state school to Gallaudet as based partially on the necessity of accessibility,

I knew that it was the time of my life that I can't keep continue living in the Hearing world without always having to put up a fight and always be struggling... And, even in the [dorm] rooms they guaranteed we'd have lights, we'd have a doorbell, [but my old university] didn't do any of that... I just didn't want to keep having to fight for it. I mean, the rest of my life I will have to.

Accessibility was important for all deaf and hard of hearing students at Gallaudet. Even Bryant, a 20-year-old transfer student who placed a low value on the opportunity to learn American Sign Language, found solace in the accessible community. In an interview four weeks after his arrival, Bryant shared how thankful he was that he no longer struggled to understand professors standing on stage in front of a 400-seat lecture hall, which had been his experience at his previous university. Despite not being fluent in the manual language he was instructed in at Gallaudet, Bryant was grateful to no longer strain to read lips and rely on the power of his hearing aids to obtain auditory information. The students' shared physiological sensory loss, which necessitates a new form of communication, and thus, emphasizes the importance of the body in establishing a connection between students who are "deaf like me." At the time of their arrival on campus, the New Signers, because they came from oral backgrounds, did not yet see the linguistic bonds that unite the majority of the Gallaudet student body, including peripheral Bilingual and Hearing students.

Bilingual Students

As seen in Figure 3, presented in Chapter Two, the New Signers were not the only group of Outsiders Within in Gallaudet's Deaf community. Bilingual students, a second type of Outsider Within, were drawn to Gallaudet for similar reasons as the New Signers: 1) involvement in a community of peers with hearing loss; 2) financial assistance from government-sponsored programs for disabled students; and 3) the promise of accessibility. Yet, unlike the New Signers, who often had just met deaf peers for the first time, Bilingual deaf and hard of hearing students who came from mainstream educational backgrounds were drawn to Gallaudet through *both* their embodied and linguistic bonds with the campus community.

Angelica, an 18-year-old self-identified Hard of Hearing student, was mainstreamed with an ASL interpreter throughout her primary and secondary education. She had a reserved personality with a dry sense of humor, and talked about mainstream education as “something you have to put up with.” Angelica explained her decision to attend Gallaudet as a result of her eagerness to “be around other deaf people.” However, she did not stop with the discussion of shared embodiment. Instead, she immediately followed these statements by disclosing her concerns of her own ASL fluency; she noted that throughout her K-12 mainstream education, she often relied on her oral skills, speaking at school, dating hearing boys, and verbally communicating with family. Angelica worried that her transition to an all-Deaf environment with the social pressure to voice-off would be difficult to manage.

Like Angelica, Jackie, a blonde haired attractive 18-year-old freshman with one cochlear implant grew up in a mainstream bilingual environment. Although Jackie did know ASL, her boyfriend and family members communicated with her mainly throughout spoken English, or through a combination of signed and spoken language. She too noted in her first interview one

week after her arrival that she was eager to be in an environment with those who are like her. Jackie disclosed that she was surprised by the voice-off norms of the signing campus community and says when she inquired about the norm, other students retorted that it was “OBVIOUS” that she was mainstreamed. Jackie recognized that her background in the Hearing world would present an obstacle when it came to not using her voice in daily interactions, even when signing. Yet, Jackie followed this statement of concern with a saying that she was proud to be Deaf and was thrilled to spend her college years in the Deaf world.

Jackie and Angelica, like those New Signers discussed above, came to Gallaudet from the Hearing world; however, theirs was one in which communication was practiced in *both* signed and oral language. Unlike New Signers who recognized only a common physiological bond with their new peers, Bilingual students recognized deafness as both an embodiment and a linguistic community. The combination of language and embodiment separated Bilingual students from their Hearing peers throughout their bilingual primary and secondary education.

Pushed to the Periphery: From Deaf Like Me to Outsider Within

Sociologists of race and ethnicity have developed a literature on “ethnic exploration,” which I argue can be applied to other groups outside traditional notions of ethnicity. Ethnic exploration is the personal examination of one’s own ancestry that leads them to assess their ancestry’s bearing on their lives (Shiao and Tuan 2008; Tuan and Shiao 2011). New Signers and Bilingual students who made their way to Gallaudet from the Hearing world were engaged in the process of ethnic exploration, which fundamentally changed the meaning of their identity. After entering the Deaf community at Gallaudet, some New Signers and Bilingual students moved from a diagnosis of hearing loss, to a more meaningful and complex sense of community belonging. The deaf and hard of hearing newcomers discussed in this dissertation were engaged in the type

of exploration Tuan and Shiao (2011) define as “immersion.” Immersion can be used to describe the way in which Outsiders Within in Gallaudet’s Deaf community placed themselves in a Deaf social environment with large numbers of their “co-ethnic” Deaf peers, “among whom explorers [could] immerse themselves [in the language and culture of their ethnicity] and renegotiate the meaning of group membership” (69).

It is important to note that, in the case of ethnic exploration, the renegotiation of meaning happens not just on the part of the explorer, but also on individuals already established in the community. The presence of a new prospective community member calls into question the current boundaries of the group (Tepper 2011). While the individual explorers find a space for themselves, those established within the group are also negotiating a space to create for the newcomer. In these negotiations, newcomers’ differences are used to justify their relegation to the periphery.

Deaf and hard of hearing students discovered their peripheral positions within the social order overtime through a variety of different policing mechanisms. These policing mechanisms included the use of voice, as highlighted in the previous chapter. Also as discussed in Chapter Two, the identity label “Hard of Hearing” was used as a linguistic marker to define and exclude Outsiders Within from activities at the core of the Deaf campus community. “Hard of Hearing” is both a medical diagnosis and a social label. Occasionally the social label followed the diagnosis of hard of hearing as given by an audiologist, but it is important to note that among Gallaudet students, the meaning of the identity was detached from the individual’s actual audiology. Students used the label “Hard of Hearing” partially because there is no sign in ASL that distinguishes between audiological and cultural deafness. The linguistic marker of Deaf vs. deaf to denote audiological vs. cultural deaf identities is strictly a written convention. Therefore,

students were left with the label “Hard of Hearing,” as a convention for both signed and spoken English conversations to draw these distinctions. Padden and Humphries (2005) argue that the label “Hard of Hearing,” when applied to some members of the Deaf community, is used in reference to their past affiliations with the Hearing world. It is likely that this convention has continued over to the current generation of Deaf students at Gallaudet. This convention is also supported by the fact that the ASL sign for “Hard of Hearing” is made by bouncing the “H” handshape twice in reference to the English word. Moreover, in 2013, “New Signer” was taken out of the official campus discourse with a change in the summer JumpStart program’s name from the long-standing “New Signer’s Program” to the “American Sign Language Program.”

One explicit example of the use of the label “Hard of Hearing” to identify Outsiders Within in Gallaudet’s Deaf community was Jake’s explicit shift in the way he chose to publicly identify to his peers. Before Jake came to Gallaudet he identified as “*deaf*,” stating that he assumed “*deaf*” to be the politically correct term and more well-known than the label “hard of hearing.” In our first interview two weeks after his arrival, Jake repeatedly referred to himself and his peers at Gallaudet as “*deaf*.” In a follow up interview eight months later, Jake referred to himself as “hard of hearing,” often in opposition to “*the deaf kids*” on campus. I questioned him about his identity shift, to which he explained:

I did call myself deaf... all the way until I got up to Gallaudet... I got here...and I'm like, "Yeah, I'm deaf." They're like, "Oh, really? Why don't you know how to sign?" I'm like, "Well, I'm hard of hearing, you know what I mean?"

Jake’s lack of fluency in ASL marked him as not “Deaf enough” to identify as “Deaf.” Through explicit instruction that the label “Deaf” was reserved for those with the complete Bio-Lingual markers, Jake discovered his social position on the periphery of the Deaf community.

After eight months of struggling with his social position and repeated criticism from his peers he disclosed,

When I chose Gallaudet, I was like, "Well, I'm going to school with everybody just like me. Nobody's gonna judge anybody. Nobody's gonna really change their opinion about me because I'm deaf or whatever." Honestly, I think it's worse... Because if you're not Deaf, and you're not an interpreter, you are not them.

Formal structures were set in place by the university that created barriers within the community that further distanced Outsiders Within from the core. New Singers were required to take ASL and Deaf Studies courses that were not required of fluent students, regardless of their audiology. Due to the scheduling of these classes, and the relatively small student body (just over 1,000 undergraduates), first year New Singers were often clustered in the same general education classes. A compounding factor for this scheduling was the need for interpreting services. When New Singers were clustered in the same classes, the demand, and therefore cost of interpreters was decreased. However, the unintended consequence of these scheduling complications was that New Singers were not evenly dispersed throughout general education classes. I observed fundamental differences based on the presence or absence of New Singers and their interpreters in the instruction style, interactions among students, and the interactions between teachers and students in the same course taught by the same instructor.

Additionally, while peers were not supposed to know who an interpreter was assigned to, inevitably, New Singers were outed because the instructor and/or interpreter unintentionally gave away the students' identity by directly asking them a question related to their interpreting service. New Singers were also outed when they were asked to participate in class discussion, and thus, had to rely on the interpreter to interpret their spoken English into ASL, or more commonly, their weak signing skills and lack of fluency were made public to the class who then

identified the student as a New Signer. Other interpreting services used by the university, such as Communication Access Realtime Translation (CART), were institutionalized visual markers that positioned New Signers as Outsiders Within in the community. CART is a real time captioning service sometimes used in addition to voice interpreters who interpreted professors' and peers' ASL into spoken English. When CART services were in use, a television screen was placed either left or right of center in the classroom. Voice interpreters spoke into a microphone, which sent the information to an off campus captioner via the Internet, who then typed the captions that appeared on the screen for students to read. New Signers were marked because their eyes were turned away from the discussion as they read along. Various routine technical glitches and necessarily delayed communication regularly altered the flow of the class, and occasionally fostered frustration among teachers and students. Because of these interruptions, some students were bullied for their use of interpreters and were routinely encouraged to dismiss their interpreting and CART services.

Social groupings, some more formal than others, also separated the core from various peripheral social positions. Students commonly made conscious decisions to form social circles with those in their same tier of the social order (e.g., New Signers with New Signers, Bilingual students, etc.). Campus fraternities and sororities institutionalized the segregation of the core from periphery members of the community. For example, Kappa Gamma was one fraternity known for accepting only those at the Bio-Lingual core of the Deaf community. At the beginning of spring fraternity rush, I observed a conversation between Darrell, a 24 year-old self identified Hard of Hearing freshman, and his teammate, Jared, a self-identified Hard of Hearing junior, discussing the prestigious fraternity. Jared confronted Darrell with the reality of his status as an Outsider Within, "Kappa Gamma is for 'DEAF DEAF' people. You know... like PROFOUND.

Deaf parents, ASL, the whole thing. You're too Hearing for them, dude. But its okay, I am too."

Kappa Gamma's rumored admittance criterion was a symbolic wall that prevented Outsiders Within, like Darrell, who possessed undesirable Bio-Lingual classifications from gaining access to the core of the campus community. Darrell's audiological diagnosis of hard of hearing, his oral hard of hearing family, and language fluency all positioned him outside the Bio-Lingual core, and ultimately prevented him from entry to the Kappa Gamma brotherhood.

The Hearing Student Experience

Hearing students came to Gallaudet with a heightened awareness of their physiological differences. Gallaudet accepted only a small number of hearing undergraduates, who underwent an entirely different admissions process, which included a video essay in ASL and additional exams before they were accepted. As discussed in Chapter One, some hearing students attended Gallaudet for one semester as part of the "visiting student" program that operated similar to a study abroad program. These policies and procedures institutionalized Hearing students' status as Outsider Within at Gallaudet.

One of the special exams Hearing students were required to pass in order to gain admittance to Gallaudet was the ASL Proficiency Interview (ASLPI). The ASLPI is a 20-30 minute dialogue between a trained interviewer and the examinee. The examinee's conversational skills are scored on an overall proficiency level using a 0-5 scale. In order to be admitted to the bachelors interpreting program, where a majority of the Hearing undergraduates enroll, prospective students must obtain a score of 3 or higher. Although there are no formal ASLPI score requirements for general admission, it is the university's policy that "Hearing students are expected to be able to express and follow classroom instruction and discussion in American Sign Language (ASL) at all times" (Gallaudet University 2014b). This is partially because Hearing

students are denied access to classroom interpreters. Students with embodied deafness (i.e., New Signers) were granted full access to the university through interpreters as they continued to develop their ASL fluency. However, Hearing students, who did not embody deafness, were denied this right to interpreters. These rules institutionally marked Hearing students as Outsiders Within. Deaf and hard of hearing New Signers were granted the right to learn ASL as they immersed themselves into “their” culture, but hearing students were marked by their bodies as outsiders, and thus, were not granted that same privilege.

The lack of access to interpreters was rarely an issue for admitted Hearing undergraduates since most were proficient signers; however, some undergraduates who scored low on the ASLPI exam were admitted to the HUG program. Enjui and Tony were two such students who scored 1 and 1+, respectively, on their entrance interviews. According to the ASLPI test, signers at this proficiency level of proficiency can manage basic communication, comparable to a young primary school student. Enjui and Tony, and other hearing students admitted to Gallaudet despite low ASLPI scores, were restricted in their ability to both produce and understand short sentences with limited vocabulary. Despite regular misunderstandings, teachers and peers who were accustomed to dealing with non-native signers could generally understand hearing students at this level of proficiency.

Fluent hearing students who were admitted to Gallaudet as either full-time or visiting students also existed on the periphery of the social order, although somewhat closer to the core than their Hearing peers who were not fluent signers. These hearing students were marked primarily through investigations of their audiology. Students routinely “hooted”—that is, vocalized deep, loud sounds to draw the attention of students with moderate to normal levels of hearing, turned up the volume of TVs in the cafeteria and common dorm lounges, and yelled in

the hallways to see who would turn around, effectively outing the Hearing students. While rarely seen by Hearing students as “offensive” or acts of “bullying,” Hearing students were on active alert to *not* respond to such occurrences. Dawn, a 21-year-old HUG student described one such common occurrence,

Dawn: One thing that I do see a lot...if you're walking across campus someone will do like... the deaf call. They'll be like, [hooting noise] and make that noise. If you look back, then sometimes they'll be like, "Oh, ha ha ha, she's hearing!" I'm like, "Oh yeah, I'm hearing." [Chuckles] "Got me!"... in my experience, when people do that, if I look back, it's more they wanna see if I am hearing or they wanna know if I'm deaf. They haven't done it in a mean way, necessarily.

Carly: Why do you think that matters? Why do you think everyone's so curious?

Dawn: I think part of it is just they want to know who's had the same background or stuff...When I meet someone, I'm kinda curious. Are they deaf? Are they hearing? Are they hard of hearing? What do they consider themselves? A lot of it's they just wanna see how well you can hear... I know some [students]... don't want Hearing [people] here; they're probably doing it more to see like, "Oh, do I want to socialize with that person or not?"

Despite repeated instance from community members and Deaf scholars alike that audiology plays no role in defining the community—that instead, Deafness is an ethnic group, which constitutes a “linguistic minority”—audiology was used to exclude, or at the very least, marginalize Hearing students on campus. Using the written conventions to denote audiological versus cultural Deafness, Padden and Humphries (2005) correctly asserted that those at the center of the Deaf community are both “deaf *and* Deaf.” That is, audiology is a critical, but insufficient component for central membership in the Deaf community. Hearing students, who had linguistic but not audiological prerequisites of a Deaf identity, found themselves at the periphery of the community as Outsiders Within because of their audiological difference.

Life In Between

Deaf and hard of hearing Outsiders Within became consciously aware of their peripheral status once the initial draw of similar physiology (i.e., the “deaf like me” discovery) had been dispelled through social and institutional affirmations of their position in the social order. The Outsiders Within were quick to use the metaphor of being stuck in the middle of two worlds to describe their status at Gallaudet. This metaphor was readily used in one-on-one interviews and during everyday public conversations. Owen, a 25-year-old self-identified hard of hearing transfer student explained what its like to be “in the middle:”

Then you have me in the middle... I'm really not accepted by anyone because I don't hear well enough. If you talk behind me, I don't hear you. If you talk next to me, depending on the background noise, I don't hear you. You talk in front of me but facing away from me, I don't hear you. The on the other side, if you sign to me, I don't know what you said. For me, it's a very lonely place to be sometimes.

Regardless of placement on periphery, Outsiders Within in Gallaudet's community acted according to one of three different responses to their social status: either orienting one's self conception to the social binary of Deaf vs. Hearing by 1) assimilating or 2) resisting, or 3) by asserting the power of their in-between status.

Strategies of Assimilation

For Owen, he overcame the lonely state of in-between by accepting the norms and rules of the community in hopes of gaining fuller access to the core of the Deaf community. In other words, as a New Signer, he assimilated into the Deaf community. Assimilation, as defined by immigration scholars, is “a radical, unidirectional process of simplification: ethnic minorities shed themselves of all that makes them distinctive and become carbon copies of the ethnic majority” (Alba 1999:7). Those who assimilated into the Deaf community did so primarily by ceasing to use their voice. They also joined extracurricular activities and made conscious

decisions to end their associations with peers who violated community norms. By March of his first year, Owen made the decision to voice off while on campus and not to interact with students who used their voice on campus. For Owen, this meant abandoning many friendships he formed at the beginning of the summer with his classmates in the New Signers program.

Prime example, [Chris] always voices. I will speak to [Chris] if he asks me a question. [But] I'm not gonna hang out with [him] because [he] voice[s]... I am somebody who will discriminate like that. There's a huge difference from what I said to you [now compared to my first interview]. 'Cause I remember... complaining that nobody would voice. Now here I am complaining that people won't sign.

Amy, the spunky 19-year old New Signer who transferred to Gallaudet seeking the promise of accessibility, also quickly began to assimilate upon her arrival. When arranging her first interview, she cautiously offered to conduct the interview entirely in sign as a courtesy to me before she knew my own audiology or ASL fluency. When asked to do a second interview seven months later, she confidently stated a preference for the interview to be conducted exclusively in sign language. Additionally, she requested that the interview be conducted in a dorm lounge as opposed to the private room that I had offered. Though not discussed, I suspected that one of the reasons Amy choose to conduct the signed interview in a public space on campus was that it allowed her to display her fluency and pride as a Deaf Gallaudet student—which proved to be the main topic of discussion in her interview. In this interview, Amy addressed her decision to voice off, and talked about the ways in which doing so enables her to transition out of the Hearing world.

