



# A Case Study & Action research





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- Children with disabilities in the Juvenile Justice System (JJS) are at greater risk of:
  - · delay in growth & development and
  - abuse including violence (CEFA, 2016)

This is a form of inequality and discrimination (Bauman, Simser, & Hannan, 2013)

There are no specialized services for D/deaf and Hard of Hearing (d/HH) children in the Kenya Government Department of Children's Services



- Deafness may present unique challenges in the justice system because no accurate, timely account is heard or spoken.
- Kenya Sign Language (KSL) is an official language in Kenya (http://kenyalaw.org/kl/index.php?id=398).
- However, communication barriers still exist in the justice system with ripple effects on freedom of expression and choice for litigants, victims and witnesses with hearing disability.



- A D/deaf child is often marginalized when born into a hearing family and in interaction with other children (Bauman, Simser, & Hannan, 2013).
- Over time, withdrawal may occur and with it, a lethargic reluctance to engage in the most basic of communication.
- Hampered acquisition of language may lead to an inability to self-advocate, self-represent and a resultant increased risk of abuse (Bauman, Simser, & Hannan, 2013).



- Currently, there are inadequate KSL interpreters (KSLIA, 2015); court-rooms are androcentric, patronizing & impatient; and often not child-friendly.
- Deaf persons' access to public services including justice, health and economic empowerment have improved over time with much lobbying. The recent *Programming Code* allows KSL in all news broadcasts of national importance (CAK, 2016). However, much still needs to be done.



There are hardly any JJS workers sensitized on how to deal with various disabilities in their work, except from their personal interest and/or good will.

This study will impact discussions with police, lawyers, judges, and child officers in the juvenile justice system on giving the child with hearing disability the best access to care without discrimination in the legal system.



#### **Definitions**

Deaf: Socio-cultural definition of one(s) who can do everything except hear; member of (capital 'D') <u>Deaf</u> community culture; proud of their cultural identity Sign Language (Bauman, Simser, & Hannan, 2013)

<u>deaf:</u> one with inability to hear; >30 dB hearing loss in the better ear (WHO, 2012)

This paper will use the term 'd/Deaf' to refer to both the above.

Hard of Hearing (HH): Can hear in the better ear, may or may not use hearing aids; may exist as both hearing and Deaf

(Bauman, Simser, & Hannan, 2013)



#### **Definitions**

- Kenya Sign Language (KSL): A visualgestural language that is complete with its own grammar and syntax, which enables Deaf and hearing persons to communicate
- Sign Language interpreter: A professional who relays sign into voice and vice-versa
- **Deaf Relay Interpreter:** A Deaf person who bridges the communication from pre-literate deaf persons' "home signs" into standardized sign language (Mathers, 2009)



## Case Study: Goals

 To explore opportunities available for children with hearing disability in the Kenyan Juvenile Justice System

• To understand challenges experienced by children with deafness in the Kenyan JJS

To suggest short-term and long-term solutions to the identified challenges



## Case Study: Sample

- Two boys: Care & Protection Legal Cases
  - · Approx. '6' year old Hard of Hearing
  - Approx. '8' year old deaf

**Purposively sampled Informants:** 

- Audiology team
- Government Children's home caregivers
- Legal officer
- Private Children's home caregivers
- NGOs for Deaf and for HH children
- Old and young Deaf/HH individuals



#### Method: Observation

- Psychological screening and assessment of the below developmental areas was conducted over 8 play & art therapy sessions, held once weekly:
  - Physical/Activities of Daily Living (ADLs)
  - Language, and speech if necessary
  - Intelligence: Analytical, Creative, Practical
  - Psycho-educational level: Reading, writing
  - Moral/spiritual level: Authority
  - Social level: Peers, leadership of younger ones



#### Method: Observation

- Determined *interactions* between child and environment, peers and authority via access to naturalistic communication processes, such as how did preliterate d/HH children do the following?
  - Story telling
  - Teasing
  - Joking
  - Boasting

- Disagreement
- Persuasion
- Arguing
- Challenging



## Method: In-depth Interviews

- Detailed *opportunities and challenges* faced by caregivers of d/HH children
- Enabled authors create their reflective summary about caregivers' perceptions, such as the fact that deafness is a low-incidence disability (CDC, 2016)
- Triangulated so as to *validate* researchers' observation data, such as on the problems faced by caregivers in communicating discipline expectations (behavior boundaries) to d/HH children



Method: Ethnographic Interview

aspects under postmodern philosophy about power imbalance of Deaf vs. hearing in society (Bauman, Simser, & Hannan, 2013), as narrated by court interpreters' experiences

- Controversies in school choices emerged:
  - sign, oral or total communication training
  - inclusion versus separation into special class
- Personal experiences of old versus young Deaf cohorts provided *chronological* view



- Detailed short-term and long-term suggestions recommended at various levels: individual, systemic and in society
- Revealed the stark reality of disability as intrinsically linked to poverty and poor life outcomes in all areas (Bauman, Simser, & Hannan, 2013) especially in resource-constrained settings of low and middle-income countries
- Readiness for affirmative action was evident, with most caregivers ready but not knowing how to proceed



# Results: Opportunities

- Government rescues and provides for basic immediate needs
  - Outsourced volunteers / professionals are allowed into the JJS with varied input
- NGOs take over for specialized services
  - Well-wishers as adoptive caregivers
  - Missionaries and people of goodwill give access to communication orientation, education and mental health services, among other services



