

Deaf and Proud to Use Sign Language

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Lizzie Sorkin was born deaf to deaf parents, but when she reached high school age, her mother asked her whether she would consider the latest medical technology had to offer -- cochlear implants to restore some of her hearing.

Sorkin, now 25, refused and in doing so, set a bold path in establishing her own identity.

"I am deaf first before being a woman, before my faith, my sexual preference, my interests," said Sorkin via e-mail. "I didn't see my deafness as a problem. I didn't need to be fixed."

She is currently a student at the National Technical Institute for the Deaf (NTID) in Rochester, N.Y..

Sorkin's attitude is a strong voice that is emerging in the national deaf community -- deafness is not a disability, but a way of life that does not call for medical intervention, but rather reinforcement and pride.

About 32.5 million Americans are deaf or hard of hearing, and that is all they have in common.

They represent a wide spectrum of ages and stages -- those born profoundly deaf and others who suffered hearing loss as a result of illness or age.

Two to three in 1,000 babies born in the United States have a detectable hearing loss.

About 600,000 to 650,000 of the deaf population are profoundly deaf, according to the National Institute on Deafness and Other Communication Disorders.

Last month, students at Gallaudet University, the nation's premier liberal arts college for the deaf and hard of hearing, toppled President Jane K. Fernandes for an array of grievances -- including the fact that she was not "deaf enough."

Their victory solidified the university's commitment to sign language and set the stage for a more aggressive deaf pride movement.

Many who are deaf are eschewing new medical advances like cochlear implants and sophisticated hearing aids in favor of preserving the traditional bonds they feel with others who communicate by signing.

A small, but growing number of deaf parents are even intentionally using embryonic genetic testing to ensure that their children share their deafness.

"I was born deaf, and I believe that I should just leave it the way it is," said Lisa Velez, a 20-year-old who also attends NTID at Rochester Institute of Technology, the second-largest American university devoted to the deaf.

As other minorities like blacks, women or gays have historically felt the need to find commonality, so have the deaf.

Experts say there are two camps: those who view their world as pathological -- deafness as a disability to be overcome -- and those who revel in the cultural aspects of deafness, using sign language and sharing a set of values.

Sorkin grew up using sign language to communicate with her family.

American Sign Language, now considered a world language and the third most frequently used in the United States, is a nuanced and visual language that encompasses many dialects and grammatical structures.

Although American Sign Language may see some decline in coming years because of improved hearing technologies, it is gaining popularity among parents who want their babies to learn sign and among hearing college students taking ASL for foreign language credit, according to Jamie Berke, a graduate of Gallaudet.

"Deaf people who can hear with hearing aids or cochlear implants may need sign language to help in closing communication gaps," she said.

Sorkin is the first deaf president of the student government at the larger Rochester Institute of Technology, where 1,100 deaf students are mainstreamed among the 15,300 that attend the university.

"I was born with deaf roots, and I wanted to honor that," said Sorkin, who is earning a master's

"I cannot imagine being hearing. Because we are a minority, we come together. To be away from that support system is so hard to endure," she said.

Like Sorkin, only 10 percent of all deaf children are born to families where one or both parents are deaf.

Ninety percent have parents who are not deaf or hard of hearing.

With the advent of screening laws for newborns, parents can now learn early on whether their children are deaf, giving them the opportunity to make early decisions about education, support groups, and learning sign language.

Some choose the medical route.

According to federal data, nearly 22,000 adults and nearly 15,000 children in the United States have received cochlear implants.

The technology behind the implants is completely different from hearing aids, which amplify sounds.

Implants convert sound into electrical impulses that directly stimulate the auditory nerve. The brain, in turn, interprets these signals as sound; implants do not restore normal hearing. Intensive postsurgical therapy is necessary to learn or relearn the sense of hearing.

Angela Earhart, a deaf OB-GYN from Galveston, Texas, who is pregnant with her first child, is keeping an open mind about implants.

She learned to sign and speak at the age of 2.

Although she has not ruled out cochlear implants for herself down the road, for now, she said, "I am comfortable with who I am, and I'm afraid of losing who I am."

Earhart has also thought about what the future holds for the baby she is expecting in May.

If the child is deaf, she will wait to address the question of implants until the child is old enough to participate in the decision-making.

"I don't perceive being deaf in a negative way," she said.

At home, Earhart communicates with her hearing husband by signing and speaking. At work, she relies on her sign-language interpreter.

Meanwhile, half of Earhart's patients are Hispanics who need an English-Spanish interpreter, resulting in four-way communication that she takes in stride.

Christopher Lehfeltd, who was born profoundly deaf to hearing parents, has made a different decision.

He, too, was not diagnosed until he was 2 years old, and his parents got him hearing aids and taught him to read speech. It wasn't until Lehfeltd was in his early 20s that he learned to sign.

Today, at 45, Lehfeltd has a thriving business as a dentist in the deaf-friendly community of Rochester, where an estimated 20,000 to 90,000 of the 1 million residents are deaf or hard of hearing.

"I don't label myself as part of any group," Lehfeltd said. "I regard myself as being bicultural, bilingual with my deafness. Being a challenge or disability that makes life interesting for me."

Two years ago, Lehfeltd decided to undergo cochlear implants, a vast improvement over the two hearing aids he had struggled with all his life.

"It's far better than the itchy ears, ear molds shifting shape all the time causing feedback," he said. "I can hear so much more, especially higher frequencies. I had to learn how to hear, literally for the first time, like a baby, when I got activated."

He believes cochlear implants are "just another tool in the arsenal for better hearing that helps with full inclusion in the mainstream."

But, Lehfeltd said, "No one person speaks for the deaf."

His patient Tom Rickey, who works as a writer at the nearby University of Rochester Medical Center and has been treated by Lehfeltd for 15 years, has only praise for the dental care he has received.

"When I first went to him, I had this fear that he wouldn't know if I was in pain... no matter how

sensitive dentist, and my teeth are much improved, too."

Rochester has become a mecca for deaf professionals like Lehfeltd.

Rickey's Catholic priest is deaf, and the newspaper has a reporter who covers the deaf community.

Six doctors, as well as a veterinarian and two lawyers, are deaf and serve both hearing and nonhearing clients.

Many retailers sign and have Interprettype machines; movie theaters have open-captioned movies.

Much of the reason the city has been a model for integration between the deaf and the hearing is that it is home to the National Technical Institute for the Deaf, which was established by a federal grant in 1965 to provide a need for technical higher education.

With the technology school, there is also a cochlear-implant center, and about 200 of the 1,100 deaf students have the devices.

The institute is a pioneer in the use of video, CD, DVD and Web streaming so those with hearing loss have constant access to communication and information.

With several hundred videophones in dorm rooms, classrooms and offices, faculty, staff and students can see each other and sign directly.

The university also provides C-print, a speech-to-text transcription service, in classrooms so students with hearing loss can read what the professor is saying in real time, as well as 122 full-time interpreters.

NTID director Alan Hurwitz finds himself right in the middle of the debate on deaf culture.

Born profoundly deaf to deaf parents, with one grown child who is hard of hearing and another who is deaf, he has watched the evolution of the deaf culture.

The 64-year-old feels the emotional tug of memories of his all-deaf home, but he also knows that technological advances have helped level the playing field for deaf and hard-of-hearing people.

Deafness is a "nonissue," according to Hurwitz, with computers, Blackberries, instant messaging, videophones, and real-time speech-to-text captioning, allowing deaf people to participate immediately.

"Some of us grow up using sign. Others elect to have cochlear implants," he said. "They are all proud to be deaf."

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