In addition to the decision to voice off and sign publicly with and in front of Deaf peers, Owen and Amy adopted the identity of “Deaf,” which explicitly demonstrated their assimilation to the Deaf community in an effort to gain access to the core. Identities in the Deaf community at Gallaudet were not private; in fact, it was common when meeting someone for the first time

that you either offered or were explicitly asked whether you were Deaf or Hearing. It is important to note the binary here, as “Hard of Hearing” was rarely provided as an option. The decision to identify publicly to strangers as “Deaf” is imbued with meaning, as it affirmed a commitment to ASL and Deaf culture. Students like Jake, who identified as deaf without displaying the commitment to ASL and Deaf culture, were critiqued and re-routed to adopt the identity of the residual category between Deaf and Hearing, “Hard of Hearing.” Despite the fact that this identity label was not presented as an explicit option in initial meetings, the label was common on campus, and students like Jake learned to identify as “Hard of Hearing” through interactions with other peripheral members and through repeated critique of their assertion of Deafness on campus. Others, such as the New Signer Owen, and bilingual Puerto Rican migrant, Camila, asserted newly established Deaf identities during their first year at Gallaudet.

Assimilation was slightly easier for Bilingual students whose fluency was not a stumbling block to accessing the Bio-Lingual community core. While neither skill, nor audiology can explain why some students assimilate, those who did so were much more willing to practice their ASL skills in a voice-off environment, and often forewent the use of assistive devices such as hearing aids and cochlear implants. Stacy, the 18-year-old East Coast surfer, openly discussed the possibility of eventually identifying as Deaf in a manner that demonstrated she has reflected on the potential of changing her own identity. Stacy commented on what would need to change before she would feel comfortable asserting a Deaf identity:

Carly: Have you ever considered saying ... “I’m Deaf?”

Stacy: I feel like if I said that—that’s funny. I’ve had this conversation before with my roommate. We were talking about how we think that I feel like I’m deaf in the Hearing world, but in the Deaf world I’m Hard of Hearing. I’d feel strange saying, “Oh yeah, I’m Deaf.” Because honestly, with my hearing aid in, I can hear a lot. With it out, obviously I’m deaf. I don’t know. Maybe it’s just like because I can’t sign good enough to say, “Oh,

yeah. I'm Deaf." Maybe that's how I feel about it. Do you know what I mean?

Carly: Yeah. Can you imagine a time maybe next year, two years—

Stacy: I can. Yeah. I would probably start saying it. Yeah, I could see myself saying that.

Stacy's reluctance to identify as Deaf highlights the critical intersection of audiology and language that define the Bio-Lingual core of Gallaudet's Deaf community. Initially, she insisted that she could not identify as Deaf because she hears too well. Stacy likely did not know that most people who identify as Deaf are not profoundly deaf (Moore and Levitan 2003). Stacy's attachment to her hearing aid and the implicit value she attached to hearing sound were what separated her from those at the Bio-Lingual core, who oriented towards deafness as both an audiological and linguistic identity. In general, students who failed to pass as Deaf by establishing credible Bio-Lingual markers were those students who did not "voice off." The act of using one's voice was a Bio-Lingual marker of membership in the Hearing world, regardless of audiology. Voice is both an embodied cue of audiology and a vessel for language—that is, the use of one's voice signals both physiological and cultural identifications. The decision to voice off on Gallaudet's campus was therefore a Bio-Lingual marker that granted students access to the core of the campus community.

Bilingual students were closer to the Bio-Lingual core of Gallaudet's Deaf community, yet their proximity did not necessitate assimilation. As discussed below, some Bilingual students resisted assimilation, while others were content in their peripheral status during their time at Gallaudet. Camila, the 18 year-old Puerto Rican, however, was one Bilingual student who gravitated towards assimilation after some time in the community. Upon her arrival at Gallaudet, Camila teetered between the two worlds and two identities. When pressed multiple times in her

first interview to choose between a Hard of Hearing or Deaf identity, Camila refused to choose, stating, similar to Stacy, that because she had some hearing she was not “Deaf enough” to identify as “Deaf.” However, by the start of the spring semester, Camila’s hesitancy had evaporated and she consistently identified as “Deaf” throughout her follow up interview. It is important to note, that identities are flexible and vary greatly according to context. So while it is possible, and in fact likely, that Camila retained her “Hard of Hearing” identities when outside the gates of the university, in her first year at Gallaudet, she chose to make the explicit declaration of a “Deaf” identity. Declaring an affirmatively “Deaf” identity at Gallaudet was a powerful signal of dedication to ASL and Deaf culture, evidenced by the fact that all members at the core of the social order identified as “Deaf,” whereas individuals in peripheral social locations, such as Jake in the example above, were encouraged to identify as “Hard of Hearing.” In addition to the explicit shift in identity from an uncertain to affirmatively Deaf identity, Camila’s assimilation was visible in her interactions with her peers. Camila, like many Bilingual and Bio-Lingual Deaf students, defended the voice-off norms of the community by actively policing students using their voices in common spaces on campus. She explained that when she encountered people voicing she approached them and pleaded with them to sign saying, “PLEASE SIGN.” As Camila described these encounters to me, she used slow precise signs and demonstrated great distress by using exaggerated facial expressions. As a Bilingual student, Camila had increased access to both the Deaf and Hearing worlds in a way that the New Signers transitioning into the Deaf community did not. Camila expressed confidence in her immersion in the Deaf community through her explicit affirmation of a Deaf identity, as well as through policing the communication boundaries of the community by insisting that her peers used signed communication.

Hearing students had unique methods to fight for inclusion by attempting to pass both as audiologically and culturally Deaf. That is, while the emphasis for New Signers and Bilingual students was appropriate voice off signed communication, Hearing students struggled to overcome both their bodies and their culture. To do so, Hearing students attempted to “pass” as Deaf by actively ignoring sound, refusing to use their voices, and publicly stifling any opposing viewpoints. In fact, a small group of students on campus was organizing to privately support incoming hearing students by training them on strategies for passing, so as to avoid being outed as hearing. Such strategies included turning cell phones to vibrate with LED flash light alerts instead of audible ringtones, not visibly responding to sounds such as plates crashing in the cafeteria, sirens passing by, or yelling—even though many of these sounds can be detected by some of the deaf and hard of hearing students. The student-run group, Vital Connections, sought to aid hearing students to manage the daily realities of being part of the category of oppressor in class discussions of audism. For example, Cora, a 20-year-old hearing visiting student who first encountered ASL two years prior to her arrival at Gallaudet, confided in me the awkwardness she managed as a hearing student in her poetry class while the students discussed a classmate’s poem “Stupid Hearing Bitch,” which detailed audist behaviors of Hearing students on campus. Cora explained,²⁷

THE POEM WAS ABOUT ONE GIRL WHO USED HER VOICE ALL THE TIME. SHE KNEW SIGN WELL, BUT JUST CHOSE TO TALK ALL THE TIME... THE DESCRIPTIONS OF THE GIRL WERE VERY VERY GRAPHIC. THE PRESENTER WAS ENRAGED, AND BECAUSE SHE WAS SIGNING I COULD SEE THAT RAGE. I UNDERSTOOD THE PRESENTER’S PERSPECTIVE. AND THE POEM WASN’T ABOUT ME SPECIFICALLY. BUT I WAS UNCOMFORTABLE SITTING IN THE ROOM AS A HEARING PERSON... I UNDERSTOOD WHY SHE WAS MAD, BUT IT MADE BE UNCOMFORTABLE BECAUSE THE WOMAN IN THE POEM WAS LABELED AS A STUPID *HEARING* BITCH, NOT A STUPID BLONDE BITCH OR SOMETHING LIKE THAT. SHE WAS LABELED AS “STUPID” BECAUSE SHE IS PART OF THE HEARING COMMUNITY. SO THAT WAS REALLY HARD FOR ME TO TAKE.

²⁷ I discuss Cora’s rationale for choosing to sign with me during her interview on the following page.

IMAGINE IF I HAD STOOD THERE IN FRONT OF THE CLASSROOM AND TALKED ABOUT A DEAF GIRL WHO HAD PISSED ME OFF AND I HAD SAID “STUPID DEAF GIRL.” JUST IMAGINE IF I HAD DONE THAT PRESENTATION!

Cora and many of her Hearing peers often discussed the awkwardness of being a Hearing person at a Deaf school. For these students, assimilation involved silencing alternative viewpoints in an effort to pass as Deaf. Despite inner turmoil, Hearing students reinforced the boundaries of the community as they assimilated to the Deaf social order. In doing so, they reinforced the internal walls that relegated them to the periphery of their community because, in Cora’s words, “IT’S NOT MY PLACE TO CRITICIZE.”

The deaf and hard of hearing individuals discussed above represented the often-shared cultural myth of the oral to signing-Deaf success story. Hearing students, like Cora, were accepted in the community because of their deference to Bio-Lingual Deaf values and their careful efforts to not be outed. Students who fought for inclusion in the Deaf community by assimilating learned ways to “pass” as Deaf.

The students who fought for access to the Deaf community were often those students who saw more utility in community membership. These students often felt rejected by the Hearing world and viewed acceptance in the Deaf world as their last option. New Signers, like Amy and Owen, struggled in the Hearing world, and chose to adopt a Deaf identity as their primary identity during their tenure at Gallaudet. Students who assimilated to the Deaf social order while at Gallaudet also acknowledged that there were potential time restraints on this new primary identity and recognize that they would likely have to leave the community when they returned to the Hearing world for graduate school and future careers. New Signers were particularly drawn to the social order of the Deaf community because they saw it as a gift, a period to cherish, as well as an opportunity to connect with an aspect of their identity to which they felt intimately

connected. Bao, an 18-year-old Bilingual Vietnamese immigrant explained this within the context of interpreted vs. signed classroom communication:

I'M PRETTY USED TO INTERPRETERS IN THE CLASSROOM BECAUSE I GREW UP MAINSTREAM, SO THERE WAS ALWAYS AN INTERPRETER THERE. BUT WHEN THERE ARE NO INTERPRETERS, WHEN COMMUNICATION IS DIRECT FROM THE TEACHER THAT'S LIKE WOW! [BROAD SMILE]...BUT I KNOW I WILL BE MAINSTREAMED AGAIN AFTER I GRADUATE FROM GALLAUDET IN 4 YEARS WITH MY BACHELORS, THEN I WILL GO BACK AND GET MY MASTERS.

Hearing students also viewed their time at Gallaudet as a gift. For example, Cora, the Hearing, visiting student who reserved opinion during a tense poetry class, explained her decision to sign rather than voice during our interview in a follow up email to me:

I picked to sign instead of speak primarily because it's a more fun mode of communication for me! Also, I want to capitalize my experience here at Gallaudet and sign whenever I can before I go back to a school where I will be speaking all the time. In the same sense, I also wanted to challenge myself. I do believe there are many things and emotions I do not know how to FULLY express in ASL and I wanted to challenge myself yesterday.

Additionally, Hearing students imagined lives and careers within the boundaries of the Deaf community that encouraged them to fight for inclusion through assimilation to community norms. They were Deaf studies majors, interpreting majors, and some even hoped to marry members of the Deaf community and raise Deaf children. Hearing students maintained the power structures that kept them on the periphery of the community in hopes of preserving what they perceived as the purity of the Deaf community. Often times, Hearing students possessed the most nostalgic views of the Deaf community and were the ones who valued the history of Deaf culture and Deaf education. Hearing students held their peripheral status in the highest regard, claiming their peripheral acceptance in the community as a “gift” not often shared with the rest of the Hearing world.

Everyday Forms of Resistance

Not all students at Gallaudet, regardless of audiology or ASL fluency, attempted to assimilate to gain greater access to the core of the community. Following the work of James C. Scott (1985) I illustrate that an alternative students take to assimilation is everyday acts of resistance. Practiced between periods of revolution, everyday acts of resistance, as defined by Scott (1985:6) “stop well short of collective outright defiance” and typically present as “footdragging, dissimulation, false-compliance, pilfering, feigned ignorance, slander, arson, sabotage, and so forth.” Outsiders Within in the Deaf community at Gallaudet resisted the Bio-Lingual social order through a variety of everyday acts of resistance, including making jokes, publicly violating social norms, privately violating norms, and discussing and/or acting on the decision to leave the community. The aim of this type of resistance was not to overthrow the power of the core, but rather, to challenge the core by acting out.

Jokes were fairly common acts of resistance for Gallaudet students. During the summer JumpStart program, a group of New Signers joking referred to themselves as “*half breeds*” in comparison to their counterparts in the Academic Success program who were fluent in ASL and who they presumed to be “*full breed*” deaf. Students later in the year joked about forming a “Hard of Hearing” fraternity that would exist in opposition to Kappa Gamma and its strict acceptance of Bio-Lingual brothers. These jokes provided an opportunity for Outsiders Within to challenge the logic of their peripheral status without collectively organizing to subvert the hegemonic social order.

The public violation of the social norm to voice off was a common form of everyday resistance among New Signers and some Hearing students. Stacy provided an example of a time

she and Bryant, the 20-year-old football player who expressed low interest in learning ASL, were targeted for breaking the voice-off norm:

If you're just talking then, yeah, that's a little offensive, but some people get so upset about it... I don't understand why there's so much anger towards those people. I was in the cafeteria one time and I was with Bryant, the big football player. I'm really good friends with him. Bryant talks a lot, but—and that's just him. He's one of the people who—he's my good friend, but he's only here for football. He's one of those people. I've [asked] him all the time, "Why don't you sign?" He's like, "I'm just here for football." He makes it very clear. We went in the cafeteria one time and this girl—I was watching her sign behind him because the boys were all being rowdy, loud; that's college boys for you, obviously. She was like, "Why are they talking? They need to shut up." I saw what she said. I told Bryant. [Laughter] I should have waited, but Bryant got so mad. He's like, "I can talk if I want to. It's not your business what I'm saying. Sorry you can't read what I'm saying" to that girl. She got up and walked away. It was very awkward. It was my mistake for not waiting to tell him, but just kind of slipped out. I'm like, "Oh, my gosh. Stop. That girl just said this." It's very awkward sometimes with that tension between the two [talking vs. voice-off signing]. Which, first of all, why was it the girl's business to be so upset that we're talking? That's why he was kind of like, "Sorry you can't read what I'm saying." 'Cause a lot of people will look around and watch conversation. I don't know. I guess I don't know how I feel about it. 'Cause on both sides I understand, but at the same time I feel like it shouldn't be that big of a problem.

Stacy told the story of Bryant's everyday act of resistance—voicing in public—and in doing so, she herself performed an act of resistance by defending Bryant's response. Although Stacy did not act to subvert the voice-off social norm, she resisted it, simply by calling it into question. Bryant's action was more of a direct attempt to subvert the social order, but as demonstrated below, these microaggressions were momentary acts of resistance that have yet to coalesce into an organized group of resisters.

While New Signers were criticized for breaking the voice-off norms, peers on campus rarely responded with actions stronger than social distancing, or as seen in Stacy's story, privately or even publicly commenting on the norm violation as a method of policing. Hearing students, however, were often vilified for publicly rejecting the voice off norms of the Deaf

community. Although I never encountering this group myself, I was told multiple times about a clique of Hearing students who continually voice in the cafeteria. While all students identified their voicing as problematic, the Hearing students were the most visibly disturbed by the practice. Courtney, the passionate 19-year-old who hoped to marry a Deaf man and raise Deaf children, expressed anger about the lack of respect Hearing students show when voicing on campus:

If you're gonna be here at this school, you need to understand that deaf people have been oppressed their whole entire lives. There's not one deaf person that I know that did not experience horrible—or go through something so horrible with audism, discrimination, oppression. Everybody has experienced it, and you're gonna sit here at this school and be disrespectful like that when all you can do is pick up your hands or just move and go to your room and have a private conversation...It's respect. Everybody needs to respect everybody.

Because of their distance at the farthest point of the periphery, Hearing students took seriously their role as defenders of the community boundaries by policing norm violators who call these boundaries into question. Because Hearing students were most likely to have the strongest nostalgic view of Deaf culture and internalized fears about the external threats to the community, they passionately policed norm violators, especially from their own social position within the community.

To avoid some of the public criticism, some forms of everyday resistance were private, emphasizing the fact that the goal of these microaggressions was not to overthrow the power of the Bio-Lingual elites. Hearing students often shared with me the joy they took in solitude, time with their families, Hearing friends off campus, and at their off-campus jobs. New Signers also privately resisted the Bio-Lingual social order. For example, several students made regular visits to my nearby off-campus apartment as a place of respite, a space where they could communicate in any number of ways (e.g., sign, voice, SimCom, or any combination of the three), while

simultaneously venting their frustrations *and* celebrating their accomplishments with a fellow Outsider Within. Dorm rooms, like my apartment, were also private refuges for Outsiders Within. The privacy of these refuges was critical for Outsiders Within and they were conscious of maintaining their privacy, while reverting back to the social norms of the Deaf community when outside these spaces.

I was surprised to discover early on in the fall semester that talk of transferring to another university was commonplace among first year students. This conversation continued throughout the year, and was even typical throughout their education, even as students approached graduation. In March of his first year, Jake openly discussed the unexpected difficulties he faced in attempting to find his place in the Gallaudet community. He thought aloud,

I mean it's like there's a Deaf world and a Hearing world. I'm Hard of hearing, so I'm in this middle. I've never been in this middle. I've never been the odd person out. I've always been the person that... I don't like to brag, but the person that everybody's been around or come around. I go and I lead the group or whatever. Now I'm like this guy—I'm not always on the outside, but when I am, it's weird 'cause I don't feel like included whenever I should feel like I'm included 'cause I am deaf in a way. Even though I don't know how to sign, I'm at a Deaf school that's supposed to include me, and not push me out. I don't know. It's just—that's why I keep considering maybe I should just go back into the Hearing world. I did fine with it for 18 years. Why should I try to change it?

Resistance for some of the peripheral students included leaving the university and transferring to universities in the Hearing world, or dropping out of higher education all together. While often discussed, not all students who contemplated leaving the university did so. Jake, did return for his sophomore year. However, four students I interviewed did not. In follow up conversations with three of the students who did not return for their second year, each affirmed their appreciation for the year spent at Gallaudet, and even expressed gratitude for the community and the chance to explore their Deaf identities. All stated they would likely continue their relationship with the Deaf community in other contexts for the rest of their lives.

The acts of everyday resistance Outsiders Within employed to resist pressures to assimilate ought to be understood as coping mechanisms, rather than subversive acts. Even in their jokes, public and private violation of norms, and consideration of leaving the university, students did not seek to subvert the Bio-Lingual social order, rather, they merely questioned their role as peripheral members the community. Students condemned their own acts of resistance by admitting their jokes were offensive, apologizing for public norm violations, protecting the secrecy of private violations, and not returning to campus. Through these everyday acts of resistance, Outsiders Within reified rather than subverted the walls within the community that relegated them to the periphery of the social order.