## Results: Challenges

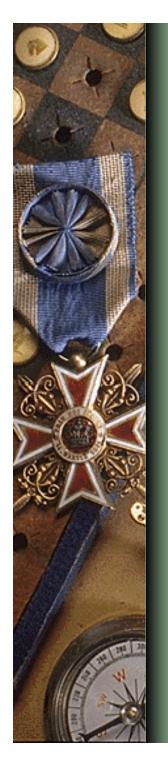
- Lack of communication support
- Low priority resource allocation
- Stigma
- Inadequate representation of relevant stakeholders and dismal informationsharing on best practices
- Inadequate knowledge, often based on personal experience, rather than on best interest determination for Individualized Care Plan (ICP)



## Results: Challenges

Once a deaf child is detained in the juvenile system, there is no special education designed for them in their natural language, KSL.

On a larger scale, there is no up-to-date standardized curriculum for the d/Deaf or HH students in the mainstream or in special education levels from nursery, primary, secondary, bachelors and post-grad programs (Rustin, 2016).



## Results: Suggested solutions

- Need for communication support
- Forensic assessment and treatment, with special needs of d/HH children
- Tracing and reintegration along with psychosocial support for families (Kritzer & Pagliaro, 2013)
- Prevent abuse by stopping the use of 'bubu' and other stigmatizing labels
- Separate Deaf-friendly facilities with trained staff for psychotherapy, special education and other specialized service



## Results: Suggested solutions

- Coordinate faster to prevent delays of placement into Deaf-friendly systems
- Network and collaborate with relevant professionals: interpreters, special teachers, psychologists, speech therapists and religious leaders, among others
- Prioritize resource allocation, including baseline induction and regular refresher/follow-up training of all child workers on disability matters
- Improve societal attitudes



## Analysis

A misconception often made in the hearing world is that you have to speak in order to have a chance of learning language and literacy!

Indeed it has been well documented that d/HH children brought up in a signing environments have language and literacy levels akin to their hearing peers (Cramer-Wolrath, 2011).



## Analysis

Babies can gain control of their hands long before they develop the oral motor skills necessary for speech, so signs allow pre-verbal babies to express their thoughts without the usual frustrations.

Authors acknowledge some caregivers' dilemmas in main communication training choice as sign, oral or total (both hands and voices): Individualized Care Plan is key (CDC, 2016). Bottom line: We all want healthy, functioning children.



## Analysis

- Linda Acredcolo and Susan Goodwyn, PhDs, who researched 20 years on babies' development, co-authored Baby Signs: How to Talk with Your Baby Before Your Baby Can Talk (2002) (blog.cbm.org./tag/deafness), say Sign Language can:
  - help babies talk sooner and boost spoken vocabulary
  - empower babies to direct adults' attention to what they want to talk about
  - reduce frustration
  - provide a strong foundation for early literacy
  - stimulate intellectual development



- 1. Chief's Camp/Well wishers rescue child usually from streets or from abusive, dangerous home situations
- 2. Police Station-Occurrence Book, OB {need for PLOD, such as in the UK}

3. Rescue Centre-Reintegration/Tracing back to family-of-origin using photographs, media, Deaf networks



4. Court appearance: Plea-taking with free advocate {within 24 hours of police custody}, judge gives bond/bail, or committal to remand home

5. Remand home-Intake & Assessments {within 2 weeks}

6. Court appearance: Mention; Media briefing (if needed)



7. Remand home-Counseling, also called Psychotherapy; Special Education initiation; Audiology & full medical tests {reasonable time-6 months? Not legally stipulated=major delays in years}

8. Court appearance: Hearing

9. Remand home-Reintegration/Tracing back to family-of-origin or adoption



10. Court appearance: Ruling {order of committal to legally registered private children's home or family-of-origin}

11. Home & School placement with Sign language and/or speech therapy; Birth certificate & NCPWD registration; Follow-up assessments as needed e.g. Caregiver refresher training



#### Conclusion

- Need for Deaf Relay interpreters and Sign Language interpreters in the JJS (Mathers, 2009)
- Individual Care Plan for each courtinvolved D/deaf child at all stages:
  - Forensic assessment
  - Disability, including Audiology, assessment
  - Psycho-educational assessment
  - Sign language or/and speech therapy
  - Psychotherapy treatment and follow-up
  - Special education (Mueller & Hurtig, 2010), religious, recreational and other relevant activities



#### Conclusion

- Training and Awareness programs for police officers, legal practitioners, court registry staff, judicial officers and corrections officers on:
  - accessibility to justice by Persons With Disabilities (PWDs)
  - Kenya Sign Language and Deaf culture
- Disability mainstreaming for PWDs' rights as defendants or victims, or to fulfil responsibilities as witnesses; Kenya yet to implement Article 12 of the UN CRPD on legal capacity for PWDs (Bauman, Simser & Hannan, 2013).



#### Conclusion

Provide choices in communication — quality services for persons who are Hard of Hearing (HH), such as close captioning and hearing devices (Mueller & Hurtig, 2010).

The world is diverse and the needs of the Deaf community are also diverse.

Need for societal awareness of the plight, rights, interests and desires for children with hearing disability and relevant legislation formulation and implementation (Mitchell & Braham, 2011).



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## Thank You

Q & A?