Accepting and Asserting the Power of the Periphery

Despite the growing presence of ambiguous community members (i.e., Outsiders Within), existent research continues to draw on theories of social classification that were developed around a dichotomous “us vs. them” paradigm (for a review see Lamont and Molnár 2002). Scholars continue their use of dichotomous theories because they may expect that if a critical mass of people identify as “in-between,” a movement would arise to validate the middle ground as an acceptable identity. In fact, as seen above, some scholarship on cases I would call “Outsiders Within” seeks to eliminate the “in-between” status by reconfiguring these liminal members into existing categories. For example, research on shifting boundaries of race and ethnicity shows how Latinos and Asians have been relieved of their liminal racial statuses as they have become encapsulated in the category of whites (Gans 1999; Shanahan and Olzak 1999). Some scholars resist this dichotomy, and instead seek to validate these groups as a third social category. Extending the example of race, Bonilla-Silva and Embrick (2006) posits a “triracial stratification system,” in which light skinned Latinos and Asians are occupy a category

of “Honorary Whites,” which falls between “whites” and “blacks.” An alternative to hierarchical models of classification is presented by the “color-blind” ethos and queer theory in which the salience of social categories such as race ceases to exist, thus calling for the demolition of a hierarchy of classifications.

My findings call for a new theory of categorization, one that does not maintain a focus on hierarchical dichotomies, a development of a tri-chotomy, nor call for the abolition of social classification in its entirety. Rather, my findings show that some Outsiders Within neither assimilated nor resisted the Deaf social order; rather they worked to *validate* their peripheral status without prescribing revision of hierarchy of the social order. They were content as Outsiders Within—simultaneously existing in neither and both social categories. Some Outsiders Within affirmed and even reinforced the walls that have been constructed to exclude them from access to the core of their community. Bryant, a self identified hard of hearing New Signer, explained his contentment with his Outsider Within social position:

...its like you're a stranger in a strange land. You're either deaf or hearing and when you're in the middle ground it's like either being black or white, or mixed, you don't really have an identity. There is no point in coming here when you're kind of an unwanted here. Like all the hearing kids, "oh you're hearing? You're an interpreting major." Or "You're deaf? You're a legacy." "Oh you're hard of hearing? Well why are you here?" "Well, I play football." "Oh of course you're here to play football, you're here to play basketball, you're here to do something." It's just like you kind of just [SHRUGS SHOULDERS]. We're the labor force. We make up... like you have X amount of deaf people, and you have X amount of hearing people, you got to have something that fills the void. You have to put hard of hearing kids in the middle, and when you do that it gives you someone to hate, I guess. I don't know. You know what I mean? Everyone needs a scapegoat; every community has a scapegoat.

Outsiders Within often blamed themselves for their exclusion. New Signers claimed that if they signed better they would not face the exclusion they do, and used this as a motivating factor to continue learning ASL. Rather than attempting to subvert the power structure by resisting or

asserting the value of being able to cross between Deaf and Hearing worlds, some Outsiders Within reinforced the boundaries that relegated them to the periphery of the Deaf community.

These examples of Outsiders Within conceding their peripheral status, and reinforcing the walls constructed to exclude them, raise the question, “why?” Why would students who find themselves in the middle of two worlds justify their exclusion? Why did these students stay in the community as Outsiders Within? Why not fight for inclusion by assimilation or resist like the students discussed in the previous section? Why not use the growing size of the Outsider Within population to disrupt the social order that they are oppressed by and subvert the hegemonic orientation that empowers the Bio-Lingual student body?

Outsiders Within reified their excluded position as legitimate because they have the opportunity to function in the Hearing world, something they saw as a privilege denied to the Bio-Lingual core of the Deaf community. These students viewed the Deaf community as a social world reversed, one in which those who have the least power in the Hearing world should have the most power in Deaf spaces.

Many Outsiders Within justified the exclusionary practices they felt victim to as acceptable, or at least understandable, because of the oppression deaf people have faced in the Hearing world. In a two plus hour interview, Eunji, a 26-year-old Hearing Korean immigrant, shared several of her negative experiences at Gallaudet and the overt exclusionary practices she felt victim to because of her audiology. Yet, after providing great detail and expressing angst about her position, she concluded the interview by telling me that she appreciated the oppression she faced at Gallaudet because it helped her better understand the experience deaf people have encountered in her Hearing world, something she considered to be a valuable learning experience.

Oh, I love Gallaudet...I'm learning so much from this school. And this should be—I should learn how the deaf people felt when they faced [discrimination] at a hearing school... And this is just [a] perfect experience that I have. I'm more thinking [of my experience with discrimination] as a positive. I'm upset...but same time I'm accepting it because this is the only place I could learn. I mean, I had some race discrimination... I've already had that experience. But I didn't know about the disability. Because they don't label me as a disability [in the Hearing world], but I'm labeling myself in here as a disability because I'm hearing.

Hard of Hearing and deaf students also validated their position on the periphery of the community. In an interview with Darrell, a 24-year-old self-identified Hard of Hearing New Signer, I asked him to speak directly about the institutional structures like Kappa Gamma that separated students who were “Deaf enough” from those who were not: “*Should groups like Kappa Gamma be allowed to exist? The ones that establish a hierarchy where Deaf of Deaf is superior to everyone else?*” He responded, “*...I think...yes, because it is a mainly Deaf school, [these groups exist] to show that it's a Deaf World.*” I was surprised that so many students chose to support, rather than bond together to resist the discrimination they faced in the Bio-Lingual social order. I pressed him on the issue:

Carly: It surprises me...when I ask, "Should something like this continue?" that everyone says, "Yeah. Deaf pride, that's what the school's about." The question then is, so you say that's okay even though that means you will always be "lesser?"

Darrell: For me, I feel that I'm more superior to the degree that I can understand what the Hearing are coming from. I can understand where the Deaf are coming from. I can relate now double. It's easier for me because y'all don't know what each other is trying to say. Really, it feels like I have the upper hand here.”

These students accepted their peripheral status in the Deaf community because they saw themselves as having power “in the middle.” In stark contrast to existing scholarship and historical positions on implants by representatives of the Deaf community (e.g., The National Association of the Deaf), this group of Outsiders Within saw themselves as translators who could

speak to both Deaf and Hearing worlds. David, an 18-year old self-identified Hard of Hearing freshman, affirmed the power of the position of Outsider Within by claiming that Hard of Hearing students and those with cochlear implants are the “foundation” of the Deaf community because they are the ones who enable transactions between the two worlds. However, despite recognizing this power in one-on-one interviews, Outsiders Within did not rally together to assert the value of being a translator or a bridge over the power of the Bio-Lingual core. Again, this begs the question, “why?”

Some Outsiders Within accepted their peripheral status at Gallaudet because they saw few long-term returns on the investment of “becoming Deaf.” Many Outsiders Within talked about plans to return to the Hearing world, often even before graduation. Some Outsiders Within accepted their peripheral status while at Gallaudet because they recognized that in the context of the Hearing World, their status was higher than that of the very students who oppressed them at Gallaudet. Bryant offered a common justification for his acceptance rather than resistance to the community norms, “*We’re on their home turf.*” Bryant and other Outsiders Within did not fight for inclusion through assimilation by strictly adhering to all community norms in an effort to pass as Deaf; nor did they actively resist. Instead, Bryant and other Outsiders Within conceded their peripheral status for the time in which they are at Gallaudet, and publicly abided by the rules of the Deaf community, even though doing so relegated them to the periphery of the social order. Bryant understood his peripheral position at Gallaudet relative to his greater social status over the Bio-Lingual elite members when in the Hearing world. Therefore, his concession to follow the rules “on their turf” was a devaluation of the Deaf social hierarchy because he knew he and his peers would soon return to “his turf”—the Hearing world after graduation, where he as a verbal, hard of hearing, man would outrank members of the Bio-Lingual Deaf core.

Conclusion

There are three distinct types of responses to the discovery of one's social position on the periphery of Gallaudet's Deaf community: 1) assimilation, 2) everyday acts of resistance, and 3) the acceptance of the position of Outsider Within as a powerful status. Existing literatures on symbolic boundaries have focused on acts of assimilation and resistance, which I extend with my contribution of acceptance as a third possibility in the typology of responses to symbolic boundaries. Assimilation and resistance are options, but doing neither is not necessarily a desolate space. Students who chose neither to resist nor assimilate knowledgeably accept a permanent peripheral status within the community and attribute with high value to this social position.

Identities and orientations to the social order are temporary and constantly in flux. As such, it is important to recognize that the responses highlighted in this chapter are ideal types. Students' responses vary, and at times students performed all three, though, typically one response became dominant. At the end of my study, students described in each section were peripheral community members, and had responded primarily according to the type they are associated with in this chapter. However, identities and responses continued vary. I was surprised to learn that Camilia too, used her voice in private spaces, being one who during my study had adamantly affirmed the importance of assimilation to voice-off community norms. Owen initially resisted assimilation, before spending the majority of his first year attempting to assimilate; but yet, in his second year, he had left the fraternity and continued to seek out opportunities to transfer back to a Hearing school. Additionally, some students who publicly affirmed the value of their peripheral status, like Darrell, did not return for their second years. It is also important to acknowledge that Gallaudet is a placeholder for community, but is not the

end all be all of the definition of the Deaf community or the basis of identity. Darrell continued to accept his peripheral status in the community as a participant outside the gates of the university. Because identity boundaries are constantly in flux, no community member can ever settle into a static identity, securely included, excluded, or stationed as an Outsider Within. Identities, social statuses, and responses challenging positions of power will likely continue to resemble a swaying pendulum throughout these students lives, swaying perhaps even more quickly during the first several years after entry to the Deaf community.

CHAPTER IV

ACCOMMODATING USERS AND ADMONISHING TREATMENTS: COCHLEAR IMPLANTS AND THE BIO-LINGUAL SOCIAL ORDER

While some Outsiders Within had identities that were constantly in flux, oscillating rapidly in their first few years after their introduction to the Gallaudet Deaf community, many students with cochlear implants asserted that they firmly occupied a space in both Deaf and Hearing worlds. Cochlear implant users who continued to wear their devices operated, according to their fluency, within the Bilingual or New Signer peripheries of Gallaudet's social order. Community responses to cochlear implants and its users reinforced the centrality of the Bio-Lingual social order in structuring social life at Gallaudet, and limits to one's ability to self-identify as Deaf. That is, cochlear implants were understood within the context of the debates about the relationship between embodiment and culture. The technology challenged the clearly defined Bio-Lingual identity of core community members.

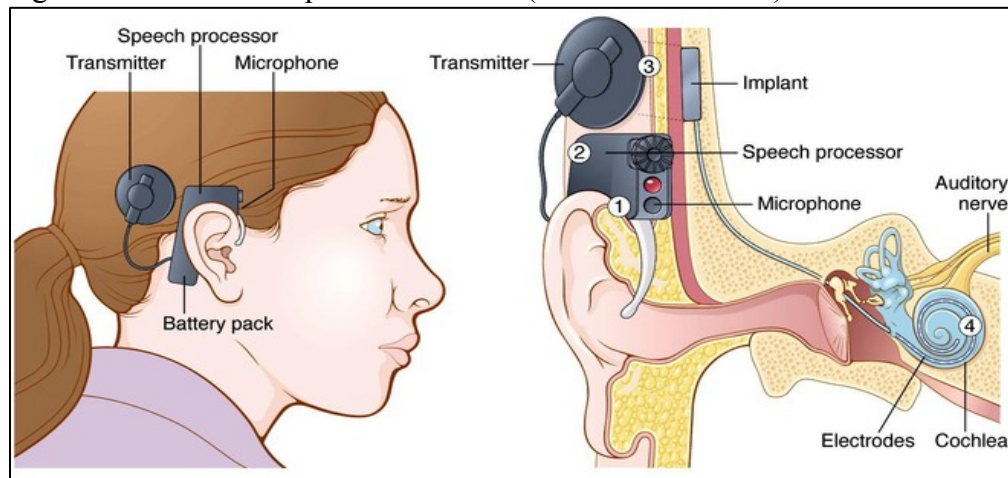
In this chapter, I demonstrate how the cochlear implant and the challenges it presented to the conception of Bio-Lingual Deafness were managed from within Gallaudet's Deaf community. I begin with a description and brief history of the cochlear implant technology. Next, I provide historical background on the Deaf community's changing responses to cochlear implants over time by highlighting changes in the National Association of the Deaf's (NAD) position statement on pediatric implantation. I then move to an investigation of cochlear implant users to explain how they understood their own identities and what impact the device has on the expression of these identities. In profiling several implant users at Gallaudet, I demonstrate the ways in which cochlear implant user experiences were shaped by their educational, cultural, and linguistic backgrounds. I then move to a discussion of contemporary responses to the cochlear implants

and its users. I provide an analysis of the rhetorical strategies used by students (both users and non-users) to position the device either as a corrective treatment or tool for navigating social spaces within both the Deaf and Hearing worlds. I demonstrate how this contrast reveals deeper meanings connected to embodiment, medical intervention, and the belief in the “natural.” I demonstrate how these rhetorical strategies are instances of boundary-work enacted to protect the community’s Bio-Lingual social order. I conclude the chapter with an analysis of the comparisons drawn between hearing aids and cochlear implants to emphasize the critical importance biology plays in the construction of a Bio-Lingual Deaf identity.

The Cochlear Implant Technology

The cochlear implant is, to put it in crude terms, a bionic ear device. A small receiver is surgically implanted into a person’s skull through a hole drilled in the bone behind the ear. Several electrodes are connected to this implanted receiver, which are threaded into the cochlea—the snail shaped organ of the inner ear. One month after surgery, the implant site is healed and the person is fitted with an ear-level microphone and transmitting coil, which are attached to a speech processor—a mini computer—by a cord on the outside of the person’s head. (See figure 10.) The microphone picks up sounds from the external environment and relays those sounds to the speech processor, which then sends signals to the transmitter located behind the ear. The transmitter then sends a signal to the internal implant, which stimulates the auditory nerve via electrodes to send a signal to the brain. The brain then interprets the signals as sound (Moore and Levitan 2003:260). During this surgery, residual hearing in the implanted ear is destroyed, rendering the user completely deaf when the external device is not worn.

Figure 10: Cochlear Implant Illustration (Chabner 2013:725)



André Djourno and Charles Eyriès developed the first internal device designed to electronically stimulate the auditory nerve in 1957 in Paris. Rapid progress of cochlear implant technologies began in the 1980s and 90s. In 1985 the Food and Drug Administration (FDA) authorized the commercial distribution of cochlear implants in the United States for deaf adults. By 1988, approximately 3,000 people had received implants (Wilson and Dorman 2008). In June 1990, five years after implants were approved for adults, the FDA approved the marketing of the cochlear implant for children aged two through 17. By 1995, approximately 12,000 people had received implants. In 2000, approval was extended to children as early as 12 months old. By May 2008, the number of people worldwide with implants had increased to over 120,000 (Wilson and Dorman 2008). In December 2012 the FDA estimated that the number of implantees had grown to over 324,200 people worldwide. In 2014, the United States, approximately 58,000 adults and 38,000 children were reported to have received cochlear implants (National Institute on Deafness and Other Communication Disorders 2014).²⁸

²⁸ Reliable estimates of the number of deaf and hard of hearing people in the nation do not exist to allow for an estimated proportion of implants per deaf person in the US. The US Census Bureau generated model-based estimates from the 2012 American Community Survey in which they estimated that there are 4,022,334 people with “hearing difficulties” between the ages of 18-64. The Gallaudet Research Institute has generated its own data based

The cochlear implant does not restore hearing. The most successful cochlear implant users test at levels of 80% word recognition, meaning that they miss, at best, 20% of speech sounds in a controlled environment (American Speech-Language Hearing Association Working Group on Cochlear Implants 2003). It is important to again emphasize that these estimations represent the sound recognition of the most successful implantees, meaning that most users receive less benefit from their devices. Users and physicians have likened the sound of the device to a “robotic” noise devoid of dynamic complexity. The cochlear implant is, medically speaking, not a “cure” for hearing loss.

Early support for cochlear implants came primarily from doctors, audiologists, educators and others oriented towards oralism.²⁹ They advocated for cochlear implants on medical, social, and moral grounds. Medically speaking, the cochlear implant was believed to allow deaf people to hear a wider range of sounds than possible with a hearing aid, even though the implant surgery requires the destruction of all residual hearing effectively making the implantee completely deaf in the implanted ear when the external processor is not worn. Despite this loss of “natural” sound it is argued that after being fitted with a cochlear implant, deaf people could develop clearer, more normal speech patterns than possible with or without alternative assistive devices (e.g., hearing aids, FM systems, lip-reading, etc.). On social grounds, proponents of the implant assumed that integration and assimilation of deaf people with hearing peers—which was deemed desirable—could only be successfully achieved through implantation. Further, it was suggested

on 1997-2003 Census Data and estimates that 1.81% of the population ages 6-18 (or 691,883 children) “have hearing problems” ranging from profound deafness to slight difficulties talking on the phone (<http://libguides.gallaudet.edu/content.php?pid=119476&sid=1029190>). Due to the fact that no reliable estimates of the prevalence of deafness and other hearing related issues exist, it is hard to tell exactly what proportion of deaf people in the US have received a cochlear implant. But based on the estimates it suffices to say that the proportions are small, despite the media and activist attention to the issue.

²⁹ As explained in Chapter One, oralism is the medical and educational ideology that encourages deaf people to communicate through oral speech and lip-reading as opposed to sign language.

that implanted students would have enhanced abilities to communicate in mainstream classroom environments, thereby reducing the supposed effects of isolation in residential schools for the deaf. Finally, proponents of the implant took a moral position stating that a child should not be denied the “wonder of sound.” These medical, social, and moral positions articulated by early proponents of the cochlear implant were made from a Hearing perspective. The Deaf community views the world from “a different center,” one in which hearing sound is not privileged (Padden and Humphries 2006). Critiques of the cochlear implant must first be understood as coming from a different perspective, one in which the deaf child is cherished and preserving the language of the Deaf is a primary aim (Bauman 2005).

Hostility from the Deaf Community

While medical and educational practitioners celebrated the momentous achievements of bringing sound to the deaf child, representatives of the Deaf community publicly disparaged the use of cochlear implants in children. The Deaf community rallied against the implant as a symbol of oppression of the deaf child. In 1991, following the FDA’s approval of the implant for children, the National Association of the Deaf (NAD), an education and advocacy organization committed to promotion, protection, and preservation of the rights and quality of life of deaf and hard of hearing individuals, released a highly critical position statement on pediatric cochlear implantation. The statement was collectively authored by the NAD’s Task Force on Cochlear Implants in Children, chaired by Harlan Lane, a widely known Hearing advocate of the Deaf.³⁰ The paper opens, “The NAD deplors the decision of the Food and Drug Administration which was unsound scientifically, procedurally, and ethically” (National Association of the Deaf 1991). The NAD claimed that the cochlear implant was still in its

³⁰ Additional members of the Task force included: Dr. Barbara Brauer, Dr. Larry Fleischer, Joyce Groode, Nathie Marbury, and Michael Schwartz, Esq.

“experimental” stages, and expressed great concern that evaluation of long-term risks had not been conducted. This concern was followed with doubt that the cochlear implant was effective in helping users acquire speech.

The NAD position paper heavily critiqued the process by which the FDA came to approve cochlear implants for children. Specifically, the FDA consulted with medical practitioners, speech and hearing scientists, cochlear implant manufactures, parents, and members of the FDA in making this decision, but failed to include representatives of the Deaf community. The NAD argued that this exclusion was a major procedural oversight.

The NAD also critiqued the lack of attention to the social implications of implantation of a deaf child. They argued that cochlear implants “will delay the parents' and the child's acceptance of the child's deafness and their acquisition of sign communication.” The NAD asserted that the costs of such a delay were unknown, implying that these costs would be great. These assertions highlight the importance of a Bio-Lingual Deaf identity and its implications for social status in the Deaf community. They acknowledge that while an implant cannot make a deaf child hearing—that is, the cochlear implant merely acts as an assistive device to *approximate* the experience of sound for its users—the results of implantation would greatly impact the child’s ability to adopt ASL as a primary language and her associated Deaf identity.

Finally, the NAD presented an ethical argument against implants in children stating that because the surgery is not lifesaving, it is unnecessarily performed without the consent of the deaf patient. They assumed that deaf adults would “overwhelmingly decline” the elective surgery; thus, arguing that allowing parents to consent on behalf of their children was ethically reprehensible. The authors referenced then-recent social scientific research that labeled the Deaf community as a linguistic and cultural minority, and argued that to “change a child biologically

so he or she will belong to the majority rather than the minority” is unethical, “even if we believe that this biological engineering might reduce the burdens the child will bear as a member of a minority.” Again, these arguments reflect the privileged status of the Bio-Lingual Deaf core who assert the notion of “Deaf Gain” over “hearing loss.” The NAD’s position statement encouraged a vision of Deafness that ascribes great value to both audiological and linguistic orientations to the world (Bauman and Murray 2014).

The 1991 NAD statement addressed concerns strictly regarding pediatric implantation, taking no stance on deaf adults’ right to consent to the procedure. However, the media picked up the controversy and positioned the Deaf community as extremist anti-technology radicals (Christiansen and Leigh 2002). Popular media portrayals of the Deaf community’s response to cochlear implants often highlighted outrage and protests against cochlear implants and their users. The Academy Award Nominee for Best Documentary Feature, *Sound and Fury* (Aronson 2000) is one such account. The film follows the story of a pair of brothers—one Deaf, and one hearing—in the midst of debating the decision to implant each of their deaf children. Heather, the 5-year-old daughter of the Deaf brother, asks her Deaf parents for a cochlear implant to help her better communicate with her hearing family and peers. At the same time, the hearing brother and his wife discover that one of their infant twins, Peter, is profoundly deaf. The hearing parents quickly begin to seek options for implants for their son. The film documents several heated arguments between hearing and Deaf family members about the cochlear implant and its value for each of the children. Hearing family members accuse the Deaf parents of “*abusing*” his child by denying her the surgery. Meanwhile, Deaf family and community members passionately criticize the hearing parents who decide to move forward with the implant for their baby. The Deaf opponents of the cochlear implant in the film argue that the implant threatens to

destroy their language and culture. The film ends with the Deaf parents choosing not to allow their daughter to get the implant she wanted, and moving from their hometown to live in a like-minded Deaf community. The hearing parents do, however, move forward with implanting their 11-month old deaf son.

Simmering Hostility

Not long after the release of *Sound and Fury*, public hostility towards the implant and its users waned from a boil to a simmer. In fact, six years after the film's release producers returned to the family to discover that Heather, now 12, her two younger Deaf brothers, and her mother had all undergone the cochlear implant surgery.

In 2000, the NAD released a revised position paper on the cochlear implant prepared by the NAD Cochlear Implant Committee. The name change from the "NAD Task Force" to the "NAD Cochlear Implant Committee" was reflective of the shift the organization made towards a more neutral position on the technology.³¹ The 2000 paper states, "Cochlear implants are not appropriate for all deaf and hard of hearing children and adults. Cochlear implantation is a technology that represents a tool to be used in some forms of communication, and not a cure for deafness" (National Association of the Deaf 2000). This statement highlights a standing critique of the medical model of deafness as impairment in need of a treatment or cure. The NAD offers the language of a "tool" supporting a Bio-Lingual vision of Deafness, one that is as much social as it is audiological.

³¹ Names of this committee were not publicly released. Additionally, the NAD does not publicize the politics of its committee selection processes. However, based on personal communication with a sociologist asked to participate in the upcoming revisions of this statement, I suspect that committee members are hand-selected by NAD officials.

In its updated statement, the NAD retracted the language “deploring” cochlear implants, replacing this sentiment with one that concedes the right of parents to make medical decisions on behalf of their children. The 2000 NAD statement continued,

The NAD recognizes the rights of parents to make informed choices for their deaf and hard of hearing children, respects their choice to use cochlear implants and all other assistive devices, and strongly supports the development of the whole child and of language and literacy. Parents have the right to know about and understand the various options available, including all factors that might impact development.

This shift towards deference to parental authority in decision making is aligned with parents’, particularly mothers’, assertion that they are uniquely qualified to advocate for their children’s health needs, at times even superseding the authority of medical professionals (Kaufman 2010; Reich 2014; Silverman 2011).

Tensions and outright protest against the technology and its users have declined from a boil to a simmer when the NAD released its revised statement, but tensions are far from extinct today. Medical practitioners continue to promote the cochlear implant as a “cure” for the impairment of deafness and promote oralism, even to the point of actively discouraging implanted children from learning sign language. Gerard O’Donoghue’s (2013a) recent article “Cochlear Implants — Science, Serendipity, and Success” published in the *New England Journal of Medicine* praises the inventors of the cochlear implant. He states, “They [scientists working on the cochlear implant] have brought sound where there was silence and hope where despair prevailed” (O’Donoghue 2013a:1193). The Deaf community continues to fight against these claims, which perpetuate a medical model view of deafness, though their retorts are rarely treated with consideration. Deaf community members (two hearing and one deaf scholar) responded to O’Donoghue’s article in a letter to the *New England Journal of Medicine*, in which they asserted the value of a bilingual and bicultural approach for the rearing of implanted deaf children

(Huang, Leigh, and Rush³² 2013). In his response, the author dismissed their claims and formally discredited the value visual language for implanted users. O'Donoghue stated,

The plea for a bilingual approach is wholly impractical... The suggestion that the use of vision is as effective as hearing in obtaining access to the world is simply untenable — nature has provided both senses to offer complementary sensory inputs about our world, and to argue the supremacy of one sense over the other seems superfluous (O'Donoghue 2013b).

My personal experience with medical professionals confirms this Hearing-centered approach to implantation. During an office visit with my own otolaryngologist, a team-member at a leading cochlear implant center, he asked me to explain my dissertation research. In response, he dismissed the community's resistance as "*ignorant.*" He asserted that an implanted person could decide to learn to sign and enter the Deaf community later if life if they felt isolated in the Hearing world, but that denying an implant to a child was "*senseless.*" However, as the New Signers profiled in Chapter Three discovered, the choice to enter the Deaf community later is life is not as seamless as doctors suggest. Physicians' position on the cochlear implant highlights the dismissal of alternative visions of "normalcy" as understood by the visually oriented Deaf world.

The debate over cochlear implants is a debate over the boundaries between the Deaf and Hearing worlds and their accompanying worldviews. Supporters of cochlear implants fall into one of two camps. First, those who view hearing as prized and uncritically assert its necessity for a fulfilling life advocate for the assimilation of deaf people into a Hearing world through technological and linguistic "treatments" to "cure" deafness. A second group of proponents of the implant have a bilingual and bicultural vision for deaf children with cochlear implants. These supporters advocate a flexible boundary that would allow people to move back and forth

³² Lauri Rush is my aunt who works as the director of the Mental Health Center at Gallaudet.

between the Deaf and Hearing worlds. On the other side, opponents of pediatric cochlear implants advocate for a firm boundary between Deaf and hearing worlds, opposing the forced integration and assimilation of deaf children into the Hearing world on medical, social, and moral grounds, all of which highlight the value of a Bio-Lingual Deaf worldview.

But how do cochlear implant users understand their own Deaf identities? What impact does the technology have on the formation and expression of users' Deaf identities? How does the Deaf community understand itself today, relative to rising numbers of implanted deaf individuals involved in Deaf community life? Some scholars have suggested that recent radical transformation of community demographics in terms of increasing numbers of implanted members and non-signing deaf coming into the Deaf community has created a community more accepting of diversity (Hintermair and Albertini 2005; Leigh 2009). My findings both support and challenge this simplistic optimism by highlighting responses that both incorporate and exclude diverse community members.

Life as a Cochlear Implant User in Gallaudet's Deaf Community

Gallaudet, as a unified institution, has never released a formal position on the technology. Yet, in the years since the FDA's approval of cochlear implants in children, the university has supported two research and education centers on campus—The Cochlear Implant Education Center, and the Hearing & Speech Center—each designed to support the technology and its users.³³ The presence of these centers on campus suggests that the institution is at least financially invested—both as a source for profit and as an investment in research—in supporting the cochlear implant and its users.

³³ Gallaudet receives partial funding for these centers from corporate sponsors, including Sorenson Communications—a telecommunications corporation whose products and services (e.g., video phones, video relay interpreting services, webcams, cell phone apps) target the Deaf community.

The crescent shaped scars from the cochlear implant surgery are noticeable on the sides of many Gallaudet students' heads, which visibly affirms that, despite Gallaudet's financial interests, many users do not wear their implants while on campus, if at all. Some people who have cochlear implants, however, often do wear their external processors while on campus. Students I encountered who did routinely wear their devices both on and off campus viewed their implants as tools that provided them dual membership in the Deaf and Hearing worlds.³⁴

Cochlear Implant User Self-Identity

Rebecca, a 20 year-old self-identified Deaf woman who has bilateral (2) cochlear implants explained her Deaf identity, *“I’m a tomato. With tomatoes people think they’re a vegetable, but really they’re a fruit. That’s like me. People think I’m hearing because my implants help me hear and I speak really well, but really, I’m Deaf. I’m a tomato.”* Rebecca suggested that she is able to pass in the Hearing world with the aid of her implants, but that being Deaf was her true identity. When asked what effects her cochlear implants have on her Deaf identity she firmly asserted that she is a proud Deaf woman whose implants grant her access to the Hearing world, but that she is *“home”* in the Deaf community. Rebecca's biography is important to note in that her bilingual and bicultural educational background granted her access to the Deaf world in ways not granted to New Signers. Rebecca was a fluent signer with a cochlear implant. She was able to cash her linguistic fluency in for access to the Bilingual periphery at Gallaudet.

Extending the importance of audiology in affirming a Bio-Lingual Deaf identity, Jackie, an 18-year-old fluent signer who regularly used oral communication with her family and friends, explained her understanding her own Deaf identity in relation to her singular cochlear implant.

³⁴ It is important to note that I did not interview any cochlear implant users who identified as Hearing. It is unlikely that students with cochlear implants who identify as Hearing would choose to enroll at Gallaudet University, a school especially for deaf and hard of hearing students. Future research ought to explore identity formation among cochlear implant users outside of Gallaudet for a comparison of Hearing, Deaf, and Hard of Hearing identities.

She used her audiological diagnoses with and without the implant to access her Deaf identity, “I’M COMPLETELY DEAF IN MY LEFT EAR AND HARD OF HEARING IN MY RIGHT YEAR. WITHOUT THE COCHLEAR IMPLANT AND MY HEARING AID, I CAN’T HEAR ANYTHING. WITH BOTH DEVICES OFF I CAN’T HEAR. I LABEL MYSELF DEAF. I AM PROUD TO BE DEAF.” Jackie seamlessly blended the value of audiology and her cultural affiliation in proclaiming that she was “PROUD”³⁵ to be Deaf. Jackie used her bodily capital as deaf without the implant to assert her rights to the Deaf community.

User Perceptions of Cochlear Implant Acceptance

If having a cochlear implant does not interfere with a student’s ability to assert a Deaf identity, how do non-users at Gallaudet respond to the technology and its users? Responses to implants ranged from disdain to enthusiastic support for the device, with the majority of responses tending towards aversion to the technology. Liz, an 18-year-old with one cochlear implant who is a fluent signer coming from a bilingual educational background (manual Deaf education program with some oral training) suggested in an interview during the latter half of the spring semester that implants are broadly accepted at Gallaudet, “I THINK EVERYONE IS ACCEPTING OF PEOPLE WITH COCHLEAR IMPLANTS... AT GALLAUDET IT USED TO BE BAD TO BE CONNECTED TO THE HEARING WORLD... BUT NOW THERE ARE HEARING, NEW SIGNERS, HARD OF HEARING STUDENTS ALL TOGETHER.” Liz’s optimism about the access cochlear implant users, as *Outsiders Within*, have to the Deaf community came in stark contrast to the pessimism articulated by New Signers interviewed at the same point in the spring semester during their first year. Liz rarely wore her cochlear implant on campus and typically wore her long hair down, covering the scar left over from her surgery. Her friends included a large group of cochlear

³⁵ Often times the sign PROUD is used to express cultural affiliations to the Deaf community, or, as expressed in English, a “Big D” Deaf identity.

implant users—many of whom I interviewed, all of whom are fluent in both ASL and spoken English. Her biography, especially her fluency in ASL provided Liz access closer to the core of the Bio-Lingual Deaf community in a way that New Signers who came from oral backgrounds do not have.

Liz's optimism, though distinct from the New Signers I profiled in Chapter Three, speaks to broader school policies, especially the creation of the HUG program in the last decade, which granted a select group of Hearing students access to the university. Liz commented later in her interview that the diversity she feels is celebrated on campus also extends to the New Signers, though observations of her interactions with students tells me that she did not often engage with New Signers outside the context of the classroom.

Liz's perception is neither wholly supported nor is it unfounded. Gallaudet students I observed did not uniformly accept cochlear implants or their users. Responses to cochlear implant users tended towards acceptance, provided the condition that the user also signed, which all cochlear implant users I interviewed did fluently. In the section that follows I explore non-users' reactions to the cochlear implant, its users, and the implications of such reactions for cochlear implant users ability to gain acceptance in the Bio-Lingual Deaf community.

Resistance and Rejection: Device vs. User

Resisting the Cochlear Implant Technology

Public displays of resistance against cochlear implants and their users were often hidden from my view. I did not personally witness bullying or the explicit exclusion of cochlear implant users from social or classroom activities, though I was given second-hand accounts of such displays of resistance. In our interviews, non-users were quick to express opposition to the technology and, to a lesser extent, to the users themselves. Students provided various reasons for

rejecting the technology that echoed the sentiments of the 1991 NAD position statement. They also routinely critiqued the medical model vision of cochlear implants as treatments or cures for deafness, such as found in both 1991 and 2000 NAD papers. Non-users gave various rationales for rejecting the technology, ranging from concerns about medical complications and the potential of malfunctioning devices to Owen's, a self-identified hard of hearing New Signer, description of the implant as "torture." Students often asserted that people should be happy with who they are as deaf individuals, affirming the view that hearing loss is intimately connected to a Deaf identity. Claiming to speak on behalf of Deaf people, Courtney, a 20-year-old Hearing student who researched Deaf culture and issues of audism for years prior to coming to Gallaudet, all but recited the 1991 NAD position statement verbatim,

I don't support cochlear implants because you're fixing deaf people, and deaf people don't wanna be fixed and don't need to be fixed because there's nothing wrong with them... Forcing them to be somebody that they're not and be hearing. Forcing them to be a part of the world that they'll never really be a part of and then they really lose an opportunity in the Deaf world.

Courtney's passionate opposition was a critique of the medicalization of deafness. In the above statement she advocated a social model of deafness. She used essentialist language to define deaf people in opposition to the Hearing world. Her critique of technology was stronger than that of self-identified d/Deaf and hard of hearing students in my sample.

This discrepancy again demonstrates the fervor by which members at the farthest periphery policed the boundaries of the Deaf community.

Angelica, an 18-year-old self-identified hard of hearing fluent signer, rejected the possibility of getting an implant for herself, but used far less politicized language to make her claims against the technology:

I REALLY DON'T LIKE THE COCHLEAR IMPLANT BECAUSE IT REQUIRES SURGERY. I KNOW SOME PEOPLE ARE PROUD TO HAVE THE SURGERY AND SHOW OFF THEIR SCAR

WHERE THE EXTERNAL COCHLEAR IMPLANT IS ATTACHED. BUT I DON'T LIKE THAT. IF I HAD AN IMPLANT I WOULDN'T LIKE IT. I WOULD FEEL LIKE I HAD A BUG INSIDE MY HEAD.

Angelica raised concerns about surgery and visibility in her opposition to the device. Earlier NAD position statements (1991, 2000) did not address the issue of visibility, but it was a common concern of community members I observed. The visibility of cochlear implants, namely the fact that the external device and/or scar are hard to hide behind short hair—especially for men's hairstyles—affects the means by which an implanted person can effectively pass in either the Hearing world as a normal hearing person or in the Deaf world as a Bio-Lingual member of the Deaf core. As such, cochlear implants were rejected because they act as material symbols to dually marginalize users in both the Deaf and Hearing worlds.

Several New Signers raised less contentious concerns about the implant. Many rejected the implant partially on the grounds that the device does not approximate enough hearing to justify surgery, and that the device produces a “synthetic” sound.³⁶ In doing so, they argued that the cochlear implant was not an appropriate or effective tool for hearing. The surgical means by which the implant must be placed did not justify the meager, and synthetic, benefits students assume the implant provides. For example, Darrell, a 24-year-old self-identified Hard of

³⁶ Students were often curious about cochlear implant technologies, especially those who had come from mainstream oral backgrounds and had little to no interaction with the Deaf community prior to their arrival. Students regularly had conversations with cochlear implant users about their experiences. Alexia, an 18-year-old self-identified Deaf *and* Hard of Hearing student in the Academic Success program quickly befriended a number of the New Signers during the summer JumpStart program. When a small group of New Signers asked about her cochlear implant experience one evening in the dorms she showed them a children's book she had been given by her surgical team with pictures of her both pre- and post-cochlear implant surgery detailing the procedure and what was to be expected. Surgeons, audiologists, and other practitioners often use adjectives including “robotic,” “synthetic,” “digital,” and “unnatural” to describe differences between what their patients hear and “normal” hearing. Cochlear implant users at Gallaudet commonly used these same descriptors when asked by their peers, despite the fact that many may not have memory of, or even a frame of reference for what “normal” hearing may be like in contrast to what they hear. Though accounts by latened deaf adults with cochlear implants confirm that the technologically produced sound is different from how they remember sound.

Hearing New Signer who was not a candidate³⁷ for the implant, explained his personal aversion to the technology using this language,

Well, first, I wouldn't be able to get 'em one-way or the other because my hearing isn't that bad... I love the quality of the sound of what I already hear now—natural sound—hearing the natural sound... I can't hear it the correct way, but I'm hearing it as close as I can to natural noise and sound and stuff... I don't wanna change that and get a cochlear implant just to have it sound different... Because when you're getting the implant, you get—its more automated sounds you get... Everything's pretty much autotoned. It's not really the sound itself.

Darrell emphasized the value of “natural” sound over the synthetically reproduced sound generated by the implant technology. Also, as a New Signer, raised in the Hearing world with an oral hard of hearing family, Darrell asserted the value of natural, authentic sound in his opposition to the technology.

Knowing that Darrell was a hearing aid user, I pressed him to assess if the quality of sound generated by the implant was the only reason he had for rejecting the device. I asked, “*Say the cochlear implant was able to reproduce sound the way you hear it now, would you consider an implant then?*” To which he replied, “*Yeah. Sure. I wouldn't mind.*” Darrell viewed his hearing aids as amplification devices that did not alter the quality of sound he receives. His responses suggested that he rejects the implant as an assistive device, or tool, due to his perception that it is unnatural in its reproduction of sound. For this reason, he concluded that a cochlear implant would be undesirable. The preference for “natural” sound follows theories of technology and embodiment wherein technology is presumed to “denaturalize” nature (Clarke et al. 2010; Turner 2007). However, in the case of these non-users’ critiques of the cochlear implant, the technology as a whole was not challenged as unnatural. Instead, only the cochlear implant as a

³⁷ There are several different ways to determine a person’s candidacy for a cochlear implant. The first is the type of hearing loss. Second, until recently the cochlear implant was only approved for people with profound hearing loss. Today, the implant is approved for people with diagnoses of mild to moderate losses, though, these patients are warned that the sound produced by the implant will be more digitized than sound amplified by hearing aids.

biotechnology, which requires the technological re-writing of the auditory nerve and brain function, was criticized for its production of “unnatural” sound.

Bryant, a 29-year-old self-identified hard of hearing New Signer who wore hearing aids regularly and was a candidate for a cochlear implant, repeated a similar logic to Darrell’s when explaining his decision not to move forward with the surgery:

They [cochlear implants] don't sound normal. It sounds digital. So I'm never getting a cochlear [implant]... They [people with implants would] rather have synthetic hearing than no hearing. I'd rather have no hearing than synthetic hearing.

As New Signers in the Gallaudet community, it was possible that Darrell and Bryant were unaware of the global controversy surrounding cochlear implants. However, because they were familiar with the limitations of the device in its ability to reproduce “natural” sound and mentioned discussing the implant with peers at Gallaudet, it is unlikely that they were wholly uneducated on the controversy. Instead, it seems likely that Darrel and Bryant, as members of the Hearing world, were well versed in the biomedical approach to hearing loss, which affirmed the value of sound. The two hearing aid users prized the value of “natural,” or pure, sound over the synthetic sound produced by the cochlear implant. For these hearing aid users the quality of sound, amplified in its “natural” state, was valued over the range of sound provided by the “unnatural” surgically implanted device.

Resisting Cochlear Implant Users

Most non-users who resisted the cochlear implant technology made great efforts to distinguish their rejection of the technology from their responses to the user. Statements such as Courtney’s “*I support the person, but not their decision to get an implant*” were commonly volunteered. When making this distinction, participants who were signing constructed their signs slowly, and gave precision to the complete production of the sign so as to make it clear to

me, a non-native signer, that they were making an important distinction. Those using their voices in the interviews spoke slowly and clearly. Both signers and speakers often repeated the distinction throughout the interview.

Extending the discourse of the 1991 NAD paper, which presented the assumption that informed deaf adults would “overwhelmingly decline” the implant, Gallaudet students employed the rhetoric of individual choice to resist implantation. They claimed to support cochlear implant users who consent to the procedure, often making the implicit assumption that implanted peers at Gallaudet did not make this decision on their own. In fact, during an interview with a fellow cochlear implant user, one of my assistant researchers, Rachel, explicitly assumed that Jackie did not make the decision to get an implant herself. Jackie emphatically defended herself against the assumption, attaching critical importance to individual choice,

RACHEL: YOU WERE THREE WHEN YOU GOT YOUR CI, SO OBVIOUSLY YOUR PARENTS DECIDED—

JACKIE: NO, NO, NO!... MY MOM ASKED ME IF I WANTED TO HEAR AND I SAID ‘YES.’ AND SHE ASKED ME IF I WANTED TO HAVE A HEARING AID, AND I SAID, ‘YES.’... AT THAT TIME I HAD A HIGH IQ SO I KNEW WHAT THE OPTIONS WERE... THEN WE MADE AN APPOINTMENT TO SEE AN AUDIOLOGIST WHO FITTED ME FOR HEARING AIDS... WHEN I WAS THREE, I DIDN’T LIKE THE HEARING AIDS ANYMORE, THEY DIDN’T SUIT ME. SO MY MOM ASKED IF I WANTED A COCHLEAR IMPLANT. I DIDN’T KNOW WHAT IT WAS, BUT I WANTED MORE INFORMATION, SO SHE SHOWED ME A VIDEO ABOUT THE IMPLANT. AFTER WATCHING, I DECIDED I WANTED ONE. SO WE WENT AHEAD WHEN THE IMPLANT SURGERY WHEN I WAS THREE YEARS OLD.

By withholding suspicions that a three-year-old might be able to make an informed decision without the persuasion of her parents and doctors, one can see how Jackie’s comment demonstrates familiarity with the negative critique of parents who implant their children without the child’s consent.

In fact, many non-users eased the potential conflict between accepting the implant users but not the technology by vilifying users’ parents for the decision they presumably made on behalf

of their child. Chris, a 25-year-old self-identified hard of hearing New Signer who began to lose his hearing three years prior to our interview, quickly adopted an anti-implant position after arriving on campus. He stated,

[I] don't blame it on the person with the cochlear implant, 'cause nine times out of ten, their parents made that decision for them... People stare at cochlear implants. I do, and questions come to my head: "Why'd you do that? Who did that for you?" I wanna know your story 'cause I wanna hate somebody.

Chris's desire to "hate" somebody was a radical view, not adopted by most students I interviewed. His hatred was an act of boundary-work wherein he wholly embraced the symbolic divide between the preservation of Deaf culture and scientific progress perceived as oppressing the community in hopes to eradicate the impairment and, thus, suppress the culture of the Deaf.

Bao, a self-identified Deaf 19-year-old who came to Gallaudet from a residential school for the Deaf in California, complicated Chris's viewpoint by raising the issues of agency and respect in the decision to implant children,

I FEEL FORCING A CHILD TO HAVE THE SURGERY IS REALLY DISRESPECTFUL. IF THE CHILD IS YOUNG WHEN THEY ARE IMPLANTED, THEY DON'T KNOW WHAT'S HAPPENING. I'D RATHER HAVE THE PARENTS LEARN SIGN LANGUAGE FIRST, AND THEN LATER WHEN THE CHILD GETS OLDER SHE CAN DECIDE FOR HERSELF WHETHER OR NOT TO HAVE AN IMPLANT... I KNOW THAT PEOPLE SAY ITS GOOD TO IMPLANT AS YOUNG AS POSSIBLE, BUT I HAVE TO DISAGREE WITH THAT BECAUSE THE BABY CAN'T DECIDE FOR ITSELF. IT CAN'T TELL YOU IF IT LIKES THE IMPLANT OR NO... I THINK PARENTS SHOULD WAIT UNTIL THEY GROW UP, AROUND 4 OR 5 YEARS OLD, WHEN THE BABY CAN UNDERSTAND THE CONCEPT OF DEAFNESS AND WHAT IT MEANS TO HAVE A COCHLEAR IMPLANT... IF THE CHILD DOESN'T WANT AN IMPLANT, THEN FINE. IF THE CHILD DOES WANT IT THEN, YES, THE PARENTS SHOULD START THE PROCESS OF GETTING THE CHILD AN IMPLANT. BUT I DON'T THINK THE PARENTS SHOULD BE THE ONE TO MAKE THE DECISION TO IMPLANT FOR THEIR CHILD THAT SHOULD BE THE DEAF PERSON'S CHOICE.

Non-users in the Deaf community extended bridges of acceptance to cochlear implant users who were "forced" to undergo the surgery as well as those who made the decision for themselves.

However, in building these bridges for users, non-users simultaneously built walls to dismiss the technology as a poor choice for deaf children, despite medical evidence showing that the earlier

the person receives the implant, the more successful the device (Wilson and Dorman 2008). Non-users asserted the value of deafness for children, implicitly also valuing deafness for adults who are capable of consent. These value assessments fundamentally banished cochlear implant users to the periphery of the Bio-Lingual Deaf community as members who did not hold the same value for auditory deafness as those at the core.

Evidence from Christensen and Leigh's study of a sample of Gallaudet faculty, staff, and students in the early 2000s suggests a growing trend towards acceptance of the technology, and argues that cochlear implants and their users are not "rejected outright" (2002:278). While the self-reported data I collected supports these findings as a continuing trend in 2014, the harassment of cochlear implant users was far from absent in my research. However, unlike the publicly overt rejection, dismissal, and criticism of cochlear implant users in the 1990s, the aggressive resistance of cochlear implant users at Gallaudet occurred in private spaces, outside my own purview. I suspect that this change from overt to covert rejection of users is primarily the result of an increasing prevalence of cochlear implant users on campus, especially deaf adults— faculty and staff— who, since being at Gallaudet, have undergone the surgery. The increased presence of the cochlear implant on campus and university-sponsored infrastructure on campus, such as the Cochlear Implant Education Center and the Hearing & Speech Center, mitigated the rarity of the technology and, thus, the marginalization of cochlear implant users.

However, primary and secondary reports from cochlear implant users who faced overt critique suggest that, despite claims to the contrary as summarized above, the device was not always distinguished from the user. Hearing students, in particular, policed the boundaries of the Deaf community through arguably outdated reactions to cochlear implants. I was also told

several times about discriminating remarks made by a Hearing student towards a cochlear implant who was a New Signer. Bryant recounts:

My friend [Craig]...has a cochlear and he was in my room one night, and I invited a girl over... She's a hearing girl. She's an interpreting major. She grew up all Deaf pride, like, all that stuff. And so she comes to the room and she meets [Craig] for the first time, and they start talking, and she's like, "Oh you have a CI?" And [Craig] was like, "Yeah." And she was like, "Oh, well, I don't think its right that you have a CI...because you're modifying your body... a lot of Deaf people feel like that."

Bryant, a self-proclaimed "southern gentleman," routinely downplayed the callousness of his negative interactions with others when recounting stories to me. I was often told the same story multiple times in various student interviews. Bryant's versions routinely had the most conservative retelling of events, often excluding vicious and/or derogatory comments that he or others had made in favor of more politically correct retellings. My own observation of his public behavior on campus and several comments he made to me, "*off the record*," lead me to put more faith in the versions of the same stories retold by several of his friends. Jake was a close friend of Bryant's who retold the same story of Craig's interaction with the Hearing student, which differed only in the description of the woman's comment. Jake stated, "*She's like, 'You can't accept your identity?'... She, literally, said that. She said, 'You just can't accept your identity?'... She said, 'I think it's gross that you have a cochlear implant.'*" Many hearing students, such as the woman in this story and Courtney, passionately expressed the viewpoints of the 1991 NAD position statement. The extremity of these views may stem from many roots. For example, Hearing students, as the farthest from the top of the Bio-Lingual hierarchy, are potentially the last to know about new trends towards acceptance. In addition, it is possible that Hearing students, as members of the community farthest from the top of the hierarchy, take up the task of defending the Bio-Lingual community values against those perceived as intruders,

even after they become Outsiders Within. That is, the peripheral members were tasked with policing the symbolic boundary between Deaf and Hearing worlds because, as signing Hearing members of the community, they were closest to this boundary. They also, as members at the farthest periphery, must do more boundary-work to continually establish their credibility as valid and valuable members of the community.

The popular press highlights the extremist viewpoints in its coverage on controversies (Schudson 2002). This coverage has reinforced perceptions that the majority of the Deaf community overtly rejects of cochlear implants. Stories entitled “Understanding Deafness: Not Everyone Wants to Be ‘Fixed’” (Ringo 2013), “How Technology Could Threaten Deaf Identity” (deHahn 2014), and the viral blog post “Why You Shouldn’t Share Those Emotional ‘Deaf Person Hears for the First Time’ Videos” (Marcus 2014). The latter post highlights a viral video, which was shared over 59,000 times—1,000 more times than the number of estimated implanted adults in the US in 2012. Cumulatively, these popular media critiques surrounding Deaf issues reinforce the notion that cochlear implants are unwanted by the Deaf community. However, my research and that of others (e.g., Bathard 2014; Christiansen and Leigh 2002, 2004, 2014; Mauldin 2012) suggest that Gallaudet students more commonly express acceptance of cochlear implants than media coverage suggests.

Despite the self-reported growing acceptance of cochlear implant users, but not the technology, Deaf students were also reported to reject individual cochlear implant users. Towards the end of her first year at Gallaudet, 18-year-old Lian, an international New Signer from China who lost her hearing in a bicycle accident at age 15, began the process to get a cochlear implant. While many of her friends and roommates were supportive of the decision, some having implants themselves, other friends were not. One of her roommates, 29 year-old

Cheng, who was also a Chinese student, had expressed great hostility towards cochlear implants. One evening before Lian revealed her interest in getting a cochlear implant, the three of us were discussing the technology over dinner, and Cheng stated that he thought the technology was “AWFUL” and expressed his belief that it will destroy the Deaf community. Months later, when Lian met with her surgeon for the first time, Cheng reportedly told her he would discontinue their friendship if she moved forward with the surgery. Lian progressed with the surgery nonetheless, and at a follow up appointment at John Hopkins Hospital in October 2014 to which I accompanied her, Lian shared that Cheng had, in fact, followed through with his threat, and the two were no longer friends. Lian was disappointed and hurt by the loss of the friendship. She confided that she did not understand his hatred for her or the cochlear implant, especially because he knew that she planned to continue signing and even hoped to one day teach at Gallaudet. Lian stated that most of her friends were supportive, and, though she feared she would lose other friendships, Cheng was the only person who explicitly ended their friendship after she received the implant. At the end of my research, Lian had not shared any additional stories about lost friendships, though she did celebrate new friendships developed as a result of the surgery—mainly, other cochlear implant users on campus.

I was told of another cochlear implant user who started an anonymous blog detailing her process of receiving a second implant.³⁸ When one of her friends told me about her blog, he made explicit his promise to protect the author’s identity. Opponents of cochlear implants at Gallaudet today attributed blame to the parents of deaf children, therefore, it did not surprise me

³⁸ The added benefit of having two cochlear implants (bilateral) is spatial hearing. That is, a second implant allows the user to improve their ability to “target” sound produced by relevant speakers in noisy environments, and locate source of sounds. The human brain utilizes inputs from both ears (or implants) using acoustic cues to differentiate the time and intensity of sounds separately entering the right and left ear/implant in order to identify location. Therefore, a person with a unilateral implant is unable to identify the location of sounds and therefore often struggles to differentiate sounds in noisy environments (e.g., separating extraneous restaurant noise from individual speakers).

that this student was concerned about vicious, albeit potentially covert, resistance to her decision as a Deaf adult to move forward with a second implant. These, and other accounts, detail a darker side of the lives of individuals pursuing cochlear implants not revealed in my interviews. It is likely that outward acceptance of cochlear implants, or at least a neutral outlook, is growing. However, these accounts suggest that closer scrutiny is warranted. It is perhaps the case that instead of the dissipation of resistance to cochlear implants and their users in the community, resistance is simply taking a new, covert form.

Apathetic Responses to the Debate Over Cochlear Implants

Despite the covert and, at times, overt hostility towards the device and its users, I commonly observed students, staff, and faculty wearing their cochlear implants. As Jake, the 18-year-old California native who shifted his identifications from “deaf” to “Hard of Hearing” midway through his first year, described, implants were so commonplace that they did not appear to present as a contested symbol of Deaf identity on campus. Instead, the typical response became, “*That one’s brown. That one’s black [Laughs].*”

The growing presence of the technology on campus and in the daily lives of students made a growing number of non-users apathetic towards the device and its users. Several Deaf students explained their positions of apathy as akin to waving the white flag of surrender in a losing battle against the spread of technology. Camila, a self-identified Deaf student explained what would be her reaction to hypothetically passing a child with a cochlear implant on the street,

I WOULD JUST RESPECT THAT BECAUSE I’M USED TO IT. WHEN I WAS YOUNG, ABOUT 5 OR 6, ONE OF MY CLASSMATES, MY REALLY GOOD FRIEND, HAD SURGERY TO GET AN IMPLANT. WE WERE THAT YOUNG! THAT WAS THE FIRST TIME I HAD SEEN SOMEONE GO THROUGH THE SURGERY TO GET A COCHLEAR IMPLANT...DO I **HATE** THE COCHLEAR IMPLANT SURGERY? YES. BUT I ACCEPT IT. I LIVE WITH IT.

The prevalence, or perceived prevalence, of hostility toward the device and harassment of cochlear implant users in the 1980s and early 90s had faded into a neutral apathy by the time most current Gallaudet undergraduates were born in the mid-1990s. Students at Gallaudet were raised in a post-implant era during which implantation was common, though not widely embraced. Responding to the perceived unstoppable spread of the technology, dialogue in the Deaf community about cochlear implants appeared to be shifting from debates of “if” a child should be implanted to “when.” And while some students, especially Hearing students, held fast to sentiments from the early 90s, the majority of students I interviewed adopted a neutral or apathetic response.

John Christiansen and Irene Leigh (2014) document this shift in their recent survey of the Gallaudet community’s views on cochlear implants in their poignantly titled paper, “Cochlear Implants: From Hostility to Huh?” However, older generations of Deaf community members continued to hold fast to the rhetoric of resistance. At the 2014 Gallaudet all-Alumni Reunion in July 2014, Elias, a Gallaudet alum from the class of 1986, commented on the demographic shift he sees at his alma matter, “CHILDREN WHO WERE IMPLANTED COME TO GALLAUDET AND TAKE THE IMPLANTS OFF TO SIGN. IT'S WONDERFUL AND CHANGES THEIR LIVES FOR THE BETTER!” Elias adopted the assumptions made in the 1991 NAD position paper that Deaf adults would not consent to the cochlear implant procedure and would choose not to use the implant in interactions within the Deaf world, privileging sign language instead.

However, the presence of the technology on campus ran counter to his assumptions, as I observed many cochlear implants during my time in the field. Implant users’ own accounts of their Deaf identity as it related to the technology also ran counter to these assumptions. The cochlear implant users I interviewed pridefully affirmed their Deaf identity, regardless of their

choice to wear the device in Deaf social settings or preferred mode of communication—ASL or spoken English. The generation of students enrolled at Gallaudet today, for the most part, viewed cochlear implants as an individual choice, ethically problematic, but ultimately unavoidable. The perception of cochlear implants as unavoidable can be largely attributed to the fact that 90% of deaf babies are born to hearing parents, many of whom have no experience or knowledge of ASL and the Deaf community. Laura Mauldin's (2012) work on mothers of deaf babies also shows that many times parents do not have a defining moment at which they decide to get a cochlear implant for their child. Instead, Mauldin concludes that parents' decisions regarding cochlear implants comes as a logical step in a process that begins with newborn hearing screenings that are standard procedure in most states, and when "failed," immediately generate a referral to a cochlear implant clinic. Thus, the medicalization of deafness in the US presents a David and Goliath position for opponents of pediatric implantation.

The neutral or apathetic responses of community members to cochlear implants and their users reinforced the dual embodied and cultural nature of the Bio-Lingual understanding of Deafness. Community members enforced linguistic standards of Deafness by conditionally accepting cochlear implant users into the community, according to the users' fluency and practice of ASL. Reinforcing the primacy of language in defining Deafness, students took neutral positions on cochlear implants by claiming bodies were irrelevant to Deaf identity, that culture and language are what defines Deafness. Bao explained, "WHAT'S IMPORTANT IS THAT THEY [COCHLEAR IMPLANT USERS] KNOW ASL BECAUSE ASL IS HOW YOU ARE ABLE TO BE DEAF ON THE INSIDE."

Students deployed biological understandings of deafness with the same fervency. Lydia took a neutral stance on cochlear implants as a matter of personal choice, but insisted that

cochlear implants did not make someone hearing. She states, “OBVIOUSLY PEOPLE WITH IMPLANTS ARE STILL DEAF. THEY’VE ADDED SOME HEARING WITH THE COCHLEAR IMPLANT... BUT YOU CAN’T HAVE A COCHLEAR IMPLANT AND BE HEARING! KNOW YOUR PLACE!” Lydia’s statements mimicked the sentiments of the 2000 NAD position papers that stated, “Deafness is irreversible. Even with the implant and increased sound perception, the child is still deaf. Cochlear implants are not a cure for deafness.”

The 2000 NAD paper also extended the possibility of dual membership in Deaf and Hearing worlds, “Regardless of whether or not a deaf or hard of hearing child receives an implant, the child will function within both the hearing and the deaf communities.” Members of the Gallaudet student body repeated this sentiment of dual, but not competing, identities. Bao stated,

WHAT’S IMPORTANT IS TO KNOW ASL, TO BE ABLE TO SIGN, TO BE ABLE TO COMMUNICATE FULLY IN BOTH THE COCHLEAR/HEARING WORLD AND THE SIGNING WORLDS. IF THE PERSON SIGNS THEN THERE ARE NO PROBLEMS. IF THE PERSON ACCEPTS THEIR MEMBERSHIP IN BOTH THE HEARING AND THE DEAF WORLDS THEN THERE IS NO PROBLEM.

Yet, far from accepted as full members at the Bio-Lingual core of the Deaf community, cochlear implant users were relegated to the periphery of Bilingual or New Signers according to their fluency. New Signers’ perceived, and often experienced, dual membership in the Deaf and Hearing worlds, which they deemed to be responsible for their partial exclusion as complete members of either community. The 2000 NAD paper explained, “Many deaf and hard of hearing people straddle the ‘deaf and hearing worlds’ and function successfully in both.” Liz shared her own understanding of her identity,

LIZ: I’M PART DEAF, THAT’S MY CULTURE TOO, SO I MUST SIGN. THAT’S PART OF ME! ... I AM PART OF DEAF CULTURE TOO I’M NOT 100% HEARING.

CARLY: IF YOU DIDN’T HAVE THE COCHLEAR IMPLANT DO YOU THINK YOU WOULD STILL BE PART OF BOTH WORLDS?

LIZ: IF I DIDN'T HAVE THE CI, I WOULD SAY THAT I WOULD JUST BE IN THE DEAF WORLD. IF I DIDN'T EXPERIENCE WHAT IT WAS LIKE TO HEAR, THEN I WOULD SAY JUST DEAF. BUT SINCE I GOT THE CI, I WOULD SAY BOTH.

Dual membership in both the Hearing and Deaf worlds was granted to cochlear implant users, though users in my study understood themselves not as dual full citizens, but citizens with marginalized status in both worlds. Students who insisted that as long as the cochlear implant user signs they could be members of both Deaf and Hearing worlds cite the fact that when the external processor is not worn the user is *still* biologically deaf. Because cochlear implant users continue to meet requirements for audiological deafness when the external processor is not worn, they were granted access to the community, though only partially because when the device is worn their audiological prerequisite is called into question.

To manage the ambiguities of audiological identity when wearing the implant many cochlear implant users adopted dual Deaf and hard of hearing identities, stating, such as Liz, that they were “hard of hearing” with the implant on and “deaf” without it. “WHEN I HAVE MY COCHLEAR IMPLANT ON, SOMETIMES I SAY I AM HARD OF HEARING BECAUSE I’M JUST BELOW THE HEARING LEVEL, SO I’M REALLY HARD OF HEARING. BUT WITHOUT THE COCHLEAR IMPLANT, I AM PROFOUNDLY DEAF.” I did not encounter a cochlear implant user who identified as “Hearing,” though this seemed to be a common assumption among non-users.

While it was common for Hearing students and faculty to police the boundaries of the Deaf community, often repeating sentiments of resistance, other hearing students tentatively expressed more neutral viewpoints. In these interviews it became clear that the Hearing students who expressed neutral viewpoints would, in a different context outside the university, potentially support the technology. They shared their neutral positions by expressing sympathy for and understanding of both sides of the debate. Several hearing students I interviewed were quick to

react to the popular discourse of blaming ignorant parents for wanting to “fix” the deaf child.

They expressed sympathy for parents’ daunting realization that their child is deaf and expressed an understanding of the parents’ decision to implant children when the technology is presented an option for “repair.” Dawn explained,

The parents who are hearing and they have no clue about the Deaf community. And they go to the doctor, and the doctor’s like, “Oh, you should give them an implant.” I don’t blame them. They don’t know better. Not even saying it’s right or wrong. I don’t feel like I’m the one to judge whether it’s right or wrong. A lot of parents, they don’t know. They just wanna do what’s best for their child. I don’t think people who give their kids implants are horrible people. Then I don’t think people who decide not to are horrible people either.

Cora echoed these sentiments by posing the question, what is parent who is uneducated on issues of deafness, Deaf culture, and sign language supposed to do?

FOR ME, I THINK IT’S A STICKY SITUATION FOR A DEAF CHILD TO BE BORN TO HEARING PARENTS. WHAT ARE YOU REALLY SUPPOSED TO DO? LIKE FOR ME AS EXAMPLE, IF I HAD NEVER BEEN EXPOSED TO THAT INTERPRETER I WOULDN’T HAVE KNOWN AND COULD HAVE GONE OFF IN ANOTHER DIRECTION AND NOT HAVE DONE DEAF STUDIES. IF IN THAT SITUATION I HAD GONE ON AND I MARRIED AND HAD A DEAF BABY I WOULD HAVE BEEN CLUELESS. SO I UNDERSTAND THE IMPORTANCE OF EDUCATING THE HEARING COMMUNITY SO THEY ARE NOT CLUELESS ON ISSUES OF DEAFNESS. THE DEAF COMMUNITY COMPLAINS ALL THE TIME HOW HEARING PEOPLE DON’T KNOW AND DON’T UNDERSTAND THE VALUE OF DEAF CULTURE, BUT IF YOU DON’T TEACH THEM, HOW ARE THEY SUPPOSED TO KNOW? LEADING UP TO THAT POINT I WAS ALSO CLUELESS. I DIDN’T UNDERSTAND, I DIDN’T KNOW WHAT IT MEANT, I DIDN’T KNOW.

Cora and Dawn’s demeanors changed during this portion of their interviews from relaxed storytelling to a deliberate crafting of responses. Each was careful with her word choices and, compared to the rest of her interview, remained uncharacteristically democratic when responding to questions about the cochlear implant. Neither one committed to a polarized position for or against implants or their users. Instead, they carefully selected their words in an attempt to delicately negotiate the tension they experience with the Deaf community and their own Hearing worldviews. Cora used the sign “STICKY” to open her commentary on cochlear implants and

their users, the same sign she used when discussing her discomfort during the telling of her classmate's poem, "STUPID HEARING BITCH." Cora methodically produced her signs to craft a visual representation of divergent paths—one path that led into the Deaf world and one that did not. Stephanie, through her spoken words, was careful to refrain from judgment, ending her statement with acceptance and understanding of both the decision to implant and the decision not to implant. The hearing students reinforced their positions on the periphery of the Bio-Lingual social order by tentatively making statements that ran counter to popularized discourse that rejects the device. Students who aligned closely with sentiments of the 1991 NAD position paper on cochlear implants drew authority from the highly publicized rejection of the technology. They rejected the cochlear implants in a way that they saw as aligned with a majority Deaf consensus. Those who did not hold such values, such as Dawn and Cora, refrained from making sweeping generalizations. In doing so, I suspected they attempted to remain neutral by refraining from bold critiques of either side of the debate. Cora and Dawn both asserted that, as Hearing people, it was not their place to make an evaluative claim. Instead, their tentative discussion of the topic suggested that they reserve authority surrounding these decisions for those higher in the Deaf social order, or for the parents of deaf children.

Unconditional Acceptance of Cochlear Implants and their Users

While some Hearing students were reluctant to make statements in support of cochlear implants, several New Signers, who had audiological access to the community and limited knowledge of cultural norms and the history of implants, freely expressed support for the technology and its users. Stacy, an 18-year-old self-identified Hard of Hearing New Signer, had the most positive response when asked about opinion on pediatric implants.

So cute...So cute...I just think that's adorable... My friend [Alexia]... has this little book—it's so cute—of when she got her cochlear implant. I guess the

hospital made a children's book out of it... It's basically explaining to a kid what happens when you have it [the implant surgery] and when you get the operation done. She looked—oh my gosh, I just want to take her home. She was so cute. She's got the bandage on her head...She looked so cute.

Stacy's perspective of implants, and especially a bandaged child's head as "cute," represents an extreme of acceptance of cochlear implants not commonly seen amongst Gallaudet students. Stacy was the only person to comment on the surgery as a positive aspect of the implant.

Other students accepted implant technology as a tool for accessing dual citizenship in the Deaf and Hearing worlds. Fiona, an 18-year-old self identified Hard of Hearing New Signer, was one such student who viewed the cochlear implant as a valuable tool despite her familiarity with the resistance against the technology and its users. She encouraged users to continue wearing the device as a lifestyle improvement,

I think if the parent already makes the choice for you, and it's helping you out, then for—by all means, have it. Don't turn it off just because you're...at this school and everybody's kinda judging you for having it. [Some students criticize cochlear implant users by saying,] "Oh, you were completely deaf. Now you can hear. Why? Why didn't you just accept yourself?" You do accept yourself! And if you can do something better... A perfect analogy: Let's say you go to the store, and...there's two different products; one's more expensive than the other....It's a little bit more expensive but has a lot more to offer. What are you gonna take? The one that has a lot more to offer! A person with cochlear can still communicate with somebody who's talking... for a job. You have more opportunities.

Fiona described cochlear implants as a choice of diversity, but as a New Signer, it was no surprise that in her analogy places value on hearing, comparing the cochlear implant to a product that has "more to offer." She saw the cochlear implant as a tool that opens opportunities for a deaf person rather than one that limits opportunities in the Deaf world.

Frederick, a New Signer who changed his identification from "hearing impaired" to "hard of hearing" midway through his first year, unpacked this statement arguing that a cochlear implant opens career opportunities for deaf people working in the Hearing world. He said,

When you grow up, if you're going into law school or going to medical— I haven't met a deaf medical student, but probably there's a couple out there—They're gonna [use a cochlear implant] no matter what because they want to have that career... They're gonna have a cochlear implant no matter what people will think. They're gonna do it.

Frederick and Stacy both acknowledged cochlear implants as tools required to access membership in both Deaf and Hearing worlds. After discussing the necessary choice some deaf people must make to increase career opportunities in the Hearing world, he insisted that, when in the presence of other deaf people, cochlear implant users must sign as evidence that they “accept who they really are.”

Students routinely discussed the cochlear implant relative to hearing aids, occasionally presenting them as comparable choices. For example, Molly, a 19-year-old self-identified Hard of Hearing New Signer, explained the device as a tool that would help people experience hearing who could not derive the same benefits from hearing aids.

I think if it's gonna—if they want it and it's gonna benefit them, I think that's great. I think it's a great technology for people that hearing aids don't work [for], but cochlear implants will give them a way to hear if that's what they want to do. If they want to hear it, then I think that's awesome. Everyone should have the opportunity to hear the world, but if they are deaf and they like where they're at, then that's totally fine. People can do whatever they want, but I think it's a cool technology.

Molly raised the issue that hearing aids may not work for all deaf people who should turn to cochlear implants to “have the opportunity to hear the world.” Her opinions are reflective of the hegemonic Hearing worldview.

Students’ repeated comparison of cochlear implants and hearing aids led me to question why students had not used the same discourse of individual choice, fixing deafness, torture, and visibility to resist hearing aids. In the next section I examine the role of embodiment has in the

opposition to implants as it contrast to the widespread acceptance of hearing aids as unproblematic assistive devices for the deaf.

Cochlear Implants, Hearing Aids, and Embodied Deafness

Early Deaf studies approaches to Deaf culture and identity insisted that one's audiology was not a factor weighed in determining one's inclusion or exclusion from the community (Lane 1999; Lane et al. 1996). However, as explained in Chapter Two and Three, social hierarchies at Gallaudet emerged according to an interwoven relationship between audiology and language. In this section, I address the problematic nature of "treatment" for hearing loss by highlighting issues of embodiment that surface in the distinctions community members made between cochlear implants and hearing aids. Both devices serve the same function, in that they are both technological devices used by people with hearing loss to better approximate "normal" hearing levels. However, because the cochlear implant permanently reconfigures the deaf body, especially the brain, it was seen as deeply problematic in contrast to the externally worn hearing aid, which does not require physiological alteration of the deaf body.

Hearing aids do not share a similar contentious history with the cochlear implant. Records of the first hearing aid date back to the 17th Century, almost as far back as the earliest detailed records of the deaf experience. As a consequence, hearing aids, in one form or another have had an established history with the deaf community and were not viewed as a problematic symbol of identity. Carol Padden and Tom Humphries introduced the term "Deaf culture" in 1988 shortly before the widespread adoption of cochlear implants as a treatment for deafness. Activists in the community later constructed the notion of culture in opposition to science, effectively drawing a symbolic boundary between the science of the Hearing world and the culture of the Deaf world.

The differences non-users articulated between the cochlear implant and the hearing aid emphasized that Deaf identity and status within the Deaf community were not merely a matter of cultural discourse, but also implicate the body. In this section, I explain how these differing opinions on technology reinforce the authority of the Bio-Lingual model of Deafness. When the deaf body is manipulated, its ability to conform to Bio-Lingual standards of deafness is challenged. According to critics within the community, the deaf body that uses a hearing aid is qualitatively distinct from the deaf body that has been physiologically altered by the cochlear implant. Community members argued that changing the physiological structure of the brain fundamentally changes the deaf person. Dawn, a 21-year-old Hearing student assumed:

I think a big part of that between that is the hearing aid is just a device. You can put on, take off, and it's not anything that changes anything about your body. It's more just a machine that aids or whatever. As far as having the cochlear implant, you need to get the brain surgery, which does change you.

Chris, a self-identified hard of hearing New Signer and hearing aid user, drew a similar comparison: *“The cochlear implant is invasive. It's implanted inside of you. You can't take it out, and you have to have it surgically put in and surgically removed. A hearing aid is exterior. It's not gonna affect your life.”* Technology was not outright rejected. In fact, external devices were indiscriminately accepted, despite the fact that hearing aids do impact at least some users lives (Harvey 1998).

In addition to the fuzzy delineation of “acceptable” technology, my observations and interview data showed that cochlear implant users were continually stigmatized to varying degrees within the community. Such findings run counter to claims, such as Boa's, that it only matters if you are “Deaf on the inside.” Instead, a person who used their implant was not considered part of the Bio-Lingual elite; rather, they occupied social positions in either the Bilingual or New Signer periphery, according to their ASL fluency and related biography. Dawn

clearly articulated this divide explaining it in relation to the hearing aid, *“I’m not exactly sure exactly what they hear, but [with]... the cochlear implant and the hearing aid, you can hear the same amount, but one is considered Deaf and one is not.”* She continued by explaining that the cochlear implant user is not “deaf” because the technology is a permanent alternation of the body that has been “fixed,” thereby removing the possibility of a Deaf identity, in her eyes. In making these claims, Dawn asserted that those who choose medical treatments to correct impairment are at impassable odds with those who use hearing aids, which are not viewed as a medical treatment aimed at “fixing” deafness. The rationale for this seemingly incompatible line of argumentation is the surgical element and the invasion of the brain. Dawn and several other non-users articulated the distinctions between hearing aids and cochlear implants as fundamentally about the alteration of the way in which the brain processes sound. Using the assumptions of the Bio-Lingual model of deafness, an implanted brain that transmits sound is not understood as a “deaf” body because of its lack of sensory impairment.

Hearing aids have been presented as a favorable alternative to cochlear implants since their approval in the 1990s because they do not fundamentally challenge the meaning of sensory impairment. Courtney flatly stated, *“Everybody has hearing aids. There’s really no issue with it.”* The 1991 NAD position paper argued against cochlear implants in part with the rationale that there was no evidence children with cochlear implants achieved more educational and aural speech development than peers with hearing aids, thus implicitly supporting the hearing aid. The NAD’s 2000 statement again raised hearing aids as a desirable and valuable asset for the deaf person. They warned that because the cochlear implant surgery destroys all residual hearing, “if the deaf or hard of hearing child or adult later prefers to use an external hearing aid, that choice may be removed” (National Association of the Deaf 2000). This emphasis on hearing aids as

preferable tools for deafness continues today, as the NAD advocates for medical and educational research on hearing aids, and lobbies for insurance coverage³⁹ and tax credits for hearing aid users (National Association of the Deaf 2014).

Opponents of cochlear implants often repeated the discourse of accepting one's own deafness and not attempting to "fix" or "cure" one's deafness. Yet, hearing aids, a technology designed to amplify sound for deaf and hard of hearing users in an effort to approximate normal hearing, were viewed as unproblematic, even desirable, for the deaf. Hearing aids were not framed as "cures" to "fix" deafness, rather as a tool to aid communication. The absence of such a cultural framing is what makes hearing aids acceptable in a Bio-Lingual understanding of Deafness. The lack of criticism around hearing aids can be attributed to the importance of the Bio-Lingual deafness, particularly the deaf body.

When pressed on the difference between hearing aids and cochlear implants, students who rejected or were apathetic on the subject of cochlear implants believed the implant to be an unwarranted invasion of the deaf body. As examined below, in comparing the implant to the hearing aid, three main factors were critiqued: the implant's invasiveness, irreversibility, and visibility.

Concerns about altering the brain and rewiring nerves were issues of great concern for students when asked to discuss differences between cochlear implants and hearing aids. Bryant, the self-identified hard of hearing New Signer, wears two hearing aids on a daily basis. He explained the difference he sees between the two devices,

A cochlear [implant] you have to tap into your brain... You're playing with nerves

³⁹ Some level of coverage for cochlear implants and related services (e.g., programming, device mapping, and aural rehabilitation) are provided by most commercial health insurance plans. As mandated by federal law, federal health plans provide benefits for all cochlear implant services for children under 21 years old, and most federal plans also provide cochlear implant benefits for adults.

and you're playing with your brain structure... Whereas...a BHE—a behind the ear—or like inner canal [hearing aid]...you're not tampering with the brain, you're just boosting auditory levels which is, it's not as dangerous... I mean [with the] cochlear [implant] you actually get into the nerves and once your nerve dies you've lost it [the ability to use that nerve for hearing], so I don't want to fool with that.

The invasiveness of the surgery, which requires “*playing with your brain,*” causes great concern for the way community members saw the relationship between one’s body, especially the brain, and their personhood. In Western culture, the brain is understood to be intimately tied to one’s socio-cultural identity and ultimate arbitrator of personhood, thereby explaining why brain death is considered to be an ultimate death despite the persistence of a beating heart (O’Connor and Joffe 2013; Pickersgill, Cunningham-Burley, and Martin 2011). In the Deaf community, Deaf identity is intimately tied to the brain’s ability to process sound. Hearing loss, whether mild or profound, is a source of bodily capital that must be proven to grant access to the Bio-Lingual Deaf core. Cochlear implant surgery rewires the way in which the brain processes sound and, as such, is viewed as fundamental alteration of Bio-Lingual Deaf identity.

For those Deaf community members who resisted cochlear implants, the surgical alteration of the brain is not only a challenge to the bodily capital necessary for Deaf identities, but also reinforces a medical view of deafness as opposed to preferred social or biosocial understandings of deafness. Fears about the invasiveness of brain surgery for an unnecessary, non-life threatening condition causes great concern for community members. Dawn, a hearing student who expressed understanding of both opponents and proponents of cochlear implants, expanded upon the concerns of the invasiveness of the surgery by introducing the issue of irreversibility and critiquing the medicalization of deafness,

[T]he hearing aid you can put in, take off. You can wear a hearing aid for a day and never wear it again. You can do the same with cochlear implant, but it's a major surgery. They have to go into your brain... By doing that, you're in a sense

saying, “There’s something wrong with me. I need surgery. It needs to be fixed.”... [T]he hearing aid is just a device. You can put on, take off, and it’s not anything that changes anything about your body. It’s more just a machine that aids... As far as having the cochlear implant you need to get the brain surgery.

Dawn extended that because the invasive surgery permanently alters the body in a way that the external hearing aid does not, it is a permanent alteration of the deaf body and therefore the Deaf identity. She draws a distinction between “devices” that permanently alter, or fix, the body, and “aids.” The permanence of the procedure as a surgical “fix” is presented as the issue in a way that leaves unquestioned the idea that a hearing aid serves a roughly similar function, approximating normal levels of hearing for deaf users.

Finally, Owen, a self identified Deaf New Signer who wore his own hearing aids with decreasing frequency throughout the year, extended the issue of irreversibility by addressing the visibility of scarring from the cochlear implant surgery in comparing hearing aids to the implant, *“I mean I can take ‘em [my hearing aids] off any time I want. Granted, you can take off a CI, too, but you still had that surgery and so you have that scar.”* In addition to the fact that hearing aids can be removed as desired by the users thereby allowing them to “pass” as a permanently unaltered Bio-Lingual member of the Deaf community, the cochlear implant leaves a lasting visible reminder that their “bio” component of a Bio-Lingual Deaf identity has been compromised.

The issue of visibility raises questions about the role of gender in relation to Deaf identity. As discussed by Owen, the scar can easily be hidden by popular women’s hairstyles, which are often longer and enable the strategic placement of hair to cover both the external processor when worn and the moon-shaped scar over the ear when it is not worn. In fact, all six cochlear implant users I interviewed who routinely wore their implant were women and each of their selected hairstyles extended the opportunity for them to “pass” as Bio-Lingual Deaf community members

when in the Deaf world. Their hairstyles also afforded them the opportunity to “pass,” as Rebecca mentioned “like a tomato” in the Hearing world without suspicion from others.

The distinction between cochlear implants and hearing aids is, at its core, a battle over medical versus biosocial visions of deafness. Cochlear implants were demonized by many as biotechnologies designed by medical practitioners to correct and rewire the brain in an effort to change the deaf person into a Hearing person. Audiologists, surgeons, and cochlear implant manufactures support these assumptions by offering the promise of cochlear implants as a “cure for deafness.” On the other hand, manufactures, physicians, and audiologists do not market hearing aids as cures; they are merely aids, or tools to support oral communication. Because of these distinctions cochlear implants were viewed by Deaf community members as medical treatments for an impairment they do not see as undesirable. Hearing aids allow community members to embrace a Bio-Lingual conception of Deaf identity, one in which tools for communication support are beneficial, but do not require an alteration or denial of the social, cultural, and linguistic relationship to the Deaf community.

Conclusion

The data presented in this chapter complicate the story being told by both the popular media, which insist on the trope of radical widespread resistance against cochlear implant technologies. My findings also challenge emergent research, which presents an overly optimistic view of cochlear implants and their users, finding widespread acceptance within the community. My findings paint a complicated picture, portraying a generation of Gallaudet students struggling to make sense of a diversifying community and learning to accommodate differences they continue to admonish. Non-users’ responses to the technology and its users reinforce a Bio-Lingual model of Deafness and re-establish the hierarchy built around this braided identity. Those with

cochlear implants were accepted by non-users in the Deaf community as Outsiders Within, accommodated because of their ascribed deafness, but expelled from the core of the community because of their use of the device that facilitates their ability to adopt dual, though arguably marginalized, identities as members of both Deaf and Hearing worlds. Cochlear implant users existed in a space on the periphery of the Bio-Lingual social order as neither completely Deaf nor completely Hearing.

CHAPTER V

CONCLUSION: LOCATING “HOME”

In July 2012, I met with a former Gallaudet sociology professor to discuss the research project I had been developing. In our conversation about the group of students I came to identify as “Outsiders Within,” she stated: “*These students are giving up privilege to come home.*” The concept of “home” stuck with me throughout my 15 months of ethnographic research. It was evident, that upon their arrival, many students felt they had found home at Gallaudet. “Deaf like me” was a phrase commonly stated during our first six weeks on campus. But over the course of the year, the concept of home became muddled, as the Bio-Lingual order grew apparent, not just to me, but also to the students I observed. We all began to ask ourselves, whose home is this? Ownership of Gallaudet was granted to a specific subset of the campus community, the Bio-Lingual elite. In discovering this social order, I began to better understand the relationship between biology and culture in structuring social life at Gallaudet.

While every student was welcomed home, some, but not all, students were able to embrace the campus community as distinctly theirs over the course of the year. Some Outsiders Within like Rebecca, a transfer student with two cochlear implants, identified as “Deaf.” She proudly stated she believed Gallaudet to be a place she “*belonged.*” Others, like Jake, would finish their first year feeling homeless, a “*nobody*” in both of worlds they straddled. In this dissertation, I have illustrated the complex process by which individuals negotiate their identities as Outsiders Within, and explained how the communities they straddle negotiate space for the growing presence of Outsiders Within in their midst.

In the remainder of this conclusion, I review each of the arguments presented in the previous four chapters. I then discuss the larger theoretical contributions my research makes to the

sociology of culture, disability, and medical sociology. In doing so, I address directions for future research on comparable cases as a review of the generalizability of my argument. I conclude the chapter with a summary review statement of the arguments presented in this dissertation.

Chapter Summaries

In the preceding chapters, I demonstrated the multitude of ways in which cultural symbols including language, technology, and voice were used to integrate and expel Outsiders Within in the Deaf community. Outsiders Within oscillated between crossing bridges to unite them with their elite Deaf peers, and running into walls within the community that reminded them of their marginal status and limited access to the core of the community. Likewise, elites in the Deaf community oscillated between extending bridges and enforcing walls as they negotiated space in their community for Outsiders Within.

In Chapter One, I introduced the concept of Outsiders Within by drawing on theories symbolic boundaries, cultural conflict, and disability to address the call for empirical research on the relationship between bodies and culture. I established the relevance of the study of Outsiders Within in the Deaf community today by highlighting the biosocial tensions that have come as a result of new technological innovations and oralist ideologies. I also reviewed the shift from medicalized conceptions of deafness, to the dominant social, or ethnic model of Deafness. I then articulated a critique of the ethnic approach to the study of Deafness. I instead presented an argument for studying Deafness as a uniquely biosocial issue, in which embodied and socio-cultural markers of Deafness are intertwined. I established the importance of a biosocial analysis of the Deaf community by establishing the tensions between biological and cultural conceptions of Deaf identity that have arisen as a result of the cochlear implant and oralist ideologies. I

concluded the chapter with a discussion of my methodology and a review of my status as a Hearing researcher who is an Outsider Within in the Deaf community.

In Chapter Two, I explained how biosocial tensions in the Deaf community have coalesced in the production of a Bio-Lingual social hierarchy. Through this model, I expanded upon the biosocial model of disability by highlighting the unique values ascribed to auditory hearing loss and linguistic fluency in the Deaf community. I demonstrated the dual use of the Bio-Lingual model as an explanatory model to describe individual social status and meso-level social structure in the campus community. In doing so, I extended theories of racial authenticity to the Deaf experience. I analyzed symbols of language, voice, and the body as boundary objects used to protect and expand boundaries of the Bio-Lingual Deaf community. I concluded the chapter with a discussion of movement within the Bio-Lingual social order in a brief review of the methods through which some individuals move up the social hierarchy to position themselves closer to the Bio-Lingual social core.

In Chapter Three, I explained how identity conflicts that arise as a result of occupying a space in the residual category between Deaf and Hearing are managed. I analyzed the role of language, voice, and identity labels to explain how Outsiders Within came to discover their position on the social periphery. I followed this analysis with an analysis of the ways in which Outsiders Within assert, deny, or discount their rights to membership in the Bio-Lingual Deaf community.

In Chapter Four, I explained how individuals and community members respond to technological innovations that have made the deaf body malleable. In doing so, I analyzed the role of technology in shaping the identities of students, who, as a result of having cochlear implants, were Outsiders Within the Deaf community. Previous scholarship on the Deaf

community's response to cochlear implants showed that older generations of Deaf community members saw the implant as a bridge into Hearing community, and thus, a rejection of Deafness; implanted individuals were viewed as traitors to their community. Cochlear implant users at Gallaudet today understand themselves to be dually identified with the Deaf and Hearing worlds, and view their implants merely as a tool for accessing the Hearing world. Non-users I interviewed at Gallaudet accommodated the growing numbers of cochlear implant users in their community by finding ways to distinguish the user from the technology. In this chapter, I also reviewed comparisons made between hearing aids and cochlear implants. I demonstrated that the hearing aid, and to a growing extent the cochlear implant and oral training, had come to be understood as "tools" rather than "treatments" or "cures," which opened up the possibility for a growing acceptance of Outsiders Within in Gallaudet's Deaf community.

Throughout this dissertation, I introduced the finding that the most peripheral members of the Deaf community were often the ones to take up responsibility for actively policing community boundaries. That is, hearing community members acted as border guards at the boundaries of the Deaf and Hearing worlds. Existing scholarship on community boundaries demonstrated that "a community's boundaries remain a meaningful point of reference for its members only as long as they are repeatedly tested by people who are on the fringes of the group and repeatedly defended by those within it" (Stein 2001:8). However, in the case of Outsiders Within who blur community boundaries, those who would typically be on the fringes of the community, are, in fact, within it. In the case of the Deaf community, Hearing students, as Outsiders Within, adopt dual roles both testing and defending the boundaries against outsiders. Hearing people are at the farthest periphery of the Deaf community; thus they have the most tenuous relationship to the community, and accordingly have the most at stake. They fervently

police the boundaries of the Deaf community in an attempt to validate their position in the community. Evidence from studies of second and third generation immigrants who often refuse to use their native language in an effort to assimilate supports the generalizability of this finding (Stevens 1992; Veltman 1983). This finding ought to be tested further in other cases of the Outsider Within, to see if those at the farthest periphery of their communities also assume a majority of the responsibility of policing the front lines of the boundary of the communities they straddle.

Theoretical Contributions and Impacts

Sociology of Culture: A Biosocial Approach to the Outsider Within

The primary framing of this dissertation, and thus my largest contribution, is to the study of the relationship between biology and culture. In applying theories of symbolic boundaries I challenged traditional conceptions of biological and cultural boundaries as purely relational artifacts that distinguish “us” from “them.” Existing research on symbolic boundaries has begun to break down the relationship between us vs. them through an evaluation of Outsiders Within. Yet, the focus of this existing research has been on exploring social and cultural differences (e.g., race, ethnicity, language, religion, nationalism, etc.) between insiders, outsiders, and Outsiders Within. My work introduces a biological component to the study of symbolic boundaries and Outsiders Within to move social theory forward to explain how social classification is founded in biosocial distinctions.

Additionally, while previous research has examined the social-psychological impacts of occupying the position of Outsider Within a community, my work explained community-level responses to Outsiders Within. I explained how communities deploy symbolic boundaries simultaneously to enforce conceptions of the authentic biosocial community member, while also

making these boundaries flexible to adopt biological and cultural diversity within their borders. I used the metaphor of bridges and walls to explain how communities negotiate space for Outsiders Within. I found that the bridges and walls function to allow the group to form cohesion around elite, or authentic, community members and expand opportunities for divergent conceptions of the identity to exist at the margins of the community. This process of dual inclusion and marginalization of Outsiders Within is how blurred boundaries begin to shift as those in the residual category between insiders and outsiders come to outnumber “authentic” insiders.

Finally, my research is innovative in the field of the sociology of culture in that I reversed the narrative of the Outsider Within by studying the effects of the Outsider Within from the perspective of a non-dominant group. That is, I analyzed movement between worlds with my primary gaze on the minority group. In so doing, I focused on the ways in which movement between inside and outside fundamentally changes the community’s conceptions of itself and the self-identification of those individuals who find themselves in between.

Disability: The Biosocial Model of Disability

In addition to its contributions to the sociology of culture, my research on the symbolic boundaries in the Deaf community speaks to the literature on disability by introducing an empirical study that uses the often advocated, but rarely employed, biosocial model of disability. Disability studies scholars who critique the social model of disability have articulated a call for the study of disability using a biosocial model, however most work continues to be theoretical, focusing largely on re-articulating the critique of a social model of disability. My dissertation offers an empirical answer to this call for empirical sociological research using the biosocial model of disability. In doing so, I move the literature on the sociology of disability forward to

embrace a new understanding of the socio-cultural implications of impairment.

In presenting an empirical case of the biosocial model of disability, I critiqued the application of the social, or ethnic, model of Deafness dominant in the field of Deaf Studies. In using a biosocial model of Deafness, I provided evidence to prove that Deafness is distinctly Bio-Lingual, pushing research on Deafness beyond the limitations of a purely ethnic discourse as perpetuated by the leading scholars in Deaf Studies.

Future scholarship could draw upon my study of Deafness—a common case used to critique purely social or biological understandings of disability—to extend the analysis of a biosocial model of disabilities to include other impairments. The social model of disability, which discounted the effects of impairments so that all impairment is essentially equal, no longer needs to be contested as invalid. Specific directions of such research might include an analysis of the ways in which different types of impairments, at varying levels, affect social outcomes. That is, one might use the biosocial model of disability to identify ways in which variably ranked impairments (according to either invasiveness, quantity, severity, location, etc.) differently affect social outcomes in education, employment, social interaction, among countless other impacts. My research introduces an empirical baseline for biosocial scholarship investigating how diversity of impairment and socio-cultural markers lead to diversity of the way in which society disables or facilitates social life.

Medical Sociology: Treatment vs. Tool

Extending the advancements of the biosocial model of disability into work on medical sociology, my findings contribute to the intersections of culture and medicine especially as it relates to the study of chronic illness. Critics of the social model of disability (used also within the field of medical sociology) argue that the social model, which negates the physiological

realities of impairment, shames disabled people who seek treatment or cures for their impairments. The findings I present in this dissertation demonstrate that a treatment, when articulated as a tool, effectively reframes the meaning of the intervention so as to allow the disabled person access to treatments for her impairment, and to the social community and/or identity built around her impairment. My research sheds light on the ways in which culture shapes our understanding of medicine, patients, treatments, and cures. As the Deaf community begins to embrace Bio-Lingual conceptions of Deafness as both impairment and a socio-linguistic community, the meaning of “treatment” is reshaped. “Treatment” is a social construction with bases in a particular social context. My analysis of the Deaf community demonstrates the ways in which treatment can open the doors, not for “cures” to maintain distinctions between classifications of “healthy” and “sick,” but for the possibility of simultaneously identifying as healthy and sick.

My findings respond to the literature on chronic illness which explains how patients who are “cured” are often stuck with the feeling that illness maintains a critical part of their identity (Miller 2015). The framing of treatment as cure does damage to the individuals who cross from one category into another. Such a reframing of treatment into the language of a “tool” allows chronically ill people, and Deaf people alike, to seek treatments without giving up the identity with which they feel bonded. My work opens the space for managed ambiguity between category distinctions currently drawn in the literature on medical sociology, particularly in regards to the understanding of “treatment.”

Future research ought to investigate further how the space in between social categories is a privileged by cultural understandings of medical interventions. A reframing of treatments as tools is one rhetorical strategy used within the Deaf community to allow individuals to draw up

different, seemingly conflicting schemas, at various times, according to the social context. Medical sociologists interested in the study of symbolic boundaries ought to investigate the pervasiveness of this rhetorical work outside the case of Deafness used to reframe the meaning of treatment as a tool in instances of chronic illness and disability, as it relates to reinforcing or tearing down symbolic boundaries between “healthy” and “sick.”

Summary Review

Throughout this dissertation, I analyzed the process by which Outsiders Within traversed the social landscape of Gallaudet’s Deaf community. The purpose of this research was to understand the process by which boundaries blurred by ambiguously biosocial members begin to shift as the community begins to incorporate Outsiders Within their boundaries. In this dissertation, I demonstrated how blurred boundaries begin to shift as the community finds ways to accommodate the biological and social diversity they once admonished, without relinquishing the authoritative power of the “authentic” conceptions of in-group identity. In doing so, I have introduced the starting point Chris Shilling’s (1993:106) called for: “Analyzing the body as simultaneously biological and social provides a starting point, and no more than that, for going beyond the limitations of naturalistic and social constructionist views of the body, while retaining some of their insights.” A continued analysis of Outsiders Within in the Deaf community, and other biosocial communities, will allow social theory to advance so as to dispel the notion that biology is the antonym of sociology.

In 1988, Gallaudet students collectively fought for the right to be represented by a deaf peer in the first *Deaf President Now!* protest. Eighteen years later, a fractured student body began to contest what it meant to be “Deaf enough” to represent the university during the second protest. Today, rates of pediatric cochlear implantation and oralism continue to rise, promising to

fundamentally change the biosocial landscape of the Deaf community both at Gallaudet and beyond its borders. In the midst of this continued biosocial and technological change, the university has released a call for its next president. As the university looks to bring its next president home to Gallaudet, students, staff, and faculty will continue to negotiate the shifting boundaries within and around the Deaf community.

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Appendix A

Student Demographic Questionnaire—JumpStart Students

First name: _____

Last initial: _____

1. What is your gender?
 - Female
 - Male
 - Transgender

2. What is your racial or ethnic background? (Check all that apply)
 - African American/Black
 - Hispanic/Latino
 - Native American
 - Pacific Islander
 - Asian
 - White
 - Other (please list): _____

3. Date of Birth: _____

4. Age of onset of hearing loss: _____

5. What is the decibel (db) loss in your **Left Ear**: _____

6. What is the decibel loss (db) loss in your **Right Ear**: _____

7. How would you classify yourself?
 - Deaf
 - Hard of Hearing
 - Hearing
 - Other (please list): _____

8. Do you wear hearing aids?
 - No
 - Yes, Left ear only
 - Yes, Right ear only
 - Yes, both ears

9. Do you have a cochlear implant?

- No
- Yes, Left ear only
- Yes, Right ear only
- Yes, both ears
- Yes, but I do not wear the external processor(s)

10. Are your parents hearing, hard of hearing, or deaf?

Mother:

- Deaf
- Hard of Hearing
- Hearing

Father:

- Deaf
- Hard of Hearing
- Hearing

11. How many siblings do you have? _____

a. Is sibling 1:

- Deaf
- Hard of Hearing
- Hearing

b. Is sibling 2:

- Deaf
- Hard of Hearing
- Hearing

c. Is sibling 3:

- Deaf
- Hard of Hearing
- Hearing

d. Is sibling 4:

- Deaf
- Hard of Hearing
- Hearing

12. How do you usually communicate with your **parents**?

- Oral/ speech and lipreading
- Cued Speech
- Signed English or Signed Exact English (SEE)
- Sign Supported Speech
- Total Communication/Signing with Voice
- American Sign Language
- Other (please list): _____

13. How do you usually communicate with your **siblings**?

- Oral/ speech and lipreading
- Cued Speech
- Signed English or Signed Exact English (SEE)
- Sign Supported Speech
- Total Communication/Signing with Voice
- American Sign Language
- Other (please list): _____

14. How do you usually communicate with your **best friend**?

- Oral/ speech and lipreading
- Cued Speech
- Signed English or Signed Exact English (SEE)
- Sign Supported Speech
- Total Communication/Signing with Voice
- American Sign Language
- Other (please list): _____

15. How did you communicate with others at **school** prior to coming to Gallaudet?

- Oral/ speech and lipreading
- Cued Speech
- Signed English or Signed Exact English (SEE)
- Sign Supported Speech
- Total Communication/Signing with Voice
- American Sign Language
- Other (please list): _____

16. Was your **elementary** school:

- Mainstreamed
- School/program for the deaf

17. Was your **middle** school:

- Mainstreamed
- School/program for the deaf

18. Was your **high school**:

- Mainstreamed
- School/program for the deaf

19. Are you a transfer student?

- Yes
- No

- a. If yes, what was the name of your previous college?

- b. Did you use an interpreter or captioning system at your previous college?
 Yes
 No
20. How do you currently prefer to communicate with others now that you're at Gallaudet?
 Oral/ speech and lipreading
 Cued Speech
 Signed English or Signed Exact English (SEE)
 Sign Supported Speech
 Total Communication/Signing with Voice
 American Sign Language
 Other (please list): _____
21. What JumpStart Program are you enrolled in?
 American Sign Language
 Academic Success

Appendix B

Student Demographic Questionnaire—Hearing Students

First name: _____

Last initial: _____

1. What is your gender?

- Female
- Male
- Transgender

2. What is your racial or ethnic background? (Check all that apply)

- African American/Black
- Hispanic/Latino
- Native American
- Pacific Islander
- Asian
- White
- Other (please list):

3. Date of Birth:

4. What state does your family live in now?

a. Is this where you grew up?

- Yes
- No

i. If no, what state did you grow up in?

5. How would you classify yourself?

- Deaf
- Hard of Hearing
- Hearing
- Other (please list):

6. Are your parents hearing, hard of hearing, or deaf?

Mother:

- Hearing
- Hard of Hearing
- Deaf

Father:

- Hearing
- Hard of Hearing
- Deaf

7. How many siblings do you have?
- Is sibling 1:
 - Hearing
 - Hard of Hearing
 - Deaf
 - Is sibling 2:
 - Hearing
 - Hard of Hearing
 - Deaf
 - Is sibling 3:
 - Hearing
 - Hard of Hearing
 - Deaf
 - Is sibling 4:
 - Hearing
 - Hard of Hearing
 - Deaf
8. What is your primary means of communication with your **parents**?
- Oral/ speech and lipreading
 - Cued Speech
 - Signed English or Signed Exact English
 - Sign Supported Speech
 - Total Communication/Signing with Voice
 - American Sign Language
 - Other (please list):
9. What is your primary means of communication with your **siblings**?
- Oral/ speech and lipreading
 - Cued Speech
 - Signed English or Signed Exact English
 - Sign Supported Speech
 - Total Communication/Signing with Voice
 - American Sign Language
 - Other (please list):
10. What is your primary means of communication with your **best friend**?
- Oral/ speech and lipreading
 - Cued Speech
 - Signed English or Signed Exact English
 - Sign Supported Speech
 - Total Communication/Signing with Voice

- American Sign Language
- Other (please list):

11. What is your current preferred mode of communication

- Oral/ speech and lipreading
- Cued Speech
- Signed English or Signed Exact English
- Sign Supported Speech
- Total Communication/Signing with Voice
- American Sign Language
- Other (please list):

Appendix C

Fall Interview Guide—JumpStart Students

Basic Information

1. I want to start the interview by just getting to know you better. Can you tell me a bit about yourself? (Probes if needed: age, past education, where you grew up, hobbies, interests, activities, etc.)

Gallaudet & JumpStart

2. How did you first learn about Gallaudet? What factors did you consider when deciding to apply to Gallaudet? What factors influenced your decision to attend?
 - a. What were the reactions of friends and family when applying and accepting Gallaudet's offer?
3. (For ASL program participants) How did you expect to address the your lack of fluency in ASL in light of the fact that this would be the primary mode of communication?
 - a. How did these feelings change as the JumpStart program start date drew closer?
 - b. What were your thoughts about language outside of the classroom, like social situations?
 - c. How have things been going in JumpStart so far?
4. (For Academic Success) What were your thoughts about the instruction language at Gallaudet: ASL?
5. How was the JumpStart program?
 - a. Did you enjoy it?
 - b. What would have changed about the program?
6. Did you make a lot of friends in the JumpStart program?
 - a. Would you say that a majority of your friends were in the Academic Success Program or in the ASL program?
7. What was it like for you to interact with students from the other program?
 - a. Did you experience any communication barriers?
 - b. How did you resolve those?
8. What aspect of Gallaudet are you most excited about? Why?
9. What are you least looking forward to, or most concerned about? Why?

Early Childhood, Family, & Friends

10. I see from your questionnaire that you were _____ years/months old at the onset of your hearing loss. Can you tell me about your and/or your parents' reaction to that news if you know the story or if you remember it?
11. I see that you communicate primarily with your family through _____. How long have you used this mode of communication? Is that mode of communication preferable to you? Why? (If different for siblings and/or best friend probe to find which language is most preferable, how they manage in using multiple languages, etc.)

Deaf Identity and Community Boundaries

12. When you first described yourself to me earlier you described your self first by _____, then by _____. Is this the typical way that you might introduce yourself? If not, why do you think you introduced yourself to me this way? What is a more typical way that you introduce yourself?
13. Of all the descriptors you mentioned to me in your first introduction (**LIST**), what would you say is the most important to defining who you are? What is least important to defining who you are? Why is that?
14. On the questionnaire you said that you identified as (Deaf/Hard of Hearing/Hearing/Other). First, what did you think I was asking with that question?
 - a. What does it mean to you to be DEAF/HoH/Hearing/Other?
 - b. Would you say that you have always identified as such?
 - c. Looking at others you know, can you tell me who is **not** (Deaf/Hard of Hearing/Hearing/Other)? How do you know that they aren't?
15. Is deafness a disability?
 - a. **Probe:** why do you think it is? Or is not? What are some examples of cases when deafness is a disability? When it is not?

Technology

16. How long have you worn your hearing aid? AND/OR how old were you when you got your implants? Are you happy with them? Have you always been?
17. What is your view on cochlear implants? What, if anything, makes a cochlear implant different from other assistive technologies like a hearing aid, FM systems, etc.? (If does not have CI): Would you ever consider getting an implant? What factors would you consider when making the decision to get one or not?
18. Have you ever dated someone else with an implant? Would you ever consider dating someone with an implant? Why/why not? How would it be different than dating someone without an implant?
19. In defining yourself as (Deaf/Hard of Hearing/Hearing/Other), how would you say having an implant and/or hearing aid factor into that classification?
20. When you pass a child on the street with a cochlear implant, what are your first reactions? What assumptions do you have about that child and her parents?
 - a. What about if it was an adult? What assumptions do you have about that person?

Wrap Up and General Reflections

21. Those are all the formal questions I have. But I'm curious to know, what did you think this interview would be about? Did I not ask something that you thought would be covered? Is there anything else you would like to share/discuss?
22. Thank you for your thoughts today. I will be around campus all year as my project is designed to follow students through their first year at Gallaudet. Would you be willing to be interviewed again later in the school year as I continue my research?
23. Finally, can you think of anyone else in the JumpStart program you know who might be willing to participate in my study as well? Roommate? Friend? They can be from either the ASL or Academic Success programs. (Hand students my business cards.) Feel free to pass my card along to them and have them get in touch with me.

Appendix D

Spring Interview Guide—JumpStart Students

Opening

1. How was your spring break? What did you do?
 - a. If didn't go to Costa Rica, did you apply? Why/why not?
2. How is your semester going in general? Better/worse than last semester?
 - a. Different than what you expected?

History/Traditions

3. In your classes did you talk about Deaf history? Go to any special places? What were some of those things? What did you take from those experiences?
4. What, if any, meaning do you take from the fact that Gallaudet is celebrating its 150th anniversary? What does it mean to you as a student? Do you think it is important to celebrate?
5. Did you go to any of the 150th anniversary celebration events?
 - a. Which ones?
 - b. General thoughts?
6. Did you participate in Bald Day this year? Why or why not?
 - a. What do you think it means for other people to participate? Do you know anybody who did? Why do you think they did?
 - b. Has anybody made comments to you about your decision to/not to participate? What are those comments?
7. What are some of Gallaudet's traditions or legacy that you think are important?
8. "Culture and Legacy" seems to be a theme of many of the sporting events here on campus. What do you make of that?
9. Have you considered leaving Gallaudet or transferring? Why or why not? Do you plan to stay and graduate?
10. Did you go to Rockfest!? Thoughts?

Language

11. Do you use interpreters in your classes?
 - a. What are your thoughts about them (if using interp or have classmates using)
12. Do you use CART in class?
 - a. Thoughts? (if using CART or if have classmates who use CART)
 - b. Which do you prefer (interp, CART, nothing) and why?
13. What differences do you notice between the classes you have interpreters and the classes you use CART in? Or the classes you have no interp?
14. Has anybody said anything to you about using interp or CART? (teachers, other students?)
15. What would you say you do more of (voice off sign, voice on, sim com)
 - a. In class?
 - b. In the café?
 - c. Around friends?
16. Who do you voice off with?

17. Is there anyone you exclusively use your voice with?
18. Is it important for all Deaf people to learn ASL?
 - a. What about if they were Hard-of-Hearing?
 - b. Should all hearing people learn sign?
19. If a Deaf person chooses not to learn/use ASL what does that say about the person?
 - a. What about a Hard-of-Hearing person?
20. If a Gallaudet student refuses to learn/use ASL on campus what does that say about the person? Should that be allowed?
21. There has been some discussion this year about too much voicing on campus.
 - a. Have you heard about this debate? What do you think? What do you think should be done about it?
22. Do you have a name sign? Who gave it to you? What is that story?
23. What does it mean for someone to be “very ASL”?

Technology

24. Do you use your hearing aids/ CI daily? When are instances that you do not wear it?
25. About 15-20 years ago there was strong opposition against the CI. Have you heard about that?
 - a. They said people with CIs were traitors to the Deaf community. What do you think about that argument?
 - b. What about specifically for implanting children/infants? Is that the parents being traitors?
 - c. What is something that a Deaf person could do today that you would consider being a traitor to the community?
26. Do you think people with CI’s should learn ASL?
27. I haven’t noticed many New Signers with implants. Why do you think there isn’t that population here at Gallaudet?

Bodies

28. Has there been a situation that you felt like you or someone you know has been treated differently because how much they hear? Or how much sign they know? Either by a teacher, coach, classmate, etc.?
29. If someone at Gallaudet were to call/ask you if you were “hearing” what would that mean?
30. What does “DEAF HEARING” mean to you?
 - a. Is this a bad thing to call someone? Why? Have you ever called anyone this? Have you been called this before?
31. If you could take a pill that could change your hearing would you choose to become more or less deaf? Or would you take it at all?
32. There’s been a lot of talk about HoH vs. Deaf... when you say this do you mean actual audiograms, do you mean if they voice or not, or do you mean something else?
33. What does it mean for someone to be “Deaf Deaf”?
34. What does it mean for someone to be “PROFOUND”?
35. Do you know about the Deaf fraternity?
 - a. What do you think about their acceptance criteria?
 - b. Are you apart of that fraternity?
 - c. Would you like to be?

d. Is it prestigious to be part of that fraternity here at GU?

Disability

36. Is being Deaf a disability?

37. Do you collect SSI, SSDI, or VR?

38. How do you feel about collecting (self or others) given your position on deafness as a disability?

Other

39. How would you say you identify today, now after almost a whole year on campus: Deaf, HoH, Hearing, some of both? Other?

40. Greatest joy, regret/disappointment about coming to Gallaudet

Appendix E

Spring Interview Guide—Hearing Students

Basic Information

1. I want to start the interview by just getting to know you better. Can you tell me a bit about yourself?
2. Do you have a sign name? What is it? Who gave it to you? Tell me about the experience of getting the sign name, if you remember.

Gallaudet

1. How did you first learn about Gallaudet? What factors did you consider when deciding to apply to Gallaudet? What factors influenced your decision to attend?
2. What other schools did you apply to or consider? Why Gallaudet over the other schools?
3. What were the reactions of friends and family when applying and accepting Gallaudet's offer?
4. How has Gallaudet been different than what you expected?
5. Anniversary meanings & attendance at events?
6. Deaf president now, Abraham Lincoln, football huddle, Clerc, Edward Minor and Thomas Gallaudet. What do you know about these historical figures and events? How do you know about them?
7. Traditions that are important at Gallaudet?

Language and Technology

8. When did you begin to learn ASL? Why did you decide to learn the language? In what contexts did you use ASL prior to coming to Gallaudet?
9. What is your view on cochlear implants? If a close family member, friend, or child of yours became or was born deaf how would you advise them about implants? What factors would you suggest they consider when making the decision to get one or not?
10. Think of a friend or classmate you know with a cochlear implant. Now think of someone you know who wears hearing aids. What are the differences in your interactions with these two friends? Would you consider them both to be deaf? If so, why? If not, why not?
11. When you pass a child on the street with a cochlear implant, what are your first reactions? With a hearing aid?
12. What about if it was an adult? What assumptions do you have about that person? With a hearing aid?
13. Too much voicing on campus
14. Important for all deaf to learn sign? Hoh? CI?
15. Oral manual debate. Your opinions?

Deaf Identity and Community Boundaries

16. When you first described yourself to me earlier you described your self first by _____, then by _____. Is this the typical way that you might introduce yourself? If not, why do you think you introduced yourself to me this way?

17. Of all the descriptors you mentioned to me in your first introduction, what would you say is the most important to defining who you are? (Race, Hearing Status, Gender, Where you came from, your hobbies, etc.?)
18. For you, what is the distinction between deaf and hard of hearing?
19. What are your thoughts on the debate around deafness as a disability?
20. How does SSI, SSDI, and VR factor into your understandings about deafness as a DA?

Bodies

21. People been treated differently because of how much they hear?
 - a. How much they sign?
22. DEAF HEARING
23. DEAF DEAF
24. PROFOUND
25. Pill to change your hearing status
26. Deaf fraternity and sorority

Wrap Up and General Reflections

27. Greatest regret/disappointment and greatest joy about coming to Gallaudet
28. Finally, can you think of any other hearing undergraduates you know who might be willing to participate in my study as well?